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Learning to Care for Those in Harm's Way

GSN Dean Completes AACN-Wharton Leadership Fellowship Program

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Dr. Carol A. Romano, dean of the Uniformed Services University of the Health Sciences (USU) Daniel K. Inouye Graduate School of Nursing (GSN) was among 40 academic nursing leaders who completed the AACN-Wharton Executive Leadership Program held August 10-13, 2015, in Philadelphia, Pa.

The American Association of Colleges of Nursing (AACN) and Wharton School of the University of Pennsylvania partnered in the leadership endeavor that brings nursing deans and academic leaders together for a four-day leadership development program. To date, 127 Fellows from 41 states and the District of Columbia have successfully completed the program, which is funded by the Jonas Center for Nursing and Veterans Health-care.

"Leadership development is a lifelong journey and a critical step in preparing nurses at all levels to succeed as effective patient advocates, inter-professional partners, and change agents," said Dr. Eileen Breslin, AACN President and a member of the AACN-Wharton Program Class of 2014. "I applaud the latest cohort of executive leadership Fellows for their commitment to strengthening the skills needed to influence and steer the future of nursing education and research, patient care delivery, and healthcare policy."

Participants were chosen by a competitive process and represented a wide diversity of nursing programs, including large academic health centers, small liberal arts schools, public and private universities, rural and urban-based programs, and faith-based institutions. According to the AACN's press release, "the program's curriculum is designed to provide the concepts



Dr. Carol A. Romano, dean of the Uniformed Services University of the Health Sciences (USU) Daniel K. Inouye Graduate School of Nursing (GSN). (Photo by Tom Balfour)

and tools needed to enhance leadership capacity and hone the skills that are essential to thrive and move forward strategically. The content addresses issues around managing and leading change, influencing and galvanizing a diverse set of stakeholders, and building enterprising relationships in highly volatile environments. Participants leave the program equipped with an advanced set of negotiation, leadership, and influencing skills, and the confidence and ability to serve on or lead high-powered boards."

"Dr. Romano's participation in the program demonstrates to her students, staff and faculty her commitment to leading by example in pursuing lifelong professional development," said USU President Dr. Charles L. Rice. "When it comes to having a visionary dean who can think and act strategically and proactively in developing state of the art programs and forging lasting alliances, we are fortunate to have one of the best in the nation with Carol Romano."



On the cover

Air Force 2nd Lt. Sapna Gopaldasubramanian raises her hand to recite her commissioning oath at the commissioning ceremony held in the USU Sanford Auditorium September 4. See story, page 4 (photo by Tom Balfour)

USU President Announces Retirement

By Sharon Holland

Uniformed Services University of the Health Sciences (USU) President Dr. Charles L. Rice announced that he will retire at the end of the 2015-2016 academic year, concluding his 11th year as president.

Rice made the announcement during his quarterly campus “Town Hall” meeting Aug. 12, and followed it with a letter to the University community.

“Serving as President of USU has been the highlight of my career. Everything I wanted to accomplish when I first became a physician and, later, an academic leader, has been realized through my service as President.

Every day I am surrounded by people who exemplify what is best about our profession and our country,” Rice said. “I have never once felt that coming to USU was work. My passion for our mission and my role in it is as strong now as it was in 2005. The temptation to continue serving as President - which I consider the best position in academic medicine - is great. But a tenth anniversary is a milestone, and as mine approached and passed it has prompted a great deal of personal reflection. I have always believed it’s better for an organization for its President to leave too soon rather than too late. Every university can and will benefit from new ideas, fresh perspectives, and renewed energy. Part of a President’s responsibility is to know when the time is right to exit gracefully, and allow his or her Board to conduct a thoughtful and thorough search for a successor. I may be leaving USU, but USU will never leave me.”

During Rice’s tenure as President, the University significantly expanded its academic and research portfolios, completely



Uniformed Services University of the Health Sciences (USU) President Dr. Charles L. Rice. (Photo by Sharon Holland)

overhauled its medical school curriculum, while maintaining USU’s signature military footprint and providing a much stronger link between classroom learning and clinical experience. Rice also oversaw the expansion of clinical research across the university, with 310 funded research projects, and \$132.5 million in research funding; the introduction of new academic programs, such as the Master’s and PhD programs in Health Professions Education, Master of Health Administration and Policy, Doctor of Nursing Practice, Women’s Health Nurse Practitioner, and expansion of the Clinical Psychology program and implementation of the LEAD curriculum and alternative and complementary medicine curriculum; creation, and subsequent expansion of the Postgraduate Dental College and establishment of the Master of Oral Biology degree for Army, Navy and Air Force dental residents.

Rice also established a new Department of Physical Medicine and Rehabili-

tation, oversaw the integration of the USU and WRNMMC Departments of Surgery and the integration of a department chair for USU and WRNMMC Radiology departments. He hired new University leaders, including deans of the F. Edward Hebert School of Medicine, the Daniel K. Inouye Graduate School of Nursing, and Postgraduate Dental College, Senior Vice President, Vice President for Research, Vice President for External Affairs, Vice President for Finance and Administration, Chief Information Officer/Vice President for Information and Education Technology, Chief of Staff, AFRRRI Director, Brigade Commanders, and established a fully-accredited branch campus in San Antonio. Under his leadership, the University forged strategic relationships with other federal educational and research institutions, such as the affiliations with the Naval Postgraduate School and the National Defense University and the National Institutes of

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Class of 2019 Students Hold Ceremonial Commissioning

By Sharon Holland

Surrounded by family, friends, and USU faculty and staff, several members of the Uniformed Services University of the Health Sciences' F. Edward Hébert School of Medicine (SoM) Class of 2019 officially pledged to defend their country as new officers in the Army, Navy and Air Force during a commissioning ceremony, Sept. 4, in Sanford Auditorium.

"The purpose for holding this ceremony was to build camaraderie within the Class of 2019 and to provide a ceremonial oath opportunity for newly-commissioning

ensigns and lieutenants of the Class of 2019 in the presence of family and friends. It also provided these family and friends with a positive first impression of the Uniformed Services University of the Health Sciences," said Navy Ensign Chelsea Schifferle.

The ceremony was orchestrated by volunteers from the first-year class, including Schifferle, Air Force 2nd Lts. Sophie Higgins and Elena Segre, and Army 2nd Lts. Lauren Kecskes, Alison Lam, and Emad Madha.

Army Lt. Col. (Dr.) Brigilda Teneza, a class of 1997 graduate and SoM com-

mandant, Navy Capt. (Dr.) Patricia McKay, class of 1998 and associate dean for Clinical Affairs in the SoM, and Air Force Col. (Dr.) Lester "Andy" Huff, class of 1989 and director of USU's Armed Forces Radiobiology Research Institute, each led students in reciting their Service-specific oath and in congratulating them for the path they have chosen and offering advice.

"Make sure that you are proud of your work as officers, as medical students, and as physicians," Huff told the members of the class. "It has been a great experience for me. Welcome to the University."



(Left) Navy Capt. (Dr.) Patricia McKay, associate dean for Clinical Sciences, speaks to members of the Class of 2019 during their commissioning ceremony held Sept. 5, 2015 in Sanford Auditorium. (Right) Army, Navy and Air Force members of the Class of 2019 stand to recite their Service-specific commissioning oaths. (Photos by Sharon Holland)

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Health. He was also responsible for the creation or development of important interdisciplinary academic centers, including the National Center for Disaster Medicine and Public Health; the Center for Neuroscience and Regenerative Medicine; the Center for Rehabilitation Science Research; Collaborative Health Initiative Research

Program; Surgical Critical Care Initiative; establishing a new Global Health Center. Recently, he oversaw the establishment of the University's Enlisted to Medical Degree Preparatory Program.

In learning of Rice's retirement plans, USU Board of Regents chair Dr. Ronald Blanck stated, "Dr. Rice has provided visionary and inspirational leadership during his tenure at USU, to include acting as As-

sistant Secretary of Defense (Health Affairs) for a time. The Board of Regents accepts his announced retirement with regret and profound thanks for all that he has done. We will now move forward with a search to find an equally qualified replacement."

A presidential search committee will be established by the Board of Regents to find a successor to Rice.

USU on Course to Improve Civilian Hiring Process Time

Courtesy Article

One of the key recommendations of the University's Strategic Planning process, identified by the Strategic Framework and Performance Assessment Task Force for execution in 2015, is to maximize transparency, efficiency, and integration in personnel management. With this recommendation, Mr. Walt Tinling, the vice president for Finance and Administration, invited Dr. Donna Whitaker, Lean Six Sigma deployment director and senior master black belt, from the Office of the Army Surgeon General/Headquarters, Army Medical Command, to the University to work with Civilian Human Resources (CHR) and Financial and Manpower Management staff and other key stakeholders to review and assess the civilian hiring process.

Prior to the review, the average time from submission of the SF-52 package to CHR until selection, was an average of 105 days for General Schedule (GS)/Wage Grade (WG) hiring (Office of Person-

nel Management standard is 80 days) and 216 days for Administratively Determined (AD) hiring. Granted, the recruitment process time was extended due to OCHR Silverdale processes or the academic processes (search, CAPT, or BOR) in the case of AD hires, but it was clear to agency stakeholders that there was room for significant improvement.

After a series of meetings with CHR, FMG, select stakeholders, and others where all concerns, needs and opportunities were expressed and evaluated, a common goal was established: "reduce the process cycle time within CHR and FMG by 50%." Dr. Whitaker, CHR, and FMG devised an aggressive plan to accomplish this goal, which emphasized transparency of the process, automation, communication, and training.

A number of steps have been taken to date to reach the goal, including streamlining and updating the Manager's Guide with process descriptions and flow charts for hiring actions; developing recruitment and

AD search committee instructional checklists; providing on-going quarterly training at AO meetings and refresher training; sharing the process tracking spreadsheet; and reorganizing and modifying the Recruitment Tracker to better identify key process steps and dates. This tool is now provided it to the Responsibility Centers every four weeks.

The remaining steps are the toughest to achieve, but they are progressing on schedule. CHR is developing an automated SF-52 routing process by mid-November, and CHR and the Chief Information Officer's staff are working together on a process to use Google Apps to fully automate functions including establishing an electronic SF-52 packet. Once automated, CHR and customers will also share the process tracking sheet through use of the Google Drive.

Vice President Tinling summarized this initiative by saying, "We expect to achieve positive permanent process improvements which will better support the University in meeting its mission and strategic goals."

USU License Plate Available to Maryland Residents

by Sharon Holland

Uniformed Services University of the Health Sciences students, staff, faculty and alumni who are residents of the State of Maryland are eligible to apply for a USU organizational license plate.

The license plate was developed several years ago and a number of cars throughout the University's parking garage already have them, including President Charles Rice's personal vehicle.

The Motor Vehicle Administration (MVA) fee for the USU license plate is \$25 per vehicle, in addition to the regular registration fee. They are available for passenger cars, motorcycles, multi-purpose vehicles, and trucks with a one-ton or less manufacturer's rate capacity.

The organizational plates are only available for Maryland residents. Unfortunately, the District of Columbia does not offer organizational plates and the State of Virginia requires a minimum of 350 confirmed interested residents before it will establish an organizational plate.

Anyone interested in applying for the plate, which shows the university logo and the letters 'U-S-U' followed by the MVA-assigned sequential tag number, must pick up

the Application/Certification for Organizational License Plates from the Office of External Affairs, Room A1025. Applicants must provide the vehicle identification number (VIN), year and make of the vehicle, sticker, title, and tag numbers, as well as insurance information. The form must then be signed by Sharon Holland, the USU coordinator for the organizational plate who will verify the applicant's tie to the University.

Once the application form has been signed, interested individuals can apply for the plates in person at any of the MVA's

full service branch offices (<http://www.mva.maryland.gov/hours-Locations/default.asp>). The request will then be forwarded to the Glen Burnie MVA office for processing. Applications may also be mailed to the MVA's Specialty Tag Unit in the Glen Burnie office: MVA Specialized Tag Unit, 6601 Ritchie Highway, Glen Burnie, MD 21062, or taken to an MVA licensed tag and title service (<http://www.mva.maryland.gov/Vehicle-Services/REG/titleagents.htm>), for assistance with applying. Organizational plates cannot be ordered online.



Photo illustration by Eric Ritter

Military Medical Student Saves His Own Life with Combat Medical Skills Training

by Sharon Holland

Army 2nd Lt. Michael Polmear, a second-year medical student at the Uniformed Services University (USU), planned to become a military doctor to care for injured service members and their families. Little did he know, only a little more than one year into his studies, that he would employ his newfound medical knowledge to save his own life.

In early July, Polmear and his wife, Stephanie, traveled to Wyoming to rock climb in Grand Teton National Park. He had recently completed his Combat Medical Skills (CMS) course and the final module of the first-year curriculum on gastroenterology and hematology at USU, and was looking forward to a well-deserved study break before heading to the Marine Corps Mountain Warfare Training Center in Bridgeport, California, for his summer operational rotation.

Polmear and his wife are experienced climbers from Colorado. Besides the mountain peaks, the Snake River valley, abundant wildlife and stunning scenery, Grand Teton National Park is also known for its world-class search and rescue team, the Jenny Lake Rangers. Although he had no idea he'd need their services, he selected the park because of their expertise in medical rescues.

The pair began their climb of the Black Dike route on Middle Teton just after 8 a.m. on July 7, when without warn-

ing, a huge boulder fell from above and hit his left arm, crushing it. His upper arm bone was protruding through the skin, he was bleeding profusely, and he lost the sensation in his left hand.

Polmear, who had no prior military or medical experience before starting school at USU, remained calm. Using his good arm, he took a sling from his climbing gear and used it as an arm brace for stabilization. Then he built an anchor and his wife lowered him down to the ground. He had learned in CMS that it was important to do a pulse check to determine if there was arterial bleeding. He found two separate pulses and knew he was going to live, but also that his situation was extremely serious. He found damage to muscle and bone, but not to his arteries. He was carrying a tourniquet with him and he and Stephanie quickly put it on his arm. The pain was excruciating, but he knew from CMS that it was crucial to apply the tourniquet very tightly to avoid bleeding to death. He pushed the bone back into his arm and wrapped it up. Nearby climbers called the Jenny Lake rescue team, who asked about the extent of his injuries. Polmear had learned the correct terminology and levels of urgency for medical evacuations in CMS class, so he got on the phone himself and relayed that his injuries were "Urgent Surgical," meaning they required immediate evacuation and surgery.

Once picked up by the helicopter

team, the medevac trip took 10 minutes, followed by a 30-minute ambulance ride to the medical center in Jackson Hole. He was in the OR within six hours of the accident. Polmear knew from his studies the type of surgeon he would need to care for his injuries; he insisted they find an upper extremity, fellowship-trained reconstructive surgeon.

The ER doctor and radiologist reviewed his x-rays and informed him they thought he might need an amputation. He told them 'no way'; his elbow was still intact. He had learned that if the elbow was intact, there is a good chance of being able to keep the arm. They said, "Worst-case scenario, Walter Reed has great prosthetics," to which I responded, 'Yes, but they have a better rehab program,' said Polmear. Once the surgeon arrived he agreed there was no need to amputate.

Polmear had suffered nerve damage, which caused the loss of sensation in his left hand. His shattered arm bones looked like jigsaw puzzle pieces. He spent seven hours in surgery. The doctor was able to put the pieces back together and reconstruct the nerve. The crush injury to his muscle tissue sent protein into his blood which caused liver and kidney damage. Polmear had just finished the gastroenterology module at school that included hematology, so he was able to interpret his own blood test results in the hospital. He knew it was important to decrease the pain medication levels to minimize the impact of drugs on his already over-burdened kidney and liver, so he insisted on managing his own pain medica-

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(Left) The Black Dike route on the east face of Middle Teton in Grand Teton National Park is one of several popular ascents used by climbers scaling the peak. (Photo courtesy of National Park Service) (Right) Army 2nd Lt. Michael Polmear, a second-year medical student at USU, displays the surgery scars left as a result of a boulder that fell and shattered his arm during a rock-climbing excursion in Grand Teton National Park in July. (Photo by Sharon Holland)

New Leadership Curriculum Developed for USU

by Mark Rosati

A military physician must be more than an excellent clinician - he or she must be prepared to lead, often in high-stress, high-stakes environments such as war zones or areas devastated by natural disasters.

The Uniformed Services University of the Health Sciences has created a groundbreaking new program, Leadership Education and Development (LEAD) to help educate its medical students in the leadership skills essential to ensuring effective 21st century health promotion and health care delivery while meeting the needs of the Military Health System (MHS).

The LEAD curriculum will be incorporated into all four years of the undergraduate program in the F. Edward Hébert School of Medicine (SOM), says retired Army Lt. Gen. (Dr.) Eric B. Schoomaker, professor and vice chair for Leadership, Centers and Programs in the school's Department of Military and Emergency Medicine (MEM). The goal is to ensure that every USU graduate has the capability to lead interdisciplinary groups of health care professionals, ensuring optimal patient care and safety even in the most challenging of field environments.

"USU must do more than educate clinicians, as important as that task may be," says Schoomaker. "We must also produce health care professionals who are ready and able to function as high-performing team members, leaders of small groups, and, ultimately, directors of large and complex

health care organizations."

Dr. Jonathan Woodson, Assistant Secretary of Defense for Health Affairs, and Dr. Charles Rice, USU President, have emphasized the importance of leadership training -- that USU must outpace every institution in the world in health care leadership development, and produce highly skilled health care providers and leaders capable of rising to the challenges of the MHS mission.

Last October, SOM Dean Arthur Kellerman directed MEM to implement a comprehensive military medical leadership development program, which was designed by Schoomaker, a former Army Surgeon General; Neil Grunberg, PhD, a professor of medical and social psychology; John McManigle, MD, senior advisor, MEM; and Army Col. (Dr.) Francis O'Connor, chair of MEM. The new program of instruction, developed with input from faculty, staff and students, and comprehensive review of leadership literature and programmatic approaches, including those in use at the military service academies, has been integrated into the four-year SOM curriculum starting with the 2014-2015 academic year. The LEAD program will include classroom instruction, field training, and a capstone project.

Several pedagogical sessions have been created to begin LEAD, including plenary sessions, small working groups, and interactive experiences relevant to medicine and military medicine. For example, sessions will address history and types of leadership; personality type and leadership; emotional intelligence; effective communi-

cation; character; communicating difficult information, and crisis communication.

In contemporary medicine, McManigle notes, "The achievement of optimal public health and health care require coordinated and cooperative teamwork and leadership. The 'one-stop-shop' physician no longer exists. Now medical specialties, nursing, and allied health professions must work in a therapeutic alliance with patients to prevent illness and injury, enhance health and well-being, and treat illness and injury."

The need for leadership and collaboration is particularly acute in an organization as large as the MHS, which must be ready at all times to deploy health care teams to assist the U.S. armed forces, or support relief efforts for major disasters such as the earthquakes in Pakistan and Haiti or the Indonesian tsunami. All of these situations require strong leadership - including team-building, problem-solving, planning and organization, risk analysis, and conflict-resolution - in tremendously stressful environments, and all of these skills will be taught to every USU SOM student as part of the LEAD curriculum.

"At USU, we do not consider leadership development a privilege reserved for a chosen few - we provide it to all," said Grunberg. "All of our graduates need to be prepared to be outstanding health care practitioners - and medical leaders - for the uniformed services and the nation. At the leadership academy of the Military Health System, with more than 9.6 million beneficiaries, nothing less will do."

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tion levels which cut his recovery time in half - only four days in the hospital.

He was released from the hospital and spent another week in Jackson Hole recovering before returning to Bethesda. He changed his summer operational experience from the mountain medicine course to a rotation with USU's Center for Disaster and Humanitarian Assistance Medicine, which allowed him to complete the required rotation while also being able to go to Walter Reed National Military Medical Center (WRNMMC) for a myriad of follow-up doctors' and rehabilitation appointments.

Once back at home, Polmear was put under the care of the WRNMMC Orthopaedic Service. He said he was told his injuries were a "paper cut" compared to some of

the injuries they had seen and cared for. He had a second surgery, conducted by USU/WRNMMC surgeon, Army Col. (Dr.) Leon Nesti, to transfer a "good" nerve to take the place of the damaged nerve. The transfer changed the architecture of his nerves in his left arm. Polmear is now working with WRNMMC's Occupational Therapy staff to get his grip strength and dexterity back to normal limits, although his "opposition" (touching his thumb to his other fingers) is still affected. He credits Army Maj. Matthew Miller, the residency director for the Physical Medicine and Rehabilitation residency at WRNMMC, for teaching him to use his hand in a new way and cannot say enough about the Occupational Therapy staff for their dedication to his recovery.

Polmear said, fittingly, his goal in coming to USU was to become a hand surgeon. He said depending on the progress

he makes, he may have to change plans, but USU associate dean for Clinical Affairs, Navy Capt. (Dr.) Patricia McKay, an orthopaedic hand surgeon, has been offering advice and encouragement.

Most importantly, though, Polmear said being on the other side of the patient care spectrum has given him a new perspective as a provider, a deeper respect for the injured, and the value of embracing the process of discovering a new normal.

"I have embraced the opportunity to learn experientially from my injury," said Polmear. "Medical school has introduced me to numerous resources where I can find information and solace. Our curriculum also highlights the powerful combination of willpower, adherence to the treatment plan, and being active and healthy as the major contributors to the best outcome."

Final Frame



Vietnam veteran and former Prisoner of War, Guy Gruters spoke to members of the USU community in Sanford Auditorium, September 3rd about leadership and overcoming obstacles, and also described his experiences as a POW in the infamous "Hanoi Hilton" in North Vietnam for more than five years. Gruters was released in 1973 and left the Air Force at the rank of captain shortly thereafter. His daughter, Amber Gruters, is a graduate of USU. (Photo by Eric Ritter)