I think faculty members all get asked a lot by students and learners – why did you choose family medicine? Some days it is easy to say why. On a day when you see a newborn baby come in with a worried first time mom, followed by a teenager headed off to college after overcoming some serious learning issues and ADD, and then you get to see a patient who has finally made some lifestyle changes and their blood pressure is under control and your last patient is a 98 year old who still makes dinner and bathes independently. Those are pretty great days. Not every day is like that.

Some days patients are frustrated because they waited too long to get an appointment with you, you had paperwork that was confusing or redundant to complete and your staff is annoyed because the complicated patient who always comes late showed up and you agreed to see them because it was the right thing to do. Those days are harder to find the joy and satisfaction.

I am not naïve that every day in life or medicine or family medicine is easy and filled with roses. We all have challenges and heartaches. For me family medicine fit my goals and views – it is as simple as that. I want to see every patient as a person and try to understand their health and well-being. It is my calling to hear these people and help to guide them to health and wellness if possible or assist them through illness and even death and dying with grace. I love what I do and hope you will find the joy in Family Medicine. This issue asks the same question to an attending, a resident and a fourth year medical student at OSU, why did you choose family medicine?

Allison Macerollo and Jess Pinto a second year medical student who was summer extern in FM. More info about this program soon on MD2B!
Why Family Medicine?
By Eunice Oppenheim-Knudsen, MD - OSU Family Practice at Upper Arlington

It was a beautiful November day in Winnipeg, Manitoba, Canada when I had to pack my bags and drive 2 hours to small town named Souris. This is where I was to spend 6 weeks for my Family Medicine rotation – I dreaded the thought of it all. On the way there, big snowflakes suddenly came and it was a white out! 3 ½ hours later, I made it safely to Souris and found out that I will be living in the hospital using one of the private patient rooms. Now, I really hated Family Medicine!

By 7 PM that night, the Head Nurse has advised me that my days will start with hospital rounds by 6 AM, be in the OR Monday and Wednesday mornings, attend ambulatory clinics the rest of the time, be ready to see cases with the attending “when something interesting comes in” after hours and of course be there for any deliveries. I hated Family Medicine even more by this time.

After my first night on my hospital bed (yes, the one you can crank up and down), I was introduced to the hospital staff and the patients on the floor. After rounds, I followed one of the attendings who had a specialty in anesthesiology to the OR. A general surgeon came to the hospital 2 mornings a week to do some cases here. Just before lunch, I was asked to walk over to the ambulatory clinic down the street and see patients all afternoon. At about 5:30 PM, the attending walked back with me to the hospital to do evening rounds. I was warned that they were expecting about 3 deliveries over the next 6 weeks and that they will call me if any of these women came in after hours.

I was exhausted needless to say and felt frustrated that I was expected to do so much!

That night, I told myself that this was not the path I wish to take!

However, as the days went by, I quickly realized that the longitudinal and intergenerational care these physicians provided greatly appealed to me. The challenges they faced daily were very intriguing and their scope of knowledge unbelievable. I was also amazed at the comprehensive and empathetic care the patients received from each and everyone of them. Social and mental concerns were always incorporated into their physical issues.

Within 3 weeks in Souris, I knew that Family Medicine was for me. By then I have realized that there is not another field in medicine that would allow me to provide complete health care to a patient from birth to death. The most Senior Physician in the community has basically looked after 3 generations of most families in the community! Where else do you see that?

A Family Medicine practice would allow me to get to know a person beyond their disease; learn about their family members and for the most part treat them as well and best of all treat them as a whole human being at all times!

Looking back, I am now very grateful for those few weeks in Souris, Manitoba. Those weeks changed me and the way I see myself as a practicing physician. I witnessed how those physicians in their own ways, changed the lives of the people they touched. That is what I want.

In my practice now, I can only hope that I can provide my patients with the type of care those physicians offered. I will forever aim for excellence, keeping up with the changes in medicine so that I can continue to offer my patients the best care possible. I will look forward to the days when I can sit down with a patient and realize that I have done the same with his or her parents, grandparents or even great grandparents.

Practicing medicine offers us many privileges, but for me these are the things that I value the most.
Resident Feature
By David Tessier, MD – FM Resident

As a Family Medicine resident I have been welcomed into the intimate lives of my patients, caring for multi-generational families. I have delivered babies, sutured lacerations, packed wounds, prescribed antihypertensives, and mourned the loss of patients & their family members. It’s truly a privilege to assist patients in moments of transition and crisis, and through these events I become enmeshed in a family’s life. While it is a privilege to provide acute and chronic disease care, these services must be provided with an eye toward preventive care and health maintenance.

As Family Medicine physicians, we are the front line doctors for the diseases that are afflicting this country. The leading causes of death in the United States are Heart Disease, Cancer, and COPD. The common link among these diseases is the importance of preventative care and healthy lifestyle choices. As providers of “Birth to Grave” care family physicians are positioned to be agents of change. The moments in medicine that I am most proud of are those when I have enabled positive lifestyle changes. It’s a great feeling when you can work with a patient to stop smoking or to prevent the onset of diabetes. A favorite memory is when after frequently discussing the importance of smoking cessation, some might call it nagging; a patient came to me and said she was ready to quit. Together we discussed her options and settled on nicotine replacement therapy. We met frequently throughout the process and celebrated her accomplishments. Patients put an amazing amount of trust in us as physicians. It’s an honor to be able to return that trust by positively shaping a patient’s health and quality of life.

Student Feature
By Aurielle McCauley, Med 4

My journey to Family Medicine has been shaped by quite a few experiences while at Ohio State. My desire began after attending an evening talk about the state of health care. Throughout the talk, there were mentions of health disparities, the amount of people uninsured, the state of the hospital as an entity, and of course the cost of health care. I left that talk thinking to myself, “What in the world can anyone do about this?” I was so moved by this talk, I stayed up past my bedtime trying to figure out a way to save health care once and for all. Of course I discovered no one solution exists, but there is a way to be on the frontlines as a physician in the community caring for these patients who are underserved and underinsured. Family Medicine offers such a vast array of opportunities to contribute to helping patients including prevention screening and helping to prevent unnecessary costly medical bills. I truly want to see the day that everyone has access to healthcare and receive comprehensive quality care.

Through my Family Medicine clerkship I had the opportunity to see how some of these goals of promoting health and comprehensive care were becoming a reality around Columbus and beyond. Many of the doctors I worked with at the practice had wonderful working relationships with patients, and were doing as much as they could to make sure these patients received proper care. One physician even had the chance to go give talks at the local community center about healthy eating and exercise to promote community healthy living. Being in the midst of these programs and initiatives inspired me to engage in my community and become a student doctor, and eventually, physician who will go beyond the four walls of the clinic to help the patients with the greatest need. As a family physician, I know that I will be able to fulfill my goals of building long term relationships with patients, preventing patients from developing chronic diseases, and helping coordinate high value care for my patients.
**FMIG Officers**

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**FMIG Newsletter**

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**PRIMARY CARE WEEK, OCTOBER 5-9**

If you are interested in any or all of the listed activities, please sign up. There are six different tabs on the sign up document, so make sure you check all of them out! Space is limited for each lunch talk to about 40 people and the mixer will be limited to about 75 people, so sign up sooner rather than later!

**LUNCH TALKS FROM 12:00 P.M. (NOON) TO 1:00 P.M. EACH DAY:**

**OB/GYN Panel**
Monday, October 6
Graves Hall, Room 1063

**Pediatrics—Overcoming Resistance to Vaccination with Dr. Ashley Fernandes**
Tuesday, October 6
Graves Hall, Room 1063

**Family Medicine—Direct Primary Care with Dr. Ryan Kauffman**
Wednesday, October 7
Graves Hall, Room 1063

**Med-Peds Physician Panel with Drs. Allison Rossetti and Megan Brundrett**
Thursday, October 8
Location TBD

**Internal Medicine—Small Group Introduction to IM with Drs. Alexa Meara, Cassie Grenade, and David Bond**
Friday, October 9
Graves Hall, Room 1063

**PRIMARY CARE WEEK MIXER**

Residents from each of five different primary care specialties (Pediatrics, Med-Peds, Family Medicine, Internal Medicine, and Physical Medicine and Rehabilitation) will meet with interested students at Hampton's on King. Appetizers will be provided.
Friday, October 9
7:00 p.m. to 10:00 p.m.
Hampton's on King

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FMIG Appreciates the financial support of the Columbus family medicine residencies:

Grant
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Thank You for your continued support!