

# RPAP and MetroPAP News



RPAP student cluster in Waconia, MN

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## Greetings from the Director of RPAP and MetroPAP

### Welcome to our many RPAP and MetroPAP alumni and friends,

Spring has arrived in Minnesota and with it new energy and enthusiasm from our students, staff and faculty. Our students are finishing the final third of their program. During this last part of their RPAP/MetroPAP experience, students confidently step into their roles as team members, finish community projects, and typically begin to anticipate the end of this program with some sadness. They have built powerful relationships with their teachers and communities.

We will admit 39 RPAP students and 4 MetroPAP students into our program in the Fall of 2016. Thirty-six communities in outstate Minnesota and western Wisconsin will host RPAP students, and 3 urban underserved sites will host MetroPAP students. Our hope is to grow this program and so we seek collaboration with interested communities; please let us know if you and your colleagues wish to participate in RPAP!

One of my responsibilities as RPAP Director is to represent this program at conferences and by invitation to speak with faculty in other medical schools wishing to emulate RPAP's success. It is an honor and quite humbling to represent the work of all of our forbears who established this program, our many alums, and the communities and health professionals who ensure it continues as a model program.

Thank you for your support as we continue to partner with rural and urban inner city health systems to provide powerful learning environments for our students and future colleagues.

With warm regards,

Kathleen Brooks M.D,  
Director RPAP/MetroPAP



## Summer Internship in Medicine: A Success Story for Rural Medicine

The Summer Internship in Medicine (SIM) program was created in 2003 to give medical students rural clinical experience during the summer between first and second year. They are placed in small rural hospitals and clinics to work with a community physician for 2-4 weeks. The program was initially designed for and initiated on the Duluth campus. After realizing the value of the program, it was expanded to include the Twin Cities campus students in 2005.

Participation in the program has increased fourfold since the beginning. Today, we consistently have over 80 students in the program each year with equal participation from both campuses. Out of 813 total SIM students, 243 students have gone on to participate in the Rural Physician Associate Program. In the past 5 years 61% of RPAP students have experienced SIM. SIM has proved to be a valuable link in the pipeline of students excited about rural medicine.



*Working in SIM this summer was definitely a highlight in my medical training so far; I would go back in a heartbeat.*

*- 2015 SIM participant*

SIM has been successful in showcasing the capability of our rural communities. The program focuses on giving students clinical exposure, allowing clinical skills practice, introducing interprofessional interaction, and learning about rural communities as a whole. SIM allows access to many small rural hospitals and clinics that usually do not host medical students.

With only a 2-4 week commitment, SIM offers students from all backgrounds the opportunity to experience rural medicine as a healthcare worker in training. The final essays written by the participants show the richness of rural medicine and demonstrate the “Aha!” moments the students have experienced. For some, it has been a chance to try something totally new. For others, the SIM program provides an opportunity to solidify their interest in rural community medicine. RPAP and SIM are happy to work together to increase the number of rural doctors in Minnesota.

## Proposed AHC Building – Support the Medical School’s Future

It’s no secret in health care that the very best care is delivered by interprofessional clinical teams—physicians, physician assistants, nurse practitioners, nurses, pharmacists, therapists, and many others—who come together in exam rooms, neonatal units, operating rooms, intensive care units, and birthing centers. To reach this goal of the best care possible, education must change.



Active, collaborative, team-based medical learning must become the norm. Students from across the health sciences must train together to solve complex health care issues in small groups—just as they will in practice. Innovative teaching must occur. Technology must connect students and practitioners, patients, and communities around the state. None of this can happen in the 40 year old auditorium-style lecture halls.

In 2016, the University of Minnesota is asking the Legislature for \$66.7M in funding, with the University investing \$33.4M, to create a new health education delivery and training facility for the Academic Health Center. This will replace 100,000 square feet of outdated facilities that do not support the fundamental changes in education of health care professionals.

It is the goal of the University to attract and retain the best and the brightest of students; to recruit and support world class faculty and staff; and to inspire innovation, exploration, and discovery, while being responsible stewards of resources. The University of Minnesota trains 70% of the state’s physicians including 25% of the rural health providers, 73% of the state’s dentists, and 67% of the state’s nurse practitioners. To advance integrated care in Minnesota, a new Health Sciences Education Facility is needed.

The next generation of care providers will serve you. We encourage you to support our future doctors by contacting your state legislators via phone, email, or through an in person visit to express your support. More information about the initiative and how you can get involved can be found at <http://legislative-action.umn.edu>.

## Mid-Year 2016



On March 31<sup>st</sup>, the Class of 2015-16 returned to campus for their Mid-Year activities. They learned communication skills, vital for CS2 and future professional success, and took their OSATS exam (Objective Structured Assessment of Technical Skills) in the SimPORTAL.

Later they relaxed with some group bowling.



## Where Are They Now?

### James Thomas, MD (Two Harbors, 1972)

Dr. Thomas writes "I have worked my entire career as an emergency physician at one hospital for 40 years. I was the first in the county to become Board certified in EM and have watched my group grow from 4 physicians to 40. I love my work and credit my time with RPAP for my love of primary care."

### Daniel Mareck, MD (Montevideo, 1977)

Dr. Mareck worked for RPAP and at the Medical School's Duluth campus from 1993-2005. He then left practice to work for the Federal government, serving as the CMO for the Federal Office of Rural Health Policy in the U.S. Department of Health and Human Services. Dr. Mareck has recently retired.

### Sara Gibson, MD (Ely, 1986)

Dr. Gibson writes, "I have kept the RPAP fires burning through my passion for rural community psychiatry. My practice for 20+ years has been as a telepsychiatrist to very remote communities in Northern Arizona. I am newly involved in overseeing comprehensive integrated care with our primary care providers for our seriously mentally ill persons. I often refer to and promote my RPAP training as formative in my practice in rural medicine. Thank you, RPAP!"

### Ann McIntosh, MD (Brainerd, 1991)

Dr. McIntosh partnered with Stevie Ray's Comedy Cabaret to create a one of a kind look at Advance Care Planning. "Have you had *the talk* yet? No, not the talk with your kids; the one with your parents, your spouse, yourself." The Life and Death Comedy Show premiered in April 2016 in Chanhassen, MN.

### Julie Mayers Benson, MD (Staples, 1992)

Dr. Mayers Benson works part-time in hospice and palliative care, serving as President of the Minnesota Network of Hospice and Palliative Care. She works to promote Hospice and Palliative Medicine in rural areas and increase teaching to medical students.

### Lee Church, MD (Deer River, 2009)

Dr. Church practices full scope family medicine at the Federal Medical Center on Nellis Air Force Base. He is also the Wilderness Medical Course Director and a medical consultant to the Red Rock Search and Rescue. He has been deployed to Qatar with active duty U.S. Air Force.





## Match 2016

Students graduating in May 2016 recently gathered to find out from the National Residency Match Program where they will be moving to for their residency. 230 students from the UMN Medical School matched: 32 were RPAP alumni.

Of our students, **20 matched to a Family Medicine residency (62.5%)** with 5 going to Duluth FM, 2 to St. Joseph's FM, and one to St. Cloud FM. It was a great year for Family Medicine residency, with a record 3,105 students nationwide choosing to match in Family Medicine.

The rest of our RPAP cohort went in varied directions, with 6 in OB/GYN, and 1 each in Internal Medicine, Pediatrics, Orthopaedic Surgery, Anesthesiology, Dermatology, and Urology. 60% will stay in our 5-state region, with many others announcing their plans to return to MN after residency.

We also had MetroPAP alumni match this year. So far we have 13 who have matched since the start of the program in 2010. Of these students, **7 have gone into Family Medicine (54%)** with 85% in Primary Care. Of our most recent class, 2 will be at the North Memorial Family Medicine Residency.



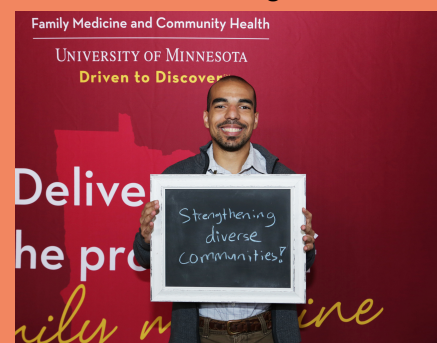
*Drs. Westra and Christensen  
at Match Day*

## Alumni Recognitions

**Mark Nelson** (MetroPAP 2014, pictured here) was presented with the Medical Student Award for Contributions to Family Medicine from the Minnesota Academy of Family Physicians by **Jon Hallberg, MD** (Red Wing, 1990, on right).



Two MetroPAP alumni, **Casey Sautter** and **Dane Nimeko** (pictured below), received the Fisch Art of Medicine award to enrich their lives through the arts.



*The University of Minnesota is an equal opportunity educator and employer.*

## RPAP/MetroPAP Database

Thank you to the hundreds of alumni who have updated their home and practice information in our alumni database. We use this information to accurately report on our work to the Medical School and MN Legislature. If you haven't let us know where you are now, send us an email!

**[rpapumn@umn.edu](mailto:rpapumn@umn.edu)**

You may also keep in touch through the RPAP Facebook page: [www.facebook.com/rpapumn](https://www.facebook.com/rpapumn)

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