

Physiatry

F O R W A R D

FALL 2024 | AAP'S MEMBER MAGAZINE



Association of Academic Physiatrists



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USA Paralympic Shooting Sports in Peru

PHYSIATRY POV



USA Paralympic Shooting Sports in Peru



PGY4 Resident Volunteering for Stay-Focused



USA Basketball 3x3 in China and Mongolia



USA Basketball 3x3 in China and Mongolia



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Skier utilizing the TetraSki

CELEBRATING ADAPTIVE ATHLETES



Stay-Focused taking disabled youth scuba diving



Group Photo at RecFest



Wheelchair Basketball at RecFest



Physiatri Forward, AAP's member magazine

Wow, what a summer! For better or for worse, we saw a flurry of activity in all aspects of life, and the community has been bustling with energy moving into the autumn and holiday seasons. It's time we recapped the events that happened in the last few months and updated you on what's to come!

In this issue, we'll focus on some incredible stories of overcoming disability. From physicians facilitating sporting events with disabled patients to students overcoming the odds to chase a dream – we celebrate those who show courage in the face of adversity! We are also proud to support many physiatrists who helped guide the success of athletes in the Olympics and Paralympics this year. These stories serve as a reminder of the importance of PM&R and the many lives it alters for the better.

You'll also find some familiar updates and regular columns as well as a nod to those in the field that continue to push for change on Capitol Hill.

As always, none of this would be possible without contributions from our members and the physiatry community. Share your ideas, articles, photos, or stories with us anytime to be considered for publication:

physiatry.org/PhysiatriForward



Until next time,

Liz Raubach
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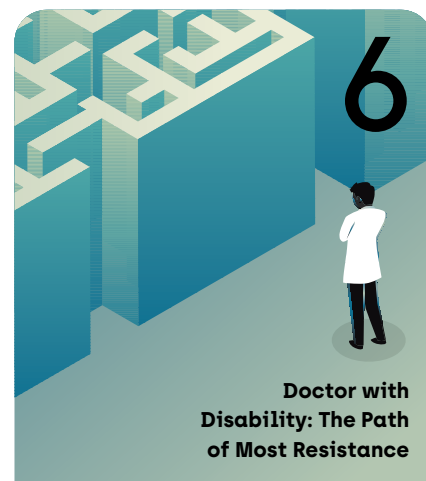
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Doctor with Disability: The Path of Most Resistance



AAP Visits the Hill



RecFest 2024! Celebrating Adaptive Sports and Recreation

Contribute to our Winter issue of *Physiatri Forward*! Submit your photos, content, ideas, and more by visiting physiatry.org/PhysiatriForward and filling out a submission form.



FROM THE PRESIDENT

Greetings from Texas!

We've been lucky in this area of the US to have skirted most of the intense weather this hurricane season, but our friends to the east have seen some devastating loss. I hope that all of you who are either working or have family in the affected areas have been able to recover quickly and have been able to aid those who were less fortunate.



Karen Kowalske, MD

Additionally, I hope you all got to take some much deserved time off this summer to travel and have a little fun with friends and family before ramping back up for the next academic year. The transition to fall not only brings a change in weather but also an active season in the medical sphere. Medical students are busy preparing for interview season with the hopes of getting matched in the spring, and this year's new residents have been onboarded and are off to the start of another academic year.

In the last few months, the AAP has seen a lot of exciting changes, including a new, streamlined website, the inaugural international symposium dedicated to spasticity, Spasticity X, and some fun additions to our next annual meeting. Speaking of Physiatry '25, registration is NOW OPEN, and we have some great things in store, such as cash prizes for Best Papers and Top Posters, a Pickleball Tournament, and an art gallery dedicated to the exploration of identity after illness or injury. Plus, we'll have all the networking events and top-notch educational sessions you've come to know, love, and expect.

I hope everyone has a good spooky and holiday season, and I'll see you again soon!

Sincerely,

A handwritten signature in black ink that reads "KKLle MD". The signature is stylized and cursive.

Karen Kowalske, MD

Professor of PM&R, UT Southwestern Medical Center

President of the Board, Association of Academic Physiatrists

DOCTOR WITH
DISABILITY:
**The Path
of Most
Resistance**



The first time I entered TIRR Memorial Hermann (TIRR), I was strapped to a stretcher. I had just suffered a cervical-medullary stroke a few weeks prior while undergoing my sixth brain surgery. Initially, I could not function from the neck down and so I entered TIRR to begin my rehabilitation, but also, unbeknownst to me, the chance to immerse myself in the field of Physical Medicine and Rehabilitation (PM&R) with the perspective of both a patient and a medical student.

THE INITIAL DIAGNOSIS

In 2011, during college, I was diagnosed with Chiari Malformation, a condition in which a portion of the cerebellum herniates from the bottom of the skull and compresses the brain stem, and Syringomyelia, the development of a fluid-filled cyst within the spinal cord. Since then I've been diagnosed with hydrocephalus (a buildup of cerebrospinal fluid in the brain), trigeminal neuralgia (a chronic pain condition that affects the fifth cranial nerve), adrenal insufficiency (a condition in which the adrenal glands do not produce adequate amounts of steroid hormones), gastroparesis (partial paralysis of the stomach) and a tethered brain stem (in which the brain stem becomes pinned to the dura, or outer covering of the brain).

THE STROKE

On February 6, 2017, as a second year medical student, my life was forever changed when I underwent my sixth brain surgery. I went into the operating room as one person and came out as another. Although I was no stranger to brain surgery, this time was different. I had undergone an experimental brain surgery to untether my brainstem, which had attached itself to the dura, and was kinked therefore pulling some of the surrounding cranial nerves along with it. Because of this, I was having weakness and decreased sensation in my arms, decreased fine motor coordination, Dysautonomia and I had lost the ability to swallow. My body was deteriorating. After searching the literature, my neurosurgeon found only a handful of patients who had undergone this surgery, and most of the cases didn't end well. With all odds against me, I agreed to this risky operation in hopes of getting my life back. As I awoke from surgery, the doctors and I quickly realized something was wrong. Although the surgery was successful, I had suffered a stroke to the cervico-medullary junction during the operation, leaving me, initially, unable to function from the neck down. I couldn't sit up on my own, move to turn in bed, walk, bathe or dress myself. All I could do was lie in bed. Once again, my dream of becoming a doctor felt like it was shattering before me, but I've never allowed my health to keep me from continuing my journey and I wasn't going to let it start now.





"I spent many months at TIRR Memorial Hermann, first working on gaining the strength to sit up unassisted and then slowly advancing to standing on my own. The REX robotic exoskeleton was one of the devices that helped teach me how to walk again. The days were hard, long and, at times, frustrating, but every sensation and movement gained was rewarding."



THE REHAB

After a few weeks, I was transferred to TIRR Memorial Hermann to undergo intense inpatient neurorehabilitation. Each day was filled with physical, speech and occupational therapy, among other activities. Every simple thing we do and take for granted in everyday life I had to relearn. Absolutely everything. When asked what my goal was, I always said, "I just want to be able to take care of patients and go back to school to become a doctor."

I spent many months at TIRR Memorial Hermann, first working on gaining the strength to sit up unassisted and then slowly advancing to standing on my own. The REX robotic exoskeleton was one of the devices that helped teach me how to walk again. The days were hard, long and, at times, frustrating, but every sensation and movement gained was rewarding.

As a medical student at the time, I still had tests to study for and assignments to complete. Initially, I couldn't operate my computer, write or even turn the pages in a book. When I could finally see clearly, my mother placed ear buds in my ears and played lectures for me to watch. She typed my essays as I called out my thoughts, turned the pages in my books and wrote my notes. We started studying early—before my doctors came in to round and the long days of therapy began—or stayed up late after exhausting days. It was extremely difficult, but I was determined.

WHY I WENT INTO MEDICINE

Many people believe I wanted to become a doctor because of my experience with my illnesses, but my calling to medicine started at 5 years old, far before I became a patient. My mother is from the small town of Brawley, California and my Father is from the even smaller town of Tierra Amarilla, New Mexico. Growing up I saw the lack of access to healthcare my family had living in these cities and sought out to become a doctor to one day improve the access to healthcare for rural areas. I am the first person in my family to graduate from a university and the first doctor in my family. When I graduated high school I had the next 4 years of my life planned out on what I needed to do in order to get into medical school and somehow even though life went nothing as planned, it turned out even better.

THE NEGATIVE VOICES

Over the years, some doctors, professors and advisors told me to quit medical school. They said, "Your medical history is too extensive," and "You don't have the functioning you need," and "It is impossible for you to continue school while being a patient in the hospital so much." Some said, "If you do continue, you need to hide the deficits and illnesses you have".

I remember the neurologist on service at the time walked into my hospital room after my stroke with two of my classmates who were rotating with her. She sat down at the foot of my bed and looked me straight in the eye and said, "Claudia, you have to give it up, you can't be a doctor." After telling her I disagreed, she told me, "Look at where they are and look at where you are", as she pointed to my classmates. "Lift up your legs!" she yelled. "Lift



up your legs!" At the time I couldn't lift my legs off the bed. "See, you can't even lift up your own legs. You can't even take care of yourself. How can you take care of a patient?"

I will never forget that moment. How she made me feel, worthless. Many people couldn't understand why I was so adamant to continue. Why I never wanted to take a break from school. But God had always preserved my intelligence during my many brain surgeries, and I wasn't going to waste that precious gift. My brain, at times my greatest challenge, was my biggest ally in continuing my path to become a doctor.

WHY PM&R?

I will never forget the day I was transferred to TIRR because it was the day I knew PM&R was my calling. Instead of everyone focusing on what I couldn't do, they focused on what I could. Instead of telling me I couldn't be a doctor, they focused on how I could adapt to become one. Dr. Lisa Wenzel, MD was my PM&R physician and it was because of her that I decided to pursue PM&R. She went above and beyond to provide me the best care, to put back all the broken pieces of my life, but more importantly she always saw me as a person and not as a disease. It was her great effort to go the extra mile that gave me the ability to be successful in medical school, residency and now fellowship and I carry her example with me everyday in the way I treat my own patients. She was instrumental in providing all the documentation I needed for my accommodations in both the clinical and non clinical environments. Had she not taken the time to fill out all the necessary paperwork every time I needed it, I would not be practicing medicine today.

SUPPORT OF RESIDENCY

Becoming a doctor with several health issues and a disability was incredibly difficult. People ask me how I did it. All I know is that I didn't do it alone.

Dr. Nikola Dragojlovic was my program director during my PM&R residency at UTHealth at Houston, more importantly he was my biggest advocate during my training. Over the years I've received many messages from students asking what type of accommodations they can receive, who they should talk to at their program, and what to expect trying to continue their dream while having health issues or disability. It's tough for me to share my experience at times because I know it will not be reciprocated everywhere even though it should be. Dr. D did what many in leadership positions are unwilling to do. He broke barriers, was willing to put in the extra time, effort, and care needed to get me the accommodations I needed to succeed. I never heard a "no", instead, he'd tell me, "I may not know the answer, but I will find out. I don't think this has been done before, but I'll figure out a way to make it happen".

You see, just because I cannot do everything like my able bodied peers, didn't mean I couldn't do it at all. Could I walk up 8 flights of stairs during Cardiology rounds, no, but I could get there by taking the elevator. Could I hold an otoscope/ophthalmoscope, no, but I could if it had hand grips attached. Could I type on every computer in the hospital, no, but I could get my work done using dictation.

Where others became stagnant in awe and saw a CAN'T, we saw a how CAN we. When we encounter someone different, someone who may have a mobility issue, sensation deficits, need alternate forms of nutrition, assisted devices, have an amputation, etc. we must challenge our unconscious bias in thinking that they cannot do something, that they are less than, that they don't belong. There is no way I could ever show gratitude for his dedication to my success. But I hope to pay it for by advocating for those who do not have a Dr. D at their program. I hope one day to have a seat at the table where discussions over accommodations and medical education are taking place to enact change.

HOW MY APPROACH TO PATIENTS HAS CHANGED.

My experience as a patient has given me an education I otherwise would have never received in medical school. It has molded the way I practice medicine. At the end of the day my goal as a physician is to give patient's their lives back to live the life they have imagined. Sometimes that requires extra work on our end, but it is the extra mile that really makes a difference for patients. As physicians I think it is easy for us to want to focus on just the patient, but from my experience as a patient I have learned the importance of ensuring we are adequately supporting the family and caregivers. They are the ones who are going to likely be caring for them once they leave the hospital and I try to ensure they are well equipped to handle what may come.



Claudia I. Martinez, MD is a Spinal Cord Injury Fellow Physician at UTHealth and recently completed PM&R residency at UTHealth at Houston where she served as Administrative Chief Resident. She is the first person in her family to graduate college. She has received numerous awards for her service to others.

She has become a role model and voice for those working in medicine who have a disability through her social media presence and has appeared on several national and international news platforms. The Claudia I. Martinez Strength Scholarship Endowment was recently created at UTHealth in her honor to award a medical student facing adversity a scholarship for their medical education.

Beyond her service to others, Dr. Martinez has consistently performed at the top of her class despite her medical setbacks and disability. She has earned numerous scholarships for her merit and was elected in to the Alpha Omega Alpha [AOA] Honor Society.

Instagram: [@claudiaimartinez](https://www.instagram.com/claudiaimartinez). Please email claudiaimartinez90@gmail.com for collaborations.



FEB 25-MAR 1, 2025 | PHOENIX, AZ

PHYSIATRY '25



The future of physiatry happens here.



Registration is OPEN

If there's any event to attend in-person next year, this is it. Physiatry '25 will bring together the best and brightest physiatry and rehabilitation experts, poised to share their works with colleagues from all across the country.

It's time to party like a physiatrist!

See our impressive line up of hand-picked sessions and find your reasons to attend at physiatry.org/AnnualMeeting.

Selected membership
types can save up to

\$300!



[PHYSIATRY.ORG/ANNUALMEETING](https://physiatry.org/AnnualMeeting)

AAP Visits the Hill



By: Clare Chmiel, AAP Policy Advisor

Members of AAP's Board of Directors and Public Policy Committee took to Capitol Hill in Washington, DC on Thursday, September 19th to meet with lawmakers and staff to advocate on issues facing the physiatry community.



In the over 40 meetings that took place throughout the day, AAP members engaged in dialogue with senators, representatives, and staffers on issues ranging from telehealth to increased graduate medical education. Other issues discussed included the importance of inpatient rehabilitation facilities, support for rehabilitation research, as well as support for long COVID research, climate change mitigation and preparation for people with disabilities, and general education on the field of PM&R. These issues were well-received by Members of Congress and their staff and there was much collaboration on how to work together on problem-solving measures.

AAP works with its consultant lobbyists at Polsinelli to reach out to Congress throughout the year to ensure that the field of physiatry and its patient population are properly represented in federal healthcare law.



Find more info on the issues that were discussed at this year's Hill Visits by visiting our Resources Library

The University of Alabama at Birmingham's Department of Physical Medicine and Rehabilitation Communications Specialist Natalie Garcia interviews Dr. Johan Latorre, M.D.

As a provider for UAB Sports and Exercise Medicine, Johan Latorre, M.D. specializes in non-operative orthopedic, musculoskeletal, and sports medicine. He is passionate about treating athletes at all levels and abilities.



Besides providing excellent clinical care to his patients at UAB, Latorre is also the head team physician for the men's and women's tennis teams at the university and a team physician for Team USA Wheelchair Rugby who train at Birmingham's Lakeshore Foundation.

This month marks the beginning of the Paralympics Games Paris 2024 spotlighting adaptive athletes. In November 2023, Team USA Wheelchair Rugby claimed its qualifying spot in Paris for the Paralympic Games.





WE SPOKE WITH DR. LATORRE TO LEARN MORE ABOUT ADAPTIVE SPORTS.

What are adaptive sports?

Adaptive sports are recreational or competitive sports for persons with disabilities.

When did you develop a passion for adaptive sports?

As a medical student, I learned about Physical Medicine and Rehabilitation late in my third year. I finally rotated at the inpatient rehab hospital late that academic year and just by chance, Kennedy Krieger's Wheelchair Rugby Team came to Penn State for an exhibition/showcase for the rehab hospital. Seeing excitement on all the patients' faces, especially those who had recently had an injury, was inspiring to watch. After the exhibition, you could see how much more motivated the patients were to be discharged so they could try out different adaptive sports.

Why are adaptive sports important?

Adaptive sports are important as it is a vehicle for individuals with disabilities to not only obtain the physical and mental benefits of exercise but also to experience all the other benefits such as leadership, teamwork, comradery, and competition.

What is something you would like people to know about adaptive sports?

Just because adaptive athletes have a disability, it does not mean that an able-bodied individual would be able to sit in a wheelchair and suddenly be better than an elite adaptive athlete. Adaptive athletes work to become the best at their sport, the same as any other able-bodied athlete does for their sport.

What has been your involvement in adaptive sports over the years?

As a resident and fellow at the University of Michigan, I was one of the first members of the Adaptive Sports and Fitness Program. We started out with WC Basketball pickup once a month to slowly increasing frequency and adding other one-time events. Eventually, Covid hit and while all that was paused, we planned our first collegiate team, WC tennis. Once restrictions were lifted, we trained daily working towards Nationals as it would be the first tournament after Covid. We competed and came in second place against an Alabama team that had internationally ranked players. Once I graduated, I joined UAB's Dept. of PM&R and UAB Sports and Exercise Medicine. That allowed me the opportunity to serve as one of the team doctors for Team USA WC Rugby who have so far won a gold in the Para Pan Games and is on a mission for gold in Paris at the Paralympics this month.

How long have you been a team physician with Team USA Wheelchair Rugby?

I was fortunate enough to begin once I arrived at UAB in the Fall of 2022 and have been a proud team physician for them since. What is your long-term vision for working with adaptive athletes? I hope to continue working with adaptive athletes both on and off the field. One of my major goals is to attend a Paralympic game as a team physician in the future and to hopefully start a collegiate team here at UAB!

Dr. Latorre is active in the rehabilitation and sports medicine community. He is a member of the American Medical Society of Sports Medicine, and American College of Sports Medicine. Additionally, he is actively involved with the American Board of Physical Medicine and Rehabilitation and serves as Chair of the Adaptive Sports Community in American Academy of Physical Medicine and Rehabilitation.

To learn more, listen to Dr. Latorre's MedCast session where he shares the benefits and barriers of adaptive sports.



Addressing Underrepresentation in Physical Medicine & Rehabilitation [PM&R] via Early Exposure

By: Sean Nguyen; Steve Park; Raysha Farah, MD; Adedeji Adeniyi, MD



There is a persistent underrepresentation of women and multiple ethnic minority groups among medical school and residency applicants and trainees, particularly in Physical Medicine and Rehabilitation [PM&R]. Women constitute only 36%-39% of PM&R residents, while only 5.8% of doctors in the U.S. identify as Hispanic, and just 5.0% as Black. This disparity highlights the need to address underrepresentation.¹ With the Columbia PM&R Series, we aim to attract new faces into the PM&R community via early exposure.

DISCOVERING NEW PASSIONS

Our efforts began with a national survey targeting pre-medical students, with over 1,000 students from over 200 colleges represented, over half of which were historically underrepresented groups. The findings were clear—only 31% had been previously exposed to PM&R. Yet many students were eager to learn more with nearly 76% of students expressing interest in attending PM&R workshops and 59% of students expressing interest in receiving mentorship.²



76% OF STUDENTS EXPRESSING
INTEREST IN ATTENDING
PM&R WORKSHOPS.

A WORKSHOP LIKE NO OTHER

In response, we developed a half-day workshop designed to instill knowledge and ignite excitement about PM&R. Participants moved between interactive stations, engaging in hands-on activities such as kinesiotaping and ultrasound training, all while learning about adaptive sports. One of the workshop's highlights was an interactive Q&A session with PM&R physicians and medical students. This fostered an opportunity for mentorship and networking while introducing students to the field. Feedback was overwhelmingly positive, with 100% of attendees recommending it to a friend. The workshop was a collaboration between the PM&R departments in Columbia University, Cornell, and Montefiore, as well as a partnership with SOAR Adaptive Recreation, a non-profit organization dedicated to adaptive sports and recreation.

The workshop attracted over 50 participants, with 81% identifying as female and 57% from underrepresented backgrounds. The atmosphere was lively and curious, fostering a group of future healthcare leaders ready to make a positive impact.



THE WORKSHOP ATTRACTED
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LOOKING AHEAD: EXPANDING OPPORTUNITIES

Our efforts do not end here. We plan to expand our workshop into full-day events, providing even more enriching experiences. We are reaching younger audiences with our first-ever PM&R-led high school event, where over 75 students explored cutting-edge technology in rehabilitation.

Furthermore, we have launched the Columbia University Pathways to Medicine Workshop Series, a series of interactive workshop sessions highlighting the collaborative nature of medicine. This initiative offers a unique behind-the-scenes look at the relationship between different medical specialties and PM&R. One example we developed was a joint workshop between PM&R and Orthopedics on sports medicine, featuring interactive sessions and mentorship opportunities.



WE PLAN TO EXPAND OUR
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ENRICHING EXPERIENCES.

A CALL TO ACTION

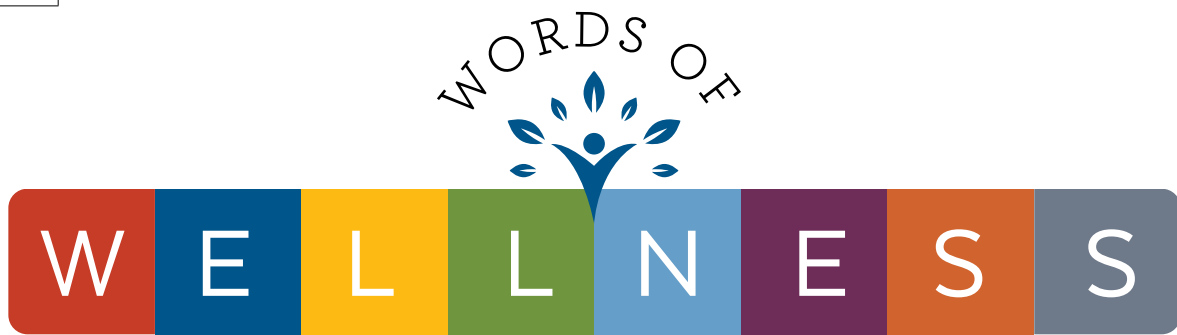
Our novel curriculum has already been proven to increase the knowledge and interest of PM&R in early learners. We hope our outlook can be adapted for initiatives in other institutions. Even if students do not choose a career in PM&R, it may increase awareness of PM&R that may improve referral patterns in connecting patients to appropriate care and promote a more comprehensive care across medical specialties. Our initiative and recruitment strategy could be developed into other future programs to introduce a diverse cohort of students to PM&R as early as possible, ultimately increasing representation and improving healthcare for our diverse patient populations.



OUR NOVEL CURRICULUM
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EARLY LEARNERS.

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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 (RFC) Well-being Subcommittee.

WELLNESS EVENT



21st Annual SuperH 5K Run, Walk, and Wheel

AUTHOR: SARAH HOUR, MD

Residents at the **MedStar Georgetown/NRH program** attended the 21st Annual SuperH 5K Run, Walk, and Wheel on Saturday, September 15, 2024. The Super H 5K raises funds to support the Adaptive Sports Program at MedStar NRH and is a great event that brings the community together. Residents provided medical coverage, volunteered as greeters and course marshals, and ran in the event too! Afterwards, there was a post-race celebration with waffles and live music. The group had a great time participating in the event!



BOOK/SHOW REVIEW



Elin Hildebrand: The Perfect Couple

AUTHOR: JEAN-LUC BANKS, MD

This was on my next-to-watch list on Netflix, and once I found out it was a book, I HAD to read it first! What better way to disrupt the perfect wedding than by finding the maid of honor dead the day of?! Told from alternating perspectives and timelines, the reader is given the juicy backstory behind the couple getting married and their families, while simultaneously working through the investigation. As the story unfolds, you will make assumptions about the murderer (if there even was one), but you'll never guess it — I didn't! The Netflix show is similar in premise but different in execution. I found the background of the book helpful in understanding the plot of the show, but still found myself surprised at the ending. The overarching theme remains true — there is no such thing as a "perfect couple." Overall, a great read and a great watch. I'd recommend doing them both and telling me which one you liked more!



FEATURED RECIPE

Banana Pancakes

CHEF: NATHAN MICHALAK, MD

INGREDIENTS

- 1 ripe medium banana
- 1 cup rolled oats
- 1/4 cup almond milk
- 1 egg
- 1 teaspoon baking powder
- 1 teaspoon vanilla extract
- 1 teaspoon cinnamon
- 1 pinch salt



INSTRUCTIONS

1. Preheat a lightly oiled large skillet or griddle on low to medium heat
2. Combine all ingredients in a blender and blend for 45-60 seconds until smooth
3. Brown each pancake on each side until golden brown (about 1-2 minutes; does not bubble as much like traditional pancakes)
4. Serve with your favorite toppings and enjoy!



FEATURED WORKOUT

HIIT (High-intensity interval training) Workout

AUTHOR: AIMEE ABBOTT, MD

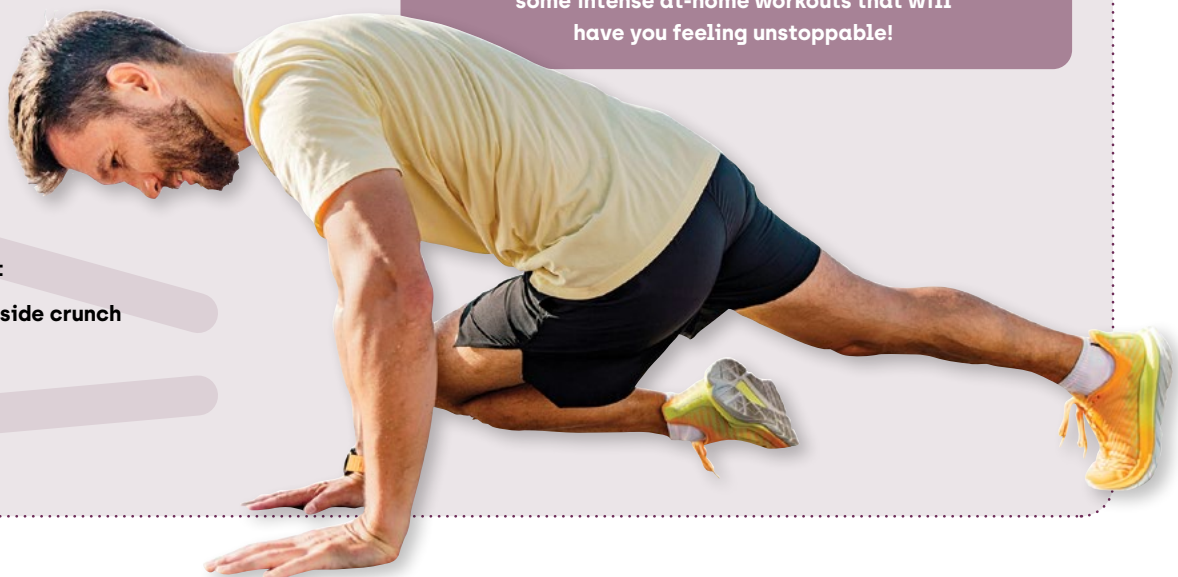
Short on time but craving a full-body burn? We've got the perfect solution! Dive into this 10-minute HIIT workout that targets your whole body and core, and guess what? No equipment needed!

How it works:

- Push through each exercise for 45 seconds, then catch your breath with a 15-second rest.
- Want to switch it up? Adjust the timing to fit your conditioning level—try 30 seconds on, 30 seconds off for a different challenge!

1. Jumping jacks
2. Half burpees
3. Butt kicks
4. High knees
5. Side jabs
6. Burpee
7. Plank shoulder taps
8. Mountain climbers
9. In and out jumping squat
10. Squat with alternating side crunch

For more killer workouts like this, head over to the GainsbyBrains YouTube channel—30 Day FIT Challenge! Get started and fuel your motivation with some intense at-home workouts that will have you feeling unstoppable!



RecFest 2024!

Celebrating Adaptive Sports and Recreation





By: Thiru Annaswamy, Laura Snyder and Nancy Lokey

The department of Physical Medicine and Rehabilitation at Penn State Health recently hosted RecFest 2024 — An annual event that brings together individuals of all ages and abilities to explore the world of adaptive sports, fitness, and recreation. Excitement for RecFest was at an all-time high, as the event took place on the heels of Penn State University rebooting their Adaptive Athletics program,¹ and with over 530+ pre-registrations, RecFest 2024 did not disappoint.

Considered a “celebration of ability,” RecFest is 100% free for the community thanks to the generosity of many local sponsors. Returning to Spooky Nook Sports Complex in Manheim, PA for the second year in a row, RecFest 2024 brought together over 70 exhibitors and 24 activity demonstrations for attendees to learn about and experience first-hand. A diverse range of adaptive sports was offered, allowing participants to engage in cycling, tennis, field hockey, yoga and soccer, alongside specialized wheelchair sports such as basketball, rugby, and lacrosse.² Other adaptive sports included sit volleyball, adaptive drumming, gamming and dance. Attendees had the opportunity to not only partake in these activities but also learn about resources tailored to individuals with disabilities, including service dog demonstrations and adapted driving programs designed to enhance mobility and independence.²





RecFest started in 2017, a time when adaptive sports was not readily accessible in central Pennsylvania. Through tireless advocacy, outreach and collaborative efforts with local businesses and community partners, the PM&R department has championed the growth of adaptive athletics, resulting in the development of several adaptive sports and recreational programs throughout the region. Central Pennsylvania now offers youth wheelchair basketball and All Starz field hockey, only the second inclusive field hockey team created in the U.S.

After experiencing a life-altering injury or illness, the first focus is on restoration of health, followed by a course of rehabilitation. Rehabilitation's short-term goals and milestones focus on attaining independence in daily activities and functional mobility. These medical needs are typically met in traditional rehabilitation settings such as an inpatient rehabilitation hospital or an outpatient clinic. However, the ultimate goals for persons with disability often extend beyond household mobility and independence and the traditional boundaries of health care. Persons with disabilities often face societal barriers, negative perceptions, and discrimination. Stigma associated with a disability can lead to exclusion from education, vocation, and recreation, depriving individuals of opportunities essential to their social development, health and overall well-being. Exclusion fosters inactivity, which may end up restricting mobility even further. Inclusion, on the other hand, builds bonds and fosters trust—trust in the health care community and society at large, but importantly, trust in their own ability.

Enter RecFest. Sports and recreational activities can help to reduce the stigma, discrimination and exclusion associated with having a disability because it naturally transforms community attitudes. Adaptive sports highlights an individual's ability. Assumptions about what a person can and can't do are reshaped for the positive. Participation in adaptive sports and recreation changes the person with a disability in an equally profound way, empowering them to stay active and engaged in more than just sports, but also in their communities. This leads to increased physical and mental strength, which further promotes independence and self-sufficiency. Adaptive sports provides the bridge that strengthens the bond and restores the trust between persons with disabilities and their communities.

An email testimonial from RecFest 2024 attendee speaks to this perfectly,

"I want to take a moment to congratulate and thank you for all your hard work with the RecFest event. It was an incredible event and terrific turnout!"

I also wanted to share a touching story that a mother shared with me. She said that her daughter has Down's syndrome and has been struggling since COVID to engage or get excited about anything. Prior to the pandemic she had a job at a mall and was engaging more with others but all that came to an end with COVID.

The mother went on to say how her daughter lost all that and just hasn't been able to get that back and doesn't seem to want to do anything or go anywhere but she brought her to this event today and was so thankful. She shared that her daughter is over with the drumstick fitness group as we speak and is loving it!



She said she hasn't seen her daughter this happy in so long. The mom said her daughter has been drumming song after song with kids she doesn't know having a blast, smiling, and laughing. She said she hasn't seen her move like that let alone engage like that in forever! It was such a beautiful thing. The mother was so touched and grateful for today's event and all the activities and resources it provided. Thank you for all that you do!"

With RecFest 2024 in the books, planning for RecFest 2025 has already begun! Fueled by the desire to meet the needs of our patients and their loved ones, the department of Physical Medicine and Rehabilitation at Penn State Health will continue advocating for and collaborating with our community to promote, celebrate and encourage ability for all.

Additional Media coverage of RecFest 2024 can be found by scanning the QR codes below.

Inclusion through sports:
Penn State Health RecFest



Penn State Health RecFest 2024 Highlights
Recreational Activities for All Ages and Abilities



Participation in adaptive sports and recreation changes the person with a disability in an equally profound way, empowering them to stay active and engaged in more than just sports, but also in their communities.

References

1. <https://gopsusports.com/adaptive-athletics>
2. <https://pennstatehealthnews.org/2024/09/recfest-2024-highlights-range-of-recreational-activities-for-all-ages-and-abilities/>

The Transformative Impact of Adaptive Sports



*Introducing a patient
to adaptive golf*

Playing a sport during childhood is considered a normalcy, something every child looks forward to with excitement and enthusiasm. This was especially true for Jacob, an eight-year-old boy with a profound love for basketball. From the early age of five, Jacob dreamt of playing for the Orlando Magic, dedicating countless hours to perfecting his game with hopes of one day making it to the NBA. Unfortunately, Jacob's dreams took an unexpected turn when he was involved in a car accident that resulted in an incomplete spinal cord injury, leaving him with no function below the waist.

The aftermath of the accident drastically altered Jacob's life. He spent a year and a half in the hospital, learning how to cope with a new lifestyle that included extensive rehabilitation and adjustment to his physical limitations. Instead of playing basketball with his teammates and practicing layups and jump shots, Jacob's days were filled with various doctor's appointments, physical therapy sessions, and the challenging process of adapting to life in a wheelchair. The time he spent in the hospital not only physically distanced him from the sport he loved but also put a significant dent in his ultimate plan of playing basketball for the Orlando Magic.

Coming out of the hospital, Jacob was a different person and had to learn how to appreciate life from the confines of his wheelchair. He was immediately enrolled in Adaptive Sports, which served as an avenue to find some normalcy within his new identity. Adaptive Sports turned out to be a beacon of hope for Jacob, giving him a profound new outlook on life and restoring the competitive edge he thought he had lost.

Adaptive golf, in particular, allowed Jacob to reconnect with the joy of outdoor activities and sportsmanship. The sport provided a unique blend of physical challenge and mental relaxation, which was crucial for his rehabilitation. Learning to play golf from a seated position required Jacob to develop new techniques and strategies, significantly improving his upper body strength, coordination, and flexibility. The repetitive nature of the golf swing and the need for precise control helped Jacob enhance his motor skills and dexterity. These physical benefits were

complemented by the mental peace and focus that golf provided, offering him a much-needed escape from the stresses and frustrations of his condition.

For children like Jacob who are confined to a wheelchair from a young age, it is imperative that they get moving early on, and stay active during their developmental years. Activities like adaptive golf, wheelchair basketball, and adaptive aquatics are tailored to accommodate their disabilities, ensuring they receive the physical benefits of exercise in a safe and supportive environment. These sports help improve coordination, flexibility, and endurance, contributing to the child's overall physical development. Beyond physical health, adaptive sports have significant psychological and emotional benefits. For children who may feel different due to their disabilities, participating in sports alongside their peers can help reduce feelings of isolation and build a sense of belonging. This inclusion is vital for their emotional well-being, as it fosters a positive mindset and encourages resilience in the face of challenges.

Adaptive Sports can serve as an avenue to help patients with a disability to regain a piece of their lives. For Jacob, it provided a path to reclaim his love for sport, offering resilience, emotional support, and a renewed sense of purpose. He now wants to become a pediatric physiatrist and help other children with spinal cord injuries, like himself. Adaptive Sports gave Jacob a new perspective on life, giving him the confidence to believe in himself, and to show others around him that anything is possible.

Adaptive Sports can serve as an avenue to help patients with a disability to regain a piece of their lives.



NEWS FOR ADMINISTRATIVE DIRECTORS COUNCIL

physiatry.org/AdminDirectors



By: Yelena Sionova, MBA, Department Administrator, Rehabilitation Medicine at NYU Langone Health

Hello colleagues! Building on an excellent conference this year in Orlando, we are looking forward to seeing you in Phoenix in 2025! Your Administrative Director's Council has been hard at work building a great slate of content for the group this year. In addition to our business meeting, we will have administrative director focused sessions on clinical practice analytics, managing physician leader transitions, optimizing inpatient consult services, and more. Additional administrative relevant sessions will cover faculty development, leadership, value-based care, and programmatic growth.

Kicking things off, we hope to see everyone the evening of February 26th for the Chairs and Administrative Directors joint meeting, with remaining sessions in the days directly following. As food for thought, in the business meeting we will be asking the group for any best practices for integrating AI into your daily work life. How are you incorporating these tools into your work, if at all? What products have proven useful?

Please note, we will be voting for a new ADC Secretary this year so begin to think about if you are interested in joining the cabinet. And to all our administrative directors, your participation and engagement make this group what it is and keeps AAP as a highlight every year for learning from one another and networking. Thank you! Safe travels, see you in Phoenix.

NEWS FOR DEPARTMENT CHAIRS & DIVISION CHIEFS COUNCIL

physiatry.org/ChairCouncil



By: David P. Steinberg, MD, MMM, Chair, Physical Medicine and Rehabilitation, University of Utah, Executive Medical Director, Craig H. Neilsen Rehabilitation Hospital, Salt Lake City, Utah

I'm so glad to be connecting with you all in the waning weeks of 2024. I think I'm stating the obvious to all when I reflect that this year has been challenging. We've seen hurricanes and their aftermath wreak havoc. We've seen terrorism, wars, and famine ravage communities. We've seen political, economic, and climate threats surge into our day-to-day reality. Personally, I said goodbye to my beloved father-in-law who served as my mentor, guide, and confidante through incredible change. But, to be fair and balanced, we've all also experienced positive changes and growth—in our loved ones, in our colleagues and students, in our programs, and in ourselves. We've seen hope rise out of tragedy. We've witnessed compassion and caring. We've seen heroism and commitment. We've also experienced innumerable personal, professional, and societal changes. We know that we must encounter change throughout our lives. In order for us to grow and thrive, change must be what we do rather than something that merely happens to us.

OK, now I'll get off the soap box... The AAP Chairs Council is actively planning our presentation for our annual council

business meeting and joint session with the Admin Directors Council held during the AAP Annual meeting in February. This year's topic will be "Strengthening PM&R Programs by Delivering Organizational Value". In preparation we are sending a survey to department chairs using our listserv. We are also working with the Admin Directors Council to contribute content for their track at the annual meeting. We are actively developing content for our Chair Council Podcast series with a goal to create 2-3 podcasts per year. Some topics we are considering include the value of PM&R and various leadership topics. The Chairs Council has been advocating for and contributing to the planning of a new proposed annual AAP leadership development conference. Our Chair's Council's List Serv continues to provide an effective communication platform for distributing important communications like informing Chairs directly about new AAP initiatives and disseminating program updates such as leadership transitions and retirements.

Even as Academic Physiatry faces serious challenges, the AAP Chairs Council strives to help our leaders and programs grow and thrive by creating a shared, supportive community that offers our members solutions, ideas, and positive energy.

Yes, 2024 was difficult and tough. May 2025 be a year in which we open up our hearts to new possibilities and transform our hopes into the change for which we strive. The AAP Chairs Council wishes you all happiness and peace in this next year. As they say, may the wind always be at your back.

Looking forward to seeing you in Phoenix!

NEWS FOR PROGRAM COORDINATORS COUNCIL

Physiatry.org/ProgCoordinators



By: Leslie Justice, BA, C-TAGME, GME Program Coordinator, University of Kentucky PM&R Program

To all my fellow coordinators, hello from your AAP Coordinator Council! As many of you know, we have been working hard to be a resource to you and represent coordinators on a national level. I'm very excited to share the accomplishments and new items that we've worked on, including: updating coordinator resources, improving communications and representation, and planning for AAP 2025.

AAP Coordinator's Manual:

One of the biggest accomplishments is the complete overhaul and publication of the AAP Coordinator's Manual. This document hosts a wealth of knowledge that has been compiled into an easy guide to help understand all things PMR, with emphasis on the importance of coordinators in ACGME. This can be found on AAP's Coordinator's page under resources

Communications Listserv:

Better communication between the council and our fellow coordinators via the coordinator listserv was another goal we aimed to achieve. This year, we've started to share important information including council members and individual duties, council meeting minutes [with details on different initiatives and their progress], resources like the AAP POD, ABPMR Coordinator website, and ACGME's Virtual Medical Education Summit, and more!

AAP 2025 Planning:

A big part of the council's duties is to plan the coordinator sessions for each AAP national conference. After AAP 2024, we sent out a post-conference survey that gave attendees the opportunity to provide feedback on presentations, give recommendations / requests for future topics, and additional comments. Based on this, we have worked to update the coordinator sessions to reflect this and worked to find presenters and topics of interest. A few reminders:

We Need Presenters: the coordinator sessions rely heavily on coordinator participation, so if you have a topic you feel confident in or want to share knowledge with your fellow PMR coordinators, please reach out!

Voting Year: For AAP 2025, it is a voting year for the coordinator council! We have two open positions: Secretary / Program Director, and Vice Chair, and anyone can nominate themselves and serve on the council. To learn more about these positions, visit the coordinator council page on AAP's website or reach out.

Perks of presenting / serving on the Council:

- Justification of attendance to the in-person conference (in Phoenix, AZ!)
- Maintenance of Certification (MOC) qualifications for the C-TAGME
- Sharing valuable insight with your fellow coordinators
- Involvement and exposure to AAP and PM&R programs across the nation
- Further your career / bulk up that resume (leadership)

Thank you for being part of this wonderful community and sharing your wealth of knowledge with your fellow coordinators. We hope to see you at Physiatty '25!

NEWS FOR JUNIOR FACULTY COUNCIL

physiatry.org/JFC



By: Allison Schroeder, MD, Attending Physician University Hospitals, Ohio, Assistant Professor, Department of Orthopedics, Case Western Reserve University

Hello everyone! I am very excited to share updates on behalf of the AAP's Junior Faculty Council, which is in its 3rd year and continuing to grow. We have added two new members to our leadership team: Kristen Harris, Academic Development Representative, and Michael Nguyen, Social Media and Digital Outreach Representative.

We are continuing to work to address the needs of early career academic physiatrists as we navigate the transition to attending-hood together. We are working to establish a mentorship program that would allow early career physiatrists to be paired with senior mentors. We are in the process of creating podcasts geared towards junior faculty. We also recently launched an International Physiatty column in *Physiatty Forward*.

At Physiatty '24 we hosted an Early Career Speed Networking Event, and an educational session geared towards early career members discussing efficiency and productivity. Stay tuned

for more information about events at Physiatty '25, including the Early Career Speed Networking Event and an educational session entitled "From Intentions to Actions: Mastering Habit Development for Academic Physiatrists."

We hope to see you all in Phoenix!

NEWS FOR MEDICAL STUDENT EDUCATORS COUNCIL

physiatry.org/MSEC



By: Sarah Eickmeyer, MD, Chair of the Department of Physical Medicine and Rehabilitation, University of Kansas School of Medicine, Clinical Service Chief for Physical Medicine and Rehabilitation, University of Kansas Health System

The Medical Student Educators Council (MSEC) leadership transitioned earlier this year. Ravi Kasi, MD completed his term and now serves as the past chair. Leslie Rydberg, MD assumed the role of chair. Ashlee Bolger, MD assumed the role as vice-chair, and Sarah Eickmeyer, MD was elected secretary/program director.

The MSEC continually updates advising resources and education tools, including an updated PM&R Application Guide to share with medical students you are advising. Medical Student Educators Council – AAP (physiatry.org) We continue to co-host the Road to Residency Advising program with the Resident and Fellow Council.

The MSEC is working on an educational project to create a set of national PM&R rotation learning objectives. If you are involved in medical student rotations at your institution and would like to share your expertise on this project, please reach out! MSEC welcomes new members at any time.



NEWS FOR MEDICAL STUDENTS COUNCIL

physiatry.org/MSc



By: Lydia Smeltz, MS4, Penn State College of Medicine

The future of physiatry is bright! The AAP Medical Student Council is filled with energy, great ideas, and a love for the field. Highlights from this year's team include:

Membership/Recruitment:

We launched the AAP Distinguished Medical Student Badge Program (with 39 badges awarded to date) and the quarterly AAP MSC e-Newsletter and saw impressive growth of medical student AAP members!

Mentorship:

We've been growing and sustaining our successful Big Buddy Program, tailored our mentorship guide, and have a Big Buddy Program evaluation poster coming to Physiatry '25.

Education/Well-being:

Wellness Wednesdays continue! We've also had 5 episodes of #ThisIsPhysiatry Podcast and a bonus Road to Residency Webinar for M1s, M2s, and Premedical Students Interested in PM&R — lots of interest in our field!

Research:

We've seen increased interest in the revamped quarterly virtual journal club and have a research project in the works!

Diversity:

We created a Visual description guide as well as informative carousels for social media and have a URiM physiatrist spotlight.

Social Media:

The MSC continues to be stellar at working to keep trainees and professionals in the know with promotion of described events and community-building.

Be sure to look out for the launch of AAP Official Student Interest Groups and catch us at Physiatry '25 with the following MSC-Led Sessions:

- AAP Student Quiz Bowl
- "Starting, Scaling, and Supporting: Students Advocating with the Disability Community" (Workshop Session)
- "Bridging Gaps through Mentorship: Engaging Medical Students, Residents, and Attending Physicians" (Workshop Session)
- "Care for People with Intellectual Disabilities: The Role of PM&R" (Workshop Session)
- URiM Networking Session

Thank you for your engagement with the AAP and AAP MSC - it is so rewarding to serve all of you. Looking forward to connecting with everyone (especially fellow medical students and future colleagues) in Phoenix for Physiatry '25!

NEWS FOR RESIDENTS & FELLOWS COUNCIL

physiatry.org/RFC



By: Jessica Sher, MD
Resident Physician, University of Washington

It is an exciting time of year for residents and fellows as the first quarter of the academic year comes to an end and some of us embark on fellowship interviews. Our talented board of residents and fellows continues to wholeheartedly dedicate themselves to the AAP community and spearhead initiatives in education, social media, and wellness. I am proud to share the many achievements accomplished by this group of passionate physiatrists.

Here are the latest updates from each of our subcommittees:

Digital Outreach:

The Digital Outreach Committee creates and produces podcasts on a variety of topics for AAP members ranging from electrodiagnostic basics to career advice. They have assisted with the launch of the new Research 101 podcast and have continued the revival of Career Chats, in which veterans in the field share career advice. They have also launched a new #ThisIsPhysiatry podcast, which aims to spread awareness for the specialty. Make sure to check out the Summer 2024 edition of Physiatry in Motion, which centers around topics of activity including disability health, neuromodulation, and technology in spine care and sports.

Research:

The Research Committee supports clinical research endeavors by PM&R trainees. Their Research 101 podcast introduced last year has published podcasts on topics including creating a strong poster presentation, writing case reports, and getting started in research as a junior trainee. Stay tuned for future episodes focusing on literature reviews! They have also re-launched the Orthobiologics & Regenerative Medicine podcast, which explores the frontier of regenerative rehabilitation.

Social Media:

The Social Media Committee expands AAP's social media presence by creating content promoting new initiatives and fostering collaboration within the trainee community. Recent initiatives include showcasing new podcast episodes, virtual journal clubs, book clubs, wellness events, mock interviews, and more. Don't forget to follow us on Instagram [@aaphysiatrists](https://www.instagram.com/aaphysiatrists) and X [formerly Twitter] [@AAPPhysiatry RFC!](https://twitter.com/AAPPhysiatryRFC)



Wellbeing:

The Wellbeing Committee engages residents nationally to promote wellness initiatives as well as contribute to *Physiatry Forward*. This year, we are extremely excited to announce an inaugural Art Installation that will debut at *Physiatry '25*! This project will feature a gallery of collaborative art featuring patients' and providers' works at the annual conference. Our aim is to bring the patient perspective to an academic conference setting. The Wellbeing Committee is also spearheading the 3rd annual national Residency Fitness Challenge, which promotes exercise and time management amongst *Physiatry* residents via friendly competition.

On behalf of the RFC, we are incredibly thankful for the continued support from this community. In doing so, we are making great strides in advancing the field. Looking forward to seeing everyone in Phoenix, AZ for *Physiatry '25*!

NEWS FOR RESIDENCY & FELLOWSHIP PROGRAM DIRECTORS COUNCIL

physiatry.org/RFPD



By: Tracy Friedlander, MD, MEHP, Assistant Professor, Johns Hopkins University School of Medicine, Residency Program Director, Medical Director, Johns Hopkins Bayview

Another recruitment season is upon us, and we wish you all success and easy reading during this busy time of year. We are looking forward to hearing everyone's feedback about pilot of *Thalamus Cortex* for PM&R this season. Feel free to reach out to the RFPD council, Recruitment Subcouncil, or *Thalamus* representative directly. We also hope to have information to share after this year's recruitment about the impact of increasing the number of preference signals to 8.

Here is a quick recap of our quarterly virtual program director meetings. Some of the PDs are in discussion with the AANEM and ABEM regarding potential to decrease the 6-month electrodiagnostic training requirement for board eligibility. The recruitment Subcouncil is working on creating a standardized letter of recommendation to pilot for the 2025-2026 recruitment cycle. This would be recommended for use by one or more letter writers to improve consistency and fairness in evaluation of applications.

Registration has opened for *Physiatry '25* in Phoenix in February. We are looking forward to seeing everyone, sharing ideas, and having some fun. The first day of our RFPD meeting will include updates from the ACGME, ABPMR, Residency Recruitment Subcouncil, and Sports Medicine Fellowship Representatives. On the second day of our RFPD meeting, Drs. Paul Hemmer and Jamie Geringer from Uniformed Services will lead a workshop on faculty development. We look forward to an interactive and educational session on how to support our faculty educators.

We are discussing having a new program directors meeting after RFPD at future *Physiatry* annual meetings. If you think this would be helpful or want to participate, please reach out.

We can anticipate ACGME to share an updated draft of program requirements available for comment in March 2025. These requirements would not go into effect until July 2026 at the earliest.

NEWS FOR VETERANS AFFAIRS COUNCIL

Physiatry.org/VACouncil



By: Alice Hon, MD, Attending Physiatrist, VA Long Beach Healthcare System

This year the AAP VA Council is creating a VA mentor list for students, trainees, early career, mid-career and new hires to the VA for individuals interested in short and long term mentoring. We are increasing the resources available on the updated AAP VA council page for our members. We are increasing the outreach to increase the number of AAP members with VA affiliations.

At the 2025 AAP Annual Meeting, look out for two presentations by the AAP VA Council members "Timing, Timing, Timing: Traditional and Non-traditional Career Pathways in *Physiatry*" and "Playing Devil's Advocate: Analyzing the Current Healthcare Delivery Process Using a Quality Objective Lens as it Relates to Efficiency in the VA and Beyond". We also look forward to hosting another VA Council meeting where VA and non-VA AAP members interested in veterans rehabilitation issues can collaborate.

We hope you will be able to join us at the 2025 AAP Annual Meeting in Phoenix, AZ.



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VIP PHYSIATRY '25 EXPERIENCE



A Sense of Belongings: Lauren Clarke



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



Lauren Clarke is a fourth-year medical student at Stanford University pursuing a joint MD/MA in Education. Lauren hopes to work towards improving physician competency in caring for people with disabilities, especially intellectual disabilities, through increasing the accessibility and quality of disability-focused medical education. Lauren is the Education & Well-being Representative of the Association of Academic Physiatrists [AAP] Medical Student Council and the Co-Chair of the American Academy of Developmental Medicine and Dentistry [AADMD] Student/Resident Committee. Lauren is applying to residency this cycle and hopes to have medical education and disability advocacy play a significant role in her future career.

1. **Water bottle** – I never leave my apartment without a water bottle, and this Nalgene has gotten me through my clinical rotations. It is covered with stickers of everywhere my partner traveled over the last year, including Australia for the Women's World Cup. It's a great conversation starter and a nice reminder of home during long inpatient days.
2. **Stickers** – With my newfound [limited] free time as a fourth-year med student, I have been making sure to travel a bit and collect some stickers of my own. While I didn't go very far to get it, the most recent addition was from my local In-N-Out after getting a double-double to celebrate ERAS submission. My goal is to start my intern year with a water bottle full of stickers from my own adventures!
3. **Nectarine** – I love supporting local farmers, and I try to go to a farmers' market once a week. The hospital I'm currently rotating at has one on-site, so I've been able to enjoy the last few weeks of summer fruit.
4. **"Cotton Ball Guy"** – I do a lot of volunteering with Special Olympics, and I made this little cotton ball guy at our last vaccine clinic. The activity successfully distracted the younger athletes as we gave them their shots, and the one I made has kept me company on my desk ever since!
5. **Rainbow Lanyard** – I see patients at a VA Prosthetics & Orthotics clinic every week as part of my continuity clinic rotation, so I always have my VA ID badge on me. As a queer medical student, I love the rainbow lanyard and take any opportunity I can to increase the visibility of LGBTQ+ physicians.
6. **Multicolored Pen** – These have quickly become my favorite hospital pens. They are small enough to fit in my scrub pocket, I can use different colors for different tasks, and they are cheap enough that I don't feel bad when I inevitably lose them.
7. **Lens cloth** – Another item I never leave my apartment without! I have worn glasses for most of my life and have always needed them to be free of smudges. I always make sure to have one in my backpack, car, and scrub pocket.
8. **Headphones** – I love listening to music and always keep headphones in my backpack for the long walk from the parking lot to the hospital. You can catch me listening to 70s rock [I know all the words to almost every Billy Joel song], country, and showtunes!
9. **Notebook** – I recently found the notebook I used to prepare for medical school interviews, and it was fun to reflect on the goals I had set for myself five years ago. I got a new notebook to use during residency interviews so that I can look back on this time in my life when I'm applying for fellowship positions and/or attending jobs.



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