















Cover Photographs

Top Left: 2015 UW Graduates Matthew Wilson and Laura Tedrick at the Boise VA in Boise, Idaho.

Top Right: 2015 White Coat ceremony in Moscow, Idaho.

Bottom Left: Dr. James Branahl with students.

Bottom Middle: 2015 TRUST Scholars in Moscow, Idaho

Bottom Right: Melissa Roop at the Boise VA in Boise, Idaho.

UW Medicine

Dear Colleagues, Policymakers and Supporters:

This year, you again offered outstanding support for and participation in the WWAMI program. We believe WWAMI is the nation's best program for training future health professionals through a high-quality, collaborative, cost-effective, efficient, approach. The result: our students receive a world-class preparation for careers in medicine. *U.S. News & World Report* again ranked the UW School of Medicine the nations' top primary care medical school —in no small part thanks to the WWAMI program. Our goals remain to provide the best training for our students and prepare a health workforce for our region to serve ALL patients—in urban or rural, remote and frontier locations.

Your continued support for and pride in WWAMI are important indications of the program's success and continued potential. There is nothing more important than preparing a strong health workforce to serve our region. Through your support, you play a vital role in making that happen.

In August 2015, we began the new 2015 WWAMI medical school curriculum at all six WWAMI sites. Students started with a multi-week clinical immersion experience—intensively learning the clinical skills and professional habits to serve them throughout their careers. Students told us the experience helped them bond with classmates and teachers, gave them the basic clinical skills to be useful in ongoing weekly clinic and hospital experiences, helped them understand and acculturate into the medical profession, and as they entered classes, provide clinical context for learning the basic sciences. For their first 18 months, students spend a full day each week learning and practicing clinical skills in a community primary care clinic and in workshops. This is in addition to their hospital-based Colleges training with a faculty mentor and small group of peers.

Basic science classes began in September. These are organized into integrated blocks offered for 3 to 9 weeks, depending on the subject matter. The first block is Molecular and Cellular Basis of Disease and the second is Invaders and Defenders—which covers infectious diseases, immunology, dermatology, and related topic areas. Continuous threads (anatomy and imaging, pathology, pharmacology) and themes (communication, diversity, health equity, primary care and more) are interwoven throughout the blocks.

These new courses are very different from those our students experienced in the past. Students come to class prepared for active discussions. They spend a maximum of four hours in the classroom, hearing some lectures but also participating in active interchanges in large and small group settings.

Our intention is to train motivated, self-sufficient learners who will thrive in a world of rapidly changing medical knowledge and who are able to access information in the evolving approaches of 21st century medicine. The new curriculum is based deeply in technology—in the preparation materials they use, interactions with faculty and students region-wide, and accessing information to build medical knowledge and conceptual understanding.

The development and implementation of the new curriculum has been a remarkable process. Each week, faculty from across our WWAMI sites talk on extended conference calls to plan, review materials, discuss test development and results, collaborate, and share successes and lessons. The 2015 WWAMI curriculum is the first curriculum in the nation to represent the collaborative efforts of faculty, staff, students and others across many states in building and implementing an entire common curriculum.

Thank you for your interest in and support of the WWAMI program. Together, we are changing healthcare and medical education for the nation and world. We look forward to our continued work together.

Sincerely,

Paul G. Ramsey, M.D. CEO. UW Medicine

Executive Vice President for Medical Affairs and Dean of the School of Medicine,

University of Washington

Suzanne M. Allen, M.D. MPH

Sujanne M Alle

Vice Dean for Academic, Rural Regional Affairs

Paul G. Ramsey, M.D.

IDAHO STATEWIDE REPORT 2015 TABLE OF CONTENTS

1)	WWAMI Idaho Contacts	1
2)	WWAMI Idaho Fact Sheet	12
3)	Maps	13
4)	WWAMI: The Medical School for the Northwest	15
5)	WWAMI Idaho Medical Education Program Overview	18
6)	WWAMI Idaho Pre-Clinical Programs	20
_	missions	
	undations Phase of the Medical Education Program	
	anish for Health Professionalsmary Care Practicum	
	eceptors for the Primary Care Experience	
	edical Student Outreach	
	ernational Opportunities	
	omedical Research	
Rι	ral Underserved Opportunities Program (RUOP)	27
7)	WWAMI Idaho Clinical Programs	32
Th	ird Year Clinical Rotations	32
	urth Year Clinical Rotations	
	e Idaho Track	
W۱	WAMI Rural Integrated Training Experience (WRITE)	34
	rgeted Rural/Underserved Track (TRUST)	
W۱	NAMI Graduates	38
	WAMI Idaho Rate of Return	
	aho Rural Physician Incentive Program	
Fu	ture of Medical Education in Idaho	44
8)	WWAMI Regional Programs - Idaho Community Outreach & Pipeline Programs.	45
lda	aho WWAMI Outreach to High School Students	45
14	aho WWAMI Pre-Med Summit	
	mary Care Summer Shadowing Opportunity for Pre-Med Students	45
Pr		
Pri Ida	aho WWAMI Mini Medical School	46
Pri Ida W		46 47

9) Graduate Medical Education (GME) Programs - Residency	53
University of Washington Family Medicine Residency Network	53
Family Medicine Residency of Idaho, Inc.	58
Idaho State University Department of Family Medicine	66
Kootenai Clinic Family Medicine Coeur d'Alene Residency	
Boise Veterans Affairs Medical Center	75
Idaho/UW Advanced Clinician Psychiatry Residency	77
UW Boise Internal Medicine Residency	
Residency Program and Rotation Sites in the WWAMI Region	81
10) WWAMI Idaho Students and UWSOM WWAMI Idaho Faculty	88
WWAMI Idaho Students E-12 – E15	88
${\bf Idaho\ Physicians\ with\ University\ of\ Washington\ Clinical\ Faculty\ Appointments\ \dots}$	
11) University of Washington School of Medicine Programs	95
Health Sciences Libraries	95
MEDCON Telephone Education and Referral Service	97
MEDEX Northwest Physician Assistant Program	98
Biomedical Informatics and Medical Education	
Center for Equity, Diversity and Inclusion	100
School of Public Health	
WWAMI Rural Health Research Center	
WWAMI Center for Health Workforce Studies	
Telehealth Program	108
12) Directory of University of Washington School of Medicine Administration	111
13) Appendix	113
2015 WWAMI Admissions Report	113
Students Trained at WWAMI Clerkship Sites	

WWAMI IDAHO CONTACTS

Idaho WWAMI Program Directory

(as of October 2015)

ADMINISTRATION - IDAHO WWAMI

Medical Program - Foundations Phase - University of Idaho Idaho WWAMI Medical Program University of Idaho

875 Perimeter Drive, MS-4207 Student Health Building, Room 304 Moscow, ID 83844-4207 (208) 885-6696 Fax (208) 885-7910

Jeffrey Seegmiller, Ed.D. (208) 885-6696

Director/Assistant Dean, UWSOM

jeffreys@uidaho.edu

Marlane Martonick (208) 885-6696

Program Manager marlanem@uidaho.edu

A. Patrice Burgess, M.D. (208) 861-3500

Special Assistant to the President for Governmental Relations and Medical Education

University of Idaho

322 E. Front Street, Suite 590

Boise, ID 83702 Fax: (208) 334-2344 burgess@uidaho.edu

Medical Program - Patient Care Phase Idaho WWAMI Medical Education Program

322 E. Front Street, Suite 590

Boise, ID 83702 (208) 364-4544

Fax: (208) 334-2344

Mary Barinaga, M.D. (208) 364-4548 Assistant Dean, Regional Affairs & Idaho TRUST Co-Director barinm@uw.edu

Adriana Olivas (208) 364-4544

Program Operations Administrator

adrioliv@uw.edu

Kacie Bitzenburg (208) 364-4546

Program Coordinator kacibitz@uw.edu

Linda Clark

(208) 422-1000 Ext. 7642

Medical Student Coordinator
Idaho WWAMI Medical Education Program
c/o Boise VA Medical Center
Medical Service Office
500 W. Fort Street
Boise, ID 83702

Fax: (208) 422-1319 linda.clark4@va.gov

ADMISSIONS COMMITTEE - IDAHO

Rodde Cox. M.D.

(208) 377-3435

WWAMI Idaho Admissions Committee Boise Physical Medicine & Rehabilitation Clinic 1000 N. Curtis Road, Suite 202

Boise, ID 83706 Fax: (208) 377-3147 rsmnttcox@yahoo.com

Lance Hansen, M.D.

(208) 847-4495

WWAMI Idaho Admissions Committee

Bear Lake Memorial 467 Washington Street Montpelier, ID 83254 Fax: (208) 847-4336 hansenlance@yahoo.com

Glenn Jefferson, M.D.

(208) 746-1383

WWAMI Idaho Admissions Committee

Valley Medical Center 2315 8th Street Grade Lewiston, ID 83501 Fax: (208) 746-6348

gjefferson@valleymedicalcenter.com

Leanne Rousseau. M.D.

(208) 818-5166

WWAMI Idaho Admissions Committee

Healthweave, PLLC

17302 West Deer Ridge Road

Post Falls, ID 83854 Fax: (208) 777-9271

rousseau.leanne@gmail.com

CLERKSHIP COORDINATORS - IDAHO

Kristin Algoe, M.D. (208) 263-2173 Obstetrics & Gynecology

Sandpoint Women's Health 423 N. 3rd Street, #210 Sandpoint, ID 83864 Fax: (208) 263-7441 kkalgoe@gmail.com

Helen Parsons (208) 263-2173

helen.parsons@bonnergeneral.org

Kelly Anderson, M.D. The Pediatric Center 3430 Washington Parkway Idaho Falls, ID 83404 Fax: (208) 523-0028	(208) 523-3060	Pediatrics
andekell@gmail.com Natalee Snarr nsnarr@cableone.net	(208) 523-3060	
Frank Batcha, M.D. St. Luke's Family Medicine 1450 Aviation Drive, #100 Hailey, ID 83340 Fax: (208) 788-9238 fbatcha@slhs.org	(208) 788-3434	Family Medicine TRUST/WRITE Site
Stacie Bering, M.D. Kootenai Medical Center 2003 Kootenai Way Coeur d'Alene, ID 83814 Fax: (208) 666-3949 stacieeden@mac.com	(208) 666-2000	Palliative/Chronic Care
Melisa Carper mcarper@kh.org	(208) 625-6028	
Jonathan Bowman, M.D. Terry Reilly Health Services 207 1st Street South Nampa, ID 83651 Fax: (208) 466-5359 jbowman@trhs.org	(208) 466-7869	Family Medicine TRUST/WRITE Site
James Branahl, M.D. Boise VA Medical Center Medical Services Office, 111 500 W. Fort Street Boise, ID 83702 Fax: (208) 422-1319 james.branahl@va.gov	(208) 422-1325	Internal Medicine
Linda Clark linda.clark4@va.gov	(208) 422-1000 Ext. 7642	
Perry Brown, M.D. Family Medicine Residency of Idaho 121 E. Fort Street Boise, ID 83712 Fax: (208) 367-6123 perry.brown@fmridaho.org	(208) 381-6102	Pediatrics
Kaye Nelson Fax: (208) 367-6123 kaye.nelson@fmridaho.org	(208) 954-8741	

Kevin Clifford, M.D. Saint Alphonsus Regional Medical Center 1055 N. Curtis Road Boise, ID 83706 Fax: (208) 367-4051	(208) 367-4030	Palliative/Chronic Care
keviclif@sarmc.org Margie Zamzow, R.N. margzamz@sarmc.org	(208) 367-4030	
Ronald Cornwell, M.D. Advanced Surgery Center of Idaho 404 E. Elm Street Caldwell, ID 83605 Fax: (208) 459-0380 rwc22@uw.edu	(208) 459-0028	Surgery
Carol Lunt cmlunt@advancedsurgeryofidaho.com	(208) 459-0028	
Rodde Cox, M.D. Boise Physical Medicine and Rehabilitation Clinic 1000 N. Curtis Road, Suite 202 Boise, ID 83706 Fax: (208) 377-3147 rsmnttcox@yahoo.com	(208) 377-3435	Rehabilitative/Chronic Care
Melissa Honsinger bpmrclinic@gmail.com	(208) 377-3435	
Tim DeBlieck, M.D. Family Medicine Residency of Idaho 777 N. Raymond Street Boise, ID 83704 Fax: (208) 367-6123 kim.stutzman@fmridaho.org	(208) 367-6030	Family Medicine
Kaye Nelson kaye.nelson@fmridaho.org	(208) 954-8741	
David Denton, M.D. Pocatello Children's Clinic 1151 Hospital Way, Building F Pocatello, ID 83201 Fax: (208) 239-3434 dentdavi@isu.edu	(208) 232-1443	Pediatrics
Heather Gunter hgunter@pocatellochildren.com	(208) 232-1443	
Megan Dunay, M.D. Boise VA Medical Center Medical Services Office, 111 500 W. Fort Street Boise, ID 83702 Fax: (208) 422-1319 megan.dunay@va.gov	208-422-1000 Ext. 7003	Geriatrics/Rehab/Chronic Care
Linda Clark linda.clark4@va.gov	(208) 422-1000 Ext. 7642	

Scott Dunn, M.D. Family Health Center 606 N. 3rd Avenue, #101 Sandpoint, ID 83864 Fax: (208) 263-4580 drdunn@fhcsandpoint.com	(208) 263-1435	Family Medicine TRUST/WRITE Site
Mari Cower mcower@fhcsandpoint.com	(208) 263-1435	
Erich Garland, M.D. Idaho Falls Neurology 3920 Washington Parkway Idaho Falls, ID 83404 Fax: (208) 227-0159 egarland@ifneurology.org	(208) 227-0158	Neurology
Beckie Tolbert beckie@ifneurology.org	(208) 227-0158	
David Hall, M.D. St. Luke's Payette Lakes Medical Clinic 211 Forest Street McCall, ID 83638 Fax: (208) 634-7212 dhall@slhs.org	(208) 634-2225	Family Medicine TRUST/WRITE Site
Jessica Tankersley itankersley@slhs.org	(208) 634-2225	
Ryan Hardy, M.D. Advanced Surgery Center of Idaho 404 E. Elm Street	(208) 459-0028	Surgery
Caldwell, ID 83605 Fax: (208) 459-0380 313ryry@gmail.com		
	(208) 459-0028	
Fax: (208) 459-0380 313ryry@gmail.com Carol Lunt cmlunt@advancedsurgeryofidaho.com Robert Holman, M.D. Kootenai Surgery Associates 700 Ironwood Drive, #304 Coeur d'Alene, ID 83814 Fax: (208) 666-3949	(208) 459-0028 (208) 667-1588	Surgery
Fax: (208) 459-0380 313ryry@gmail.com Carol Lunt cmlunt@advancedsurgeryofidaho.com Robert Holman, M.D. Kootenai Surgery Associates 700 Ironwood Drive, #304 Coeur d'Alene, ID 83814	,	Surgery
Fax: (208) 459-0380 313ryry@gmail.com Carol Lunt cmlunt@advancedsurgeryofidaho.com Robert Holman, M.D. Kootenai Surgery Associates 700 Ironwood Drive, #304 Coeur d'Alene, ID 83814 Fax: (208) 666-3949 bpholman@gmail.com Melisa Carper	(208) 667-1588	Surgery Family Medicine TRUST/WRITE Site

Michael Koszalka, M.D. (208) 381-3088 Obstetrics/Gynecology St. Luke's Maternal Fetal Medicine 333 N. 1st Street, Suite 150 Boise, ID 83702 Fax: (208) 381-4314 koszalkm@slhs.org Cara Cordova (208) 381-3077 cordovac@slhs.org Palliative/Chronic Care Peter Kozisek, M.D. (208) 381-1615 St. Luke's Health System 190 E. Bannock Street Boise. ID 83712 Fax: (208) 381-5141 kozisekp@slhs.org Alys Falcone falconea@slhs.org Louisa Lavy, M.D. (208) 625-5100 Neurology Kootenai Clinic, Neurology & Sleep Medicine Clinic 700 Ironwood Drive, #158 Coeur d'Alene, ID 83814 Fax: (208) 625-5101 llavy@kh.org Heidi Dana (208) 625-5100 hdana@kmc.org Norman Litchfield, M.D. (208) 422-1108 **Psychiatry** Boise VA Medical Center 500 W. Fort Street Boise. ID 83702

Boise, ID 83702 Fax: (208) 422-1241 norman.litchfield@va.gov

Linda Clark (208) 422-1000 Ext. 7642

linda.clark4@va.gov

Kim Lynch, M.D. (208) 422-1136 Surgery

Boise VA Medical Center 500 W. Fort Street

Boise, ID 83702 Fax: (208) 422-1243 kim.lynch@va.gov

Linda Clark (208) 422-1000 Ext. 7642

linda.clark4@va.gov

Daniel Meulenberg, M.D. (208) 263-1435 Family Medicine TRUST/WRITE Site

Family Health Center 606 N. 3rd Avenue, #101 Sandpoint, ID 83864 Fax: (208) 263-4580 djm@fhcsandpoint.com

Mari Cower (208) 263-1435

mcower@fhcsandpoint.com

Jonathan Shupe, M.D. Kootenai Clinic Family Medicine Coeur d'Al 1919 Lincoln Way, #315 Coeur d'Alene, ID 83814 Fax: (208) 625-6001 jshupe@kh.org Melisa Carper mcarper@kh.org	(208) 625-4255 lene Residency (208) 625-4255	Family Medicine
Kim Stutzman, M.D. Family Medicine Residency of Idaho 777 N. Raymond Street Boise, ID 83704 Fax: (208) 367-6123 kim.stutzman@fmridaho.org Kaye Nelson kaye.nelson@fmridaho.org	(208) 367-6030 (208) 954-8741	Family Medicine
Shaun Summerill, M.D. Pocatello Children's Clinic 1151 Hospital Way, Building F Pocatello, ID 83201 Fax: (208) 239-3434 ssummeri@yahoo.com Heather Gunter hgunter@pocatellochildren.com	(208) 232-1443 (208) 232-1443	Pediatrics
Sara Thomson, M.D. Saint Alphonsus Medical Group 1072 Liberty St.,Suite 100 Boise, ID 83704 Fax: (208) 367-7806 thomsons@sarmc.org Katie Shevlin	(208) 367-3237 (208) 367-3237	Obstetrics & Genecology
shevlink@sarmc.org	(206) 307-3237	
Stephen Vincent, M.D. Idaho Falls MS Center 2353 Coronado Idaho Falls, ID 83404 Fax: (208) 552-4856 neuroman@aol.com	(208) 552-4823	Neurology
Mandy McClure/Christina Calloway officemanager@idahofallsmscenter.com	(208) 552-4823	
Zachary Warnock, M.D. Intermountain Medical 1951 Bench Road, Suite B Pocatello, ID 83201 Fax: (208) 238-0009 warnockz@famprac.com	(208) 238-1000	Family Medicine
Shelly Stranski stranskis@famprac.com	(208) 238-1000	

Jessica Wasielewski, M.D.

(208) 322-1730

Emergency Medicine

Neurology

Idaho Emergency Physicians/Saint Alphonsus Health System

323 E. Riverside Drive Boise, ID 83642

Fax: (208) 322-8996

jessicanbell@hotmail.com

Amanda Straight (208) 947-0418

astraight@iep.org

Jackie Whitesell, M.D. (208) 367-7272

Saint Alphonsus Idaho Neurology

901 N. Curtis Road, #403

Boise, ID 83706 Fax: (208) 367-7111

jackiewhitesell@gmail.com

Brenda McCord (208) 367-7272

brenmcc@sarmc.org

James Whiteside, M.D. (208) 381-7335 Neurology

St. Luke's Neurology Clinic

300 Main St., #100 Boise, ID 83702 Fax: (208) 381-4138 whitesij@slhs.org

Ali Brooks (208) 381-7335

brooksa@slhs.org

Rourke Yeakley, M.D. (208) 384-9022 Emergency Medicine

Emergency Medicine of Idaho/St. Luke's Health System

250 Bobwhite Court, #340

Boise, ID 83706 Fax: (208) 388-1683 ryeakley@emidaho.com

Susan Coats (208) 384-9022 Ext. 100

scoats@ondemandidaho.com

GRADUATE MEDICAL EDUCATION

Family Medicine Programs

Family Medicine Residency of Idaho

777 N. Raymond Street

Boise, ID 83704

(208) 954-8740

Fax: (208) 514-2501

Ted Epperly, M.D. (208) 954-8744

President & CEO Fax: (208) 947-1761 ted.epperly@fmridaho.org

Justin Glass, M.D. (208) 954-8740

Program Director - Boise Fax: (208) 514-2501 justin.glass@fmridaho.org

8

David Schmitz, M.D., F.A.A.F.P. (208) 514-2500 Ext. 5167

Chief Rural Officer & Program Director -

RTTs

Fax: (208) 947-1761

dave.schmitz@fmridaho.org

Kim Stutzman, M.D. (208) 954-8740

Associate Program Director

Fax: (208) 514-2501

kim.stutzman@fmridaho.org

Michelle Robin (208) 954-8744

Executive Administrator Fax: (208) 947-1761

michelle.robin@fmridaho.org

Holly Taniguchi (208) 954-8740

Residency Program Coordinator holly.taniguchi@fmridaho.org

Idaho State University Family Medicine Residency

465 Memorial Drive Pocatello, ID 83201 (208) 282-4508 Fay: (208) 282-4818

Fax: (208) 282-4818

Brandon Mickelsen, D.O. (208) 282-4704

Interim Program Director bmick@fmed.isu.edu

Greg Harding (208) 282-4713

Residency Administrator gregh@fmed.isu.edu

Kootenai Clinic Family Medicine Coeur d'Alene Residency

1919 Lincoln Way #315 Coeur d'Alene, ID 83814 (208) 625-4255 Fax: (208) 625-6001

Richard McLandress, M.D. (208) 625-4255

Program Director rmclandress@kh.org

Rachel Grady (208) 625-6009

Residency Program Manager

rgrady@kh.org

Melisa Carper (208) 625-4255

Program Coordinator mcarper@kh.org

Internal Medicine Program

UWSOM Boise Internal Medicine Residency Program

Boise VA Medical Center 500 W. Fort Street, Suite 111R

Boise, ID 83702 (208) 422-1314 Fax: (208) 422-1388

Lisa Inouye, M.D. (208) 422-1314

Program Director lisa.inouye@va.gov

Matt Biggs (208) 422-1314

Program Administrator matthew.biggs@va.gov

Psychiatry Program

Idaho/UWSOM Advanced Clinician Psychiatry Track

Boise VA Medical Center 500 W. Fort Street Psychiatry and Mental Health (116) Boise, ID 83702 (208) 422-1000 Ext 17253

Fax: (208) 422-1241

Kirsten Williams, M.D. (208) 422-1000 Ext. 7524

Interim Program Director kirsten.williams@va.gov

Leslie Miracle (208) 422-1165

Program Coordinator leslie.miracle@va.gov

IDAHO AHEC OFFICE

Jannus, Inc.

1607 W. Jefferson Boise, ID 83702 (208) 336-5533 Fax: (208) 336-0880

Katrina Hoff (208) 336-5533 Ext. 233

Program Director khoff@jannus.org

STATE BOARD OF EDUCATION Idaho State Board of Education

Mailing Address
P.O. Box 83720
Boise, ID 83720-0037
Physical Address
650 W. State Street, Room 307
Boise, ID 83702
(208) 334-2270
Fax: (208) 334-2632

Matt Freeman (208) 332-1571

Executive Director

matt.freeman@osbe.idaho.gov

Chet Herbst (208) 332-1565

Chief Financial Officer

Chet.Herbst@osbe.idaho.gov

Chris Mathias (208) 332-1592

Chief Academic Officer

chris.mathias@osbe.idaho.gov

Idaho WWAMI Fact Sheet (July 1, 2014 – June 30, 2015)



University of Idaho

Pre-Med

- Pre-med Summer Primary Care Shadowing Opportunities coordinated by Idaho WWAMI, and Idaho Academy of Family Physicians. 2015 participants: 33 students/23 physicians/9 communities
- State-wide Pre-Med Summit held semi-annually. The 2016 Pre-Med Summit will be held in Boise on May 21, 2016.
 Pre-Med students from Idaho universities and colleges along with Idaho pre-med advisors are invited to attend.

Medical Student Education

1st Year – at University of Idaho for basic sciences/introduction to clinical medicine (30 Idaho students, 2014-2015) RUOP (Rural Underserved Opportunities Program) – 6 week clinical student summer placement in a rural or medically underserved community, with the opportunity to complete a community health project. 129 medical students completed RUOP experiences in 2015; 23 of those students completed RUOP experiences in Idaho.

2nd Year – at University of Washington (Seattle); integration of basic and clinical sciences/professional mentoring **3rd Year** – Required clinical rotations (Seattle and WWAMI-wide)

WRITE (WWAMI Rural Integrated Training Experience) 18 or 22-week long 3rd year required clinical clerkships in one clinical location offered in the communities of Hailey, Jerome, McCall, Nampa and Sandpoint.

4th Year – Required and elective clinical rotations (Seattle and WWAMI-wide)

Idaho Track-students have the ability to complete all 3rd and/or 4th year required and elective rotations in Idaho **TRUST** (Targeted Rural Underserved Track)-5 first-year students in the entering class of 2014 were selected to participate in this rural workforce program that matches each student to a rural/underserved Idaho community for various clinical experiences throughout their four years of medical school.

Graduate Medical Education – Residencies/Fellowships

Idaho-based/University of Washington affiliated residency programs:

- Family Medicine Family Medicine Residency of Idaho (FMRI), since 1975, located in Boise with Rural Training Tracks (RTT) in Caldwell and Magic Valley. Boise core program trains 11 residents per year; Caldwell RTT, 3 and Magic Valley RTT, 2
- Family Medicine ISU Family Medicine Residency since 1992, located in Pocatello 7 residents per year
- Family Medicine Kootenai Clinic Family Medicine Coeur d'Alene Residency started in 2014 with first class of 6 residents in July 2014, located in Coeur d'Alene, ID
- Geriatrics, HIV Primary Care and Sports Medicine Fellowships offered through Family Medicine Residency of Idaho in Boise

University of Washington residency programs in Idaho:

- Internal Medicine A training site based at the Boise VA, since 1977, became a full UWSOM Internal Medicine Residency Program, July, 2011. Trains 8 categorical 1st year residents (complete all 3 years in Boise) and 4 preliminary 1st year residents (complete one year in Boise)
- Pediatrics 2-month rotations located at Pocatello Children's Clinic in Pocatello since 1972 and in Sandpoint at Sandpoint Pediatrics since 2011.
- Psychiatry Idaho Advanced Clinician Track, an integrated psychiatry residency based in both Seattle and Boise since 2006. Trains 3 residents per year (1st/2nd Year in Seattle; 3rd/4th in Boise)

Community Outreach Programs

• Mini Medical School – in its 12th and final year, a collaborative effort between Idaho Universities, UWSOM & community physicians to offer a 4-week long series of educational lectures.

WWAMI Results: WWAMI graduates in practice

- Return rate: 292/578(51%) Idaho WWAMI practicing or have practiced in Idaho (National Average: 41%)
- Return on Investment: 435/578(75%)total regional WWAMI graduates practicing or have practiced in Idaho

Financial Support of WWAMI

- FY 2015 State appropriations -\$3,962,000, FY 2015 Contract dollars spent in Idaho \$2,696,405
- % of FY 2015 State appropriations spent in Idaho 72%
- FY 2015 average State support per WWAMI student per year \$39,670 (↓6%)
- FY 2015 WWAMI student paid tuition/fees per year \$33,500 (↑7%)(Average: public-\$35,000; private-\$49,000)

Research

WWAMI-affiliated faculty at UI successfully brought in \$2.3M of research funding into Idaho from agencies such as the National Institute of Health (NIH) and the Department of Health and Human Services (DHHS). In addition, WWAMI has had a long standing relationship with the Idaho INBRE Program, where each year our medical students apply for summer research fellowships. INBRE recently received a \$16.3 million renewal grant from NIH.

WWAMI Program Site Map **IDAHO** 2015-2016

St.Maries

Plummer

Kellogg

Coeur d'Alene

Dirne

CC Fam Neur Fam Surg

Sandpoint Peds WT Ob/G

Bonners

Ferry



UW Medicine

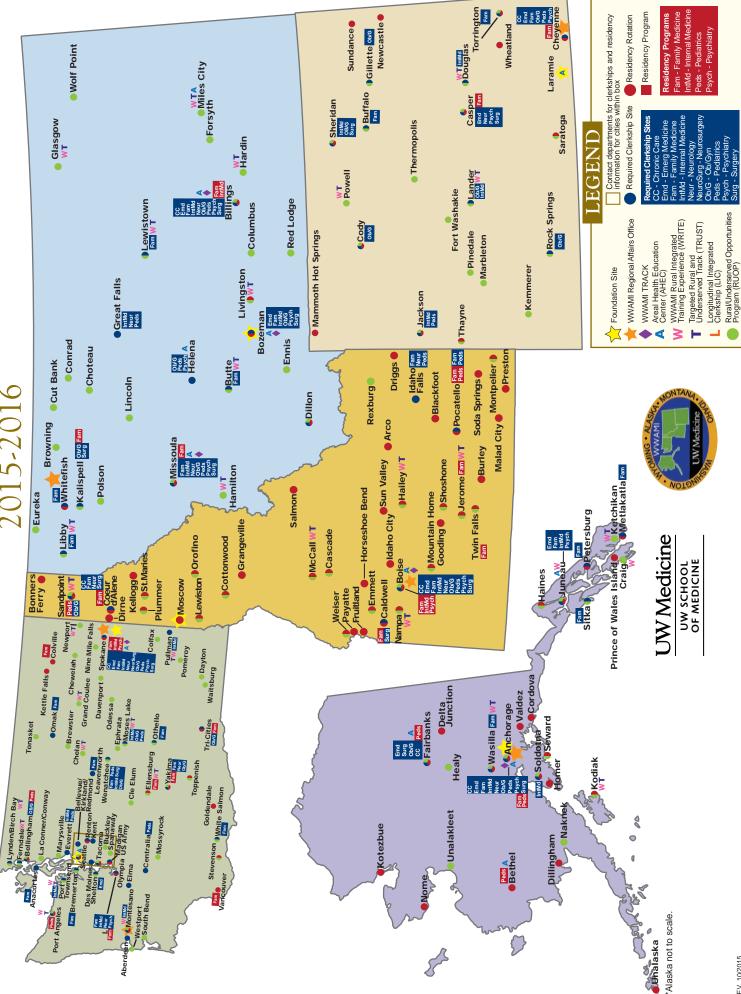
Residency Program Residency Rotation

UW SCHOOL OF MEDICINE

University of Idaho



WWAMI Program Site Map 2015-2016



WWAMI - THE MEDICAL SCHOOL FOR THE NORTHWEST

The WWAMI medical education program has been an innovative leader in medical education for more than 40 years. As the sole allopathic medical school for the states of Washington, Wyoming, Alaska, Montana and Idaho, WWAMI's mission to serve and provide a health workforce for the region is met through community-based and individualized training across a large number of universities and clinical sites. Constant commitment to excellence and to meeting the varied and complex needs of the region have made WWAMI a strong and competitive medical education program.

Opportunities to develop wider training experiences during the four years of medical education are available in each state. With the start of the new curriculum, all four years of medical school are offered in each of the participating WWAMI states. WWAMI students are able to develop their research skills and clinical skills at more than 170 sites across the WWAMI region.

In addition to the four-year medical education program, the WWAMI vision provides a framework for a broad range of training programs. This begins with high-school science enrichment programs; continues in college pathway programs that help students enhance their interest and opportunities for acceptance to medical school; encompasses the four years of medical school; and incorporates graduate medical education, continuing medical education and public service programs. Throughout the life-cycle of a physician—from pre-med through lifelong learning—WWAMI strives to provide for the needs of the people and the communities of the WWAMI region.

WWAMI programs

Area Health Education Center (AHEC) – This program helps states recruit, train, retrain and retain their healthcare workforces in rural and underserved areas.

Pre-Med Summit – Pre-Medical Advisors Conference – Academic advisors are invited to learn more about the medical school, the admissions process, and the attributes that contribute to making an applicant competitive.

Community Outreach Programs - Mini-Medical School in Seattle - Held once a week for five weeks each winter. A specific topic is discussed at each session. In 2015 the sessions included: 1) Scalpel. Clamp. Sutures. What does it take to become a surgeon?; 2) Depression and anxiety – What your neighbors (and society) are not talking about; 3) The healthy brain – Live smart and stay sharp at any age; 4) First Responders – Saving lives when minutes matter!; and 5) One Health: Animals, humans and the environment. Selected Mini-Medical sessions were videotaped for broadcast on UWTV.

WWAMI - four years of medical education

Students complete their Foundations Phase courses at the partner University in their home state. Core courses across WWAMI sites share common goals, objectives and assessments. The results of the exams given to all WWAMI students demonstrate educational equivalency across the region, indicating that the quality and content of education across the region are comparable.

Medical students are able to complete required and elective clerkships with clinical faculty throughout the five state region in family medicine, internal medicine, pediatrics, obstetrics/gynecology, surgery, psychiatry, neurology, emergency medicine, advanced inpatient, care advanced outpatient care and a variety of elective rotations.

TRUST - The Targeted Rural and Underserved Track (TRUST) seeks to provide a continuous connection between underserved communities, medical education, and health professionals in our region. The program creates a full-circle pipeline by guiding qualified students through a special curriculum that connects them with underserved communities in Washington, Wyoming, Alaska, Montana and Idaho to the University of Washington School of Medicine (UWSOM) and regional residency programs in an effort to help meet the workforce needs of the region.

Rural/Underserved Opportunities Program (RUOP) – This month-long clinical experience, located in communities throughout the WWAMI region, exposes students to rural or underserved practices between their first and second years of medical school. Students are able to learn how medical practices intersect with communities.

Individual State Track Programs – Through the availability of all clinical clerkships in a single state (known as "track" programs), students are able to organize and complete all or nearly all of their required and elective clerkships in a single WWAMI state.

WWAMI Rural Integrated Training Experience (WRITE) – Through this longitudinal clinical experience, selected third-year medical students are able to spend 22 weeks in a rural community and receive credit for some of their required clinical clerkships. Students learn about the lives of rural physician and experience continuity of care with patients.

Other WWAMI programs to enhance experiences for students and participating communities

MEDEX – The MEDEX program trains physician assistants to work with medically underserved populations throughout the WWAMI region. This program has an intensive two-year curriculum. Campuses are located in Seattle, Spokane, Tacoma and Anchorage.

Center for Equity, Diversity and Inclusion (CEDI) – CEDI promotes a training environment that is diverse, inclusive, equitable, collaborative and supportive. CEDI offers summer enrichment through the Summer Medical and Dental Education Program (SMDEP). This free-of-charge, six-week program for college freshman and sophomores from minority and/or disadvantaged backgrounds provides academic, leadership skills and career development activities to better prepare students for the medical and dental school application process. CEDI also provides ongoing support for students who are accepted to the UW School of Medicine.

WWAMI Rural Health Research Center and Center for Health Workforce Studies – The Rural Health Research Center is one of six centers funded nationally to perform policy-oriented research on issues related to rural healthcare. The Center for Health Workforce Studies conducts research with the goal of facilitating the production and distribution of an appropriate healthcare workforce to meet the needs of the population.

Clinical support – The Telehealth and MEDCON programs provide clinical support for healthcare providers across the WWAMI region through clinical consultations via videoconference or telephone. Many physicians and health professionals across Washington utilize these services in the care of patients.

Health Sciences Library – The University of Washington School of Medicine Health Sciences Library provides access to medical literature and services that help students, residents and faculty across the five-state region access needed information.

Institute for Translational Health Sciences – The Institute for Translational Health Sciences (ITHS) supports translational research – research that improves human health by leading discoveries that will eliminate human diseases – across the five-state region through the provision of resources and collaboration opportunities related to research.

IDAHO WWAMI ACADEMIC YEAR 2014 - 2015

IDAHO WWAMI MEDICAL EDUCATION PROGRAM OVERVIEW

By

Jeffrey G. Seegmiller, Ed. D.

Director, Idaho WWAMI Medical Education Program, UI Assistant Dean, University of Washington School of Medicine

Mary E. Barinaga, M.D.

Assistant Dean for Regional Affairs & Idaho WWAMI Clinical Medical Education Coordinator University of Washington School of Medicine

The Idaho WWAMI Medical Education Program provides a unique opportunity for future Idaho physicians to train at the #1 ranked primary care medical school in the United States. With a mission that focuses on preparing physicians to practice in rural and underserved areas of the Northwest and Rocky Mountain regions, the University of Washington School of Medicine's WWAMI regional training program in Idaho provides a first rate medical education while introducing students to the challenges and rewards of serving Idaho's citizens.

The Idaho WWAMI Medical Education Program allows Idaho's medical students to complete three of their four years of medical school education in Idaho, increasing their familiarity with the healthcare needs of the region and State, and increasing the likelihood that students will return to Idaho communities to practice medicine, once their training is complete. In academic year 2014 - 2015, Idaho WWAMI provided thirty Idaho students with the opportunity to complete their first year of medical training through the University of Washington School of Medicine's regional program at the University of Idaho's (UI) Moscow campus. After completing their second year of training at the medical school in Seattle, WWAMI students have the opportunity to return and complete their 3rd and 4th year clinical training requirements in Idaho. These clinical rotations are coordinated through the Idaho WWAMI Medical Education Program office in Boise. Following receipt of their M.D. degree, University of Washington School of Medicine (UWSOM) graduates have the opportunity to apply to one of five UWSOM WWAMIaffiliated residencies in Idaho. In addition to these formal training programs, Idaho physicians have opportunities for continuing medical education through seminars, programs, consultations, or academic affiliations with the University of Washington School of Medicine, through the Idaho WWAMI program.

There is also a strong commitment to the partnership between excellence in research and teaching in medical education. Cutting-edge research prepares the next generation of doctors to be well informed and at the forefront of clinical medical practice. The WWAMI faculty at the University of Idaho and our clinical/research faculty in Boise, Nampa, Caldwell, Pocatello, Sandpoint, McCall, Jerome, Twin Falls, Coeur d'Alene, Idaho Falls, Hailey, and rural training communities, are committed to being both dynamic teachers and informed biomedical scholars.

In addition, our WWAMI program goals include the continued development of the humanitarian and service interests of the medical students and an enhanced ability to recruit from groups within Idaho that are traditionally underrepresented in medical school populations.

This report was prepared to provide you with a summary of the activities, programs, and accomplishments of the Idaho WWAMI Medical Education Program throughout this past year. We hope that it will inform you, increase your interest in medical education throughout Idaho, and maintain your commitment to supporting medical education, training, and service for Idaho residents.

Program Leadership

Dr. Mary Barinaga is the Assistant Clinical Dean for Regional Affairs for the University of Washington School of Medicine, and is based at the Idaho WWAMI office in Boise. Dr. Barinaga is a native Idahoan, a graduate of the Idaho WWAMI program, and completed her family medicine residency training in Boise in 1995. She practiced rural family medicine on the Coeur d' Alene Indian Reservation in northern Idaho for 12 years where she was also active in teaching medical students and family medicine residents. In October 2010, Dr. Barinaga relocated to Boise to direct the clinical education phase of the Idaho WWAMI program. Dr. Barinaga is a Clinical Assistant Professor of Family Medicine and also on faculty at the Family Medicine Residency of Idaho in Boise. Dr. Barinaga is a past-President of the Idaho Academy of Family Physicians. Dr. Barinaga is committed to medical education, service to the underserved, rural healthcare, and physician workforce issues in Idaho.

Dr. Jeff Seegmiller is the Director of Idaho's medical school at the University of Idaho for the first year training site of the WWAMI program. Dr. Seegmiller will be directing both the first and second year training site at the UI with the implementation of a new 18 month curriculum in the fall of 2015. In addition, Dr. Seegmiller is an Assistant Dean within the University of Washington School of Medicine and is involved with student progress, curriculum, and regional program committees at the medical school. He is also an affiliate faculty in the Department of Biological Structure at UW School of Medicine.

Dr. Seegmiller has chaired musculoskeletal anatomy for the WWAMI program for the past eight years and co-developed a master's and doctoral program that has gained national recognition in athletic training. Seegmiller earned a Bachelor of Science degree from Brigham Young University, and Master of Science and Doctor of Education degrees from Illinois State University specializing in Biomechanics. He began his career preventing, treating, and rehabilitating musculoskeletal injuries as a certified athletic trainer with numerous clinics, schools, and teams. He served as the graduate program director at Ohio University where he developed and directed the master's and doctoral education programs and established outreach clinical services to rural communities. Dr. Seegmiller is committed to medical education on the Palouse, and continuing the partnership with the University of Washington School of Medicine in delivering high quality medical education in Idaho.

WWAMI IDAHO PRECLINICAL PROGRAMS <u>ACADEMIC YEAR</u> 2014 - 2015

MEDICAL PROGRAM 1ST AND 2ND YEARS

Admissions

Idaho students admitted to the WWAMI Medical Education Program are interviewed and selected by the Idaho Admissions Committee, a committee made up of four Idaho physicians appointed by the Idaho State Board of Education, who work in cooperation with the University of Washington School of Medicine Admissions Committee. The Idaho Admissions Committee selects applicants interested in preparing to be physicians in Idaho, regardless of eventual sub-specialty selection. The University of Washington School of Medicine recently reaffirmed the mission statement that underscores the commitment to regional, rural, and underserved populations and their healthcare needs in the five-state WWAMI region. Members of the Idaho Admission Committee serve for two, three-year terms, on a rotating basis. For the entering Idaho WWAMI medical student class of 2015, these physician committee members were Kelly Anderson, MD, Idaho Falls; Rodde Cox, MD, Boise; Glenn Jefferson, MD, Lewiston; Leanne Rousseau, MD, Post Falls.

During the 2015 admissions season, a total of 141 applications from Idaho residents were received. Of these applicants, a total of 70 were interviewed, 49 in Boise and 21 in Seattle. Of those Idaho applicants interviewed, 35 were admitted, which includes 5 students who were selected for the WWAMI Targeted Rural and UnderServed Track (TRUST) program. In March of 2015, the State of Idaho approved funding for the third year of the five WWAMI TRUST seats which were created in 2013. The mission of TRUST is to provide a continuous connection between underserved communities, medical education, and health professionals in our region. This creates a full-circle pipeline that guides qualified students through a special curriculum connecting them with underserved communities in Idaho. In addition, TRUST creates linkages to the UWSOM's network of affiliated residency programs. The goal of this effort is to increase the medical workforce in underserved regions. In addition, the State of Idaho appropriated funding for 5 more traditional WWAMI students, which expanded the class size to 35 medical students starting in fall 2015.

The 2015 entering class came from the following Idaho communities: Blackfoot, Boise, Challis, Coeur d'Alene, Gooding, Grangeville, Hayden, Homedale, Idaho Falls, Melba, Meridian, Moscow, Nampa, Pocatello, Post Falls, Rupert, Sandpoint, Soda Springs and St. Anthony, Idaho (see map). The following table indicates the number of applicants and admitted/enrolled 2015 students for each of the five WWAMI states. (See map).

The following table indicates the number of applicants and admitted/enrolled 2015 students for each of the five WWAMI states.

State	Number of MD Applicants	Enrolled (MD & MD/PhD)
Idaho	141	35
Wyoming	66	20
Montana	114	30
Alaska	95	20
Washington	905	123*
All Other	6769	17**

^{*} Includes two MD/PhD student

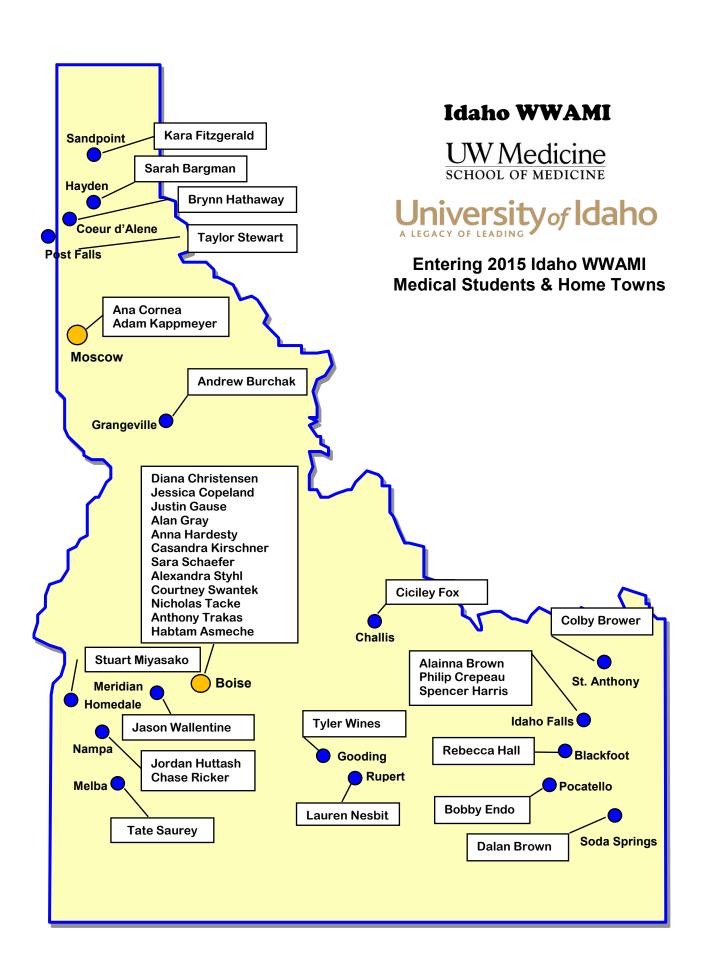
The average undergraduate GPA for the Idaho 2015 students enrolled is 3.70. Scores for enrolled Idaho WWAMI students on the Medical College Admission Test (MCAT®) compared favorably to the national average for all enrolled students in U.S. medical schools: 9.83 in Verbal Reasoning; 9.60 in Physical Sciences; and 10.63 in Biological Science.

^{**} Includes ten MD/PhD students

WWAMI - University of Idaho



2015 - 2016



Foundations Phase of the Medical Education Program

First-year students at the Idaho WWAMI site take an intense academic load during their initial year of medical training. Students complete a total of 48 graduate credits in both the basic biomedical sciences and clinical medical education. Many also complete one to two additional elective courses during this first year. Beginning with the E2015 class, students will be located in Moscow for 18 months. The UW School of Medicine has adopted a new curriculum that allows Idaho residents to spend all four years in Idaho. Historically the WWAMI students would spend their first year at the regional campus and then complete their second year in Seattle on the UW main campus. With this curriculum renewal, the second year content was merged with the first year to create an 18 month model that incorporates an integrated curriculum with enhanced clinical preparation. This 18 month curriculum is called the **Foundations Phase**. In the 3rd and 4th years, students complete their clinical clerkships known as the **Clinical Phase** of the curriculum. All medical students will still have a required clerkship rotation at a large quaternary hospital in Seattle, but will be able to have a more invested regional experience if they choose.

Spanish for Health Professionals

With the changing demographics of Idaho's population and the increased demand for physicians and health professionals who are able to communicate with Spanish-speaking patients in their native language, the Idaho WWAMI first-year program offers an elective course for its students in the basics of medical Spanish and culturally-responsive medicine. WWAMI students completed the course in spring 2015, gaining a foundation in basic medical vocabulary, interview skills, cultural background, and medical history in the Spanish language.

Primary Care Practicum

For half a day each week during their first year of medical education in the Primary Care Practicum (PPC), WWAMI students participate in a medical preceptorship course that provides them with the opportunity to interact with patients and to train with a local physician. These physician-teachers are referred to as preceptors. This course provides students with the clinical perspective needed to begin to integrate their basic science courses of anatomy, biochemistry, physiology, and behavioral medicine with patient assessment and relationship skills each week throughout the first year of medicine. The PCP course also serves as an effective way to help students keep in touch with their ultimate goals for service and clinical practice.

Preceptors for the Primary Care Experience

The following is a list of volunteer Idaho physicians (volunteer preceptors and teachers) active in Foundations Phase medical student education during the primary care experience in 2015.

Moscow, Idaho Jennifer Bentwood, M.D. Kim Blewett, D.O. Deborah Collins, M.D. Jo Elsbury, M.D. Methuel Gordon, M.D. David Leach, M.D. Patricia Marciano, M.D. Lois Niska, M.D. Juan Parra, M.D. Steve Pennington, M.D. Heide Reetz, M.D. Helen Shearer, M.D. Francis Spain, M.D. Geoff Stiller, M.D. Robert Ting, M.D. Kraig White, M.D.

Kama White, M.D.

Medical Specialty Family Medicine Family Medicine Family Medicine Family Medicine **Pediatrics** Ophthalmologist Family Medicine Family Medicine General Surgery Orthopedics Family Medicine Family Medicine Family Medicine Plastic Surgery Family Medicine Family Medicine Internal Medicine

Lewiston, Idaho Michael Baldeck, D.O. Geneen Bigsby, M.D. Patricia Brady, M.D. Jeff Burry, D.O. Collin Doyle, M.D. Craig Flinders, M.D. Larry Evans, M.D. Darby Justis. M.D. Daniel McIntosh, M.D. Scott Osborn, M.D. Steve Ozeran, M.D. Jerald Perry, M.D. David Petersen, M.D. Paul Sanchirico, M.D. James Schmidt, M.D. Binay Shaw, M.D. Greg Schultz, M.D. Jean Thomas, M.D. Charla Willis, M.D.

Family Medicine OB/Gyn Internal Medicine Otolaryngology Otolaryngology Anesthesia/Pain Anesthesia **Pediatrics** Internal Medicine Family Medicine Plastic Surgery Cardiology Family Medicine Radiology Cardiology Oncology **Pediatrics** Neurology Internal Medicine

Medical Specialty

Medical Student Outreach

Every year we are impressed with the level of outside commitment our students take on in addition to their heavy course load. The outreach efforts are sponsored by the UI WWAMI Medical Education Program and University of Washington School of Medicine and Idaho Area Health Education Centers.

- Undergraduate Partnerships WWAMI students participate in a panel presentation each year to the pre-medical students in the "Capstone Course". Undergraduate premedical and pre-health students are invited to interact with medical students at planned presentations, such as our cross-cultural healthcare forums and panels with various student diversity organizations and pre-med clubs.
- School Presentations WWAMI students make requested school presentations ranging from high school health career information to health issues such as tobacco cessation. The health issue presentations often include the use of organ specimens from our anatomy lab as an effective illustration to the young audience. In addition, WWAMI students are encouraged to participate in other forms of outreach to K-12 students.
- Regional "Free Clinic" assistance WWAMI students volunteer two evenings per week at a regional free clinic for uninsured and homeless patients. Medical students assist with patient history and assessments, under the supervision of local volunteer medical providers.

International Opportunities

Each year, individual WWAMI students seek out opportunities to participate in medical missions to foreign countries, either during the summer following their first year, or during advanced clinical electives in their fourth year. First-year medical students have the opportunity to apply for an international health placement through the UWSOM's global health program, and to participate in a 12-week summer medical care and research experience in one of ten different developing countries.

Biomedical Research

WWAMI-affiliated faculty at the UI successfully brought in \$2.3M of research funding into Idaho from agencies such as the National Institute of Health (NIH) and the Department of Health and Human Services (DHHS). In addition, WWAMI has had a long standing relationship with the Idaho INBRE Program, where each year our medical students apply for summer research fellowships. The INBRE recently received a \$16.3 million renewal grant from NIH. This 5-year grant allows INBRE to continue building its statewide network to enhance biomedical research at all nine of Idaho's universities and colleges and the Boise VA, through shared faculty funding and student research training support.

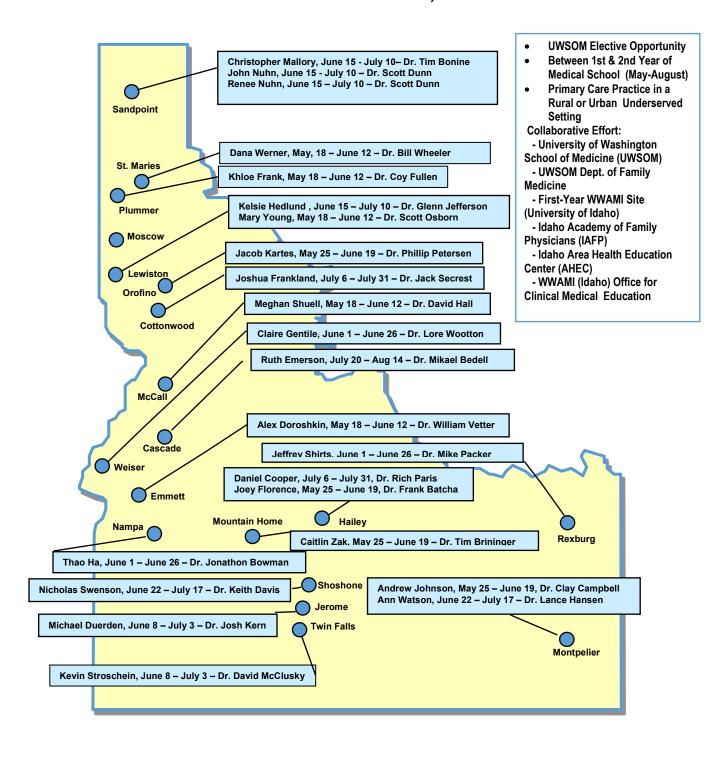
Rural Underserved Opportunities Program (RUOP)

Beginning in the summer of 1989, a program was developed to connect our medical students to rural and underserved communities, and to give them a taste of clinical primary care practice in such communities, working with one of our Idaho physicians. Students were provided with a stipend for living expenses, housing and travel support, and spent one summer month living and working with a local physician in their community.

The first year, 23 students (17 from UI/WSU) took advantage of the program in Washington and Idaho. In 1990, 53 students participated in the program (18 from UI/WSU) and Montana and Alaska became involved as well. Interest continues to grow. In the summer of 2015, 129 University of Washington medical students took advantage of this opportunity to work in rural underserved regions. In 2015, 23 students completed a RUOP experience in rural or underserved communities in Idaho (see map).

Students may also apply for a community health/research project as part of the RUOP experience. These projects follow the guidelines of Community-Oriented Primary Care (COPC) to meet a healthcare need that the student identifies once he/she is located in the community. Projects that occurred in Idaho are shown in the table on the following page.

University of Washington School of Medicine Idaho Rural/Underserved Opportunities Program (RUOP) Summer Placements, 2015



2015 Rural Underserved Opportunities Program Community Research Projects

IDAHO COMMUNITY	PROJECT TITLE	NAME OF STUDENT
Emmett	Vascular Health Awareness: Increasing Blood Pressure Monitoring in the Elderly of Emmett with Cardiovascular Related Injuries	Alex Doroshkin
Jerome	Jerome County SBIRT Education Initiative: Improving SUD Outcomes through Screening, Brief Intervention and Referral to Treatment	Michael Duerden
Hailey	Involving Youth in Drug Prevention	Joey Florence
Plummer	Life Skills Development Curriculum: Addressing Youth Suicide in Rural Idaho	Khloe Frank
Cottonwood	A Rural Media Campaign to Prevent Childhood Obesity	Joshua Frankland
Weiser	Nutritional Education Intervention to Combat and Prevent Obesity in Weiser	Claire Gentile
Nampa	Empowering Women in Canyon County through Self-defense Class	Thao Ha
Lewiston	Snake River Community Clinic Mindfulness Program for Reducing Anxiety	Kelsie Hedlund
Montpelier	Providing Exercise for the Elderly in Montpelier	Andrew Johnson
Orofino	Reducing Adult Non-medical Use of Prescription Drugs (NMUPD) in Clearwater County	Jacob Kartes
Sandpoint	Decreasing Young Adult and Adolescent Suicide in Sandpoint with the Signs of Suicide Program	Christopher Mallory
Sandpoint	Actively Surviving: Physical Activity to Improve Cancer Survivors' Quality of Life	John Nuhn
Sandpoint	Increasing Continuity of Care for Patients in EMS Driven Hypertension Screening Programs in Sandpoint	Renee Nuhn
Rexburg	Advance Directives among Young Adults: Increasing the Incidence of Advance Directives Among Young Adults in Rexburg	Jeffrey Shirts
McCall	Snow Safety: Improving Injury Prevention Strategies in McCall	Meghan Schuell
Twin Falls	Walking Paths for Schools: Healthier Children for a Healthier Future	Kevin Stroschein

Shoshone	The Shoshone Bicycle Helmet Project: Promoting Helmet use in Shoshone	Nicholas Swenson
Montpelier	Media Literacy Education to Prevent Adolescent use of Electronic Nicotine Delivery Systems in Bear Lake County	Ann Watson
St. Maries	We Are Not Mething Around: Preventing Methamphetamine Abuse in St. Maries	Dana Werner
Lewiston	Youth Mental Health First Aid Training for School Personnel in Lewiston: Taking Action to Prevent Youth Suicide	Mary Lynn Young
Mountain Home	Project AIM: Decreasing Teen Pregnancy in Mountain Home - The Theory of Possible Selves	Caitlin Zak

Funding for the RUOP Program comes from a variety of sources including the Idaho Academy of Family Physicians (IAFP), the Idaho Area Health Education Centers (IAHEC), the University of Washington School of Medicine (UWSOM), the University of Idaho, and the Washington Academy of Family Physician Foundation. In most Idaho locations, area physicians and community members provide housing, which affords the students a wonderful opportunity to actively participate in the community.

<u>Second-year Medical Education Program</u> The entering class of 2014 will continue in the traditional curriculum where Second-year Idaho WWAMI students continue their medical education in Seattle joining students from the other six first-year WWAMI sites. Students complete a rigorous curriculum based on the organ system model with time also spent in learning clinical skills through the College Mentor Program. The entering class of 2015 began the new integrated curriculum that combines basic sciences and clinical skills training with an active learning pedagogy.

WWWAMI IDAHO CLINICAL PROGRAMS ACADEMIC YEAR 2014 - 2015

MEDICAL PROGRAM 3RD AND 4TH YEARS

In January 1996, the Idaho WWAMI Medical Education Program Office in Boise was established to coordinate clinical medical education in Idaho. The Boise office is directed by Dr. Mary Barinaga, Assistant Dean, Office of Regional Affairs, University of Washington School of Medicine. Dr. Barinaga works closely with the Foundations Phase Idaho WWAMI Director, Dr. Jeff Seegmiller. To learn more about the Idaho WWAMI Medical Education Program visit the following link: http://www.uwmedicine.org/education/md-program/current-students/wwami/idaho

Third Year Clinical Rotations

The third year of medical education includes six required clinical clerkships: internal medicine (12 weeks), family medicine (6 weeks), pediatrics (6 weeks), obstetrics and gynecology (6 weeks), surgery (6 weeks) and psychiatry (6 weeks). Third-year students may also take one elective rotation. Since 1994, all of the third-year required clerkships have been available within Idaho. Students may choose to complete any of these clerkships across the five-state WWAMI region.

Fourth Year Clinical Rotations

The fourth year of medical education includes four required clinical clerkships and four months of electives. The required clerkships consist of emergency medicine (4 weeks), neurology (4 weeks), chronic care (4 weeks) and a surgery subspecialty (4 weeks). All fourth-year required clerkships have been offered in Idaho since 2006. In addition, a wide range of clinical electives are offered in numerous communities in Idaho.

Idaho Track

The Idaho Track is a voluntary program of the University of Washington School of Medicine in which students complete the majority of required clinical clerkships within Idaho. The state of Idaho was the first state in the WWAMI program to offer three of the four years of the University of Washington School of Medicine curriculum.

The Idaho Track student capacity varies based on availability of clinical teaching sites and student interest. Students from any of the WWAMI states may apply to join the Idaho Track. Third-year Idaho Track students complete five of six required third-year clerkships in Idaho, and fourth-year Idaho Track medical students complete three of four required clerkships in Idaho.

Twelve third-year students and seventeen fourth-year students participated in the Idaho Track during the 2014-2015 academic year. In addition to Idaho Track students, other UWSOM students rotated among the various clinical clerkships in Idaho.

The Idaho Track Steering Committee meets quarterly in Boise. This committee is composed of clinical clerkship coordinators and preceptors, Dean's office representatives, WWAMI administrative staff and medical student representatives.

During the 2014-15 academic year, a total of 91 UWSOM third and fourth year medical students completed one or more clinical rotations in Idaho. Those 91 medical students completed a total of 260 individual clinical rotations in Idaho (163 required courses, 4 WRITE and 93 elective courses).

Idaho offers nine required clinical rotations for the UWSOM. These rotations include six third-year and three fourth-year clerkships. Idaho offers these required clerkships throughout the state at twenty-six individual sites. Required third and fourth year clerkships located in Boise include: chronic care, emergency medicine, family medicine, internal medicine, neurology, obstetrics and gynecology, pediatrics, psychiatry and surgery. Caldwell hosts a surgery site. Idaho Falls has two clerkship sites, one in neurology and one in pediatrics. Pocatello offers a family medicine site, and a pediatric site. Coeur d'Alene has a neurology site, a chronic care site and a surgery site. Sandpoint offers an obstetrics and gynecology site.

A total of 36 students completed one or more elective clerkships in Idaho during the 2014-2015 academic year. This accounts for a total of ninety-three individual elective clerkships completed at twenty-five different elective sites.

COURSES COMPLETED IN IDAHO BY WWAMI STUDENTS

	Students Enrolled	ldaho Track	Non Track Students	ID WWAMI	Non ID WWAMI
WRITE Students	4	NA	NA	2	2
Third-year Required Courses					
Family Medicine	19	12	7	14	5
Internal Medicine	22	12	10	13	9
OB / GYN	7	7	0	7	0
Pediatrics	22	12	10	13	9
Psychiatry	17	12	5	13	4
Surgery	24	11	13	14	10
Fourth-year Required Courses					
Chronic Care	17	15	2	12	5
Emergency Medicine	12	10	2	8	4
Neurology	23	16	7	14	9
Elective Courses	36	23	13	22	14

Each year, the Idaho Track students honor two of their physician preceptors by awarding them with the Dr. Judd Lunn Memorial Idaho Track Teacher of the Year Award. This spring, Dr. Kirstin Algoe (3rd year required obstetrics & gynecology Sandpoint site preceptor) and Dr.'s Rodde Cox (4th year required chronic care/rehabilitation Boise site preceptor) James Whiteside (4th year required neurology Boise site preceptor) were awarded the 2014-15 MS3 and MS4 Idaho Track Teacher of the Year Awards, respectively. These physicians were selected and nominated by the students for their excellence and dedication to teaching and the field of medicine.

In 2012-2013, the Idaho Track students worked with family physician Dr. Kim Stutzman to establish a relationship with a free clinic in Boise known as the Friendship Clinic. This popular service-learning activity provides students the opportunity to participate in clinic volunteer work twice monthly, and serves the indigent population of the Boise area. The student clinic is precepted by volunteer family physicians Dr. Kim Stutzman, Dr. Mary Barinaga, and Dr. Phyllis You. Student coordinators from the third and fourth year classes assist in coordinating other UWSOM student volunteers. This student-run clinic remains in practice today.

WWAMI Rural Integrated Training Experience (WRITE)

The WRITE program provides third-year students with longitudinal, integrated clerkship experiences in rural and/or underserved Idaho communities with primary care physicians and other healthcare professionals. Students spend the second half of their third year of medical school at the WRITE site, approximately January through June. During WRITE, the student receives four weeks of curricular credit for internal medicine, three weeks of pediatrics, three weeks of psychiatry, six weeks of family medicine, and four weeks of credit for a fourth-year family medicine elective.

The goals of the WRITE program are:

- To experience the practice of medicine in a rural area
- To experience the lifestyle of a physician in a rural community
- To experience continuity of care and become integrated in a rural community both professionally and socially
- To instill confidence and professionalism in the primary care setting
- To develop the ability to be an independent learner and problem solver
- To meet educational milestones in a unique setting

During WRITE, students identify a community service project to complete based on a community needs assessment. The 2014-2015 community projects for Idaho included:

- Use of bilingual resource sheets to increase awareness of pediatric obesity interventions in Canyon County, Idaho
- Memory stimulation in patients with dementia, Hailey, Idaho
- Lecheria Sana Promotion of appropriate health access and education on the value of accessing care sooner to immigrant dairy farm workers, Jerome, Idaho

A WRITE Steering Committee provides oversight to the program. The committee is responsible for ensuring the program meets the goals and objectives of UWSOM, establishing operational guidelines, guaranteeing quality medical education, selecting sites and students, reviewing and approving WRITE manuals, and coordinating program evaluations.

WRITE student selection criteria are based on background, interest, motivation and the following:

- A favorable area of research and satisfactory status for the Independent Investigative Inquiry (III) Project
- A strong academic achievement during the first and second year
- Passing Step 1 of the United States Medical Licensure Examination (USMLE).
 Step1 assesses whether the student understands and can apply important concepts of the sciences basic to the practice of medicine
- A career interest in rural primary care
- A strong personal statement

The WRITE program was established in 1996, with the first two sites located in Idaho. As of June 2014, there were thirty-two WRITE sites throughout the WWAMI Region. Five of those sites are located in family medicine practices in Hailey, Jerome, McCall, Nampa and Sandpoint. Development of a 6th site is underway which will be based in Orofino

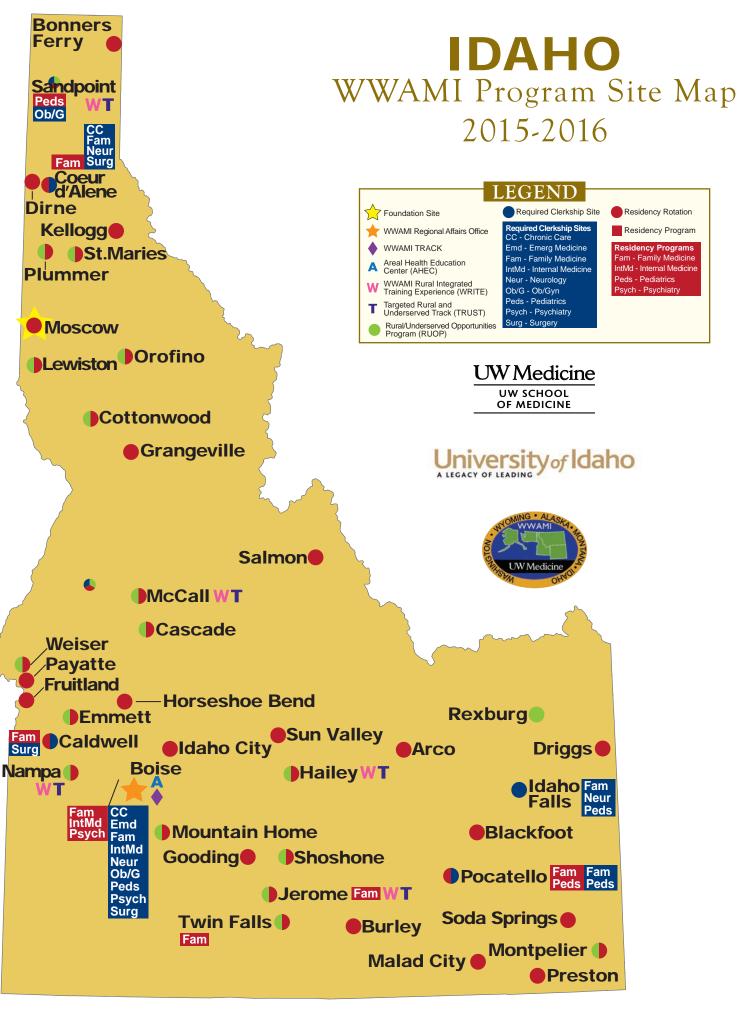
TARGETED RURAL/UNDERSERVED TRACK (TRUST)

During academic year 2013-2014, Idaho joined the states of Washington and Montana in participation in the TRUST program. TRUST, or the Targeted Rural and Underserved Track, is a physician workforce program designed to increase the number of students who practice in underserved settings. TRUST Scholars are admitted through a specialized admissions process that targets applicants who have rural/underserved backgrounds or interests, and then links each scholar with a rural/underserved Idaho community for various clinical experiences throughout four years of medical school. The goal of this program is to increase the likelihood that these TRUST Scholars will ultimately practice in a similar Idaho community when their training is complete. Idaho's TRUST communities are Hailey, Jerome, McCall, Nampa and Sandpoint. An additional TRUST community has been developed in Orofino as well this year. For a complete overview of the TRUST program, visit:

http://depts.washington.edu/fammed/education/programs/trust

The Idaho TRUST Scholars are:

2013 Scholars	Hometown	Idaho TRUST Continuity Community
Daniel Bechtold	Idaho Falls	St. Luke's Family Medicine, Hailey
Sierra McCreery	Twin Falls	Family Health Center of Sandpoint
Benjamin Searcy	Rexburg	St. Luke's Family Medicine, Jerome
Madison Skogsberg	Kuna	Terry Reilly Health Services, Nampa
Lee Spencer	Grangeville	St. Luke's Payette Lakes Medical Clinic, McCall
2014 Scholars	<u>Hometown</u>	Idaho TRUST Continuity Community
Michael Duerden	Rexburg	St. Luke's Family Medicine, Jerome
Joie Florence	Boise	St. Luke's Family Medicine, Hailey
Thao Ha	Meridian	Terry Reilly Health Services, Nampa
Renee Nuhn	Ririe	Family Health Center of Sandpoint
Meghan Shuell	Boise	St. Luke's Payette Lakes Medical Clinic, McCall
2015 Scholars	<u>Hometown</u>	Idaho Trust Continuity Community
Colby Brower	St. Anthony	St. Luke's Family Medicine, Jerome
Stuart Miyasako	Homedale	St. Luke's Payette Lakes Medical Clinic, McCall
Tate Saurey	Melba	Terry Reilly Health Services, Nampa
Jason Wallentine	Meridian	Family Health Center of Sandpoint
Tyler Wines	Gooding	St. Luke's Family Medicine, Hailey



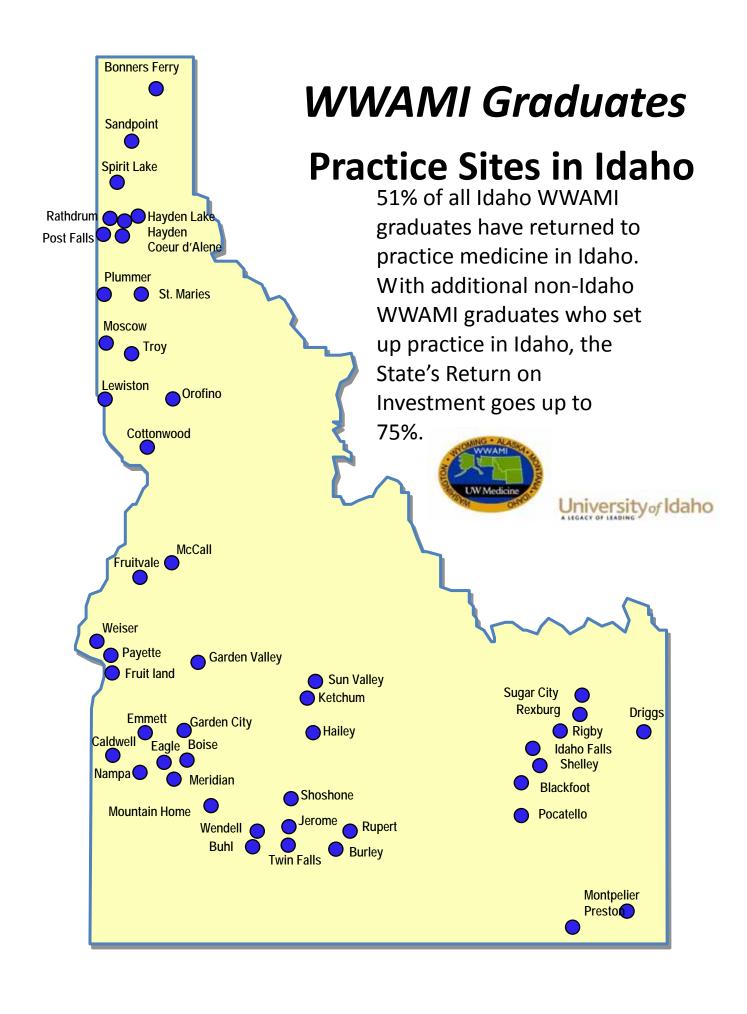
WWAMI Graduates

In May 2015, twenty-three Idaho WWAMI students graduated from the University of Washington School of Medicine. Of note, not all students graduate in four years; some students elect to expand their medical education to complete research, a second degree, or for personal reasons, consequently postponing their graduation. Graduating students proceed into the residency phase of their training, which ranges from three additional years (family medicine, general internal medicine and pediatrics) to up to seven years for other specialties. Our 2015 graduates and their specialty choices are shown in the table below:

Student Name	Specialty	Residency Program
Arbon, Kate	Pediatrics	University of Washington Affiliated Hospitals
Bledsoe, Annis	Pediatrics	University of Utah Affiliated Hospitals
Butler, Sharlay	Obstetrics-Gynecology	McGaw Medical Center of Northwestern University
Carter, Spencer	Internal Medicine	University of Texas Southwestern Medical School
*Conrad, Kevin	Medicine-Preliminary	University of Washington Boise Internal Medicine
*Conrad, Kevin	Anesthesiology	University of Utah Affiliated Hospitals
Croschere, Thomas	Transitional Year	Providence Sacred Heart Medical Center
Fitzgerald, Codi	Internal Medicine	University of Washington Affiliated Hospitals
Fostvedt, Sigrid	Pediatrics	University of Washington Affiliated Hospitals
Galligar, Billy	Family Medicine	Family Medicine Residency of Idaho
Hopwood, Caleb	Obstetrics-Gynecology	University of Utah Affiliated Hospitals
*Jenkins, David	Medicine-Preliminary	University of Washington Boise Internal Medicine
*Jenkins, David	Radiation Oncology	Texas A&M-Scott & White
Lindley, Curt	Internal Medicine	Tulane University School of Medicine
Morales-Carillo, Ignacio	Internal Medicine	UC Davis Medical Center
Moresco, Benjamin	Pediatrics	Baylor College of Medicine
Nielsen, Tyson	Otolaryngology	University of Arizona Affiliated Hospitals
Ohlsson, Anna	Vascular Surgery	University of Washington Affiliated Hospitals
*Pollard, Jacob	Medicine-Preliminary	University of Washington Boise Internal Medicine
*Pollard, Jacob	Anesthesiology	University of Utah Affiliated Hospitals
Rainey, David	Preventative Medicine	Loma Linda University
Silvas, Kanan	Emergency Medicine	Allegheny General Hospital
Tanabe, Alex	Internal Medicine	University of Washington Affiliated Hospitals
Tedrick, Laura	Obstetrics-Gynecology	University of New Mexico School of Medicine
Weller, Sara	Internal Medicine	Georgetown University Hospital
Wilson, Matthew	Family Medicine	University of New Mexico School of Medicine
*Preliminary/Transitional a	and Advanced Degree Program	

Idaho WWAMI Rate of Return

Number of Idaho WWAMI graduates in practice	578
Idaho WWAMI graduates who have practiced in Idaho	292
Idaho WWAMI graduates who have practiced in Idaho	51%
Total WWAMI graduates (Idaho and other WWAMI states) who practice in Idaho	435
Total WWAMI Return On Investment (ROI) for Idaho	75%



Idaho Rural Physician Incentive Program

In 2003, the Idaho Legislature created the Idaho Rural Physician Incentive Program (RPIP) to encourage physicians to practice in medically underserved areas of the state. The law established the Rural Physician Incentive Fund, which is funded by fees assessed to all Idaho students participating in the WWAMI and University of Utah state supported medical education programs. Eligible physicians can apply to receive an RPIP award for qualified medical education debt repayment, in partnership with their sponsoring community. RPIP is administered by the State Office of Rural Health. http://healthandwelfare.idaho.gov/Health/RuralHealthandPrimaryCare/HealthCareAccess-shysicianIncentiveProgram/tabid/409/Default.aspx

Collection of the funds from WWAMI and University of Utah medical students started in the fall of 2003, and disbursement of funds for loan repayment began in July 2010. In 2015, six Idaho physicians were selected to receive a loan repayment through this program, based upon need, community support, and program qualifications.

The rural physician incentive fee is assessed to, and required to be paid by, all state-supported medical students who are preparing to be physicians. The fee is equal to 4% of the average annual medical support fee paid by the State on behalf of each student. For the 2014-2015 academic year, the fee was \$1668.00 per student.

2010 - First IRPIP Recipients

<u>Name</u>	<u>City</u>	Practice Site/Renewal Status
Austin Gillette	St. Anthony	Upper Valley Community Health Services, Inc.
Joshua Kern	Jerome	St. Benedicts Family Medical Center
Eddie Rodriguez-Lopez	Emmett	Valley Family Health Care, Inc.
		Idaho Department of Health & Welfare
J'Dee Ryan Wilson	Blackfoot	Idaho State Hospital South

2011 - IRPIP Renewals & New Recipients

<u>Name</u>	<u>City</u>	Practice Site/Renewal Status
Joshua Kern	Jerome	(renewal; year 2)
J'Dee Ryan Wilson	Blackfoot	(renewal; year 2)
Travis Neilsen	Pocatello	Portneuf Medical Center
Jennifer Petrie	Emmett	Walter Knox Memorial Hospital

2012 - IRPIP Renewals & New Recipients

<u>Name</u>	<u>City</u>	Practice Site/Renewal Status
Joshua Kern	Jerome	(renewal; year 3)
J'Dee Ryan Wilson	Blackfoot	(renewal; year 3)
Travis Neilsen	Pocatello	(renewal; year 2)
Jennifer Petrie	Emmett	(renewal; year 2)
Lance Hansen	Montpelier	Bear Lake Memorial Hospital
Bridgette Latimer	Caldwell	Saint Alphonsus Medical Group
Nicholas Lewis	Nampa	Saltzer Medical Group
Shaun Summerill	Pocatello	Pocatello Children's Clinic

2013 - IRPIP Renewals & New Recipients

<u>Name</u>	<u>City</u>	Practice Site/Renewal Status
Joshua Kern	Jerome	(renewal; year 4)
Jennifer Petrie	Emmett	(renewal; year 3)
Lance Hansen	Montpelier	(renewal; year 2)
Nicholas Lewis	Nampa	(renewal; year 2)
Shaun Summerill	Pocatello	(renewal; year 2)
Randi Edwards	Coeur d'Alene	Coeur d'Alene Pediatrics
Isaac Elam	Fruitland	St. Luke's Clinic, Fruitland
Marc Farnworth	Cottonwood	St. Mary's Hospital & Clinics

Marc Farnworth Cottonwood St. Mary's Hospital & Clinics
Tema Jessup Grangeville Syringa Hospital & Clinics

Franklin County Medical Center/Willow Valley

Chelsie Morrison Preston Family Medicine

2014 - IRPIP Renewals & New Recipients

<u>Name</u>	<u>City</u>	Practice Site/Renewal Status
Lance Hansen	Montpelier	(renewal; year 3)
Nicholas Lewis	Nampa	(renewal; year 3)
Shaun Summerill	Pocatello	(renewal; year 3)
Randi Edwards	Coeur d'Alene	(renewal; year 2)
Isaac Elam	Fruitland	(renewal; year 2)
Marc Farnworth	Cottonwood	(renewal; year 2)
Tema Jessup	Grangeville	(renewal; year 2)
Chelsie Morrison	Preston	(left RPIP 9/19/2014)
Brian Beesley	Ammon	Pearl Health Clinic
Matthew Nelson	Boise	Mores Creek Family Medicine
Jared Pikus	Cottonwood	St. Mary's Hospital
Garrett Seibold	American Falls	Power County Hospital District
Krysten Stoops	Moscow	Moscow Family Medicine
Michael Wheaton	Nampa	Saint Alphonsus Medical Group

2015 - IRPIP Renewals & New Recipients

<u>Name</u>	<u>City</u>	Practice Site/Renewal Status
Lance Hansen	Montpelier	(renewal: year 4)
Nicholas Lewis	Nampa	(renewal: year 4)
Shaun Summerill	Pocatello	(renewal: year 4)
Randi Edwards	Coeur d'Alene	(renewal: year 3)
Isaac Elam	Fruitland	(renewal: year 3)
Marc Farnworth	Cottonwood	Left RPIP: 12/05/2014
Tema Jessup	Grangeville	(renewal: year 3)
Brian Beesley	Ammon	Left RPIP:08/31/2015
Matthew Nelson	Boise	(renewal: Year 2)
Jared Pikus	Cottonwood	(renewal: Year 2)
Garrett Seibold	American Falls	(renewal: Year 2)
Krysten Stoops	Moscow	(renewal: Year 2)
Michael Wheaton	Nampa	(renewal: Year 2)
Maureen Ferguson	McCall	St. Luke's McCall
Trevor Jacobson	Montpelier	Bear Lake Memorial Hospital
Katherine Ball	Caldwell	Saint Alphonsus- Elm Clinic
Stuart Knapp	Preston	Franklin County Medical
Bryn Parker	Moscow	Moscow Family Medicine
Justin Smith	Jerome	St. Luke's Jerome

The Future of Medical Education in Idaho

Idaho currently ranks near the bottom of the U.S. for the number of physicians per capita, as well as for the number of primary care physicians. We also have an aging physician workforce. Recognizing the need for more physicians to care for our citizens, several state and professional groups have called for expansion of both undergraduate (UME) and graduate medical education (GME) in Idaho. In 2009, the Idaho State Board of Education's Medical Education Study Committee developed a prioritized list of recommendations to address the significant physician workforce challenges in Idaho. These recommendations were approved by the State Board of Education and directed that they be forwarded to the Governor and the Idaho Legislature, and can be viewed at: www.boardofed.idaho.gov/board initiatives/medical ed/mesc overview.pdf. Using these guiding principles, there has been gradual and strategic expansion of both graduate medical education (GME) and undergraduate medical education (UME) in Idaho.

Over the past several years, there has been some expansion of GME within Idaho. The Family Medicine Residency of Idaho expanded their residency class size to 16 residents per year. In addition, the Idaho State University Family Medicine Residency in Pocatello increased their class size to 7 residents per year. In 2011, the UW Boise Internal Medicine Residency took their first class of interns to become a full 3-year residency.

In July of 2014, the Kootenai Clinic Family Medicine Coeur d'Alene Residency accepted their first class of 6 residents per year.

In addition to GME expansion, during the 2013, 2014 and 2015 legislative sessions, the Idaho Legislature and Governor Otter approved class expansion of the Idaho WWAMI entering classes to 25, 30 and 35 students per year, respectively. As recommended by the State Board of Education, there will be additional requests to the Idaho Legislature for 5 additional students in 2016 until an Idaho WWAMI class size of 40 students per class is achieved. In addition, the State Board recommended working towards expanding the total number of Idaho sponsored medical students to 60-90 per year through partnerships with WWAMI, WICHE, University of Utah, and other medical schools.

There is still much work to be done to ensure access to quality medical care for all Idahoans. We urge the continued strategic increase of both medical students and residents in the Idaho physician pipeline, as well as collaboration with stakeholders throughout the state to meet our physician workforce needs.

WWAMI REGIONAL PROGRAMS IDAHO COMMUNITY OUTREACH AND PIPELINE PROGRAMS 2014 - 2015

Idaho WWAMI Outreach to High School Students

Throughout the year, the Idaho WWAMI Medical Education Program provides presentations that are designed to provide high school students and their parents an opportunity to learn about the different factors involved in pursuing a career in medicine. The program focuses on: high school preparation, undergraduate studies, application to medical schools, financing medical school and medical student experiences.

Idaho WWAMI Pre-Med Summit

Every two years, the collective colleges and universities in Idaho, under the coordination and leadership of the WWAMI programs in Boise and Moscow, host a one day Pre-Med Summit on an Idaho college campus. The sixth Idaho Pre-Med Summit was held May 31, 2014, at University of Idaho, Boise. Fifty-seven Idaho undergraduate pre-medical students and five Idaho undergraduate pre-medical advisors attended the one day program. The objectives of the summit are to:

- Discover pre-medical learning opportunities
- Learn about medical education and training
- Learn about the medical school application process
- Gain skills in preparing for admission interviews
- Develop networking opportunities with regional medical students

Presentations and information discussed during the 2014 Pre-Med Summit are available to anyone at this link: http://www.uidaho.edu/boise/wwami/pre-med-summit. The next Pre-Med Summit will take place in May, 2016.

Primary Care Summer Shadowing Opportunity for Pre-Med Students

Since 2002, the Idaho WWAMI Medical Education Program and the Idaho Academy of Family Physicians have offered a summer shadowing opportunity with an Idaho primary care physician to Idaho's pre-medical students. Each spring, student applications are distributed and returned to the Idaho WWAMI Medical Education Program office to match with interested Idaho physicians. This may be the only experience with a primary care physician the student has had up to this point in their education. This introduction to primary care assists the students when making career decisions.

- 33 undergraduate students were matched and participated in the summer shadowing experience in 2015
- 23 physicians accepted students, representing 9 different communities all over Idaho

Idaho WWAMI Mini Medical School

In October, 2014, the 12th Annual Mini Medical School was held at St. Luke's Health System Boise. The series title was "Primary Care and Public Health"

This series is geared for the general public and occurs one evening per week for four consecutive weeks. Lectures are provided at a level suitable for the general public by faculty physicians and volunteers of the Idaho WWAMI Medical Education Program and various Idaho community physicians and area subject matter experts. Each evening before the start of the Mini Medical School session, high school and undergraduate premedical students met with current WWAMI medical students to talk about medical school experiences and learn more about the application and admissions process and medical school curriculum.

WWAMI AREA HEALTH EDUCATION CENTER (AHEC)

History

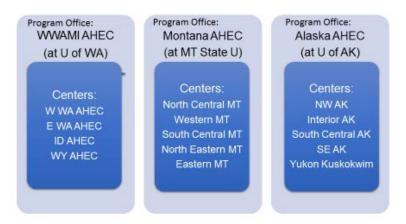
The WWAMI AHEC program began in 1985 at a time when the region's rural economy and health care system were severely distressed. Rural hospitals were closing in record numbers and local health systems were increasingly unable to provide access to quality healthcare. WWAMI AHEC has been working on this problem for almost 30 years through a range of projects aimed at improving and expanding the health workforce serving our region. These programs include encouraging young people to pursue careers in health, providing training opportunities for medical students in settings outside large cities, and recruiting health professionals to the region.

WWAMI AHECs in the region are also key advocates for rural and urban underserved health systems. Communities in the region can turn to the AHECs for help with health professional recruiting, community development, community assessments, and strategic planning. Since 1985, the WWAMI AHECs have worked directly with many communities in the region to help them strengthen and expand their health systems.

The AHEC Program Office at the University of Washington with its four centers and the two affiliated program offices, one at Montana State University and one at the University of Alaska, each with five centers, comprise the AHECs in WWAMI States (Figure 1). Through this network, 14 centers are located across the five-state region (2 in Washington, 1 in Wyoming, 5 in Alaska, 5 in Montana and 1 in Idaho) and all enjoy the confidence of the rural communities in their states. The AHECs have locally representative boards of directors or advisory committees. The centers and program offices regularly meet as a group convened by the WWAMI-AHEC program office in the Office of the Dean of the School of Medicine at the University of Washington.

Figure 1.

Area Health Education Centers (AHECs) in WWAMI States



The AHECs were phased in to operation sequentially beginning in 1985. Each received federal funds through the National AHEC Program for six years, the maximum allowable through that federal source. The AHECs are then self-sustaining from a mix of sources, including federal Model State-Supported AHEC grants, grants from other federal agencies, state governments, foundations, local sources and fees for services. In

September 2005, HRSA granted program status to the Alaska AHEC, substantially increasing their funding. The Alaska AHEC continues its affiliation with the WWAMI-AHEC through a Memorandum of Agreement. In August 2007, HRSA similarly granted the Montana AHEC program status and this affiliation also continues with the WWAMI-AHEC. Recently, many of the Centers have been challenged because their funding has been reduced or threatened with elimination because of declining budgets and increased competition for the funds.

With reputations as independent brokers in health professions education, the AHECs leverage scarce federal funds by collaborating with well over 750 entities, including universities, colleges, high schools, hospitals, health care agencies, private foundations and units of federal, state, county and local governments.

The centers are among 150 AHECs across the United States that comprise a national network in place to address emerging healthcare concerns ranging from the need for a primary-care workforce to the need for expanded training in health care for the country's growing population of veterans.

Overview of WWAMI AHEC Accomplishments

WWAMI AHEC activities are directed at:

- growing and developing healthcare career pipeline programs,
- promoting a diverse workforce by representing the needs of rural and underserved communities and advocating for the inclusion of underrepresented minorities in the health professions,
- developing and supporting community-based education programs to promote primary care rural and underserved practice,
- supporting the activities of the National Health Service Corps and State Loan Repayment Programs in order to increase the number of providers choosing to work in rural and urban underserved environments,
- creating opportunities for students from different health professions to learn and work together,
- creating partnerships throughout the WWAMI region to coordinate activities bringing together health professions students to conduct meaningful service learning in underserved communities,
- creating opportunities for faculty from different health professions to learn and work together, and
- supporting interdisciplinary/interprofessional continuing education and professional development for primary care providers and other health professions serving rural and underserved communities.

In 2014-15 the WWAMI AHEC had affiliations with 117 training sites training over 140 medical and nursing students; 95 percent of which were in underserved sites, including community and migrant health centers, Indian Health Service facilities, health departments, and other medically designated underserved sites. The AHECs made contact with over 3,600 students and preceptors with over 21,700 clock hours in healthcare and health related training. More than 1,000 students participated in health career preparation programs. In the field of continuing education, the centers conducted

programs that reached over 3,000 professionals in dentistry, nursing, allied health fields and pharmacy as well as several thousand in medicine, with over 21,500 contact hours.

The AHECs also join in promoting interdisciplinary training, service-learning, faculty development and telecommunications and telemedicine. In addition to administering the AHEC network, the program office at the University of Washington offers many opportunities for interprofessional service learning and education for students across the health sciences. More than 150 students in the University of Washington's six health sciences schools each year express an interest in practicing in rural or underserved areas. The University of Washington's AHEC program office conducts a series of activities during the year to sustain student interest in serving rural and underserved areas and to promote student interaction and shared learning across the health professions.

IDAHO AREA HEALTH EDUCATION CENTER (IAHEC) 2014 - 2015

The Idaho Area Health Education Center (**Idaho AHEC**) is affiliated with the University of Washington School Of Medicine's WWAMI Area Health Education Program. Idaho AHEC has been a program of Jannus, Inc. (formerly Mountain States Group) in Boise, Idaho since 1987.

During this project year, from September 1, 2014 through August 31, 2015, Idaho AHEC met grant objectives and supported our mission with the following activities:

Served on the Rural Physician Incentive Program, Rural Health Access Program, Idaho Student Loan Repayment Program, and Flex Program grant review boards.

Served on the Idaho Department of Insurance High Risk Pool and Small Employer Insurance board of Directors.

Served on the Idaho Community Health Workers workgroup, tasked with identifying a delivery strategy and educational components for an Idaho Community Health Worker training program to be presented to Idaho Healthcare Coalition (IHC), which serves by executive order to implement the State Healthcare Innovation Plan (SHIP) to develop a patient-centered model of care that "focuses on improved population health, improved individual health outcomes, and cost efficiencies."

Delivered the <u>Frontier Footnotes</u> newsletter in January and May, 2015. The newsletter, containing relevant information for health career students, health professionals, and communities, was distributed both electronically and in print to a readership of almost 1,000.

Continued coordination of the Idaho Telehealth Alliance (formerly Idaho Telehealth Task Force), a state wide collaboration of key stakeholders working together to expand access to health care in rural / frontier regions through secure video technology. Members of the ITA Executive Committee Idaho served with others specified by HCR 46 (signed into law by Governor Otter in March 2015) on the Idaho Telehealth Council. Having these key leaders in both roles (Council members and ITA executive committee) facilitated the highest level of coordination between the two groups. As of 8/31/15, there were a total of 137 members comprised of 56 individual memberships and 81 corporate memberships (four or more people per organization). Lynsey Winters-Juel provided program management. The executive committee met monthly following Idaho Telehealth Council meetings and full membership meetings were held quarterly. Planning for "ITA 2015: Idaho Telehealth Summit" scheduled for October 22nd and 23rd, began in April 2015.

Continued to enhance the <u>Idaho AHEC website</u>, adding an entire section devoted to telehealth, upgrading the events calendar, and linking the site to the <u>Idaho AHEC</u> <u>Facebook page</u>. Idaho AHEC interns maintain the events calendar and Facebook page.

Partnered with the Bureau of Rural Health and Primary Care to provide "Orientation to Health Careers" pipeline program in two communities. In Blackfoot, Bingham Memorial Hospital held a two-day program in June 2015 that included:

- 16 presenters covering 12 different fields of healthcare
- Hands on activities—suturing, intubation clinic, ultrasound, and Interventional Radiology
- Public Health activity led by the Southeastern Idaho Public Health Department

Medical resident and student engagement

Participation of 18 high school students, with additional outreach to 100 middle-school students

In Malad, the Health Occupations Students of America (HOSA) advisor coordinated a three-day program in April that included:

- An introduction to Health Careers
- Public Health Nurse Presentation
- Hands on activities—vital signs, health career scavenger hunt, CPR/AED, Emergency Skills and First Aid
- EMT guest speaker and ambulance tour
- Facility tours
- Dentist/Dental Hygienist presentation
- Family Practice presentation
- HOSA information and information about relative classes at Malad High School
- Engagement of Malad HOSA students in program coordination
- Participation of 20 middle-school students

Provided financial support for:

- BSU's Rural Nurses Education Program (stipend support for rural rotations)
- UW Medical students in (R/UOP) rural rotations throughout Idaho
- WWAMI Idaho Mini-Medical School Series

Hosted two internships, adding 420 hours of program support. An MPH student from A.T. Still University worked with Idaho AHEC to deliver a one-day training entitled "Positive Strategies: Make a difference in the lives of emotionally damaged families targeted for counselors, marriage and family therapists, and social workers. Up to six

CEUs were offered to attendees. A Boise State University Health Sciences student also interned providing administrative support.

Received program guidance and support via an advisory board comprised of primary care professionals and health academic program leaders.

To learn more about Idaho AHEC activities we invite you to visit www.idahoahec .

Idaho AHEC Staff

Katrina Hoff, Project Center Director khoff@jannus.org @ 0.50 FTE

Lynsey Winters-Juel, ITA Program Manager <a href="mailto:lright] lighter light

Patty McCrorie, Administrative Assistant pmccrorie@jannus.org @ 0.10 FTE

GRADUATE MEDICAL EDUCATION PROGRAMS – RESIDENCY ACADEMIC YEAR 2014 - 2015

THE UNIVERSITY OF WASHINGTON FAMILY MEDICINE RESIDENCY NETWORK

IDAHO June 2014 – July 2015

Network Overview

The University of Washington Family Medicine Residency Network (WWAMI Network) is a group of twenty-five family medicine residency programs (see map) related to each other by geography and medical school affiliation and includes the Idaho State University Family Medicine Residency in Pocatello; Kootenai Clinic Family Medicine in Coeur d'Alene; and the Family Medicine Residency of Idaho (FMRI) in Boise, which also has rural training tracks in Caldwell and Magic Valley (Jerome/Twin Falls). The primary role of our residency network, now in its 43rd year of operation, is to ensure access to high quality family medicine residency training in our region. Our goal is to provide every regional program access to the strengths of the University of Washington's Academic Health Sciences Center while enjoying the benefits of community-based training. Graduate medical education is a high priority in the Department of Family Medicine as a critical part of the pipeline supplying family physicians for our region.

The last several years have seen an unprecedented wave of interest in developing new family medicine residency programs in the WWAMI region. This interest has led to the accreditation of 5 new allopathic (MD) programs by the Accreditation Council for Graduate Medical Education (ACGME) – including the program in Coeur d'Alene – reflecting the most growth in any area of the country. Following the lead of these new programs, there are a number of programs and rural training tracks in development or discussion in other communities across the WWAMI region. Both Moscow and Nampa have been exploring the possibility of developing programs, but there are no active plans in either community at present. We are always ready and willing to help if these discussions become more active.

In addition to these new allopathic programs, the last several years have also seen the accreditation of 5 osteopathic (DO) programs by the American Osteopathic Association (AOA) in the region. In 2014, the ACGME and the AOA decided to merge their accreditation processes to create one standard for residency education. By 2020, all programs that currently fall under the purview of the AOA will need to meet the requirements of ACGME accreditation. The staff and faculty at the Network are working actively to engage the AOA-accredited programs in the region to help them begin to meet the ACGME standards and join as members of the Network. The Network has also been working to advocate for minor changes in the ACGME requirements that will make it easier for osteopathic programs and osteopaths to fully participate. For example, the Family Medicine Review Committee at the ACGME recently made a minor language change in the Family Medicine program requirements to allow osteopaths to be Program Directors, in large part due to a request by the Network.

Members of the Network receive a wide range of services. Staff and faculty at the Network provide: program development services; faculty development opportunities; internal review coordination; facilitation of program-to-program sharing of best practices and faculty expertise:

access to data from a number of surveys and other regional aggregate information; coordination and facilitation of meetings and teleconferences; marketing and recruitment materials and tools; website and database creation and maintenance; travel reimbursement processing; and a variety of other services.

On July 1, 2014, the ACGME implemented a new, competency-based accreditation process, designed with the intent to reduce administrative burden, facilitate innovation, improve patient safety, and enhance quality of patient care. The components and requirements that are part of this new accreditation process have required a huge amount of work on the part of individual residency programs. The Network has been working to make sure we assist programs with getting up to speed with all of the new components, including offering internal site reviews and mock-Clinical Learning Environment Reviews. Both Family Medicine Residency of Idaho and Idaho State University Family Medicine Residency received one of these "mock" visits this past year.

One of the additional services we have been offering is intensive and ongoing support for program faculty and staff with New Innovations, the residency management suite used by almost all of the programs in the Network. Between June 2014 and July 2015, this included a New Innovations training for Kootenai Clinic Family Medicine by Network faculty member Paul Ford in January 2015.

Beyond the benefits to the programs themselves, residents who are in programs that are part of the Network receive access to the UW Health Sciences Library, gain opportunities for resource sharing, leadership, and publication, develop regional connections and exposure to innovative models of care and research, and are kept informed of practice openings and advanced fellowship training opportunities in the region as they approach graduation.

Developing Faculty and Resident Scholarly Skills

As a Founding Member of the Family Physicians Inquiries Network (FPIN), www.fpin.org, the Network has been able to bring scholarship opportunities to affiliated Network faculty and residents and make an important contribution to family medicine literature. These opportunities are even more critical with the ACGME Next Accreditation System, which requires faculty and resident scholarly activity. Over the past 13 years, Network faculty and residents have published 167 evidence-based Clinical Inquiries in the American Family Physician, The Journal of Family Practice, and/or the Evidence-Based Practice (EBP) journal. Seven of these Clinical Inquiries have been published in the 2014-15 academic year, with another 5 to appear in press in the next 6 months. Additionally, this past academic year, Network authors have published 31 HelpDesk Answers (HDAs) and 1 eMedRefs in the EBP journal, with another 22 HDAs that are currently pending publication.

A number of faculty and residents have been sharing posters and giving presentations at regional and national conferences. The Network was well represented among the presentations and posters shared at the Annual Spring conference of the Society of Teachers of Family Medicine in April 2015 in Orlando, Florida.

Many programs in the Network participate in the WWAMI region Practice & Research Network (WPRN), a collaborative group of primary care practices in the WWAMI region committed to research and practice improvement. WPRN members contribute to evidence-based knowledge in primary care by generating project ideas, conducting studies at their own sites, and

collaborating on studies across the WPRN. This year, 14 programs are involved across seven studies. In Idaho, all three programs have signed up to participate in a study led by the WPRN Coordinating Center, "Using EHR Data to Inform Practice Improvement: Hepatitis C Screening in Primary Care." The Pocatello program is also engaged in a few other studies, including "Impact of Innovations on Primary Care Workforce Configuration" and "How Well are Contraceptive Guidelines Followed?" FMRI in Boise also is participating in "Improving Colorectal Cancer Screening: A systems based approach" study.

John Holmes, PharmD, faculty at the Pocatello program, is part of the University of Washington "Patient Centered Outcomes Research Partnership (PCORP)" program, which trains clinicians and researchers in comparative effectiveness and patient centered outcomes research using an innovative hybrid in-person and on-line educational model. Dr. Holmes also received a pilot award this year from the UW Institute for Translational Health Sciences to lead a project entitled, "Feasibility of Integrated Telepharmacy Services in Rural Primary Care Clinics (INTERACT)." Dr. Holmes is the collaborating with Rex Force, PharmD, also faculty at the Pocatello program, on this project. Additionally, as part of the WPRN obesity card study, "Patient Preferences for Weight Loss in Primary Care," an evaluation of the study's development, implementation, and dissemination were conducted and the results of that evaluation were published in July 2015 by a group of authors that includes John Holmes, PharmD as well as Alex Reed, PhD, who was formerly on the faculty at Family Medicine Residency of Idaho.

The Network continued to facilitate connecting interested faculty and programs to the simulation training workshops held at the Madigan Military Hospital's Andersen Simulation Center and taught by Madigan faculty. This year a new approach was piloted, the Simulation Training Road Show, where the Network coordinated the logistics of sending a pair of Madigan faculty to a program's site. The Madigan faculty then trained and coached residency faculty and other medical center clinical educators on the site's own simulation equipment. Feedback thus far on the efficacy of the training has been positive.

Faculty Development

Faculty development is a high priority for the Network and for individual Network programs. The Faculty Development Fellowship is the cornerstone of Network faculty development and graduated its 28th class during 2014-2015, bringing the number of early-career residency faculty we have trained to teach at our affiliate programs up to 292. Brittany Burns, MD, Kootenai Clinic Family Medicine faculty member, and Winslow Gerrish, PhD, faculty member at FMRI, were among the 12 fellows that made up the 2014-2015 fellowship class.

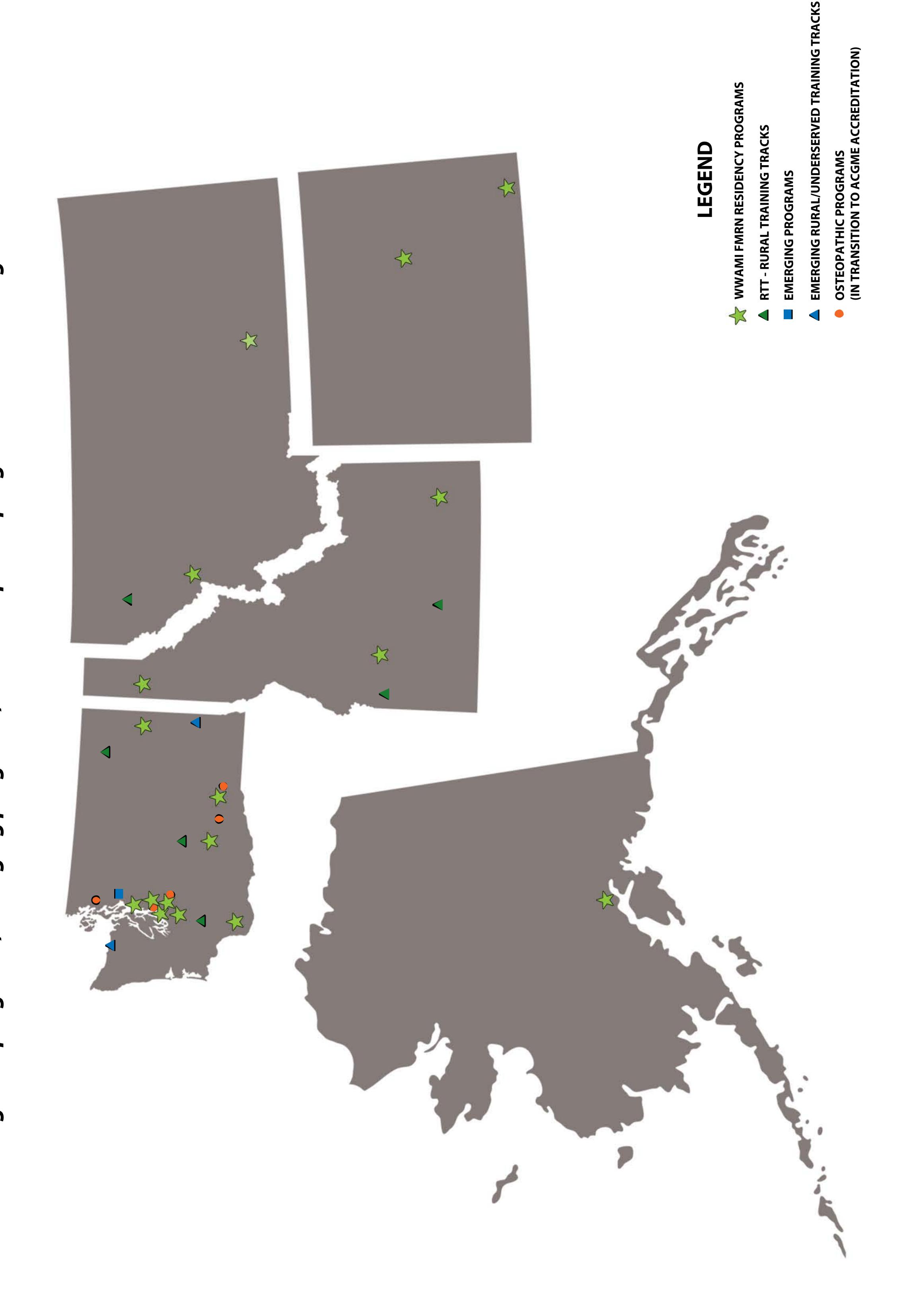
Our distance faculty development program, which began in January 2013, continues to be a huge success with monthly webinars on topics of interest to residency faculty. Faculty from around the Network have presented on these webinars as a way of sharing program best practices. Almost all Network programs have been represented on each webinar and some programs have taken advantage of the standing webinar time to create their own group faculty development activity around it. In September 2014, Kelli Christiansen, MD, from Pocatello presented a webinar entitled, "Integrating Residents into Hospital Patient Safety Initiatives," and in February 2015, Justin Glass, MD of FMRI participated on a panel as part of the webinar, "Four Programs' Insights on the Program Evaluation Committee (PEC)."

On May 14-15, 2015, 47 chief residents attended the 16th Annual Chief Resident Conference in Seattle, including three chiefs from Pocatello and four from FMRI, plus one from the FMRI rural training tracks. Having started their first class on July 1, 2014, the program in Coeur d'Alene does not yet have 3rd year residents to send to the conference. Every program benefits from this opportunity for skill building and networking among residents with leadership roles.

The Network is committed to fostering the best family medicine training in Idaho, WWAMI and the country. Our twenty-five Family Medicine Residency Network programs provide outstanding training. The Network, the Department of Family Medicine and the School of Medicine are proud to have the Idaho State University Family Medicine Residency, Kootenai Clinic Family Medicine, and the Family Medicine Residency of Idaho (FMRI) and its rural training tracks among our members.

Network Family Medicine Residency

programs, and osteopathic programs transitioning to ACGME accreditation



THE FAMILY MEDICINE RESIDENCY OF IDAHO, INC. Boise, Idaho

THE FAMILY MEDICNE RESIDENCE OF IDAHO, INC.
CALDWELL RURAL TRAINING TRACK
Caldwell, Idaho

THE FAMILY MEDICINE RESIDENCY OF IDAHO, INC.
MAGIC VALLEY RURAL TRAINING TRACK
Twin Falls/ Jerome, Idaho
2014 - 2015

The Family Medicine Residency of Idaho, Inc. (FMRI), founded in 1975, currently has 48 residents and accepts 16 new residents per year through the National Resident Matching Program. The mission of FMRI is to enhance the health of the citizens of Idaho by providing Family Medicine resident physicians with three years of high quality education with a strong emphasis on the demands and opportunities of rural and under-served populations. The Caldwell Rural Training Track program located in Caldwell, Idaho, was started in 1995. Currently, three residents per year in this rural track spend the last two years of their residency training at this location. The Magic Valley Rural Training Track located in the Twin Falls and Jerome, Idaho, started in 2009. Two residents per year in this rural track spend the last two years of their residency training in the Magic Valley.

To date, 312 family medicine physicians have graduated from FMRI; 53% are practicing in Idaho and 54% are serving rural, underserved or health professional shortage areas in Idaho. FMRI programs are fully accredited by the Accreditation Council for Graduate Medical Education (ACGME); FMRI is affiliated with the University of Washington School of Medicine, Department of Family and Medicine. FMRI is supported in part by local hospitals; Saint Alphonsus Regional Medical Center, St. Luke's Regional Medical Center, Boise VA Medical Center, West Valley Medical Center in Caldwell, St. Luke's Magic Valley, and St. Luke's Jerome. FMRI was approved by the federal government in October 2013 to become a Federally Qualified Health Center. With having approximately 80% Medicaid, Medicare, and uninsured patients that FMRI cares for, this enhanced reimbursement for our Medicaid and Medicare patients allows FMRI to continue this much needed service to this vulnerable population and the uninsured patients of south west Idaho. FMRI became one of the nation's first 11 Teaching Health Center (THC). This federal designation is reserved for primary care residency programs and FQHC's that are working together or are combined as a single entity.

Family Medicine Clinics

FMRI operates seven family medicine clinics (Family Medicine Health Center (FMHC)) in Ada County, Idaho. *West Boise*: Raymond clinic located at 777 N. Raymond and Emerald clinic located at 6094 Emerald. *East Boise*: Fort Street clinic located at 121 E Fort Street. *Garden City*: Garden City clinic located at 215 W 35th Street. *Meridian*: Meridian clinic located at 2275 S. Eagle Road, Suite 120 and Meridian Schools clinic located at 925 NW 1st Street. *Kuna*: Kuna clinic located at 708 E. Wythe Creek Court, Suite 103. Faculty and residents provided 55,949 outpatient visits last academic year at FMRI. In addition to their continuity clinics consisting of family medicine, adult medicine, OB, and pediatric patients, the residents

participate in a variety of specialty clinics such as: orthopedic/sports medicine, plastics, surgery, dermatology, vasectomy, procedures, treadmill, and geriatrics. During the resident's three years of training, they have increasing responsibilities in patient care, management of their own continuing education, and participation in the management of the FMHC. FMRI strives to help these physicians develop a balanced medical lifestyle that will provide them with long-term satisfaction in the practice of family medicine. The clinics continue to update our practice management system to allow residents to learn systems based practice and population based care principles. Additionally, FMRI is fully engaged in the future of family medicine and has been recognized by the National Committee for Quality Assurance (NCQA) as a Level III Patient Centered Medical Home (PCMH). The residents are assigned to one of our PCMH clinics for their continuity clinic patients to give them the experience of working in our PCMH model clinics.

Curriculum and Faculty

The curriculum is designed to broadly prepare residents for the unique demands and opportunities of medical leadership in all settings, including rural practice. It includes an emphasis in obstetrics, pediatrics, medicine, emergency medicine, and surgical assisting that is not found in many other programs. During the second and third year, residents have a required one-month rural rotation and spend time with a family physician in rural practice in one of 34 rural locations in Idaho to learn first hand the unique challenges and rewards of practice in a smaller community. During the first year the residents have a required two-week rural rotation as well.

FMRI has 27 Family Medicine core faculty with 15 additional faculty in behavioral science, pharmacology, psychiatry, surgery, pediatrics, obstetrics, nutrition, sports medicine, and HIV primary care. Presently FMRI employs two PA's, seven NP's, a Pediatric NP, a nurse mid-wife, six social workers and a nutritionist. FMRI is also fortunate to have the contributions from many community physicians who precept residents and assist in the residents' training.

Primary Care Sports Medicine Fellowship

FMRI offers a one year sports medicine fellowship post residency. The Primary Care Sports Medicine Fellowship is a 12-month multi-disciplinary program of special training experience founded in 1999 and designed to provide an environment for the primary care physician to develop clinical competency in applying her/his knowledge, skills, and attitudes to those engaged in sport and exercise. Located primarily at the Idaho Sports Medicine Institute (ISMI) and functionally integrated with the Family Medicine Residency of Idaho (FMRI), the fellow will also work with surrounding facilities and personnel at Boise State University, some private local physicians' offices, a minor league Baseball team (Boise Hawks) and an area high school. Time will generally be shared between the ISMI and FMRI sites.

HIV Primary Care Fellowship

FMRI offers a one-year HIV Primary Care Fellowship post residency. This fellowship is a 12-month post-residency training opportunity, founded in 2005 that provides a suitable environment for the Family Medicine physician to gain additional experience providing comprehensive care to HIV-positive patients, including management of antiretroviral therapy and opportunistic infections. The fellowship has also developed significant curricular time in the treatment and management of Hepatitis C, Tuberculosis, and refugee medicine. This fellowship will also place specific emphasis on provision of care to the underserved and rural HIV-positive populations. The fellowship is directed by a HIV specialized family physician and works with three infectious disease specialists. The HIV clinic is located with the FMHC Emerald clinic and cares for over 700 HIV/Aids patients in the Treasure Valley.

Geriatric Fellowship

FMRI offers a one-year Geriatric Fellowship post residency. This fellowship is a 12-month post-residency training opportunity, founded in 2013 that provides a suitable environment for the Family Medicine physician to gain additional experience providing comprehensive care to older adult patients. As a community health center, FMRI provides geriatric care to a broad spectrum of patients: from the fit to the frail, from the independent to the dependent, and to persons from varied social, ethnic, and economic backgrounds. Training during the fellowship will emphasize comprehensive longitudinal care in the patient center medical home model. Training settings include acute care and ambulatory sites, nursing homes and hospice settings. The geriatric fellow will work as part of an interdisciplinary team which includes physician assistants, nurse practitioners, social workers, clinical psychologist, psychiatric residents, pharmacists and a dietician as well as other family medicine physicians and family medicine geriatricians.

Obstetrics Fellowship

The Primary Care Obstetrics Fellowship is a 12-month post-residency program that provides specialty training in the areas of operative obstetrics, high risk maternity care, and neonatal stabilization, combined with continued Family Medicine exposure. Founded in 2015, this fellowship provides specific training in cesarean sections, operative vaginal deliveries, post-partum management, obstetrical ultrasound, and NICU. Additionally, the fellows gain knowledge in high risk maternity care throughout the spectrum of pregnancy: antepartum, intrapartum, and postpartum. This is integrated with a continued Family Medicine experience through clinic and precepting located primarily between St. Luke's Hospital, Boise Campus, and the Family Medicine Residency of Idaho (FMRI). The fellows also have opportunities to work with some surrounding hospitals to enhance their operative skills.

Medical Student Education

In addition to graduate training for residents, the program provides clerkships in family medicine and pediatrics for medical students, many of whom are Idaho WWAMI students and attend the University of Washington. Some students are also hosted from the Pacific Northwest University of Health Sciences and medical schools focused on preparation for rural practice. These students are exposed to family medicine physician role models early in their training by working closely with residents and faculty who teach them enthusiastically about family medicine.

Medical students are also offered the popular option of spending one week of their rotation with rural physicians in one of a number of rural communities.

Physician Assistant, Nurse Practitioner, and Social Work Education

FMRI recognizes the important team role that Physician Assistants (PA), Nurse Practitioners (NP), and Social Workers (SW) contribute to health care in Idaho. Recognizing that residents will need to interface with these providers after graduation in the patient centered medical home practice, PA's, and NP's have been integrated into clinical roles. Understanding how the "team" functions is an important goal of education at FMRI. Presently FMRI employs two PA's, seven NP's, a Pediatric NP, a nurse mid-wife, six social workers and a nutritionist.

Pharmacy Students/Residents

Under the direction of the faculty PharmD, pharmacy residents from the Idaho State University College of Pharmacy serve six-week rotations at FMRI working in both clinic and hospital settings. Not only does this give these residents exposure to rural health care but also it enriches the training of family medicine residents. The above model of interdisciplinary training captures the essence of what it means to be designated a teaching health center.



- OF IDAHO-



Jessica Colwell, MD Nina Abul-Husn, MD Boise Program

Oklahoma State University College of Osteopathic Medicine Steven Harmon, DO Magic Valley RTT University of Queensland Magic Valley RTT

Saba University

University of Connecticut School of Medicine Tyler Hudon, MD Caldwell RTT

Oregon Health & Science University School of Medicine Boise Program

Adam Kipp, MD

University of Washington Kara Kuntz, MD Boise Program

Dartmouth Medical School Boise Program

Oregon Health & Science University School of Medicine Boise Program

Geoff Maly, MD

Emily Looney, MD



Travis Moulton, DO Stephanie McCullough, MD University of Florida College of Medicine Boise Program

Pacific NW University of Health Sciences College of Osbeo Med Caldwell RTT

Tulane University School of Medicine Boise Program

University of Washington Boise Program

University of Colorado Boise Program

University of California San Francisco Boise Program

University of Washington Boise Program

Class of 2015



- OF IDAHO -





University of New Mexico SOM

Oregon Health & Science University SOM

Geisel SOM at Dartmouth

Michigan State University College of Osteo, Medicine

Boise Program

Magic Valley RTT

Saba University

Loma Linda University SOM

University of North Dakota SOM

Loma Linda University SOM

Caldwell RTT

Boise Program

Boise Program

Boise Program

Boise Program

Boise Program



Micole Ruske, MD University of North Dakota SOM Justin Rosenau, MD Caldwell RTT University of Texas Medical Branch SO M Bonnie Reed, MD Boise Program Justin Parkinson, DO Edward Wa Virginia College of Osteo. Medicine Caldwell RTT

University of Washington SOM

Jaime Palmer, MD Boise Program



A.T. Still University School of Osteo. Medicine Magic Valley RTT Albert Einstein COM of Yeshiva University Boise Program

USF Health Morsani COM Cara Sullivan, MD Boise Program

Adam Schwind, DO



University of Washington SOM Kelsey Terland, MD Boise Program

Class of 2016



OF IDAHO







Jenna Ingersoll, MD University of Wisconsin SOH Boise Program

Rush Hedical College

Boise Program



Jaclyn Cooperrider, MD University of Washington SOH Boise Program Chelsea Carlson, MD Northwestern University Feinberg SOH Boise Program

Ratpers Robert Wood Johnson Medical School Boise Program

Nathan Defrees, MD Oregon Health Science University SOH Boise Program

University of Washington SOH Magic Valley RTT





Michael Wauters, MD

Michael Twomey MD

Maia Pinsky, MD

Lindsay Orme, MD

Tara Mertz-Hack, MD

University of Wisconsin SOM

Dream University COH

University of Vermont COH

University of Washington SOH

University of North Dakota SOH

Magic Valley RTT

Boise Program

Boise Program

Caldwell RTT

Boise Program





University of Himnesota Herical School Boise Program



Ross University SOH Caldwell RTT



University of Washington SOH Kelsey Wertzler, MD Boise Program















Boise Program

University of Vermont COM

DesMoines University College of Osteopathic Medicine

Western Univ. of Health Sciences College of Osteopathic Medicine

Pennsylvania State University

COM

Boise Program

Boise Program

Magic Valley RTT

Boise Program





MPH







Western Univ. of Health Science College of Osteopathic Medicine

University of Washington SOM

University of New Mexico SOM

Boise Program

Boise Program

Boise Program



Ross University SOM Caldwell RTT University of Washington SOM Magic Valley RTT



Univ. of Texas Medical Branch Kenneth Stupka, MD, Caldwell RTT

Class of 2018

IDAHO STATE UNIVERSITY DEPARTMENT OF FAMILY MEDICINE 2014 - 2015

The Idaho State University Department of Family Medicine (DFM) was established in 1992 in what was then called the College of Health Professions and is now the Office of Medical and Oral Health in ISU's Division of Health Sciences. The Department is a multi-faceted clinical, educational, academic and technological entity with numerous divisions, including a Family Medicine Residency, Primary Care Pharmacotherapy Residency, Clinical Research Center, Clinical Grants Division, Humanities Division, Psychology Internship, Integrative Health Program and Health Information Technology Division. The Department shares the College's emphasis on preparing health professionals for service in Idaho's underserved areas.

Family Medicine Residency Training

Mission:

The ISU Family Medicine Residency Program is committed to high-quality, evidence-based care and service to our patients and community; university-based education of residents and students; and recruitment of physicians for the state of Idaho.

Landmarks:

At this point the Residency has graduated 109 family physicians. Over half have practiced in Idaho and over three-quarters care for underserved populations in health professional shortage areas, medically underserved areas, rural health clinics, rural communities and Indian Health Service clinics. This past June of 2015 the Residency graduated seven family physicians, six of whom have stayed in Idaho to practice in underserved settings throughout the state.

Vision:

We are committed to the ideal of the patient-centered medical home in providing patients a location where they can learn about their health, coordinate their care with other providers, and find answers to their health questions.

We are committed to teaching full-spectrum family medicine, providing quality evidencebased care to patients of all ages, and recognizing the impact that families have on the health of all their members.

We are committed to training and providing for the growing medical needs of the state of Idaho, recognizing that Idaho currently has a significant need for more family physicians to improve the health and quality of life of its residents.

We are committed to serving our university, community, state and profession. The university provides an environment of scholarship as well as other benefits to the training of medical professionals and resources vital to our overall mission. We also recognize our significant benefit to the university community and constantly work toward collaboration with our university colleagues to strengthen the community, health care system, and university as a whole.

The Residency's flexible curriculum offers training in the full breadth of family medicine. Obstetrical training includes a high volume of deliveries, care for high-risk pregnancies and a new Advanced Surgical Obstetrics Training Track that provides for advanced training in cesarean sections. Experience in the wide range of procedures that are needed in isolated rural practice is readily available. Teaching clinics attended by specialist faculty are offered in gynecology, dermatology, neurology, hepatitis C treatment and an interdisciplinary HIV clinic. Preparation for rural practice is fostered through rural rotations and hands-on practice management training.

The Residency's Inpatient Medicine Service coordinates closely with the Portneuf Medical Center Hospitalist Service to provide an incomparable training experience for family medicine residents, pharmacotherapy residents, medical students and physician assistant students.

Patient Centered Medical Home

Health West / ISU, the Residency's busy out-patient teaching clinic on the ISU campus, has become a federally qualified health center in collaboration with Health West. The clinic includes 19 examination rooms, a large procedure room, patient education rooms, two nurse's stations, residency offices, a large residents' room, state-of-the-art conference facilities, fully implemented electronic records, on-site IT staff, and open access clinic visits. PFM offers onsite laboratory, psychological services, nutrition counseling, pharmacy services and wireless network. PFM is home of the Bannock County Prenatal Clinic, the ISU GYN Clinic, a Hepatitis C treatment clinic and a Ryan White III HIV Clinic.

In April of 2015 Health West / ISU received Level 3 Patient Centered Medical Home (PCMH) Recognition (the highest level available) from the National Committee for Quality Assurance with a score of 89 out of 100 using 2011 standards. The PCMH is an approach to providing comprehensive primary care for children, youth and adults. The PCMH is based on the following principles:

Personal physician - each patient has an ongoing relationship with a personal physician trained to provide first contact, continuous and comprehensive care. **Physician directed medical practice** – the personal physician leads a team of individuals at the practice level who collectively take responsibility for the ongoing care of patients.

Whole person orientation – the personal physician is responsible for providing for all the patient's health care needs or taking responsibility for appropriately arranging care with other qualified professionals. This includes care for all stages of life; acute care; chronic care; preventive services; and end of life care.

Care is coordinated and/or integrated across all elements of the complex health care system (e.g., subspecialty care, hospitals, home health agencies, nursing homes) and the patient's community (e.g., family, public and private community-based services). Care is facilitated by registries, information technology, health information exchange and other means to assure that patients get the indicated care when and where they need and want it in a culturally and linguistically appropriate manner.

Quality and safety are hallmarks of the medical home which include: patient advocacy, evidence-based medicine, clinical decision support tools, personal accountability and quality improvement activities.

Enhanced access to care is available through systems such as open scheduling, expanded hours and new options for communication between patients, their personal physician, and practice staff.

Payment appropriately recognizes the added value provided to patients who have a patient-centered medical home.

Faculty

The Department has a diverse faculty that includes twenty-one full and part-time members. Disciplines represented include family medicine, internal medicine, infectious disease, psychology, pharmacy and obstetrics and gynecology. Residency faculty members serve in leadership roles with numerous state and local government agencies and professional organizations. The local medical community and Portneuf Medical Center strongly support the program.

Service to the Underserved

The Residency is a major provider to underserved populations in Pocatello and Southeast Idaho. Over 72% of the clinic visits are to Medicaid, Medicare and the uninsured. Pocatello Family Medicine's transition to a Community Health Center New Access Point allows for impoverished patients to access affordable primary care services paid on a sliding scale according to income. Residents provide care to the elderly in their homes, in retirement homes, skilled nursing facilities and nursing homes as well as in the hospital.

There is significant cultural diversity of our patient population. Our Spanish speaking residents provide outreach in rural Federally Qualified Health Centers. This is achieved through Rural Perinatal Clinics serving migrant and seasonal farm worker families in Aberdeen and American Falls. Our Inpatient Medicine Service cares for many Native Americans from the Fort Hall Indian Reservation.

Residents serve the OB/GYN needs of incarcerated women, the health needs of teenagers in the Bannock County Juvenile Detention Center, act as medical advisors to the local drug court, staff the local free clinic, volunteer for local ISU and school sports activities and speak at a variety of community health education venues. During their off hours they assist in staffing nearby emergency rooms. A sense of community service and societal responsibility is fostered in the residency.

Health Professions Education

The Department serves as a major clinical teaching resource for students from the ISU Schools of Nursing, Physician Assistants, Nutrition, Health Education, Psychology and Pharmacy. The Dentistry Residency and the Clinical Research Center on the lower floor of the Residency's Building provide a unique collaborative health professions teaching unit.

Clinical Research and Grants

Research: The ISU Family Medicine Clinical Research Center, under the direction of Rex Force, Pharm.D, continues to participate in several multi-center trials funded by the National Institutes of Health and industry in the areas of diabetes and cardiovascular therapeutics. Dr. Force serves on the Steering Committee of the WPRN, the practice-based research network of WWAMI. This group has been very active with several new projects developed, publications, and presentations at national meetings. The Department's involvement in the WPRN has resulted in numerous collaborative research opportunities. Finally, students, residents and faculty in the ISU Department of Family Medicine have collaborated on several projects directed at safe medication use, quality improvement, and the development of new programs to enhance the care of HIV patients. These projects have produced presentations at regional, national, and international conferences.

Training Grants: The Department's current five-year Title VII funded project is the 'Baby Boomer Medical Home', which applies lifestyle interventions to the needs of aging adults with physical activity, nutrition, behavioral health, pharmacotherapy consultation and transition of care services. The residency's new Transition of Care curriculum provides residents with hands-on experience in orchestrating safe, accurate and effective patient transitions from the inpatient setting in order to minimize medical errors and avoidable readmissions.

CHC Designation

The Residency's clinic, Health West / ISU, is a fully functional Federally-Qualified Health Center (FQHC), which came about as a result of a New Access Point grant in July 2012. The transition to a FQHC has allowed for increased access to affordable primary care for a wide range of uninsured and underserved patients and enhanced resident training in caring for underserved populations.

Expansion

The residency was initially approved for 4 positions per year in 1992 and reached a full complement of 12 in 1995. It has gradually grown to its current approved complement of 21 residents, two pharmacy residents and two psychology interns. The recent expansion from 18 to 21 residents has been partially funded by a five year Primary Care Residency Expansion grant for \$960,000 which continues through 2015. The Idaho Legislature recently approved ongoing, partial funding for the three expansion residency slots allowing continued recruitment of seven residents each year. As adequate faculty resources become available in the next few years, the Residency hopes to readdress a previously postponed effort to expand education into Rexburg through a Rural Training Track.

Sponsoring Institutions

The ISU Family Medicine Residency continues to enjoy enduring support from both of its sponsoring organizations, Idaho State University and Portneuf Medical Center, which is owned by Legacy Hospital Partners, a private corporate entity.

Pharmacotherapy Pharmacotherapy Notre Dame of Baltimore Texas Tech University Pharmacotherapy University of Kansas Nam Nguyen PharmD Pilar Davila PharmD Grace Unruh PharmD ISU Family Medicine Residency Roster 2015 - 2016 MD University of Washington School of Medicine Luke . DO Lake Ere College of ' Osteopathic Medicine MD Oregon Health & Science University School of Medicine Andrew Thomas Spencer Weston MD MD University of Minnesota Medical School MD University of Iowa, College of Medicine Univ. of Pikeville Kentucky College of Osteopathic Medicine Jessica Mendez Khristina Meissner Josie Syverson 8 DO Touro University-Nevada College of Osteopathic Medicine MD University College Cork MD St. George's Univ. School of Medicine Amie Reckon David Kimball David Hirschi MD University of Louisville School of Medicine MD Ross University School of Medicine MD Ross University School of Medicine Mitch Mendenhall Kevin Hilborn Eric Jensen Squire Hepworth MD University of Arizona College of Medicine Oregon Health & Science University School of Medicine St. George's Univ. School of Medicine Melissa Kjos Second Year Resident Physicians - Class of 2017 David Glenn Third Year Resident Physicians - Class of 2016 多行 First Year Resident Physicians - Class of 2018 MD ₩ W Scott v... DO Des Moines Univ. College of Osteopathic Medicine BO Rocky Vista University College of Osteopathic Medicine Mehamy Medical School David Downey Ashley Curtis MD Ross University Schod of Medicine Western Univ. Health Science/College of Osteopathic Medicine Touro Univ Nevada Osteopathic Medicine **Bradley Beaufort** Jonathan Barrus Lance Adams 東京 00

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KOOTENAI CLINIC FAMILY MEDICINE COEUR D'ALENE RESIDENCY

The mission of Kootenai Clinic Family Medicine Coeur d'Alene Residency is to provide superb, comprehensive graduate medical education, resulting in physicians who are committed to lifelong learning and to providing personal, patient-focused care. This fall our program begins recruitment for our third class which will fulfill our 6/6/6 complement and we couldn't be more pleased with how our classes are doing.

Our residents continue to go above and beyond in developing relationships with both community physicians and patients. Our seniors (second year class) continue to develop their leadership in the program and have elected Dr. Lauren Olsen as our first chief resident. In addition Dr. Doug Borst was elected to Chair of the National Convention for the American Academy of Family Physicians.

Our intern class is actively engaged in building ties to our community through a partnership with the Idaho Academy of Family Physicians Tar Wars programs as well as creating an application to apply and be a Reach Out and Read site. Many great things are happening for the benefit of our program and community!

Our faculty continues to build excellent curriculum and opportunities for our residents, including having Dr. Brittany Burns complete the UW Network Faculty Fellowship and Dr. Ryan Gilles attending the program this year. Dr. Gilles also is our leader in scholarly activities and has the program engaged in several simulations and studies with the Mayo Clinic Care Network.

Kootenai Health Hospital Facilities

Kootenai Health broke ground on a three-story, \$57 million expansion project to include a family birthing center, NICU and additional medical and surgical patient rooms last year. This expansion will add 100,000 square feet to the hospital and will open in March 2016. Kootenai Health has become a regional medical center and is community owned and operated as a nonprofit entity. The Family Medicine Residency is owned and sponsored by Kootenai Health and, as such, is part of Kootenai Clinic. Our residents are actively involved in all aspects of inpatient and outpatient medical care.

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Curriculum and Faculty

As part of our mission to train family physicians for rural medical practice, our curriculum includes the breadth of primary care. This includes extensive outpatient clinical care training, intense inpatient care for adults, children and newborns, obstetric care and surgery. Other areas of emphasis include behavioral health care, community and public health, geriatrics, palliative care and wilderness medicine. Our residents will spend at least one month with one of our rural community family physician groups, initially in Sandpoint, Idaho, and then in other northern Idaho communities. It is very important that our residents experience the unique rewards and challenges integral to living as a family physician in a smaller community.

We currently have six full-time family physicians, one psychiatrist, and three nurse practitioners. We are recruiting faculty to have eight family physicians, who will be teaching residents as well as caring for patients as practicing physicians. Maintaining skills as primary family doctors is critical. It is important to our faculty to maintain personal connections as primary family physicians in order to function as excellent role models for young physicians, while also improving patient access to care.

Medical Student Education

The program will grow to include more medical student teaching. We are a site for University of Washington WWAMI required clerkships in Surgery, Neurology, Family Medicine and Palliative Care, as well as an elective clerkship in Surgery. This past year was also the start of our first Family Medicine Sub-Intern experiences. The UWSOM continues to expand its undergraduate medical education program to help meet physician manpower shortages. Having faculty teach medical students helps enhance their expertise as superb clinicians and educators. Residents teaching medical students also greatly speeds the residents' own learning process.

Pharmacy Students/Residents

Kootenai Health has developed a PharmD residency program and has an ongoing program with Idaho State University PharmD students. The program has PharmD faculty integrally involved with this process and will continue to emphasize close interaction in education. This inter-disciplinary education in patient care interaction recognizes the growing importance of the team approach to an excellent healthcare delivery model.

Program Funding

Kootenai Health, as a community-owned entity, has fully funded the development of the residency program, with a total investment thru 2014 of \$4,377,000. Ongoing investment by Kootenai Health in 2015 is anticipated to be approximately \$709,000, with ongoing expected Federal GME funding support,

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in addition to the ongoing \$380,000 per year support from the State of Idaho. Kootenai Health, through the Idaho State Board of Education, will request an additional \$180,000 from the State of Idaho in 2016 as we add an additional six residents in our third year of operation.

Research has documented that each family physician practicing in the State of Idaho adds \$1.3 million to the economy and \$49,000 in state tax revenues. To date the program has already added four family physicians, bringing an added \$5.2 million per year to the community economy. As we add faculty and graduate residents to our region, we will realize a phenomenal financial return on our investment and we will greatly improve primary medical care access for our citizens.



Class of 2017



Doug Borst, MDUniversity of Miami Miller
School of Medicine



Devin Laky, MD University of Washington School of Medicine



Lauren Olsen, MD University of Washington School of Medicine



Daniel Henbest, MB, BS University of Queensland-School of Medicine, Ochsner Clinical School



Hollie Mills, MD University of Colorado School of Medicine



Julie Sefcik, DO Rocky Vista University College of Osteopathic Medicine

Class of 2018



James Bailey, MD University of Michigan School of Medicine



Kate Doggett, MD University of New Mexico School of Medicine



Hannah Raynor, MD University of Wisconsin School of Medicine and Public Health



Britta Beasley, MD University of New Mexico School of Medicine



Tim Preston, DODes Moines University College of Osteopathic Medicine



James West, MD University of North Dakota School of Medicine and Health Sciences

BOISE VETERANS AFFAIRS MEDICAL CENTER 2014 - 2015

The affiliation of the Boise Veterans Affairs Medical Center (VAMC) with the University of Washington School of Medicine allows the VAMC to recruit outstanding faculty members and develop innovative programs to improve patient care using medical education and research as a catalyst.

I. Patient Care

The Boise VA Medical Center offers a rich training opportunity through inpatient and outpatient settings and with veterans experiencing complex medical, surgical, and mental health conditions. Health care provision includes primary care, surgical, behavioral health, long-term care, oncology and dental services. The main Boise VA campus houses an 87-bed teaching and research hospital with both inpatient and outpatient services. There are an estimated 100,000 military veterans living in the southern Idaho/eastern Oregon region of the United States and the Boise VA has approximately 36,000 veterans enrolled at the facility. The Boise VA provided primary care for nearly 27,000 veterans during the 2015 fiscal year. Thirty-five percent of the veterans served in the Boise Catchment areas are considered to live in Rural (25%) or Highly Rural (10%) settings.

II. Education

The Boise VAMC Medical Education Program is comprised of 46 full-time and part-time faculty members in internal medicine, 3 full-time faculty in surgery, 12 full-time faculty in psychiatry service and over 80 consulting clinical faculty members. Along with core medical student clerkships in internal medicine, surgery, psychiatry and geriatric/rehab care, numerous elective rotations are available to the medical students including: medicine sub-internship, pulmonary/critical care medicine, infectious disease, primary care psychiatry and urology.

During 2014-2015, 50 medical students from the University of Washington School of Medicine completed rotations at the Boise VA Medical Center, 21 of those students were participants in the Idaho Track program. Of the 50 medical students, 9 were visiting students from the University of Washington School of Medicine's Visiting Student Program. These 9 students were specifically interested in either the Boise Internal Medicine Residency program or the Idaho/UW Advanced Clinician Psychiatry Residency program. There were 27 students from 4 affiliated Physician's Assistant programs completed clinical rotations in both inpatient and outpatient care.

III. Research

The Research Program of the Boise VAMC has active projects investigating the pathogenesis of infection caused by MRSA, Group A streptococcus and several Clostridial species including *C. difficile*. These studies involve sequencing of genes, purification of toxins, effects of toxins on cells of the immune system including neutrophils, T-lymphocytes and macrophages. Mechanisms of vascular injury induced by toxins and mediated by molecular interactions between endothelial cells, neutrophils

and platelets are actively being pursued. Molecular mechanisms of cardiac dysfunction in septic shock caused by bacterial toxins as well as anthracyclines which are used to treat breast cancer are being investigated by several researchers. Animal models of infection caused by clostridia, group A streptococcus and MRSA as well as animal models of breast cancer and liver dysfunction have also recently been established. In addition to basic science research, outcomes research in health care associated infections, mental health illnesses and post-graduate educational practices are subjects of clinical research. The Boise VA has also begun research on syndromic surveillance for the purpose of using VA electronic medical records for the purpose of predicting outbreaks of influenza, diarrheal diseases and hepatitis in real time. Finally, clinical trial research has included treatment of skin and soft tissue infections and new treatments for hepatitis C and evaluation and prevention of decubitus ulcers.

The VA Research and Development Service at the Boise VAMC has provided research space for investigators from Northwest Nazarene University, Idaho State University, Boise State University and the University of Idaho as well as support for 7-8 Idaho undergraduate students during each of the past summers.

The future goal of the R and D service is to establish a biomedical research center for the State of Idaho on the grounds of the Boise VAMC. Our long range strategic plan involves partnering with the three major universities in the State of Idaho, Boise State University, Idaho State University and the University of Idaho. Recently, we have established graduate training programs in Molecular Biology and Microbiology with the University of Idaho and have collaborated with that institution in obtaining an NIH INBRE grant which began in April 2009 and runs through 2019.

Finally, the Idaho Veterans Research and Education Foundation was established in October 2011 to facilitate fund raising to support research and education activities and to provide a means of administering NIH grants. While the IVREF is barely started, research grants are already being administered by the Board of Directors. We have had a dramatic increase in research grants from NIH and Pharmaceutical Companies. Indirect costs from these grants have allowed us to hire one part time employee and a full time Executive Director that are involved in fund raising, grant administration and oversight.

A strategic goal for the next 12 months is to 1. Involve more clinicians at the Boise VAMC in translational and clinical trial endeavors; 2. To hire a research oriented Infectious Disease Physician; 3. To hire a research oriented pulmonary, critical care specialist; 3. To hire a research oriented physician with clinical and research interests in cardiomyopathy; 4 to hire a full time clinical research coordinator to facilitate clinical studies for research oriented physicians.

Successes have been to obtain an NIH grant from Dr. Amy Bryant, Idaho INBRE grants to Dr. Bryant and Dr. Aldape and pharmaceutical grants to Dr. Devin Bolz, Dr. Michael Aldape, Dr. Sarah Hobdey and Dr. Amy E. Bryant. In all cases indirect costs from these is being secured by the Idaho Veterans Research and Education Foundation.

IDAHO/UW ADVANCED CLINICIAN PSYCHIATRY RESIDENCY 2014-2015

History: Established 2006 by a consortium involving Saint Alphonsus Regional Medical Center (SARMC), St. Luke's Regional Medical Center (SLRMC), Boise VA and UWSOM. The Idaho Legislature funds 10% of the cost of the program.

Structure: Three R-1s and three R-2s in Seattle. Three R-3s and three R-4s in Idaho. UWSOM pays for residents' salaries and malpractice insurance from funds sent by the Consortium in Idaho. The paid staff and faculty (1.9 positions) who administer and coordinate the program in Idaho are paid directly by the Consortium. Many of the faculty are volunteers in Seattle and Idaho. Rotation sites in Idaho for the residents include the Boise VA, SARMC, SLRMC, Family Medicine Residency of Idaho, BSU student health, the Center for Behavioral Health, Idaho State Correctional Institute, State Hospital South, and Portneuf Regional Medical Center.

Recruiting: 600 US medical students apply for the approximately 1200 psychiatry residency positions in the US. Most of the rest of the slots are filled by foreign medical school graduates. Our collaboration with the UW training program enables us to recruit highly competitive candidates similar to a well-established psychiatry residency program. Currently, the program has 10 residents (3-R1s, 3-R2s, 3-R3s and 1-R4).

Funding: The overall cost of the residency per year is approximately \$1.2 million. Resident salaries and benefits are approximately \$700K of the budget and educational overhead the rest. The VA site includes resident offices and room for two attendings, an administrative person and a multi-purpose group room. The VA paid approximately \$250K/year for resident salaries. The State of Idaho paid \$121K this year, and SLRMC and SARMC split the remaining costs for resident salaries and administrative overhead. The budget is approved yearly by the SARMC, SLRMC and VA Consortium.

Potential for Expansion: There is the potential to expand the program by 1-2 more residents/year with only a modest increase in overhead costs. For instance increasing the size of the residency by one more resident/year would cost approximately \$320K (\$280K for salary/benefits and \$40K for administrative overhead) for the 4 residents (one resident/year). Expansion would also require more clinical faculty support.

Retention: As of June 2014, the program has trained and retained 8 psychiatrists for the state of Idaho. We aim for a 50% retention rate which is similar to other residencies in Idaho.



University of Washington Idaho Advanced Clinician Psychiatry Track

AY 2014 - 2015



Jordan Merrill, MD R-4 Chief Resident



Nicole Fox, MD R-3



Holly Holbrooks-Kuratek, MD R-3



Tenley Rivera, MD R-3

UNIVERSITY OF WASHINGTON (BOISE) INTERNAL MEDICINE 2014 - 2015

In 1977 the University Of Washington Department Of Internal Medicine embarked on an exciting new experiment, a separate residency track outside of Seattle. The Seattle-Boise track, with residents spending their first and third years in Seattle and their second year at the Boise VA, was one of the nation's first primary care internal medicine programs. As of 2010 the Seattle-Boise track had 223 graduates, nearly 1/3 of who practice in Idaho, and 70% in the WWAMI region.

In 2011, the Boise track converted to a full three –year residency due to the maturity of local training resources and to help address the physician shortage in Idaho. This is the first residency sponsored by UW Graduate Medical Education office, which is based outside of Seattle. Eight residents in each training year plus 4 transitional year PGY-1 residents spend about two-thirds of their time at the Boise VA and the rest at St. Luke's Health Care System, Saint Alphonsus Regional Health Care System, and "outside" rotations (including Seattle). Subsequently, funding for this program comes from the VHA, the two community hospitals, the University of Washington and the State of Idaho.

Last year 1249 students applied for the 12 PGY-1 positions. From the 1249 applicants, 115 were interviewed, and the program completely filled their positions in the "Match". The residency has several novel features: A near 50:50 mix of ward and outpatient experiences (unusual for internal medicine); required community-based rotations at offices around the state; an integrated scholarship curriculum (research or quality improvement); a brand new Simulation Center; and interprofessional training as a VA Center of Excellence in Primary Care Education that includes nurse practitioner students and residents, pharmacy residents and psychology post-doctoral trainees working together in the classroom and clinic.

In 2014, we graduated our first full class of eight residents from the Boise residency program. Half of the graduates have continued working in Idaho. Four residents are now in hospitalist practices, and the other four are primarily outpatient or mixed outpatient/inpatient practice. This graduation marks an important step towards the program and Idaho State goals of increasing access and advanced care to rural and highly rural communities through the recruitment of well- trained physicians.

In 2015 the 9 graduates went on to: 2 Chief Residents, 2 primary care, 4 hospitalists, 1 nephrology fellow. Seven residents (including the 2 chief residents) are practicing in Idaho. We will have 1 additional categorical PGY-1 resident in our class next academic year, if extra funding is approved through the VA and UW. We have added 3 new rural community sites. These new steps even more closely align with our program goals.

Boise VA Medical Center Internal Medicine Residents 2015 - 2016



Sophia Ambruso, D.O. R-4/Chief Resident



Elizabeth Miller, M.D. R-4/Chief Recident



Jeff Barton, D.O. 8-3/Categorical Recident



Mancy Keegan-Ovando, M.D. R-3/Categorical Recident



Jacqueline Kelly, M.D. R-3/Categorical Resident



Allyson Kamori, D.O. R-3/Catagorical Resident



Maria Michael, M.D. 8-3/Categorical Recident



Sherena Perry, D.O. R-3/Categorical Resident



Steven Pontickio, M.D. R-3/Categorical Resident



Ryan Townsend, D.O. R-3/Catagorical Recident



Ethan Feuerborn, 0.0. R-2/Catagorical Intern



Meaghen Friel, M.D. R-2/Categorical Intern



Michael Madison, D.O. R-2/Catagorical Intern



Jordan Hugent, M.D. R-1/Categorical Intern



Nicholas Shoubridge, D.O. R-2/Categorical Intern



Jonathan Stabler, M.B.B.Ch.B. R-2/Catagorical Intern



Diana Swett, M.D. R-2/Catagorical Intern



Rochini Yapa, M.B.B.S. R-2/Categorical Intern



Kevin Corrad, M.D. 8-L/Preliminary Intern



David Jenkins, M.D. B-I/Preliminary Intern



Creighton Lawis, M.D. R-I, Preliminary Intern



Jacob Pollard, M.D. R-I/Proliminary Intern



Carla Apetrato, M.O. R-I/Catagorical Intern



Tilei Ding, M.D. 8-1/Categorical Into



Richmond Dawy, M.D. R-1/Catagorical Intern



Melanie Jadoon, M.D. R-I/Categorical Intern



Jared John, D.O. 8-1/Categorical Intern



Caitlin Grahan, M.B.Ch.B. R-1/Catagorical Intern



Shaye Levis, M.D. R-I/Catagorical Intern



William Leone, M.D. 8-1/Categorical Intern

RESIDENCY PROGRAM AND ROTATION SITES IN THE WWAMI REGION 2014 - 2015

COMMUNITIES WITH MEDICAL SCHOOL RESIDENTS IN WWAMI RESIDENCY PROGRAMS AND RURAL RESIDENCY ROTATIONS

WWAMI Medical School Residency Students are trained at many Residency Program and Rotation sites outside Seattle. This section lists those communities in our WWAMI Region by Residency Program and Rotation. Specific Seattle sites are not included here.

	Medical School Department		Medical School Department
FM:	Family Medicine	PD:	Pediatrics
IM:	Internal Medicine	P-BI:	Psychiatry/Behav. Sciences
ObG:	Obstetrics/Gynecology		

STATE	COMMUNITIES	2014-2015 UW Residency Rotations	2015-2016 UW Residency Rotations
WASHINGTON	Airway Heights		
	Arlington		
	Bellevue	FM, CD, P, P-BI, CHN, PMM	FM, CD, P, P-BI, CHN, PMM, GE, FSM
	Bellingham	FM, PD	FM, PD
	Bothell	PMM	PMM, FM
	Bremerton	Р	Р
	Buckley	FM	FM
	Cheney	Р	Р
	Chewelah	HDENT	HDENT
	Cle Elum/Ellensburg		
	Colville	HDENT	HDENT
	Coulee City		FM
	Deer Park		
	Des Moines	PD	PD
	Eatonville		
	Eastsound		PN
	Edmonds	PD	PD
	Elma		EM
	Everett	FM, PS-INT, S, MFM	FM, PS-INT, S, MFM
	Friday Harbor		EM
	Federal Way	NEP	NEP
	Fife	Occ Med	Occ Med, PMED
	Forks		
	Goldendale		

STATE	COMMUNITIES	2014-2015 UW Residency Rotations	2015-2016 UW Residency Rotations
WASHINGTON	Issaquah		
(CONT.)	Kenmore	PMM	PMM
	Kettle Falls		
	Kirkland	AN, ADL	AN, ADL, IM, FM
	Kent		FM
	Lakebay		
	Lakewood	CHP,PFP,P, FM	CHP,PFP,P, FM
	Leavenworth	FM	FM
	Madigan		
	McCleary		
	Medical Lake	P, P-SW	P, P-SW
	Mercer Island		FM
	Monroe	FM	FM
	Montesano	IM	IM
	Moses Lake		
	Mount Vernon	FM, PD	FM, PD
	Neah Bay	RHU	RHU
	Newport		
	Olympia	PMED, PFP, P, IM	PMED, PFP, P, IM
	Omak	FM	FM
	Othello	FM	FM
	Port Angeles	FM, PD	FM, PD
	Raymond		
	Redmond		
	Renton	CHN, PS, PS-INT, PMED,FM	CHN, PS, PS-INT, PMED,FM, ADL
	Richland		PMED
	*Seattle	ALL	ALL
	Sequim	FM	FM
	Shelton		
	Shoreline	PD	PD, IM, FM
	Snoqualmie	CHP, P	CHP, P
	Spokane	P, P-SW, AN, PMED, EM, NPM, S,	P, P-SW, AN, PMED, EM, NPM, S, PM
	Steilacoom		
	Stevenson		
	Sultan		
	Tacoma	FM, AL, AH, PEM, CHN, MG, PFP	FM, AL, AH, PEM, CHN, MG, PFP
	Toppenish	PD	PD

STATE	COMMUNITIES	2014-2015 UW Residency Rotations	2015-2016 UW Residency Rotations
WASHINGTON	Tukwila	PMED	PMED
(CONT.)	Tumwater		Р
	Vancouver	Р	Р
	Wenatchee	PMED	PMED
	White Salmon		
	Woodinville	CHN	CHN
	Yakima	PMED, PD, OBG	PMED, PD, OBG, FM, PMM
	Yelm		
	**Seattle Area UWPN		
*Multiple locations in this community for			
each Department			
**UWPN Clinics at Various Locations in			
Seat	Seattle Area		

STATE	COMMUNITIES	2014-2015 UW Residency Rotations	2015-2016 UW Residency Rotations
WYOMING	Afton		
	Casper		
	Cheyenne	IM	IM
	Cody		
	Jackson	IM	IM
	Kemmerer		
	Lander		
	Mammoth Hot Springs		
	Newcastle		
	Saratoga		
	Sheridan	IM	IM
	Sundance		
	Torrington		
	Wheatland		

STATE	COMMUNITIES	2014-2015 UW Residency Rotations	2015-2016 UW Residency Rotations
ALASKA	Anchorage	PMM, IM, PD, N, P, CHP, AL	PMM, IM, PD, N, P, CHP, AL, EM
	Bethel	PD	PD, CHN
	Cordova		
	Dillingham	PD	PD
	Dutch Harbor		
	Fairbanks	IM, PD, PMM	IM, PD, PMM, P
	Haines		
	Homer		
	Juneau		FM, EM
	Ketchikan	PD, IM	PD, IM
	Kotzebue	PD	PD, FM
	Kodiak		PD
	Nome		
	Palmer/Wasilla		
	Seward		
	Sitka		FM
	Soldotna	IM	IM
	Valdez		

STATE	COMMUNITIES	2014-2015 UW Residency Rotations	2015-2016 UW Residency Rotations
MONTANA	Big Sky	FM, EM	FM, EM
	Billings		
	Bozeman		
	Browning		
	Columbus		
	Dillon	IM	IM
	Hardin		
	Kalispell		PEDO
	Libby	FM	FM
	Livingston	FM, IM	FM, IM
	Miles City		
	Missoula	IM, PD	IM, PD, PDC
	Red Lodge		
	Ronan		
	Shelby		
	Stevensville		
	Whitefish		

STATE	COMMUNITIES	2014-2015 UW Residency Rotations	2015-2016 UW Residency Rotations
IDAHO	American Falls		
	Blackfoot	FM	FM
	Boise	P, P-BI, IM-BI, FM, AD, IM	P, P-BI, IM-BI, FM, AD, IM, PPR
	Caldwell	IM-BI	IM-BI
	Cottonwood		
	Coeur d'Alene		IM-BI
	Downey		
	Driggs		
	Emmett		
	Fort Hall Reservation		
	Fruitland		IM-BI
	Grangeville		
	Hailey		
	Idaho Falls	FM	FM
	Jerome		
	Kuna	P-BI	P-BI
	Ketchum		EM
	McCall	IM-BI	IM-BI
	Meridian	P-BI, NEP	P-BI, NEP
	Moscow		
	Nampa		
	Orofino		
	Pocatello	FM, PD, P-BI	FM, PD, P-BI
	Ponderay	IM	IM
	Post Falls		
	Rexburg		
	Rupert		
	Sandpoint	PD	PD
	St. Maries		
	Sun Valley		
	Twin Falls	IM-BI	IM-BI
	Weiser		

ELECT	IVE ROTATIONS OF	JT OF THE WWAMI	REGION
California	Los Angeles		
	Palo Alto	PD	PD
	San Francisco	FM, CHN, N	FM, CHN, N, OBGYN
	South Lake Tahoe	FM	FM
	Stanford	PTH, AI	PTH, AI
	Redwood City		D
	Truckee	FSM	FSM
Colorado	Lafayette	FM	FM
	Vail	FM	FM
Connecticut	New Haven	N	N
DC	Washington	PMED	PMED
Florida	Orange Park	PMED, PMM	PMED, PMM
	Miami		PMM
Kansas	Olathe	AN	AN
Massachusetts	Boston	N	N
Michigan	Lansing	RSM	RSM
	Ann Arbor		RO
Nevada	Las Vegas	FM	FM
North Carolina	Winston-Salem	GE	GE
	Charlotte		FM
New Mexico	Shiprock	PD	PD
New York	New York	N, AN	N, AN, FM, OBGYN
Ohio	Columbus	FM	FM
Oregon	Hood River	PM	PM
	Portland	Р	P, IM-BI
	Woodburn		FM
	Silverton		FM
Pennsylvania	Bethlehem	FM	FM
South Dakota	Rapid City	IM	IM
Texas	Houston	PDI, FM	PDI, FM, OBGYN, PD
Utah	Salt Lake City	Р	Р
Virginia	Reston	DR	DR
	Norfolk		
Rhode Island	Providence		OBGYN

ELECTIVE ROTATIONS OUT OF THE WWAMI REGION			
Africa	Garissa	FM	FM
Africa	Kenya	FM, IM	FM, IM
Africa	Khayelitsha	FM	FM
Africa	Nairobi	ID	ID
Africa	Senegal		ID
Brazil	Sao Paulo	AN	AN
San Salvador	Santa Tecla	FM	FM
Maputo	Mozambique	CCP	CCP
Canada	Vancouver, BC		
Peru	Lima	N	N
India	India	PMM	PMM
New Zealand	Wellington	AN	AN
	Burwood		REHAB-DPT
England	London	NS	NS
Guatemala	San Pedro La Laguna	FM	FM
Nepal	Kathmandu	FM	FM
China	Hainan	FM	FM
Malawi	Blantyre		FM
Papua New Guinea	Western Highlands Province		FM
Thailand	Mae Sot		PDI

WWAMI IDAHO STUDENTS AND UWSOM IDAHO FACULTY APPOINTMENTS IDAHO ENTERING CLASSES 2015 - 2012

ENTERING CLASS OF 2015

ENTERING CLASS OF 2015		
<u>Name</u>	Home Town	<u>Undergraduate College</u>
Habtam Asmeche	Boise	Northwest Nazarene University, Nampa, ID
Sarah Bargman	Hayden	Seattle Pacific University, Seattle, WA
Colby Brower	St. Anthony	Brigham Young University, Provo, UT
Alainna Brown	Idaho Falls	Washington University - St. Louise, MO
Dalan Brown	Soda Springs	Brigham Young University, Provo, UT
Andrew Burchak	Grangeville	Montana State University, Bozeman, MT
Diana Christensen	Boise	Duke University, Durham, NC
Jessica Copeland	Boise	Boise State University, Boise, ID
Ana Cornea	Moscow	Lewis-Clark State College, Lewiston, ID
Philip Crepeau	Idaho Falls	Brigham Young University, Provo, UT
Bobby Endo	Pocatello	Treasure Valley Community College, Ontario, OR
Kara Fitzgerald	Sandpoint	NW Nazarene University, Nampa, ID
Ciciley Fox	Challis	College of Idaho, Caldwell, ID
Justin Gause	Boise	Boise State University, Boise, ID
Alan Gray	Boise	Baylor University, Waco, TX
Rebecca Hall	Blackfoot	Idaho State University, Pocatello, ID
Anna Hardesty	Boise	University of Utah, Salt Lake City, UT
Spencer Harris	Idaho Falls	Brigham Young University, Provo, UT
Brynn Hathaway	Post Falls	University of Idaho, Moscow, ID
Jordan Huttash	Nampa	Boise State University, Boise, ID
Adam Kappmeyer	Moscow	University of Idaho, Moscow, ID
Casandra Kirschner	Boise	Boise State University, Boise, ID
Stuart Miyasako	Homedale	The College of Idaho, Caldwell, ID
Lauren Nesbit	Rupert	Boise State University, Boise, ID
Chase Ricker	Nampa	Boise State University, Boise, ID
Tate Saurey	Melba	Brigham Young University, Provo, UT
Sara Schaefer	Boise	Western Washington University, Bellingham, WA
Taylor Stewart	Coeur d' Alene	Carroll College, Helena, MT
Alexandra Styhl	Boise	Boise State University, Boise, ID
Courtney Swantek	Boise	College of Idaho, Caldwell, ID
Nicholas Tacke	Boise	Whitman College, Walla Walla, WA
Victoria Talbutt	Boise	Concordia University, Portland, OR
Anthony Trakas	Boise	University of Idaho, Moscow, ID
Jason Wallentine	Meridian	Boise State University, Boise, ID
Tyler Wines	Gooding	University of Montana – Western, Dillon, MT

ENTERING CLASS OF 2014

<u>Name</u>	Home Town	Undergraduate College
Ryan Boehm	Eagle	Boise State University, Boise, ID
Wilson Bowlby	Coeur d'Alene	Carroll College, Helena, MT
Daniel Cooper	Coeur d'Alene	University of Notre Dame, South Bend, IN
Anna Curtin	Boise	Carroll College, Helena, MT
Lindsey Daudt	Meridian	Idaho State University, Pocatello ID
Nicolaas DeRuyter	Boise	College of Idaho, Caldwell, ID
Michael Duerden	Rexburg	Brigham Young University, Provo, UT

Joey Florence Boise University of Idaho, Moscow, ID

Claire Gentile Eagle Westminster College of Salt Lake City, SLC, UT

Thao Ha Meridian College of Idaho, Caldwell, ID Mason Hinchcliff Boise State University, Boise, ID Driggs Nicholas Hovda **Emmett** Westminster College of Salt Lake City Andrew Johnson Pocatello Idaho State University, Pocatello, ID Jacob Kartes Boise University of Idaho, Moscow, ID **Christopher Mallory** Meridian Boise State University, Boise, ID Moscow University of Idaho, Moscow, ID John Nuhn Renee Nuhn Ririe University of Idaho, Moscow, ID Noah Qualls Moscow University of Idaho, Moscow, ID Justin Reed Rupert Boise State University, Boise, ID Boise Gonzaga University, Spokane, WA Joseph Ryan Coeur d'Alene Brigham Young University, Provo, UT Jeffrey Shirts Meghan Shuell Boise Concordia University, Portland, OR **Thomas Siegert** Whitman College, Walla Walla, WA Boise Craig Steiner Idaho Falls Brigham Young University, Provo, UT **Amy Stewart** Brigham Young University, Provo, UT Boise Kevin Stroschein Boise State University, Boise, ID Boise Jason Wang Eagle The University of Alabama, Tuscaloosa, AL

Dana Werner Post Falls North Idaho College, Coeur d'Alene
Mary Lynn Young Boise Montana State University, Bozeman, MT
Caitlin Zak Boise University of California, San Diego, CA

ENTERING CLASS OF 2013

Name Home Town Undergraduate College

University of Utah, Salt Lake City, UT Joshua Bagley Rexbura **Daniel Bechtold** Idaho Falls Northwest Nazarene University, Nampa, ID Jeffrey Bell Idaho Falls Brigham Young University, Rexburg, ID **Emily Burns** Coeur d'Alene Boston College, Chestnut Hill, MA Paula Calza Moscow University of Idaho, Moscow, ID Eric Donahue Star Boise State University, Boise, ID Carroll College, Helena, MT Lauren Franklin Boise The College of Idaho, Caldwell, ID Rebecca Goodwin Boise

Brian Huntington Boise Colby College/Dartmouth College, Waterville, ME

Lauren Jacobson Post Falls University of Idaho, Moscow, ID University of Washington, Seattle, WA Natasha Lee Boise Cheng Cheng Ma Kingston University of Idaho, Moscow, ID Twin Falls Boise State University, Boise, ID Sierra McCreerv Meridian Seattle Pacific University, Seattle, WA Hailey Baisch Nelson Matthew Peters Eagle Pacific Lutheran University, Tacoma, WA **Douglas Alan Potts** Arimo Idaho State University, Pocatello, ID Jeb Rodgers Boise State University, Boise, ID Boise Maryam Sabetian Boise Boise State University, Boise, ID Benjamin Searcy Idaho State University, Pocatello, ID Rexburg **Christopher Shaw** Coeur d'Alene University of Puget Sound, Tacoma, WA Michael Silvas Coeur d'Alene Washington State University, Pullman, WA

Madison SkogsbergKunaThe College of Idaho, Caldwell, IDLee SpencerGrangevilleUniversity of Idaho, Moscow, IDBrian WalkerBoiseBrigham Young University, Provo, UTAmanda WilliamsBoiseUniversity of Idaho, Moscow, ID

ENTERING CLASS OF 2012

LITTERING OLAGO OF LUIL		
<u>Name</u>	Home Town	<u>Undergraduate College</u>
Jessica Brice	Burley	Whitman College, Walla Walla, WA
Spencer Cross	Post Falls	University of Notre Dame, South Bend, IN
Zoë Cross	Post Falls	University of Notre Dame, South Bend, IN
Casey Denton	Athol	Boise State University, Boise, ID
Ryan Fisher	Boise	Boise State University, Boise, ID
Melissa Fuelling	Burley	University of Idaho, Moscow, ID
Javier Gonzalez	Pocatello	Gonzaga University, Spokane, WA
Danielle Green	Grangeville	University of Idaho, Moscow, ID
Courtney Gwinn	Pocatello	University of Utah, Salt Lake City, UT
Ryan Hall	Ammon	Brigham Young University-Idaho, Rexburg, ID
Perry Hamilton	Buhl	Boise State University, Boise, ID
Byron Lu	Boise	Brigham Young University, Provo, UT
Jennifer Luginbill	Boise	University of Montana, Missoula, MT
J. Patrick Manning	Burley	Brigham Young University, Provo, UT
Kaitlyn Mulhern	Boise	Colorado State University, Fort Collins, CO
J. Patrick Osterkamp	Buhl	Boise State University, Boise, ID
Olivia Redline	Post Falls	University of Notre Dame, South Bend, IN
Mackenzie Reminger-	Boise	University of Portland, Portland, OR
Carpenter		
Kurt Stoll	Sandpoint	University of Montana, Missoula, MT
Elizabeth Wahl	Pocatello	Hamilton College, Clinton, NY

IDAHO PHYSICIANS WITH UWSOM CLINICAL FACUTLY APPOINTMETNS (as of October 2015)

BOISE		Perko, MD	Robert K.	Bryant, MD	Amy E.
Family Medicine		Petrie, MD	Jennifer L.	Bureiesci, MD	Mark
Allen, MD	Suzanne	Quinn, MD	Heather	Burr, MD	Randall
Barinaga, MD	Mary	Radnovich, MD	Richard	Callanan, MD	Joseph J.
Baron, MD	Andrew	Reed, MD	Alex J.	Carvalho, MD	Paula G.
Beach, MD	Ann	Rich, MD	Kevin	Chai, MD	Andrewq U.
Brandecker, MD	John G.	Roscoe, MD	J. Clayton	Charan, MD	Nirmal
Brassell, MD	Stephen	Rulon, MD	Elizabeth A.	Christensen, MD	Richard B.
Brown, MD	Perry S.	Scheffel, MD	Scot B.	Coffman, MD	Tom J.
Burgess, MD	Anne Patrice	Schmitz, MD	David F.	Cornett, MD	Benjamin
Burningham, MD	Mark	Schneider, MD	Steven	Cusack, MD	Barry J.
Cadwallader, MD	Kara	Shepherdson, MD	Nikole	Dau, MD	Birgitt
Chasin, MD	J. Lauren	Stutzman, MD	Kimberly	Davis, MD	Robert L.
Clifford, MD	Kevin A.	Tadje, MD	Jared	Defrang, MD	Caroline
Cook, MD	Jennifer K.	Thompson, MD	Marietta Ione Bunn	Dega, MD	Francis J.
DeBlieck, MD	Timothy	Tirrell, MD	Laura L.	Dickey, MD	Wade E.
Epperly, MD	Ted	Viera, MD	Carrie	Dingman, MD	Jeffrey
Esplin, MD	Andrea	Warren, MD	Hilary	Dittrich, MD	William J.
Gedney, MD	Curtis	Watts, MD	Karl	Doucette, MD	Margaret M.
Gendler, MD	Julie	Westbrook, MD	Sharon E.	Eiriksson, MD	Charles E.
Glass, MD	Justin A.	Wick, MD	John	Elizinga, MD	Henry S.
Hahn, MD	Christine G.	Wyman, MD	Steven N.	Epperson, MD	John
Hilvers, MD	Robert J.	You, MD	Phyllis	Fetzek, MD	Joseph J.
Holiday, MD	Jennifer	Medical Education		Foote, MD	Julie A.
Isaacs, MD	Brandon G.	Sparrell, PA	Marvin	Fullmer, MD	Ronald
Johnson, MD	Mark C.	<u>Medicine</u>		Gregg, MD	Michael
Johnson, MD	Greg W.	Adcox, MD	Michael	Hagman, MD	Melissa M.
Jones, MD	Jeralyn	Akhtar, MD	Saadia R.	Hahn, MD	Steven
Kikuchi, MD	Julie S.	Alluri, MD	Krishna	Hammerstedt, MD	Heather
Kim, MD	Susan C.	Andrew, MD	Nathan R.	Han, MD	Allen Ching-Yang
Kozisek, MD	Peter B.	Anin-Appiah, MD	Desmond	Harrison, MD	Thomas E.
Kuper, MD	Elisabeth	Ashby, MD	Hansel	Hinchman, MD	David A.
Lee, MD	Richard M.	Asher, MD	Stephen W.	Hunt, MD	Nicholas
Maier, MD	Jordan E.	Badke, MD	Frederick R.	Keiley, MD	Michael
Montgomery, MD	Robert	Baer, MD	Paul H.	Kilfoyle, MD	Michael J.
Mulder, MD	Gertjan	Bathina, MD	Murali N.	Kouskov, MD	Oleg
Munn, MD	Stacia	Berquist, MD	William G.	Kreisle, MD	William H.
Munting, FNP	Babette	Blickenstaff, MD	Richard D.	Lamers, DO	Michael
Nelson, MD	Aurelia	Bohlman, MD	Theodore	Lee, MD	David K.
Otto, MD	Raymond	Boice, MD	John	Lowery, Md	Daniel
Palmer, MD	Todd	Branahl, MD	James	Malasky, MD	Beth

BOISE Continued		Neurology		McPherson, MD	Paul
Mathews, MD	Katherine	Price, MD	Robert H.	Price, MD	Jamie
McCarren, MD		Weschler, MD	Robert T.	Rand, MD	Thomas
Mckie, MD	Megan	Whitesell, MD	Jackie	Womack, MD	Michael
Mckie, MD	Robert A.	Whiteside, MD	James	<u>Psychiatry</u>	
Mings, MD	Allan	Obstetrics & Gynecology		Albanese, MD	Robert
Montgomery, MD	Steven M.	Anstine, MD	Suzanne	Berlant, MD	Jeffrey
Nona, MD	Paul G.	Blea, MD	Clarence	Blackburn, MD	K.H.
Norris, MD	Leslie	Bouchard, MD	Julia	Brown, MD	Steven
Nowierski, MD	Wendi M.	Caplinger, MD	Patricia	Chung, MD	Bok
Olson, MD	William D.	Christensen, MD	Scott	Dewey, MD	Larry V.
Palma, MD	Richard	Curry, DO	Mark	Eckhardt, MD	Janelle
Parimon, MD	Anne T.	Foulk, MD	Russell	Eliason, MD	Scott
Powers, MD	Tanyalak	Hayes, MD	Cynthia	Fassig, MD	Beth
Priest, MD	Benjamin	Koszalka, MD	Michael	Gerrish, MD	Winslow
Rasmus, MD	Marshall F.	Lowder, MD	Boyd	Hagen, MD	Barbara
Reynolds, MD	Mark	Ludders, MD	Darrell	Hedt, MD	Jill
Rupp, MD	Brian	Lund, MD	Martha	Hines, MD	Alan
Sasso, MD	Peggy Ann	Marzolf, MD	Susan	Jones, MD	Jeralyn
Scott, MD	David	Perez, MD	Gerardo	Kent, MD	David
Seale, MD	Jared	Pool, MD	Leslie	Khatain, MD	Kenneth G.
Shumsky, MD	Walter L.	Seyb, MD	Stacy	Leone, MD	Joann C.
Smith, MD	Ilana	Thompson, MD	Marietta	Lott, MD	Rex
Stevens, MD	C. Scott	Thomson, MD	Brook	MacDonald, MD	Sandra
Stubbs, MD	Dennis L.	Werdel, MD	Michael	McPeak, MD	Karen
Thompson, MD	Leslie J.	Weyhrich, MD	Darin	Montgomery, MD	Richard
Thompson, MD	E. Gregory	Opthalmology		Negron, MD	Roberto
Turcotte, MD	William H.	Reynolds, MD	Adam	Novak, MD	Charles
Tverdy Winans, MD	Roger	Orthopedics		Olnes, MD	Andrew
Vestal, MD	Lindsay	Floyd, MD	Timothy	Pines, MD	Richard
Wadle, MD	Robert E.	Gustavel, MD	Michael	Pohl, MD	Charles
Walters, MD	Douglas P.	Johnston, MD	James	Reed, MD	Alex
Wasielewski, MD	Theodore	King, MD	Howard	Saccomando, MD	James
Weppner, MD	Jessica	Lewis, MD	Kirk	Starr, MD	Jolene
Wilper, MD	William	Showalter, Jr. MD	Larry	Williams, MD	Vanessa
Witte, MD	Andrew P.	Wade, MD	George	Radiology	
Writer, MD	John T.	Pediatrics	· ·	Hill, MD	Andrew
Wyatt, DO	Steven L.	Brown, MD	Perry	Rehabilitative Medicine	
Wyatt, MD	Casi	Burpee, MD	Tyler	Cox, MD	Rodde
Yeakley, MD	Rourke	Ellison, MD	Jason	Deleon, MD	Robin
Zuckerman, MD	Dan	Lundgren, MD	Ingrid	Friedman, MD	Robert
Zuckerman, MD	Norman			. Hearnan, Wil	HODEIC
Zuckerman, MD	ivoiman				

BOISE Continued		Rehabilitative Medicine		IDAHO FALLS	
Kraft, MD	Kevin	Bering, MD	Stacey	Neurology	
Lagwinski, MD	Mikael	<u>Surgery</u>		Garland, MD	Erich
McMartin, MD	Michael	Holman, MD	Robert	Vincent, MD	Stephen
Neufeld, MD	Jacob			<u>Pediatrics</u>	
<u>Surgery</u>		COTTONWOOD		Anderson, MD	Kelly
Baradziej, MD	Mark E.	Family Medicine		Aughney, DO	Jeff
Lynch, MD	M. Kim	Gilbert, MD	Andrew P.	Edwards, MD	Brad
Morgan, MD	Billy	Jones, MD	Andrew F.	Groberg, MD	George
Peterson, MD	Ernest C.	Minnehan, MD	Haley J.	Hatch, MD	Bradford
<u>Urology</u>		Secrest, III, MD	Alvin Jackson	Olson, MD	Eric
Cost, MD	Christopher	Sigler, MD	Ronald L.	Pettitt, MD	Robert
Weese, MD	Donald			<u>Radiology</u>	
		DOVER		Bentley, MD	Richard
CALDWELL		Family Medicine		Clinger, MD	Neal
Family Medicine		Leedy, MD	Hugh	Harris, MD	James
Augustus, MD	Richard A.			Lance, MD	Jason
Bitters, MD	J'Cinda	DRIGGS		Penney, MD	Richard
Roach, MD	Michael	Family Medicine		Schmutz, MD	James
<u>Medicine</u>		Johnson, MD	Eric L.	Strobel, MD	John
Eddy, MD	Hugh E.			Vance, MD	Peter
<u>Surgery</u>		GARDEN VALLEY			
Cornwell, MD	Ronald	Family Medicine		JEROME	
Hardy, MD	Ryan	Koenig, MD	Michael R.	Family Medicine	
				Irwin, MD	James S.
CASCADE		HAILEY		Kern, MD	Joshua
Family Medicine		Family Medicine			
Bedell, MD	Michael	Barbee, MD	Carl A.	KELLOGG	
		Batcha, MD	Frank	Family Medicine	
COEUR D'ALENE		Busby, MD	Tracey	Heston, MD	Thomas
Family Medicine		Lyons, MD	Julie A.		
Garwick, MD	Jennifer	Morse, MD	Lucinda L.	LEWISTON	
McLandress, MD	Richard	Paris, MD	Richard	Family Medicine	
Rousseau, MD	Leanne	Woods, MD	Kathryn A.	Jefferson, MD	Glenn
Wales, MD	Robert A.	<u>Medicine</u>		<u>Medicine</u>	
Medical Education		Fairman, MD	Dan	Shah, MD	Binay
Melgaard, MD	John	<u>Neurology</u>		<u>Surgery</u>	
<u>Medicine</u>		Lindholm, DO	Karin	Gardner, MD	Scott
Thykeson, MD	Karen A.	Orthopedic Sports Medicine		Hoffman, MD	Brian
Wiesenhuitter, MD	Craig W.	Buoncristiani, MD	Anthony		
<u>Neurology</u>					
Coats, MD	Michael				
Lavy, MD	Louisa				

MCCALL		POCATELLO		SHOSHONE	
Family Medicine		Family Medicine		Family Medicine	
Curtin, MD	Sarah A.	Bokelmann, MD	Jean	Davis, MD	Keith
Dardis, MD	Jim W.	Cree, MD	Jonathan		
Gray, MD	Jennifer	Jones, MD	Daniel W.	ST.MARIES	
Gustafson, MD	Caitlin	Ostler, MD	Richard E.	Family Medicine	
Hall, MD	David A.	Rush, MD	Robert E.		Bruce
Harris, MD	Scott	Thayne, MD	Andrew W.	TWIN FALLS	
Welty, MD	Julie L.	Woodhouse, MD	William	Family Medicine	
<u>Medicine</u>		<u>Pediatrics</u>		Kohtz, MD	Steven
Witte, MD	Marcia	Bradford, MD	Velma	McComas, MD	Bruce
		Denton, MD	David	Melvin, MD	Ryan C.
MONTPELIER		Duty, MD	Laura	Moffitt, MD	Mitchell
Family Medicine		Fischel, MD	David	Sandison, MD	Richard
Campbell, MD	Clay I.	Fulks, MD	Brian	<u>Medicine</u>	
		Hardin, MD	Creighton	Crandall, MD	Mark
MOSCOW		Hogan, MD	William	Fortuin, MD	Brian
Family Medicine		McInturff, MD	Don	<u>Pediatrics</u>	
Puffer, MD	Steven	Smith, MD	Andrew	Kadlec, MD	Gregory
Spain, MD	Francis	Yost, MD	Gentry	Mulert, MD	Jeffrey
White, MD	Kraig	<u>Psychiatry</u>		Reese, MD	Kathryn
		Morairty, MD	Zachary		
NAMPA		Soofi, MD	Jin	WEISER	
Family Medicine		Family Medicine		Family Medicine	
Black, MD	Stuart	Eskelson, MD	Lynn P.	Hubele, MD	Suzanna
Bowman, MD	Jonathan			Wootton, MD	Lore
Potter, MD	S. Kathryn	SANDPOINT			
<u>Pediatrics</u>		Family Medicine			
Patterson, MD	Thomas	DeLand, MD	George		
Ophthalmology		Dunn, MD	Scott		
Jensen, MD	Johanna	Gramyk, MD	Kenneth		
Jensen, MD	Peter	Iddins, MD	Donald		
		Lawrence, MD	Thomas L.		
		Meulenberg, MD	Daniel		
		Schwartz, MD	Bradley		
		Obstetrics &			
		<u>Gynecology</u>			
		Algoe, MD	Krsitin		
		<u>Pediatrics</u>			
		Gilbert, MD	Joyce		
		Helm, MD	Robin		
		Magee, MD	Katherine		

SCHOOL OF MEDICINE PROGRAMS

UNIVERSITY OF WASHINGTON HEALTH SCIENCES LIBRARIES WWAMI REPORT 2014 - 2015

The mission of the Health Sciences Library (HSL) is to advance scholarship, research, education and health care by anticipating information needs, providing essential resources, and facilitating learning for the greater health sciences community. The HSL staff strives to integrate this knowledge at the point of need for clinicians, researchers, administrators, instructors, and students within a distributed multi-state educational environment.

Health Sciences Library: 24/7 Web Access to Clinical Information Resources
The Health Sciences Library (HSL) website is the portal to health-related information for
UW affiliates, regardless of location in the WWAMI region. The HSL website,
http://hsl.uw.edu provides 24-hour-a-day access to an extensive collection of library
licensed electronic journals, e-books and databases. Many journals in PubMed and
other health-related databases contain direct links to the full text of journal articles
licensed by UW.

The Care Provider Toolkit, one of the most heavily used sections of the website, gathers major electronic clinical reference resources, including AccessMedicine, Clinical Key, Natural Medicines, Sanford Guide, VisualDx and UpToDate as well as textbooks, multimedia, full-text journals, drug references, and patient education materials. Clinically relevant evidence-based resources include: DynaMed, BMJ's Clinical Evidence, Essential Evidence Plus; and Cochrane Library, the gold standard for evidence-based medicine.

Access for WWAMI Faculty and Students

Assistance with library service is available to all WWAMI faculty and students by e-mail, telephone, and chat. The UW Libraries proxy service allows UW students, faculty and staff throughout WWAMI to access the resources of the UW HSL website. To meet WWAMI faculty and student information needs online, library resources, and contact information for WWAMI librarians are integrated within Canvas classes of the new WWAMI curriculum.

National Network of Libraries of Medicine, Pacific Northwest Region (NN/LM PNR) The NN/LM PNR is a regional program of the National Library of Medicine that facilitates access to reliable, unbiased health information in Alaska, Idaho, Montana, Oregon, and Washington.

The NN/LM PNR program relates to WWAMI both in geographic scope and population focus. Collaborating with libraries and community organizations, services of the NN/LM PNR help healthcare professionals, students and community members access the most current research and information to advance the practice of medicine, help eliminate health disparities, and improve the health of its diverse region.

In 2014-15, PNR staff conducted 53 trainings, presentations and site visits to more than 1350 people across the 5 states of the Pacific Northwest Region. Staff presented posters and gave talks at a variety of national and regional gatherings for diverse audiences, such as medical and public librarians, K-12 educators, pharmacists, physician assistants, and the public health workforce.

Leadership in State health departments for Alaska and Washington agreed to participate in a national pilot project providing public health workforce with desktop digital access to licensed fulltext e-resources of evidence-based public health resources. This pilot is supported by the NN/LM PNR, with cooperation by the Alaska Medical Library at the University of Alaska Anchorage and the University of Washington Health Sciences Library.

MEDCON TELEPHONE EDUCATION AND REFERRAL SERVICE 2014 - 2015

MEDCON is a toll-free telephone education and referral service for physicians in Washington, Alaska, Montana, Idaho, Oregon and Wyoming—the WWAMI region. Coordinators facilitate calls from community physicians to the faculty of UW Medicine. Entities include the UW School of Medicine, University of Washington Medical Center, Harborview Medical Center, Airlift Northwest, UW Neighborhood Clinics, Valley Medical Center and Northwest Medical Center, as well as Seattle Cancer Care Alliance and Children's University Medical Group.

The MEDCON service was initiated in July, 1975, by the dean of the UW School of Medicine. MEDCON provides physicians in the region with immediate access to education and other resources of the academic medical center, such as Airlift Northwest, the Burn and Trauma Centers at Harborview, as well as over one-hundred services and clinics throughout the system. The service averages about 600 calls a month.

Funding is provided by the School of Medicine, University of Washington Medical Center, and Harborview Medical Center.

A listing of calls to MEDCON, arranged by community, follows.

City	Jul 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Total
Boise	1	2	7	3	3	3	5	4	10	2	10	1	31
Bonners Ferry			1			1		1		1	1		5
Caldwell							1						1
Coeur d'Alene	5		2	2	5	3	3	2	1	4	4	4	35
Fruitland		1											1
Hayden							3						3
Idaho Falls											1	1	2
Kellogg	1												1
Ketchum	1		1						1			3	6
Lapwai							1						1
Lewiston	6	5	2	14	3	8	4	7	6	2	6	5	68
Meridian			4										4
Moscow	1		1	2	1		1		1				7
Nampa						1						1	2
Orofino			1	2		2	1	2				1	8
Plummer		1											1
Pocatello	2				1		1						4
Ponderay	1												1
Post Falls		3							1				4
Rathdrum				1	1						1		3
Sandpoint	1		1		1								3
Twin Falls	1												1
Grand Total	20	12	20	23	15	18	20	16	10	9	13	16	193

UNIVERSITY OF WASHINGTON MEDEX Northwest

Physician Assistant Program

Idaho — 2014-2015

MEDEX Northwest has a 46-year history of training primary care physician assistants (PAs) to work with medically underserved populations in the Pacific Northwest region. The MEDEX program has graduated over 2,200 PAs since its creation in 1969 under the joint sponsorship of the University of Washington (UW) and the Washington State Medical Association. The MEDEX program selects experienced healthcare personnel for training in an intensive twoyear program. Students spend four quarters in didactic (classroom) training, followed by four quarters of clinical rotations, which include a four-month primary care preceptorship with a family physician or general internist. Students enrolled in the master's degree option participate in an additional quarter of coursework between the didactic and clinical phases, engaged in the study of both investigative skills (research and evidence-based medicine) and also a focused subject area. Focused study options include (a) public health and preventive medicine, (b) healthcare for rural and medically underserved populations, (c) academic medicine and specialty practice, and (d) global health. The classroom site in Seattle WA offers the master's option only. Spokane WA is currently a hybrid site, offering both the master's and bachelor's options. The Anchorage AK classroom location and the Tacoma WA site offer the bachelor's option. Significant prior clinical experience continues to be a requirement for admission to either degree option.

MEDEX Northwest received 976 applications for the class beginning in 2015. This was an increase of 9.5% over the previous year. The highest number of applicants was from the state of Washington. The majority (84%) of accepted students originated from the states making up the WWAMI region.

MEDEX received thirty-four (34) applications and interviewed thirteen (13) qualified applicants from Idaho. Eight (8) students were accepted to MEDEX Northwest. Four (4) students from Idaho will attend classes in Spokane WA, three (3) will participate in the Seattle class, and one will attend classes at the Tacoma WA site. These new Idaho students join nine (9) Idaho students currently in their clinical year.

There are currently 78 graduates of MEDEX either practicing or eligible for licensure in Idaho (and new graduates are currently completing the licensure process). Of those whose practice specialty is known, 51% are in primary care, and 56% are working in rural and/or medically underserved settings (several individuals qualify for both of these designations).

The program is available to provide technical assistance to physicians and employers seeking to expand access to primary care through the utilization of physician assistants. Please contact the MEDEX Program Director, Terry Scott, at (206) 616-4001 or tscott@u.washington.edu.

BIOMEDICAL INFORMATICS & MEDICAL EDUCATION 2014 - 2015

Faculty Development

Each year the Department of Biomedical Informatics and Medical Education (BIME) collaborates with the Office of Faculty Development and the Center for Leadership and Innovation in Medical Education (CLIME) to sponsor a series of faculty development workshops on teaching and learning skills for School of Medicine faculty. During the academic year 2015-2016, a number of these workshops will be delivered to regional faculty via remote connections as well as at Regional Training Centers. Members of the Division have helped design and conduct workshops and online learning modules to help faculty teaching in new medical school curriculum incorporate new teaching approaches into their teaching repertoires. The Division of Medical Education and Evaluation also leads a 10-month Teaching Scholars Program directed by Dr. Lynne Robins and Co-Directed by Dr. Jan Carline. Dr. Robins was also serves as Director of Educator Development for the new medical school curriculum. A new series of workshopsco-sponsored by the American Association of Medical Colleges (AAMC) is available to faculty who wish to improve their skills in education scholarship and qualify for the AAMC's Medical Education Research Certificate.

Course/Faculty Evaluation

The Division of Medical Education and Evaluation is responsible for the UW School of Medicine's Course and Instructor Evaluation System. This system evaluates all Human Biology and Foundational course offerings and faculty who teach them, both at the UW and throughout the WWAMI Region. Each course is evaluated every year, using a core set of items. Every other year, each course has an in-depth course-specific evaluation that is designed by Dr. Jan Carline, in conjunction with two student evaluators. Additional courses are evaluated upon request. The Division also supports the evaluation of all clerkships and clerkship faculty, and provides a variety of reports to departments and the school on the performance of clerkships. Important characteristics of the educational environment, including the ability of students to participate in clinical care as part of their training as well as issues of professionalism and student mistreatment are also touched upon in other evaluation activities undertaken by the Division.

The Division also provides consultative and scoring services to School of Medicine faculty who wish to increase the reliability and validity of examinations administered throughout the regional program of medical education. Additional assistance for programmatic evaluation and institutional research is provided across the WWAMI region.

If you would like to learn more about the Department of Biomedical Informatics & Medical Education please visit: http://bhi.washington.edu/bime/ or more directly for the Division of Medical Education and Evaluation at: http://www.meded.washington.edu/

For additional information about the Center for Leadership and Innovation in Medical Education, access to teaching resources and faculty development activities please navigate to http://clime.squarespace.com/

CENTER FOR EQUITY, DIVERSITY & INCLUSION 2014-2015

The Center for Equity, Diversity & Inclusion (CEDI) was established in January 2012 in response to the Diversity Strategic Planning Committee's recommendation to expand and organize the School's diversity efforts. In July 2013, the former Office of Multicultural Affairs transitioned to become the Center for Equity, Diversity & Inclusion (CEDI) and in June, 2014, Leo Morales MD PhD was appointed Chief Diversity Officer for the School of Medicine and Director of CEDI by Dean Paul Ramsey. The overall goal for CEDI is to foster diversity in the faculty, trainees and students of the school of medicine throughout the WWAMI region.

CEDI focuses its work in four domains: workforce diversity, institutional culture and climate, multicultural education, and community engagement. CEDI currently has a staff of five and two affiliated faculty members. *Jordan Lewis (Aleut)* is an Assistant Professor in the School of Social Work and Indigenous Wellness Research Institute and services as the course director for CEDI's Indian Health Issues Course. His research His research interests include rural community mental health, Indigenous gerontology, and cross-cultural health and long-term care. *Janice Sabin* is an Associate Professor in the Department of Biomedical Informatics and Medical Education. Her area of research is unconscious bias. CEDI's staff include *Norma Alicia Pino*, MA, program manager for CEDI's educational offerings and the Hispanic and Indian Health Pathways. *Felicity Abeyta-Hendrix*, MSW, is coordinator for Workforce Diversity, focusing on the premedical school pipeline and CEDI's liaison with CEDI's affiliated medical school student organizations. *Nora Coronado*, MSW, is program manager for Community Engagement. *Dan Olson*, MS, is CEDI's programmer and data analyst.

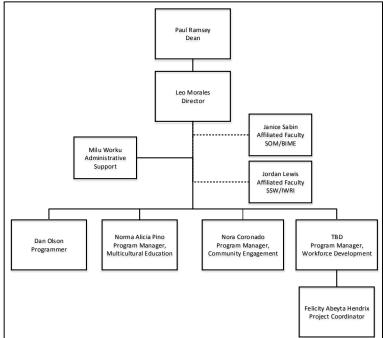


Figure 1. CEDI Organizational Chart, 12/2015

Faculty Diversity

CEDI in collaboration with the Committee on Minority Faculty Advancement (CMFA) is addressing the

professional and development needs of faculty from underrepresented groups in medicine and biomedical sciences (URM faculty). CEDI and CMFA sponsor quarterly networking and mentoring events, bringing together URM faculty, trainees and students. This fall, CEDI and CMFA hosted a reception that included URM medical students, residents and fellows and faculty. In the Spring 2016, the CMFA and CEDI have invited Hannah Valantine, MD, to UW for a series of meetings with with URM faculty, residents/fellows and medical students. Dr. Valantine is the Chief Officer for Scientific Workforce Diversity for the NIH. She came to the NIH from Stanford University where she served as Senior Associate Dean for Diversity and Leadership at Stanford School of Medicine, and Professor of Cardiovascular Medicine at Stanford University Medical Center. CEDI maintains a CMFA list serve and produces and distributes a quarterly CMFA newsletter. Please encourage interested URM faculty to contact Nora Coronado to learn more about CMFA or to join.

The Pipeline into Medicine

The UW has hosted a Summer Medical and Dental Education Program (SMDEP) program for 25 years. SMDEP is a six-week program for rising sophomores and juniors from underrepresented minority and/or disadvantaged backgrounds that provides a six week academic, leadership and career development experience at UW campus to better prepare them for the medical and dental school application process. This program is funded in-part by the Robert Wood Johnson Foundation and administered by the American Association of Medical Colleges. The UW accepts 80 students from more than 800 applicants from across the U.S. with approximately 50% of the program participants coming from WWAMI. Historically, The majority of WWAMI students have come from Washington State (Figure 2). Starting last year SMDEP-UW is focusing on recruiting more American Indian and Native Alaskan students from the WWAMI region.

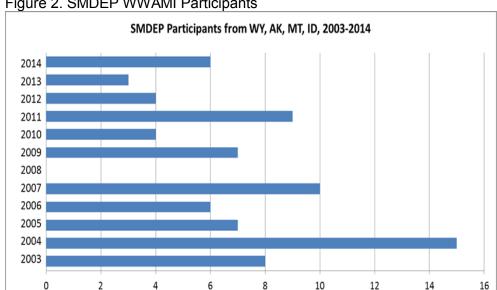


Figure 2. SMDEP WWAMI Participants

For further information about SMDEP or to refer students, please contact the SMDEP Director, Felicity Abeyta-Hendrix.

CEDI Contact Information

Leo Morales – Ism2010@uw.edu Janice Sabin – sabinja@uw.edu Jordan Lewis - jplewis@uw.edu Nora Coronado - ncorona@uw.edu Norma Alicia Pino – pinon@uw.edu Felicity Abeyta Hendrix - fabeyta@uw.edu Dan Olson – dolson@uw.edu Milu Worku – mworku@uw.edu

UNIVERSITY OF WASHINGTON SCHOOL OF PUBLIC HEALTH IDAHO 2015

Formed in 1990, the Northwest Center for Public Health Practice (NWCPHP) coordinates workforce development and outreach activities for the University of Washington School of Public Health. NWCPHP's mission is to promote excellence in public health by linking academia and the practice community. NWCPHP provides training, research, evaluation, and communication services for state, local, and tribal public health organizations in six Northwest states—Alaska, Idaho, Montana, Oregon, Washington, and Wyoming.

Workforce Development Activities of the Northwest Center for Public Health Practice:

- Provide technical assistance to state and local health departments
- Develop curricula and educational content for practice-based continuing education
- Coordinate on-site and distance learning activities
- Hold leadership and executive training institutes
- Facilitate collaborative practice-based research with the School of Public Health and the practice community

Since 2000, NWCPHP has convened and facilitated a regional network for public health workforce development. Regional Network members meet regularly in face-to-face meetings, and more recently in online interactive meetings, to collaborate on workforce development issues and design strategies to implement their vision.

Regional Network activities include: sharing of workforce development resources, the delivery of public health trainings, analysis of current workforce trends and challenges, and efforts to expand distance learning capacity to meet the needs of busy practitioners. The collaborative nature of the Network has helped to foster a diverse and growing range of activities within each state and across the region.

NWCPHP continues to work actively with public health colleagues in Idaho on specific training activities and on the development and implementation of a workforce development strategy. NWCPHP partners with the Idaho Department of Health & Welfare (IDHW) and with the state's seven health districts.

- The Idaho Association of Public Health District Directors serves as one of NWCPHP's local performance sites. As a regional public health training center, NWCPHP works with local performance sites to help coordinate training activities and better address local training needs.
- One Idaho public health worker attended NWCPHP's Summer Institute for Public Health Practice, held in Seattle during August 2015. The Institute provides practical and relevant training for public health practitioners and builds capacity to detect, respond to, control, and recover from public health incidents. Courses included: Health Communication; Implementing Program Planning and Evaluation; Interpreting and Using Health Data; and Systems and Strategies in Public Health Management. Plenary sessions covered connections between racial equity and health and a public health leaders forum.
- One scholar from Idaho participated in the 2015-2016 cohort of NWCPHP's 9-month Public Health Management Certificate (PHMC) program. The PHMC is designed to enhance the

management skills of working public health professionals.

- One scholar from Idaho participated in the Patient Centered Outcomes Research Partnership (PCORP) training program. The program trains scientists, clinicians, and health care managers for conducting research on patient-centered outcomes and the comparative effectiveness of medical treatments. The curriculum design is driven by community partners and combines online and in-person training. The program includes a focus on community-based health care and reducing health disparities among American Indians, Alaska Natives, and rural populations.
- Idaho public health workers participate in NWCPHP's monthly Hot Topics in Practice forums, which are presented via Adobe Connect.
- Representatives from IDHW participated in the March 2015 Regional Network Steering Committee meetings hosted by NWCPHP.
- Representatives from Idaho attended the 12th Annual Tribal Public Health and Emergency Preparedness Conference in June 2015. NWCPHP staff served on the planning committee and distributed workforce development and emergency preparedness materials at the conference.

Idaho public health practitioners serve as pilot testers for NWCPHP online modules and on the *Norwest Public Health* editorial board.



UPDATE • SEPTEMBER 2015

University of Washington • School of Medicine
Department of Family Medicine

NEWS

The WWAMI RHRC will begin new research studies this fall:

- Who Treats Opioid Addiction in Rural America? Quantifying the Availability of Buprenorphine Services in Rural Areas
- The Supply and Distribution of the Behavioral Health Workforce in Rural America
- Diverging Populations Served by the Medicare Home Health Benefit: Comparison of Post-acute vs. Communityentry Home Health in Rural Areas

WWAMI RHRC researchers continue to conduct research as part of the HRSA-funded Rural Training Track (RTT) Technical Assistance Program, a consortium of organizations led by the National Rural Health Association to sustain existing family medicine "1-2" RTT residencies and support the development of new ones.

STUDIES UNDER WAY

Details available from the RHRC website: http://depts.washington.edu/uwrhrc/

- What Impact Will Unified GME Accreditation Have on Rural-Focused Physician Residencies?
- Use of Home Health Services Among High Risk Rural Medicare Patients: Patient, Service, and Community Factors Associated with Hospital Readmission
- What Makes Physician Assistant Programs Successful at Training Rural PAs?
- What Is the Potential of Community Paramedicine to Fill Rural Healthcare Gaps?
- Impacts of Nurse Practitioners and Physician Assistants on Future Provision of Primary Care in Rural Areas
- Practice Characteristics of Rural Nurse Practitioners in the U.S.
- Family Medicine Rural Training Track Graduates: Determinants of Rural and Urban Practice
- Access to Home Care Services in the Rural U.S.
- A Novel Master File of Rural Family Medicine Residency Training: Program Models and Graduate Outcomes
- Which Physician Assistant Programs Produce Rural Physician Assistants?
- HIT Workforce Development in Rural-Serving Community Colleges
- The Influence of State Policies and Practices on J-1 Visa Waiver Physicians' Service in Rural Areas

The WWAMI RHRC

The University of Washington WWAMI (Washington, Wyoming, Alaska, Montana, Idaho) Rural Health Research Center (RHRC) is one of seven rural health research centers that receive core support from the U.S. Health Resources and Services Administration (HRSA). The WWAMI RHRC's mission is to conduct national and regional research that informs rural healthcare policy related to:

- Supply of and demand for rural health care providers and the content and outcome of the care they provide.
- Health professional education that promotes rural practice and skills needed to care for rural populations.
- Access to high-quality care for vulnerable and minority rural populations.

Established in 1988, the WWAMI RHRC is based in the Department of Family Medicine at the University of Washington. The Center works closely with the Area Health Education Centers (AHECs) and other health care related organizations in the five WWAMI states, as well as educators, policy makers, and other researchers across the U.S. and internationally, to identify important research questions and disseminate study findings.

RECENT PUBLICATIONS

Most publications may be accessed at http://depts.washington.edu/uwrhrc/

Assessing Rural-Urban Nurse Practitioner Supply and Distribution in 12 States Using Available Data Sources. Policy Brief #143. Skillman SM, Keppel G, Doescher MP, Kaplan L, Andrilla CHA. Seattle, WA: WWAMI Rural Health Research Center, University of Washington, August 2015.

Prehospital Emergency Medical Services Personnel in Rural Areas: Results from a Survey in Nine States. Final Report #149. Patterson DG, Skillman SM, Fordyce MA. Seattle, WA: WWAMI Rural Health Research Center, University of Washington, August 2015.

Dentist supply, dental care utilization, and oral health among rural and urban U.S. residents. Doescher M, Keppel G. Final Report #135. Seattle, WA: WWAMI Rural Health Research Center, University of Washington, Jun 2015.

Graduate medical education financing: sustaining medical education in rural places. Patterson DG, Schmitz D, Longenecker R, Squire D, Skillman SM. Seattle, WA: WWAMI Rural Health Research Center, University of Washington, May 2015.

RECENT PUBLICATIONS (cont'd)

Recruitment of non-U.S. citizen physicians to rural and underserved areas through Conrad State 30 J-1 visa waiver programs. Patterson DG, Keppel G, Skillman SM, Berry B, Daniel C, Doescher MP. Final Report. Seattle, WA: WWAMI Rural Health Research Center, University of Washington; Apr 2015.

Variability in general surgical procedures in rural and urban U.S. hospital inpatient settings. Doescher MP, Jackson JE, Fordyce MA, Lynge DC. Policy Brief #142. Seattle: WA, WWAMI Rural Health Research Center, University of Washington, Feb 2015.

Geographic and specialty distribution of physicians trained to provide office-based treatment of opioid use disorder in the United States. Rosenblatt RA, Andrilla CHA, Catlin M, Larson EH. *Ann Fam Med* 2015 Jan;13(1):23-6.

The built environment and utilitarian walking in small U.S. towns. Doescher MP, Lee C, Berke EM, Adachi-Mejia AM, Lee CK, Stewart O, Patterson DG, Hurvitz PM, Carlos HA, Duncan GE, Moudon AV. *Prev Med.* 2014 Dec;69:80-6.

Health information technology workforce needs of rural primary care practices. Skillman SM, Andrilla CHA, Patterson DG, Fenton SH, Ostergard SJ. *J Rural Health*, Winter 2015, 31(1):58-66.

The contribution of physicians, physician assistants, and nurse practitioners toward rural primary care: findings from a 13-state survey. Doescher MP, Andrilla CHA, Skillman SM, Morgan P, Kaplan L. *Med Care*. Jun 2014;52(6):549-556.

RECENT PRESENTATIONS

Attracting rural physicians: new findings on rural training, practice choices, and care for vulnerable populations.

Patterson DG, CHA Andrilla, Schmitz D, Longenecker R, Skillman SM, Hanscom J. Presented at the 2015 Rural Health Summit, Portland, OR, Sep 1, 2015.

Geographic and specialty distribution of U.S. physicians trained to treat opioid use disorder. Andrilla CHA, Rosenblatt RA, Caitlin M, Larson EH. Webinar on "Prevalence of Opioids and the Workforce to Provide Treatment in Rural and Urban Settings" for the Rural Health Research Gateway, Jun 25, 2015.

Person, program or place? Family physicians choosing rural practice. Patterson DG, Andrilla CHA, Schmitz D, Longenecker R, Skillman SM. Presented at the Association of American Medical Colleges Health Workforce Research Conference, Alexandria, VA, May 30, 2015.

Discontinuing the ACA Medicaid bonus may reduce rural patient access. Patterson DG, Andrilla CHA, Skillman, SM, Hanscom J. Presented at the National Rural Health Association 38th Annual Conference, Philadelphia, PA, Apr 16, 2015.

RECENT PRESENTATIONS (cont'd)

Community paramedicine: state of the evidence. Patterson DG. Presented at the Milbank Memorial Fund Reforming States Group Meeting, New Orleans, LA, Nov 6, 2014.

Research in progress: what is the potential of community paramedicine to fill rural healthcare gaps? Patterson DG. National Organization of State Offices of Rural Health Annual Meeting, Omaha, NE, Oct 30, 2014.

Rural Training Tracks: what SORHs need to know.

Longenecker RL, Patterson DG, Schmitz D. National Organization of State Offices of Rural Health Annual Meeting, Omaha, NE, Oct 28, 2014.

Support for rural recruitment and practice among U.S. nurse practitioner education programs. Skillman SM, Kaplan L, Andrilla CHA, Ostergard S., Patterson DG. Presented at AcademyHealth 2014 Annual Research Meeting, San Diego, CA, Jun 9, 2014.

Opportunities to address rural health workforce needs and demand. Larson EH. Presented at the Rural Health Philanthropy Partnership Meeting, sponsored by Federal Office of Rural Health Policy and the National Rural Health Association, Washington, DC, May 2014.

Community paramedicine research: how can we build the evidence for quality and value? Patterson DG. Presented at ZOLL Summit 2014, Denver, CO, May 14. 2014.

Support for rural recruitment and practice among U.S. nurse practitioner education programs. Skillman SM. Presented to the Association of American Medical Colleges Health Workforce Research Conference, Washington, DC, May 1, 2014.

INVESTIGATORS AND STAFF

Eric Larson, PhD, Director and Principal Investigator Davis Patterson, PhD, Deputy Director Holly Andrilla, MS, Investigator and Biostatistician Susan Skillman, MS, Investigator Laura-Mae Baldwin, MD, MPH, Investigator Tom Norris, MD, Investigator Lisa Garberson, PhD, Research Scientist Gina Keppel, MPH, Research Scientist Cynthia Coulthard, MPH, Research Coordinator Beverly Marshall, Program Assistant Evelyn Chanasyk, Program Assistant



CENTER FOR HEALTH WORKFORCE STUDIES

UNIVERSITY of WASHINGTON

UPDATE • SEPTEMBER 2015

University of Washington • School of Medicine • Department of Family Medicine

NEWS

New Health Workforce Research Center Funded

The University of Washington Center for Health Workforce Studies (UW CHWS) was awarded funding in Fall 2014 as one of five Health Workforce Research Centers (HWRCs) across the nation. The UW HWRC was approved for three years of funding (approximately \$1.3 million total) from the federal Health Resources and Services Administration (HRSA).

Bianca Frogner, PhD, Named UW CHWS Director



Joining the UW CHWS in December 2014 as an Associate Professor in the Department of Family Medicine and Director of the UW CHWS, Dr. Frogner is a NIH-trained health economist with research expertise in

workforce, health insurance reimbursement, health systems, and welfare. She previously worked at The George Washington University. She received her PhD from Johns Hopkins Bloomberg School of Public Health and BA from the University of California.

STUDIES UNDER WAY

Studies of the Allied Health Workforce (newly funded through the Health Workforce Research Center):

- Characteristics of Physician Assistant Students Planning to Work in Primary Care
- Pathways for Military Veterans to Enter Allied Health Careers
- The Workforce Needed to Integrate Behavioral/Mental Health Workforce with Primary Care
- Impacts of Greater Use of Low Skilled, Low-wage Workers in Health Care Delivery
- Characteristics of Veterans in Allied Health Care Jobs
- Career Paths of Allied Health Professionals
- Emerging Roles in Allied Health Occupations
- Immigrants in Allied Health Professions
- Leveraging Data to Monitor the Allied Health Workforce: Building a Database for Studies of Workforce Size, Distribution and Availability

The University of Washington CHWS

The University of Washington Center for Health Workforce Studies (UW CHWS) was established in 1998 with funding from the federal Health Resources and Services Administration (HRSA). It is based in the Research Section of the Department of Family Medicine, part of the University of Washington School of Medicine

The UW CHWS:

- Conducts health workforce research to inform health workforce planning and policy
- Provides consultation to local, state, regional and national policy makers on health workforce issues
- Develops and refines analytical methods for measuring health workforce supply and demand

Funding for the UW CHWS comes from a variety of federal, state and non-governmental sources. Study findings are disseminated to research, planning, and policy audiences.

RECENT PUBLICATIONS

Most publications may be accessed at http://depts.washington.edu/uwchws/

Pathways to middle skilled allied health occupations.

Frogner BK, Skillman SM. Commissioned paper for the Committee on the Supply Chain for Middle-skill Jobs: Education, Training and Certification Pathways of the National Academies of Sciences/Engineering/Medicine. Washington, DC: The National Academies, Sept 2015.

Facilitating racial and ethnic diversity in the health workforce. Snyder CR, Stover B, Skillman SM, Frogner BK. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Jul 2015.

The impact of Medicaid primary care payment increases in Washington State. Patterson DG, Andrilla CHA, Skillman SM, Hanscom J. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Dec 2014.

Montana's physician workforce in 2014. Skillman SM, Stover B. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Nov 2014.

RECENT PUBLICATIONS (cont'd)

Wyoming's physician workforce in 2014. Skillman SM, Stover B. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Oct 2014.

Washington State registered nurses - analysis of RNs who did not renew their licenses: 2008-2014.

Skillman SM, Andrilla CHA, Ostergard S. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Sept 2014.

Idaho's physician workforce in 2014. Skillman SM, Stover B. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Sept 2014.

Maine's physician, nurse practitioner and physician assistant workforce in 2014. Skillman SM, Stover B. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Sept 2014.

Washington State's physician workforce in 2014. Skillman SM, Stover B. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Aug 2014.

Washington State data snapshot: advanced registered nurse practitioners (ARNPs). Andrilla CHA, Skillman SM, Morrison CC, Reeves MA. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Apr 2014.

Washington State data snapshot: licensed practical nurses (LPNs). Andrilla CHA, Skillman SM, Morrison CC, Reeves MA. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Apr 2014.

Washington State data snapshot: registered nurses (RNs). Andrilla CHA, Skillman SM, Morrison CC, Reeves MA. Seattle, WA: WWAMI Center for Health Workforce Studies, University of Washington, Apr 2014.

Most publications may be accessed at http://depts.washington.edu/uwchws/

RECENT PRESENTATIONS

Health workforce planning in the WWAMI region.Skillman SM, Frogner BK. At: 2015 WWAMI Legislative Staff Tour, Boise-Seattle. Aug 12, 2015, Seattle, WA.

What do health care efficiency rankings tell us? Efficiency ranking among OECD countries. Frogner B, Frech III HE, Parente ST. Presentation at 10th World Congress of the International Health Economics Association, Milan, Italy, July 13-15, 2015.

Exit and entry of workers in long-term care. Frogner B, Spetz J. Presentation at 2nd Economics of the Health Workforce Conference, Milan, Italy, July 12, 2015.

Pathways to middle skilled allied health occupations. Frogner, BK, Skillman SM. At: Symposium on the supply chain for middle-skilled jobs: Education, training and certification pathways. National Academy of Sciences, Washington, DC, Jun 24-25, 2015

Loss of ACA primary care bonus may reduce Medicaid patient access. Patterson DG, Andrilla CHA, Skillman, SM, Hanscom J. Presented at the Association of American Medical Colleges Health Workforce Research Conference, Alexandria, VA, May 30, 2015.

Health Workforce Planning: Who, What, How?Skillman SM. Presented at the National Governors
Association's Health Workforce Policy Academy Retreat,
Indianapolis, IN, Mar 23, 2015.

Washington's health workforce: Results from recent research. Skillman SM. Invited presentation to the Washington State House of Representatives' Education Committee, Olympia, Washington, Jan 26, 2015.

Washington's physician workforce: 2014 supply and distribution, and strategies to relieve shortages.

Skillman SM. Invited presentation to the Washington State Senate's Higher Education Committee, Olympia, Washington, Jan 22, 2015.

WWAMI CHWS Investigators and Staff

Evelyn Chanasyk, Program Assistant

Bianca Frogner, PhD, Director, Health Workforce Research Center Susan Skillman, MS, Deputy Director
Davis Patterson, PhD, Investigator
Eric Larson, PhD, Investigator
Holly Andrilla, MS, Investigator and Biostatistician
Bert Stover, PhD, Research Scientist
Matthew Thompson, MBChB, MPH, DPhil, MRCGP, Investigator
Gina Keppel, MPH, Research Scientist
Andrea McCook, MBA, Research Manager
Beverly Marshall, Program Assistant



THE UNIVERSITY OF WASHINGTON TELEHEALTH PROGRAM 2014-2015

The University of Washington Telehealth program houses projects dedicated to bringing telehealth services to the WWAMI region. These services support UW Medicine's mission to improve the health of the public, particularly in many of our region's underserved and rural communities.

UW Medicine has been involved in telehealth and telemedicine for more than 40 years, including projects with NASA (1960s, 1970s); Bench to Bedside & Beyond (National Library of Medicine, 1995-2000); Affiliated Family Practice Residency Telemedicine Project (Federal & State Training grant,1999-2001); Telepartners Rural Special Educational Needs Support Project (US Department of Education's Office of Special Education, 1999-2001); and the WWAMI Rural Telemedicine Network (Office for the Advancement of Telehealth-OAT, 1994-2000), Native People for Cancer Control Telehealth Network (OAT, 2006-2009), Innovation Awards subcontract (Centers for Medicare & Medicaid Services, 2012-2013), and Pain Management in Rural and Native American Communities (NIH-STTR, 2010-2013). Current funding includes Symptom Management in Rural Communities (NIH), Center for Excellence in Pain Education (NIH/NINR), and Enhancing Rural Primary Care Access to Mental Health & Opioid Management (OAT, 2012-present).

UW Telehealth Benefits to WWAMI Patients

In the past year, hundreds of patients living in the WWAMI region have benefitted from telehealth visits and case consultations in several high-impact specialty areas detailed below. These consultations provided patients with convenient access to cutting-edge specialty care at UW Medicine, without the added time and expense of travelling to Seattle.

University of Washington School of Medicine Telehealth Network

UW Medicine's Telehealth Network includes 19 hospitals in Washington, eight primary care clinics in the Seattle area, 18 family practice residency sites throughout the WWAMI region, and UW School of Medicine training sites in each of the WWAMI states. However, tremendous growth and development and decreasing costs in technology in very recent years have permitted broad access to UW Telehealth programs for remote and rural health care providers throughout the WWAMI states and beyond.

Over the past several years, UW Medicine Telehealth has developed an increasingly robust menu of services, programs and support. Telehealth programs have included:

• **Telepsychiatry**: Under the leadership of Richard Veith MD, Marc Avery MD, and Jurgen Unutzer MD, UW has provided clinician-to-clinician case consultations, direct clinician-to-patient care, and educational programs and in-services. Approximately 200 patients have been served in the past two years.

- **TelePain Management:** David Tauben MD, James Robinson MD, and Suzanne Rapp, MD have provided clinician-to-patient care via telemedicine for patients suffering from complex pain conditions. More than 100 pain management televisits have taken place over the past two years.
- **Teledermatology:** Roy Colven MD, and Nic Compton MD, have provided "store-and-forward" services and case-based education for rural communities and in correctional settings. Over 150 consultations have taken place in the past year.
- Telestroke: David Tirschwell MD, and Kyra Becker MD, and their team have provided telestroke services and educational programs provided to 6 rural hospitals, responding to over 400 stroke calls per month.
- UW Department of Radiology **Teleradiology** services provide approximately 8000 studies per month under the leadership of Norman Beauchamp MD.
- Multi-site telehealth case-based consultation and continuing medical education series: Community clinicians attend didactic presentations and obtain evaluation and treatment consultations on complex cases from a panel of UW specialists. These no-cost consultations provide for CME and cover a variety of disciplines:
 - Hepatitis C: 1020 unique patient cases, with a total of 4010 case presentations since January 2010. Lead clinician is John Scott MD.
 - Pain Management: 443 case presentations since March 2011. Lead clinician is David Tauben MD.
 - HIV/AIDs: HIV/AIDs: 553 case consultations since January 2012. Lead clinician is Brian Wood MD.
 - Multiple Sclerosis: 41 case consultations since September 2014. Lead clinician is Gary Stobbe MD.
 - New programs in diabetes, heart failure, TB, end stage liver disease will soon be launched or were recently launched in late 2015.
- Numerous Oncology case conferences and tumor boards take place each month using telehealth technologies.
- UW Medicine and Lab Medicine Grand Rounds and other educational series are offered via video teleconference.
- The ten-part series in Geriatric Health Promotion is delivered twice each year
 via telehealth from the UW Northwest Geriatric Education Center. New grant
 funding will support a soon-to-be initiated geriatric case consultation program via
 telehealth, under the leadership of Elizabeth Phelan MD, Michael Vitiello PhD,
 and Kate Bennet MD.
- **Tele-home monitoring:** A pilot program for patients experiencing congestive heart failure took place, providing home monitoring via telehealth for 30 patients, resulting in no rehospitalizations. Lead clinician was Ted Gibbons MD.
- TeleBurn: Telehealth technologies are being used for post-discharge follow-up
 assessment of burn injuries since September 2014, providing discharged burn
 patients from across the WWAMI region the opportunity to have a clinical visit
 with the entire burn team, while saving the costs of time and travel to Harborview
 Medical Center in Seattle. Lead clinician is Tam Pham MD.
- **Maternal Fetal Medicine:** Women with high risk pregnancies living in the Yakima area have benefitted from televideo consultations with a UW Medicine

- maternal fetal medicine expert since 2014. This is led by Justine Chang MD, and Edith Cheng MD.
- **UW Medicine Virtual Clinic:** UW Medicine has partnered with Carena, Inc., to provide tele-urgent care services for patients within Washington State. Initiated in January 2015, the Virtual Clinic has provided care for an average of 150 patients per month.

UW School of Medicine WWAMI program and the "WWAMI Classroom"

UW Telehealth supports the UW School of Medicine WWAMI program, using video teleconferencing to bring together students and faculty across the WWAMI region for Curriculum Committee and Regional Affairs planning meetings, Peer Counseling conferences, Academic Advising, Resident Teaching Seminar, "Basic Medicine Clerkship" course, and courses related to the International Health Opportunities Program. The "WWAMI classroom" uses room-based video teleconferencing systems at each of the WWAMI 1st year sites to provide classes simultaneously at multiple sites, with instructors located at any one of the sites.

Collaborations

UW Telehealth has worked closely with Seattle Children's Hospital Telemedicine, and has also been an integral part of a continued effort, in collaboration with the Washington State Hospital Association and the Washington State Medical Association, to further support and develop telehealth in Washington. This collaboration led to the passage of a new law in Washington State that will mandate reimbursement for covered services delivered via telehealth technologies, effective January 1, 2017.

In addition, UW Telehealth is a founding member and serves on the Board of the seven-state collaborative Northwest Regional Telehealth Resource Center (NRTRC), currently funded by the Office for the Advancement of Telehealth (OAT). The NRTRC serves as a telehealth resource center for new and continuing telehealth programs in Washington, Wyoming, Alaska, Montana, Idaho, Oregon, and Utah. The 4th annual NRTRC Telehealth conference was held in Seattle in March 2015, with over 200 participants from the seven-state region, and will be held again in Seattle in March 2016.

The UW has made steady progress over the past 40 years through our involvement in increasingly complex telemedicine projects funded by federal grants or contracts. The UW School of Medicine is now proceeding with a goal of establishing an enduring and self-sustaining telehealth service that meets the medical and professional needs of the rural WWAMI region.

For more information or to participate in Telehealth programs, please contact:

John Scott, MD

Medical Director, UW Telehealth Services

jdscott@uw.edu

Cara Towle, RN MSN
Director, UW Telehealth Services
ctowle@uw.edu

DIRECTORY OF UW SCHOOL OF MEDICINE ADMINISTRATION

School of Medicine, Office of the Dean

C-314 Health Sciences Center University of Washington, Box 356340 Seattle, WA 98195-6340

Seattle, WA 98195-6340	
Dean Paul G. Ramsey, M.D. Chief Executive Officer, UW Medicine Executive Vice President for Medical Affairs and Dean of the School of Medicine, University of Washington	(206) 543-7718
Vice Deans Suzanne Allen, M.D., M.P.H. Academic, Rural and Regional Affairs Mark S. Green, J.D. Administration and Finance David C. Dugdale, M.D., FACP Clinical Affairs Byron Joyner, M.D. Graduate Medical Education John T. Slattery, Ph.D. Research and Graduate Education	(208) 364-4545 (206) 685-7146 (206) 543-3547 (206) 616-8286 (206) 543-6116
Associate Deans Mary Fran Joseph, M.B.A. Administration & Finance Carol Teitz, M.D. Admissions Erika A. Goldstein, M.D., M.P.H. Colleges Program Michael Ryan, M.D. Curriculum Sara Kim, Ph.D. Educational Quality Improvement Jennifer Best, M.D. GME Anne Eacker, M.D. Student Affairs Nora Disis, M.D. Translational Research	(206) 616-3974 (206) 543-1552 (206) 744-3098 (206) 543-5560 (206) 221-4024 (206) 616-5210 (206) 616-7068 (206) 616-1823
Associate Deans (Seattle clinical training sites) William H. Campbell, M.D., Chief Medical Officer, VA Puget Sound David J. Fisher, M.D., Medical Director, Seattle Children's J. Richard Goss, M.D., M.P.H., Medical Director, HMC Thomas O. Staiger, M.D., Medical Director, UWMC Bruder Stapleton, M.D., Research, Seattle Children's	(206) 764-2260 (206) 987-2005 (206) 744-3134 (206) 598-6600 (206) 987-2150
Assistant Deans (based in Seattle) James Hendricks, Ph.D. President, Seattle Children's Research Institute Sheila Lukehart, Ph.D. Medicine, Infectious Diseases & Global Health -Joint Amity Neumeister, M.B.A., Graduate Medical Education Christina Surawicz, M.D. Faculty Development	(206) 884-1212 (206) 897-5362 (206) 685-6801 (206) 744-7070
Assistant Deans at Regional Sites (clinical programs) John McCarthy, M.D. Eastern Washington WWAMI Darryl Potyk, M.D. Spokane WWAMI Yong Ki Shin, M.D. Western Washington WWAMI Larry Kirven, M.D. Wyoming WWAMI Tom Nighswander, M.D. Alaska WWAMI Jay Erickson, M.D. Montana WWAMI Mary Barinaga, M.D. Idaho WWAMI	(509) 358-7794 (509) 358-7794 (360) 249-4111 (307) 432-9264 (907) 729-3682 (406) 862-2515 (208) 364-4548
Assistant Deans at Regional Sites (first-year regional campuses) William Sayres, M.D., Director Spokane WWAMI Medical Education Tim Robinson, Ph.D., Director Wyoming WWAMI Medical Education Jane Shelby, Ph.D. Director Alaska WWAMI Medical Education Martin Teintze, Ph.D. Director Montana WWAMI Medical Education Jeff Seegmiller, Ed.D, Director Idaho WWAMI Medical Education	(509) 358-7515 (307) 766-2496 (907) 786-4772 (406) 994-4411 (208) 885-6696
AHEC Program Susan Skillman, M.S., Associate Director	(206) 543-3557
Chief Diversity Officer Leo Morales, M.D., Center for Equity, Diversity and Inclusion (CEDI)	(206) 685-2489

(206) 685-2489

Leo Morales, M.D., Center for Equity, Diversity and Inclusion (CEDI)

WWAMI Departmental Clerkship Directors at University of Washington School of Medicine

Anesthesiology

Chris Kent, M.D. Box 356123 (206) 598-4253

Emergency Medicine

Jamie Shandro, M.D. Box 356123 (206) 744-2558

Jared Strote, M.D. Site Director, UWMC/WWAMI (206) 598-0103

Family Medicine

Jeanne Cawse-Lucas, M.D. Misbah Keen, M.D. Box 356390 (206) 543-9425

Laboratory Medicine

Mark Wener, M.D. Box 357110 (206) 598-6152

Medicine

Required clerkship: Doug Paauw, M.D. (206) 543-3604

Elective clerkship: Susan Merel, M.D. (206) 616-4088

Neurological Surgery,

Richard Ellenbogen, M.D. Box 359300, MS W7729 (206) 744-9321

Amy Lee, M.D. (206) 987-4240

Neurology

Eric Kraus, M.D. Box 356169 (206) 616-6992

Obstetrics & Gynecology

Vicki Mendiratta, M.D. Box 356460 (206) 598-3595

Ophthalmology

Courtney Francis, M.D. Box 359608 (206) 543-7250

Orthopaedic and Sports Medicine

Greg Schmale, M.D. Box 359300 (206) 987-1776

Otolaryngology, Head and Neck Surgery

Allen Hillel, M.D. Box 356515 (206) 543-5230

Pathology

Jeffrey Virgin, M.D. Box 356100 (206) 598-8000

Pediatrics.

Sherilyn Smith, M.D. Jordan Symons, M.D. Richard Shugerman (WWAMI Only) Box 359300/A5950 (206) 987-2008

Psychiatry & Behavioral Sciences

Heidi Combs, M.D. Box 359896 (206) 744-3443

Radiology Oncology

Ralph Ermoian, M.D. Box 356043 (206) 598-4100

Radiology

Gautham Reddy, M.D. Box 359728 (206) 744-3403

Rehabilitation Medicine and Chronic Care

Tom McNalley, M.D. Box 356490 (206) 987-2114

Surgery

Roger P. Tatum, M.D. Box 358280 (206) 764-2141

Urology

Michael Porter, M.D. Box 358280 (206) 764-2265

APPENDIX

2015 WWAMI ADMISSIONS REPOR (ALL WWAMI SITES)

State of Residence	Applicants	Entered
Washington	905	123*
Wyoming	66	20
Alaska	95	20
Montana	114	30
Idaho	141	35
Non-WWAMI	6,769	17**
TOTAL	8,090	245

^{*} Includes 2 MSTP students from Washington

^{**}Includes 10 MSTP students

Sex	Applicants	Entered
Female	3,619	136
Male	4,470	109
Undisclosed	1	0

The average undergraduate grade point average (GPA) for Washington students who matriculated in 2015 is 3.68. Scores for the Medical College Admission Test (MCAT®) among enrolled medical students compared favorably to the national average for all enrolled students in U.S. medical schools: 10.13 in Verbal Reasoning; 10.00 in Physical Sciences; and 10.76 in Biological Science."

STUDENTS TRAINED AT WWAMI CLERKSHIP SITES 2014 - 2015

Medical students are trained at many clerkships sites outside of Seattle. This section lists the clerkship site communities in our WWAMI region and the number of students who have trained at each one from 1970 through 2013. Seattle clerkship sites are not included here.

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	I 2014 - 20	15	Total 1970 - 2015
FAMILY MEDICINE	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Anacortes, WA	571		571	8		8	579
	Anchorage, AK	257		257	7		7	264
	Big Sky, MT							
	Billings/ Glasgow, MT	65		65	5		5	70
	Boise, ID	384		384	14		14	398
	Bozeman, MT	4		4	3		3	7
	Bremerton, WA	127		127	9		9	136
	Browning, MT							
	Buffalo, WY	92		92	5		5	97
	Butte, MT		1	1		1	1	2
	Caldwell, ID							
	Carnation, WA	1		1				1
	Casper, WY	2		2				2
	Chelan, WA		2	2		1	1	3
	Cheyenne, WY	21		21	1		1	22
	Cle Elum / Ellensburg, WA		11	11				11
	Colfax, WA		6	6				6
	Colville, WA	1		1				1
	Dillingham, AK	1		1				1
	Dillion, MT		2	2		1	1	3
	Douglas, WY		1	1		1	1	2
	Ellensburg, WA		2	2		1	1	3
	Ferndale, WA		1	1	1	1	2	3
	Ft. Washakie, WY		1	1				1
	Grand Coulee, WA	2	4	6	2	1	3	9
	Grandview, WA	46		46				46

Discipline:	Location:	Tot	al 1970 - 20	14	Tota	I 2014 - 20	15	Total 1970 - 2015
FAMILY MEDICINE	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
(Cont.)	Havre, MT	147		147				147
	Heart Butte, MT	1		1				1
	Helena, MT		1	1				1
	Jackson, WY	1		1				1
	Jerome, ID		1	1		1	1	2
	Juneau, AK	2	7	9	1		1	10
	Ketchikan, AK	253		253				253
	Kodiak, AK	20	3	23		1	1	24
	Kuna, ID	1		1				1
	Lander, WY		4	4		1	1	5
	Leavenworth, WA	8		8	6		6	14
	Lewistown, MT		10	10	3		3	13
	Libby, MT	1	16	17	3	1	4	21
	Lynden, WA		1	1	0	1	1	2
	Madigan, WA	115		115				115
	McCall, ID		16	16				16
	Miles City, MT		1	1	0	1	1	2
	Missoula, MT	36		36	7		7	43
	Moses Lake, WA		4	4		1	1	5
	Nampa, ID		1	1		1	1	2
	Newport, WA		1	1				1
	Nome, AK	5		5				5
	Olympia, WA	128		128	3		3	131
	Omak, WA	358		358	2		2	360
	Othello, WA	18	4	22	4		4	26
	Petersburg, AK	25		25	5		5	30
	Pocatello, ID	359		359	5		5	364
	Port Angeles, WA	2	4	6		2	2	8
	Port Townsend, WA	1	1	2		1	1	3
	Powell, WY	39	12	51		1	1	52
	Pullman, WA					1	1	1
	Puyallup, WA	2		2				2
	Renton, WA	141		141	6		6	147

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	I 2014 - 20	15	Total 1970 - 2015
FAMILY MEDICINE	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
(Cont.)	Sandpoint, ID	2	23	25		1	1	26
	Seward, AK	23		23				23
	Shelby, MT		1	1				1
	Shelton, WA		2	2		1	1	3
	Sitka, AK	14		14	7		7	21
	Soldotna, AK	1	7	8				8
	Spokane, WA	491		491	14		14	505
	Tacoma, WA	156		156	10		10	166
	Thermopolis, WY		2	2				2
	Torrington, WY	26		26	2		2	28
	Vancouver, WA	4		4				4
	Wasilla, AK		11	11		1	1	12
	Wenatchee, WA	34		34	3		3	37
	Whidbey, WA	63		63				63
	Whitefish/ Kalispell MT	396		396	6		6	402
	Wrangell, AK	59		59				59
	Yakima, WA	151		151	2		2	153
	Subtotal	4657	180	4837	144	24	168	5005

Discipline:	Location:	Tot	Total 1970 - 2014 Total 2014 - 2015				15	Total 1970 - 2015
MEDICINE	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Anchorage, AK	116		116	5		5	121
	Billings, MT	300		300	15		15	315
	Boise, ID	746		746	22		22	768
	Bozeman, MT	13		13	8		8	21
	Butte, MT		1	1				1
	Caldwell, ID		1	1				1
	Casper, WY	1		1				1
	Chelan, WA		1	1				1
	Cle Elum / Ellensburg, WA		10	10				10
	Colfax, WA		6	6				6
	Connell, WA	1		1				1

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	I 2014 - 20	15	Total 1970 - 2015
MEDICINE (Cont.)	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
. ,	Dillon, MT	23	2	25	4	1	5	30
	Douglas, WY	16	1	17	2	1	3	20
	Ellensburg, WA		2	2		1	1	3
	Ferndale, WA		1	1				1
	Forks, WA	2		2				2
	Ft. Washakie, WY	1		1				1
	Grand Coulee, WA		3	3				3
	Great Falls, MT	4		4	3		3	7
	Hailey, ID		15	15		1	1	16
	Helena, MT	1	1	2				2
	Issaquah, WA	1		1				1
	Jackson, WY	58		58	4		4	62
	Jerome, ID		1	1		1	1	2
	Juneau, AK		8	8				8
	Kodiak, AK		3	3		1	1	4
	Lander, WY	4	4	8	2	1	3	11
	Lewistown, MT		9	9				9
	Libby, MT		15	15		1	1	16
	Madigan, WA	166		166				166
	McCall, ID		14	14				14
	Meridian, ID	7		7				7
	Missoula, MT	321		321	7		7	328
	Montesano, WA	85		85	6		6	91
	Moses Lake, WA		3	3		1	1	4
	Olympia, WA	5		5	3		3	8
	Othello, WA		4	4				4
	Port Angeles, WA		3	3		2	2	5
	Port Townsend, WA	5	1	6	2	1	3	9
	Powell, WY	1	11	12		1	1	13

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	I 2014 - 20	15	Total 1970 - 2015
MEDICINE (Cont.)	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
, ,	Pullman, WA	17		17	3	1	4	21
	Renton, WA	1		1				1
	Rexburg, ID	1		1				1
	Sandpoint, ID		22	22				22
	Shelby, MT		1	1				1
	Shelton, WA		2	2		1	1	3
	Sheridan, WY	95		95	5		5	100
	Shoreline, WA	1		1				1
	Soldotna, AK	17	7	24	3		3	27
	Spokane, WA	450		450	16	2	18	468
	Tacoma, WA	17		17				17
	Thermopolis, WY	4	2	6				6
	Walla Walla, WA	4		4				4
	Wasilla, AK		11	11				11
	Wenatchee, WA	238		238	7		7	245
	Yakima, WA	1		1				1
	Subtotal	2722	165	2888	117	17	134	3022

Discipline:	Location:	Total 1970 - 2014 Total 2014 - 2015					Total 1970 - 2015	
OBSTETRICS AND GYNECOLOGY	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
(Cont.)	Anchorage, AK	836		836	7		7	843
	Bellevue, WA	4		4	5		5	9
	Bellingham, WA				2		2	2
	Billings, MT	62		62	3		3	65
	Boise, ID	561		561	4		4	565

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	I 2014 - 20	15	Total 1970 - 2015
OBSTETRICS AND	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
GYNECOLOGY	Bozeman, MT	26		26	8		8	34
(Cont.)	Bremerton, WA	6		6				6
	Burien, WA	4		4				4
	Caldwell, ID	40		40				40
	Cheyenne, WY	75		75				75
	Cody, WY	5		5	2		2	7
	Everett, WA	13		13				13
	Fairbanks, AK	44		44	7		7	51
	Gillette, WY				3		3	3
	Grays Harbor, WA	4		4				4
	Great Falls, MT	11		11				11
	Helena, MT				3		3	3
	Havre, MT	21		21				21
	Kalispell, MT				4		4	4
	Kirkland, WA	10		10				10
	Lander, WY	7		7	3		3	10
	Lewiston, ID	6		6				6
	Libby, MT	8		8				8
	Madigan, WA	423		423				423
	Meridian, ID	5		5				5
	Missoula, MT	100		100	6		6	106
	Renton, WA	31		31	4		4	35
	Richland, WA	21		21	5		5	26
	Rock Springs, WY	92		92	10		10	102
	Sandpoint, ID	16		16	3		3	19
	Sheridan, WY				6		6	6
	Spokane, WA	831		831	27		27	858
	Tacoma, WA	134		134	22		22	156
	Walla Walla, WA	2		2				2

Discipline:	Location:	Total 1970 - 2014 Total 2014 - 2015				Total 1970 - 2015		
OBSTETRICS AND	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
GYNECOLOGY	Wasila, AK	4		4				4
(Cont.)	Wenatchee, WA	11		11	5		5	16
	Yakima, WA	121		121	15		15	136
	Subtotal	3534		3534	154	0	154	3688

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	I 2014 - 20	15	Total 1970 - 2015
PEDIATRICS	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Anchorage, AK	279		279	17		17	296
	Billings, MT	61		61	5		5	66
	Boise, ID	80		80	12		12	92
	Bozeman, MT	3		3	3		3	6
	Butte, MT		1	1		1	1	2
	Centralia, WA				4		4	4
	Chelan, WA		2	2		1	1	3
	Cheyenne, WY	48		48	4		4	52
	Cle Elum & Ellensburg, WA		10	10				10
	Colfax, WA		6	6				6
	Dillon, MT		2	2		1	1	3
	Douglas, WY		1	1		1	1	2
	Ellensburg, WA		1	1		1	1	2
	Ferndale, WA		1	1		1	1	2
	Ft. Washakie, WY		2	2				2
	Great Falls, MT	492		492				492
	Grand Coulee, WA		4	4		1	1	5

Discipline:	Location:	Tot	al 1970 - 20	14	Tota	l 2014 - 20	15	Total 1970 - 2015
PEDIATRICS (Cont.)	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Great Falls, MT	35		35	8		8	43
	Hailey, ID		15	15		1	1	16
	Helena, MT	3	4	7	1		1	8
	Idaho Falls, ID	3		3	5		5	8
	Jackson, WY	27		27	4		4	31
	Jerome, ID		1	1		1	1	2
	Juneau, AK		8	8				8
	Kodiak, AK		3	3		1	1	4
	Lander, WY		4	4		1	1	5
	Lewistown, MT		9	9				9
	Libby, MT		15	15		1	1	16
	Lynden, WA		1	1		1	1	2
	Madigan, WA	146		146				146
	McCall, ID		15	15				15
	Miles City, MT		1	1		1	1	2
	Missoula, MT	34		34	5		5	39
	Moses Lake, WA		3	3	1	1	2	5
	Nampa, ID		1	1		1	1	2
	Newport, WA		1	1				1
	Othello, WA		4	4				4
	Pocatello, ID	532		532	5		5	537
	Port Angeles, WA		3	3		2	2	5
	Port Townsend, WA		1	1		1	1	2
	Powell, WY		11	11		1	1	12
	Pullman, WA					1	1	1
	Sandpoint, ID		22	22		1	1	23
	Shelby, MT		1	1				1
	Shelton, WA		2	2		1	1	3

Discipline:	Location:	Total 1970 - 2014 Total 2014 - 2015				Total 1970 - 2015		
PEDIATRICS (Cont.)	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Soldotna, AK		7	7				7
	Spokane, WA	602		602	15		15	617
	Tacoma, WA	483		483	34		34	517
	Thermopolis, WY		2	2				2
	Wasilla, AK		11	11		1	1	12
	Wenatchee, WA	25		25	5		5	30
	Subtotal	2853	175	3028	128	24	152	3180

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	Total 2014 - 2015			
PSYCHIATRY AND BEHAVIORAL	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total	
SCIENCES	American Lake VA, WA	3		3				3	
	Anchorage, AK	787		787	8		8	795	
	Billings, MT	36		36	6		6	42	
	Boise, ID	263		263	13		13	276	
	Butte, MT		1	1		1	1	2	
	Casper, WY	49		49	5		5	54	
	Chelan, WA		2	2		1	1	3	
	Cheyenne, WY	4		4	4		4	8	
	Cle Elum & Ellensburg, WA		10	10				10	
	Colfax, WA		6	6				6	
	Dillon, MT		2	2		1	1	3	
	Douglas, WY		1	1		1	1	2	
	Ellensburg, WA		2	2		1	1	3	
	Everett, WA	1		1				1	

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	I 2014 - 20)15	Total 1970 - 2015
PSYCHIATRY AND	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
BEHAVIORAL	Ferndale, WA		1	1		1	1	2
SCIENCES (Cont.)	Ft. Washakie, WY		2	2				2
	Grand Coulee, WA		4	4		1	1	5
	Hailey, ID		15	15		1	1	16
	Helena, MT	2	1	3	3		3	6
	Jerome, ID		1	1		1	1	2
	Juneau, AK		8	8	6		6	14
	Kirkland, WA				5		5	5
	Kodiak, AK		3	3		1	1	4
	Lakewood, WA	1		1				1
	Lander, WY		4	4		1	1	5
	Lewistown, MT		9	9				9
	Libby, MT		15	15		1	1	16
	Lynden, WA		1	1		1	1	2
	McCall, ID		15	15				15
	Miles City, MT		1	1		1	1	2
	Missoula, MT	34		34	4		4	38
	Moses Lake, WA		3	3		1	1	4
	Nampa, ID		1	1		1	1	2
	Newport, WA		1	1				1
	Othello, WA		4	4				4
	Olympia, WA	4		4	4		4	8
	Pocatello, ID	3		3	4		4	7
	Port Angeles, WA		3	3		2	2	5
	Port Townsend, WA		1	1		1	1	2
	Powell, WY		11	11		1	1	12

Discipline:	line: Location: Total 1970 - 201				Tota	I 2014 - 20)15	Total 1970 - 2015
PSYCHIATRY AND	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
BEHAVIORAL	Pullman, WA					1	1	1
SCIENCES	Sandpoint, ID		22	22		1	1	23
(Cont.)	Shelby, MT		1	1				1
	Shelton, WA		2	2		1	1	3
	Soldotna, AK		7	7				7
	Spokane, WA	205		205	11		11	216
	Tacoma, WA	82		82				82
	Thermopolis, WY		2	2				2
	Wasilla, AK		11	11		1	1	12
	Subtotal	1474	173	1647	73	24	97	1744

Discipline:	Location:	Total 1970 - 2014 Total 2014 - 2015)15	Total 1970 - 2015
SURGERY	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Anchorage, AK	14		14	3		3	17
	Bellingham, WA	1		1				1
	Billings, MT	54		54	9		9	63
	Boise, ID	259		259	13		13	272
	Bozeman, MT	1		1	7		7	8
	Buffalo, WY	12		12				12
	Caldwell, ID	13		13	7		7	20
	Casper, WY	52		52	8		8	60
	Coeur d'Alene, ID	8		8	4		4	12
	Fairbanks, AK	124		124	10		10	134

Discipline:	Location:	Tot	al 1970 - 20	14	Tota	I 2014 - 20	15	Total 1970 - 2015
SURGERY (Cont.)	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Fort Harrison, MT	1		1				1
	Gillette, WY	1		1				1
	Jackson, WY	1		1				1
	Juneau, AK	1		1				1
	Kalispell, MT	16		16	8		8	24
	Ketchum, ID	1		1				1
	Kodiak, AK	1		1				1
	Laramie, WY	1		1				1
	Lewistown, MT	3		3				3
	Libby, MT	4		4				4
	Longview, WA	4		4				4
	Madigan, WA	124		124				124
	Missoula, MT	53		53	7		7	60
	Pocatello, ID	1		1				1
	Powell, WY	1		1				1
	Riverton, WY	1		1				1
	Rock Springs, WY							
	Sheridan, WY	12		12	6		6	18
	Spokane, WA	183		183	27		27	210
	Tacoma, WA	58		58	5		5	63
	Twin Falls, ID	1		1				1
	Wenatchee, WA	13		13	8		8	21
	Yakima, WA							
	Subtotal	1019		1019	122	0	122	1141

Discipline:	Location:	Tot	al 1970 - 20	014	Tota	I 2014 - 20)15	Total 1970 - 2015
NEUROLOGY	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Anchorage, AK	48		48	6		6	54
	Bellevue, WA	2		2	2		2	4
	*Billings, MT	83		83	9		9	92
	Boise, ID	81		81	11		11	92
	Casper, WY	12		12	4		4	16
	Coeur d'Alene, ID	37		37	6		6	43
	Great Falls, MT	33		33	5		5	38
	Idaho Falls, ID	44		44	6		6	50
	*Lakewood, WA	2		2				2
	Madigan, WA	14		14				14
	Missoula, MT	51		51	9		9	60
	*Olympia, WA	19		19	3		3	22
	*Spokane, WA	45		45	14		14	59
	*Tacoma/Puyallup WA	38		38	12		12	50
	Wenatchee, WA	16		16				16
	Yakima, WA	8		8	1		1	9
	Subtotal	533		533	88		88	621

Discipline:	Location:	Total 1970 - 2014 Total 2014 - 2015					Total 1970 - 2015	
CHRONIC CARE	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Anchorage, AK	42		42	4		4	46
	Billings, MT	16		16	1		1	17
	Boise, ID	83		83	14		14	97
	Butte, MT					1	1	1
	Chelan, WA		1	1		1	1	2

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	l 2014 - 20	15	Total 1970 - 2015
CHRONIC CARE	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
(Cont.)	Cheyenne, WY			0	3		3	3
	Coeur d'Alene, ID	6		6	3		3	9
	Dillon, MT		1	1		1	1	2
	Douglas, WY		1	1		1	1	2
	Ellensburg, WA		1	1		1	1	2
	Everett, WA	79		79	11		11	90
	Fairbanks, AK	4		4	6		6	10
	Ferndale, WA					1	1	1
	Ft. Washakie, WY		2	2				2
	Grand Coulee, WA		1	1		1	1	2
	Hailey, ID					1	1	1
	Jerome, ID					1	1	1
	Juneau, AK		2	2				2
	Kirkland, WA	42		42	9		9	51
	Kodiak, AK		1	1		1	1	2
	Lander, WY		1	1		1	1	2
	Lewiston, MT		1	1				1
	Libby, MT					1	1	1
	Lynden, WA		1	1		1	1	2
	McCall, ID		1	1				1
	Miles City, MT		1	1		1	1	2
	Missoula, MT	1		1				1
	Moses Lake, WA		1	1		1	1	2
	Nampa, ID		1	1		1	1	2
	Newport, WA		1	1				1
	Olympia, WA				2		2	2
	Port Angeles, WA		1	1		2	2	3

Discipline:	Location:	Total 1970 - 2014			Tota	Total 1970 - 2015		
CHRONIC CARE (Cont.)	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Port Townsend, WA					1	1	1
	Powell, WY		1	1		1	1	2
	Pullman, WA					1	1	1
	Sandpoint, ID					1	1	1
	Shelton, WA		1	1		1	1	2
	Spokane, WA	56		56	16		16	72
	*Tacoma, WA	37		37	3		3	40
	Wasilla, AK					1	1	1
	Subtotal	366	21	387	72	24	96	483

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	I 2014 - 20	15	Total 1970 - 2015
EMERGENCY MEDICINE	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Anchorage, AK	4		4	5		5	9
	Boise, ID	73		73	12		12	85
	Bozeman, MT				1		1	1
	Casper, WY	21		21	4		4	25
	Fairbanks, AK	20		20	3		3	23
	Lander, WY	1		1				1
	Madigan, WA	11		11				11
	Nome, AK							
	Olympia, WA				2		2	2
	Spokane, WA	40		40	20		20	60
	Tacoma, WA	11		11	7		7	18
	Subtotal	181		181	54	0	54	235

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	I 2014 - 20	15	Total 1970 - 2015
*OTHER DISCIPLINES	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
	Anchorage, AK	172		172	38		38	210
	Bellevue, WA	5		5				5
	Bellingham, WA	4		4				4
	Big Sky, MT	2		2	3		3	5
	Billings, MT	74		74	18		18	92
	Boise, ID	254		254	87		87	341
	Bozeman, MT	4		4				4
	Browning, MT	2		2				2
	Buffalo, WY	2		2				2
	Butte, MT							
	Caldwell, ID				2		2	2
	Casper, WY	9		9	4		4	13
	Chelan, WY	1		1				1
	Cheyenne, WY	3		3	6		6	9
	Cle Elum & Ellensburg, WA	1		1				1
	Cody, WY				1		1	1
	Coeur d'Alene, ID	3		3	2		2	5
	Colfax, WA	1		1				1
	Edmonds, WA	1		1				1
	Evanston, WY	2		2				2
	Ferndale, WA							
	Forks, WA				1		1	1
	Gillette, WY				1		1	1
	Grand Coulee, WA	1		1				1
	Great Falls, MT	3		3				3
	Hailey, ID	1		1				1
	Jackson, WY	10		10	5		5	15

Discipline:	Location:	Tot	al 1970 - 20)14	Tota	I 2014 - 20	15	Total 1970 - 2015
*OTHER DISCIPLINES	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
(Cont.)	Kalispell, MT	4		4				4
	Ketchum, ID	3		3				3
	Lakewood, WA				11		11	11
	Leavenworth, WA	4		4				4
	Libby, MT	2		2	1		1	3
	Longview, WA				1		1	1
	Lynden, WA							
	Madigan, WA	8		8				8
	Meridian, ID	3		3	2		2	5
	McCall, ID	13		13				13
	Miles City, MT	1		1				1
	Missoula, MT	121		121	27		27	148
	Montesano, WA				1		1	1
	Nampa, ID	18		18	7		7	25
	Newport	1		1				1
	Nome, AK				2		2	2
	Olympia, WA				2		2	2
	Othello, WA	2		2				2
	Pocatello, ID	5		5				5
	Port Angeles, WA	1		1				1
	Powell, WY	3		3	2		2	5
	Pullman, WA				1		1	1
	Puyallup, WA	1		1	1		1	2
	Renton, WA	7		7	1		1	8
	Rock Springs, WY				1		1	1
	Sandpoint, ID	1		1				1
	Spokane, WA	139		139	89		89	228
	Tacoma/ American Lake, WA	39		39	13		13	52

Discipline:	Location:	Total 1970 - 2014 Total 2014 - 2015				Total 1970 - 2015		
*OTHER DISCIPLINES	CITY AND STATE	Students	WRITE	Total	Students	WRITE	Total	Total
(Cont.)	Thermopolis, WY	1		1				1
	Twin Falls, ID	1		1	3		3	4
	Vancouver, WA	1		1	2		2	3
	Walla Walla, WA	1		1				1
	Wasilla, AK							
	Wenatchee, WA	1		1	3		3	4
	Yakima, WA	10		10	1		1	11
	Subtotal	946		946	339	0	339	1285

*Other Disciplines include:
Anesthesia; ENT; Lab Medicine; NR; Ophthalm; Orthop; Otohn; Pathology; Radiology; Rad. Oncology; Rehab. Medicine, and Urology