Spring Greetings from Interim Director

It seems hard to believe that another academic year is drawing to a close for our 2016-17 RPAP/MetroPAP students. By now, the specialty faculty visits are over and students are busy wrapping up their community health assessment (CHA) projects and anticipating their final communication skills visits with our core faculty. By July 1 they will be back in the Twin Cities and starting 4th year rotations.

I’m thrilled to announce that 87% (26 of 30) 2017 RPAP alumni matched in primary care residencies (FM, IM, Med/Peds). 70% of 2017 RPAP alumni matched in FM (21 of 30) and 75% (3 of 4) 2017 MetroPAP alumni matched in FM. We couldn’t be more pleased and are hopeful these numbers will help address the need for outstanding primary care physicians who will choose to work in Minnesota’s rural and urban underserved communities long-term. Congratulations, graduates!

We’re busy finalizing our new pre-RPAP orientation 2 week “burst” rotations in OB/Gyn, Pediatrics and Psychiatry, scheduled to start soon in the Twin Cities and Duluth. Every 2017-18 RPAP and MetroPAP student will get this intensive exposure to what will be predominantly inpatient OB, Peds and Psych experiences BEFORE going to their LIC site. Thereafter, students will complete the OB/Gyn, Pediatrics and Psychiatry rotations longitudinally in their rural, or urban community training site. The remaining clerkship time in maternal, child and behavioral health may be with their primary preceptor in the ambulatory setting, or with subspecialists, depending on their individual community resources and personnel.

We’re hopeful that the new RPAP/MetroPAP Program Director will be selected and announced soon. Though it has been a pleasure for me to serve as Interim Program Director the last few months, its time for the new director to chart the course for the next phase of our historic program’s amazing future.

Best wishes,
Nancy J. Baker MD
Match Day 2017!

**RPAP Stats**

**2017 Match Class:** 70% matched into Family Medicine, 87% into Primary Care Residencies and 53% staying in Minnesota.

65% of all alumni in the history of the program have matched into Family Medicine Residencies.

**MetroPAP Stats**

**2017 Match Class:** 75% matched into Family Medicine Residencies in Minnesota, 1 matched into Emergency Medicine.

**During the 7 years of MetroPAP** 82% alumni matched into Primary Care Residencies and 47% stayed in Minnesota.

81% of our RPAP/MetroPAP students matched to their 1st or 2nd choice.

97% reported being satisfied or very satisfied with their match.

Specialty Faculty Visits comes to an end for the year

Faculty and Specialty Faculty did 44 visits over the course of the past 4 months, visiting our students all across the state of Minnesota and also in western Wisconsin. The students and Specialty Faculty each prepare a case presentation for their visits, with a focus on Family Medicine, Medicine, Obstetrics & Gynecology, Pediatrics, Surgery or Urban Underserved Population depending on their type of visit. Specialty Faculty bring their expertise to bear on student case studies and provide an important faculty contact for the students.
The students were very busy when they came back to campus the last week in March. For our program they had their OSATS exam, where their clinical skills were put to the test. They also took part in a Workshop on Improving Healthcare Communication Skills that was lead by Dr. Andrew Olson. Dr. Olson presented “R.E.D.E to Communicate” to the students. During this workshop the students were split up into 6 groups (lead by Faculty) where they focused on specific strategies (discussed in the didactic) to quickly and effectively establish a therapeutic provider/patient relationship and to seek the patient’s perspective with respect o their health. We also had some social time for students and faculty by having dinner and bowling together at Bryant Lake Bowl in Minneapolis. The students also participated in a Residency Workshop Day, Significant Event Reflection, and an event called The Knowledge Dump, where 4th year medical students give advice and tips on Residency to the 3rd year medical students.

ReVisit Day

April 7th was Revisit Day where we visited with students who have been accepted into Medical School at the U of M and other medical schools. We answered any questions they had to help them make the best informed decision on which school to attend.

Spring Refresher

The Minnesota Academy of Family Physicians (MAFP) Spring Refresher was held April 19-21 at The Depot in downtown Minneapolis. We shared a booth with the Family Medicine Department. At the booth we had a large state map and asked the question “Where do you Practice, Precept and Train.” People were very excited to put their pins on the map. The map was a great visual reminder that our programs at the U of M help put Family Medicine doctors throughout our entire state. We also gave away 3 different buttons (UMN Medical School Alumni, Family Medicine Residency Alumni and RPAP Alumni. 20 people at the conference were “triple treats” and able to wear all 3 buttons with lots of pride. Faculty Darin Brink also presented at the conference. His presentation was “Precepting Medical Residents: How Did I Get Roped Into This?”
Awards

Dr. Shailey Prasad - Distinguished Teaching Award.

How do you feel about being winning the Distinguished Teaching Award?
I am humbled by it and honored too. There are so many amazing teachers that the students get in contact with and this is a truly humbling experience.

Do you have any advice or words of wisdom for future RPAPers/MetroPAPers?
The beauty of the RPAP/MetroPAP program is the longitudinality of it. I would encourage the students to really get to know the communities and people that they come in contact with. It is a privilege to let the community and the world teach you- let them in! You will treasure the interactions and the contexts in which you did the learning for the rest of your life.

What are the things you have enjoyed most about your career?
Many things. Being part of some awesome teams. Forming great relationships with patients, colleagues, and students. And learning from every encounter.

Alana Jackson (Staples 15-16) - MAFP Medical Student Leadership Award 2017.

Alana answers "Why family medicine?":
"Quite honestly, I chose family medicine because of the amazing nine months I spent as a student in the Rural Physician Associate Program (RPAP) in Staples, MN. Growing up on my family’s farm in northern Minnesota, I knew I would return to rural Minnesota to practice medicine. Though I had heard great stories of the rewarding career of rural family physicians, I did not decide on this specialty until I had the opportunity to live it myself. The compassionate, hardworking docs in Staples showed me the beauty of a true full-spectrum practice by providing unparalleled hands-on training. Through countless nights on labor and delivery, neonatal resuscitations, hospice home visits and community health events, I came to see family medicine as the most valuable specialty to people living in rural areas, places that too often lack adequate access to healthcare. I am so excited to become part of the workforce that provides care to the people who need it most."

Alumni Recognition

Dr. Denny Peterson (Canby 88-89) RPAP Reflection:

When I started medical school in Duluth in 1985, I had just left a corporate sales position with 3M Vision Care /intraocular implant division, I was initially planning to do "rural" Ophthalmology. However, UMD’s focus on Family Medicine pulled at my rural Canby upbringing, and every rotation I completed convinced me that Family Medicine was the route for me. My wife was from Bloomington and not very interested in rural community life, but after some deliberation we elected to do an RPAP rotation in my hometown of Canby.

RPAP solidified my choice for Family Medicine, by placing me in the mentorship of 3 fabulous country physicians, Dr. John Meyers, Dr. Bob Olson, and Dr. Chris Tasjian. This trio guided me through that year and exposed me to an incredible amount of medical, surgical and OB experience, and created the invaluable 9 month longitudinal clinical experience. My wife was able to experience how wonderful a small community can become in such a short period of time. This was critical as it opened the door for rural practice opportunities when we completed residency.

Following RPAP and a Family Medicine residency in Duluth, I settled into a comprehensive Family Medicine career at the Family Practice Medical Center in Willmar. That clinic was founded by Dr. Lyle Munneke, one of the early pioneers of RPAP. For the 21 years that I practiced there, we had RPAP students. With each year, the students brought various levels of initial experience, but by the time they were leaving in June, the majority were confident and skilled in clinic, hospital and community patient management. Each student brought vitality and contagious passion, and challenged our practice patterns and knowledge.

RPAP teaching was one of the reasons I left my wonderful practice/community. I have transitioned into a full time faculty position at the UM /Centracare St Cloud FM Residency. My ongoing focus is to continue to train young physicians/medical students, and to challenge them to consider the full scope of Family Medicine including OB/ER. In the fall of 2017, we will be starting a MetroPAP rotation here in St Cloud. I am excited about this opportunity to offer a longitudinal medical school experience through MetroPAP/ RPAP.
Alumni Recognition

Dr. Mac Baird (Wabasha 73-74) RPAP Reflection:

I certainly am a champion for RPAP. RPAP has earned my praise. A long time ago I was skeptical about medical school. I come from a small town and I had been through graduate school as well as college. So, by 1½ years of medical school I was about “fed-up”. I just didn’t like metro areas and I was eager to get out of the Twin Cities. My 1st contact with RPAP was with Dr. Jack Verby. He was this great big tall pioneer. I was moping around in the hallways down on the second floor, at about 6:30 or 7pm. Dr. Verby said to my great surprise “Why are you not home?” I looked up and said “Gee, nobody ever asked me that, who are you?” He told me he was the director of RPAP. This was February 1973. He started talking “You have to keep equity and balance in your psychological, social, spiritual and clinical concerns... life.” He started talking philosophically and I was quite surprised. Finally in our conversation he said “Why don’t you apply to RPAP?” I said “Ok”. A month later I was applying to RPAP and I wanted to go specifically to southeastern Minnesota to Wabasha or Lake City where I dreamed about sailing. When Wabasha finally accepted me as a student I was tickled pink.

The following year I went to Wabasha. In those days RPAP was a year-long. My wife and I got a puppy and moved to Wabasha and I didn’t want to leave by the time RPAP was up. In that time I went through a series of discoveries of myself and about medicine that I talk about on stage a lot. They would give me graduated experiences and increased responsibilities and pretty soon I was actually helpful. I would assist in surgery. I think I assisted in 153 abdominal surgical cases. I did that and I delivered babies and did everything you usually do. And somewhere in that 6 to 9 months I became pretty eager about becoming not only a rural physician but a family doc as well. There was a special need I could see for talking to people about the rest of life. I was a good student and I did what I was told. They advised us to open a patient interview with an open ended question like, “What concerns brought you to the office today?” I would do that. They would look at me, every now and then, say “Actually it’s not what I told the nurse but it’s whether I should get a divorce, or if I should sell the farm, if I should go to a nursing home or should I go back to school?” I had no idea what to do. They hadn’t asked their regular doctor that stuff. When I opened it up as I was instructed to do, whatever was really bothering them played out. It wasn’t until years later that I trained as a family therapist. I learned the proper thing to do, was actually what I was accidentally doing, which was reflect back their questions.

Part of why I am so enthusiastic about RPAP is because it’s simply a superior way to educate students. They simple become more knowledgeable about the breadth of medicine how illnesses evolve and how patients react, how complex the whole thing is in an apprenticeship model. In those days, we had 6 or 7 individual faculty visits. We had to present our cases to the whole staff at the local hospital, including the cooks, the cleaning ladies and the nurses. It was scary when I first started that but it gave me experience as to how to make case presentations that carried me into my career. After RPAP, I didn’t want to come back. I thought I could just stay in Wabasha. In fact, I signed a contract with Wabasha to come back 4 years later. It happened to be the price of a 19-foot sailboat. I was highly motivated. I stayed throughout the summer because that was the fun part and I didn’t go back (to the Twin Cities) until September or so.

What are your plans for your retirement?

Well until recently I didn’t want to think about retirement because I like what I do. In December 2012 I had acute leukemia and a bone marrow transplant. Thereafter I was just happy to get back to work and have the option to stop working on my own terms, instead of dying. What I am going to do is slow down a bit. I am going to move to Lake City. That’s where I have gone sailing on and off for the past 40 years. That’s just south of where I grew up on the water. Out my back door is a park where I did Cub Scout and Boy Scout camp. So I am literally going back home. I plan to walk, hike, sail, kayak and canoe. I might even learn how to fish again. I also recently connected with the group Health Professionals for a Healthy Climate, they are involved with environmental things and climate change. After the announcement of my retirement I received an email inviting me to be a part of this group. I am cycling back to environmental causes that I’ve been passionate about. Before medical school I earned a masters degree in environmental health. I plan to do that part time. I won’t see any patients. I am going to do more of enjoying myself. I have already made the dent on the world I am likely to make. I am happy to slow down a bit.

*Look more from our interview with Dr. Baird in the next newsletter.
Alumni Recognition

Dr. Julie Benson (Staples 92-93) RPAP Reflection:

Quite simply, RPAP changed my life. And for that I am forever grateful.

As a young and naïve second year medical student I set out for Staples, MN for my required rural preceptorship. My mom had suggested I request the Staples assignment as her nursing school roommate was married to a great family physician there. I knew of this couple, Ted and Marge Lelwica. They had led a Christian retreat I had attended in college and I really respected them. When I asked to be assigned to Dr. Lelwica, Dr. Boulger replied that he didn’t have him listed as a preceptor but there was this other physician I might like, Dr. David Freeman. There was certainly a twinkle in his eyes when he said those words. Those first three days in Staples felt like home, I was comfortable and wanted more. Freeman and I decided to pursue starting an RPAP site in Staples the next year. It would be one of the best decisions of my career.

In November of 1992 the town of Staples had not had much exposure to medical students, I wasn’t sure what to expect. For nine months I was the only female “provider” and that ended up being both a novelty and an asset. I saw patients that had not been into the clinic in years because they wanted to see a female provider. At a time when I thought a rural town in central Minnesota would not accept a female it opened its arms and lives to me. I practically lived at the hospital. I loved the adrenaline rush of the emergency room and the comradery of the nurses’ station in the wee hours of the night. I was lucky enough to deliver many babies under the watchful and caring eyes of Drs. Freeman, Lelwica, Mennis, Peterson, and Henrickson. They gave me the greatest gift – they entrusted me to their patients and the patients in turn trusted me. Wow. I still am in awe of these relationships. Each came in to the clinic or hospital with a concern and took on the additional role of teacher, not something to be taken lightly.

By the end of my nine months I knew this was a special place. The town may not be a popular tourist destination or historical landmark. It may not have the luxury of beautiful lakes or cute shops. It was more than that, it was real, it was raw. Poverty is real and raw. Farmers, laborers, truckers, teachers, nurses, mechanics, mothers and fathers, grandparents raising grandchildren – all real. I met people in the surgery suite only to see them days later at church where they proudly showed me how well they were healing. This was quickly becoming home. I knew I wanted more. This experience on RPAP solidified my commitment to rural primary care. I couldn’t do this type of medicine in the big city.

After graduating from residency in 1997 my husband Steve and I searched across Minnesota and Wisconsin for a town to settle in and raise a family. My criteria were simple. I wanted a small independent practice that had Family Medicine as the foundation. I wanted to practice all aspects of family medicine from OB, to pediatrics and geriatrics. I wanted to be in the operating room and emergency room. We interviewed many places and I would always end our discussions with “but in Staples they do it this way”. Finally he said, “let’s just go to Staples”. It was music to my ears. Twenty years later I have never regretted this decision. The twinkle in Dr. Boulger’s eye as he assigned me to Dr. Freeman was foretelling. David is my dear friend, partner and confidante. What we have here in Staples is magical. I have been blessed with so many amazing partners, many of who came from the Duluth Family Medicine Residency or RPAP. The nursing and support staff are top-notch. And the administrative team is collaborative, working in partnership together with the medical staff. In school I was taught not to expect that kind of relationship.

At a time in history when future of healthcare is changing rapidly I can continue to recommend medicine as a career IF the students do RPAP. I continue to be grateful for the patients and families that open up to me and allow me a private look into their lives and allow me to partner with them to achieve their own health goals. From delivering babies to caring for someone at the end of life I live a blessed life. I have the greatest job in the world and I owe it all to RPAP, Dr. Jim Boulger and my home of Staples, MN.

*** This year Staples will celebrate 25 years of RPAP and hope to have former students return so we can catch up – a number of them won’t have to travel far though – they already work here!!
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Request for funding from the Minnesota State Legislature

This year, the Department of Family Medicine and Community Health is asking the Minnesota State Legislature for funding to sustain their core work in family medicine clinical training, education, and research. The department has a total of eight residency programs and without this long-term funding, some could be lost. In fact, one of the urban residency programs – which has had one third of it’s graduates practice in rural Minnesota over the last 40 years – has had this year’s incoming class cut by %20.

If these residency programs are lost or reduced, Minnesota could lose up to 50% of it’s annual number of graduates. This loss would destroy Minnesota’s ability to meet an already desperate need for family physicians.

What can you do?

Reach out to your state legislator. Call, write, or meet them in person. Let them know how important family medicine and primary care are to you, your families, and your communities. Legislators in rural areas of Minnesota will be critical in this effort.

Write a letter to the editor in the local newspaper. Ask for the public to contact their state senators and local representatives to actively support the funding for the UMN Department of Family Medicine and Community Health.

Share on social media. If you are active on social, use the hashtag #MN4FamMed, and #mnleg, the legislator’s hashtag, to spread your support.

*For more information: www.med.umn.edu/ourgraduates

Lucas Boyle (MetroPAP 15-16, Methodist) won the prestigious Leonard Tow Humanism in Medicine Student Award.
In the News/Research/Publications/Presentations

**Ray Christensen**, MD spoke to the Duluth News Tribune 01/24/17 about *The Van Etta's 34 years in medicine.*

**Darin Brink**, MD, Douglas Bower, MD, Linda Meuer, MS, MPH and Ruth Westra, DO, MPH, had a Lecturer Discussion “Community Preceptor Faculty Development Competencies”, Society of Teachers of Family Medicine Conference on Medical Student Education in Anaheim, California. 02/11/17

**Darin Brink**, MD, had a presentation “Faculty Development for Community Preceptors”, Society of Teachers of Family Medicine Conference on Medical Student Education in Anaheim, California. 02/9-12/17

**Javad Keyhani**, MD, did a physician wellness talk “Keeping Your Cup Full: Physician Wellness in an Unwell Age”, Smiley’s Residency Program. 03/06/17.


**Darin Brink**, MD, presented “Precepting Medical Students: How Did I Get Roped Into This”, at The Minnesota Academy of Family Physicians (MAFP) Spring Refresher. 04/20/17.

David Power, MD, MPH and Former RPAP/MetroPAP Director **Kathleen Brooks**, MD, MBA, MPA, will be presenting at the WONCA 14th World Rural Health Conference from 04/29/17 to 05/02/17 in Australia. Their presentation is titled “Comparing Personality Characteristics Between Three Cohorts of Rural LIC Students and their Classmates: A Cross-Sectional Study.”

**Ray Christensen**, MD, Panelist for “Key Strategies for Rural Hospitals”, Becker Hospital Review in Chicago, IL. 05/18/17.

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Request for RPAP/MetroPAP News and Pictures

Any updates to your home, family, residency, or practice status? Any publications that reference your RPAP experience? Any fun photos? Please let us know!

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