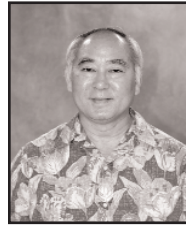


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From Our Governor

Happy Holidays. We are coming to the end of another busy season and there is a lot of turmoil in the world. I hope everything is going well with each of you and your families. We will be welcoming change into our Chapter. First of all, **Kalani Brady** is officially Governor-elect

of our Hawaii Chapter. He will become Governor at the end of the Annual Session in April 2009. He has already been very involved in our Chapter and will be able to get off to a running start. Please continue to support him during his four-year term. He is always looking for new ideas and enthusiastic physicians to help with our Chapter.

We will be bidding Aloha to **Sharon Chun**, who is retiring from the University of Hawaii Department of Medicine at the end of this year. She has been our ACP Hawaii Chapter Coordinator for the past few decades and really has been the glue keeping our Chapter together. She is the one person that we all turn to for continuity and a historical perspective. I am certainly thankful that she has guided me through most of my term. We will all miss her very much but wish her well in her life outside of the Department of Medicine. We are fortunate that **Bridget Scott** has agreed to help coordinate our future activities. Some of you may know Bridget as one of the Medical Staff administrative assistants at Queen's Medical Center. She has already started with our Chapter during this year of transition. If you have a chance, please stop by and thank **Sharon** for her years of support and welcome **Bridget** to our Chapter.

We had our third Pau Hana Event on Friday, September 26, 2008 at the Kulia Grill at the School of Medicine. We had a very good turnout considering that it conflicted with a surprise Retirement Party for **Dr. C.S. Chan** from the Queen Emma Clinics. I want to wish him the best of luck on a well-deserved retirement and to encourage him to remain active in our Chapter, perhaps contributing his insight from his new perspective of "*Life After Practice*" and also to apply for advancement to Fellowship in the ACP. Our Internal Medicine Interest Group Students organized the event and have been actively recruiting Medical Students to the ACP. They have also begun a fundraising by selling IMIG Tee Shirts. **Dr. Laurie Tam** continues to inspire them and hopefully with our help can convince many of them to choose Internal Medicine as their career and practice in Hawaii. We are still recruiting Mentors for our Medical Students and Residents. If you are willing to serve as a Mentor for our Students and Residents, you can sign up directly on the IMIG section of the University of Hawaii Department of Medicine Website. I would also like to thank **Dr. Alan Tice** who has been our Newsletter Editor these past few years. His time constraints do not allow him to continue as Editor but he will still contribute his thoughts from time to time. He continues to help coordinate the inclusion of our annual abstracts in the Hawaii Medical Journal which is a tremendous bene-

fit for our Medical Residents and Students. I am hoping that we can recruit a number of our younger members to organize our Newsletter. We should be able to produce 2 Newsletters a year perhaps in April or May and again in November or December. **Dr. Emilio Ganitano** will be overseeing the newsletter and is looking for volunteers to help. I am hoping that we can get regular updates from members of our local hospitals, Residency Program, Internal Medicine Interest Group Students, Hospitalist Group, and perhaps even the outer islands. We have discussed accepting advertisements in our newsletter in the Council with most members supportive of the idea. We would like to hear from you about this somewhat controversial idea. I would like to see the Newsletter used as an effective communication tool for our membership as well, to share ideas, discuss common problems, and perhaps create opportunities for each other in the future. We will be sharing a few selected articles with you from the UH Department of Medicine Residency Newsletter which is published monthly. A bulletin board or classified section may also be created. If you have any ideas about how to make our Newsletter more effective or wish to be involved with the Newsletter, please contact **Sharon** (sharonch@hawaii.edu), **Bridgett** (BSCOTT@queens.org), **Kalani** (skbrady@hawaii.edu), **Emilio** (ganitano@hawaii.edu), or me (afuruike@hawaii.edu).

Our Annual Hawaii Chapter Meeting will be coming up on Saturday, January 10, 2009 at the Ko'olau Country Club. We will be having our Associates Presentations in the morning and panel discussions in the afternoon on the Advanced Medical Home, Pay for Performance, and the Electronic Health Record. **Dr. Joel Levine** will be our College Representative this year and will be giving us a College Update to start the afternoon session and will be participating in the panel discussion on the Medical Home. As you know, the ACP has been at the forefront in the development of this concept to help support Primary Care Physicians. At 5pm we will have an informal Town Meeting followed by a Wine Tasting Reception and Awards Presentation. This year we will be honoring **Dr. Patricia Blanchette** as our Laureate Awardee.

We will be starting our Council of Young Physicians with an informal forum in the morning to recruit young physicians (or those who are young at heart) and select officers. **Dr. Sam Evans** has drafted bylaws for our organization similar to the National Council. Please contact him (samevansmd@hotmail.com) if you are interested in joining but are not able to attend the meeting. We will also be having a concurrent session in the morning to help members interested in advancing to Fellowship in the ACP. We are also hoping to start regular gatherings of physicians who are interested in Maintenance of Certification in Internal Medicine or any Subspecialties of Medicine. We hope to be able to offer Medicine Modules at our annual meetings in the future if there is enough interest. You are all invited to attend the entire day at \$150 for members and \$175 for non-members. If you are not able to attend the entire day, you may choose to register for either the morning, afternoon, or wine tasting reception and awards presentation for \$75/session for members and \$90/session for non-members. As in the past, Medical Students and Medical Residents are welcome to attend free of charge but are asked to register for the meeting. We ask that everyone register ahead of time so that we can plan accordingly for the refreshments.

We will be holding elections next year for our Council and are looking for physicians who want to become more involved in our Chapter to run for election. Please let **Kalani** (skbrady@hawaii.edu) or me (afuruike@hawaii.edu) if you are interested in serving on the Council. As you know, we have a significant shortage in Primary Care Physicians and Medicine Sub-Specialists as well with many Primary Care Physicians not taking any new Medicare Patients into their practices. Physicians in Hawaii are also aging and many are at points in their careers where Retirement is an option, even with today's troubled economy. Because of the high costs of running a practice, many of our young physicians finishing their training are unwilling to risk setting up practice in our community, especially if they have significant student loans to repay. Likewise, older physicians are not able to cut back on their practices without the risk of having their fixed costs exceed their income, especially with the significant added expense of Electronic Health Records. As an organization of Physicians serving our community, I believe that we need to be involved with planning for the needs of our community in the future, which has to start today. Specifically, we need to develop a plan to allow our younger physicians to enter into private practice with some reassurances that they will be able to succeed with the necessary dedication and commitment that all of us expect of ourselves and our colleagues. At the same time, I believe that it is important to retain the important resource of our experienced physicians who are still capable and willing to provide medical care to our community. This will require careful planning and discussion within our ACP Hawaii Chapter as well as coordination and cooperation with the other Medical Organizations within our Community. I would like to start forums or discussion groups for Physicians who have thought about Practice Transitions and would be willing to share their ideas with others.

If you have any ideas or suggestions about how we can better serve you, please give us your feedback. **Mahalo.**

Internal Medicine Interest Group

Since its start in 2006, JABSOM's Internal Medicine Interest Group (IMIG) has since grown to include over 80 student members. Enabled by support from the UH Department of Medicine and the American College of Physicians (ACP), IMIG has hosted or participated in five events this year, with four more upcoming events in 2008-09.

Still, there is a lot of room for progress. At minimum, IMIG's mission is to introduce students to career pathways in Internal Medicine. More importantly, we aim to foster relationships between students, residents and faculty in the areas of education, clinical skills, and research. Our goal is not to set up isolated interactions, but to prompt students to identify and pursue their interests.

With help from dedicated residents and faculty, our Case Presentation Workshop in June encouraged third-year medical students to learn the art of presenting before starting clerkships, and fourth year students to refine their skills. In July, IMIG participated in JABSOM's Activities Fair and helped introduce first-year students to Internal Medicine. September's Subspecialty Mixer connected students from all classes to an array of Medicine subspecialists. Most recently, **Dr. Elizabeth Tam**, Chair of the Department of Medicine, graciously opened her home to third-year and fourth-year students and a panel of Medicine residents for a workshop on residency interviews.

One of the year's highlights was the ACP Pau Hana III on September 26, 2008. Held at JABSOM's Kulia Grill, the Pau Hana provided a fun opportunity for attending physicians, residents and students to mingle outside of the hospital. IMIG also premiered its first group T-shirt (see photo), which is still available for sale in men's and women's styles (\$10 each for JABSOM students, \$12 for non-students). Contact uhimig@hawaii.edu if interested.

Upcoming events include the ACP Hawaii Chapter's Annual Scientific Regional Meeting in January and student workshops on fourth-year Medicine electives including the popular sub-internships and the third-year Medicine clerkship. Now in its third year of existence, IMIG will continue to find ways to support JABSOM's student body, challenging students to become more proactive about their careers in Internal Medicine.

Kenneth Sakata (MS4) & Tiffany Tanaka (MS3)

IMIG Co-Presidents, 2008-09

Other officers include: Jordan Lee (MS3, Vice President), Knewton Sakata (MS3, Webmaster), Ynhu Le (MS2, Treasurer), Karen Dong (MS2, Secretary), Darragh O'Carroll (MS1 Rep), Charles Rawson (MS2 Rep), Darren Teshima (MS3 Rep), Jason Pirga (MS4 Rep), and Dr. Laurie Tam (faculty advisor).



IMIG Officers at the ACP Pau Hana III: (Front row, L to R) Karen Dong, Dr. Laurie Tam, Ynhu Le, Tiffany Tanaka; (Back row, L to R) Darren Teshima, Knewton Sakata, Jordan Lee, Darragh O'Carroll, Charles Rawson, Kenneth Sakata, Jason Pirga.



Chapter Council of Young Physicians (CCYP)

In April 2005, The ACP formed the Council of Young Physicians. The ACP Council of Young Physicians supports the enhancement of the professional development and quality of life for young physicians, fosters young physician involvement in College activities, and ensures that young physicians' needs are being met. A Young Physician is defined as a physician member of ACP who is within sixteen (16) years of graduating medical school and who is not a Medical Student or Associate Member of ACP. Areas in which the Council is actively working include:

- Understanding and addressing the difficulties associated with establishing a career in internal medicine while simultaneously juggling family life,
- Ensuring that the unique circumstances of young physicians entering practice are considered as concepts such as pay-for-performance and efficiency of care remake our systems for reimbursements,
- Evaluating how resident duty hour limits are impacting junior faculty,
- Ensuring that the process for maintaining board certification consists of varied channels for assessing performance, and,
- Developing activities and pathways to leadership for Young Physicians in state chapters and nationally."

We will be organizing our Council of Young Physicians (CYP) at the annual meeting on January 10th in the morning. Please attend as we will be discussing the above guidelines, recruitment and choosing officers for the CYP. We invite all of you to participate in this.

ACP LAUREATE AWARD FOR 2009

Alvin N. Furuike, M.D., FACP

Governor for Hawaii

The Laureate Award honors Fellows and Masters of the College who have demonstrated by their example and conduct an abiding commitment to excellence in medical care, education, or research and in service to their community, their Chapter, and the American College of Physicians.

The recipient of this award shall bear the title Laureate of the Hawaii Chapter.

This award shall be presented at the Annual Scientific Meeting. The awardee should accept the recognition in person, unless excused by the Governor. The awardee is to be nominated by a process that may originate from the Chapter's Awards Committee or from any member of the Chapter. The nomination must document the attributes and accomplishments of the nominee.

The awardee should be a senior physician and Fellow or Master of long-standing, with acknowledged excellence and peer approval in the field of internal medicine. In addition, the awardee should have served the Hawaii Chapter with distinction.

It is with distinct pleasure that this year the Hawaii Chapter of the American College of Physicians presents the Laureate Award to **Patricia A. L. Blanchette, MD, FACP**. Dr. Blanchette is a long-standing and loyal supporter of the College, has rendered distinguished service to the Chapter, and has upheld the high ideals and professional standards for which the College is known.

We salute and honor her on this occasion, and we wish her and her family well in the future.

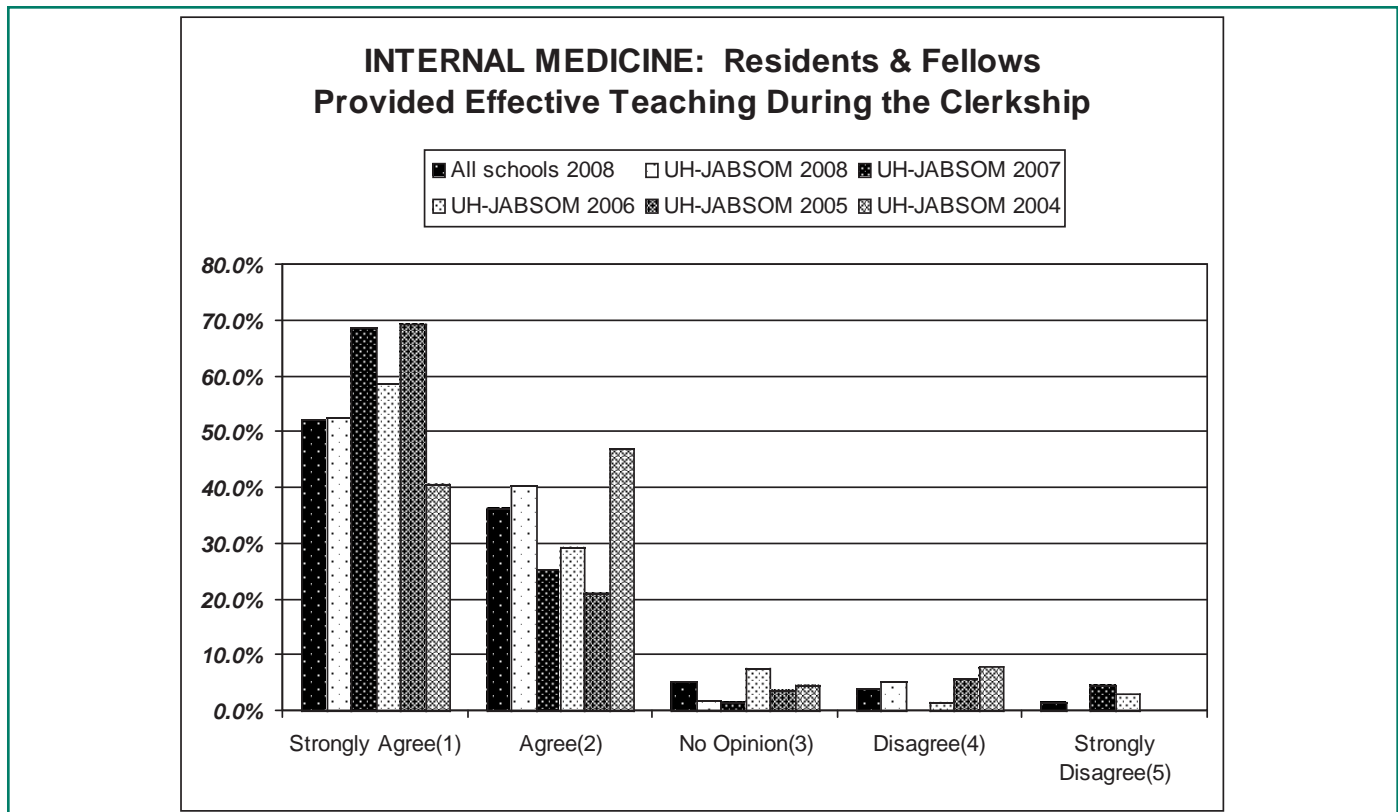
THE FOLLOWING CONTRIBUTIONS ARE FROM UH INTERNAL MEDICINE RESIDENCY NEWSLETTER

November-December 2008

JABSOM STUDENT RATE UH MEDICINE RESIDENT TEACHING AS HIGHLY EFFECTIVE

BY CYNTHIA HEW, MD, DEPUTY PROGRAM DIRECTOR

The results of the AAMC 2008 Medical School Graduation Questionnaire show that the UH-JABSOM medical students rate the teaching during their medicine clerkship by the internal medicine residents as highly effective. Each year all graduating medical students across the country complete this questionnaire. The chart is based on the responses of the UH-JABSOM 2008 graduates to the title statement. Most of these students completed their internal medicine clerkship during the 2006-2007 academic year. The residents that are reflected in the 2008 results include the current PGY-3 residents, and the 2007 and 2008 graduates. Since there are no fellows, these results apply only to residents.



	All Schools 2008	UH-JABSOM 2008	UH-JABSOM 2007	UH-JABSOM 2006	UH-JABSOM 2005	UH-JABSOM 2004
Mean	1.6	1.6	1.5	1.6	1.5	1.8
Count	11,477	57	67	65	52	64

UHIMRP RESIDENTS & SUBSPECIALTY FELLOWSHIP SUCCESS

BY ERLAINE BELLO, MD, PROGRAM DIRECTOR

There is a myth circulating about the lack of UH Internal Medicine residents' success in matching into competitive subspecialty fellowships. Disturbingly, some of our own faculty have perpetuated that myth. This myth may also be affecting applicants to our Program, especially JABSOM students who have the most exposure to these well-intentioned but misinformed faculty members. To the contrary, our residents are very successful in procuring competitive fellowship positions.

While an increasing number of our residents enter Hospitalist positions immediately after residency and we actively encourage residents to pursue primary care, the majority of our residents continue to choose subspecialty careers.

	2003	2004	2005	2006	2007	2008
Fellowship	8	7	6	5	9	7
Hospitalist	1	1	7	4	2	6
Primary Care	2	3	4	5	2	2
CMR	3	3	2	3	2	2
Other	2	2	1	0	1	0

Last year we added questions about fellowship applications to our Annual Exit Questionnaire for Level 3 residents who started their fellowships in July 2008.

Eight residents responded to these fellowship questions:

NUMBER OF PROGRAMS APPLIED TO: One person applied to five or less, none to 6-10, one to 11-20, one to 21-40, four to 41-60 and one to >60; NUMBER OF PROGRAMS TO WHICH INVITED TO INTERVIEW: Nobody had zero, two people had 1-5, one person had 6-

10 and five people had >10; NUMBER OF INTERVIEWS COMPLETED: Everyone interviewed; two people had 1-5 interviews, two people had 6-10 interviews and four people had >10 interviews. When asked to complete the statement "*The fellowship program I accepted fell into my top ___ choices,*" SIX people reported they matched into their top THREE, one person said they matched into their TEN. One person did not answer.

Residents from our current Level 3 class have also been very successful and matched to the following subspecialty fellowships for July 2009: **Teera Chentanez, M.D.** Infectious Diseases at University of Massachusetts; **Nalurporn Chokrungraranon, M.D.** Endocrinology at Good Samaritan in Phoenix, Arizona; **Takashi Hato, M.D.** Nephrology at Indiana University, **Sudumpai Jarukitsopa, M.D.** Rheumatology at Mayo Clinic, Rochester; **Meiko Kuriya, M.D.** Pain and Palliative Care at M.D. Anderson in Houston, Texas; **Yasuhiro Norisue, M.D.** Pulmonary/Critical Care at St Louis University and **Pornpoj Pramyothin, M.D.** at Endocrinology at Boston University. Also **Katsu Nishida, M.D.**, our current Chief Medical Resident at Kuakini, will be starting Critical Care at University of Utah next year.

This year's Level 2 and 3 residents are currently very busy applying for fellowships for 2010. Several are scouting out prospective sites by doing away electives. We are confident they will be equally successful as their predecessors in matching to competitive fellowships. We will continue to assist the faculty in becoming more effective and informed advisors in the fellowship application process.

DR. MORTON RECRUITS FOR PRIMARY CARE

BY RONALD MORTON, MD, QMC DEPARTMENT OF MEDICINE DIVISION CHIEF

I was able to meet with 5 of the Level 2 Residents at Wild Ginger on September 18th to discuss the challenges and rewards of being in private practice. It was a wonderful opportunity to talk with **Lana, Emily, Melissa, Joey** and **Alex** in a small group setting. We talked about the inherent fears about going into practice for yourself but also the benefits that go along with being in solo practice. The different models of practice discussed included solo, small group, and large multispecialty group. I tried to discuss the pros and cons of each model but made it clear that to be successful in today's practice environment, you need to have some understanding of the business side of medicine. I recommended that they start to read about this more "practical" side of medicine along with their academic readings. Each person has a niche in which they will feel most comfortable in; this may take the form of being an entrepreneur and opening up your own practice or, you may take the route of joining a practice and growing your patient base there. This is a very exciting time with tremendous opportunities as we have an aging population of patients as well as physicians. There is a current shortage of office-based primary care physicians state wide. 20% of the current general internists in the Department of Medicine at Queen's will be at retirement age within 5 years. I did offer to meet with each of the attendees at some later time should they desire to talk more about this area. Anyone else who may be interested can contact me at ronmd@queens.org and I would recommend that if any resident is interested in out-patient primary care, that they take my elective.

"CODE BLUE SIMTIKI! CODE BLUE SIMTIKI!" PGY-2'S HONE THEIR CODE BLUE SKILLS IN THE SIMULATION CENTER

**BY EMILIO GANITANO, M.D. INTENSIVIST
WITH ALOHA CRITICAL CARE ASSOCIATION AND ASSISTANT PROFESSOR AT JABSOM**

In August, the PGY2 Medicine residents participated in the first ever Code Blue Team Leadership (CBTL) Course at JABSOM's SimTiki Simulation Center. This course was designed as a supplement to the "traditional" method of teaching Code Blue Leadership skills. Unlike ACLS, the course focused not on the algorithms, but on the communication, resource management, and situational awareness skills that are required to effectively manage the Code Blue Team.

The CBTL Course was organized by **Dr. Ganitano**, but most of the scenarios were designed and programmed by former resident **Dr. Ronson Sato** during his research elective. CBTL is a "simulation-based" course in which residents are immersed in a simulated hospital environment and asked to fulfill the role of Code Blue Team Leader. The patients in this environment are SimMan mannequins that can simulate breathing, pulse and heart rhythm, essentially creating any medical emergency. In addition, a hospital room is recreated, complete with hospital bed, IV fluid, working "oxygen" and a fully equipped crash cart with a live defibrillator. Completing the environment is a simulated staff consisting of Code Team RN's and RT, each role played by either a resident or facilitator.

The course consisted of 8 separate scenarios. During each scenario, each resident took turns playing the various Code Team roles and approached simulated Code Blue events such as respiratory failure, VT arrest, Asystole and PEA. Using video taped replay, the residents' performances were critiqued by the course facilitators. In particular, residents were evaluated on the effectiveness of their communication skills, situational awareness, resource management and the correct implementation of ACLS protocols.

The CBTL course utilized simulation training rather than traditional didactics or bedside apprenticeship, primarily because it is a very effective and safe teaching method for team leadership and dynamics. Simulation is an active method instruction where residents "learn by doing." Simulation allows the recreation and repetition of rare medical situations. Simulation allows residents to make mistakes, see their outcome and learn from them without placing lives at risk. Most importantly, simulation makes learning fun!

The CBTL course was an overall success. One resident observed, "I felt that the course simulated various aspects present in a true code and helped to identify some of the deficiencies that we had while giving us a forum to practice our skills." From the faculty prospective, "the course safely uncovered a lot of deficiencies regarding the practical aspects of running a code and implementing ACLS. You can't fix something until you know it's broken." With the success of CBTL, the Department of Medicine is developing more simulation based courses for the near future.

In medicine, we often quote the old saying, "Watch one, do one, teach one." In the age of medical simulation training perhaps we should follow the saying of **Confucius**, "I hear and I forget. I see and I remember. I do and I understand."