NEW RESIDENCY LEADERSHIP

The Department’s Residency welcomed its new Program Director (PD) on July 1, 2016, Dr. Fred Alcantara. He served as a member of the Core Faculty prior to assuming the PD role, providing insight gained as a result of his experiences as a community physician. As the PD, Dr. Alcantara leads the program with enthusiasm and with an emphasis on teamwork. “I am honored to have been entrusted by the Department with the leadership of this extraordinary program,” states Dr. Alcantara. “I am supported by an exceptional Core Faculty, and together we’ll work to ensure the continued development and success of our program and its residents.”

It takes a team to train and inspire future Family Medicine Physicians, and all of the Department’s providers are valued resident teaching faculty. The “Core Faculty” however, is the subgroup of providers whose specific mission is the development and implementation of the resident curriculum, assurance of resident wellness, and fostering of transparency in communication and feedback between residents and faculty. Residency Core Faculty includes Drs. Fred Alcantara, Erika Bodkins, Kimberly Foley, Guy Monteleone, and Carl Shrader.

In early November, Dr. Peter Carek, the former Chair of the ACGME Residency Review Committee for Family Medicine, facilitated a Fall Residency Retreat with the Core Faculty to discuss the current and future values, vision, and goals for the Family Medicine Residency Program. Dr. Carek’s suggestions will surely benefit the Residency as it continues to develop. We look forward to hosting other esteemed guests in the future.

Watch this space for more residency updates in the coming months!
The Department is in the pilot stage of introducing a Team Care model to Family Medicine that will enhance face-to-face and quality time between the provider and patient during an office visit. The implementation of a Team Care model will enlist medical assistant (MAs) and nurses to help with data gathering, organization, visit note documentation, and patient education. In addition to increasing face-to-face time between the doctor and patient, this model also allows the nurses and/or MAs the opportunity to be more fully engaged in patient care and to have more direct and meaningful patient contact.

The goals of Team Care are to:
- Increase patient access
- Increase provider productivity
- Increase efficiency/decrease scheduling wait times
- Improve quality measures
- Increase patient, provider, and clinical staff satisfaction

With assistance from the Cleveland Clinic Family Medicine staff, Clark K. Sleeth Family Medicine is implementing the above Team Care pilot program in the coming months. A select number of providers and clinical support staff will participate in the pilot with the goal of expanding the Team Care model in the future.

Dr. Kevin Hopkins of Cleveland Clinic Family Medicine (left), pictured with Dr. Dana King.

Dr. James Arbogast (left), former chair of the Department of Family Medicine, and Dr. Larry Rhodes, featured Mesaros speaker.

The Department would like to thank you for another successful Hal Wanger Family Medicine Conference, which was held at the new Holiday Inn Morgantown on September 29-30, 2016. The response for the 42nd conference was so great that the venue reached its maximum number of attendees!

Dr. Larry Rhodes served as this year’s featured Mesaros Lecturer and highlighted the "Joys and Challenges of Rural Practice." The lineup of lectures ranged from Infertility, Zika Virus, and Sleep Disorders to Medicare Wellness Exams, Hormone Therapy, and Management of COPD. Additionally, hands-on evening workshops were offered in the areas of Dermoscopy, Joint Injections, and Culinary Medicine.

A research poster session was held during Thursday’s dinner where presenters discussed and answered questions pertaining to their most recent findings.
In October, the Department participated in the Annual WVU Healthcare Expo at the Morgantown Mall, WVU Medicine’s largest community health event promoting prevention and early detection. This year, in addition to face-painting, Family Medicine featured “Ask the Pharmacist” and “Ask the Doctor” sessions.

Pharmacist, Dr. Charlie Ponte, spoke with visitors about their questions or concerns related to medications, while Department Chair, Dr. Dana King, and Resident, Dr. Mandeep Dhilon, answered visitor questions ranging from acute care to prevention. Family Medicine’s dietitian and certified tobacco specialist, Judy Siebart, used a CO2 monitor to gauge visitor’s carbon monoxide levels. It was a very successful day with many visitors.

Dr. Melody Phillips joined the Department’s Faculty in early fall. She is a former fellow in the Department’s Patient-Centered Medical Home. She has found her teaching time during clinic, precepting and wards to be the most enjoyable aspect of her new role.

“Teaching residents and students is one of the biggest reasons I chose academic medicine.”

She went on to explain that she chose WVU Family Medicine because of the great group of residents, support faculty, and patients she developed as a fellow making it difficult to leave, also citing Morgantown as a place that her and her husband love and want to raise a family.

Dr. Phillips’ new role as faculty is not the only new responsibility she has taken on this fall; she is also a new mother.

“It is amazing how much somebody so small can provide so much love,” she said. “My daughter really helps to refuel my empathy tanks and alleviates my emotional exhaustion far more than she depletes them.”

Face painting was offered to all ages, complements of Idania Blankenship.
This summer, WVU School of Medicine Rural Track students participated in an immersion trip to southern WV. Students were given the opportunity to experience rural medicine, as well as a chance to interact with residents to further understand the health disparities and unique challenges faced by those living in rural WV. The immersion program spanned a four day interval and contained activities such as: a visit to a black lung and respiratory rehabilitation clinic, various didactic sessions on the screening process for Black Lung, and participation in swift-water rescue techniques on the New River. The program was developed, coordinated and funded by the WVU Institute for Community and Rural Health, Southern WV AHEC, and WVU SOM Rural Track.

In 2012, the Rural Track was introduced as an additional track made available to all incoming WVU SOM students to increase the likelihood of a matriculating medical student to enter a primary care residency and ultimately to practice in a rural primary care setting. Currently there are 31 students participating in the program.