

The Official USU Newsletter

# the pulse

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*Learning to Care for Those in Harm's Way*

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**On the cover**

*SOM 1st-year medical student, Air Force 2nd Lt. Sapna Gopalsubramanian performs a cultural dance during the Apollo Society's Open Mic event during this year's SOM annual Second Look Day. See story this page. (Photo by Tom Balfour)*

# SOM Hold Second Look Day for Potential USU Students

*By Eric D. Ritter*

The Uniformed Services University's (USU) F. Edward Hébert School of Medicine (SOM) recently held its annual Second Look Day.

According to SOM Director of Admissions, Joan Stearman, the Annual Second Look Day is a way potential students can see USU closer and to help in their decision to enroll in the university.

"We understand that medical students get several offers to other medical schools," Stearman said. "This closer look allows these students to interact with faculty and tour the facilities to get a better understanding of the campus and the programs offered here. For those who attended, but already knew they were accepting USU, they were able to combine house-hunting plans into their visit."

Second Look days are relatively common for universities, but USU is unique because of the military obligation that comes with the commitment.

"For a number of 20-something-year-olds, agreeing to the seven-year military commitment can be a daunting thought," Stearman said. "To them, that comes out to a third of their life. So, this program helps answer any of their questions and concerns they may have in regards to that military commitment."

The Second Look Day began with a welcome greeting by SOM Dean Arthur Kellermann, M.D., M.P.H, attendees were escorted to Walter Reed National Military Medical Center to see military medicine at work first-hand and then returned to USU, attended an Apollo Society open mic event, and met with students over lunch. After that,

the applicants had a round table discussion with the faculty. There, they learned about the SOM curriculum, general military and service-specific information, and other administrative topics.

Stearman added that to help applicants feel more at ease during the event, the families of the applicants are also invited to attend.

"We've found that including their significant others during the presentation can greatly influence an applicant's decision to attend the school," Stearman said.

Stearman concluded that the annual Second Look Day is a great way for the university to highlight itself and to attract highly qualified applicants.

"We always want to showcase the university the best way we can," she said. "Ultimately, it's up to the student to decide where they feel what the best learning environment is for them and where they will be happiest."



*SOM professor Dr. David Welling (left) discusses USU academics with a potential student during the annual Second Look Day held at USU, March 18. (Photo by Tom Balfour)*

# Alumnus to be next SOM Commandant

By MC3 Laura Bailey

After a lengthy and thorough search process, the selection of a new Commandant for the F. Edward Hébert School of Medicine at the Uniformed Services University of the Health Sciences (USU) was announced March 21.

“It gives me great pleasure to announce the selection of Commander Alexander Galifianakis, Medical Corps, U.S. Navy, as the next Commandant for the F. Edward Hébert School of Medicine,” said Army Col. (Dr.) Jerome Buller, the brigade commander at USU. “The Army, Navy and Air Force each provided their strongest candi-

dates for consideration for the Commandant position. After multiple meetings with the selection committee and other key stakeholders within the University, Commander Galifianakis was clearly the strongest candidate and the best match for the School of Medicine and the University.”

Galifianakis has served as the Radiology Advanced Clerkship director at USU since 2014, said Buller, and, he has been a member of numerous committees while serving at the university. “He is well respected by the students and the faculty that work with him. A 2003

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Navy Cmdr. Alexander Galifianakis has been selected to be next the Commandant of the USU SOM. (Courtesy Photo)

## Navy Names Inaugural Class of Sailors for Enlisted to Physician Program

By Sharon Holland

Five Sailors have been selected to be among the matriculating class of service members for the Uniformed Services University of the Health Sciences' Enlisted to Medical Degree Preparatory Program (EMDP2) in August, 2016. This marks the Navy's first year participating in the program, which also includes Army, Marine Corps and Air Force enlisted members. The service members include:

- Hospital Corpsman 2nd Class Hanyun Liu, Okinawa, Japan
- Cryptologic Technician (Collection) 1st Class Arthur A. Shinder, San Antonio, Texas
- Cryptologic Technician (Interpretive) 1st Class Michael P. Smith, Schofield Barracks, Hawaii
- Hospital Corpsman 2nd

Class Nicholas M. Toufexis, Camp Lejeune, North Carolina

- Machinist Mate 1st Class Chrystopher J. Young, Goose Creek, South Carolina

The EMDP2 program is a partnership between USU and the armed forces. The 24-month program will enable highly qualified enlisted service members to complete the preparatory coursework for application to medical school while maintaining an active duty status.

Program components include full-time coursework in a traditional classroom setting at George Mason University-Prince William Campus in northern Virginia, structured pre-health advising, formal Medical College Admission Test (MCAT) preparation, dedicated faculty and peer mentoring at USU,

and integrated clinical exposure. Once they complete the program, successful students will be competitive for acceptance to U.S. medical schools. Students are required to apply for medical school at USU, but may also apply for entrance to other medical schools through the Armed Forces Health Professions Scholarship Program.

“I am delighted that the Navy has joined the other three services in affording the opportunity for highly qualified NCOs to participate in this program,” said USU President Charles L. Rice, MD. “The different ratings of this cohort of NCOs emphasize the diversity of backgrounds that this program seeks. I congratulate each of these Sailors on their acceptance into the EMDP2 program.”

# SOM Student Selected for LCME Voting Membership

By MC3 Laura Bailey

A student at the F. Edward Hébert School of Medicine (SOM) at the Uniformed Services University of the Health Sciences (USU) was selected by the Liaison Committee on Medical Education (LCME) to serve as one of its student members. Navy Ensign Matthew Nelson, a third-year medical student will sit on the committee of 19 voting members during the 2016-2017 academic year.

The LCME is jointly sponsored by the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA), and receives member nominations from these associations. Members of the LCME include 15 professionals, two public members and two medical students – all selected from across the nation. Each year, the LCME reviews annual survey data and written reports on all accredited U.S. and Canadian medical schools, and conducts survey visits to 20 to 30 institutions. Ac-

creditation through the LCME is a voluntary, peer-reviewed process of quality assurance that determines whether the medical education program meets established standards. Nelson will contribute to that process by reviewing information from schools that are up for review by the LCME and participate in a select number of site visits.

“Soon after arriving in the School of Medicine, Matt sought out leadership opportunities within his class,” said Air Force retired Lt. Col. William Wittman, PhD the assistant dean for Academic Support Services in the Office of Student Affairs (OSA) at USU.

At the beginning of his first

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Navy Ensign Matthew Nelson (center) stands together with other USU students at the AMA Medical Student Section (MSS) Interim Assembly Meeting at National Harbor, Maryland. (Courtesy photo)

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graduate of USU, he understands the rigor of the SOM program. He is an exceptional role model for our students," Buller said.

"I've been very fortunate to have had a number of amazing mentors and leaders since starting my military career and I'll draw heavily upon their examples as I go forward," said Galifianakis. "Most of all, I look forward to getting to know all the medical and graduate students and watching their progress over the course of the next few years.

"I consider it a tremendous honor to serve as the next Commandant of the USU School of Medicine. Our students are about to embark on a truly special journey, one I started here myself some 17 years ago. As I reflect on those years, I can think of no more worthwhile and rewarding way to spend one's career than in the service of the men and women of our armed forces. I hope to do whatever I can to help our students succeed here at USU and beyond. While many of our students arrive with a wealth of experience already, perhaps I can

provide at least one perspective on what lies ahead."

"Alex is a trusted leader, dedicated educator and is actively engaged in academics," said Buller. "The medical and graduate education students will benefit greatly from his mentorship and guidance."

Galifianakis will succeed Army Col. (Dr.) Brigilda Teneza who will be leaving in June of this year to become the next command surgeon of the United States Military Entrance Processing Command (USMEPCOM) in North Chicago, Illinois.

# USU Sim Center Holds Sexual Assault Simulation

By Sarah Marshall

To ensure providers are prepared to care for sexual assault victims, the Uniformed Services University of the Health Sciences (USU) recently conducted its second annual Military Sexual Assault (MSA) simulation exercise at the Val G. Hemming Simulation Center – the first evidenced-based, multi-disciplinary sexual assault simulation event at the university.

A total of more than 200 students from the F. Edward Hébert School of Medicine (SOM) and the Daniel K. Inouye Graduate School of Nursing (GSN) participated in the event, March 21-24, which taught the students how to properly collect and document a patient-provider encounter with a sexual assault victim.

“This course is all about educating the provider. It isn’t to make them sexual assault examiners, but to help them care for and examine a sexual assault victim,” said Air Force Lt. Col. Wendy Lee, a family nurse practitioner and assistant professor in the GSN. The goal is to introduce the students to best practices in evaluating and caring for sexual assault victims, and ensure they’re better able to identify victims of sexual assault, Lee added.

Additionally, the exercise is designed to teach students interviewing techniques, as well as restricted and unrestricted reporting, and how to understand and recognize the health care implications of sexual assault, such as post-traumatic stress, vaginal infections, or pelvic pain that doesn’t seem related to an injury, she explained.

At the beginning of the exercise, students received classroom training on how to properly approach a sexual assault victim, concentrating on interview techniques, and how to take an appropriate medically-focused history on a sexually-assaulted patient. These techniques emphasized the importance of establishing patient-provider empathy, confidence and safety. They also discussed healthcare implications that would need immediate attention.

The simulation event started with an initial brief explaining interview techniques to use that are medically focused but also supportive of a sexually-assaulted patient. These techniques emphasized establishing patient-provider empathy, confidence, and safety. The MSA simulation case scenario involved a patient who was recently sexually assaulted and is being seen in a primary care clinic.

Before entering a simulated clinical exam room to greet their “patient,” played by specially-trained actors, the students reviewed the patient’s chart to get a sense of their medical history.

As the students entered the exam room, they were to properly greet the victim – without shaking hands as to not disturb potential evidence. During their interaction, they were expected to establish a patient-provider relationship, while assessing the patient’s safety, medical and emotional needs. They also had to briefly explain the difference between restricted and unrestricted reporting of the assault, and were expected to offer community re-

sources as part of a follow-up plan, such as a referral to a victim advocate. After the scenario, students conducted a self-assessment. They also received tailored feedback from the trained “patient,” as well as a 30-minute small group debrief from a sexual assault nurse examiner. The GSN and SOM interdisciplinary groups allowed the students with different education backgrounds to corroborate and share their knowledge and decision-making skills in a collaborating environment.

This simulation event was supported by the staff at Val G. Hemming Simulation Center, 16 trained standardized patients, 11 sexual assault nurse examiners who came from the Bureau of Prisons, Johns Hopkins University, Navy Medicine, and USU, faculty from the GSN and SOM faculty, and two service dogs.

Lee noted that in recent years, there has been a lack of education in health sciences university about sexual violence and how to care for the victim. While sexual assault continues to be prevalent across the nation, it’s estimated only 65 percent of those who experienced a rape or sexual assault in the U.S. in the last five years, reported it to authorities, she said. Establishing instruction for future healthcare providers, improving their confidence and knowledge to effectively conduct a sexual assault assessment, can help providers overcome these barriers and increase the reporting of sexual assault occurrences.

“USU has started this course to continue to meet that need,” she said.

# Collaborative Effort Addresses Dangers of Smokeless Tobacco

By MC3 Laura Bailey

A high prevalence of smokeless tobacco use poses a significant health risk to service members and military readiness. A pilot study is underway at the Walter Reed National Military Medical Center's John P. Murtha Cancer Center (MCC), in partnership with the Uniformed Services University of the Health Sciences Postgraduate Dental College (PDC). The MCC and PDC, in collaboration with dental clinics at Womack Army Medical Center, Fort Bragg, N.C. and Lackland Air Force Base, San Antonio, will help researchers understand the factors that influence smokeless tobacco use in the military.

"The study will ultimately help us formulate intervention procedures for the reduction and cessation of smokeless tobacco use in active duty service members," said Lt. Col. Sukhyung Lee, the principal investigator of the study and a surgical oncologist in the department of surgery at Walter Reed. "It's important that we figure this out because of the dangers that smokeless tobacco imposes on users. It impacts readiness and health tremendously."

More than 30 carcinogens exist in smokeless tobacco, including volatile and tobacco-specific nitrosamines, nitrosamino acids, polycyclic aromatic hydrocarbons, aldehydes and metals. Smokeless tobacco use is associated with increased risk of oral, esophageal and pancreatic cancers and is also associated with periodontal disease and

may increase the risk of cardiovascular disease.

"Patterns of smokeless tobacco use in the U.S. military have not been well characterized and a comprehensive assessment of the multiple factors and their effects on smokeless tobacco use patterns is needed," said Lee. "We want to understand all of the different factors – why service members start using smokeless tobacco, why they continue use in the U.S. military. How are other factors – such as military environment, beliefs towards tobacco use in the military, family history of tobacco use, intention and readiness-to-quit--associated with smokeless tobacco use in the study populations? These are questions we hope to answer through this pilot study and any future large-scale cohort studies."

Participants are being recruited from two military installations: one Army-based and one Air Force-based. Army and Air Force represent two branches with the high and low prevalence of smokeless tobacco use in the U.S. military, respectively, said Lee. The study will recruit eligible subjects until a total of 2,500 evaluable questionnaires are collected (1,250 evaluable questionnaires at each site). All study subjects will fill in a self-administered questionnaire that collects information on demographic characteristics, current and prior use of smokeless tobacco products, cigarette, cigar and pipe smoking, second-hand exposure, factors related

to tobacco use, alcohol use history and interest in participating in a future large study.

This pilot study is hopefully just the beginning.

"By conducting a pilot study, we will have the start of a solid foundation that we will hopefully be able to build upon for the conduct of a large cohort study," said Lee. "The pilot study is allowing us to assess the feasibility of conducting a large-scale cohort study among active duty service members by evaluating their willingness to participate in such a study that would follow them for many years. Ultimately, the information that we gather from both this pilot study and a possible future cohort study will help formulate intervention procedures for the reduction and cessation of smokeless tobacco use in active duty service members."

Smokeless tobacco is consumed without burning the product, and can be used orally or nasally. Oral smokeless tobacco products are placed in the mouth, cheek, or lip and are sucked (dipped) or chewed. Dry forms of smokeless tobacco are inhaled through the nose but are not as common. Smokeless tobacco use maintains nicotine addiction in smokers and promotes continued use. Although the amount of nicotine absorbance between cigarettes and smokeless tobacco is similar, nicotine stays in the blood stream longer in users of smokeless tobacco than cigarettes smokers.

# USU Alumnus Assumes DVVIC Leadership

*Courtesy article by Defense and Veterans Brain Injury Center*

Army Col. (Dr.) Geoffrey Grammer officially assumed leadership of the Defense and Veterans Brain Injury Center Mar. 16, 2016. DVVIC is the Department of Defense's center of excellence for traumatic brain injury.

Grammer transferred from the National Intrepid Center of Excellence at Walter Reed National Military Medical Center where he was the department chief of research. He is a psychiatrist and internal medicine specialist who holds board certifications in psychiatry, geriatric psychiatry, behavior neurology and neuropsychiatry. He is an assistant professor of psychiatry at the Uniformed Services University of the Health Sciences (USU),

from which he graduated medical school in 1996.

"I'm looking forward to working with the men and women of DVVIC to continue the excellent work they've been doing in clinical care, research and education for nearly 25 years," Grammer said.

Grammer replaces Army Col. Sidney Hinds II, who served as the DVVIC national director for almost three years.

"This transition occurring during March, which is Brain Injury Awareness Month and becoming official on Brain Injury Awareness Day wasn't planned, but it's perfect," said Hinds. "Our theme this month has been 'Think Ahead' and, clearly, the DoD's thinking ahead about the

future of DVVIC by putting someone as accomplished as Col. Grammer in charge."

Grammer has completed two deployments to Iraq, serving as the medical director for the 785th Combat Stress Control Company on his first deployment and as a psychiatrist at the combat support hospital at Contingency Operating Base Speicher on his second. He has also deployed to Afghanistan as a psychiatrist at the combat support hospital in Bagram, Afghanistan. He also served as the chief of inpatient psychiatric services at Walter Reed National Military Medical Center—which covers the 28-bed General Psychiatry and six-bed Neuropsychiatry wards—for eight years.

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year at USU, he ran for the academic representative of his class. Although he lost against a fellow classmate, it was through this experience that he realized he wanted to get involved in other activities. He then became a member of the AMA medical student section at USU. He was able to attend AMA conferences and it was there that his interest in medical education was sparked.

"With his natural style and upbeat demeanor he easily gained the confidence and support of students and faculty alike," said Wittman. "We are very proud of his many achievements and pleased to have him represent our community on such an important national committee."

As one of the only two stu-

dents selected to serve on the committee, Nelson is excited for the incredible opportunity, he said. He has a particular interest in shaping the future of medical education. Since most state boards of licensure require that U.S. medical schools be accredited by the LCME, he sees his new role as a chance to have a far reaching impact on the future of medical education and graduates of LCME-accredited schools.

"It's a little surreal. I definitely didn't expect it," said Nelson. "I took opportunities as they came. About a year ago, I became interested in becoming a student member of the LCME, but I didn't think I was competitive enough to be selected. It wasn't until Dr. Wittman reached out to me and asked if I would be interested in this that I began to

seriously consider the position. I couldn't have done it without their [OSA's] support, or the support of the Maryland State Medical Society, MedChi, who were kind enough to provide me with a letter of endorsement for the position. It's really great that the LCME offers this kind of student representation. I think that student input is important to the dynamic process of medical education, especially now with so much being added to the traditional curriculum of basic science and anatomy. Medical education helps build the next generation of physicians and I am excited to be a part of that through the LCME. In addition, I'm hoping to spend the next year learning more about curriculum development through a capstone project here at USU."

# Final Frame



Healthcare providers from the National Capital Area participated in Battlefield Acupuncture Training (BFA) at Walter Reed National Military Medical Center (WRNMMC), Bethesda, Md., March 29, 2016. The purpose of the training is to teach providers to help patients with a variety of acute and chronic pain conditions in multiple settings including inpatient and outpatient clinics, emergency departments and battlefield environments. This training utilizes five relevant ear acupuncture points used to quickly and effectively treat pain related issues. The course is offered through the United States Air Force Acupuncture Center in collaboration with USU's Defense and Veterans Center for Integrative Pain Management (DVCPM). The mission of DVCPM is to improve pain management in military and civilian medicine and guide research and policy regarding pain and its treatment. The BFA training is part of a broader effort entitled, "Acupuncture Training Across Clinical Settings" (ATACS), a two-year project that DVCPM in collaboration with the Veterans Health Administration (VHA), began in 2013. The mission of ATACS is to develop, pilot, evaluate and implement a uniform tiered acupuncture education and training program for Military Health System and VA treatment facilities. (Photo by MC3 Laura Bailey)