Mt. Fuji (The Japanese holiest mountain. A world cultural heritage. The photograph was offered by Mr. Y. Harada.)

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I appreciate so much to Public Relation Committee especially Dr. Kawamura and all members of Japan Chapter for making such a wonderful Governor ‘s News letter only 2 years after independence from the Japanese Society of Internal Medicine (JSIM).

If ACP has a newsletter contest, this Newsletter should be recommended to be the best award. The biggest subject after I become a Governor of Japan Chapter was making it independent of the Japanese Society of Internal Medicine, and it being completely original, and managing by ourselves.

When I was acting as the President of Fellows Association of Japanese Society of Internal Medicine (FAJSIM), ACP proposed to FAJSIM to make recommendation to the FACP. We made effort to recommend FAJSIM to FACP, and then many FACP were born in Japan.

Then, Dr. Kurokawa who was president of JSIM proposed to ACP to make Japan Chapter at International Meeting of Internal Medicine in Mexico. I remember having held the talks with ACP president and staffs including Mrs. Eve at that time. But ACP did not plan to make overseas branch at that time.

Efforts of Dr. Kurokawa also changed the way—that—should—be needle to the inside of it, and the Japan Chapter was born ten years ago.

The JSIM employed Mrs. Miyamoto who has strong ability of English as a full—time secretary for ACP Japan Chapter with desk in JSIM office at the first, because there were not so many FACP in FAJSIM at that time.

However, FAJSIM itself also became large as more than 10000 members, it became difficult for various reasons to maintain as an organization independent on the occasion of corporation reform, and it became to one section of JSIM.

Concerning of ACP Japan Chapter, it was always in the shade of FAJSIM in the organization of JSIM, and was not once discussed by formal places, such as an executive board.

Since I had attended in the meeting of executive board of JSIM for long years, I knew well that there was a deep—rooted opinion that it is no good that ACP Japan Chapter is rented room without charge in JSIM office and employs secretary by JSIM.

It clarified, after audit also became severe by corporation legal revision and ACP Japan Chapter management was becoming difficult.
I also consulted with JSIM president and secretariat secretly during more than a year. As a result, I decided to be independent from JSIM, because it is extremely difficult to continue to be a stepchild of JSIM.

Since ACP Japan Chapter has no financial worries before, we are all suffered from "complacent bureaucrat syndrome" so to speak. Therefore, all committee members of the ACP Japan Chapter also needed to be mind change.

However, as a result of setting everybody's feeling to one by "the pinch is a chance" and becoming uncanny power, I think that it led to a success of the ACP Japan Chapter annual meeting of memorable full independence this year. I am thankful to all the members of Japan Chapter who concerned including Dr. Fukuhara, head of the SPC who took the lead and planned the annual meeting, and CS center staffs who newly took charge of the secretariat.

Since we also consulted with ACP on this affair for some times, they were also very glad to hear our success.

Japan Chapter is evaluated the best growing chapter not only in international chapters but whole chapters. It is often heard that why it is growing like this.

Although it cannot say as a word, each committee is continuing the steady activity that supports eagerly the education activities where everybody from a young doctor to skilled physician raises the global, comprehensive general physician who had humanitarian profession thinks the factor.

Now, in Japan, a high quality comprehensive general physician is required, these physician is the same as aims of ACP.

Using the excellent clinical education system of ACP with long history, we would like to bring up a global comprehensive physician. Don't say complete since this year was successful and don't relax attention.

The ship of ACP Japan Chapter has just still come out to the ocean.

Towards the further challenge, let's brace ourselves and progress.
For the first time, the 2013 annual meeting of the ACP Japan Chapter was held for two days in a different schedule from the annual meeting of Japanese Society of Internal Medicine. It has been finished in the prosperity by hard works of members of Scientific Program Committee. We introduce photographs and YouTube video with programs here.

**Photographs of picasa’s Web album**

We appreciate so much to Dr. Hidetoshi Furuie and his wife who took a lot of beautiful pictures.

- Saturday, 25 May, 2013 [http://p.tl/1iCq](http://p.tl/1iCq)

**Programs & Video site**

We appreciate so much to Mr. Jin Yamagishi who shoted a lot of excellent videos.

**Saturday, 25 May, 2013**

09:30-11:00

**Symposium:**

“To Fish or not to Fish” (Language: "English")

**Grand Round:**

GR1 “Infectious Disease Case Conference”

[Video site →http://p.tl/OETZ](http://p.tl/OETZ)
“Clinical Reasoning Case Conference～Exploring the thinking process of a general internist～”
Video site → http://p.tl/P3k0

Small Group Discussion:
SGD1 ~ Career Development for Young Physicians～Transition from Medical Students and Residents”
Video site → http://p.tl/OETZ
SGD2 ~ Palliative Medicine by General Internists ”

11:30-12:30
Luncheon Seminar:
LS1- How Do You Get Your Paper Published. (Language: "English") Mitchell Feldman (Chief Editor, J General Internal Medicine. Professor, University of California, San Francisco)
Video site → http://p.tl/-aO4
LS2- Snap Diagnosis (Language: "English") Hiroshi Sudo (Chief, Ofuna Chuo Hospital)

Meet The Expert:
ME1- Takaaki Ishiyama, MD, PhD (St. Mary's Health Center, St. Louis)
ME2- Masatomo Kiyota (Iizuka Hospital)
ME3- Hitoshi Hasegawa (Akita University)
“The Essence of Antithrombotic Treatment for the Internist:Adaptation, Risks of Discontinuation, and Problems with EBM Judgment and Explaining in Partnership”

13:00-14:30
Symposium:
“The Role of Internists in Cancer Care and Related Training Resources”
Video site → http://p.tl/GsFn

Educational Workshop:
WS1- “Acid-Base Electrolyte Case Vignettes for Clinicians” (Language: "English")
Video site → http://p.tl/RNR6
WS2- “Pitfalls in the Diagnosis Treatment of Rheumatic Diseases ~physical examination to differential diagnosis~”

Small Group Discussion:
SGD3- “Next Step for “The Diagnostic Reasoning New Taught” ~Let’s narrow down your list of differential diagnosis~”
SGD4- “Open your eyes to Leadership”

15:00-15:40
Poster Discussion
Video site → http://p.tl/pKhw
16:00-17:20
Keynote Lectures: "Future of General Internal Medicine" (Language: "English")
KL1: Working with Patients to Promote Behavior Change
Mitchell Feldman, MD, FACP (Chief Editor, J General Internal Medicine. Professor, University of California, San Francisco)
KL2: Connecting the dots to my Hospitalist life - What can be learned from this experience?
Takaaki Ishiyama, MD, PhD (St. Mary’s Health Center, St. Louis)

17:30-17:55
Annual Meeting Chairperson Lecture
“Return to the Mainstream of General Internal Medicine”
Shunichi Fukuhara, MD, FACP (Kyoto University, Fukushima Medical University)
Video site → http://p.tl/vN1n

17:55-18:25
Special Plan: “To honor the memory of Dr. Kazuo Endo”
Video site → http://p.tl/TFwP
Video site introduced in the memorial speech → http://p.tl/bol2

18:25-18:45
Special Session:
Celebrating Kiyoshi Kurokawa, MD, MACP, the Founder and the Immediate past president of ACP Japan Chapter, selected as “Top 100 Global Thinkers” Presented by Fumiaki Ueno, MD, MACP, Immediate past vice-president of ACP Japan Chapter
Video site → http://p.tl/arb7

11:00-15:00
15:40-18:30
Poster Exhibition (Language: "English")
Exhibit of Teaching Hospital & Graduate Education Program

19:00-20:40
Buffet reception: International Conference Hall II · III

Sunday, 26 May, 2013

09:30-11:00
Symposium:
“The Dilemma of Geriatric Medicine”
Video site → http://p.tl/QTxd
Grand Round:
GR1- “Pitfalls of History Taking in Japan”

Educational Workshop:
WS1- “Tips on Making a Diagnosis of Lymphoma for General Internists”
WS2- “An Introduction of PIPC, Psychiatry In Primary Care”
WS3- “Workshop: Travel Medicine for Internists” (Language: "English")
Video site →http://p.tl/NdNX

Small Group Discussion:
SGD1- “Milestone for Designing a Clinical Research”
Video site →http://p.tl/NdNX

11:15-12:15
“Oral Presentation of the Best Posters “
Video site →http://p.tl/F-21

12:30-13:30
Luncheon Seminar:
LS1- “Tips & Pitfalls in Emergency Medicine”
Hiroyuki Hayashi(Fukui University)
LS2- “On-Target Close Questions for The Correct Diagnosis”
Katsurou Yamanaka (Fujita Health University)
LS3- “Laboratory evaluation of rheumatic diseases～Say no to shotgun approach～”
Noboru Hagino(Teikyo University), Mitsumasa Kishimoto(St. Luke’s International Hospital)

Meet The Expert:
ME1- Virginia L. Hood (Professor. University of Vermont College of Medicine)
ME2- Mitchell Feldman (Chief Editor, J General Internal Medicine. Professor, University of California, San Francisco) (Language: "English")
ME3- Noto Hosokawa(Kameda Medical Center)

13:40-14:20
ACP Short Talk Series:
• Hiroshi Sudo(Ofuna Chou Hospital)
• Shunichi Fukuhara (Kyoto University／Fukushima Medical University)
Video site →http://p.tl/IEYP

14:30-15:00
ACP Update:
Virginia L. Hood (Professor. University of Vermont College of Medicine, Immediate Past President of The American College of Physicians)

15:00-16:00
ACP JC Business Meeting
<Interviews>
Interviews to members and students participated in the 2013 annual meeting of ACP Japan chapter

Video site → http://p.tl/pEoi

Interviews to directors (in partly) of ACP Japan Chapter

Video site → http://p.tl/Y8EY
The 2013 Annual ACP Convocation Ceremony

Takeshi Yanagawa, MD, FACP

This year the ACP Convocation Ceremony was held on Thursday, April 11th, at the Moscone Convention Center, San Francisco, California. I participated at the Ceremony for the first time as a Fellow. Although I had attended ACP’s annual meetings several times, it was my first time attending a Convocation Ceremony. One can attend this Ceremony within three years of being a member and Fellow promotion.

I received my regalia, that I ordered, before the Ceremony. Since it was my first time wearing a regalia, it was a little confusing how to wear it. Due to the help of new Fellows from other countries, I managed to wear it correctly.

There was a total of eight members from ACP Japan, that participated in the entrance procession this year. The members being promoted to Fellow were Dr. Takeshi Yanagawa, Dr. Kiyoshi Mizuno, Dr. Yuko Morishima, and Dr. Takahiro Yamauchi. The other members participating were Hiromi Ikeda, who received the International Fellowship Exchange Program Award, Dr. Fumiaki Ueno, who received the Laureate Award in 2012, the Director of ACP Japan Yoshiyasu Kobayashi, and myself, Dr. Takeshi Yanagawa.

The ceremony was conducted in a solemn atmosphere, Forty-seven new Masters were introduced and about five hundred new Fellows from the US and other countries, were introduced. The new US Fellows were introduced according to regions, and the new Fellows from other countries were introduced according to each country. As each member was introduced to receive Fellowship, a loud cheer and applause arose. Although we were a small group of eight members from Japan, we made as loud a cheer and applause as the countries with a larger number of members.

The ACP President Dr. David L. Bronson, gave an impressive speech with a video streaming. His speech made me realize the importance of understanding the patient’s feelings, and offering medical treatment...
from the patient's perspective. "Though it is small, I take leadership in an organization". Thus his speech about leadership, "A leader's job is not to control but to give service", was very informative for me.

Next year, I would like to participate at the ACP Convocation Ceremony as a photographer, for new Fellows.

**Attending the Convocation Ceremony at the Annual Meeting of the American College of Physicians in San Francisco 2013**

Yuko Morishima, MD, FACP
Department of Respiratory Medicine,
Faculty of Medicine, University of Tsukuba

I am both honored and flattered to have been invited to attend the Convocation Ceremony at the Annual Meeting of the American College of Physicians (ACP) in San Francisco 2013. ACP, the largest medical-specialty organization in the United States, has 133,000 members. ACP Japan Chapter, according to Dr. Fumiaki Ueno, was founded in 2003, the first chapter organized outside the United States. I would like to thank Dr. Kiyoshi Kurokawa, Dr. Shotai Kobayashi and all other fellows for their great efforts to give us a chance to participate in the events and activities of ACP. I hope that young physicians who lead the next generation will make the most of these opportunities and get a broad view of the profession. This is a report on my experience at the Convocation Ceremony.

The Annual Meeting of ACP, Internal Medicine 2013, was held at the Moscone Center in San Francisco from Thursday, April 11th through Saturday, April 13th. I arrived at San Francisco International Airport Wednesday evening. On Thursday I attended the Convocation Ceremony and International Reception, joined the scientific programs Friday morning, and attended ACP Japan Chapter Reception Friday evening. It was quite a hard schedule, but I had a wonderful 4 days as a new fellow. It was really meaningful for me to meet and communicate with other ACP members during those days.

At the Convention Hall, I first picked up a gown, cap and tassel which I had reserved through the internet beforehand for the ceremony. There, new fellows of many generations from various areas, in full regalia, were gathering to celebrate the occasion and take photos with their families and friends. They all looked very happy to be FACP's, and their families and friends seemed to be proud of them. I was also delighted that every ACP member who realized that I earned the fellowship this year gave me hearty congratulations. I must say that I regard this experience not only as a great honor but also as an obligation to our profession. I felt responsible to be an FACP as defined in the requirements for ACP fellowship qualification: "Being an FACP is a distinction earned from colleagues who recognize your accomplishments and achievements over and above the practice of medicine. The most important considerations for ACP Fellowship are excellence and contributions made to both medicine and to the broader community in which the internist lives and practices."
We, new fellows from Japan Chapter, marched into the Convocation Hall following Japan Chapter Governor Shotai Kobayashi, MD, MACP, and Fumiaki Ueno, MD, MACP. Many other ACP members, friends, and families were also in attendance. The speech by ACP president David L. Bronson, MD, MACP, made a strong impression on me. He spoke about the importance of treating each patient as an individual person with a different background. He showed us a short movie from the Cleveland Clinic “Empathy: The Human Connection to Patient Care (Available at http://www.youtube.com/watch?v=cDDWvj_qo8)”, which was really moving. After new fellows were introduced by each chapter and were applauded by the audience, in turn all the new fellows gave their applause of thanks to their co-workers, senior doctors, friends and family members. It reminded me how important it is not to forget how much support I have gotten from others. Finally, the ceremony was concluded by reciting the American College of Physicians Pledge.

I heard that the oldest new fellow is in his/her eighties. It was impressive that, no matter what age they are, ACP members are all enthusiastic to learn new things and pursue professional development as an internal specialist. Many scientific programs and hands-on seminars were full of physicians who want to improve their knowledge and skills. This wonderful opportunity to attend the annual meeting raised my motivation to maintain professionalism in my daily practice. I would encourage members of ACP Japan Chapter to participate in both the annual meeting and the Convocation Ceremony as a way to increase your knowledge and broaden your perspective. In closing, I would like to thank Dr. Kiyoshi Kurokawa, Dr. Shotai Kobayashi, Dr. Fumiaki Ueno, Dr. Kenji Maeda and other FACP members for enabling me to have this wonderful experience.

The 2013 Convocation Ceremony

Yaeko Ichikawa MD, PhD, FACP
Department of Neurology, The University of Tokyo

I had a great opportunity for attending the convocation ceremony held in San Francisco. To attend the ceremony, I flew to San Francisco on April 11 at midnight, and then I came back to Japan on April 14. The stay in San Francisco was very short, however, I had some wonderful experiences there.
I looked forward to attending the convocation ceremony because I had never attended the western style convocation. The convocation was conducted in full academic regalia. I was happy to wear the academic costume for the first time! Furthermore, a lot of staff and members of ACP said to me, “Congratulations!” I felt so honored and lucky to be able to attend the convocation ceremony.

As the convocation seating began, the delegation from the Japan chapter was seated between Iowa and Kansas. Each delegation stood when their chapter name was announced in alphabetical order. As the American delegations stood, they were applauded and cheered for. At first, I thought it would be silent when we stood up because our delegation from Japan was small. However, when we stood with the announcement, there was a round of applause. How generous the attendees were! We were grateful for their warm attitude. I will never forget this special moment.

On the next evening of the convocation ceremony, the Japan Chapter reception was held in the Marriott Hotel near the convention center. The number of the Japan Chapter members was small but many distinguished guests arrived. It was a pleasure to meet Dr. David L. Bronson, the 2012-2013 president of
ACP, at this reception because I was so moved by his speech and video titled “Empathy: The Human Connection to Patient Care” at the convocation ceremony. I would like to express my thanks to Dr. Kisyoshi Kurokawa, Dr. Shotai Kobayashi, Dr. Fumiaki Ueno and Dr. Kenji Maeda for organizing the Japan Chapter and this reception. I had a great time with a lot of guests and also enjoyed talking with other members of the Japan Chapter.

If it weren’t for the Japan Chapter, I wouldn’t have attended such a wonderful ceremony. If it weren’t for the Japan Chapter reception, I wouldn’t have met so many wonderful ACP members. For all those reasons, I am so grateful to be a member of ACP Japan Chapter. I hope a lot of Japanese young physicians will attend the ACP Fellows convocation ceremony.

Japan Chapter Reception

By Kenji Maeda, FACP

This year’s Japan Chapter Reception was held on Friday 12th April at a room in the San Francisco Marriott Marquis Hotel, which is located at almost a 10-minute walk from the Moscone Convention Center. The VIP guests from ACP included Dr. David Bronson MACP, the President, Dr. Molly Cooke FACP, the President Elect, Dr. Virginia L. Hood MACP, the Immediate Past President, Dr. Steven Weinberger FACP, the Executive Vice President, and many other ex-Presidents and important doctors. Also there came famous doctors who are well-known to Japanese participants, such as Dr. William Hall MACP, the past President of International Society of Internal Medicine (ISIM), Dr. and Mrs. Robert Gibbons MACP, and Dr. George Meyer FACP, the Governor of Northern California Chapter, who came all the way to encourage us in spite of his busiest hour.

The other important guests included Dr. Robert M. Centor FACP, who is well-known with his famous “Centor score” or “Centor criteria” for Strep pharyngitis, Dr. Douglas Paauw MACP from Seattle who is always giving interesting lectures concerning clinical problems in the ACP annual session, and Dr. and Mrs. Takeshi Wajima MACP, who is one of the pioneers of Japanese doctors who are working in the USA. Also we
enjoyed meeting some ACP office staff.

[Photo : Dr. Molly Cooke, the President 2013-2014(center), Dr. Kiyoshi Kurokawa (right) and me (Dr. Kenji Maeda)]

Japanese members who attended the reception were Dr. Kiyoshi Kurokawa MACP, the former Governor, Dr. Shotai Kobayashi MACP, the Governor, Dr. Fumiaki Ueno MACP, the past vice President of the chapter, Dr. Noriko Yamamoto FACP, Dr. Eiji Shinya FACP, Dr. Masahiko Saigo FACP, Dr. Tetsuya Makiishi, Dr. Yumie Ikeda who was elected through International Fellowship Exchange Program (IFEP), Dr. Chang Bok Ryun who is in the second year of residency, me (Dr. Kenji Maeda FACP) and new Fellows including Dr. Yuko Morishima FACP, Dr. Yaeko Ichikawa FACP, Dr. Takeshi Yanagawa FACP, Dr. Takahiro Yamauchi FACP (2011 New Fellow) and Dr. Kiyoshi Mizuno FACP (2011 New Fellow). Also we had a pleasure to see a few Japanese doctors who are on the training in the USA.

There were pleasant chats all around the room. We were pleased to have a wonderful reception, thanks to all of the participants. (Special thanks to Dr. Noriko Yamamoto who helped me a lot.)
[photo: from left to right, Dr. George Meyer, Dr. Fumiaki Ueno, Dr. Noriko Yamamoto, Dr. Shotai Kobayashi, Dr. Kiyoshi Kurokawa, Dr. Yumie Ikeda and her family.]
Clinical Externship at Olive View-UCLA Medical Center

Yoshinosuke Shimamura MD
Teine Keijinkai Medical Center, Department of General Internal Medicine, Sapporo, Japan

Internal medicine residency program at Olive View-UCLA Medical Center is characterized by a gradual increase in the responsibility for the patients’ care, abundant educational activities, and the passionate attending physicians. The general philosophy of the program is to allow the residents to learn in a supportive and caring environment, with significant room for independent decision-making.

They provide the residents a step-by-step increase in the responsibility for the patients’ care. Interns are closely supervised by the residents, but are encouraged to actively make decisions about the patient care. In the second year, residents determine the care of patients with the assistance of the attending physicians. By the third year, residents are expected to play a captain of the team, using the attending as a consultant. Needless to say, all residents have different capabilities and comfort levels in making independent decisions.

Many educational activities and opportunities take place throughout the year at this residency program, such as morning reports, noon conferences, and journal clubs. Daily morning reports are an excellent example of them. This learning experience consists of not only interesting cases but also basic matters of internal medicine, providing an opportunity for teaching and in-depth case discussion for the residents. Noon conferences cover all specialties and subspecialties of medicine, and provide up-to-date lectures by faculty and visiting lecturers. In addition, journal club, morbidity and mortality conferences, and grand rounds are taken place once a month.

All attending physicians hold faculty appointments at the David Geffen School of Medicine at
UCLA. Most of them are nationally known in their area of expertise as well as medical education. Having those faculties gives this residency program an excellent balance between teaching and state-of-art clinical knowledge in the specialties and in general medicine. Faculty and subspecialists get involved in the educational activities. Attending physicians are ultimately responsible for all decisions and takes an active role in patients’ care. In other words, final decisions must be done with active attending supervision although the residents are expected to directly manage the teams.

A sense of responsibility, a variety of educational experiences and great attending physicians provides an opportunity for residents to learn basic internal medicine in internal medicine residency program at Olive View-UCLA Medical Center. I learned that there is no substitute for experience, as long as good supervision is available.

Externship at Olive View Medical Center
Takeshi Uemura, MD

July 16, 2013

It was only after becoming a physician that I realized that gaining a clinical externship in the US after medical school is extremely difficult. Whenever I checked residency training websites, I saw that “hands-on US clinical experience is required to apply to this program”, which was disheartening. However, last spring I had the good fortune to receive an email from Dr. Harumi Yano via the ACP Japan mailing list, which mentioned that the ACP Japan chapter had started providing an externship opportunity at Olive View Medical Center (OVMC), a UCLA-affiliated hospital. I immediately applied to the program and was thrilled to be notified that I would be the first ACP member who did the externship at OVMC.

Last summer, I was welcomed at OVMC, a 377-bed county hospital, located in Sylmar, California, a 30-minute-drive away from downtown Los Angeles. Reflecting the surrounding neighborhood, the hospital functions as an acute care center mainly serving minority patients. Thus, many of the patients are poor immigrants without insurance who often come to the hospital with advanced disease states due to the poor health care accessibility. Among the UCLA-affiliated teaching hospitals, OVMC enjoys very high evaluation
rates from UCLA medical students because of its passionate educational atmosphere. At such a great educational hospital, I spent three weeks with the general internal medicine (GIM) teams and then one week with the palliative care consult team.

Usually in the US, the GIM team takes care of almost all of those who are admitted to a hospital with non-surgical conditions. Subspecialty teams, such as gastroenterology, usually manage inpatients on a consultation basis, leaving basic medical management to GIM teams. In OVMC, a GIM team consists of one attending physician, one senior resident (PGY2 or 3), and two interns (PGY 1). A typical day for an intern begins very early in the morning (6-7AM) with making the pre-round of his/her patients. Then, the interns gather at 9AM to join for the morning report, in which one of the residents presents an interesting case. Under the chief resident's coordination, the residents actively participate in the discussion. After the one-hour morning report, an attending physician comes to the ward to do an attending round. Interns present their patients to the attending physician and a very educational discussion ensues. Surprisingly, the round usually lasts more than two hours, even if they are just seeing eight patients, because most of the round time is spent educating the residents. After the attending round, interns change orders according to the discussion during the round. At noon, the interns attend an informative noon lecture provided by one of faculties while having lunch. In the afternoon, interns finish progress notes and sign out sheets. If it is an on-call day, interns also take history and physicals on newly admitted patients. Around 5-6 PM, interns sign-out their patients to a night float team to go home. As an extern, I shadowed one of the interns and participated in all the conferences and lectures. A few days after my training began, I was allowed to take history and physical on new admissions to able to help interns.

During the last week of the externship, I joined the palliative care consult team. The palliative care team is relatively new at OVMC and there was only one physician who is in charge of the team. The other team members include nurse practitioners, registered nurses, social workers, and chaplains. The team works on a consulting basis and goes the round every day. Even though most of the patients were cancer patients, there were also non-cancer patients including a young male revived to a vegetative state after CPA from cocaine induced AMI. I was very impressed when I followed the chaplain who visited every hospital room to ask if the patients needed any help. Some patient’s faces lit up when the chaplain came into the room and they asked her to read from the Bible. They read a passage and prayed together, turning the depressive hospital atmosphere into a sacred one. I observed that when patient are suffering, they often seek spiritual healing as well.

The four weeks in OVMC fled fast. I am grateful for the warm welcoming that I received from the hospital staffs. Especially Mr. Belisle, an assistant program manager of the Department of Medicine, was especially helpful and aided in making the experience most fruitful. Dr. Wali, a program director in the Department of Medicine, was an amazing doctor with thorough medical knowledge, a deep humanity and an enthusiasm for education. Through the externship in OVMC, I gained some insight into how residents (or interns) function in a team. By seeing firsthand how well education is integrated into daily patient care, I
was able to confirm my passion for residency training in the US.

The Match this year allowed me to gain a position in an internal medicine residency program in the US, which was my long-cherished dream. I believe that in the extremely competitive process of the Match, the experience at OVMC definitively worked to my advantage. I hope this invaluable externship program continue helping many ACP members who are interested in the US. I would like to conclude this report by extending my gratitude toward Dr. Yano, who granted me such a great opportunity.

Awards received by the ACP Japan Chapter in 2012-2013

1. **The Chapter Excellence Award**

   The ACP Japan Chapter won the 2012 Chapter Excellence Award again this year. (as for the prize money 500 dollars)
2. **The 2013 Evergreen All-Star Award**

The Japan Chapter received the 2013 Evergreen All-Star Award recognizing our long-term participation in the program. The criteria for this honor included having at least 5 nominations and 2 winners during the 20 years of the program plus having at least one program running for 3+ years.

In John Tooker Evergreen Award, the ACP Japan Chapter has gotten this prize in the following items.

- **2007:** International (Translation of Observer "Weekly")
- **2008:** International (Translation of Annals)
- **2009:** International (Western style case discussion for ACP Associate and medical student members)
- **2010:** Membership recruitment/Diversity (Women's Committee)

3. **The 2013 Special Recognition Award**

In addition, the Japan Chapter also received Special Recognition for our 2013 initiative called, "English version of the Governor's Newsletter by the Japan Chapter".
Editor's postscript

There are many topics in this governor’s newsletter. The annual meeting held at Kyoto University went very well. We wanted to share the atmosphere of the meeting through a photograph album and YouTube video with all the members who couldn't attend. We would like them to feel the splendid atmosphere when students, residents, young physicians, and specialists are discussing issues with each other. Furthermore, the reports by members who participated in the 2013 Convocation Ceremony of Internal Medicine will encourage young physicians to aim at becoming Fellows in the future. Members who have already become Fellows may remember the emotions that they experienced when they attended the Convocation Ceremony. In addition, through the Clinical Externship program that was begun under the leadership of Dr. Shotai Kobayashi (governor of the ACP Japan Chapter), two young physicians were able to work at Olive View-UCLA Medical Center this year. Their reports were very interesting and heartening.

Finally, we reported on the Awards received by the ACP Japan Chapter this year. We think that the activities of the ACP Japan Chapter are highly evaluated by headquarters.

The Public Relations Committee is going to publicize the activities of the ACP Japan Chapter throughout the country and globally by utilizing communication methods such as the governor’s newsletter, the website, and Facebook.

Public Relations Committee:
Chair; Mitsunobu Kawamura, Vice-Chair; Soichiro Ando
Members; Masashi Izumiya, Yasuo Oshima, Hirotaka Onishi,
Kenichi Shimane, Masanobu Tsuchiya, Hiroshi Nakamura,
Hiroshi Bando, Masahiko Maeda, Machiko Matsunashi, Hiroshi Yoshida