DR. JACKIE RUPLINGER has positive memories about family physicians and the care they provided her and her family when she was growing up. These memories impacted her decision to pursue family medicine after graduating from the University of Texas Medical School in 1991. Her experience as a cardiovascular nurse specialist before medical school also influenced her decision to specialize in family medicine.

‘After years of providing intensive, end of life care in the ICU, I was ready for a change,’ Dr. Ruplinger explains. ‘I wanted a job that let me focus on the prevention of disease ... a job that let me care for people before they got seriously ill. Working as a family doc, I decided, would let me provide the kind of care I was so ready to provide.’

Dr. Ruplinger’s plan had been to train at a community-based residency until close friend Dr. Janet Groff, a former MU resident and fellow who now serves as an assistant professor at the University of Texas-Houston, convinced her to check out the University of Missouri.

‘I immediately fell in love with the place. Everything about MUs residency seemed right to me — the partnership, the rural clinics, the large faculty with diverse interests,’ she says. ‘After looking at several other programs, I ranked Missouri #1, confident that it offered the training I needed to be a good family physician.’

The decision to train at Missouri proved to be a good one for Dr. Ruplinger. MU family physicians were incredible teachers and positive role models, she says. And while a resident, she developed strong relationships with them, her patients, and the Columbia community.

Dr. Ruplinger’s decision to join the MU family medicine faculty after residency was a good one too. Today, she serves as an assistant professor with the department and spends most of her time in the clinic caring for a large and diverse patient population. Patients are her priority, and they know it. After eight years in practice, she has earned the reputation of being a good listener and compassionate physician who strives to provide comprehensive and effective health care.

She has a strong interest in women’s health, and unlike many family physicians, Dr. Ruplinger has chosen to make obstetrics an important part of her practice. Her OB schedule is often demanding, leaving her little time away from work, yet Dr. Ruplinger is glad to participate in the childbirth experience.

‘OB has turned out to be one of the most rewarding parts of my job,’ she says. ‘I feel very lucky to be there with mom and baby, sharing the joys of this special event.’

Teaching residents has been equally rewarding for Dr. Ruplinger.

‘Teaching is challenging, and I wasn’t sure I’d like it at first,’ she says. ‘But when I’m with students who want to learn and seem eager to use the skills I’ve taught them, then I know what I’m doing is worthwhile. It’s so exciting to see that I got it! look in their eyes.’

In addition to attending for the residency program, Dr. Ruplinger has developed a colposcopy elective for residents who want advanced training in this procedure. She also coordinates the bimonthly women’s health seminar for residents.

Dr. Ruplinger cares about family practice residents. An excellent mentor, she instills confidence in them and nurtures their personal and professional growth. Residents realize and appreciate how committed she is to helping them succeed and recently voted her Family Medicine Teacher of the Year.

‘While Dr. Ruplinger is grateful to have her efforts and hard work acknowledged, she doesn’t need an award to feel good about what she does.

‘When I graduated from med school, I wanted a job that would let me make a difference,’ she says. ‘Being a family medicine physician and faculty member gives me plenty of opportunities to do just that.’

To learn more about Dr. Ruplinger’s clinical/teaching experiences, please e-mail her at ruplingerj@health.missouri.edu
People who are making a difference

We are proud to feature several of them in this newsletter, beginning with our cover story about Jackie Ruplinger. Jackie wanted a career that would let her improve life for others, so she chose family medicine. After 10 years in our department, she’s sure she made the right decision. Her patients and students agree.

Coleen Kivlahan is a gifted faculty physician whose insight, compassion, and skills benefit students and patients. We congratulate Coleen for her distinguished career and for winning the AAMC Humanism in Medicine Award.

As a dedicated and experienced clinician, Mike LeFevre knows that electronic records will positively impact patient care. We applaud him for leading MU Health Care in its efforts to go paperless.

When former resident Jim Elam set up practice in Houston three years ago, he fulfilled the mission of our residency by improving health care in rural Missouri. His full range family practice is making life better for everyone in his community.

During college, intern Cari Worley committed herself to helping students deal with unplanned pregnancies. This was a rewarding experience for her, and as a family doctor, Cari plans to offer this same kind of support to patients who need it.

More couples are having difficulty getting pregnant, and Shanna Swan wants to know why. Her research is focused on finding information that will help those who struggle with fertility problems.

We were excited when Brian Mahaffey, one of our first sports medicine fellows, was recruited to be the team physician at SMSU. Brian is an excellent physician and teacher whose work positively reflects our program and the training we provide.

Family medicine attracts a group of people whose concern for the health and well-being of others truly makes a difference. It is a pleasure to know and work with so many of you.

HAL WILLIAMSON
Professor and Chair

FAMILY MEDICINE CHAIR HAL WILLIAMSON was appointed by Dean William Crist to serve as vice-chair of the School of Medicine’s Mission-Based Management Steering Committee. Mission-based management, a new tool being employed by medical schools across the country, is designed to help administrators better support and finance teaching, research, and patient care efforts of faculty members.

COLEEN KIVLAHAN was chosen for the 2001 Humanism in Medicine Award from the Association of American Medical Colleges. This award honors a faculty physician who is a mentor for students as well as a practitioner of patient-centered care.

University of Missouri medical students nominated Dr. Kivlahan, praising her for the compassion, insight, enthusiasm, and skills she displays in both roles.

Dr. Kivlahan completed her residency and fellowship at MU in 1983 and since then she has worked in Washington DC, as chief medical officer of the Health Resources and Services Administration, and she has served as director of the Missouri Department of Health.

Today, in addition to her role as professor of family medicine, Dr. Kivlahan serves as associate dean in the School of Medicine and director of health improvement for University of Missouri Health Care. She is also a clinician and founder of the Family Health Center, a clinic established to expand primary care services to uninsured and underinsured patients in the Columbia area.

“We are pleased – but not at all surprised – that Coleen was named humanitarian of the year,” says Family and Community Medicine Department Chair Hal Williamson. “Her strong work and dedicated efforts have long been recognized and valued, not just here at the University and in our state – but across the nation as well.”

The Department of Family and Community Medicine welcomes four new faculty members (left to right): Dawn Steckel, PharmD; Jessica Bailey, PhD; Shamita Misra, MD; and Zorina Piña-Hauan, RN-C, MSN, FNP.

DAWN STECKEL, PharmD, clinical assistant professor, accepted a new position with the department nearly six months ago. Dr. Steckel, a registered pharmacist who completed her residency at St. Louis College of Pharmacy, is advising family medicine patients, residents, and faculty about drug-related issues and concerns.

JESSICA BAILEY, PhD, medical educator, is working with Family Medicine Professor Michael Hosokawa to coordinate the master educator track of the department’s Academic Family Medicine Fellowship Program. Dr. Bailey recently earned a doctoral degree in higher and continuing education from MU.

SHAMITA MISRA, MD, clinical instructor, has joined the medical staff at Green Meadows Family Practice Center and is seeing patients and training residents at the Columbia clinic. Dr. Misra, who just completed her residency at MU, has a strong interest in women’s health care.

ZORINA PIÑA-HAUAN, RN-C, MSN, FNP, is a nurse practitioner at Callaway Physicians, the family practice clinic in Fulton. Her responsibilities include caring for nursing home patients and for students who attend Westminster College in Fulton. Zorina previously served as a family nurse practitioner in New York.

http://www.fcm.missouri.edu
When medical records are converted from paper to a new, totally electronic system, everyone who is part of MU Health Care will benefit. Especially patients. Vice Chancellor of Health Affairs Daniel Winship is committed to making this change happen and chose Family Medicine Professor Dr. Michael LeFevre, a highly respected clinician, administrator, and advocate for MU’s health care system, to oversee the process.

Dr. LeFevre’s ties to MU are strong and began 30 years ago when he came to Columbia as an undergraduate. After completing medical school, residency, and fellowship training in 1984, he accepted a faculty position in the department of family medicine.

Today, he is a professor and he is the director of family practice clinics. He also holds various administrative roles in MU’s health care system. Oversee the process.

Dr. LeFevre’s ties to MU are strong and began 30 years ago when he came to Columbia as an undergraduate. After completing medical school, residency, and fellowship training in 1984, he accepted a faculty position in the department of family medicine.

Today, he is a professor and he is the director of family practice clinics. He also holds various administrative roles in MU’s health care system. However, if you ask him what he does, Dr. LeFevre answers, ‘I am a physician. Patient care has always been, and will always be, the central part of my professional career.’

Confident that computerized records will improve patient care, Dr. LeFevre was glad to accept the leadership role of this incredibly complicated project.

As chair of the Electronic Medical Records Committee, he leads a group of top-level hospital and clinic administrators whose primary responsibility is project oversight. They began meeting last summer to decide policies, address concerns, and negotiate with Cerner, the Kansas City-based corporation hired to create the software for the electronic system. Developing a plan that will put the new system in operation is the job of the project management team. Dr. LeFevre selected this group and the subcommittees whose assignments focus on other key parts of the project.

If things proceed according to schedule, the inpatient side of University Hospital will be paperless — including physician order entry — within 12 to 18 months, and some time after that, the other University hospitals and all of its clinics will be included in the network. Ultimately there will be one record per patient that includes medical information collected throughout the health care system.

Patients will benefit: Providers’ jobs will be easier, and the financial bottom line of the institution will improve — once this new technology is in place.

While Dr. LeFevre is enthusiastic about implementing the system, he is realistic about how difficult the transition period could be. ‘This project isn’t just about buying software; that’s the easy part,’ he cautions. ‘What we’re doing is changing the way we do business, and that will take time, training, and cooperation from many people.’

An organizational change of this magnitude requires patience and the leadership of someone known and trusted throughout the system. Dr. LeFevre’s long presence in the institution and the relationships he has developed qualify him for this tough assignment. ‘This project is important to me,’ he says. ‘I’d like to see our health care system lead the way in using information technology, and succeeding in this project will put MU way ahead of the pack.’
JACK M. COLWILL ACADEMIC ENDOWMENT
Supporting Continued Excellence and Innovation in Family Medicine Education

Nearly two years ago, we created the Jack M. Colwill Academic Endowment to help sustain the growth of family medicine education at MU. Since that time we have maintained regular communications with our friends and supporters in order to share information about this new endowment and how well the campaign to build it is going.

As we near the end of the second year of our fundraising campaign, we’re happy to report that our family of donors continues to grow. In fact, pledges to the Colwill Endowment now total more than $700,000.

Our goal is to raise $1.1 million, enough to establish an endowed chair for our department, and we feel confident we will reach this goal. Colwill donors can be sure their gifts will be used to expand and enrich the exemplary programs that have become such an integral part of what we do.

We are honored to be considered one of the top family medicine departments in the country and realize that our commitment to excellence and innovation in family medicine education must be strong and constant if we want to maintain this distinguished leadership role. We look to the Colwill Endowment to fuel this commitment and become an essential funding source for our future academic endeavors.

We hope you will give serious consideration to supporting the continued excellence and success of family medicine at MU. Your donation is important to us and will be greatly appreciated.

For information about the Jack M. Colwill Academic Endowment, please contact:
Dr. Steve Zweig, at 573/882-4991 or zweigs@missouri.edu, or Kathy Boeckmann, at 573/884-7916 or boeckmannk@health.missouri.edu.

SMALL TOWN FAMILY DOCTOR
Dr. Jim Elam has only good things to say about his practice, his patients, and his partners in rural Missouri.

JIM ELAM recog- nized the need for ‘decent family docs’ in rural Missouri, so when he completed his residency in 1998, he responded to that need and moved to Houston, MO.

‘Houston never really had a doc to call its own until I came,’ he says. ‘I must have come at the right time because things have gone really well for me.’

In the past four years, Dr. Elam has gone from seeing 50 to 450 patients a month. He provides the full scope of family health care. His oldest patient is 99 and his youngest are the babies he delivers. And he delivers between three and ten babies a month. A physicians assistant and nurse practitioner work with him at his clinic, and he has two partners who take call for him in Mountain Grove, a small town 30 miles south of Houston.

Small town practice is a ‘perfect fit’ for him, and Dr. Elam is glad to explain why. ‘Just think about what I get to do. I take care of families, birth to death; plus I interact with these same people outside clinic. They become like family to me. And seeing them in the context of their lives and in their community helps me be a more effective doctor.’

‘Things are improving all the time, though. Now I can uplink to Wash U to do teleconferencing, and I can earn CME over the Internet.’

Teaching is another way he keeps current. Dr. Elam is a preceptor for MUs family practice clerkship and very generous about sharing his time, knowledge, and skills with medical students. He also trains MU residents.

Third year resident Jennifer Buescher trained with Dr. Elam for a month last year and benefitted from the experience. ‘Dr. Elam is a great teacher and role model, especially for physicians who want to live and practice in a small town, provide a full range of health care services, and maintain a good balance between work and family,’ she says.

Dr. Elam credits MU for providing the training and tools to be a strong teacher and physician. When he finished his residency, he felt confident about his ability to be a good, small town family doctor in every way — except one. He was not prepared to do his own c-sections, and that concerned him.

‘I live in a town of 2,200 people. Our county is the largest county in the state — geographically, but we don’t have enough people to pay an OB to start a practice here. And there are other areas in the state like ours,’ he explains. ‘Residency trained me to do low-risk, non-operative obstetrics, but people in small towns need more than that.’

Firmly committed to offer patients a scope of practice that included full service obstetrics, Dr. Elam has succeeded in getting the training and experience needed to perform his own c-sections. Being certified in this procedure, he says, makes him more responsive to the needs of his community.

http://www.fcm.missouri.edu
Family Practice Resident Understands That Some Patients Need More Than Medical Care To Make Them Feel Better

PREGNANCY is a major event in a woman's life. If the pregnancy is unplanned, however, it can be a frightening and stressful situation. First year resident Cari Worley understands this because it happened to her mother.

Years ago, Cari's mother got pregnant while attending college. And even though her parents were supportive, they offered her few options about how to deal with this unexpected event. She withdrew from school for a semester, moved out of town, had her baby, and then gave it up for adoption. It was a lonely and difficult year for her.

Motivated by her mom's experience, Cari decided to do something for college students who had to deal with unplanned pregnancies. During her first semester at the University of Colorado-Boulder (CU), she volunteered at a nearby crisis pregnancy center. After realizing what a valuable resource it was, Cari initiated efforts to open a similar facility on campus.

Gaining university approval and support was the first step in her efforts; then she had to recruit student volunteers to staff the office. She also had to find a qualified licensed therapist to serve as director. This project was huge, but Cari succeeded, and by the end of her freshman year, a crisis pregnancy center was up and running in the CU student union.

Medical care was not available at the center, however; many other services were: pregnancy tests, counseling, adoption information, babysitting service, abortion counseling, mentoring moms, parenting advice, and job-finding assistance.

‘When a woman gets pregnant unexpectedly, she faces potentially life-changing decisions, and these decisions can be tougher to make if she is young and unmarried. One of the primary functions of the center was to inform students that there were options that could work for pregnant single students,’ explains Cari. ‘We realized that the decision about whether to keep the baby was theirs. Our job was to provide help and support so they could stay in school and feel good about themselves, no matter what decision they made.’

While managing activities at the CU pregnancy center for three years was an intense and time-consuming project for Cari, her commitment to the place never weakened. She is proud of the center and confident that it positively impacted many lives. Her experience there and the rewards she felt from helping others strongly influenced her decision to become a doctor and specialize in family medicine.

In family medicine, she thought, she could do the things she enjoyed and truly valued. Like OB. And taking care of the babies she delivered, too.

Certain that MU's program provided learning experiences that would help her become a competent and compassionate physician, Cari choose to train at Missouri. After six months of residency, Cari feels good about this decision and looks forward to being a family doctor. ‘People who go to the doctor often need more than medical care to make them feel better,’ she says. ‘As a family physician, I can focus on the total person, and I can offer patients other kinds of care and support if they need it.’

CARI WORLEY, MD
FIRST YEAR FAMILY PRACTICE RESIDENT

http://www.fcm.missouri.edu

OUR WEB SITE HAS A NEW LOOK AND MORE INFORMATION!

We invite you to check it out and learn more about MU family medicine department news, faculty, residency training, fellowship opportunities, patient care, clinics, and research.

Your suggestions on how we might better serve our online audience are welcome and will be appreciated. Please e-mail your comments to fcm@fcm.missouri.edu.
RECENT STUDIES suggest that an increasing number of couples are having difficulty getting pregnant, and Family Medicine Research Professor Shanna Swan is asking why. As an epidemiologist, Dr. Swan wants to determine whether environmental factors can be linked to fertility problems, so she initiated the Study for Future Families (SFF). SFF is a multimillion dollar, multi-phase project that’s all about the reproductive health of families across the United States. An already energetic and highly motivated researcher, Dr. Swan grows even more enthused when she talks about this project.

SFF Phase I, a four-year study that began in 1998 with funding from the National Institutes of Health (NIH), focuses on the man and examines the male reproductive function, including semen quality and women’s time to pregnancy. Pregnant women and their partners were recruited from clinical sites in four geographic areas: Los Angeles, Minneapolis, New York City, and Columbia, to participate in this project. By the end of 2001, 700 couples had participated in SFF Phase I, and researchers are now analyzing the data.

Dr. Swan’s interest in developing the second phase of SFF was triggered by recent animal studies conducted by the Center for Disease Control (CDC). The CDC found that the presence of phthalates in mothers can affect offspring. Phthalates are used in many lotions and cosmetics, and exposure to these chemicals is high for women, especially during reproductive years. This prompted Dr. Swan to ask: Does the presence of phthalates in moms pose any risks to babies? She’ll look for answers in SFF Phase II, a four-year study funded by the Environmental Protection Agency that includes moms who participated in Phase I and their babies.

Then, if she receives NIH approval, she will begin SFF Phase III. Phase III continues the research started in Phase I, except this study will also measure pesticide levels in pregnant couples. A new center will be opened in Iowa City to replace the New York City clinic. Iowa City, like Columbia, is a relatively rural area, and this will allow Dr. Swan’s research team to compare samples collected from rural populations to samples from urban populations.

All data and samples collected from Dr. Swan’s research are being saved for future use, which makes the Study for Future Families even more worthwhile.

‘What we’re doing is building a study of families – pregnant women, partners, and children – and an archive of blood, urine, breast milk, and seminal samples that will be a valuable resource for years to come,’ she says with pride.

But for now, Dr. Swan is focused on the present, which includes her ongoing research as well as leadership roles in two major University of Missouri initiatives. School of Medicine Dean William Crist recently appointed Dr. Swan to serve as Associate Director of Population Science for the new Comprehensive Cancer Center. In addition, Vice Chancellor of Health Affairs Daniel Winship has asked her to co-chair a task force to develop a biostatistics-epidemiology program on the MU campus.

Dr. Swan is a nationally recognized biostatistician and epidemiologist. She has a strong work ethic and the reputation of a person who can make things happen. For these reasons, she was the ideal candidate for both appointments.

And while she is proud to contribute her time and expertise to these new and important University programs, Dr. Swan makes it clear that her research is where she ‘lives and breathes.’

‘SFF is a study that I hope will benefit all future families,’ she says. ‘It’s my legacy; it’s what I want to leave for future scientists and their research.”
Family Medicine Professor and Associate Chair Steve Zweig, MD, MSPH, and Family Medicine Professor and Assistant Dean for MU’s Medical School Michael Hosokawa, EdD, have been appointed co-directors of the department’s Academic Family Medicine Fellowship Program. Created in 1978, this fellowship program has trained more than 50 physicians and researchers who continue MU’s tradition of innovation as they build the specialty of family medicine across the nation.

Family medicine fellowship tracks include geriatrics, research, sports medicine, and the new master educator fellowship, which is designed to prepare physicians for careers as faculty members in academic medical centers.

There are currently seven family physicians enrolled in the MU Academic Family Medicine Fellowship Program.

<table>
<thead>
<tr>
<th>FELLOW</th>
<th>FAMILY PRACTICE RESIDENCY TRAINING</th>
<th>FELLOWSHIP TRACK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clint Koenig, MD</td>
<td>University of Missouri Health Care</td>
<td>Research</td>
</tr>
<tr>
<td>Ali Mansour, MD</td>
<td>St. Vincent’s Catholic Medical Center, New York</td>
<td>Geriatrics</td>
</tr>
<tr>
<td>Scott Shannon, MD</td>
<td>University of Missouri Health Care</td>
<td>Research</td>
</tr>
<tr>
<td>Paul Tatum III, MD</td>
<td>University of Missouri Health Care</td>
<td>Geriatrics</td>
</tr>
<tr>
<td>Christy Tharenos, MD</td>
<td>University of Missouri Health Care</td>
<td>Sports Medicine</td>
</tr>
<tr>
<td>Dane Treat, MD</td>
<td>Good Samaritan Regional Medical Center, Arizona</td>
<td>Sports Medicine</td>
</tr>
<tr>
<td>David White, MD</td>
<td>University of Missouri Health Care</td>
<td>Research</td>
</tr>
</tbody>
</table>

Learn more about our fellowship program by logging onto our web site at: http://www.fcm.missouri.edu

---

**BRIAN MAHAFFEY** pursued a career in sports medicine, thinking it would be a niche he could enjoy, and he was right. After three years in practice, things are great, he says, and much better than he ever imagined.

A 1993 MU medical school graduate, Dr. Mahaffey also completed his family practice residency and sports medicine fellowship at MU. Then, in 1998, he moved to Springfield when Southwest Missouri State University (SMSU) decided to hire its first team physician and recruited him for the job. Viewing this opportunity as a vote of confidence in his skills as a doctor, as well as a recognition of the growing importance of sports medicine, Dr. Mahaffey was proud to accept this job.

He has since earned other responsibilities with SMSU, including teaching students enrolled in the athlete training program. He also teaches in the physicians assistant program.

And when Dr. Mahaffey is not with students at SMSU, he’s seeing patients at St. John’s Clinic, a multi-specialty group practice in Springfield. Much of his time there is devoted to sports medicine, but not all of the care he provides is related to injuries.

“Sports medicine isn’t just about treating injuries. There is a lot to this specialty that relates to primary care,” he explains. “Patients come to me with sprains, tendinitis, fractures, and arthritis. As a family physician, I’ve been trained to address primary care needs and deal with sports medicine issues.”

Balancing the demands of his various responsibilities can be challenging, but Dr. Mahaffey chooses to focus on the rewards of his busy career. ‘The majority of my patients are relatively healthy people who care about feeling good,’ he says. ‘Taking care of people who are competitive, health conscious, and want to get better is fun for me.’

Regardless of whether he’s with students at SMSU or patients in his clinic, his goal is constant - to develop a strong medical care program aimed at keeping them active, happy, and healthy.

But keeping people active doesn’t come without risks. Sports-related injuries have been increasing, and this concerns Dr. Mahaffey, especially when young people are involved. ‘Competitive level leagues have expanded, allowing children at younger ages to participate in more intense play,’ he says. ‘And injuries that children sustain are potentially more dangerous. Plus, starting serious play at younger ages can lead to burnout by high school.’

An athlete himself all during school, Dr. Mahaffey knows about sports and competition; he also knows that you don’t have to be a competitive athlete to lead a healthy life. ‘Maintaining a safe and regular exercise routine can positively impact a person’s health,’ he says. ‘So I encourage all of my patients to find some way to stay active.’

---

http://www.fcm.missouri.edu