

# National and chapter news

## 2016 Councilor Meeting

AΩA held its biennial councilor meeting April 4–5 in Burlingame, California. Fifty-four councilors attended, making it the largest AΩA councilor meeting.

The meeting began with Executive Director Richard Bynny, MD, FACP, and Board President Robert Atnip, MD, welcoming the councilors. Dr. Bynny highlighted AΩA's national priorities, which include making the role of councilor a leadership opportunity; expanding opportunities to elect members; developing a professional social network; and discovering better ways to support the chapters and councilors.

Dr. Atnip shared a moving example of the very real responsibility AΩA members have to be prepared and present when called upon to serve the suffering.

Serving as moderator for the meeting, Lynn Cleary, MD, councilor, State University of New York Upstate Medical University College of Medicine, and chair of the Councilor Task Force took over.

Councilor Task Force members, Dr. Cleary, Sheryl Pfeil, MD, The Ohio State University College of Medicine; Mark Mendelsohn, MD, University of Virginia School of Medicine; Regina Gandour-Edwards, MD, University of California Davis School of Medicine; and Richard Gunderman, MD, Indiana University School of Medicine, worked closely with councilor participants throughout the two-day conference to develop best practices to help guide AΩA's 129 chapters across the country. (Councilor and task force member Charles Griffith, MD, University of Kentucky School of Medicine, was unable to attend due to inclement weather.)

During the afternoon of the first day, the councilors were broken into five groups that task force members and AΩA staff visited to discuss budget and fundraising; maximizing student engagement; expanding resident membership; banquets and visiting professorships; and the role of the chapter in the medical school.



Lynn Cleary, MD, serves as moderator of the meeting.



Debbie Lancaster and Doug Paauw, MD.

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The second day began with the task force representatives from each of the previous day's groups sharing a summary of the topics discussed, the group's experience, and suggested best practices.

AQA staff members Dee Martinez, chief of staff, and Jane Kimball, director, Chapter and Member Services, visited with the councilors to get a better understanding of what the national office is doing well, what it can be doing better, and improvements that can be made to increase efficiency, effectiveness and visibility for the councilors and chapters. Three priorities were identified:

1. Develop a listserv for councilors to ask questions and share best practices.
2. Provide more member information on the AQA website, and aid in finding missing and relocated members.
3. Restructure the AQA Councilor Handbook to be more of a resource guide that includes sample budgets and

template letters. Also develop an online library/repository for councilors to share forms, ideas and sample documents.

Retiring Managing Editor of *The Pharos* Debbie Lancaster was recognized and honored by the councilors for her many years of service to AQA, and her unending support of the chapters, councilors and students.

The meeting concluded with each of the councilors sharing a recent accomplishment at their Chapter.

Many of the councilors commented that they appreciated the opportunity to be with such a diverse and experienced group, and said they would be returning to their institutions full of new ideas and ways to engage their students, deans, and community.

The Councilor Task Force will continue its work of identifying best practices, and will guide the national office staff during the implementation of the three identified priorities.



Bradley Barth, MD, left, and Richard Gunderman, MD.



Lynn Cleary, MD, left, and Debbie Lancaster.

## Excerpt from Dr. Atnip's opening remarks

### *Be Worthy to Serve the Suffering*

It is far better to think of it as the first day of spring training than the last day of the World Series. As the explorer Sir Frances Drake said in 1578, "There must be a beginning to any great matter, but the continuing unto the end, until it be thoroughly finished, yields the true glory."

We have not yet achieved true glory. Everyone here knows that. Especially everyone who puts their hands on patients, and vows that we will try to relieve their suffering.

For the last few months, I have been actively treating a patient whom I have known for almost 10 years. Originally, I did a femoral to tibial artery bypass for severe vascular disease and limb-threatening ischemia. He did very well until about six months ago when he came to see me with new problems with the same leg. I began treating him, but it seemed that at every step, things did not go as planned. I could not relieve his pain or treat the condition effectively. He was in and out of my office, and in and out of the hospital. His surgical wound became necrotic and broke down. The pain was incapacitating.

Trying to find answers, I began ordering tests, at first methodically, but finally in desperation. One afternoon, the radiologist called me to say that a CT scan showed that my patient had metastatic cancer. Further workup showed multiple metastases and an unresectable primary lesion, all previously undiagnosed. Other than the notorious failure-to-thrive, my patient had not shown signs or symptoms that would have pointed to this diagnosis.

When I met with him and his family to discuss this shocking development, they were upset but stoic, and he vowed to beat the cancer.

He made it out of the hospital and went to a rehab facility to get stronger so he could begin chemotherapy. Luckily, it was the rehab hospital where I see wound care patients.

On a recent afternoon, his neurotic surgical leg wound eroded into his bypass graft and he began to hemorrhage massively. As I stood there holding pressure on his leg while he lay on his blood-soaked sheets and sobbed, we looked into each other's eyes. I will not be able to forget the look of sorrow, terror, and hopelessness that I saw on his face, or the look of grief and despair that gripped his wife. He was transferred back to the main hospital, and that evening I amputated his leg above the knee.

Why do I tell this story of failure and misery? Because suffering exists, and even our supreme, well-intended efforts are not always enough to defeat it.

As individuals, and as a profession, we have made unimaginable progress against suffering and disease. It is the best time in history to be a physician. But in a sense, we start over again every day. What succeeded yesterday may be of no avail today.

I ask you to reflect on the motto and mission of AΩA. I cannot think of a better way to illustrate how important it is for us to have an organization like AΩA, and to be active in it. To embrace its ideals. To devote ourselves to serving the suffering. To teach our students and residents how to use skill with selflessness and caring. To teach the need for lifelong learning, and the need to pass on what we know to each other and to future generations. To do it all with relentless effort and relentless humility. To single out those who do these things exceptionally well, so we can learn from each other, and pull each other up to higher ground.

It is a monumental and unyielding task, but we are called to do it. It is what we have chosen to do, and therefore we must do—every day—whatever it takes to "Be Worthy to Serve the Suffering."

## University of South Carolina School of Medicine Greenville added as 129th active AΩA Chapter

I had the unique privilege of enjoying the graduating student awards ceremony for our inaugural class. The event was made even more special by our ability to announce our first AΩA members consequent to an undoubtedly expedited approval of our AΩA Chapter. And then, of course, there was my selection for AΩA membership—personally meaningful more than you can imagine.

— Jerry Youkey, MD, Dean

On April 27, the Alpha Omega Alpha Honor Medical Society Board of Directors approved the establishment of the Gamma South Carolina chapter at University of South Carolina Greenville School of Medicine.

The first USC School of Medicine Greenville commencement with AΩA students was held May 5, with the first class of AΩA inductees wearing their green, white, and gold honor cords.

The USC School of Medicine Greenville is a four-year medical program developed as a partnership between the University of South Carolina and the Greenville Hospital System. Since 1991, Greenville Hospital System has provided clinical education to third- and fourth-year medical students of the USC School of Medicine Columbia. In 2009, the decision was made to expand to a four-year medical school. USC School of Medicine Greenville welcomed its charter class of 50 students in 2012. The school received full LCME accreditation on February 23, 2016.

USC School of Medicine Greenville is one of only a few U.S. medical schools to require all of its medical students to receive full EMT certification (200+ hours of training), and spend 12 hours a month serving the community in



USC School of Medicine Greenville Dean Jerry Youkey, MD.

an EMT capacity. It also fully incorporates wellness and lifestyle medicine, including the importance of physical activity, stress management, and nutrition throughout the curriculum.

After completing the AΩA site visit, Executive Director Richard Bynny, MD, FACP, and AΩA Board Member Alan Robinson, MD, recommended establishment of an AΩA chapter due to extraordinary support from the dean and dean's staff; a plan to elect students using academic performance preceding selection based primarily on evidence of leadership, volunteerism, highest ethical standards, and professionalism; a guarantee to create a chapter characterized by active commitment to service (not just the honor of being selected); and commitment to engaging faculty, community physicians, residents, and student AΩA members in the chapter's activities.

The founding dean of USC School of Medicine Greenville is Jerry Youkey, MD (AΩA, University of South Carolina School of Medicine Greenville, 2016, Faculty). The AΩA Councilor is Robert Gates, MD (AΩA, Marshall University School of Medicine, 2000, Resident), and the Secretary Treasurer is Donald W. Wiper III, MD (AΩA, Case Western Reserve University, 1990).

USC School of Medicine Greenville is the ninth AΩA chapter chartered at a new U.S. medical school in the last four years.



The first USC School of Medicine Greenville AΩA inductees, May 5, 2016.