

Physiatry

F O R W A R D

FALL 2021 | AAP'S MEMBER MAGAZINE



Association of Academic Physiologists



P2 Physiatry POV

P12 AAP's Statement on Diversity, Equity and Inclusion

P16 Highlighting Women in Medicine

P19 The Energy of Team Sports



University of Alabama at Birmingham



Beaumont Taylor



Geisinger Physical Medicine & Rehabilitation



Hackensack Meridian Health



Emory University



Johns Hopkins University



Medical College of Wisconsin



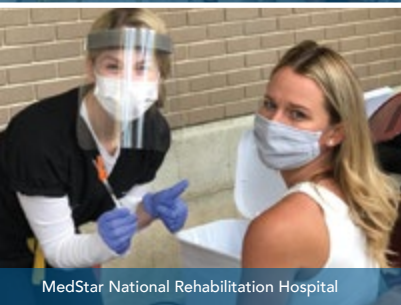
Kessler Foundation

Physiatry POV:

Take a look at what our academic partners and members have been up to recently!



MedStar National Rehabilitation Hospital



MedStar National Rehabilitation Hospital



Spaulding Rehabilitation Hospital



Northwestern University



Schwab Rehabilitation Hospital



Johns Hopkins University



University of Texas Health Science Center at San Antonio



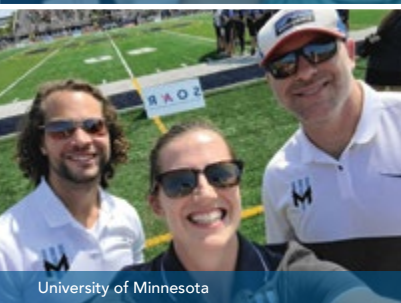
University of California, Davis



University of Miami



University of California, Davis



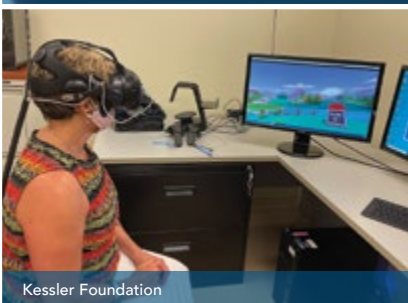
University of Minnesota



University of Pittsburgh Schools of the Health Sciences



Neilsen Rehabilitation Hospital



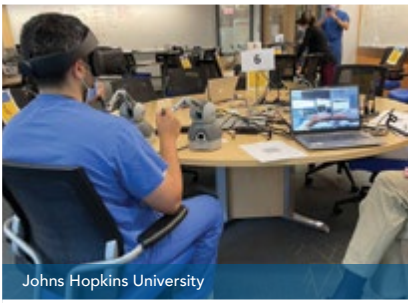
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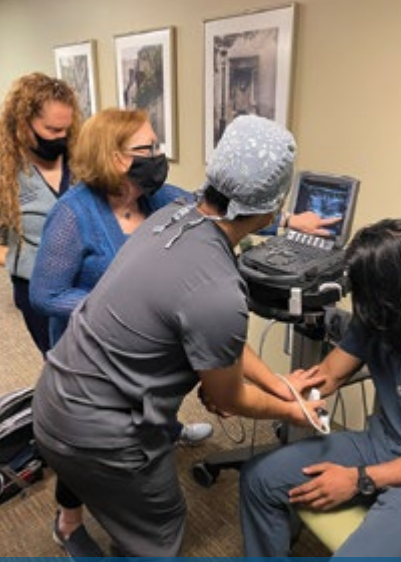
University of Missouri



Mayo Clinic



Johns Hopkins University



Beaumont Taylor



Icahn School of Medicine at Mount Sinai



University of Pittsburgh Schools of the Health Sciences



University of Miami



Spaulding Rehabilitation Hospital



University of Pittsburgh Schools of the Health Sciences



Spaulding Rehabilitation Hospital



Yale University



contents

FALL 2021: INSIDE THIS ISSUE

FEATURES

- 8-9** Connecting Patients and Families
- 11** Adapting Our Perspectives
- 12-13** Public Statement About AAP's Stance on DEI
- 16-18** Highlighting Women in Medicine
- 19** The Energy of Team Sports

REGULAR COLUMNS

- 6-7** Messages from the President & Editor
- 14-15** Words of Wellness
- 20-24** News from AAP Councils
- 25** Rehab Rewind: Road to Chair with David Gater, MD, PhD
- 26** A Sense of Belongings: Yelim Krystal Chung, MD Candidate 2022

ON THE COVER

This picture features one of MedStar National Rehabilitation Hospital's adaptive rowing athletes at the MidAtlantic ERG Sprints competition in Alexandria, Virginia. The Adaptive Sports & Fitness Program at MedStar NRH helps to maximize participation for individuals with disabilities in recreational and competitive sports. Through these programs, participants are able to build self-confidence, improve health and well-being, and gain greater independence.

Cover Photo Credit: Medstar National Rehabilitation hospital.

Physiatry Forward, the AAP's member magazine

Welcome to the fall issue of *Physiatry Forward*!

As we enter the crisp fall season and new academic year, the AAP is proud of our physiatry family adapting to constant challenges and changing environments. Our goal is to not only support you in your academic and clinical careers, but also celebrate your amazing accomplishments.

To that end, there is some incredible content in this issue of *Physiatry Forward*. Our Women in Medicine feature, found on pages 16-18, shines a spotlight on eight AAP female PM&R leaders. The AAP is also proud to introduce our Diversity & Community Engagement Committee. We have assembled a cast of amazing members that will help hold the AAP and academic physiatry accountable as we work to improve diversity, equity and inclusion (DEI). Read the AAP's public statement on DEI on pages 12-13.

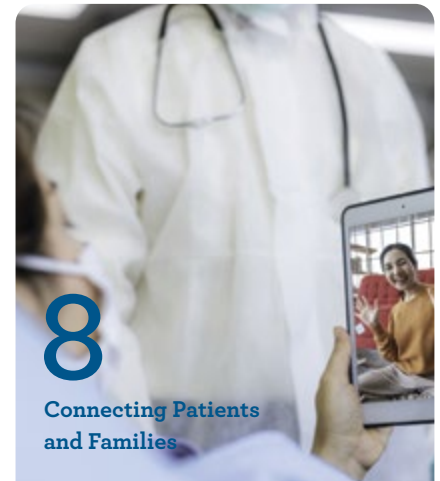
Make sure you check out the recordings from our recent Mid-Year Meeting on our Virtual Campus (campus.physiatry.org) and register for our 2022 Annual Meeting, *Physiatry '22* (www.physiatry.org/2022). It's time for all of us to reunite again (in-person with safety/health protocol, of course).

I want to know about topics you'd like to see, stories you'd like to contribute, and physiatrists you'd like to know. You can send your ideas anytime to tgleason@physiatry.org.

Taylor Gleason

AAP Communications Manager

Physiatry Forward is published four times a year by the Association of Academic Physiatrists (AAP). With a circulation of 2,500, *Physiatry Forward* is sent to active members of the AAP. To view past issues, visit www.physiatry.org/PhysiatryForward. To advertise, contact Taylor Gleason, Communications Manager, at tgleason@physiatry.org.



Connecting Patients and Families



Highlighting Women in Medicine



The Energy of Team Sports

Contribute to our Winter issue of *Physiatry Forward*! Submit your day-in-the-life photo to be considered for our front cover. Send this content and more to Taylor Gleason at tgleason@physiatry.org.



NEW ORLEANS, LA
FEBRUARY 1-5, 2022

We Missed You...

it's time to reunite with your AAP family!

Join us as we come together for an unforgettable experience in NOLA. Physiatry '22 will foster lively discussions, collaborations, new ideas and unprecedented career growth with rehabilitation professionals and peers from all over the country. Immerse yourself in a welcoming and passionate community, experience diverse and interactive educational opportunities, and meet up with new and old friends. We can't wait to see your smiling faces again.

Your Safety is Our Priority

Physiatrists, educators, trainees and researchers are innovating and adapting every day due to COVID-19. There has never been a more valuable time for you to take time for yourself, plug into the latest advances in physiatry, and prepare for the road ahead. As of now, we are confident that by February, AAP will be able to hold a safe and intimate in-person meeting. The AAP is consulting with Hilton, the Center for Disease Control (CDC) and World Health Organization (WHO), our conference management team at ConferenceDirect, the state of Louisiana, and other partners to create and follow health and safety protocols during the Physiatry '22 meeting. This information will continue to evolve leading up to Physiatry '22 and we will keep you updated at every turn. Stay on top of the event's latest news using [#Physiatry22](#), our official event hashtag.

Early Bird Savings

Become a member of the AAP and register by December 16, 2021 to save up to \$300. You will also be entered to win one of two free registrations for Physiatry '23. Join our community for even better rates at www.physiatry.org/join or renew at www.physiatry.org/renew.



Follow us on:



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- @AAPhysiatrists
- aaphysiatrists
- Association of Academic Physiatrists

Register Now

- Visit physiatry.org/2022
- Mail your check (in US dollars)
- Call +1 (410) 654-1000
(credit card payments only)

REGISTER BY DECEMBER 16, 2021 TO SAVE!

FROM THE PRESIDENT

I hope that this finds you well. It has been a year where we continue to feel like we are getting sucker punched with one challenge after another, with the associated emotions of grief, surprise, anger, anxiety, and despair. As we work through these challenges, we become capable of taking on even greater ones. **But we don't do this alone.** We do this within our teams working to support one another. It's why we gather, it's why we connect, and it's why we collaborate. We are all experiencing the casualties of burnout and an unprecedented exodus from health care, leaving those behind even more burdened and stressed. Hence, our efforts to educate and mentor are even more critical than ever, to inspire the next generation of leaders to take on these tough challenges. Be sure to allow every idea to be heard, respected, and supported. **Be sure to check in on your colleagues. Be sure to take a moment to provide a pearl of wisdom, and word of encouragement, or just a simple act of kindness.** It's how we move forward; it's how we get better; and it's why we find value in our AAP family. Here in Pittsburgh, we have adopted a wonderful tradition of starting each meeting with a "win." It is a great way to celebrate what is good, even during tough times. Typically, it is highlighting an academic accomplishment, a clinical success, or a next step of our organizational growth. During a recent meeting, as we started by asking who had a win, there was an awkward pause... Uh oh. No wins? Really? Well, it had been a particularly tough week. Then someone chimed in "I successfully transitioned my daughter to college this week." We celebrated the academic success of her daughter, we consoled her mother who missed her, and we relished in the importance of education.



Gwendolyn Sowa, MD, PhD

As kids are returning to school this fall, and we're considering the importance of not just the content of the teaching but how it is delivered, **I am thankful to have the expertise of our members who are master educators.** Our outstanding educational programs continue to garner much attention as important resources for our field. The AAP's dynamic *Education Committee* led by Michael Mallow continues to push the boundaries of innovation in education, providing resources for students, residents, and educators. Our *READI program* helps to assist institutions in creating novel residency programs in PM&R or expanding or improving existing programs, leveraging the success of our organization to expand academic psychiatry as we continue to work with the *ABPMR* and *AAPMR* on GME initiatives. Our *RREMS* program persevered and provided nine students with summer experiences at six sites this summer. Attending to the importance of education globally, the newly formed *Global Academic Psychiatry Subcommittee*, led by Mooyeon Oh-Park, has continued to work on engaging speakers and expanding education on an international level, and this work seems more important than ever. The *Program Subcommittee*, led by Alex Moroz, is planning a stunning line up for our 2022 Annual Meeting. We look forward to a dynamic program with top notch speakers and topics. The AAP will be helping ABPMR celebrate 75th years of psychiatry in 2022. We'll be kicking off the celebration at Psychiatry '22 in New Orleans so be sure to register and join in on the fun! Our educational mission is stronger than ever, and we remain nimble and adaptable as psychiatrists uniquely do. I look forward to connecting with you, learning from you, collaborating with you, and being inspired by you at our annual meeting. **Bring your "wins" to Psychiatry '22 (February 1-5, 2022) for all of us to celebrate.**

I CAN'T WAIT!

Sincerely,

A handwritten signature in black ink, appearing to read 'G Sowa'.

Gwendolyn Sowa, MD, PhD
Department Chair, University of Pittsburgh Medical Center
Director, UPMC Rehabilitation Institute
President of the Board, Association of Academic Psychiatrists

FROM THE EDITOR

Trust: The Bedrock for Teamwork

A colleague asked me recently if he should approach his supervisor about a promised resource on his employment contract or if he should just keep quiet and “not rock the boat.” My first inclination was to tell him that if it is in the contract, then he should be entitled to that resource and so he should bring it up with his employer. Upon reflection however, it dawned on me that perhaps the real issue is whether or not his relationship with his supervisor is based on **trust**.

In some relationships, a handshake is more important than a signed agreement. An example of this is the diamond industry in which deals are often made with just a handshake. Trust and the threat of expulsion from that community result in a more efficient enforcement operation than governmental court proceedings.¹

Clinical care in many ways is more dependent on trust than diamond transactions. For example, the patient that enters an exam room is trusting that the healthcare provider will keep the patient’s health interest ahead of the provider’s self-interest. The learner who is rotating with a faculty member is trusting that the faculty member will put the learner’s educational experience in front of service demands. The employee is trusting that the employer will honor the spirit of the contractual agreement without attempting to find legal loopholes. A breakdown of trust in these relationships has dire consequences for all involved. Patients may not return for needed follow-up care, learners lose their motivation to seek knowledge, employees become demoralized and leave the organization, and employers lose the opportunity to retain valued staff.

In Physical Medicine and Rehabilitation, we pride ourselves on the collaborative process in caring for our patients.

While trust is the pivotal element to foster accountable and collaborative teamwork, strong communication is the catalyst to break down the differences and synthesize them into collective, patient-centered goals. Since trust is earned, effective interprofessional collaboration with colleagues outside our own field can be initiated through the understanding of other professions’ roles.² **Trust** can be further developed by the sharing of perspectives in daily practices. Optimal patient care relies on our acknowledgment of interdependency,² and our mutual trust for each other’s expertise and contributions.

For my colleague, my advice ultimately was for him to speak with his supervisor and discuss why that resource is important and how he would use it for the benefit of patients and the institution.

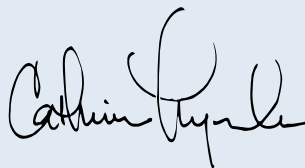
EPILOGUE

My colleague informed me that the requested resource was eventually granted to him because his supervisor trusted that he would make good use of it to benefit his department and his patients. He reiterates that he would **continue to nourish this hard-earned trust**.

Sincerely,



Sam Wu, MD, MA, MPH, MBA
Department Chair at Temple University
Editor-in-Chief of *Physiatry Forward*



Co-authored by Catherine Tsang-Wu, OTD, OTR/L, CBIS
Occupational Therapist at the Centre for Neuro Skills



Sam Wu, MD, MA, MPH, MBA



Catherine Tsang-Wu,
OTD, OTR/L, CBIS

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2. Morley L, Cashell A. Collaboration in Health Care. *J Med Imaging Radiat Sci.* 2017 Jun; 48(2):207–216. doi:10.1016/j.jmir.2017.02.071.

Connecting Patients and Families

By: Marc Levine, MS1; Meloria Hoskins, MS1; Sevan Yedigarian, MS1;
Nathan Cannon, MS1; James Mellen, MS1; Nancy Lokey, RN, CRRN, CBIS;
Tanya Shaw, Med; Natasha L Romanoski, DO and Lori Grafton, MD

First year medical students and their first patient contact: a true rehab experience!

In Physical Medicine and Rehabilitation (PM&R), we see patients who have life changing injuries and illnesses who depend on support from family, friends and staff during their acute inpatient rehabilitation stay. Some recover with minor impairments, while others learn to mobilize from a wheelchair and use adaptive equipment to complete self-care. Having someone to share their story with can make the patient experience a positive one.

At Penn State College of Medicine (PSCOM) the Patient Navigation Program is a curriculum integrated into the first year of medical school. **The program provides the opportunity for students to work with a multidisciplinary team while developing a therapeutic relationship with patients and families.** This is achieved by helping the patient navigate the complex healthcare system and identifying community resources to mitigate potential barriers. The program has also served as a platform for patients to share their story with students early on in their career. This perspective allows medical students to gain insight into the healthcare system and the complexities patients face during hospitalization or illness.

During the COVID-19 pandemic, our hospital system, like many others, was forced to place restrictions on visitation. These restrictions led to disruptions not only with patient and caregiver support systems in acute rehabilitation, but significantly limited the opportunities within the Patient Navigation Program. After nearly a year of navigating the pandemic, our new first year navigators were only a few months into their first year of medical school and they were eager to ponder creative solutions.

In January 2021, our students in the Patient Navigation Program were approved to return to the clinical environment. **For these first-year students, this was their first experience with patient care contact and within a week, we had 5 students who were passionate about helping patients and their families cope in such unprecedented times.** These students developed and launched "Connecting Patients and Families" in early 2021. This program aimed to provide a structured way for students to step in and connect hospitalized patients with their families or caregivers via synchronous audiovisual technology. The program was entirely led and executed by first year medical students with the support of the Penn State Department of PM&R and the Penn State Health Rehabilitation Hospital (PSRH).

The student navigators approached every patient in the rehab hospital to offer them the program (with the exception of active covid positive patients due to isolation restrictions for students). Student navigators organized emails & zoom links to make sure all patients who wanted to share in this opportunity were able to do so. **Medical student volunteers came in the evenings from 4 to 6pm to complete the virtual visitation for the patients and families which allowed students to maintain current classroom work, while also allowing for community involvement during a time when many wanted to help but weren't sure how.** The students organized all aspects of program design which

This program aimed to provide a structured way for students to step in and connect hospitalized patients with their families or caregivers via synchronous audiovisual technology.

included creating a "how to" video for student volunteers in understanding the PSRH check-in, signing out an iPad, and how to complete the visit with the patient and family. Our students also developed a recruitment process for students, patients and families as well as a scheduling process for each encounter.

Given the successful implementation of this project, our students then gained experience in turning this into an IRB-approved research project with the aim of determining feasibility and impact of such a program. **The program is now being passed on to the next class of patient navigators and our patients and families continue to be virtually connected through the selfless act of our students.** Despite visitation returning to normal, we continue to have patients who either do not have access to an audiovisual device or cannot physically use their devices and coordinate time with their families. Our students continue to mitigate such barriers for our patients, a true patient navigation experience.

THE STUDENT PERSPECTIVE



"The patient had been admitted to PSRH for several weeks and was unable to visit with his friends and family due to the visitation restrictions. When I walked into the room to set up the video call, I noted he was quiet, made little eye contact and had somewhat of a frown. I sat outside the room for the entire phone call except to

aid him during technical difficulties, in order to provide privacy. When the 30-minute virtual encounter came to an end, I walked into the room, and he smiled at me! I smiled back. We shared a moment of silence while I disconnected the call. He was cheerful after being able to speak with his family members. He asked when he could do it again with a smile on his face! This was a moment I will never forget!"



This program has been a win, win for everyone including patients, families, staff, students, providers, leadership and more! The patients were able to visit with family or other support persons, families were able to help support their loved ones & nursing staff had some relief as this created a diversion for the patients. As students, we showed creativity and demonstrated the ability to work together to develop an initiative to have hands-on, in-person contact with a patient, while maintaining safety precautions. Many students were surprised to see how impactful a virtual visit could be.

Families and patients alike expressed gratitude for being able to have the visit to provide (and receive) support. Additionally, this gave us an opportunity to gain experience in the Internal Review Board (IRB) process including how to utilize clinical opportunities for research. We hope this program continues to benefit our patients and families in the future, even beyond a pandemic.

Out of a difficult situation, there is always a positive, if one chooses to see it. We made what we had work to benefit all... A true rehab experience in unprecedented times!

Johns Hopkins Rehabilitation Network

Your Team for Sports Rehabilitation

The Johns Hopkins sports rehabilitation program is comprised of board-certified sports medicine physiatrists and sports medicine physical therapy specialists who are current and former athletes with a deep understanding of how sports injuries happen. Our team is trained to help athletes recover from an injury, recognize risk factors and improve athletic performance, using the most current research and technology to help ensure an optimal and safe return to activity.

Training the Next Generation of Experts

Sports Medicine Fellowship Program

Our one-year, ACGME-accredited program offers a broad-based sports education in diagnosing and treating nonoperative sports conditions, including extensive use of diagnostic and interventional musculoskeletal ultrasound. Fellows work closely with faculty members from various sports medicine disciplines including primary care, interventional pain, orthopaedic surgery and physical therapy.

Sports Physical Therapy Residency Program

Our sports medicine physical therapy residency program provides trainees with the clinical experience, mentorship and knowledge needed to become well-rounded, board-certified sports clinical specialists. With over 1,000 hours of collaborative evidence based clinical practice, trainees learn to deliver the highest quality care to athletes of all ages and competitive levels.

TEAM NEWS



Pictured From Left: Johns Hopkins sports medicine physiatrist, Mo Emam, at the 2020 Tokyo Olympics taekwondo medal ceremony, with Hedaya Malak, Egyptian bronze medalist and former student. Emam provided medical team support at the Olympics.



Adapting Our Perspectives

By Courtney Reid
AAP Medical Student Council Member

My first experience with adaptive sports wasn't a typical experience. Growing up, my grandpa volunteered as a clown for Shriner's Hospital for Children and one of the events he attended every year was the Special Olympics.

At this event, he brought red noses for the kids to wear, which of course is a clown's signature look. Each year, he came home gleaming about how much fun he had bringing silliness and joy to kids. His only complaint was that he had to order more red noses each year because of their popularity. Finally, I decided I needed to come with him and see what it was all about. Even though this was many years ago now, I can still picture the atmosphere and how excited all the athletes were to be competing. Many of them train all year for this event—you could sense the competitive and athletic spirit in the air. Nobody there saw their disability as a disadvantage, but rather something to celebrate. **Working at this event led me on the path to more volunteering in adaptive sports, such as hippotherapy, adaptive gymnastics, adaptive skiing and adaptive kayaking.**

This past summer, I suddenly had two weeks off before my next clinical rotation. A few weeks prior, a friend had sent me an email about a camp in Chicago for kids with disabilities, but since I didn't even live in that city, I didn't think it was a possibility. Luckily everything lined up and I was able to go and volunteer at CAMP Schwab. The word CAMP in this case stands for Children with Adaptive Mobility Play. For me, this meaning for the word began to become clearer as the week went on. Although some of these kids with cerebral palsy and spina bifida look different than other kids, it doesn't mean they were any different on the inside. They listen to the same music and talk about the same pop culture (even though I'm now too old to understand any of these references). With a team of physical therapists, occupational therapists, doctors, medical students and other volunteers, this camp enabled these kids to participate in activities they might have not even imagined possible. They were able to safely horseback ride, swim, kayak, rock climb and ride roller coasters. By holding camps like these, the kids were empowered and given the opportunity to do anything they can put their minds to. One

young boy with hemiplegia was able to climb up a rock wall faster than most people would be able to. To me, the huge smile on his face as he hung from the top of the rock wall symbolized what that whole week was all about. Sure, he may have required some modifications, but that didn't stop him from accomplishing anything he set his mind to. He is stronger, both mentally and physically, than most kids without any physical disability as a result of the obstacles he has overcome.

It has now been three weeks since this camp ended, and I am still finding sand in my hair and trying to catch up on my sleep. Although these small problems will eventually go away, luckily the lessons I learned and the memories I gained never will.

As a medical student, I think my time volunteering in adaptive sports has given me a new perspective. Instead of just seeing children with cerebral palsy in the clinic, I saw these kids living life and doing amazing things. I now know all the things that are possible for them in the world, which allows me to see their disabilities differently in a medical setting. I don't choose to see past their disability—I acknowledge it. I acknowledge that they may have to do some things differently in this world, but as a future clinician, that gives me the challenge to figure out how to make it happen. Whether that be giving them more function in their hands or feet or by educating them on different sports available to them, I want to listen to them in clinic and hear what matters to them most. Personally, I plan on continuing to volunteer at more adaptive sports events, Med Fest Events with Special Olympics and any other opportunity that presents itself so I can be a constant learner and improve the future care I provide.

I encourage and challenge all medical students to volunteer at an adaptive sports event at some point in their career. Not only will you feel empowered by watching the tenacity of these athletes, but you will become a better clinician because of it.

Public Statement About AAP's Stance on DEI

AAP is committed to Diversity, Equity, and Inclusion (DEI) and stands beside all of our members in denouncing racism and discrimination. Here's how AAP's Diversity & Community Engagement Committee is making a big impact:

The Association of Academic Physiatrists (AAP) strives to be an organization where all members collaborate to support one another and to deliver the best care to vulnerable patients. The AAP is committed to building a community within and around the field of PM&R that is diverse across many dimensions including but not limited to age, race, ability status, gender identity, sexual orientation, ethnicity, nationality, professional experience, veteran status, religion, socioeconomic status, education, and other distinctive characteristics. Beyond diversity, AAP aims to foster a culture where every member feels valued, supported, and inspired to achieve individual and common goals as a critical foundation to providing equitable and state-of-the-art care for our patients.

As an organization working to become diverse, equitable, and inclusive, AAP members will be expected to be open-minded, continue to practice respectful conversations, and create the necessary space where everyone can feel safe to be authentic and open to each other's identities and perspectives.

DEFINITIONS

DIVERSITY includes but is not limited to age, race, ability status, gender identity, sexual orientation, ethnicity, nationality, professional experience, veteran status, religion, socioeconomic status, education, and other distinctive characteristics. It also includes differences in background, thoughts, values, and ideas.

- Embracing diversity makes us better learners, providers, leaders, scholars, and advocates.

EQUITY requires providing justice and fairness in access to opportunities and resources for all members of the community.

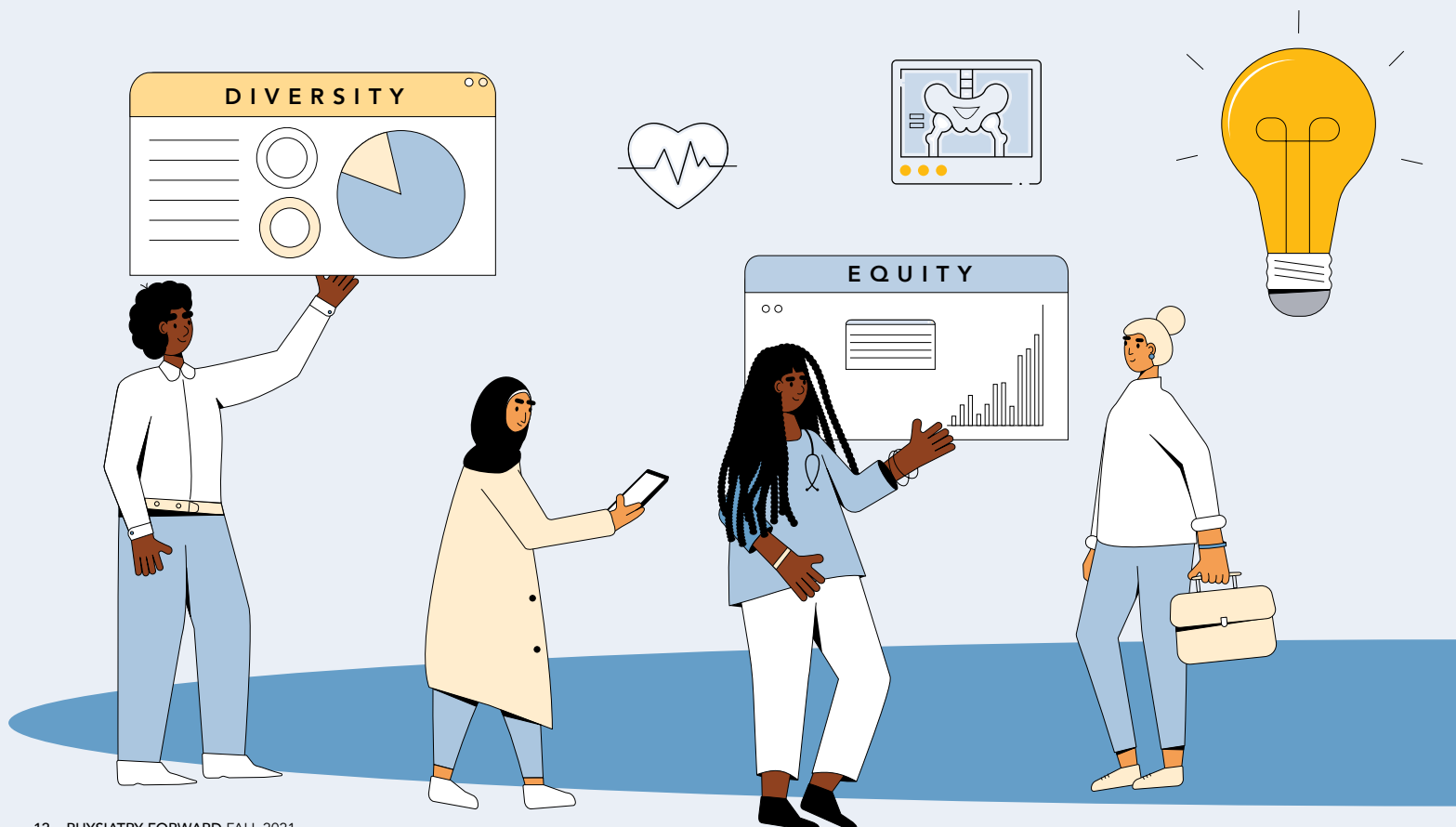
- We aim to nurture a cooperative, caring, and goal-oriented organization focused on reducing disparities in opportunity for historically marginalized and/or underrepresented groups within the community and on reducing healthcare disparities.

INCLUSION encompasses assuring everyone feels welcomed and that diverse stakeholders have an active role in shaping the organization.

- Our aim is to foster a culture where every member of AAP is encouraged contribute their unique wisdom, perspectives, and experiences.

JUSTICE embodies dismantling barriers to resources and opportunities so that all individuals and communities live with a right to a safe, healthy, productive, and sustainable environment.

- We aim to acknowledge injustices and provide for personal and community empowerment.



OUR GOALS

The AAP aims to embody an anti-racist, diverse, equitable, and inclusive organization in order to:

- 1 Foster a welcoming environment, safe space, and community for physiatry professionals of varied backgrounds to share experiences, find mentorship, grow personally and professionally, and make deep connections.
- 2 Work with other AAP committees to promote greater representation of diverse perspectives in all levels of leadership and participation in the society.
- 3 Serve as a resource for information on diversity and equity issues, leadership training, workshops, etc., especially for leaders and PM&R departments.
- 4 Actively address barriers to recruitment and retention of underrepresented minorities in PM&R (URiMs), including but not limited to people of color, women, LGBTQIA+-identifying individuals and people of all abilities.
- 5 Reduce health care disparities in rehabilitation medicine.

STRATEGIC APPROACH

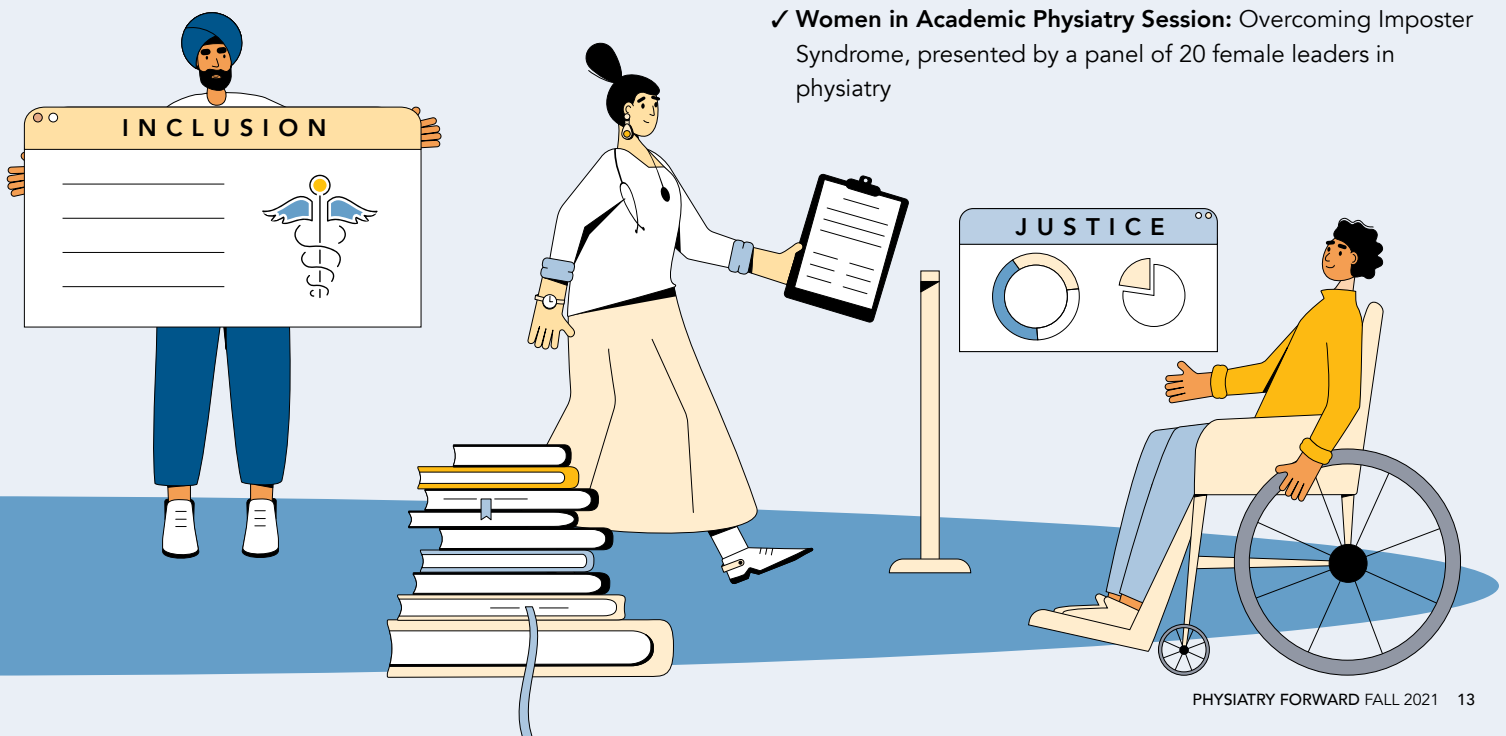
To achieve these goals, the AAP will pursue the following:

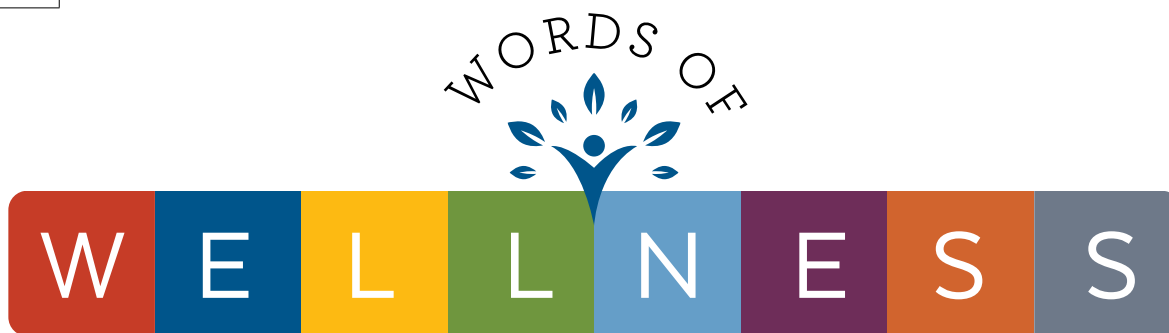
- 1 Identify effective approaches for achieving safe, inclusive environments, and safe reporting systems
- 2 Actively and regularly evaluate its progress and solicit feedback
- 3 Establish a Diversity & Community Engagement (DCE) Committee that will advocate, guide, and promote DEI initiatives

AAP'S DIVERSITY & COMMUNITY ENGAGEMENT COMMITTEE

Current initiatives to enhance diversity, equity and inclusion (DEI) at AAP and academic physiatry:

- 1 **Help Us Learn How Physiatry is Becoming More Diverse** – launched a campaign to collect meaningful diversity member data so we can learn how AAP and academic physiatry are becoming more diverse over time and identify opportunities to help.
- 2 **Equity Matters** – actively participating in ACGME Equity Matters, an initiative that supplies a framework for continuous learning and process improvement in DEI and anti-racism practices to drive change within graduate medical education (GME).
- 3 **Resource Hubb** – AAP's Diversity & Community Engagement Webpage is designed to serve as a hubb for internal and external DEI resources, news, and updates surrounding ongoing committee projects and activities.
- 4 **DEI Curriculum** – a collaboration with AAP's Residency & Fellowship Program Director (RFPD) Council to create a DEI curriculum for PM&R residents.
- 5 **DEI Educational Sessions** – join us at Physiatry '22, the AAP Annual Meeting, February 1-5, 2022 in New Orleans
 - ✓ **RFPD Presentation:** Evidence-Based Practice for Recruiting Diverse Applicants to PM&R Residency, Monica Verduzco, Gutierrez, MD, William Filer, MD
 - ✓ **RFPD Presentation:** Introducing a DEI Residency Curriculum, Sheital Bavishi, DO, Monica Verduzco-Gutierrez, MD
 - ✓ **Program Coordinator Session:** Disability as Diversity, Nicole Taylor, DO
 - ✓ **Plenary Session:** A Voice for Health Equity, Andres J Gallegos, Esq., Chairman for the National Council on Disability
 - ✓ **Women in Academic Physiatry Session:** Overcoming Imposter Syndrome, presented by a panel of 20 female leaders in physiatry





Welcome to your quarterly Words of Wellness, a column dedicated to giving you resources and inspiration to intentionally practice wellness and encourage your peers. These features are brought to you by the AAP's Resident/ Fellow Council Well-being Subcommittee. If you would like to contribute to this column, contact our new Subcommittee Chair, Theodora Swenson, MD, at theodora.tran@vumc.org.

FEATURED WORKOUT



The plank is a way to get a great workout, even with just a few minutes to spare. Success is in the details! Establishing proper alignment in a neutral spine position sets the foundation for optimal core activation. Here are some tips to breakdown the plank to meet all fitness levels and ways to progressively add challenge. Have fun!

LEVEL ONE: QUADRUPED/BIRD-DOG

Place your hands under shoulders and knees under hips. Set a strong upper body by pulling the lower part of your scapula towards the middle part of your back. Feel your chest lift in this position. Rotate your elbows towards each other to activate your latissimus dorsi. Set a strong abdominal brace by taking a deep breath in, and on the exhale gently pulling your belly button in towards your spine. Squeeze your glutes. Maintaining this position, try extending one leg or one arm. If you feel strong, try one arm and opposite leg at the same time! Then switch.

LEVEL TWO: PLANK ON KNEES

Place elbows under shoulders and knees on the ground so that your head, buttocks, and knees are in one straight line. Set your foundation as described above. To intensify this position, pull your elbows towards your knees and feel your entire midsection crunch like an accordion.

LEVEL THREE: PLANK WITH ALTERNATING KNEE TAP

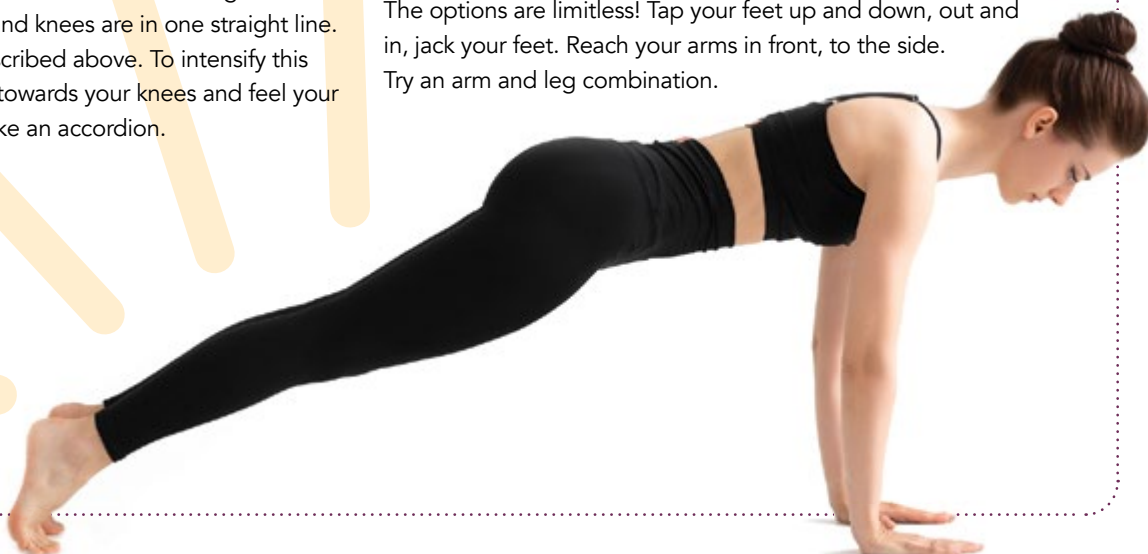
From level two, add an alternating knee tap. Extend one leg pressing your heel back, squeezing your glutes and quads. Then switch. The key is to keep your body completely still so that only your knees are moving.

LEVEL FOUR: PLANK ON TOES

NOW it's time to pop up on your toes! Extend both legs so your body is in one straight line... and HOLD! And breathe. And when you feel your technique slipping, drop down to a previous level to maintain perfect form. If you need more, pull your elbows towards your knees as you practiced in level two.

LEVEL UP: PLANK WITH ARM OR LEG VARIATIONS

The options are limitless! Tap your feet up and down, out and in, jack your feet. Reach your arms in front, to the side. Try an arm and leg combination.



PODCAST REVIEW



REVIEWER: DR. OLGA KOMARGODSKI

Doctors and Litigation: The L Word<https://feed.podbean.com/thelword/feed.xml>

The word "Litigation" is stress-inducing for most physicians, yet the topic is largely taboo. We spend so much time preparing ourselves to face critical situations in the clinical environment, but we are so vulnerable when lawyers are involved. Yes, good doctors can get sued. This podcast shares stories of physicians, explains the process, and provides valuable resources. It tackles the sensitive topic of physicians feeling isolated and the emotional impact of being involved in a lawsuit. Let's talk about litigation in the open and create a network of support.



FEATURED RECIPE

**Salted-Caramel Banana Ice Cream**

CHEF: THEA L. SWENSON, MD

Here is a simple and healthy way to enjoy your favorite summer dessert, with or without an ice cream maker!

INGREDIENTS

- 5 bananas, peeled and chopped into chunks
- ½ cup coconut milk or almond milk
- 1 tsp vanilla extract
- 14 whole dates
- ½ tsp sea salt



INSTRUCTIONS

- Place the bananas, peeled and chopped into chunks, into a ziplock bag and freeze for at least 6 hours.
- Meanwhile, blend the dates and sea salt in a blender until smooth like caramel. Remove and set aside.
- Once frozen, blend the bananas with the milk and vanilla extract in a blender until smooth.
- Using a mixing spoon, stir the caramel mixture into the frozen banana mixture which should now have the consistency of ice cream.

SCOOP, SERVE, AND ENJOY!

RESIDENCY WELLNESS INITIATIVE

**Wellness Event**

On the evening of August 12th, the AAP Wellness Subcommittee hosted the first virtual event of the season. After speaking with many AAP members, we learned that there was a degree of anxiety many of us were facing with new career transitions. We felt it was important to discuss prioritizing their personal wellness, despite the additional stress or responsibility that was coming. Out of this, this first wellness event was born. The group had a productive session, and received wisdom from Drs. Aaron Yang, Olga Komargodski, Tracey Isidro, Stacey Isidro, Jessica Beardsley, and Deanna Claus. We thank everyone for their participation and we look forward to hosting our next wellness event!

BOOK REVIEW

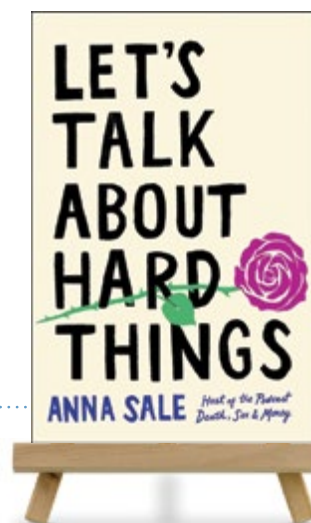


REVIEWER: DR. HARMAN GREWAL

***Let's Talk About Hard Things* by Anna Sale**

Anna Sale's book distills the lessons she has learned over the last seven years as podcast host of "Death, Sex, & Money." She offers wisdom for navigating the topics many of us shy away from - death, sex, money, family, and identity. On the importance of learning these skills, she says, "to feel someone listening to us is to feel deeply respected."

As you read this book and progress through the chapters, she suggests behaviors and simple, clear phrases in action. The power of simply talking about things can allow us to move forward and have dialogue that does not end just shy of real connection. This book is a great read for those who are not intuitive listeners, who need extra help in overwhelming conversations, or anyone who feels they are improvising in these discussions.



HIGHLIGHTING

WOMEN IN MEDICINE



Women in Medicine: AAP's 2021 Features

September is known as the American Medical Association's (AMA) Women in Medicine Month. To celebrate the importance of current and future female physicians, we spent the month spotlighting eight fantastic female AAP members who are leading the way in the future of psychiatry:



**Carol Vandenakker
Albanese, MD**

"I entered the field of medicine in a different era. Medical school classes were about 10% women and what we would now label sexual harassment was quite common. Very few leadership positions were held by women and mentors were scarce. Fortunately I was able to establish relationships with academic leaders from around the country through attending AAP meetings..."



**Glendaliz Bosques,
MD, DAAP**

"I can be passionate — very — for things that are important for me. Sometimes as I advocate, I am perceived as bossy or aggressive, instead of assertive. Most of my male colleagues don't need to deal with these passing judgments from patients and staff."



Sarah Eickmeyer, MD

"When the signs and symptoms of burnout start to appear, it is vital to recall which activities fill your cup with joy and which activities drain your energy. Seek career opportunities that bring joy!"



Laurie Louissaint, MD, MS

"For any young women joining medicine: be unapologetic about what drives your passion. Obstacles and even failure will come your way but always remember your WHY. Look for people who have accomplished things that inspire you and pick their brain. Having a mentor is so important. You are not alone!"



Shanti Pinto, MD

"Females were not as encouraged to pursue STEM careers when I was growing up. I had developed a strong interest and aptitude in Mathematics very early in grade school and remember being encouraged to focus more time in subjects like English or Reading because *those were the subjects for girls...*"



Michelle Poliak-Tunis, MD

"I think the biggest barrier for women in medicine is the constant need to prove to patients and occasionally support staff that *I truly am the physician...* I found the need to always make sure I introduce myself as Dr. Poliak when in a room as if not, it was regularly assumed that I wasn't a physician."



Monica Rho, MD

"I find that it is necessary to put my face and name out there as a female sports medicine psychiatrist so that we can break stereotypes of who can be a head team physician and show a younger generation of women what we can really do!"



Dorothy Tolchin, MD, EdM

"I find it deeply satisfying to extend the impact of my role models by sharing forward the wisdom and qualities they have shared with me. I see it as a tribute to my parents when my kids see possibility in every human being they encounter; a tribute to my career advisors when medical students and residents entrust me with a heart-to-heart about their family and career planning."

VISIT WWW.PHYSIATRY.ORG/NEWS/ TO READ ABOUT EACH OF THESE WOMEN. HEAR ABOUT THEIR EXCITING, IMPACTFUL CAREERS IN THEIR OWN WORDS.

WOMEN IN MEDICINE

Twitter Campaign Spotlight: Give Her A Reason To Stay

While Twitter was buzzing with #WomenInMedicine, a related campaign shone through the masses with a distinct and powerful message: "Give Her A Reason To Stay in Healthcare." You couldn't help but notice the strong support by healthcare professionals across the globe, often in the form of a tweet with the hashtag #GiveHerAReasonToStay accompanied by a selfie or group photo. The subjects of the photos donned masks with the same imploring message, #GiveHerAReasonToStay." AAP member, Dr. Julie Silver creates a national campaign annually, focusing on supporting women in medicine as part of the Harvard Medical School women's leadership course that she directs. To learn more about this program, visit <https://womensleadership.hmscme.com/course-overview>.

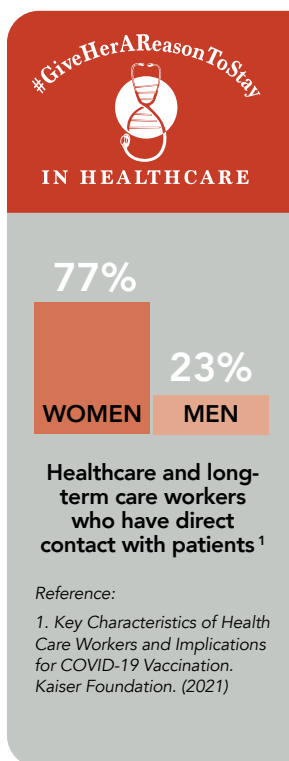
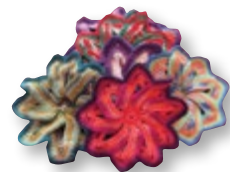
Dr. Silver shared more with us about the effort:

"My idea for the campaign theme this year really came from the challenges of the pandemic which has put an additional strain on women in medicine due to a variety of factors including that they have less protected administrative and research time and they tend to have more responsibilities at home, especially with caregiving for children and elders.

THE CAMPAIGN IS FOCUSED ON TWO THINGS:

- 1) Raising awareness about how many women are leaving or thinking about leaving the workforce
- 2) Taking action now to encourage women to stay

I have personally taken action in a number of ways. For example, in January 2021, I created a formal mentoring group called Women In Academia Valuing Equity (WAVE). The group has 4 women who are in medical school or internship and will be future physiatrists, and one who is an early career physiatrist. For the WAVE group, I have taken numerous specific actions to support them. These include inviting colleagues to mentor them in writing letters to the editor about research studies (they have published approximately 20 letters to the editor)—which teaches them how to weigh in on the science and raise their voices. I have also secured funding for a retreat for them, and my mom has crocheted them beautiful doilies. Basically, what I am saying is that many people from many walks of life have an opportunity to support women in medicine, and we need to strategically obtain that support as it is critically important to our healthcare workforce—patient care, advancing science, and training the next generation."



DID YOU KNOW:

Compared to their male colleagues, women in medicine:

- Were the majority of front-line health workers during the pandemic and had higher rates of COVID-19 infection
- Are not paid or promoted equitably and report high rates of sexual harassment at work
- Are encouraged to take on "citizenship" duties at work and are "voluntold" to serve on committees and engage in other unpaid work
- Continue to have more responsibilities at home for childcare and elder care

WHAT CAN EMPLOYERS DO?

- Pay her fairly
- Promote her now
- Give her a grant or other funds to support her work
- Sponsor her for a specific career opportunity
- Ensure she has appropriate time off to care for herself and her loved ones
- Offer childcare
- Provide a safe and harassment-free workplace

WHAT CAN COLLEAGUES, PATIENTS, AND OTHER INDIVIDUALS DO?

- Nominate her for an award
- Invite her to be a co-author or speaker
- Cite and disseminate her research
- Thank her for her commitment to excellent patient care
- Write a positive online review or send a note to her boss
- Find thoughtful ways to tell her the work she does is important

ON SOCIAL MEDIA USE THE HASHTAGS #GIVEHERAREASONTOSTAY AND #WOMENINMEDICINE TO JOIN US, FOLLOW ALONG, AND SPREAD THE WORD!



The Energy of Team Sports

By Louis Nikolis, intern at AMITA Saint Joseph Hospital, entering into PM&R Residency at the University of Colorado next year

I could feel the energy. It was the same energy I felt when my mom signed me up for a basketball team when I was 7 years old. It was the same energy I felt as a senior in high school when I walked onto the court with my teammates. It was the same energy that I still feel when the ball rolls off my fingertips and falls through the net. Basketball just has a certain energy, and as I walked into the gym at the Second City Showdown Wheelchair Basketball Tournament, I felt it.

The “energy” of team sports has always provided me with a constant source of camaraderie, stress relief, and positivity. While my experiences are simply anecdotal, the benefits of participation in team sports have been well-established through research. **Studies have shown that participation in team sports is associated with reduced risks of anxiety, depression, and feelings of hopelessness.**¹ Moreover, team sports are associated with feelings of social acceptance and decreased body dissatisfaction.² Overall, participation in team sports is associated with improved quality of life.³ Although research may not discuss the “energy” of team sports, the data certainly suggests that they have influential power.

As individuals with disabilities suffer proportionately higher levels of

depression, anxiety, and social isolation, **adaptive team sports offer a unique opportunity to combat that.** Research has shown that individuals who participate in adaptive sports have lower rates of anxiety and depression.⁴ Additionally, these individuals tend to have a higher quality of life satisfaction.⁵ In addition to the benefits on mental health, participation in adaptive team sports can induce beneficial changes on physical health. One study in particular showed that competitive wheelchair basketball participants showed better physiological well-being and social skills than non-participants.⁶ Further, adaptive athletes have been shown to have a higher level of functioning with regards to activities of daily living.⁷ These individuals also tend to have improved cardiovascular endurance and strength.⁸ These findings speak to the energy of adaptive team sports.

As we often become encompassed by the specific details of our patients’ medical management, it is important to take a step back and evaluate the patient as a whole. What recommendations could improve our patient’s quality of life? Is there something that could influence several components of one’s health? **Although we may not be able to write a prescription for “participation in team sports” and participation may not be possible for all**

patients, we can certainly encourage it in the proper circumstances. Therefore, it is our responsibility to learn about the resources for team sports available in our community. In doing so, we have the opportunity to inspire a sense of “energy.”

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NEWS FOR DEPARTMENT CHAIRS & DIVISION CHIEFS

www.physiatry.org/ChairCouncil



By Sara Cuccurullo, MD, Clinical Professor and Chairman, Residency Program Director, Rutgers-Robert Wood Johnson Medical School/JFK Medical Center Medical Director, VP, JFK Johnson Rehabilitation Institute and Chair of the AAP Chair Council

The Covid-19 vaccine is available to Americans across the country. This amazing scientific advancement for a while, quelled the swell of Covid across America. Unfortunately, the newest development is the emergence of the Covid-19 Delta variant, with other variants already being identified. This has everyone on high alert as we enter into fall. The executive members of the Chair Council are hoping that you and your family, staff and patients are all doing well.

The upcoming AAP National Chair and Administrators meeting for Physiatry '22 in New Orleans is being held February 2nd and will cover the following topic; "Supporting Department Financial Health through Philanthropy and Other Creative Solutions." The session will include a presentation and discussion with administrative directors and department chairs addressing successful strategies for supporting department financial health through philanthropic support and other mechanisms. Since Academic physiatry programs increasingly rely on clinical revenue to fund mission-based activities this topic, as every Academic department is dealing with the fall out of the effects of the Covid-19 pandemic, and philanthropy has become increasingly relevant. As financial challenges mount department chairs and administrators must find alternative sources of financial support in order to succeed. It has been identified that departmental leaders need effective skills, strategies, and knowledge **as well as creativity and courage** in order to implement successful alternative funding mechanisms. This problem exists amongst PM&R Chairs and Administrators due to lack of resources and lack of strategies to apply knowledge to practice. Learners will address the following through the program:

1. **Discuss trends and causes of academic department financial stress**
2. **Identify characteristics of successful philanthropy and other funding programs**
3. **Apply new skills and knowledge to develop an effective philanthropy or alternative funding strategy.**

In short, Department Chairs and Administrators will learn from peers and expert panelists regarding philanthropy and other creative funding strategies. The course moderator and director

will be David P. Steinberg, MD. The entire Chair Council executive leadership hope that you can join us for this valuable course.

Thanks to all of you that led and participated in The Burnout and Wellness Survey 2020. Presently the Chair Executive Council and the members of the Burnout and Wellness Committee are in the process of writing up a synopsis of the results of this national survey.

In addition, the American Board of Physical Medicine and Rehabilitation (ABPMR) requested the Chair Council to develop a Performance Improvement Project on Wellness, which we recently submitted. We were grateful to collaborate with the ABPMR on this important initiative.

Other activities include expanding the collection of the Webinars for the Chair Council. The more recent **Chair Council Podcasts** include;

- **Leveraging Electronic Health Records for Research Purposes.**
Lyn Weiss, MD interviewed Andrea Cheville, MD
- **Managing People: The Most Difficult Part of Your Job.**
Diane Braza, MD interviewed James McDeavitt, MD
- **Show me the Money.** David Steinberg, MD interviewed Greg Worsowicz, MD
- **US History of PM&R.** Sara Cuccurullo, MD interviewed Betsy Sandel, MD

Finally, "The Chair Council Email Chain" initiated a national department "Lecture List" which started in November 2020. Each department was asked to list out lecturers from their department that would be available for virtual lectures (Grand Rounds) at the national level. This list has generated significant interest by PM&R Program Director's nationwide to help them enhance their academic curriculum. We would like to thank Candace Street for help with the organization of this resource.

The Executive Council is wishing you all Safety and Health.

Thank you,

AAP Executive Council Members;

Diane Braza, MD - Past Chair
Sara Cuccurullo, MD - Chair
Lyn Weiss, MD - Vice Chair
David Steinberg, MD - Secretary

NEWS FOR RESIDENCY & FELLOWSHIP PROGRAM DIRECTORS (RFPD)

www.physiatry.org/RFPD



By: Miguel Escalon, MD, Vice Chair and Residency Program Director at Mount Sinai and Vice Chair of the AAP's RFPD Council

Dear AAP Community,

As we embark on another residency and fellowship interview season there is as much excitement in the air as there is uncertainty. The only thing we know for sure is that the future of psychiatry is bright. Year over year more and more talented young trainees graduate to join our Psychiatric ranks and more and more gifted medical students match into our wonderful field.

Last year we experienced a virtual residency and fellowship interview season, and this year will be the same. The stance of the AAP Residency and Fellowship Directors Council (RFPD) is to follow the guidelines set forth by the Coalition for Physician Accountability (COPA - <https://physicianaccountability.org>) which is made up of the LCME, ACGME, ABMS, AOA, AMA, AAMC and several other coalition members of significance within the medical and graduate medical education community. At this time COPA has released a final recommendation that the 2021-22 interview season should be virtual. We know that many of you were hoping for different news for this interview season, but we will make the best of a situation that is out of our control, and the resources that the AAP provides, such as its listing of Residency Meet and Greets, can help us to maximize our opportunities and interactions during this interview season.

I encourage any program directors, fellowship directors or medical students with questions to reach out to your own graduate medical education office, medical school or to us at the AAP RFPD for any more questions.

We hope to see all of you in person at Psychiatry '22, the AAP Annual Meeting in New Orleans! We are planning an outstanding RFPD workshop and we hope to see as many of you there as possible.

Visit the AAP on Twitter and Instagram!



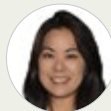
<https://twitter.com/AAPhysiatrists>



<https://www.instagram.com/aaphysiatrists/>

NEWS FOR VETERANS AFFAIRS PHYSIATRISTS

www.physiatry.org/VeteransAffairs



By: Dixie Aragaki, MD, Residency Program Director at the VA Greater Los Angeles Healthcare System and Chair of the AAP's Veterans Affairs Council

Fall Greetings from the AAP VA Council!

We are proud to share that our past VA Council Chair, Thiru Annaswamy, was recently appointed to a Federal Advisory Committee of the Department of Veterans Affairs called the "Veterans' Advisory Committee on Rehabilitation" (VACOR)! This group submits annual reports to the Secretary of Veterans Affairs including assessments of vocational rehabilitation needs and programs available for veterans across VA facilities. We thank Dr. Annaswamy and all of our AAP colleagues who advocate for optimizing function and supporting workplace safety and reasonable accommodations.

And look for us at the February 2022 AAP Annual Meeting in New Orleans! The VA Council is presenting a module, "VA COVID-19 Rehabilitation Across the Care Continuum: From Bedside to Back Home and Beyond...", offering perspectives from an inpatient COVID-19 Rehabilitation Unit in the Minneapolis VA to a home-based COVID-19 Rehabilitative Therapy program and outpatient multi-disciplinary Post COVID-19 Program at the Greater Los Angeles VA. We also look forward to hosting another VA Council meeting where non-VA AAP members interested in veterans rehab issues are all welcome!

Your VA Council Leadership,

Dixie Aragaki, MD - VA Council Chair 2020-2022
Greater Los Angeles VA Healthcare System

Nandita Keole, MD - VA Council Chair-Elect 2020-2022
Phoenix VA Healthcare System

Alice Hon, MD - VA Council Secretary 2020-2022
Long Beach VA Healthcare System

Thiru Annaswamy, MD - Past VA Council Chair 2018-2020
North Texas VA Healthcare System

NEWS FOR MEDICAL STUDENT EDUCATORS

www.physiatry.org/MedStudentEducators



By: Leslie Rydberg, MD, Assistant Professor, Medical Student Education Chair & Assistant Residency Program Director at Northwestern University/ Shirley Ryan AbilityLab, and Secretary/ Program Director of the AAP's Medical Student Educators Council

The Medical Student Educators Council (MSEC) ran the Student Track for the virtual AAP Mid-Year Symposium, hosted by course directors Carley Sauter, MD and Ravi Kasi, MD. There were two sessions held over the two days having each physician from different fields of Psychiatry give their "Stories in PM&R." The TED-talk styled presentations contained clinical pearls, interesting clinical cases, and wonderful stories that shaped these people into being who they are. Be on the lookout for the recordings on the AAP's Virtual Campus.

MSEC also held a Virtual Advising Webinar for 3rd and 4th year medical students interested in applying into Physical Medicine and Rehabilitation. The Webinar was titled "Applications, Interviews, Program Selections, Oh My." The enthusiastic PM&R medical student advisors included faculty from around the country: Nethra Ankam, MD, Leslie Rydberg, MD, Ashlee Bolger, MD, Carley Sauter, MD and Ravi Kasi, MD.

Please reach out to the MSEC if you are interested in helping out with the Advising Program!

NEWS FOR RESIDENTS & FELLOWS

www.physiatry.org/ResidentsFellows



Amy Park, DO, Resident Physician at Zucker School of Medicine at Hofstra-Northwell and Chair of the AAP's Resident/Fellow Council

We want to extend a warm welcome to all of the new Psychiatry interns and residents who started their training in July! The RFC had very a busy summer. A few of our council members participated as small group leaders for the 2021 Intro to PM&R Virtual Summer Program for medical students. We also welcomed Evelyn Qin, MD, MPH as the AAP's 2021-2023 appointee for the AAMC's Organization of Resident Representatives (ORR). In September, we enjoyed participating in the AAP's Virtual 2021 Mid-Year symposium. The RFC is also preparing for its 2nd annual essay contest. Last year's contest was a huge hit, and we were honored to receive so many wonderful essay submissions. Stay tuned for the release of the updated prompts.

Here are some of the latest updates from each of our subcommittees:

Wellness Subcommittee: The wellness subcommittee recently hosted its quarterly Wellness Event with great turnout. They are diligently working on the 'Words of Wellness' column that you can read in this issue of *Physiatry Forward*, and interacting with our members with 'Wellness Wednesdays' posts on our social media accounts. For those who are looking for more content, check out episodes of the Wellness podcast. We are always brainstorming ideas for future zoom events.

Social Media Subcommittee: Our social media accounts continue to be active and engaging with our members! We are constantly promoting the various events and resources that are available to our members. The subcommittee is also working on a survey to gain insight into the impact of social media utilization of residency applicants. Stay informed with all of the amazing accomplishments and opportunities available for medical students, residents and fellows by connecting with us on Twitter and Instagram.

Digital Outreach: We have an upcoming episode of our 'Road to Chair' series with Dr. Flanagan from NYU. The 'Board Review' podcast is continuing to release board-relevant content for our members. If you have any ideas for a podcast episode and/or would like to contribute to the RFC's quarterly newsletter, *Physiatry in Motion*, don't hesitate to reach out to our Social Media/Digital Outreach rep and our Technology Rep.

Research and QI Subcommittee: The newly established Research and QI subcommittee has successfully hosted many 'Orthobiologics and Regenerative Medicine' lectures. Attendees will be able to receive an AR3T certificate for attending 8 webinars. The subcommittee is also working on a research mentor/mentee database. Whether you are new to the field of research, or a seasoned investigator, there are plenty of resources and opportunities to get involved. Keep your eye out for our survey and help guide our action plan for the year.

NEWS FOR MEDICAL STUDENTS

www.physiatry.org/MedicalStudents



By: Eric Jones, Medical Student at California Northstate University College of Medicine, Chair of the AAP's Medical Student Council

As we move into Fall, the AAP Medical Student Council continues to be happy to serve medical students nationwide. With the start of the new academic year and residency application season approaching, we are excited to provide resources to help you in your journey to becoming a psychiatrist. Whether just learning about the field, or applying to the upcoming residency cycle, we have you covered! As more and more students learn about psychiatry, we remain grateful to foster a welcoming and thriving community. We look forward to connecting virtually and at upcoming in-person events. See the following ways to become involved:



PHYSIATRY '22:

Registration for Physiatry '22, the AAP Annual Meeting, is now open! We hope to see you in New Orleans, LA, February 1-5, 2022. Along with attending dynamic talks and poster sessions, we will be hosting the annual Program Director Roundtable where you can learn from program directors how to best prepare your application to physiatry residency. We look forward to seeing you this Spring!

AAP MSC RESOURCE GUIDE FOR MEDICAL STUDENTS:

Looking to learn more about PM&R or brush up for your PM&R rotation? Our resource guide has got you covered! This document features hyperlinked videos and podcasts to high yield PM&R topics covered in medical student didactics, resident virtual didactics, PM&R Pocket Mentor Podcast, and PM&R Board Review podcast series. Check out our Twitter AAPHysiatry_MSC for the link!

VIRTUAL JOURNAL CLUB:

Join us monthly as students are joined by a prominent clinician in the field to discuss high yield topics and valuable research in the field. All students are welcome, and we hope to see you at our September session covering sports medicine. The full schedule, zoom links, and all previously recorded sessions can be found at www.physiatry.org/webinars. Email us at aapmedicalstudentcouncil@gmail.com if you are a medical student interested in presenting or a resident, fellow or attending interesting in leading a discussion.

PROGRAM DIRECTOR FEATURE:

Follow us on Twitter @AAPHysiatry_MSC to stay updated with our continued Program Director Feature! Each week, we highlight program directors of various physiatry residency programs nationwide, giving insight into what makes each program unique. Follow along to learn more!

NEWSLETTER:

Sign up for the AAP MSC newsletter at www.physiatry.org/MedicalStudents to never miss an opportunity! Want to be featured? Highlight your passions by contributing to our new section: "Get to Know Us: Passions Outside of Physiatry"! Additionally, if you have anything else you'd like to share, we are always looking to include new voices and experiences. If interested, please email aapmedicalstudentcouncil@gmail.com.

TWITTER:

Follow @AAPHysiatry_MSC to stay up-to-date on the above opportunities and build connections within the PM&R community!

NEWS FOR PROGRAM COORDINATORS



By Cynthia Volack and Thomas Petruska,
AAP Coordinators' Council Officers

We are so excited and looking forward to seeing everyone in person again in New Orleans for Physiatry '22, February 1-5, 2022! Thomas Petruska is planning a very informative and engaging session for us. We can't wait! NOLA, watch out! Here we come!

Well-Being Moment

Journaling – Part 1

Journaling provides a greater sense of confidence and self-identity. Journaling can help in the management of personal adversity and change and emphasize important patterns and growth in life. Research even shows that expressive writing can help individuals develop more structured, adaptive, and integrated schemes about themselves, others, and the world.

cont.

Journaling Prompts by Erin Commendatore WorkPartners at UPMC in Pittsburgh, PA

- List 10 abilities or skills you are grateful for.
- Write about the last gift you received.
- Write about a lesson you learned that you are grateful for.
- Write about why you are grateful for your time in the world.
- Write about something you created that you are grateful for.

Virtual Recruitment – Do's and Don't's

The article below highlights some Do's and Don't's when it comes to virtual interviewing.

<https://meridian.allenpress.com/jgme/article/12/6/671/449796/Do-s-and-Don-ts-of-the-Virtual-Interview>

DO'S

- Provide Information About the Program in Addition to What's Already on the Website
- Take It Seriously
- Make It Simple
- Consider the Order of the Interviews
- Have Smooth Transitions
- Allow for the Applicants to Interact With Current Residents and Fellows
- Get Creative

SOME ADDITIONAL DO'S

- Login early!
- Charge all devices
- Backup device available
- Use laptop/desktop vs. phone
- Headphones available
- Dress professionally
- Minimize distractions
- Use restroom ahead of time
- Print schedule/questions/remarks out
- Maintain eye contact

DON'T'S

- Forget to Test the Technology
- Forget the Importance of Breaks
- Have Multiple Interviewers in One Room
- Skip Out on the Tour
- Leave Key Personnel Out

Feel free to reach out to the Coordinators Listserv with any questions at: aap-programcoordinators@googlegroups.com.

Your AAP Coordinators' Council Officers,
Cindy and Thomas

Immediate Past Chair:

Nicole Prioleau - npriole1@jhmi.edu

Chair:

Cynthia Volack - volackc@nyp.org

Chair Elect:

TBD

Program Director/Secretary:

Thomas Petruska, MS - thomas_petruska@med.unc.edu

Newsletter Editor:

Stacey Snead-Peterson, MS - sneadpetersons@upmc.edu

COORDINATOR SPOTLIGHT: AMY WALKER, MBA

Program Coordinator

PM&R Residency & Peds Fellowship

Department of Rehabilitation Medicine

Emory University School of Medicine



HOW LONG HAVE YOU BEEN IN YOUR CURRENT POSITION?

4 years, I started in October 2016.

WHAT IS YOUR FAVORITE AAP MEMORY?

My first AAP was in Las Vegas, I was so new to my job so it was FANTASTIC to meet so many folks who really knew the job of a PM&R coordinator.

WHAT IS YOUR FAVORITE THING TO DO IN YOUR LEISURE TIME?

I love going for long walks. I would say spending time with my family (husband and 3 kids ages 14, 16 and 18) but since we have all been home for over 8 months, it's actually nice to get a break from everyone.

WHAT IS YOUR FAVORITE HOLIDAY AND WHY?

Thanksgiving, we can enjoy the beginning of the holiday season without the stress of gift giving associated with Christmas.

WHAT WOULD WE BE SURPRISED TO KNOW ABOUT YOU?

This might or might not be a surprise, my background is all finance prior to this job. Being a mother of 3 busy kids helped prepare me for the job of a program coordinator as much as anything. Also, I graduated from the high school that is a block away from the Emory Rehab Hospital where I work (in non-Covid times).



REHAB REWIND

The Road To Chair with David Gater, MD, PhD



We are bringing you excerpts from our most popular podcasts in each issue of *Physiatry Forward*. In this episode, Armando Alvarez, MD interviews David Gater, MD, PhD, Chair of PM&R at the University of Miami Miller School of Medicine and Chief Medical Officer of Rehabilitation at the Christine E. Lynn Rehabilitation Center for the Miami Project to Cure Paralysis at UHealth/Jackson Memorial. Hear this full podcast and browse all of our AAP series at www.physiatry.org/podcasts.

Q. What led you to PM&R and what makes Dr. Gater “tick?”

DAVID GATER: I was the first on either side of my family to go to college. My motivation for that came from my father, who made sure that I had lots of manual labor opportunities. I was a plumber apprentice, truck driver, forklift operator, worked in the cotton fields, etc. I really experienced a lot of heat, literally, in the deserts. So, I was absolutely amazed when I learned that I could be paid to sit in an air-conditioned room and learn all day long. When I had the opportunity to take scholarships, I jumped at that chance. One day, down the road in my academic career, I was working with a cardiac rehab nurse that mentioned an area of medicine called “physical medicine and rehabilitation.” I went to the library and found books and brochures about PM&R... The field of rehabilitation was still just barely coming to life as I would go from one patient to the next with a different diagnosis. I was astounded by the variety of patients diagnosis that we managed.

Q. Tell me a little bit about the transition in becoming chair, because I think you’re a unique case. You came into a chair position into a new building with one of the largest pandemics and having to transition and lead the department. Tell me a little bit about

that process. What led you to come to Miami, and then how that process developed?

DAVID GATER: Yeah, so the process was a bit of a surprise. I recognized that there was tremendous science and a tremendous literature base coming out of Miami with regard to spinal cord injury medicine, and aspects that were to promote cure, as well as care... The University of Miami Miller School of Medicine recognized the potential for PM&R here. They were able to build the Christine E. Lynn Rehabilitation Center for The Miami Project to Cure Paralysis, in which now here’s a dream come true. They actually brought the Department of Physical Medicine and Rehabilitation and the Miami Project to Cure Paralysis together in a county facility. They were able to have clinical care for inpatient, outpatient and clinical research all in the same facility. I saw that, and it just seemed like was tremendous opportunity.

Q. So given the COVID-19 pandemic and that transition to Miami, I assume that must have not been easy.

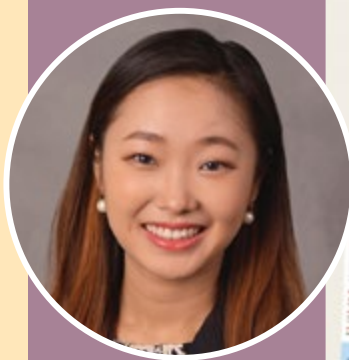
DAVID GATER: It was a very, very challenging time. I think that so many people came together to allow us to be successful. I was constantly in touch with other chairs from across the country who were undergoing similar changes. We figured out how to do virtual medicine...

It really has pushed us to learn how to do better with what we have. It’s been challenging, and at times, fatiguing... but it’s also given us an opportunity to really see the best in people. It’s allowed us to see how well people can do and what great ideas they have. You know, I just really appreciate the tech savviness of our medical students and residents.

Q. What advice would you have for someone who is interested in getting into leadership?

DAVID GATER: I think having mentors with different aspects and perspectives is important. It’s so helpful to have folks at a senior level, but as well, at a mid-career or a junior level, being able to coach you, and share their experiences and their dreams. Also, they should challenge you, in terms of what are the skill sets that you need-- not just your clinical skills, but emotional intelligence. What are the best ways to communicate with different types of administrators of the College of Medicine and or your hospital system? It’s important that we also remain humble and reach out to the folks that are helping to empty our trash and clean the facilities around us. Go out and recognize that everybody is valued. Reaching across the aisle and meeting different people with different backgrounds is going to be important for you.

A Sense of Belongings: Yelim Krystal Chung



A behind-the-scenes look at the treasured belongings of one featured member



Yelim Krystal Chung is a 2022 MD Candidate attending SUNY Upstate Medical University. Yelim is an Education & Mentorship Representative and active AAP Medical Student Council representative. Here's a behind-the-scenes look at some of her most treasured belongings.

1. **AAP Medical Student Council (MSC):** This is my second year on the MSC and it has been one of the most rewarding experiences of my PM&R journey. I am grateful to work with all these hard-working, passionate individuals! As Education/Mentorship Rep my goals include increasing disability education and early PM&R engagement amongst medical students. We have several exciting projects in the works, stay tuned via our Twitter @AAPPhysiatry_MSC!
2. **Collection of graphic designs:** This is a collection of various flyers and T-shirt designs that I created for Upstate's PM&R department and the MSC. Graphic design is a hobby that I can apply to extracurriculars. Aesthetics are everything! I like to bring a pop of color to anything I do.
3. **Disability education:** Advocating for disability education in medical training has become one of my major professional interests. I can't wait to continue this important work as a resident and physiatrist. To get more info on how to implement disability education into curriculum check out the Disability Integration Toolkit (DIT) website.
4. **Dr. Margaret Turk:** My mentor and "life coach." Dr. Turk has offered me invaluable advice and encouragement through my four years of medical school. Her mentorship has contributed significantly to my interests and understandings about disability education, patient advocacy and physiatry. I hope to be a great mentor and boss woman in medicine such as her one day. Thank you, Dr. Turk!
5. **Transcranial photobiomodulation therapy (tPBMT):** Over the past year, I've been involved in motor analysis and neurorehabilitation research. One of our projects examines the effectiveness of tPBMT on improving upper extremity motor performance in chronic stroke survivors. Being in the lab offers me an additional perspective to understand how patients recover post-injury and it teaches me about various treatment modalities.
6. **Zero-Waste Jar:** Sustainability, we all play a part. I reduce my carbon footprint with composting, using metal straws, reusing sauce jars and Ziploc bags, and with my zero-waste jar. The jar helps me keep track of my monthly non-recyclable waste.
7. **Kimchi:** My umma (*mother*) and I make fresh kimchi every year with home-grown ingredients and never any added MSG. My siblings and I get each a monthly supply and travel home for refills; our kimchi has traveled to 3 college dorms and many apartments since then. The Chung's don't go anywhere without our kimchi.
Korean BBQ: The kimchi goes straight to the table, especially on weekends when we do pork belly or kalbi BBQ. Our home K-BBQ essentials include *pa muchim* (scallion salad), sesame oil dip, gochujang, and perilla leaves. My father recently built a fire pit in our backyard which has been our prime summer grilling space.
8. **My Engagement:** I recently got engaged! We met on Andrew's first day of medical school where I was his MS2 orientation leader. He is an aspiring ophthalmologist, so I listen to his eyeball stories while he listens to me go on about "the patient's function!" We're very excited to embark on our new adventures in marriage and residency—both difficult things...
9. **Family:** My biggest support system. We immigrated to America with very little money when I was ten-months old. My father fulfilled his dream of being a mathematics professor and brought us to Upstate New York. Since then, we've faced many challenges together including a language barrier, discrimination, and long 10-hour drives to the nearest Korean market. We've been through everything together; I can't wait to give back everything they've sacrificed for me.
10. **My dog, Blu:** We rescued Blu 9 years ago. He is a sassy mini poodle who likes to lounge all day.

Pack your bags and get ready for our biggest party yet!



New Orleans, LA
February 1-5, 2022

Three Ways to Register



VISIT: www.physiatry.org/2022



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CALL: +1 (410) 654-1000 (credit card payments only)

Register by December 16, 2021 to save up to \$300!



Registration Pricing

NOT AN ACTIVE AAP MEMBER?

Join or renew today for the lowest-rates and year-round collaboration. You will also be entered to win one of two free registrations for Physiatry '23. Join our community for even better rates at www.physiatry.org/join or renew at www.physiatry.org/renew.

	Early Bird (By December 17)		Standard	
	AAP Members	Non-Members	AAP Members	Non-Members
Physician (US & International)	<input type="checkbox"/> \$695	<input type="checkbox"/> \$995	<input type="checkbox"/> \$845	<input type="checkbox"/> \$1,145
Resident/ Fellow	<input type="checkbox"/> \$440	<input type="checkbox"/> \$590	<input type="checkbox"/> \$660	<input type="checkbox"/> \$810
Medical Student	<input type="checkbox"/> \$225	<input type="checkbox"/> \$300	<input type="checkbox"/> \$225	<input type="checkbox"/> \$300
Health Pro/ Researcher/ International (Low & Middle Income Countries)	<input type="checkbox"/> \$475	<input type="checkbox"/> \$540	<input type="checkbox"/> \$625	<input type="checkbox"/> \$690
Administrative Director/ Program Coordinator	<input type="checkbox"/> \$415	<input type="checkbox"/> \$565	<input type="checkbox"/> \$515	<input type="checkbox"/> \$665
Emeritus	<input type="checkbox"/> \$225	<input type="checkbox"/> \$225	<input type="checkbox"/> \$225	<input type="checkbox"/> \$225
One-Day <input type="checkbox"/> Thurs <input type="checkbox"/> Fri <input type="checkbox"/> Sat	<input type="checkbox"/> \$300	<input type="checkbox"/> \$450	<input type="checkbox"/> \$475	<input type="checkbox"/> \$625

Pre-Conference Workshops	AAP Members	Non-Members
Residency & Fellowship Program Directors (RFPD) Workshop	<input type="checkbox"/> \$250	<input type="checkbox"/> \$450
Resident, Fellow & Medical Student Bootcamp	<input type="checkbox"/> Free for residents, fellows, and medical students with paid meeting registration	
Medical Education in Physiatry: Building Teaching Skills	<input type="checkbox"/> \$99	<input type="checkbox"/> \$149
Spasticity and Other Muscle Overactivity Disorders, an Advanced Course	<input type="checkbox"/> \$99	<input type="checkbox"/> \$149
Musculoskeletal Ultrasound-A to Z (with some letters missing): Hands-on Workshop	<input type="checkbox"/> \$99	<input type="checkbox"/> \$149

Guest Package ☐ \$215 per person

Rehab 5k Run, Walk & Roll ☐ \$25 for a physician

☐ \$15 for a resident/fellow/med student

Registration Total:

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over



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For more information visit www.physiatry.org/2022