Rural Nun Physician, UA Archivist, and Medical Inventor Speak During Health Heritage Week in April

by Camille Elebash

At nearly forty years of age, Roseanne Cook, a nun of the Sisters of St. Joseph, decided to enter medical school. Today at 54 she is one of only four doctors in Wilcox County and the only physician at the Grace Busse Health Clinic in Pine Apple, Alabama. Dr. Cook will be honored by CCHS during Health Heritage Week April 12-16. She will also speak on Thursday, April 15, at the noon conference in the Willard Auditorium in the University of Alabama Educational Tower at DCH Regional Medical Center. Her topic: "Meeting Third World Health Needs in Alabama."

Her talk will introduce to her audience the art and the practice of medicine in the "third world" of Wilcox County. Located 125 miles south of Birmingham, it is light years away in terms of health care.

The Grace Busse clinic serves 2500 people, 85% of them below poverty level. Dr. Cook feels outrage when she sees how inexcusable decent health care is. She specializes in family medicine, the kind of practice that experts say must be emphasized to provide cost-effective health care in the future. Dr. Cook says her biggest frustration is knowing that if many of her patients could get the help they needed, they could live a good functional life. "Injured knees, injured backs, cancer...if they could only get the proper treatment in time."

She believes that medical students "need to be exposed to an area like this and see how grateful people are." She points out that many doctors feel burn-out because of the rat race. "They feel their patients are almost their adversaries. They worry about lawsuits. They practice defensive medicine."

"In my practice I have 100% job satisfaction. Every day is different. You know that you've made a difference. You get a lot of appreciation - vegetables from the garden, fish that have just been caught."

Her days begin early and end late. In between she sees 30 to 55 patients in the clinic, many of them walk-ins, and she always finds time to make house calls, driving miles over dirt roads to see mostly the elderly. Most homes lack telephones, and some are without water and indoor plumbing.

Much of the clinic's equipment was provided by Selma's Good Samaritan Hospital when it closed. Pharmaceutical companies donate sample non-narcotic drugs which the clinic gives away but patients must drive 25 miles to fill a prescription.

Dr. Cook replaced a doctor who had defected on his National Health Service Corps obligation. Sister Jane Kelly, a nurse practitioner at the clinic, knew of Dr. Cook and her plans to go to South America and telephoned her incessantly during her residency, pointing out the urgent need for a doctor in "third world" Wilcox County. She responded and has never regretted her decision. When she first went to the clinic, patients asked how long she planned to stay. She answered, "I don't owe the government anything. I came because of need and plan to stay for the same reason."

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Dr. Cook originally from Westchester County, New York, she spent a year and half at St. Louis University, after which she became a nun in the Sisters of St. Joseph. She then taught biology, math and religion as a Catholic high school student. Fontbonne College in St. Louis for more undergraduate courses, then earned a PhD in physiology at Washington University. As the suggestion of her fellow Sisters of St. Joseph she went to medical school at the University of Missouri.

Other speakers during Health Heritage Week are Dr. Jerry Oldshue, University of Alabama Archivist, who will talk about "Health Pioneers" on Wednesday, April 14, and Dr. Robert Hingson, a retired physician and UA alumus, who invented the jet inoculation gun and developed the caudle anesthesia process for childbirth. His topic will be "Eradicating Epidemics: Finishing the work of Dr. Gorgas."

Jerry Oldshue, PhD, University historian, will discuss health pioneers.

Dean Roland Ficken and Dr. Robert Hingson with the jet inoculation gun he invented which helped wipe out smallpox.

A Commemorative Exhibit: "The Medical Heritage of the University of Alabama, West Alabama, and Tuscaloosa" will be open to the public 10-4 on Friday and Saturday, April 16-17, at the Bryce House on Bryce Hospital Lawn.

Note: Camille Elebash is professor emeritus of Advertising and Public Relations. She retired from UA faculty position in 1999 and now serves on the Captain Health Services Foundation Board and CCHS Capital Campaign Steering Committee.

On Rounds
The University of Alabama College of Community Health Sciences

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Rising Costs Make Health Reform Imperative

Universal Health Care Plan, Managed Care, or Managed Competition?

by Wilmer Coggins, M. D.

The health care crisis in the United States: 34 million uninsured citizens, half of whom are children, the plights of those who lose their insurance, then lose their homes to pay for the next illness; the rising number of small businesses that drop their coverage for employees as profits are diminished; the inability of individuals to buy insurance if they have a pre-existing illness...

Not all of the problems contributing to the health care crisis have to do with money, but most do. Let us get bored by repetition of alarming numbers I will mention only a few. Costs in 1991 exceeded $838 billion according to the Commerce Department, but it is the rate of increase which is more alarming than the large total.

The total spending per person has grown 48 percent in nine years. The health care sector consumes 13 percent of the gross national product, and is headed toward 25 percent by the end of this century.

Since the money tree grows at the rate of only 2 to 3 percent per year, this means less money for all other parts of the economy.

Translated to the costs per family, these numbers mean that the average annual premium for a family health insurance policy will be $7,500 in 1993. If the expenditure curve doesn't flatten the figure will be $30,000 in 2000.

If a majority of voters were paying the relatively modest $605 per month per family coverage this year, the demand for constraints would be overwhelming, but the vast majority of us have health insurance paid in large part by the employer or by various combinations of federal, state and local government programs.

The three elements of government pay over 40 percent of all health care costs, and that excludes Medicare for those in military service and the Veterans Administration hospital system.

So why, with so many reasons to worry about socialized medicine, are we so seriously contaminated already? In a national survey to assess the sentiments of Americans about universal coverage for all citizens, 75 percent favored such a program. When asked how much additional money they would be willing to pay for universal coverage for all, the answer was $50 per year. The number willing to pay more dropped off rapidly as the dollar value approached more realistic numbers.

President Clinton has emphasized the urgent need to control health care expenditures. He believes these expenditures are so large that they alone impair the country's ability to combat the recession, to create new jobs in other sectors of the economy, and to control and begin to reduce the federal deficit.

There are many proposals for health care reform, but there are two general approaches. Some health care economists believe the current melange is too complex to deal with in a systematic and equitable way that leaves the major vested interests room for innovation and gradual change. They would opt for a rapid change to a universal system with budgets set for each element and any increases keyed to the gross national product.

Uwe Reinhardt, a political economist at Princeton University, is an eloquent advocate of this approach. He thinks that savings in administrative costs would be sufficient to provide a basic health insurance policy for the 35 million uninsured.

In its simplest version this approach could be an expansion of Medicare which would insure everybody. Because of the powerful vested interests involved this is unlikely to prevail, even though Medicare is demonstrably more efficient, by three to ten percent per dollar invested.

These vested interests, in decreasing order of their dollar shares, are hospitals, doctors, pharmaceutical industry, nursing homes, private insurance, dentists, and other professional care providers (psychologists, physical therapy, etc.) After these categories the aggregate costs drop sharply.

A more popular, and more acceptable proposal is called managed care and managed competition. An impressive array of large corporations, labor unions, special interest groups such as the American Association of Retired People and the American College of Physicians make up the National Leadership Coalition for Health Care Reform which promotes this plan.

Managed care began in the 1940s under the general name of health maintenance organizations, or HMOs. They grew slowly until the 1980s, then spread rapidly in size and number because they provide an employer buying health insurance for employees with a set dollar figure for the term of the contract.

HMOs typically provide a broader array of services than traditional policies, but they limit the patients' choice of physicians for both primary care and specialists. Although HMOs do not always cost less, their success in slowing the rate of increase in health care costs has led industry to turn to them.

Currently, over 50 percent of employers offer more realistic numbers, but this would not be apparent in West Alabama. HMOs have flourished on the West Coast in the Northeast and in the upper Midwest, areas where the densest population. Scattered populations and small businesses are not attractive to HMOs because economies of scale are still absent.

The other major element in the proposed new model is managed competition. This is a typically American reaction in that it is something that might happen to someone else, and it has to be big to make it work. First proposed by Alain Enthoven, a health care analyst at Stanford University, managed competition would begin by introducing a type of real competition in an organized system it could substantially restrain escalating costs.

The core of the concept is a group of state or chartered non-profit corporations which would collect health insurance premiums from individuals, employers and government agencies and sign contracts with insurance companies willing to meet the corporation specifications for cost and quality concerns. All helpers would keep their basic jobs, but standard contract defined at least statewide if not nationally.

The competitive features of this comes at two interests involved at least as between three such non profit units in each area, competing with each area. HMOs and insurance companies would in turn be competing to contract with the non-profit units.

Although managed competition is a popular concept among thinkers in the field, it has a number of disadvantages. There are no very good models to copy, the concept is not applicable to regions with small populations, and the delay in implementing these models mean further escalation of health care costs unless some other constraints are proposed. It is only the metropolitan areas around Birmingham and Mobile would be populous enough for managed competition to work.

Governor Lawton Chiles of Florida has proposed such a plan for all 13 million Florida residents. Working with mandate from the legislature to have a statewide plan in effect by the end of 1994, the governor is trying to accomplish this in Florida may be present.

Perhaps we can learn from Florida how to implement a statewide plan, but the costs of doing nothing in the meantime will be immense.

Note: Dr. Coggins is Dean Emeritus of the College of Community Health Sciences. This article was originally published in the Tuscaloosa News January, 1993. (Reprinted with permission.)

Tuscaloosa Hosts OSCEs for Third Year Students

Objective Structured Clinical Exams (OSCE) will be given to third-year Medical students from all three University of Alabama School of Medicine (UASOM) campuses at the Coleman Coliseum on May 18 and 19, 1993. There will be two 4-hour sessions each day with 6 "stations" each.

OSCE is a series of 15-minute "stations," each of which is a clinical situation a medical doctor might face. Most of the 16 stations will be patients, some real and some volunteers trained to pose as patients. Observers note how the students work, and faculty observers factually each student analyzes the problem and examiners or advises the patient. Observers are faculty members who give the students feedback immediately, before they move on to the next station.

"We want to give our students the experience of taking an OSCE prior to graduation," said Elizabeth Philp, M.D., "since the National Board of Medical Examiners (NBME) plans to introduce this method of examination as the new Step 3 for medical licensure." The class of 1994 will be the first graduating class to sit for the new Step 3 exam.

Philp, who has directed the OSCE process at the Wake Forest School of Medicine for the past seven years, is organizing the UASOM exam. She moved to Tuscaloosa last fall and is now associate professor of Family Medicine at CCHS.

The exam will not be used for grading purposes this year. Students will be told their results and how they performed in relation to the rest of the class, but the grades will not be counted this year, said Philp. Tuscaloosa third year medical students will test on Wednesday morning, May 19.

CCHS will arrange housing for students and faculty observers from Huntsville for Tuesday night before the Huntsville group tests on Wednesday morning. Birmingham students will rotate through the sessions scheduled for Tuesday morning and afternoon.

For more information, contact Elizabeth Philp, M.D., at 348-2884 at the Capstone Medical Center.
Behavioral and Community Medicine...

- conducting research on heart disease.
- Social Support and Coronary Heart Disease Risk Factors: A Community Study” is funded by the National Heart, Lung, and Blood Institute of NIH and is being carried out by Dr. William Dressler, James Bindon, James Leeper, and Yasmin Neggers. This research will examine how social support affects morbidity and mortality from coronary heart disease. A cross-sectional survey of social stressors, social supports, health behaviors, and arterial blood pressure and serum lipids will be conducted in a black community in the rural South.
- studying Social Environment and Physiologic Adjustment in a Developing Society, a National Science Foundation-funded project. Dr. William Dressler is working with colleagues in Brazil to examine physiologic responses to differences in the social environment. Social, ethnic, and dietary factors will be studied simultaneously in a society (Brazil) which has experienced rapid and profound culture changes in the last 30 years.
- provides assistance through the Health Research Consulting Service. The consulting service is directed by Dr. M. Christine Nagy and encourages and facilitates medical research by CCHS faculty, professional staff, residents, and students. It also promotes interdisciplinary research in the health sciences. Services include consultation and technical services, research promotion, development of research skills, and assistance in locating funding and personnel. Current projects are studying AIDS, diabetes, prematurity, syndrome, gerontology, Alzheimer’s, adolescent health, maternal and child health, and medical education.
- provides technical assistance to the Rural Alabama Health Professional Training Consortium. The consortium, funded by the Bureau of Health Professions and directed by West Alabama Health Services, Inc., has developed an interdisciplinary training program in Ensat for students of medicine, nursing, dentistry, pharmacy, and nutrition. Dr. James Leeper serves on the Board of Directors and assists in program evaluation.
- has Rural Health Initiatives as a broad-based priority of the Department, and all faculty participate in various aspects of these activities. Dr. John Wheat is coordinator. He serves as Medical Director for the Student Coalition for Community Health and Preceptor for Rural Community Health Fairs; consultant to Alabama Office of Rural Health; and consulting Health Services Director for Health Development Corporation.
- operates the Occupational and Preventive Medicine Clinic, a Capstone Medical Center clinic directed by Dr. John Wheat. It serves several Tuscaloosa industries and is involved in residency training. The clinic contracts for services with businesses and factories all over the region. Dr. Wheat has published papers dealing with workplace health promotion related to medical cost containment and evaluation of medical school instruction of health promotion/disease prevention, and gymnastics.
- offers Undergraduate and Graduate Instruction by BCM Departmental faculty including such courses as biostatistics, epidemiology, medical behavioral science, health policy and planning, and independent study in preventive and community medicine. Faculty members also serve on numerous thesis and dissertation committees. They hold appointments in the Departments of Sociology, Anthropology, and Management Science and Statistics, the Program in Applied Statistics, and the Graduate School.
- reports that Asthma and Mortality Studies are research projects for Dr. Susan Austin currently. She and Dr. Elizabeth Cockram are designing data collection instruments to study factors related to successful treatment of pediatric asthma patients.

Pediatrics...

- operates General Pediatric clinics each day of the week, morning and afternoon. Patients can be scheduled for well baby visits, illness visits, annual physicals, or for any general medical problems. Emphasis is placed on disease prevention. Immunizations are provided each day of the week for patients utilizing the latest recommendations of the American Academy of Pediatrics (AAP).
- provides specialty care clinics at the Capstone Pediatric Clinic to meet the needs of our patients and the community including the six-county radius we serve. These visits are scheduled by appointment. Clinics include:
  - Follow-up Clinic for High Risk Nursery. All infants who experience severe respiratory distress, low birth weight, and extreme prematurity are followed in this clinic. Many of these babies have spent the first 2-4 months of their lives in the nursery. Infants are followed by a team. The team is supervised and scheduled by a perinatal project director. Members of the team include a nutritionist, a person who performs developmental assessments, a social worker, an occupational therapist, and speech and hearing personnel. All babies are closely followed.
  - Pediatric Cardiology. Patients with possible cardiac problems within the West Alabama area are treated. Electrocardiography and other state-of-the-art techniques are provided by UAB pediatric cardiologists who see each patient along with medical students and residents. This clinic has served not only as a valuable resource to the community but as a valuable educational tool to our students and residents.
Cindy L. Dedmon, M.D., completed a fellowship in adolescent medicine learning problems. Hyperactivity and hearing disorders Colposcopy is available whenever necessary.

Pamela E. Parker, M.D., Associate Professor and Head Medical Librarian

Lisa R. Russell, M.L.S., Associate Professor and Elizabeth H. Rand, M.D., Chief, Psychiatry

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Cindy L. Dedmon, M.D., Assistant Professor, Obstetrics and Gynecology

Dezir A. Perez, M.D., Assistant Professor, Obstetrics and Gynecology

Pediatrics, continued from page 3

law enforcement agencies when appropriate. Colposcopy is available whenever necessary.

Hyperactivity and hearing disorders Appointments are scheduled with a faculty member in this department as needed for children who are experiencing school/learning problems.

Pediatric Adolescent Clinic One of the pediatric faculty members who has completed a fellowship in adolescent medicine regularly sees adolescents both for general health follow-up or specific problems.

- staffs the Pediatric In-patient Service at DCH Regional Medical Center. Infants will be cared for in the new 48-bassinet newborn nursery (early bonding, rooming in, and breast feeding are encouraged) or in the modern high risk nursery, a recently renovated 26-bed nursery where 1:1 nursing and life-saving equipment can be provided to these babies. Two board certified neonatologists with faculty appointments in the school of medicine supervise all care.

- provides a pediatric rotation for Family Medicine Residents. They rotate on the pediatric service for five months during their three-year residency. In their third year they spend one month as the Senior Resident whose responsibility includes overseeing the pediatric inpatient service.

Medical Students matriculate through pediatrics for a ten-week clerkship. During this time they spend five weeks on the ward, three weeks in the clinic, and two weeks in the High Risk Nursery. Students are required to take the National Mini-Board examination at the end of their tenth-week rotation.

- reports that Deborah Poteet-Johnson, M.D., recently completed a research project on the effects of pubertal factors on pressure sensitivity thresholds in young diabetics. Dr. Poteet-Johnson left CCHS in January to enter private practice with Tuscaloosa Pediatrics in Northport. She completed one survey regarding AIDS in Daycare Centers, and is working with Drs. Chris Nagy and Peggy Jessee on at least two manuscripts regarding this data. They also plan to survey Pediatric and Family Medicine residents regarding their knowledge, attitudes, and health-related practices with AIDS patients. Poteet-Johnson is also working with a group that includes Dr. Jim Loeper to study racial comparisons of suicidal behavior.

- announces that Michael A. Taylor, M.D., published a guest article for the Children’s Trust Fund April Newsletter, “Child Abuse in the 90’s: Why Be Concerned?”

- is involved in asthma research. Elizabeth Cockrum, M.D., is involved in research looking at Management of Children with Asthma as influenced by regional variability and physical specialty training.

Psychiatry...

- is completing a research project on “predictors of psychiatric diagnosis in primary care.” This project is funded by the National Institutes of Mental Health (NIMH). Researchers are Dr. Lee Badger, Principal Investigator, Dr. Elizabeth Rand, and Julia Hartman, M.A., Research Associate (and faculty from the Department of Behavioral and Community Medicine and Family Medicine).

- is initiating another depression study. Drs. Rand and Badger, with Robert J. Teare, Ph.D., Professor of Social Work, are developing a project on the effectiveness of social work intervention on the detection and treatment of primary care depressed patients.

- reports that “Music and Psychiatry” and “The Effectiveness of Utilizing Standardized Patients in a Primary Care Psychiatry Experience” are current research projects of Pam Parker, M.D.

- announces several studies by Nancy Rubin, Psy.D. “Sexual Misconduct in Therapy” is a study being conducted by Nancy Rubin, with Beverly Thorn, Ph.D., Associate Professor, Department of Psychology at the University of Alabama. Dr. Rubin is also working on a continuing study of “Depression and Asthma” and “Lifespan Development of the Single Woman.”

Health Sciences Library...

- provides online literature searches of the National Library of Medicine databases, including Medline, for a fee (online connect charges plus $5.00 service charge). For more information on Medline searches or to request a search, call the library’s Reference Office at (205) 348-1364.

- has available five years of Medline on CD-ROM for users to do their own literature searching. The Reference Librarian or a reference assistant is available during the day to help.

- can advise on the use of Grateful Med to do literature searches from office or home. Grateful Med is a user-friendly software program developed by the National Library of Medicine to search Medline.

- photocopies (within the copyright guidelines) at the cost of $1.15 per page.

- will fax copies of Medline searches or photocopied articles to your office. The cost of this service is $5.05 per page.

- obtains photocopies of articles and books from other libraries. Interlibrary loan charges are $5.00 per item.

- has an online card catalog and circulation system called Amada. Amada also provides access to the other University Libraries (Main, Business, Education, Science and Engineering).

- checks out books for a 30-day period to CCHS faculty, residents, medical students, UA faculty, staff and students; and other health professionals.

Obstetrics and Gynecology...

- has been expanding the use of computers in medical education. Students are learning through this interactive method and continuing to obtain higher than average board scores. The students also do mini research projects in selected topics in ob/gyn.

- is responding to residents who continue to demonstrate high interest in obstetrics. The staff welcomes and encourages residents to do extra ob. At present, we have two residents with junior attending privileges and several interested in obtaining these privileges.

- reports that Hassam Hamadeh, M.D., family practice attending, has just completed a 6-month fellowship in ob. He is returning to his
OB/GYN, continued from page 4

homeland of Lebanon.

• will soon send Blane Shilling, M.D., from his
  ob fellowship to a promising practice together
  with David Tutun, M.D., in Pickens County.
  • recognizes that Talladega County is also
    benefiting from the skills brought by gradu­
    ates of our fellowship. Coosa Valley Medical
    Center in Sylacauga is hearing the cries of
    healthy newborns once again thanks to the
    highly successful efforts of Dr. Phil Smith.
    • announces that Kelvin Sherman, currently a
      junior attending for ob, will enter an ob
      fellowship position in July.
    • has contributed to area health care by
      working with the community on contraceptive
      information. Michael Watkins, M.D., has criss­
      crossed the state teaching physicians how to
      insert the Norplant contraceptive capsules.
    • can advise other health care centers in
      DepoProvera use. The FDA has given the
      green light for the use of DepoProvera as a
      contraceptive method. The U of A has been an
      area pioneer in the contraceptive method.
    • reports that University physicians have been
      assisting the Maude Whatley Health Center in
      providing prenatal and some gyn care to
      patients at that center.
    • conducts a busy schedule of patient care at
      the Capstone Medical Center. Our services
      range from Norplant insertions to office Laser
      and Leep procedures. In the 91-92 year there
      were 7,126 outpatient visits and 868 babies
      delivered by our service.

Internal Medicine

• is conducting research to profile Diabetic
  Patients in a Model Residency Training
  Program. Keith Debell, M.D., Robert Pieron,
  M.D., Cathy Gresham, M.D., and Chris Nagy,
  Ph.D., are involved.
  • reports that Dr. Debell is also initiating
    research for comparison of Objective Struc­
    tured Clinical Exam (OSCE) performance of
    third year medical students at a clinical
    campus implementing problem-based learning
    (PBL) with controls from a traditional clinical
    campus. He is working with Elizabeth Philp,
    M.D., Cathy Gresham, M.D., Debbee Sidrys,
    M.D., and Chris Nagy, Ph.D.
  • is comparing anxiety and satisfaction scales
    over time during the four-year medical school
    curriculum. The research is being conducted by
    Drs. Debell, Gresham, Sidrys, Philip, and
    Nagy.
  • is surveying primary care residents as part of
    an HIV research project. The research by Drs.
    Gresham, Deborah Poteet-Johnson, Chris
    Nagy, and Peggy Jesse, is currently in
    progress.
  • reports that Dr. Gresham, who is active on
    the Medical Student Education Program
    Committee, University of Alabama Tuscaloosa
    Program, is working on Problem-based
    Learning and OSCE Workshops with Drs.
    James and Elizabeth Philip. She has assisted with
    Objective Structured Clinical Exams (OSCE) in planning and implementation of

stations. She is also compiling information about our medical school and the problem­
based learning in the CCHS Department of Internal Medicine to be considered for
presentation at the Association of American Medical Colleges annual meeting in Wash­
ington, DC, in November 1993.

Surgery...

• is staffed by faculty who are all part-time
  because they are practicing physicians of
  Tuscaloosa in general surgery; thoracic surgery;
  ear, nose, and throat surgery; neurosurgery; orthopedic surgery; ophthal­
  mology; urology; and anesthesiology. Even
  the Discipline Chief, Arthur F. Snyder, M.D., is
  part-time. There are 57 "part-time" and
  "volunteer" faculty members that participate
  in our teaching program. Our only "full-time"
  staff member is Administrative Specialist,
  Nikki Moore, who coordinates our rotation
  schedules, conferences, and other departmen­
al matters.
  • teaches the Family Practice Residents during
    the entirety of their three-year program as well
    as teaching medical students during their
    third and fourth year. The program for
    residents and medical students helps them
    become acquainted with a broad field of
    general surgery and specifically with pre­
    operative patient evaluation and post-operative
    care.
  • provides training to residents and medical
    students on the surgery service at three of our
    facilities here in Tuscaloosa: DCH Regional
    Medical Center; Northport DCH Hospital; and
    the Tuscaloosa Surgical Center.
  • operates a Minor Surgery clinic and an
    Orthopedic clinic each week that the resident
    and medical student can take advantage of at
    the Capstone Medical Center.
  • encourages faculty to achieve greater
    professional proficiency through board
    certification, recertification, advanced de­
    grees, and special learning experiences and
    continuing education. Faculty in the Surgery
    Department participate in postgraduate
    medical education programs. For example, three of our faculty attended special Fellow­
    ships. They were:
    Dr. Chester Boston -Department of Orthope­
    dic Spine Division, Fellowship at Univ. South
    Alabama -Jan. 1990-March 1990, Fellowship at
    Univ. of Maryland -Senior Spine, Fellowship -
    Dr. John Buckley-Mayo Graduate School of
    Medicine, Mayo Foundation, Fellowship in
    Myovascular Surgery-April 1991-Sep­
    t. 1991.
    Dr. Stephen Ikard-Tufts Univ. School of
    Medicine, New England Baptist Hospital,
    Fellowship in Total Joint Replacement-July
    • reports that Dr. William R. Shamblin will
      attend the American College of Surgeons
      meeting held at Point Clear, Alabama, during
      May.
  • contributes to postgraduate medical educa­
Surgery, continued from page 5
- presented conferences during the year. They include: Dr. Howard Falgout - Emergency Room-Thoracotomy Update; Dr. James H. Wallburn - nose bleeds; and Dr. James E. Shotts - Sinus Diseases.
- added books, articles and audiovisual teaching programs of surgery procedures to our Surgery Library so we will have on hand "updated" information for our residents and medical students. These references are also taken advantage of by our own faculty members. Contact Nikki Moore at 348-1320 for more information.

Family Medicine
- is developing an Occupational Medicine curriculum through a Family Medicine Residency Training Grant from the U.S. Department of Health and Human Services. Dr. Robert Ireland, M.D., Jerry McKnight, M.D., and John Wheat, M.D., are contributing to this project.
- reports that Margaret Garner presented "Sports Nutrition" at the Southeastern Athletic Trainers' Association Student Athletic Trainer Clinical Symposium on February 6, 1993. She has also presented "Understanding Cholesterol and your Health," "Obesity and Diabetes Mellitus," "Type II Diabetes Mellitus," and "Nutritional Considerations for the Competitive Athlete."
- continues to develop the Practice Management curriculum for the Family Medicine Residency Training Grant awarded by the Department of Health and Human Services. Dr. Bob Ireland is directing this effort. He is also clinic Director of the Family Medicine clinics at Capstone Medical Center and Secretary of the Family Medicine Section at DCH Regional Medical Center.
- is conducting second year activities for the Residency Training Grant awarded by the U.S. Department of Health and Human Services. Dr. Jerry Jones continues as Principal Investigator. He also contributed a chapter on "Diabetes" to be published in Essentials of Family Medicine by W. B. Saunders during 1993.
- received Alabama Family Practice Rural Health Board Grants including Student Coalition for Community Health, Preceptor Development Grant, and Rural Rotation for Family Practice Residents/Development of Model Rural Training Sites. Dr. Alan Maxwell, Discipline Chief, and other faculty have made these projects a priority.
- announces that Dr. Jerry McKnight received the 1992 Annual Family Practice Award from the Tuscaloosa Family Practice Association and was appointed as Chairman of the Department of Family Medicine for 1992-1994 at DCH Regional Medical Center.
- is preparing grants by Family Medicine faculty which include Prenatal group counseling in pregnant teenagers and pregnancy outcome (co-investigators: Drs. Elizabeth Philp, Pam Tietze, and Florence Patterson.) and a study of medical student demographics, their mood scores on standardized instruments, and their choice of medical specialty (co-investigators: Drs. C. Gresham, D. Sidrys, K. Debell, and Elizabeth and J. R. Philp).
- will conduct OSCEs for all third year students. The Objective Standardized Clinical Exam for third year medical students on all UA medical school campuses is being organized by CCHS Family Medicine faculty member Elizabeth Philp. (See story, p. 2). She is also preparing a Continuing Medical Education Program to train community-based family medicine preceptors in problem-based learning techniques.
- conducts Gynecology clinics through a contract with West Alabama Health Services. Pam Tietze, M.D., staffs these clinics. Dr. Tietze is also course coordinator for first year resident conferences, and she developed and implemented residency curriculum in gynecologic and obstetric procedures, including colposcopy, biopsy techniques, and ultrasound.

Health Service offers list of 800 numbers
The U.S. Public Health Service has toll-free 800 telephone numbers which offer recorded data, referrals, written materials, and sometimes personal counseling for health problems.

- Some of the most popular: National AIDS Hotline 800-342-AIDS; Spanish language AIDS hotline, 800-844-7432; both lines open 8 a.m. to 2 a.m. EST; Alcoholism and Drug Addiction Treatment Center, 800-382-4357, 24 hours; National Institute on Drug Abuse helpline for Managers and CEOs, 800-844-9771, Monday to Friday, 8:00 a.m. to 4:00 p.m. Eastern Time; Asthma and Allergy Foundation of American 800-7-ASTHMA, 9 a.m. to 5 p.m. EST; National Child Abuse Hotline, 800-422-4453, 24 hours.

There's even an 800 number for the PHI agency that can help people locate an 800 number for a specific health topic: it's 800-336-4797 and, in Maryland, 301-505-4167; both lines are open from 9 a.m. to 5 p.m. EST.
Jimmy Faulkner

Jimmy Faulkner of Bay Minette cannot be described easily and certainly not simply. He is a man who began as a journalist (by happenstance, he now says) but had to buy himself a newspaper to find the job he wanted. From there his business grew to include ownership of more newspapers and then radio stations, timber, real estate, investments, housing, insurance companies, and currently (since 1958) engineering and construction with David Volkert and Associates, Engineers and Architects.

Along the way he ran for governor twice (in 1954 and 1958); became the youngest mayor in the country when he was elected at age 23 by the city of Bay Minette, his adopted home; and was named ’Most Outstanding Freshman Senator’ in the Alabama state senate in 1955. He also chaired the hospital board, housing authority, airport authority, and industrial development boards of Bay Minette; and he raised money for charity, political allies, and higher education (the worthy cause closest to his heart). In addition, Faulkner has been active in civic service.

He was a director of the Alabama State Chamber of Commerce from 1945 until 1989. A director of the Bay Minette Chamber of Commerce since 1948, he has been a key figure in bringing new industry to Baldwin County.

Kaiser Aluminum and Chemical Plant, Bay Slacks, and Dem-Tal-Ee are three plants which Faulkner takes pride in bringing to Bay Minette. Each has expanded in production and number of employees since locating there.

Harold Pearson, then President of Dem-Tal-Ee, first met Faulkner when he was searching for a place to build his dental equipment plant. He had the prime role in Pearson’s decision to locate there. “He knew everybody in the state of Alabama,” Pearson said of Faulkner, who helped him with tax and worker training issues. “Jimmy made things happen for everyone. He was a fantastic gentleman who did nothing but good for his community.”

Depending on who is asking, Faulkner wants only a “Yankee dime” for his biography, which was written by Sandra Bacley Taylor (formerly state editor of the Mobile Press Register). The book is amazing not only for its interesting account of the details behind the news stories about this complex man, but because the author and the subject met when she sued him for a series of articles she wrote about his power and influence over county boards which he has said were “out of context, misleading, and libelous.”

A Lamar County native, Faulkner was born in 1916 to a farmer father and a teacher mother. He credits his mother, who worked part time but determinedly for years toward her teaching degree, with his great respect for education. His mother’s faith inspired his lifelong membership and support for the Church of Christ. He attended a Christian college and has endowed Christian schools throughout his life. Alabama Christian College in Montgomery was renamed Faulkner Christian in his honor.

Jimmy chose journalism as a major at Freed Hardeman College in Tennessee, he says, because his friend Ray Hankins had declared that as his interest. He finished his

Profiles

Volunteers who serve on the CCCHS Capital Campaign Steering Committee are working to raise $6 million to endow permanent chairs and professorships for medical faculty at the University of Alabama School of Medicine, Tuscaloosa Program. The CCCHS campaign is part of “The Campaigns for Alabama,” the most ambitious private fund-raising effort ever launched at The University of Alabama, one aimed at putting the Capstone in the top ranks of higher education.

In a continuing series about steering committee members, CCCHS profiles former Faulkner and L. E. Rockwell, M.D., of Baldwin County. They are hosting a reception this spring for friends and alumni of CCCHS to honor the unique mission of this medical school to train and place primary care physicians in underserved areas.

STEERING COMMITTEE

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L. E. Rockwell, M.D.

L. E. Rockwell once told Bear Bryant he couldn’t make football practice because he needed to make his grades for medical school. He left the team, but he hasn’t missed a game in 26 years except to care for patients.

Lowe Rockwell’s family was leaving for a 4th of July picnic in Fairhope when they were delayed by his birth in Vinegar Bend in 1933. Dr. Rockwell, who is now a family doctor in Daphne near Fairhope, jokes that he “wound up down here” after all. He grew up in Washington County and graduated from high school there. He went to Duke University briefly because he was interested in the divinity school there and thought he would enter the Methodist ministry.

Instead he came home and played football at Livingston University and in the Navy after he was drafted in 1945. Rockwell left the Navy in 1956, married a home town girl, and returned to The University of Alabama to finish school. He wanted to play football for “Bear” and Bryant wanted him on the team, “but Bear just had too much practice, and I wanted to make the grades to get in medical school,” says Rockwell. He was double majoring in biology and chemistry.

They had a meeting, and “Bear told me football doesn’t last forever, but if you become a doctor, that will...” says Rockwell. He and Bryant were friends for years, and L. E. and his wife Elizabeth sent their three youngest sons to play football for the Crimson Tide. Randy, Lee and Bragg were scholarship football players at UA, where Randy was team captain and Honorable Mention All SEC and All American. Steve, their oldest son, would have played too, but he had hurt his neck and Bear wouldn’t let him risk it. (Good thing for him, and Alabama, Rockwell says.) Rockwell has not missed a UA football game in 26 years, he says. He has an autographed picture of his friend Lee Roy Jordan hanging in his office, and he is a member of the Red Elephant Club in Mobile.

The Rockwells’ daughter Susie, now a counselor in Mobile, was born when L. E. was in medical school in Birmingham. Elizabeth, who is a nurse, was starting the ob department (literally) at Shelby Memorial Hospital, says Rockwell proudly. Mrs. Rockwell now owns and operates a catering service and holds parties in a restored house next door to the medical office.

As parents of five children, the Rockwells have always been active in school activities, and Rockwell has been elected to two terms on the local school board. He is a member of the Thomas Hospital Board. A “Physician Profile” in the hospital newsletter calls Rockwell “the busiest man in Daphne,” saying “his broad scope of practice is a reflection of the comprehensive training he received in providing primary care.” On a typical day, says Thomas Hospital Notes, Rockwell may have patients in critical care, materials management, nursing care, and be consulting about a patient in surgery.

Rockwell is a “country doctor” who still makes house calls when necessary for long

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degree in 1956 at the University of Missouri. But finding jobs after the depression was hard. When one publisher turned him down, he decided he would rather own a newspaper than work for one and he found he could buy half of the Baldwin Times.

Miss Ebbie mortgaged her home in Vernon to help him get the money, and the 20-year-old Faulkner moved to Bay Minette, drawing $25 a week. With no plumbing facilities or heat, poor lighting, and antiquated equipment, the working conditions were dismal. Faulkner still has his office at the same site, though he has remodeled—adding computers and a bathroom! The Baldwin Times, which he sold in 1974 becoming publisher emeritus, is next door to his office.

He still writes a weekly column. He says his travel columns are more popular and provoke more response than his political or economic development commentaries. He still travels for business, but less often now because his wife’s health does not allow her to travel with him. He and his wife Evelyn, a Bay Minette native, have two sons. One is a businessman in Bay Minette, and the other is an ophthalmologist in Mobile.

Faulkner’s interest in medical education is not only through his son, however. To help meet the need for family doctors, he was asked by Governor George Wallace in 1970 to help develop the state’s medical education program. He and his friend Victor Poole of Moundville both worked to expand the University of Alabama School of Medicine to the Tuscaloosa and Huntsville campuses. He said he learned how hard it is to recruit well-trained primary care doctors to rural counties when he headed the North Baldwin Hospital Board in the 60’s and 70’s. But owing Victor Poole a favor is why he is raising money for CCHS, he says!
The University of Alabama Capstone Medical Center

- **Capstone Medical Center Physicians**
  The Capstone Medical Center (CMC) is a part of the College of Community Health Sciences, which is a branch of the University of Alabama School of Medicine. Personal health care at the Capstone Medical Center is provided by UA faculty physicians and by resident physicians who are supervised by the faculty physicians.

- **Physician Services**
  Physician Services Provided at the Capstone Medical Center include: Family Practice, Internal Medicine, Obstetrics & Gynecology, Occupational Medicine, Pediatrics, and Psychiatry.

- **Capstone Medical Center Hours**
  The Capstone Medical Center is open Monday through Friday from 8:30 a.m. to 5 p.m.

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**Laboratory/X-Ray Department:**
- Patsy McKnight, Radiologic Technologist
- Stacy Morris, Phlebotomist
- Brenda Southern, Radiologic Technologist
- Sherry Wedgeworth, Lab Director
- Christy Parsons, Medical Assistant
- Laura Staufer, Medical Lab Technician
- Seated: Catherine Walker, Medical Technologist

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**CMC Medical Receptionists:**
- (seated L-R): Ellen Jones, Pediatrics; Terry Grove, Internal Medicine; Linda Reynolds, Psychiatry; Jackie Burkhalter, Floater; (standing L-R): Sandra Lyons, Blue Suite; Mary K. Lewis, Blue Suite; Ann Huffman, Red Suite; Debbie Wilson, OB/GYN; Shirley Barton, Red Suite; and Lynn Downing, Occupational Medicine.

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**CMC Nursing Staff:**
- (seated L-R)
  Gayle Skelton, Voncile Bailey, Becky Tice; Patty Lancaster, Diana Miklos, Sonya Taylor, Stacey Hunt, Diane Kerr, Mickey DeHaan. (Standing L-R) Janice Morgan (R.N. for Clinical Support), Debbie Watson (Director of Nurses), Deborah Posey, Jackie Horton, Ginger Levin, Teresa Cook, Gaye Harbin, Antonineta Wells, Diana Key, and Virginia Falls. (Not pictured, Kathy Davis.)

continued next page
p.m. by appointment only. Schedule an appointment by calling (205) 348-1770.

The center is open Saturdays from 8:30 a.m. to 12 noon for acute problems only. Appointments are not required on Saturdays.

• Charges

The Capstone Medical Center is a fee-for-service practice, and payment is due when services are received. Fees are based on the kind of service provided and the length of time spent with physicians. The Capstone Medical Center accepts all insurance and files insurance claims as a courtesy to clients.

• Emergencies and After Hours

For emergency care go directly to DCH Regional Medical Center’s Emergency Department. When you arrive, request the Capstone Medical Center physician who is on call at the hospital.

For more information contact the Capstone Medical Center, College of Community Health Sciences, The University of Alabama, 700 University Blvd. East, Tuscaloosa, Alabama 35401, (205) 348-1770.

• Also Available at the Capstone Medical Center

Minor Surgery
Complete X-ray services
EKGs
Complete clinical
Nutrition counseling
Laboratory services
Mammography services
24-hour on-call service
Insurance claim filing
Pulmonary function
courtesy service

tests