Frontiers (Fall 2011) - Primary Care: The Key to Coordinated Healthcare

University of Tennessee Medical Center

University of Tennessee Graduate School of Medicine

Follow this and additional works at: https://trace.tennessee.edu/utgradmed_frontiers

Part of the Medicine and Health Sciences Commons

Recommended Citation
University of Tennessee Medical Center and University of Tennessee Graduate School of Medicine, "Frontiers (Fall 2011) - Primary Care: The Key to Coordinated Healthcare" (2011). Frontiers Magazine. https://trace.tennessee.edu/utgradmed_frontiers/18

This Magazine is brought to you for free and open access by the University of Tennessee Graduate School of Medicine at TRACE: Tennessee Research and Creative Exchange. It has been accepted for inclusion in Frontiers Magazine by an authorized administrator of TRACE: Tennessee Research and Creative Exchange. For more information, please contact trace@utk.edu.
Primary Care.  
The Key to Coordinated Healthcare.
Choosing Your Primary Care Physician: A Partner for Life

Pediatrics: Care Dedicated to Children’s Health and Well-Being

The Impact of Concussion

The Art of Learning, the Wisdom of Adapting

By the Numbers: Access to Primary Care

Continuing Education Course Calendar

About the Cover
Primary care physicians partner with patients to provide for their healthcare needs. This ability to coordinate comprehensive care among individual patients and specialists is the KEY to better access to healthcare, increased satisfaction with care, and overall improved health.

Scan the code to visit our website and learn more about these topics and read other issues of Frontiers magazine.

utmedicalcenter.org/about-us/news-publications-media/frontiers-magazine/
Dear Alumni and Friends,

We are especially pleased to focus this issue of Frontiers on Primary Care medicine. When it comes to your overall health, having a primary care physician is key. Under the umbrella of primary care, where you will find family medicine, internal medicine, pediatrics, and general medicine, all of the physicians share one thing in common - they are the center for all of your healthcare needs.

Understanding how to choose your primary care physician, finding health information, and having quick access to your physician are components of the partnership provided to every patient at the University of Tennessee Medical Center.

We have positioned ourselves to address the ongoing challenges of providing primary care services to our patients and to educate the physicians who will provide primary care for the next generation. Here at the University of Tennessee Medical Center and the UT Graduate School of Medicine, we are proud of our heritage and history in primary care. As you will see in the upcoming pages, we continue to expand the areas where we provide these physicians in the community as well as provide advanced technology and tools for educating the next generation of physicians.

From the beginning, we have been dedicated to educating and training primary care physicians. We are proud of the significant number of practitioners who have received their specialty training in primary care and have chosen to remain in Tennessee (particularly East Tennessee), the impact they have on our community, and their commitment to treat and care for our neighbors.

As the region’s only academic medical center, we take seriously our responsibility to not only care for our patients today but to ensure an adequate supply of the health professionals for the future. I hope you enjoy this edition of Frontiers that explores the many facets of primary care. If you would like additional information about primary care or any of our other programs, please feel free to explore at www.utmedicalcenter.org.

Sincerely,

Joseph R. Landsman, Jr.
President and Chief Executive Officer
University Health System, Inc.

The nation is facing an overall shortage of doctors, and of most concern is the impending deficit of primary care physicians. While this shortage will be felt throughout the nation, it will most impact those areas already underserved, including many in East Tennessee. When access to primary care physicians is inadequate, the health of our citizens is threatened, raising the incidence of diabetes, heart disease, cancer and other maladies.

The UT Graduate School of Medicine is proud to be part of the solution by graduating doctors in family medicine and internal medicine with the vast majority of them remaining in Tennessee to practice. As their new facility is being built, leaders in our department of Family Medicine are exploring implementation of a new, efficient care model called “medical home,” where patient-centered care is the hallmark. Likewise, faculty in the department of Internal Medicine are reviewing their educational programs to encourage residents to complete part of their training in rural areas.

In addition, we are expanding opportunities for medical students, so more of them can learn from our excellent faculty and gain exposure to East Tennessee. We believe this approach will help ensure many will remain here for residency and eventually stay here to practice. Generally speaking, people who go to medical school and do their residencies in the same locations have greater than a sixty percent chance of practicing in that general location. For us, adding an undergraduate degree from the University of Tennessee, Knoxville increases those odds to as high as seventy-five percent.

This edition of Frontiers illustrates the wide range of care provided by primary care physicians and offers suggestions on how to choose the right physician for you. Access to medical care is essential for your health and that of all Tennesseans, and your first step should be choosing a primary care doctor who will be a partner for life.

Sincerely,

James J. Neutens, PhD
Dean
UT Graduate School of Medicine

James J. Neutens, PhD
Dean
UT Graduate School of Medicine
Family medicine physicians treat the entire family from newborns to the elderly. Internal medicine physicians generally only treat patients 18 years of age and above. Both types of physicians, by and large, have long-term relationships with their patients and many are community-based physicians as opposed to hospital-based.

Most primary care physicians concentrate on treating patients in their offices. They manage acute, simple issues to multiple chronic issues in all aspects of medicine on an outpatient basis. When necessary, they coordinate patient referrals to specialists or inpatient treatment.

When a patient needs hospital treatment, many primary care physicians partner with inpatient physicians called hospitalists. This close relationship allows the primary care physician to focus on caring for his patients in the office while the hospitalist concentrates on acute inpatient treatment. The communication between the two physician groups is immediate and ongoing. The physicians partner and work as a team to ensure patients receive the best care before, during, and after their hospital stays.

“Whether you choose a family practitioner or an internist, your primary care physician needs to be someone you respect and trust, someone you feel you can work with to maintain your health and to help you through any tough medical condition that might arise throughout your life,” says Guy L. Smoak, MD, family medicine physician.

Where Do You Start?

What should you look for in a primary care physician? A good first step is to make a list of the things that matter the most to you. Then go back over that list and prioritize them.

A physician’s background and credentials are good indicators of training and experience, but there are other important things to consider when you’re choosing a primary care physician. A great way to quickly narrow your search is by talking to others about their own experiences with physicians in the area. Recommendations from friends and co-workers who have had good experiences with their own physicians can quickly give you a short list of potential providers from which to choose. It may be necessary to consult with several practitioners before you find that perfect fit for you.
Pediatrics are doctors who have a specialized medical focus on children’s diseases and ailments from birth to early adulthood. Spanning less than two centuries, pediatrics is a young specialty developed in the mid-19th century. Prior to the development of pediatrics, the treatment of children’s diseases was included within family medicine and general medicine. Since the mid-1980s, pediatrics has evolved into various subspecialties including pediatric critical care, gastroenterology, surgery, allergy, and immunology.

Children’s health requires specialized attention to their growing bodies and unique medical needs. Because children usually express their concerns differently than adults, they need attentive and well-trained specialists who know how to examine and treat them in ways that help them relax and cooperate. Pediatricians make sure your child is maturing into a healthy adult.

The American Academy of Pediatrics and the American Board of Pediatrics were established in 1930 and 1933, respectively. The American Board of Pediatrics certifies that all pediatricians have completed four years of medical school and at least three years of pediatric residency. Once pediatricians are certified, they can expand their practices to more specialized areas of children’s medicine.

Pediatricians practice in children’s hospitals, academic medical centers, and private medical practices. In order to meet children’s needs, the University of Tennessee Medical Center offers children’s services through the Center for Women and Children’s Health and the comprehensive Neonatal Intensive Care Unit (NICU). The medical center’s NICU is designated by the state as a Level 3 regional referral center, the highest designation, for high-risk infants and as the high-risk obstetric referral center for the region. The NICU is an optimal place to care for infants at risk and provides mothers and infants with the most advanced healthcare.

In addition to the NICU, the medical center has a Pediatric Intensive Care Unit (PICU) staffed by pediatric nurses who care for patients involved in trauma through age 13. These healthcare professionals are trained in critical care, open hearts, renal transplant, and all diseases of children. With a family centered approach, they provide both physical, developmental, and emotional support for the child as well as for the caregivers. The medical center is also the region’s designated prenatal center, which specializes in the diagnosis and treatment of certain life-threatening conditions of pregnant women, fetuses, and neonates.

“One of the most gratifying aspects of pediatrics is watching a young person progress through infancy, childhood, adolescence, and into young adulthood and send me a college graduation announcement. It is truly humbling and gratifying that parents and children have allowed me to be a part of their lives during this maturation process from infancy to young adulthood.”

- Larry E. Rodgers, MD, pediatrician

Pediatricians
Care Dedicated to Children’s Health and Well-Being

By Bonnie Strzykalski

For a customized referral to a primary care physician, please call Healthcare Coordination at 305-6970 or toll-free at 1-877-UTCARES.
The Impact of Concussion

These Family Medicine doctors know what is impacting their patients:

Concussion.

By Amanda F. Johnson

An academic medical center encourages important and relevant research, including studies of head trauma and sports medicine. Four dedicated specialists, Tom Terrell, MD, associate professor and associate director of the Sports Medicine Fellowship; Ken Bielak, MD, associate professor and Sports Medicine Fellowship director; Irf Asif, MD, assistant professor; and Lara Quinlan, MD, Sports Medicine fellow, are conducting a study to determine if children and young adults could be genetically predisposed to more severe concussions and if genetics could indicate recovery time from a concussion.

Concussion is an injury to the brain due to rapid rotation of the head caused by trauma to the head or other part of the body. Concussion can have long-term effects.

Terrell and his colleagues are attempting to find a biological link to the association between genetic makeup and concussion risk in athletes. The study is funded by the National Operating Committee on Standards for Athletic Equipment and is the largest prospective cohort study of its kind in the U.S. It has the participation of 15 colleges and universities in the Southeast and about 2,500 athletes in collision sports.

“We believe the study will reveal if there is genetic predisposition to more severe concussions,” Terrell says. “These findings may potentially determine how quickly athletes should return to play or whether they should play collision sports at all. For those who have suffered concussions, our findings might provide promising information about the risk for additional concussions and the duration of recovery time. With larger long-term studies, we may be able to prevent concussions and predict who is vulnerable to more severe concussions.”

Concussion Clinic: Serving Athletes in the Community

In October, the Department of Family Medicine opened the UT Concussion Management Program at its new Sports Medicine Clinic within University Family Physicians. The clinic offers primary care sports medicine services in non-operative orthopaedic injuries, prevention of cardiac arrest in young athletes, and other primary care needs of active individuals.

Visit HTTP://GSM.UTMCK.EDU for more information.
More and more, people who are being treated for a medical condition want to know as much as possible. And if you’re already busy navigating the healthcare system, it can be very difficult to research the complexities of a disease, its treatment, and the possible side effects at the same time.

At the University of Tennessee Medical Center, we put experts, resources, and programs together to offer our patients and their families the best and most current health information. From the definition of a disease to the latest treatment options, education for patients and consumers is vital to care management and good outcomes.

The University of Tennessee Medical Center, the region’s only academic medical center, makes several avenues available to people in need of health information. Programs like the Consumer and Patient Health Information Service, Skylight Access, and physicians and staff nurses provide education through one-on-one discussion, videos and reading materials, and simulations demonstrating best care practices.

The Consumer and Patient Health Information Service is offered through the UT Graduate School of Medicine’s Preston Medical Library. Professional medical librarians are available to answer questions, assist with websites, and provide health information free of charge. You have access to information about diseases and medical terms, how to stay healthy, how to find a support group, and much more. The staff of the Preston Medical Library helps patients and families get a better idea of their situation by providing full, current answers to any questions they might have. For online access to the Consumer and Patient Health Information Service, visit http://tennessee.edu/healthinfo.

Martha Earl, assistant professor and medical librarian with Preston Medical Library, shows patients and families a variety of informational resources to assist with understanding diagnosis and treatment of disease.

The librarians also play an active and integral role in educating today’s physicians, physicians to be, and other members of your healthcare team. They serve an academic advisory role, providing relevant educational materials and essential resources for medical education programs, research, and physician support. The services of the library are also utilized by attorneys, students, and others including public library librarians as close as East Tennessee and as far as South Africa. Only an academic medical center could provide the unique patient services, educational support, and professional resources offered through Preston Medical Library. To find out more, visit http://gsm.utmck.edu/med_library/main.cfm.

Patient education also is available through Skylight Access, an on-demand interactive technology available in our...
inpatient rooms that makes it simple and easy for patients and families to view educational videos about stroke, heart disease, mother and baby care, and many other topics. More than 100 videos can be watched at the viewers’ own pace, and comprehensive questions at the end of each program let viewers assess their knowledge of what they’ve learned.

The medical center’s patient education committee works hand-in-hand with the UT Graduate School of Medicine to oversee, organize, and manage the educational material that is distributed in inpatient and outpatient settings. Composed of experts - nurses, medical librarians, a literacy consultant, and many others - the committee ensures that up-to-date, evidence-based, best-practice information is made available to our patients and their families.

At the University of Tennessee Medical Center, we understand how important it is for patients, families, and consumers to be well informed. The programs we have in place offer a variety of resources to help those we serve get the information they need. Our goal is to improve the experience of patients and families by providing access to information enabling them to participate in plans of care and make well-informed decisions and to support physicians and other medical professionals, resulting in better trained healthcare teams, increased patient safety, and better health outcomes for patients.

Mary Ellen Bond-Cox, Pharm. D., pharmacist, educates a patient on vascular disease by demonstrating techniques and providing educational material.

A Medical Library for the Community

In 1966, the Howard P. Preston Medical Library opened its doors at the UT Graduate School of Medicine as an on-site resource for physicians, researchers, and students.

Preston Medical Library and Learning Resource Center soon became a nationally and internationally recognized academic medical library, and today, Preston Medical Library is growing and changing again to meet the needs of the community. It will expand to include the UT Graduate School of Medicine Health Information Library. The library will empower patients, facilitate collaborative learning and make medical information more readily available to all, free of charge.

You can help. The UT Graduate School of Medicine has embarked on a capital campaign for the new Health Information Library. Through participation in the campaign, you can support an institution that ensures quality healthcare, education, and community outreach are always available.

The capital campaign has a fundraising goal of $4.1 million. Already, residents of our region have committed $1.8 million through all levels of giving. For more information, please contact the Office of Development at the UT Graduate School of Medicine at 865-305-6611, development@utmck.edu, or visit http://gsm.utmck.edu/legacy.

If there’s one thing the UT Graduate School of Medicine does well (and there are many), it’s educate. Today, faculty physicians teach about 250 physicians and medical students every day. They build on more than five decades of knowledge and experience to reach their learners, and over the years, they’ve faced the challenge of adapting to the evolution of learning styles.

Just as students change, so too do methods of educating them. Lecture as the only means of instruction is a thing of the past. Adapting to the need, faculty physicians combine standard methods of instruction with simulation and technology to bring about effective, results-driven educational programs.
Simulation

Simulation training imitates life. It is the cornerstone of an evolving paradigm in healthcare training, one that the UT Graduate School of Medicine embraced in 2007 by opening the Center for Advanced Medical Simulation. Today, the center is growing into a new 6,400-square-foot facility to enhance its role as a regional healthcare education resource and dynamic tool for resident education.

Through simulation, healthcare teams learn and practice entire operations and interventional procedures and are evaluated by experts before ever meeting a patient.

Learning through simulation demonstrates how competency includes both knowledge and application of knowledge. It presents the ability to objectively assess this higher-level competency, a vital factor in the continuing efforts to improve the quality and safety of care for patients here and throughout East Tennessee. For more information about the Center for Advanced Medical Simulation, please visit http://gsm.utmck.edu/simulation/main.cfm.

Family Medicine: Relationships and Technology

Family medicine is a face-to-face specialty combined with state-of-the-art technology. “Family physicians continually learn through relationships with their patients,” says Gregory Blake, MD, chair of the Department of Family Medicine. “The patient encounter allows for application and expansion of the academic process.”

The faculty also uses technology as instructional tools. In addition to teaching through simulation, they teach the use of electronic medical records to access patient information efficiently from smartphones and iPads.

An innovative new family medicine building will also impact operations and interventional procedures. The facility will have state-of-the-art academic space and two new patient care suites.

“This clinical design will allow teaching and learning in a team setting and increase efficiency of our teams and continuity of care for patients,” says Blake.

The new suites will also be equipped with internet-accessible computers.

“In simulation, we teach invasive procedures in a zero-risk environment,” says Mark Rasnake, MD, Internal Medicine’s residency program director. “Residents also learn to work in teams in a constructive environment.”

Although increasing demands on the time of residents and fellows require faster delivery of information, sometimes nothing replaces one-on-one learning, lively discussion, and didactic methods. The faculty in internal medicine maintain these proven teaching styles.

“While electronic systems can improve patient safety and care, they sometimes slow down other processes,” Rasnake says. “We continue to be creative in the ways we teach and sensitive to the impact of techniques we engage.”

For five decades, faculty physicians at the UT Graduate School of Medicine have adapted to evolving methods of instruction to ensure the tradition of excellence in education continues. Learning and teaching are in sync, resulting in highly trained physicians offering expert care in the community.

Simulation centers are used in the simulation center to practice fundamental laparoscopic surgical skills. The rich tradition of educational excellence in the department of Internal Medicine started with dedicated physicians, including Richard Obenour, MD, vice chair of Internal Medicine, and Al Beasley, MD, former chair of the department.

Tools such as the laparoscopic box trainer are used in the simulation center to practice fundamental laparoscopic surgical skills.

Past and present education leaders of the department of Family Medicine include Gregory Blake, MD, chair; George Shucklett, MD, former chair; John Eaddy, MD, emeritus professor; Amy Barger-Stevens, MD, Family Medicine residency program director; and (joint) Amy Koonen, DO, Emergency Medicine residency program director.

Some of the Family Medicine residents include Candice Stewart, MD; Adam Lett, MD; Benjamin Rae, DO; Amy Battaglia, DO; and Celeste Harnden, MD.

Visit HTTP://GSM.UTMCK.EDU for more information about the residency and fellowship education programs and the Center for Advanced Medical Simulation.
Each year, about 70% of the residents and fellows in primary care programs at the UT Graduate School of Medicine choose to practice in Tennessee.

Chances are when you need to see your primary care physician, you are able to do so in a few days’ time. The physician’s office is probably near your home or office, so the whole process is relatively convenient.

Healthcare numbers can be daunting. They tell us that soon America - and particularly rural areas of the country - will experience a severe shortage of physicians. Despite the fact that the number of medical school graduates will modestly increase over the next decade, the demand for physicians is sharply increasing due to the growing and aging population. Healthcare reform also will continue to increase the need for physicians as more people are insured.

Healthcare numbers can also be positive. They can reflect an upward trend, like those from the University of Tennessee Medical Center and UT Graduate School of Medicine.

These numbers tell a story of success. They show a group of leaders, physicians, and dentists who are proactive in addressing needs in healthcare. Through educational and clinical programs, the UT Graduate School of Medicine and the University of Tennessee Medical Center are making positive strides to improve access to primary care and other specialties.
It’s True: Numbers Don’t Lie.

While the numbers convey that accessing primary care in the future will become more difficult, they aren’t telling the whole story. Numbers from the University of Tennessee Medical Center and UT Graduate School of Medicine tell a different story. They demonstrate the institutions’ continuing commitment to making quality healthcare accessible for the people of Tennessee.

The BIG Picture

The UT Graduate School of Medicine’s commitment to improving access to primary care in the state has been proven over its 50 years, as more than 600 family medicine and internal medicine physicians have graduated and entered practice.

In addition to the primary care facilities that share the campus with the medical center, residents in East Tennessee can access primary care at more than two dozen facilities connected to the University of Tennessee Medical Center Primary Care Network in seven regional counties. That’s an increase from the three counties being served by primary care practices in the network in 2005.

Practices in the Primary Care Network now are located throughout these East Tennessee counties:

- Anderson
- Blount
- Campbell
- Jefferson
- Knox
- Loudon
- Sevier

In addition, three after-hours clinics in Knoxville, Seymour, and Sevierville also serve residents of Blount, Loudon, Knox, and Sevier counties.

Widespread Impact:

Educational Programs

Together, the UT Graduate School of Medicine’s Family Medicine and Internal Medicine residency and fellowship programs are filling the gap of primary care physicians in the country and in Tennessee, making primary care available to more people.

According to the American Academy of Family Physicians and other sources, a family medicine or internal medicine physician will see an average about 20 - 25 patients each day.

In its 50-year history, the UT Graduate School of Medicine has graduated 600 primary care physicians. Of these, 70% - about 415 primary care physicians - chose Tennessee in which to establish practices.

Clinical Programs

Access to primary care not only is influenced by the educational programs of the UT Graduate School of Medicine, but it also is made easier through the Primary Care Network of the University of Tennessee Medical Center.

On the campus of the medical center are family physicians, internal medicine, and obstetrics and gynecology patient centers. Combined, these three centers provide for about 35,000 patient visits each year, supported by more than 120 physicians.

In addition to the primary care facilities that share the campus with the medical center, residents in East Tennessee can access primary care at more than two dozen facilities connected to the University of Tennessee Medical Center Primary Care Network in seven regional counties. That’s an increase from the three counties being served by primary care practices in the network in 2005.

Educational Programs

600
GRADUATES IN PRIMARY CARE

70%
STAYED IN TN

50 YEARS

Visit HTTP://GSM.UTMCK.EDU for more information.

“Primary care has a great impact on healthcare in Tennessee. Here, we build relationships with our patients and see the whole view of their healthcare. I love the continuity of primary care.”

McMillen credits the UT Graduate School of Medicine for making an impact on the accessibility and quality of primary care in the state.

“Because of the UT Graduate School of Medicine, we make a real impact on families.”

Fall 2011  | 19

Jenna McMillen, MD, Faculty Internal Medicine, Turkey Creek, Knoxville

“IT’s all because of the UT Graduate School of Medicine that we’re all here,” says Jenna McMillen, MD. “The residency programs draw people who become good doctors. Then they stay in Tennessee.”

McMillen is one of the 70% of residents and fellows in the UT Graduate School of Medicine primary care programs who choose to stay in Tennessee to practice medicine after they graduate. She finished the Internal Medicine residency program just months ago and now is caring for patients at Faculty Internal Medicine, Turkey Creek, in Knoxville.

McMillen also experienced medical training in New York and other areas of the country, but came back to Tennessee.

“I couldn’t wait to get back to the state,” she says. "Primary care has a great impact on healthcare in Tennessee. Here, we build relationships with our patients and see the whole view of their healthcare. I love the continuity of primary care."
On September 19, the UT Graduate School of Medicine broke ground on a new facility for the Department of Family Medicine on the University of Tennessee Medical Center campus. Over 150 people turned out to hear Congressman James J. Duncan Jr., UT Lady Vols softball co-head coaches Ralph and Karen Weekly, James J. Neutens, PhD, dean of the UT Graduate School of Medicine; and Gregory H. Blake, MD, chairman of the Department of Family Medicine, speak about the history and the future of primary care at UT Graduate School of Medicine.

The Department of Family Medicine serves Knox County and 21 surrounding counties for a total of 1,360,201 people, and as Dr. Neutens pointed out at the groundbreaking, that population is aging. Healthcare demands will continue to increase alongside the change in demographics, creating a need for more physicians and expanded facilities. The Department of Family Medicine, with the help of a committee chaired by Randal L. Dabbs, MD, is preparing to meet this challenge through a $6 million campaign to renovate and expand its facilities. For more information about the Family Medicine Building Campaign and the philanthropic opportunities available, please contact the Development Office at 865-305-6611, development@utmck.edu, or visit http://gsm.utmck.edu/legacy.

Not only does this physical renovation and expansion mean more space to serve more patients; it also means more of the very best primary care physicians in East Tennessee. As with any educational program, the quality of an institution’s facilities is a key decision-making factor for prospective residents. Since over 70% of our current family medicine residents continue to practice medicine in East Tennessee after graduating, any advantage in attracting quality residents to the UT Graduate School of Medicine and the Department of Family Medicine means better care for the patients we serve.

For information about the Department of Family Medicine and other programs of the University of Tennessee Medical Center, contact the Development Office at 865-305-9515, or visit http://gsm.utmck.edu/development.

Family Medicine Breaks New Ground

OPPORTUNITIES | News from the University of Tennessee Medical Center and UT Graduate School of Medicine Development Office

OPPORTUNITIES | Volunteer Profile: Theresa Wright

Working in an emergency department is not on most people’s preferred list of ways to spend their time. But for Theresa Wright, a University of Tennessee Medical Center Auxiliary Volunteer, that is the place to be on Thursday afternoons.

Wright found her way to the University of Tennessee Medical Center Emergency Department just over 10 years ago via a community aerobics class. She was a recent retiree from Pellissippi State Community College, where she’d taught English, and was interested in becoming involved in the community. Wright followed the advice of a friend in the aerobics class who told her she should consider volunteering at the medical center. Ten years later, she has become an integral member of the Emergency Department’s team.

During those 10 years, she has seen the Emergency Department grow into a major community resource and the only Level 1 Trauma Center in the region. Wright has chosen to volunteer between 12:30 and 5:30 p.m., because that is when she is most needed in the busy 50-bed unit. Her duties are extensive and include helping patients and families as they check in, transporting patients in wheelchairs, and “making the rounds.” As she makes her rounds, she visits the Emergency Department’s patients and their families - talking with them to soothe nerves, offering coffee and water, providing warm blankets, a friendly face, and a calming presence in a stressful situation.

In addition to her role in the Emergency Department, Wright has been an active member of the medical center’s Volunteer Auxiliary. Currently, she is serving as the Auxiliary’s treasurer. She speaks with great pride of the Auxiliary’s philanthropic support of the Medical Center which exceeds $1 million.

Summing up her experience as a volunteer, Wright says, “Anybody who volunteers can realize that you get more out of it than you give. It is such a pleasure to help someone else.” She knows from firsthand experience that volunteering helps one’s own health too: the work keeps one active and involved.

To learn more about the volunteer opportunities available, please contact the Volunteer Office at 865-305-9515.
John Dougherty, MD, is presented with a check from the Second Annual Forget Me Not 5K Race, raising more than $11,300, with proceeds benefiting Not 5K Race organizers: Angela Wampler, Rosemary Quillen, Steve Harrelson, and McKenzie Wampler. The Forget Me Not 5K is held each spring in Loudon City to show the community’s support and compassion toward the thousands of individuals affected with Alzheimer’s. This year’s race raised more than $31,300, with proceeds benefiting the Alzheimer’s research endeavors of the Cole Neuroscience Center.

The last two decades have experienced a generational gap in philanthropic giving. That’s why our mission is to encourage a younger population to get involved in the community and learn ways they can make a difference and give back,” says Janet Testerman, co-chair of UThrive 2 Survive. “Through unique, fun events, our goal is to promote a cause that has impacted every life in some capacity, and to help those facing the challenges of cancer.”

Thad Cox, owner of Ash’s Wines & Spirits, joins Testerman as co-chair with the following committee members: Will Bellamy, Logan Brummitt, Brandon Clarke, Elizabeth Cox, Erin Donovan, David Farmer, Shauna Frazer, Elizabeth Gaertner, Vicki Gillenwater, Susan Hunzinger, MD, Kent Kilpatrick, Tiffany Midyett, Heidi Orme, Brandon Parks, Suzie Plank, and Terry Turner.

UThrive 2 Survive held a Blind Wine Tasting on September 1 at the home of Eddie Mannix and Oktoberfest at the Bearden’s Beer Market on September 18, which were both great successes. A range of other fund-raisers will be held throughout the medical center campus.

Guardian Angel

Tony Cooper, a certified nursing assistant in the medical center’s Neuro/Stroke Unit, has earned the extraordinary recognition of receiving 11 Guardian Angels. Tony has been given these special tributes by patients and family members in gratitude for his exceptional care. Each Guardian Angel represents a donation that was made to the medical center in Tony’s honor.

Registered nurse Michelle Engle, also in the medical center’s Neuro/Stroke Unit, had the honor of being our 1,200th Guardian Angel recipient. Michelle was recognized by Mr. and Mrs. Jeff Valentine for her exceptional care during their time at the medical center.

To date, the Guardian Angel program has honored more than 1,200 employees and volunteers throughout the medical center and UT Graduate School of Medicine. These honorariums have resulted in more than $102,000 being donated to aid patient care, education, and research programs throughout the medical center campus.

For more information about the Guardian Angel program, please contact the Development Office at 865-305-6611 or development@utmck.edu.
The University of Tennessee Graduate School of Medicine offers the following educational courses this winter for physicians, researchers, allied health providers, and other healthcare professionals seeking continuing education.

**December 7**

- **Approved for AMA, AAPA, and ACPE credits and CEUs**
- **Early Intervention: Closing the Gap on Heart Attack and Stroke Care**
  University of Tennessee
  Conference Center
  Knoxville, Tennessee
  tennessee.edu/cme/MIStroke2011

  Diseases of the heart were the leading cause of death in Tennessee in 2009, and the state ranked third in stroke-related mortality. An opportunity exists to improve care of our patients and education of our physicians. This educational activity will address key issues relating to cardiovascular and cerebrovascular diseases. It will offer presentations by regional, state, and national experts on managing time with stroke patients, using innovations in treatment, and assessing cardiovascular risk in the community.

**January 21**

- **Approved for AMA, AAPA, and ACPE credits and CEUs**
- **Eighth Annual Hematology Conference: Update on Selected ASH Topics**
  University of Tennessee
  Conference Center
  Knoxville, Tennessee
  tennessee.edu/cme/Hematology2012

  The annual hematology update occurs as soon as possible after the American Society of Hematology (ASH) international conference, while allowing time for the featured speakers to develop unique presentations combining their areas of expertise with new information garnered from the ASH presentations. The conference provides updates on studies and recent advances in the treatment of blood cancers, including hemostasis/thrombosis, chronic lymphocytic leukemia, myelodysplastic syndromes, multiple myeloma, and malignant lymphoma.

**March 10, 2012**

- **Eighth Annual Diabetes Regional Conference**
  University of Tennessee
  Conference Center
  Knoxville, Tennessee
  www.tennessee.edu/cme/Diabetes2012

**Save the Date!**

**March 10, 2012**

- **Eighth Annual Diabetes Regional Conference**
  University of Tennessee
  Conference Center
  Knoxville, Tennessee
  www.tennessee.edu/cme/Diabetes2012

To register or for more information about these courses, call 865-305-9190 or visit our website at www.tennessee.edu/cme

---

**THE UNIVERSITY OF TENNESSEE MEDICAL CENTER EARNs NATIONAL RECOGNITION FOR QUALITY PATIENT CARE**

The University of Tennessee Medical Center has achieved the highly coveted Magnet status from the American Nurses Credentialing Center’s (ANCC) Magnet Recognition Program®. The Magnet designation is granted only to those organizations that demonstrate sustained excellence in nursing care.

**Congratulations to our talented nurses, physicians and staff for all the hard work and dedication to make the University of Tennessee Medical Center the first and only hospital in the Knoxville region to achieve Magnet® status!**

For more information about Magnet and the benefits, please visit utmedicalcenter.org/magnet

---

The Magnet Recognition Program®, ANCC Magnet Recognition®, Magnet® names and logos are registered trademarks of the American Nurses Credentialing Center. Journey to Magnet Excellence™ and National Magnet Conference® are trademarks of the American Nurses Credentialing Center. All rights reserved.

---

**THE UNIVERSITY OF TENNESSEE MEDICAL CENTER**

**Wisdom For Your Life.**
Wisdom for Your Life.
1924 Alcoa Highway
Knoxville, Tennessee 37920-6999

www.utmedicalcenter.org