

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

Winter 2010

In This Issue:

URMC Department of Family Medicine Ranks in Top Family Medicine Departments for Federally Funded Research in Country page 1

Department of Family Medicine Marks 40th Anniversary With Celebration page 1

"Thoughts from the Chair" by Dr. Tom Campbell page 2

P4 Program Moves Ahead page 2

Greater Rochester Practice-Based Research Network (GR-PBRN) Update page 2

Global Health Program: URMC Medical Student Spends Year With Global Health Program page 3

Photos from 40th Anniversary Celebration page 4

Till Farley, M.D. Remembers His Mother, Linda Farley, M.D. page 5

Susan H. McDaniel, Ph.D., Associate Chair Receives Award page 5

Faculty Accomplishments page 6

Transitions & Welcome page 6 & 7

Meet the New Residents page 7

Family Medicine Manifesto page 8

URMC Department of Family Medicine Ranks in **Top 10** Family Medicine Departments for Federally Funded Research in Country

The University of Rochester Department of Family Medicine ranks in the top 10 family medicine departments in federally funded research. Departmental research focuses on improving communication between patients and health professionals, behavior change and reducing disparities in health and health care. Research programs, led by Ronald Epstein, M.D. and Kevin Fiscella, M.D., are housed in a 5,000 square foot building at 1381 South Avenue in Rochester. "We emphasize a collaborative approach to research, including a variety of disciplines and areas of expertise, including psychology, family systems, epidemiology, qualitative methods, psychometrics, and analysis of large claims databases," says Dr. Epstein.

Dr. Epstein also directs the Rochester Center to Improve Communication in Health Care, founded in 2003 to promote research relating to communication among health professionals, patients and their families, and to address the needs of vulnerable and marginalized populations.

Department of Family Medicine Marks 40th Anniversary With Celebration

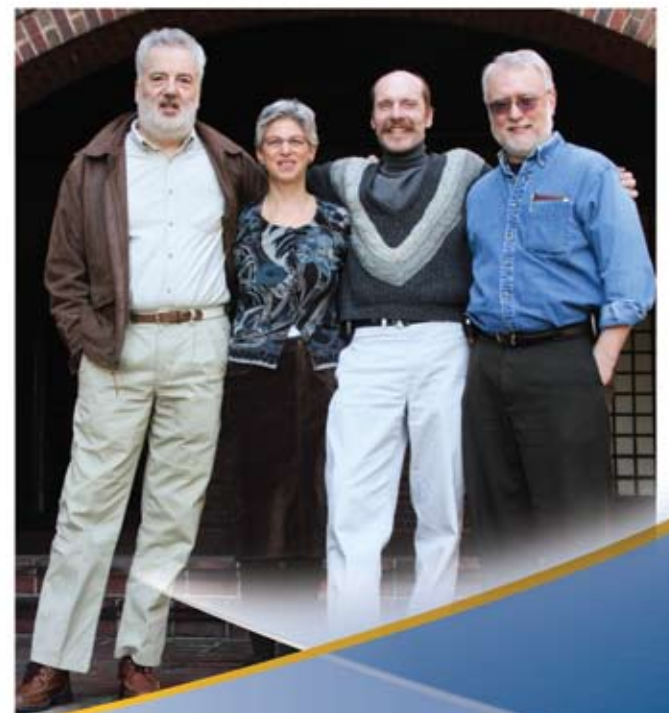
The Department of Family Medicine 40th Anniversary Celebration was a big success thanks to the alumni and special friends who attended the weekend festivities.

Close to 100 alumni attended the Gala dinner where several key individuals were honored for their achievements. Larry Green, M.D. was recognized as Distinguished Alumnus and Larry Culpepper, M.D., M.P.H. and Paul Frame, M.D. were recognized as distinguished faculty.

The Department has had four chairs since its inception in 1968 including: Eugene S. Farley, M.D., 1968-1978; Donald F. Treat, M.D., 187801987 (deceased); John C. Dickinson, M.D., 1988-2002 and Thomas L. Campbell, M.D., 2003 – present.

Although Dr. Farley was unable to attend the functions, he was connected by a web cam process on Friday evening during the reception and then again during the symposium on Saturday where he was one of the speakers and during the award presentations on Saturday evening.

Former and current residency directors Peter Franks, M.D. ('79) Betsy Naumburg, M.D. ('82) Jeff Harp, M.D. ('86), and Steve Schultz, M.D. ('95) gather at 40th Anniversary.





Thoughts
FROM THE CHAIR

The 40th anniversary celebration of the Department of Family Medicine was truly memorable. It was wonderful to see so many familiar faces and to honor the accomplishments of distinguished graduates and faculty of our program. It was a humbling experience to be in the same room with some of the country's top caregivers, physician leaders, and researchers and to realize that we share the common bond of being graduates of the University of Rochester Department of Family Medicine.

Unfortunately, our first chair, Eugene Farley, M.D. was unable to attend our celebration but we were able to see him and interact with him via web cam. Alumni were excited to catch up with one another; tour our current facilities at 777 South Clinton Ave. and the new Brown Square Health Center; hear about our community health and global health programs; and attend discussions about the future of health care and the future of family medicine.

Reunions don't happen every year but we are always happy to hear from alumni and we hope you will continue to share your experiences, honors and achievements with us and visit us whenever you are in Rochester.

Best Wishes,

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



P4 Program Moves Ahead

Preparing Personal Physicians for Practice (P4) is a national demonstration project sponsored by the Association of Family Medicine Residency Directors (AFMRD) and American Board of Family Medicine (ABFM), in collaboration with TransforMED, the American Academy of Family Physicians (AAFP) practice redesign initiative designed to change the way family physicians are trained to practice medicine. The University of Rochester was one of 14 residency programs chosen to participate. The focus of our P4 project is to integrate practice redesign and quality improvement into our residency practice and to develop a teaching Ideal MicroPractice (IMP).

The University of Rochester Preparing Personal Physicians for Practice (P4) Program is completing year two and is establishing new standards as well as looking forward to the next changes of implementation:

The steering committee faculty won third place for a poster, "Improving Training and Practice Quality" presented at the annual meeting of the American Association of Family Physicians Family Medicine Program Directors. The poster described the work being done on social network analysis (SNA) as a method of assessing team functioning in the residency.

Team Collaborative, a monthly meeting of the entire P4 practice (front end staff, nurses, residents, faculty, administration, and behavioral health) has been established to propose, design, pilot, and review quality improvement initiatives through small and large group, team-based discussions. With each quality improvement (QI) project, a broad practice-wide goals is established. Examples of this include initiatives like 100% medication reconciliation at each visit or NCQA Diabetes Center of Excellence qualification.

Several Collaboratives have been committed to medication reconciliation, narcotics and pain management, as well as asthma, which have all been QI projects practice-wide. Depression management will be introduced in coming months.

A Quality Improvement committee meets monthly and, in consultation with the Suite Leaders and practice administration, works toward launching QI projects according to practice priorities and patient needs. It also helps to ensure that

Greater Rochester Practice-Based Research Network (GR-PBRN) Update

The Greater Rochester Practice-Based Research Network (GR-PBRN) was established in 2007 to bring together primary care clinicians and researchers in a collaborative model designed to improve patient care and outcomes. Collective efforts include research initiatives with all populations, where science can translate to better care.

There are currently 75 practices in the network, including 40 pediatric practices, 14 family medicine practices, 17 internal medicine practices, and 4 med/peds practices. Member practices represent more than 200,000 adults (about 30% of Monroe County) and 150,000 children (80% of Monroe County). Member practices can choose to participate or not participate in any project, based on the individual needs and interests of the practice.

For more information contact Karen Gibson, M.S.,Ed., NCC, Network Coordinator, GR-PBRN or visit <http://www.urmc.rochester.edu/ctsi/research/grpbrn.cfm>

attempts at quality improvement are rolled out in small, achievable steps, often beginning with pilot projects and informed by a PDSA-cycle to help frame subsequent revisions. The committee is comprised of faculty physicians, nurse practitioners, and psychosocial faculty, as well as Chief Residents.

Those involved in the P4 Program are looking forward to continuing work on training toward team effectiveness on each suite. A team consultant from Monroe Plan will come to each suite this coming year to offer feedback on suite meetings, leadership and organization, as well as the extent to which each team member is fully engaged in communication, task completion, and problem solving on the teams.

Global Health Program



URMC Medical Student Spends Year With Global Health Program

by Douglas Stockman M.D. Director, Global and Refugee Health and Barbara Gawinski Ph.D., Assistant Director, Global and Refugee Health

The Department of Family Medicine at the University of Rochester continues to operate a year round Global Health Program which offers didactic training throughout the year and travels twice a year for two weeks at a time to rural Honduras. The Department has partnered with an NGO called Shoulder to Shoulder and a rural community called San Jose San Marcos de la Sierra in the Southwestern state of Intibucá, Honduras. The needs of the target community are great and go beyond curative medicine. By listening to the concerns of the local community members and performing qualitative community assessment, we are creating interventions designed to address the common problems. Below are updates for the past 6+ months.

Over the past year, we were very fortunate to have Matt Malek, a URMC medical student, live and volunteer in San Jose. Matt has done a great job and accelerated interventions. For the school's research requirement, Matt created a project to study the use of Potters-for-Peace clay water filters. He also took a leadership role in just about every other project we have going. What follows is an excerpt from part of a story Matt wrote for Rochester Medicine. For the full article, visit www.sanjosepartners.org.

"It's January of 2009 and I'm in San José, Honduras, on my way to pay Sonia an afternoon visit. I'm walking, being that there aren't any roads. And since I'm walking, I must either be going up or going down, because there aren't a lot of flat places in a community with 3,200 vertical feet between the top and the bottom. In this direction, it's been an hour and a half of down, down, and down. My perception of medicine over the last seven months has been no less fraught with ascents and descents.

As I near Sonia's house, the barks of a few scraggly but feisty dogs greet me. Sonia and her four daughters chase the dogs away and invite me to rest in a toddler-size, stick-and-cowhide chair on the outside porch. The cup of highly sugared coffee I am soon offered completes the typical San José hospitality.

Today, however, something is different. The kids are giggling more than they usually would when the



Department of Family Medicine volunteers work closely with residents in the Honduras to help improve health conditions.

"gringo" visits, and all this cordiality has the air of being merely a prelude to the big show. So, with no further ado, I ask the question I know they are dying to answer: "So, have you finished the water project?" With a gleaming face, revealing the magnitude of the accomplishment, Sonia replies, "Yes, yes, just last week. Do you want to see?"

The youngest, Joaquina, darts to a solitary piece of PVC pipe, topped with a bronze valve that stands in the center of the yard. She opens the valve and there it is: water, simple and pure. I can see in her excitement the knowledge that she will never again waste her youth, her calories, and her study hours hauling water. No more two-hour treks, twice a day, weighed down by 30 liters of dirty, not-suitable-for-consumption water. For her, her sisters, and her mother, Sonia, piped water is independence, power, and improved health.

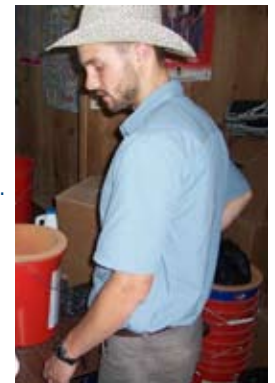
A few days later, I sit in the stick-and-cowhide chair of another friend, Ignacia. We are sharing a similar cup of coffee but a very different water-related experience. Instead of showing off a new water spigot, Ignacia holds a small petri dish in her hands. Unlike Sonia, Ignacia and her daughters still spend hours every day fetching their water from a self-described "spring." The source would be more accurately described as a parasite and- feces-filled hole, but one that contains surprisingly clear surface water.

I first visited Ignacia only a week earlier, as part of a research study involving in-home water filters. At the time, she reported that every one of her six young children had suffered at least three days of diarrhea in the last week. She maintained that her water was clean, but still gladly handed me a sample of her drinking water when I offered to check it with a microbiological test. Today, Ignacia stares at the petri dish with a mix of disbelief and fright. Instead of the consistent yellow of the clean demonstration sample, her plate resembles a tie-dyed t-shirt, exploding with the colors of numerous colonies of disease causing bacteria. Encouraging

her to look closer, I point out the small, writhing worms that also are growing in the plate. Catching sight of these parasites, the little boy looking over her shoulder averts his eyes and runs off."

Matt's story helps illustrate at a personal level the importance of the work we do in Honduras. The Hondurans feel all the same things you and I do. They want safety, security, health, and freedom. They too need the essentials of life such as adequate nutrition, safe water, decent housing, access to health care, and protection from violence. Providing this in a collaborative manner is what the Department's Global Health program is all about.

To read the most recent trip report, as well as more about our activities in Honduras, please visit www.sanjosepartners.org. If through further learning you feel moved to help, please consider making a monetary donation as outlined on the web site. Although we strive to spend as little money as possible and still make the greatest improvements, we are running low on capital. As Matt's report states above, we are making a huge difference in other people's lives.



Matt Malek, URMC medical student

The Department of Family Medicine hosted a Gala Dinner at the Rochester Museum and Science Center for alumni and their guests.



Panel discussion on future of Family Medicine included Larry Green, M.D., Doug Kameron, M.D., Larry Culpepper, M.D., Michael Klein M.D., and Jay Dickinson, M.D.

Monty Douglas, M.D. and Susan McDaniel, Ph.D. enjoyed the meal.



Sara Shields, M.D., Cathy Morrow, M.D., Pam Olson, M.D., and Gaylin Greenwood, M.D. enjoyed spending time together.

Drs. Jay and Pat Chapman catch up with Richard Rockefeller, M.D.



Till Farley, M.D. Remembers His Mother, Linda Farley, M.D.

The death of Linda Farley is such a huge loss for so many of us who were touched personally and professionally by Linda and her work. She was so warm and giving, and so committed to single payer health care reform. She also had a big impact on our residency and residents during the early years of the program.

Below is an excerpt from an article written by Till Farley, M.D. upon the death of his mother, Linda F. Farley, M.D.

My mother, died at home June 9, 2009, at the age of 80. She was well known to many DFM faculty and staff... My mom was born Linda Fabry in Rochester, New York, and graduated from the University of Rochester School of Medicine in 1955. That same year she married another Rochester graduate and very unconventional thinker named Gene Farley. Their honeymoon was a cross-country trip by jeep, camping under the stars along the way from Rochester to Denver where my mom would do her internship. After a year in Denver, they moved to the Navajo reservation to work on a Cornell University tuberculosis project and provide primary health care. In 1959 they moved to Trumansburg, a small town in upstate New York, to set up what they thought would be their last practice.

However, as my dad's career evolved from small town doctor to peripatetic academician, my mom ended up practicing in Baltimore; Rochester, NY; Kingston, Jamaica; Denver; Nashville, and finally Madison, Wisconsin where she finished out her life. Perhaps because she grew up poor, but mostly because she had a finely tuned sense of injustice in the world, she always felt a special connection to the poor and under-served, and it was with that population that she always worked. During their almost 54 year partnership, she and my dad became almost one person-- Gene and Linda Farley. You couldn't know one without knowing the other...

During the last 20 years of her life, my mom concentrated on political activism, with healthcare reform being her big issue. She lobbied congressmen, senators, and presidential candidates; she testified in state legislatures and in Washington DC; and she lectured widely on single-payer healthcare reform. She also continued to volunteer as a physician at a homeless clinic up until a month or two before she died. Her entire life was dedicated to social justice concerns in general and improving healthcare to the poor and underserved specifically.

The first Gene & Linda Farley Lecture, created to memorialize Linda and her work and recognize Gene's many contributions to our department and our discipline was given by their son, Tillman Farley, M.D., medical director of Salud Health in Colorado in September. Dr. Tillman Farley's presentation at Grand Rounds was entitled "Putting People Back Together: Health Reform and Integrated Care" The Evening Reception Round Table discussion was "Health Care Reform," led by Dr. Gene Farley.

The work of the late Dr. Linda Farley and her husband, Dr. Gene Farley will be recognized in an annual Gene & Linda Farley Lecture.

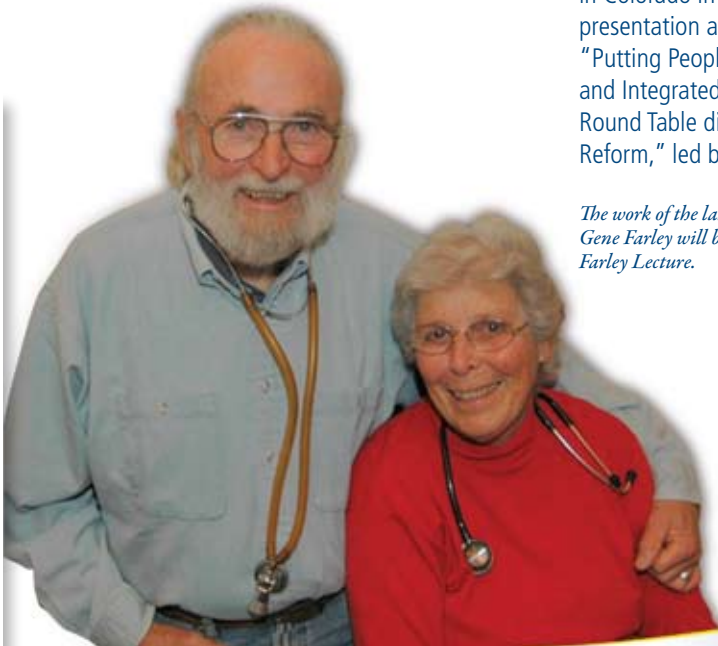


Susan H. McDaniel, Ph.D., Associate Chair Receives Endowed Professorship

Dr. Susan McDaniel, associate chair, Department of Family Medicine recently received the 2009 Dr. Laurie Sands Distinguished Professor of Families & Health, Department of Psychiatry, University of Rochester Medical Center award. Dr. McDaniel was also named the 2009 Genesee Valley Psychologist of the Year by the Genesee Valley Psychological Association. Congratulations!

HFM Receives NCQA Recognition

Highland Family Medicine (HFM) was recently recognized as part of the National Committee on Quality Assurance (NCQA) Diabetes Physician Recognition Program. "Achieving this award is a huge accomplishment," said Doug Stockman, M.D., HFM former medical director. "We are committed to improving the quality of care we provide our patients and HFM has already started planning to become an NCQA Patient Centered Medical Home. We appreciate the support we have received from both the University of Rochester and Highland Hospital."



Faculty Accomplishments

Grants

Jennifer Carroll (1999) received a National Institutes of Health/National Cancer Institute Career Development Award for a research project and related career development activities are to evaluate a primary care-based clinician communication intervention to promote the 5As counseling about physical activity in an underserved primary care setting. Thomas Pearson (PI) and **Steve Barnett** received a Centers for Disease Control & Prevention grant for The Rochester Prevention Research Center: National Center for Deaf Health Research. The grant is to continue to develop this national center of excellence on health promotion and disease prevention research with persons who are deaf or hard of hearing. The core research project is to adapt and pilot an obesity intervention with deaf ASL-users (the Deaf Weight Wise Program). **Steve Schultz** (PI) received a grant from the Department of Health and Human Services "P4 Plus: Training Leaders to Reduce Health Care Disparities Using the PCMH Model."

Book Chapters

McDaniel SH and Pisani A

2009- Family dynamics and chronic disabilities. Family Caregiving and Disabilities. The Rosalyn Carter Institute for Family Caregiving. Oxford U. Press.

Taylor-Brown S and McDaniel SH

2009- Chronic Illness and family caregiving: Integrating mental health and primary care. Family Caregiving and Mental Illness. The Rosalyn Carter Institute for Family Caregiving. Oxford U. Press.

McDaniel SH

2009- Genomics and Medical Family Therapy. In: Clinical Updates for Family Therapists: Research and Treatment Approaches for Issues Affecting Today's Families, Vol. 3, American Association for Marriage and Family Therapy.

McDaniel SH, Bogdewic S, Holloway R, & Hepworth J

2008 Architecture of Alignment: Leadership and the Psychological Health of Faculty. In: TR Cole, TJ Goodrich, and ER Gritz (Eds.) Academic Medicine in Sickness and in Health: Scientists, Physicians, and the Pressures of Success. Humana Press, pp 55-72.

Rosenberg T, Mullin D, McDaniel S, & Fiscella, K

2008 Collaborative Care to Heal Gender Relations Across Generations: A Couple of Trainees Watch a Couple of Experts Treat A Couple of Couples." In: R Kessler (Ed.) Collaborative Medicine Case Studies. New York: Springer Publishers.

Selected Publications

Brown EJ, Carroll JK, Fogarty CT, Holt C (2009) "They get a c-section...they gonna die": Somali women's fears of obstetrical interventions in the United States. Published in Journal of Transcultural Nursing Steele J, and **Carroll J** (2009) Impact Case Study of a Community-Based Participatory Research Study with Somali Refugees: An impact case study of its effects on health literacy and disparities. (2009) Published in Agency for Healthcare Quality and Research.

Mustian KM, Sprod LK, Palesh OG, Peppone LJ, Janelsins MC, Mohile SG, **Carroll JK** (2009) Exercise for the Management of Side Effects and Quality of Life among Cancer Survivors. Published in Current Sports Medicine Reports.

Epstein RM, Peters E. Beyond Information: Exploring Patients' Preferences. JAMA, 2009; 302(2):195-197.

Street RL, Makoul G, Arora NK, **Epstein RM**. How Does Communication Heal? Pathways Linking Clinician-Patient Communication to Health. Public Education Counsel, 2009; 74(3):295-301.

Fiscella JK, Kitzman H. Disparities in Academic Achievement and Health: the intersection of child health education and health policy. Peds 2009; 123(3):1073-80.

Gramling R, Clark J, Simmons E. Racial Distribution of Patient Population and Family Physician Endorsed Importance of Screening Patients for Inherited Predisposition to Cancer. Journal of Health Care for the Poor and Underserved. 2009; 20(1):50-54

Wang C, O'Neill S, Rothrock N, **Gramling R**, Sen A, Acheson LS, Rubinstein WS, Nease DE, Jr, Ruffin MT, IV. Comparison of Risk Perceptions and Beliefs Across Common Chronic Diseases. Preventive Medicine. 2009; 48(2):197-202

Gramling R, Eaton CB, Rothman KJ, Cabral HJ, Silliman R, Lash TL. Hormone Replacement Therapy, Family History and Incident Invasive Breast Cancer Among Postmenopausal Women in the Women's Health Initiative. Epidemiology. 2009;

Pollard, RQ, **Barnett, S.** (2009). Health-Related Vocabulary Knowledge Among Deaf Adults. Rehabilitation Psychology, 52(2): 182-185.

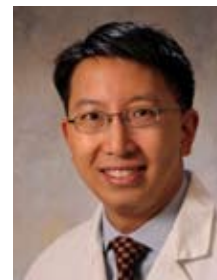
Eiff MP, Garvin R, **Fogarty CT**, LoPresti L, Young RA, Duane MR, Creach ED, Saultz JW, Pugno, P and Carney, PA. A Model for a Standardized National Family Medicine Graduate Survey. Family Medicine, 2009.

Editorial Positions

Fogarty, CT

55-Word Story Column for Families, Systems, and Health. Developed and implemented a new creative writing feature for this journal, and serve as editor.

Transitions & Welcome



The Department of Family Medicine welcomes **Michael Mendoza, M.D., M.P.H.** as Medical Director. Originally from Chicago, Dr. Mendoza received his medical

degree from the Pritzker School of Medicine at The University of Chicago and his Masters Degree in Public Health from The University of Illinois - Chicago where he studied school-based educational interventions to address high risk behaviors among inner city children and adolescents. He completed his residency training in Family and Community Medicine at the University of California - San Francisco, and served an additional year there as Chief Resident and Clinical Instructor in Family Medicine. He completed a Fellowship Program in Resident Teaching at UCSF and the Certificate Program in Biomedical Informatics at the Oregon Health and Science University. He most recently served as Clinical Assistant Professor of Family Medicine there and saw patients as a National Health Service Corps Scholar in community health centers on Chicago's South Side.

"The Department of Family Medicine and Highland Family Medicine have enjoyed a long history as leader in family medicine with a national reputation for its contributions to high quality, patient-centered, primary care," said Mendoza. "As Medical Director, I am honored to be joining a family of professionals who share my passion for innovation in family medicine practice, education, and advocacy."



Mark Ippolito joined Highland Family Medicine as Financial Manager in late March 2009. He moved to

Rochester in July 2007 after 14 years of working downstate at in the Student Accounts Office of Stony Brook University on Long Island. As the new Financial Manager at HFM, he will be responsible for revenue and expense analysis, budget preparation, general ledger review, and grant accounting, as well as miscellaneous financial projects and operational studies.

"I really enjoy this type of working environment because I enjoy being able to see first-hand the stories behind the numbers. It's important for me to connect people to the financial process," said Ippolito. "I am also excited to learn about family medicine operations and help those that make them run successfully by contributing my accounting skills and experience. The medical staff and support are great to work with and I am happy to be a part of a dedicated team focused on healing and improving the health care of our community."

Kristin Coon serves as Administrator,



Department of Family Medicine. Coon served as an Administrator at the University of Rochester, Strong Hospital since 2006 and previously held the position of Department

Manager, Surgery at Highland Hospital for three years. Coon holds a Masters Administration, Medical Management from the William E. Simon Business School, University of Rochester and a B.S. from Bowling Green State University.

"What I can say is that this department welcomed me with open arms. They are a very compassionate and hard working group of individuals," said Coon. "They shed much blood, sweat, and tears for their patients, research, and residents. They are so committed to the underserved and the education of new doctors it overwhelming and impressive.

Family Medicine is involved in so much that people do not realize the breadth of their mission and how they touch so many lives and various departments," adds Coon. "I appreciate the opportunity to work here and my whole goal is to make things more efficient, assist with their reimbursements and be part of the family."



Assaf Yosha, M.D. is a new addition to the Highland Family Medicine Department as a Senior Instructor. Dr. Yosha attended Albany Medical College and completed his Family

Medicine training at NY-Presbyterian-Columbia in New York City in 2005. He then spent a year working in tandem with his wife in rural New Zealand and at IHS Facilities in America. In 2007 Dr. Yosha completed an Obstetrics Fellowship training program for Family Physicians in Seattle, WA. He is credentialed in operative obstetrics and cares for common high risk perinatal conditions. His out-patient clinical work is based at the Woodward Health Center, an FQHC. Areas of interest include all aspects of family planning and underserved care. "I am excited to have joined the Department of Family Medicine and look forward to working with the faculty, residents, and staff," said Dr. Yosha.

Meet the New Residents

The Department of Family Medicine welcomes 10 new residents with a variety of backgrounds. One grew up in New Zealand, two were born in Canada and we even have one who was raised in New Jersey! For some, becoming a physician was a life-long passion and for others a newly discovered vocation after careers in real estate, teaching high school, and even developing blood gas analyzers. Two already have master's degrees in public health and several have spent time at home and abroad working with the underserved.

We have a marathon runner, an equestrian, a Red Sox fan and a karaoke enthusiast. But most importantly we have 10 enthusiastic, bright, caring individuals who share a commitment to family health, community health and global health.

The Class includes:

Zachary Borus, M.D., M.P.H.,
University of Rochester School of Medicine and Dentistry

Anne Corbett, M.D.,
Eastern Virginia Medical School

Lisa Downing, M.D., M.P.H.,
Charles R. Drew University of Medicine and Science

Jennifer Frese, M.D.,
Dartmouth Medical School

Melanie Gnazzo, M.D.,
University of Connecticut School of Medicine

Edith Hui, M.D.,
Saba University

Rebecca Irvine, M.D.,
Saba University

Audra Laing,
MBCbB University of Auckland

Erin Lineman, M.D.,
State University of New York at Syracuse College of Medicine

Elizabeth Terragnoli, M.D.,
State University of New York at Buffalo School of Medicine

What is family medicine?

We take care of people before they're even born, and if you live to be a hundred you won't outgrow us.

Our range of practice is nearly limitless. We deliver babies and give flu shots and diagnose major diseases and sew up minor cuts.

We have the heart and soul of that great American icon of the past, the family doctor who went to see you in a horse-drawn buggy. But today's family medicine means cutting-edge research and training tomorrow's doctors in the knowledge that's growing exponentially every year.

We care for the body and the mind – the whole person – and we have a special feeling for the underserved.

We didn't go into family medicine to get rich.
We did it to help people get well.

We're passionate about what we do, and our patients feel it.

We are family medicine:

Medicine on a mission.

MEDICINE of the HIGHEST ORDER



Family Medicine Manifesto

The Executive Committee gathered input from the faculty and staff to come up with Family Medicine's set of values and an easily understood mission statement and tag line, as part of our Strategic Planning process. The group was assisted by Chris Pulleyn, formerly a partner in Buck & Pulleyn for several decades before deciding on a career change. Chris completed the Masters in Marriage and Family Therapy Program in the Department of Psychiatry and Family Medicine was her Clinical Practicum site.

"Most of what had been done was an attempt to describe what Family Medicine is, which is difficult because it encompasses so many things," said Pulleyn. "I decided to focus on the spirit behind the practice – what I could feel happening every day at HFM. That's what gave me the inspiration for the manifesto."

"We are very grateful to Chris for her inspiration and her commitment to Family Medicine, both in the patients she sees and this motto and Manifesto," says Susan H. McDaniel, Ph.D., Associate Chair.