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I.  A Message from Graduate Medical Education Leadership.

On behalf of the program directors, teaching staff, and residents, it is my distinct pleasure to present you with the Ball Memorial Hospital Annual Report to the Board and Medical Staff. The year can be summarized as another year of growth and creativity. We experienced two site visits for Internal Medicine and Transitional year by our GME accrediting body, the Accreditation Council for Graduate Medical Education (ACGME), and continued with our goals of improving the Department of Medical Education.

Our commitment to excellence was realized after our 2009 ACGME Institutional Site Visit, where we received an accreditation cycle of five years (the maximum granted) with no citations or recommendations. This excellence continues with a recent five-year accreditation cycle length for the Family Medicine Residency and four year cycles each for the Internal Medicine and Transitional Residencies. The average cycle length of our programs is identical to that of the IU School of Medicine. As we transition to the ACGME’s “Next Accreditation System” we hope to achieve the same level of excellence.

The best contribution we can make as educators is to provide the system with the highest quality graduates—competent and compassionate practicing physicians who are active in our community. We strive to do this by, first, having a successful recruiting season each March. This year was again no exception, with 100% filling of all programs.

One exciting bit of news is that we have been granted additional residency funding, meaning that began expanding our primary care programs this past year for the first time in over twenty years. The creation of third year medical student clerkships in 2014 with the goal of having all four years of medical school in Muncie and a local Admissions Committee are all geared towards recruiting “top talent” students to complete these residencies at our institution.

We look forward to another excellent year of recruiting, providing quality patient care, and promoting the excellence in scholarly activity we are proud of at our unique institution.

J. Matthew Neal, MD, MBA, CPE, FACP, FACE
Executive Medical Director Academic Affairs
Designated Institutional Official for Graduate Medical Education
Indiana University Health Ball Memorial Hospital
Volunteer Clinical Professor of Medicine
Indiana University School of Medicine
II. The Graduate Medical Education Committee (GMEC)

The GMEC is a standing committee within the Division of Medical Education that supervises, coordinates, reviews and assures the quality of education of all residency training programs at IU Health Ball Memorial Hospital. The committee has the authority and responsibility for monitoring and advising on all aspects of graduate medical education at IU Health Ball Memorial Hospital. The GMEC oversees and assigns work specific issues to the various subcommittees and residency programs such as house staff affairs, peer review, ACGME core competencies, policies, internal review, recruitment issues, and performance improvement. The GMEC accomplishes these tasks as required according to the ACGME Institutional Standards.

The GMEC meets at least bimonthly; official agendas and minutes of all meetings are taken and maintained in the Division of Medical Education.

GMEC Members 2012-13:
- Dr. Neal, DIO & Exec Med Director Academic Affairs
- Dr. Whitt, PD/Family Medicine
- Dr. Bunch, AD/Family Medicine
- Dr. Burugapalli, AD/Internal Medicine
- Dr. Costello, PD/Transitional Year
- Dr. Daniel, Dir Behavior Science/Family Medicine
- Dr. Dickey, AD/Internal Medicine
- Dr. Johnston, PD/Internal Medicine
- Dr. Morrical, AD/Internal Medicine
- Dr. Schreiner, AD/Family Medicine
- Dr. Shue, AD/Family Medicine
- Dr. Yuhico, AD/Family Medicine
- Dr. Gamble, Physician/Hospitalist Program

Peer-Elected Resident Members 2012-13:
- Dr. Murray, Resident/Transitional Year
- Dr. Gheyara, Resident/Internal Medicine
- Dr. Arcenas, Resident/Internal Medicine
- Dr. Young, Resident/Family Medicine
- Dr. Brown, Resident/Family Medicine

During the course of the academic year, the GMEC provided oversight for our four (4) ACGME residencies, Institutional and Residency Program site visits, and the requirements of the ACGME, including:
- Internal Reviews
- Duty Hours
- Strategic Planning for Medical Education
- Monitor Learning Environment
- Approval of Participating Sites
- Review of Annual Resident Surveys
- Faculty Development
GMEC Subcommittees
The oversight powers of the GMEC are augmented by the GMEC Subcommittees, which are charged with overseeing their respective areas of resident education and administration. These committees meet regularly to complement the GMEC, which meets at least bimonthly. Reports from all subcommittees are discussed at the GMEC.

GMEC Peer Review Subcommittee—Duties:

1. Oversee the peer review process for house staff.
2. Inform Program Directors and residents regarding peer review issues and situations.
3. Develop and distribute “Peer Pearls.”
4. Deal with house staff concerns regarding peer and personal issues relating to patient care

Meeting frequency:  Bimonthly, 2nd Friday at 11:30 am (January/March/May/July/ September/November).

J. Bunch, Chair
D. Morrical
C. Shue
R. Yuhico
S. White, RN (QM)
A. Young (FM)
M. Celkis (FM)
J. Schuerger (FM)
J. Chan (IM)
K. Zakharian (IM)
T. Varghese (IM)
N. Pipito (TY)

GMEC Recruitment Subcommittee—Duties:

1. Develop and investigate policies for recruitment.
2. Standardize approach to institutional recruitment.
3. Assess and evaluate a strategic approach to the recruitment process.

Meeting frequency:  Quarterly, 1st Thursday at noon (Mar., June, Sept., Dec.) or as needed during the recruitment season (fall through early spring).

B. Dickey, Chair
M. Schreiner
R. Johnston
J.M. Neal
G. Costello
E. Nordstrom (FM)
N. Gheyara (IM)
N. Michael (IM)
V. Sandu (IM)
E. Stewart (TY)
J. Rybolt (TY)
**Residency & CME Coordinators**

**GMEC Scholarly Activity & Research Subcommittee—Duties:**

1. Define and implement basic program standards in regards to scholarly requirements.
2. Coordinate and implement annual scholarly activity/research symposium.
3. Be a review forum for residents to critique various presentations.

Meeting frequency: Monthly, 2nd Thursday of the month at 8 AM during the fall and spring.

J.M. Neal, Chair  
B. Burugapalli (IM)  
M. Geinosky (Research)  
J. Whitt (FM)  
D. Bishop (IUSM-Muncie)  
C. Shue (BSU)  
R. Twibell (BSU)  
M. Kidd (Nursing Admin.)  
C. Overpeck (FM)  
R. Arcenas (IM)  
J. Glant (IM)  
H. Amedi (IM)  
A. Roque (IM)  
A. Ollerton (TY)

**GMEC Patient Safety & Quality Improvement Subcommittee—Duties:**

1. Interdisciplinary committee charged with the coordination and implementation of programs for ensuring patient safety within IUH BMH GME programs;
2. Oversee proactive risk reduction and patient safety
3. Monitors and analyzes aggregated, trended data and specific cases related to patient safety
4. Communicates patient safety goals and strategies for improvement via defined institutional communication processes
5. Monitors policies regarding resident stress and burnout
6. Monitors and implements resident changeover policy

Meeting frequency: Monthly, 2nd Wednesday of the month at 7 AM

R. Johnston, Chair  
G. Costello  
J. Whitt  
B. Dickey  
M. Langhofer (FM)  
S. Knapp (FM)  
J. Gries (FM)  
X. Laurente (IM)  
J.M. Neal (DIO)  
A. Singson (IM)
R. Sauer (TY)  
E. Stewart (TY)  
S. White, RN (QM)

Resident Forum (residents are selected by their peers to serve)—Duties:

1. A venue for residents to communicate and exchange information on their educational and work environment, programs, and other resident issues.
2. A process by which individual residents can address concerns in a confidential and protected manner.

Meeting frequency: Quarterly, lunch meeting.

M. Neal, Advisor  
R. James (FM)  
A. Howard (FM)  
O. Al-Buoshkor (IM)  
N. Gheyara (IM)  
D. Murrany (TY)

Residency Support Team—Duties:

1. To promote excellence in the administration of residency programs
2. To provide educational opportunities in the area of graduate medical education and program administration
3. To provide a forum for professional development and information exchange.

Meeting Frequency: Monthly, 1st Thursday.

S. Little, GME Coordinator  
V. DuBois, Transitional Year Coordinator  
S. Tharp, Internal Medicine Coordinator  
J. Kurtz, Family Medicine Coordinator  
D. Ruddick, Continuing Medical Education Coordinator

III. Accreditation Status of Institution and Individual Programs

Accreditation is a vital part of the residency process to ensure that graduates are able to sit for certification boards. The ACGME requires rigorous periodic external and internal review of the residency programs as a part of its accreditation process. Internal reviews must take place at the approximate mid-point of the accreditation cycle.
In August 2011 IU Health Ball Memorial Hospital received 12 of the 12 requested positions through the CMS reallocation application process. In support of this strategic expansion the IU Health Ball Memorial Hospital's primary care residencies requested and received additional positions from the Accreditation Council for Graduate Medical Education Residency Review Committees. The Family Medicine Residency has been approved to increase to 30 residents by 2015 and the Internal Medicine Residency has been approved to increase to 24 by 2015.

The Accreditation Council for Graduate Medical Education (ACGME) is proceeding with the implementation of the Next Accreditation System (NAS). Internal Medicine is one of seven that implemented the NAS in July 2013. Implementation of the NAS will result in several significant changes in the accreditation process, including the site visit. The remaining programs will enter NAS on July 1, 2014. The next regularly scheduled visit of our program is being replaced with a Self-Study Visit in the NAS, which is tentatively scheduled for 1/1/2018. The Self-Study Visit will occur in a window beginning four months before and ending four months after the date above. The actual date will be announced at least 12 months in advance. Finally, the ACGME will use of periodic (every 18 month) Joint Commission-like visits CLER (Clinical Learning Environment Review) to the institution in order to assess the quality of the learning environment. (More detailed information can be found at www.acgme.org).

The following table summarizes the accreditation status for our ACGME accredited residency programs:

<table>
<thead>
<tr>
<th>Program</th>
<th>Accreditation Status</th>
<th>Effective Date</th>
<th>Next Site Visit</th>
<th>Length of Accreditation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutional Review</td>
<td>Favorable</td>
<td>10/20/2009</td>
<td>October 2014</td>
<td>5 years</td>
</tr>
<tr>
<td>Family Medicine</td>
<td>Continued Full</td>
<td>1/24/2011</td>
<td>1/1/2016</td>
<td>5 years</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>Continued Full</td>
<td>5/12/2011</td>
<td>1/1/2018</td>
<td>N/A</td>
</tr>
<tr>
<td>Transitional Year</td>
<td>Continued Full</td>
<td>5/5/2011</td>
<td>5/1/2015</td>
<td>4 years</td>
</tr>
</tbody>
</table>
IV. Internal & Annual Reviews

Internal Reviews

Internal Reviews of Graduate Medical Education Programs sponsored by IU Health Ball Memorial Hospital are performed in order to assess their compliance with the ACGME Institutional Requirements and the Program Requirements of the ACGME Residency Review Committees. This function is an essential responsibility of the Graduate Medical Education Committee (GMEC). Each program’s Internal Review should be conducted at approximately the midpoint between the ACGME program surveys.

Internal reviews are a part of the “old” ACGME accreditation system and will be phased out with the Next Accreditation System (NAS). Programs that are “early adopters” of NAS (Internal Medicine) will not have further internal reviews.

The Transitional Year program underwent an internal review in Spring 2013. As internal reviews are no longer an ACGME requirement, no further IRs have been scheduled.

Program Annual Reviews

At least annually and in the form of a written confidential evaluation, all programs evaluate their faculty performance as it relates to the educational program. Each program is required to conduct a thorough “Program Annual Review” as defined in the Common Program Requirements. The program must document formal, systematic evaluation of the curriculum at least annually. The program must monitor and track each of the following areas:

- Resident Performance;
- Faculty Development;
- Graduate performance, including performance of program graduates on the certification examination;
- Program quality, specifically:
  - Residents and faculty must have the opportunity to evaluate the program confidentially and in writing at least annually;
- The program must use the results of residents’ assessments of the program together with other program evaluation results to improve the program.

Program Annual Reports are reviewed by the GMEC on an annual basis.
V. Residency Faculty & Staff.

Dr. Justin Whitt was appointed as the sixth Program Director in the history of the IU Health BMH Family Medicine Residency in April, 2013, replacing Stewart C. Brown, MD. Dr. Jennifer Bunch served as Interim Program Director until Dr. Whitt's appointment and will now be serving as Senior Associate Director of the FM Residency.

Program Directors, Associate Program Directors, Core Faculty, & Staff 2012-13

Academic Affairs

- J. Matthew Neal, MD, MBA Executive Medical Director & DIO

Program Directors

- Justin K. Whitt, MD Family Medicine
- Ryan Johnston, MD Internal Medicine
- Gerard T. Costello, MD Transitional Year

Associate Directors & Core Program Faculty:

- Jennifer Bunch, MD Senior Associate Director, Family Medicine
- Bhuvaneswari Burugapalli, MD Associate Director, Internal Medicine
- Linda Daniel, PhD Director/Behavioral Science, Family Medicine
- Brandon Dickey, MD Director/Ambulatory Medicine, Internal Medicine
- Daryl Morrical, MD Associate Director, Internal Medicine
- Christian Shue, DO Associate Director, Family Medicine
- Melanie Schreiner, MD Associate Director, Family Medicine
- Rodney Yuhico, MD Associate Director, Internal Medicine

Medical Education Staff:

- Susan Little, Graduate Medical Education Coordinator
- Jennifer Kurtz, Family Medicine Coordinator
- Susie Tharp, Internal Medicine Coordinator
- Vana DuBois, Transitional Year Coordinator
- Danielle Ruddick, CME Coordinator
VI. Residents.

Resident Demographics
2012-2013 Residents (*denotes Chief Resident)

FAMILY MEDICINE

PGY-1
Adam D. Amos, MD
Jesse M. Crane, DO
Milissa A. Eley-Alfrey, MD
Kellen T. Hansen, DO
Houen J. Hui, MD
Joseph I Indiano, MD
Carrie M. Jobe, MD
Morgan J. Langhofer, MD

PGY-2
Melody R. Anderson, MD
Maried E. Celkis, MD
Luke S. Ernstberger, II, MD
Adam M. Howard, MD
Stuart G. Knapp, MD
Mindy R. McKnight, MD
Caleb R. Overpeck, MD
Joseph B. Schuerger, MD

PGY-3
Justin B. Anderson, MD, MS
Ryan P. Brown, MD *
Jonathan J. Gries, MD
Roland W. James, MD
Emma J. Nordstrom, MD
Alan M. Young, MD
Erin E. Young, MD *

INTERNAL MEDICINE

PGY-1
Omer S. Al-Buoshkor, MD
Havai A. Amedi, MD
Ahmed A. Behery, MD
Xavier S. Laurente, MD
Nathaniel D. Michael, MD
Aldrin C. Roque, MD
Karen Zakharian, MD

PGY-2
Jeffrey A. Glant, MD
Romana N. Malik, MD
Vineet S. Sandhu, MD
Karna Sarin, MD
Adrian B. Singson, MD
Kathryn R. Yuhico, MD

PGY-3
Rey F. Arcenas, MD *
James F. Chan, MD
Naasha V. Gheyara, MD *
Sonali Jain, MD
Racquel K. Reyes, MD
Terene Varghese, MD

TRANSITIONAL YEAR

PGY-1
Jon M. Hopkins, MD
Davoy R. Murray, MD *
Andrew J. Ollerton, MD
Nicholas A. Pipito, MD
Jonathan T. Rybolt, MD
Robert N. Sauer, MD
Erin L. Stewart, MD
T. Scott Tatum, MD
2013 Graduating Resident Placement:

**Family Medicine Residency**
- Justin B. Anderson, MD, MS  Hospitalist Physician/IU Health Ball Memorial Hospital
- Ryan P. Brown, MD  AD, Family Medicine Residency/IU Health Ball Memorial Hospital
- Jonathan J. Gries, MD  Family Physician/AHN Daleville Office
- Roland W. James, MD  Emergency Room Physician/IU Health Blackford County Hospital
- Emma J. Nordstrom, MD  Family Physician/Witham Family Medicine in Lebanon, IN
- Alan M. Young, MD  Family Physician/Mecosta Health Services in Big Rapids, MI
- Erin E. Young, MD  Family Physician/Mecosta Health Services in Big Rapids, MI

**Internal Medicine Residency**
- Rey F. Arcenas, MD  Cardiology Fellowship at Kettering Medical Center in Kettering, OH
- James F. Chan, MD  Hospitalist, Walnut Creek Medical Center and Antioch Medical Center, Walnut Creek, CA and Antioch, CA.
- Naasha V. Gheyara, MD  Hospital, IU Health Ball Memorial Hospital
- Sonali Jain, MD  Hospitalist, St. Mary Medical Center, Hobart, IN
- Racquel K. Reyes, MD  Outpatient/Primary Care, American Health Network, Noblesville, IN
- Terene Varghese, MD  Outpatient/Primary Care, American Health Network, Noblesville, IN

**Transitional Year Residency**
- Jon M. Hopkins, MD  Radiology at Indiana University
- Davoy R. Murray, MD  Anesthesiology at University of Florida-Gainesville
- Andrew J. Ollerton, MD  Ophthalmology at West Virginia University
- Nicholas A. Pipito, MD  Anesthesiology, University of Connecticut
- Jonathan T. Rybolt, MD  Anesthesiology, Indiana University
- Robert N. Sauer, MD  Anesthesiology, Indiana University
- Erin L. Sewart, MD  Neurology, Indiana University
- T. Scott Tatum, MD  Radiology, University of Alabama-Birmingham

**INCOMING RESIDENTS 2012-13**

**Family Medicine Residents**
- Erika M. Blair, MD  New York Medical College
- Tolulope T. Efam, MD  Southern Illinois University School of Medicine
- Anthony T. Gordon, MD  Indiana University School of Medicine
- Steven D. Monson, MD  University of Utah School of Medicine
- Kristy L. Mount, MD  Loyola University of Chicago Stritch School of Medicine
- Michael O. Pratt, MD  University of Utah School of Medicine
- Kyle R. Speakman, MD  Indiana University School of Medicine
- Andrew M. Stevens, MD  University of Utah School of Medicine
- Kevin L. Witt, MD  Indiana University School of Medicine
- Kara D. Wyatt, MD  Indiana University School of Medicine

**Internal Medicine Residents**
- Matthew B. Akin, MD  Saint Louis University School of Medicine
- Tahreem Aziz, DO  AT Still University of Health Sciences Kirksville College of Osteopathic Medicine
VII. Recruitment

Recruitment is one of the most important tasks we do as a department at BMH—a necessary part of the perpetual residency “life cycle.” The recruitment of a strong class combined with excellent teaching faculty ensures high-caliber graduates who provide quality patient care, many of whom join our medical staff. A quality recruiting season involves many hundreds of hours of dedicated work by the program directors, faculty, residents, and program coordinators.

In preparation for the recruitment season, Medical Education updated its Web site so medical students could get a better feel for BMH’s residency programs and what life is like for BMH residents. We added pictures of the residents with information about where they went to medical school and testimonials promoting our programs. The feedback we are receiving from applicants is that the website is informative and helpful. We plan to add pictures and information about our faculty next.

The residency programs received a total of 2,808 applications for 2012-13. IU Health Ball Memorial residencies interviewed 223 candidates for the 26 first year resident positions. As mentioned previously, all programs filled in the Match.
VIII. RESIDENCY PROGRAM OVERSIGHT

Duty Hours

The ACGME’s revised duty hour requirements went into effect on July 1, 2011. The new standards include graduated standards for duty hours and are designed to better match residents’ levels of experience and emerging competencies. The standards are based on recommendations made by the Institute of Medicine (IOM) in 2008. The new standards retain the current duty hour limit of 80 hours per week, averaged over four weeks, but specify more detailed directives for levels of supervision necessary for first-year residents. The standards also reduce duty periods of PGY-1s to no more than 16 hours a day and set stricter requirements for duty hour exceptions. Other changes include setting higher requirements for teamwork, clinical responsibilities, communication, professionalism, personal responsibility, transitions of care and more specific requirements for alertness management and fatigue mitigation.

Duty hours must be limited to a maximum of 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities and all moonlighting. Time spent in the hospital by residents on at-home call count towards the 80 hour maximum.

- PGY-1 residents are not permitted to moonlight.

- Residents cannot be scheduled for in-house call more than once every three nights averaged over four weeks (Internal Medicine cannot average). Residents must not be scheduled for more than six consecutive nights of night float.

- Residents must be provided with 1 day in 7 free from all educational and clinical responsibilities, averaged over a 4-week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, educational, and administrative activities. At-home call may not be assigned on those free days.

- Duty periods for PGY-1 residents must not exceed 16 hours in duration. Duty periods for PGY-2 (and above) residents cannot last for more than 24 hours, although such residents may remain on duty for up to four additional hours to transfer patients, maintain continuity of care, and participate in educational activities. “Strategic napping” (for PGY-2 & higher residents), especially after 16 hours of continuous duty, is strongly suggested.

- A 10-hour minimum rest period should be provided (and an 8-hour minimum rest period must be provided) between scheduled duty periods. PGY-2 and higher residents must have at least 14 hours free after 24 hours of in-house duty periods.
Residents are provided with adequate back-up support systems and supervision so that patient care is not jeopardized during or following assigned periods of duty.

Individual residencies may have more specific policies as mandated by the ACGME and the specialty-specific Residency Review Committees.

Professional activities outside the educational program and required duty hours must not interfere with the resident's performance in the educational process. Specifically, “moonlighting” activities are not allowed to interfere with primary educational responsibilities. Residents are required to get permission from their specific programs before engaging in moonlighting activities.

All programs are in compliance in regard to duty hours with this ACGME mandated policy. Duty hours are tracked by each residency program through E*Value and written questionnaires, and monthly reports from each program director are discussed at each GMEC meeting.

**Resident Supervision**

The ACGME Common Program Requirements that went into effect July 1, 2011 also address oversight of resident supervision and graded authority. Residents and faculty members should inform patients of their respective roles in each patient's care. Programs must clearly identify and document that the appropriate level of supervision is in place for all residents. To ensure oversight of resident supervision, programs must use the following classification of supervision: 1) direct supervision, 2) indirect supervision, and 3) oversight.

The individual residency programs comply with ACGME and Joint Commission guidelines for resident supervision. The faculty members of the various residencies are members of the Medical Staff of Ball Memorial Hospital and have been granted clinical privileges commensurate with their level of training. Faculty members are appointed by the residency program directors and their teaching activities are periodically reviewed by the specific program director. Under the oversight of the Designated Institutional Official (DIO) and the GMEC, the individual residencies provide and determine the processes by which residents are supervised and evaluated.

The residencies are responsible for providing an environment that allows residents to achieve clinical skills and competence appropriate for their level of training. In addition, the DIO, GMEC, and program directors are responsible for ensuring that residents deliver quality medical care in accordance with ACGME guidelines and standard acceptable medical practices.

The assessment of resident supervision is an ongoing process and is periodically revised according to changing ACGME guidelines and the needs of the individual residency programs. Currently resident supervision is at a satisfactory level with additional plans being explored for further improvement of such.
**Resident Evaluations**

Each resident is evaluated formally by attending faculty on each rotation. Various tools are used for such evaluations including random chart reviews, clinical evaluation exercises, interviews with the specific program director annually with reviews of intellectual abilities, skills, attitudes, interpersonal relationships, and 360 degree evaluations by nursing and ancillary medical staff. Rotation evaluation forms specifically address each of the six General Competencies.

Evaluation forms are reviewed in detail, and progress toward certification in mandatory procedural skills is monitored. Advancement to the next year of training also depends upon these specific measurement assessments. These metrics are program specific to a degree depending upon the residency, with each program possessing its own governance structure.

Medical Education uses the E*Value electronic evaluation system which allows residents and faculty to complete evaluations via a Web-based secure client. Notification that an evaluation is due is sent via e-mail to faculty and residents. E*Value has greatly expedited the receipt of evaluations and has helped with better integration and analysis of residency data. E*Value also allows residents to log duty hours, which significantly aids the program directors and GMEC in monitoring problems.

Residents also evaluate faculty members after each rotation. These evaluation forms are reviewed by the specific program director and are available for individual faculty review in the Office of Medical Education.

The residents assess the individual programs annually by an evaluation form and via an annual survey.

**Resident Participation in Patient Safety & Quality of Care Education**

Ball Memorial Hospital and the residency program administration are committed to maintaining high standards of patient safety and clinical quality. We view resident physicians as essential to the provision of safe patient care. Accordingly, the implementation of each curriculum contains many lectures and activities that imbue the educational environment with emphasis on all aspects of patient safety.

Preparing future physicians to meet patients’ expectations for optimal care requires that the resident physician will learn in a clinical setting that epitomizes the highest standards of medical practice. The primary obligation of the institution and the individuals providing resident education is the provision of high quality, safe patient care. By allowing resident physicians to participate in patient care, the faculty accepts an obligation to ensure the highest quality medical care on all the teaching services.

The GMEC has also established and implemented policies and procedures that affect all residency programs regarding the resident's quality of education and the participation in patient safety. A new Quality and Safety Subcommittee was begun in 2012.

Residents are assigned to many hospital committees, especially those involved with clinical quality. They are also engaged in the medical Staff Peer Review Process Committees. These activities prepare them for a leadership role in their future practices, as well as provide them with real scenarios that impact safety and quality. The GMEC believes that the greatest predictor of quality care lies, not only in providing exemplary training, but also in the selection of the candidates for our residency programs.
Residents are supervised on all clinical services by qualified attending physicians and receive written evaluations on all rotations. Chart reviews and clinical evaluation exercises are also conducted on a frequent basis.

Resident files are reviewed frequently by each residency’s Program Director and other members of the various programs for safety, quality of patient care and competence. The GMEC implemented a Peer Review subcommittee several years ago to address issues in this regard if needed. The residencies also participate in performance improvement projects to augment the quality of care. These projects include both inpatients and outpatients and are ongoing.

The GMEC has noted no significant issues with the residencies in regards to safety and quality of patient care common to teaching institutions. In particular, resident quality metrics mirror and sometimes exceed those of the Medical Staff. A Quality & Safety Subcommittee, headed by Dr. Johnston, was initiated in 2012, with a monthly educational conference scheduled to begin September 2013.

The Six General Competencies

In July 2002, the ACGME mandated six general core competencies that residency programs must incorporate into the teaching and evaluation of their residents. The sponsoring institution must ensure that the resident in each of their ACGME-accredited residency programs demonstrates the specific knowledge, clinical skills, professionalism, and has educational experiences as defined by the core competencies.

The six ACGME General Competencies are as follows:

1. Patient Care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health;
2. Medical Knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to patient care;
3. Practice-Based Learning and Improvement that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care;
4. Interpersonal and Communication Skills that result in effective information exchange and teaming with patients, their families, and other health professionals;
5. Professionalism, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population;
6. Systems-Based Practice, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.

The Research & Scholarly Activity Subcommittee of the GMEC was also created to implement and monitor “common” activities for participation by all residency programs. These activities include implementation of several modules (Biostatistics/Epidemiology, Evidence-Based Medicine, and the NIH Human Subjects tutorial) on a Web-based learning client. In addition, residents are required to participate in the Resident Research/Scholarly Activity Symposium to be held in February. Each program also has its own specific requirements for research and scholarly activity.

Each residency has developed specific measures for their respective programs to ensure compliance with the general competencies. The Transitional program shares some of these measures with the other residencies due to the brief nature of the program (one year).
Summary:

The residency programs at Ball Memorial Hospital are in compliance with the ACGME in the areas outlined above. Residents are evaluated by numerous measures to ensure adequate resident training, supervision, responsibility, evaluations, duty hour compliance, and patient care and safety. The GMEC provides the oversight and monitoring of the various residency programs in conjunction with the DIO. The six general competencies have been addressed in a systematic fashion with new, innovative processes having been developed for implementation in concordance with the ACGME Outcome Project. Internal and ACGME program reviews are conducted in accordance with ACGME guidelines. Overall, the individual residencies appear at this time to be operating at an exemplary level in academic year 2011-12.

Finally, the outcome of the recent ACGME Institutional Review (five years' accreditation) recognizes the exemplary level of commitment that Ball Memorial Hospital has invested in its graduate medical education programs and the tremendous support it has received from BMH Administration and the Hospital Board.

IX. Resident/Faculty Awards, Research, Scholarly Activity, & Presentations

Resident physicians at IU Health Ball Memorial Hospital were recognized for outstanding research activities during the Department of Medical Education’s Douglas A. Triplett, MD Memorial Research Symposium held May 31, 2013. The annual event featured more than 25 projects representing works from both resident physicians and nursing personnel.

2013 Award Winners

Platform Category

- 2nd Place: “Intussusception In A Nine Month Old Male With Serial Benign Abdominal Exams”, Jonathan Rybolt, MD, Transitional Year Residency
- 3rd Place: “Takotsubo Cardiomyopathy: A Love Story”, Justin Anderson, MD, Family Medicine Residency

Poster Category

- 1st Place: “Suspected Unintentional Overdose Of A Transdermal Fentanyl Patch With Tanning Bed Use”, Emma Nordstrom, MD, Family Medicine Residency
- 2nd Place: “Management Of Chronic Diarrhea Begins With Discontinuing Offending Medication”, Jeffrey Glant, MD, Internal Medicine Residency
- 3rd Place: “Peripartum Cardiomyopathy Presenting As An Unusual Complication Of Preeclampsia In A Postpartum Woman”, Erin Young, MD, Family Medicine Residency
2013 Platform Presentations (non-award):
- STRESS IN THE MIRROR: A CASE OF REVERSE TAKOTSUBO CARDIOMYOPATHY,
  James Chan, MD, Internal Medicine Residency
- INTRACTABLE HEADACHE IS THE PRESENTING SYMPTOM FOR ACUTE LEUKEMIA,
  Adam Howard, MD, Family Medicine Residency
- CARBAMATE POISONING: A CASE OF IATROGENIC ANTICHOLINERGIC COMA,
  Jonathan Gries, MD, Family Medicine Residency

2013 Poster Presentations (non-award):
- “AGGRESSIVE MALIGNANT EPITHELIOID HEMANGIOENDOTHELIOMA:
  AN UNUSUAL PRESENTATION OF A RARE CONDITION”, Naasha Gheyara, MD,
  Internal Medicine Residency
- SYNERGISTIC HEPATOTOXITY OF ALCOHOL AND IRON: A CASE PRESENTATION,
  Melody Shrack, MD, Family Medicine Residency
- POSTURAL ORTHOSTATIC TACHYCARDIA, Mariel Celkis, MD, Family Medicine Residency
- A ROCK SOLID CONSTITUTION: CHOLECYSTO-COLONIC FISTULA PRESENTING AS ACUTE
  OBSTRUCTION WITH ENTEROLITHIASIS OF THE DESCENDING COLON,
  James Chan, MD, Internal Medicine Residency
- AN UNCOMMON CAUSE OF AURICULAR SWELLING, Luke Ernstberger, MD, Family Medicine Residency
- A PARTICULARLY RESISTANT STRAIN OF METHICILLIN RESISTANT STAPHYLOCOCCUS CAUSING
  OSTEOMYELITIS AND SEPSIS, Jon Hopkins, MD, Transitional Year Residency
- TO PIERCE OR NOT TO PIERCE: A RARE COMPLICATION FROM A NIPPLE PIERCING,
  Sonali Jain, MD, Internal Medicine Residency
- RAMSAY HUNT SYNDROME INVOLVING CRANIAL NERVES IX AND X,
  Roland James, MD, Family Medicine Residency
- PRETERM PREMATURE RUPTURE OF MEMBRANES AT 29 WEEKS 3 DAYS GESTATION: A RESIDENTS
  LEARNING CASE, Stuart Knapp, MD, Family Medicine Residency
- NEWS UPDATE: INCARCERATED HERNIA ACQUITTED OF ALL CHARGES.
  NEW SUSPECT IMPLICATED IN ACUTE ABDOMEN, Davoy Murray, MD, Transitional Year Residency
- PSUEDOXANTHOMA ELASTICUM: A CLINICAL CASE HIGHLIGHTING THE IMPORTANCE OF
  INCORPORATING THE EYE EXAM INTO THE PHYSICAL EXAMINATION,
  Andrew Ollerton, MD, Transitional Year Residency
- WHEN DIARRHEA ISN’T JUST DIARRHEA, Caleb Overpeck, MD, Family Medicine Residency
- PULMONARY BLASTOMYCOSIS: USING REGIONAL EPIDEMIOLOGY TO GUIDE DIAGNOSIS,
  Nicholas Pipito, MD, Transitional Year Residency
- DOC, WHY AM I YELLOW? AMYLOIDOSIS PRESENTING WITH JAUNDICE,
  Vineet Sandhu, MD, Internal Medicine Residency
- PNEUMOCYSTIS PNEUMONIA IN A NON-HIV PATIENT WITHOUT IMMUNOSUPPRESSION,
  Karna Sarin, MD, Internal Medicine Residency
- NEGATIVE PRESSURE PULMONARY EDEMA FOLLOWING A VOCAL CORD BIOPSY,
  Robert Sauer, MD, Transitional Year Residency
- PRIMARY BONE MARROW INVOLVEMENT WITH DIFFUSE LARGE B CELL LYMPHOMA,
  Adrian Singson, MD, Internal Medicine Residency
- BEWARE THE DIY DENTIST: PNEUMONIA AND POLYARTHRALGIA IN THE SETTING OF
  FUSOBACTERIUM NUCLEATUM BACTEREMIA, Erin Stewart, MD, Transitional Year Residency
- PERIPHERAL HEMANGIOBLASTOMA WITH LOCAL DESTRUCTION OF VERTEBRAE AND RESULTING
  SPINAL CORD COMPRESSION, Timothy Tatum, MD, Transitional Year Residency
- METABOLIC ENCEPHALOPATHY SECONDARY TO SUBCORTICAL CALCIUM OXALATE DEPOSITION IN ETHYLENE GLYCOL TOXICITY, Melinda McKnight, MD, Family Medicine Residency
- ATYPICAL PRESENTATION OF CARDIAC TAMPOONADE IN A PATIENT WITH LUNG ADENOCARCINOMA, Terene Varghese, MD, Internal Medicine Residency
- AN ATYPICAL PRESENTATION OF AUTOIMMUNE DIABETES MELLITUS IN AN ADULT, Alan Young, MD, Family Medicine Residency
- COBALTISM FROM HIP PROSTHESIS: A LESS WELL-KNOWN CAUSE OF DILATED CARDIOMYOPATHY, Kathryn Yuhico, MD, Internal Medicine Residency
- SPLENIC INVOLVEMENT IN NONTYPHOIDAL SALMONELLA INFECTION, Romana Malik, MD, Internal Medicine Residency

Resident representation at state and national level:

- Internal Medicine Residency earned top honors at the American College of Physicians Indiana Chapter's scientific meeting in Indianapolis on November 9, 2012. Members of the winning team at the annual Doctors Dilemma academic competition were Dr. Rey Arcenas, Dr. Adrian Singson, and Dr. Xavier Laurente. This is the fifth win for the IUH Ball team in the last ten years (2003-05; 2008; 2012).
- The ACP Indiana Chapter “Doctor's Dilemma” team, consisting of IUH BMH residents Jeff Glant, Adrian Singson, and Xavier Laurente, competed in the ACP “Doctor's Dilemma” national championships in San Francisco April 11-13.
- Dr. Naasha Gheyara and Dr. James Chan for winning 2nd and 3rd prizes in the ACP Indiana Chapter's Clinical Vignette poster competition as well. Dr. Gheyara’s poster was titled “Aggressive Malignant Epithelioid Hemangioendothelioma: An Unusual Presentation of a Rare Condition” and Dr. Chan’s was “Stress in the Mirror: A Case of Reverse Tako-tsubo Cardiomyopathy.” Over 60 abstracts were submitted, and 16 posters were accepted for inclusion in the meeting. Other poster presenters from the residency included Dr. Karna Sarin and Dr. Kathryn Yuhico
- Alan Young, MD was honored with the 2013 William Stinson Family Practice Scholarship. The scholarship is awarded to the graduating resident who is felt to best follow the tradition set forth by Dr. Stinson who worked for St. John's Hospital in Anderson, Indiana for many years as the “traditional” family doctor.
- Erin Young, MD was honored with the 2013 Family Medicine Residency Award for Scholarship which is an Association of Family Medicine Residency Directors and North American Primary Care Research Group Family Medicine Resident Award and the first time this has been presented to one of our graduating residents.
- Ryan Brown, MD was chosen as Resident Teacher of the Year award. This award is awarded by resident only votes from all PGY levels in Family Medicine.

IAFP Family Physicians Research Day 2013
- 1st Place Poster - Case presentations: Synergistic Hepatotoxicity of Alcohol and Iron – Melody R. Shrack, MD, Family Medicine Residency
- 2nd Place – Platform Presentation: Takotsubo Cardiomyopathy: A Love Story, Justin B. Anderson, MD, Family Medicine Residency
**Faculty Awards, Research, Scholarly Activity & Presentations**

- Dr. J. Matthew Neal, Executive Medical Director Academic Affairs, and Dr. Rodney Joe O. Yuhico, Associate Director Internal Medicine Residency had their article, “Myxedema madness associated with newly diagnosed hypothyroidism and obstructive sleep apnea,” appeared in the December 2012 issue of the Journal of Clinical Sleep Medicine.

- The IU Health Ball Memorial Hospital Family Medicine Residency received full funding of a $30,000 grant to fight childhood obesity. The residency will be collaborating with a local community center, the Ross Center. Family Medicine Residency Program Director, Dr. Stewart C. Brown said, “this is an example of making a local difference, getting involved on a local level and it aligns well with our IU Health Pillars.” The American Academy of Family Physicians awarded nine residency programs grants as part of its Americans In Motion-Healthy Interventions, or AIM-HI, initiative. The grants will help each program develop a one-year, family-centered, community project based on AIM-HI fundamentals and designed to reduce childhood obesity and promote fitness.

- The Indiana Medical Education Board has approved the IU Health Ball Memorial Hospital Family Medicine Residency 2012-13 grant proposal for approximately $90,000, the full amount requested. The residency will utilize the funds to support their goals in the areas of patient education, scholarship, and clinical skills. The residency provides state of the art training in all aspects of family medicine including procedures and health promotion. The faculty is committed to scholarly activity involvement to provide evidence-based instruction to residents and contribute to medical knowledge. The funds requested in this grant proposal focus on elements of the residency and curriculum that meet the mission, goals, and training needs of the residents. As the IU Health BMH FMR clinic transitions to a patient-centered medical home model of care, the funding will support initiatives focused on improving the residents’ practice-based management skills and their ability to engage in practice improvement.

- The results of the 2013 National Residency Matching Program (NRMP) “Match” were released on March 15, 2013. IU Health Ball Memorial Hospital achieved 100% Match in Family Medicine, Internal Medicine, and Transitional Year residency programs marking the fourth consecutive year and sixth time in the last eight years.

- Dr. J. Matthew Neal, Executive Medical Director Academic Affairs, IU Health Ball Memorial Hospital, was selected as an ongoing reviewer for the Annals of Internal Medicine. Annals of Internal Medicine is the official journal of the American College of Physicians and the most widely read internal medicine journal in the world. He was also selected as a reviewer for the American Board of Internal Medicine’s Endocrinology Self-Assessment Modules.

- Dr. Gerard Costello, Transitional Year Residency Program Director, has been appointed to the Accreditation Council for Graduate Medical Education (ACGME) Transitional Year Review Committee effective July 2012.

- Transitional Year Residency Program Director, Dr. Gerard Costello, served as Chairman of the Midwest Caucus and was elected to Chair the Board of Directors Committee on Professional Affairs at the October 2011 American Society of Anesthesiologists Annual Meeting in Chicago.
Dr. Jennifer Bunch, Associate Director, Family Medicine Residency, traveled to Eldoret and Webuye, Kenya to begin a partnership between the IU Health Ball Memorial Hospital Family Medicine Residency and the family medicine residency programs through Moi University. This was done in conjunction with IU School of Medicine's existing partnership with Moi University. It is the hope of the IU Health Ball Memorial Hospital Family Medicine Residency to create a longstanding relationship with our colleagues in Kenya which would facilitate faculty and resident exchange and create a stronger global presence for our international program.

The Graduate Medical Education Committee at IU Health Ball Memorial Hospital has created a new subcommittee for oversight and integration of a longitudinal curriculum in quality improvement and patient safety for all residents. The newly formed subcommittee is led by Dr. Ryan Johnston and includes faculty and resident representatives from all three programs as well as members of the Quality Management team.

Several local physicians were faculty at the American College of Physicians (ACP) 2012 Indiana Chapter Scientific Meeting in November, 2012 in Indianapolis. Internal Medicine Residency Associate Program, Dr. Brandon Dickey is the 2012 Meeting Program Chair and has worked with ACP Indiana Chapter Governor, Dr. J. Matthew Neal, to coordinate this statewide two-day annual meeting. Area physicians that will be presenting include “Update in Hospital Management Diabetes” Matthew Neal, MD; “Ultrasound: Stethoscope of the 21st Century” Daryl Morrical, MD; “Management of Hepatitis B & C” Mazen Alsatie, MD; “Updates in Hematology & Oncology” Michael J. Williamson, Jr., DO; and “Management of Common OP Infections” Rabeeya Sabzwari, MD. The annual “Doctor’s Dilemma” resident competition will be moderated by Dr. Dickey and Dr. Ryan Johnston Program Director Internal Medicine Residency will be an expert on the panel. Dr. Johnston is also faculty for the Clinical Skills and Self Evaluation Process (SEP) Modules and will be one of the facilitators for the Hospital Medicine 2012 Update.

Dr. J. Matthew Neal, American College of Physicians (ACP) Indiana Chapter Governor, gave the opening address at the Pri-Med Access with ACP meeting on October 4, 2012 at the Indianapolis Convention Center. This live two-day program is part of a nationwide series of local programs offering internal medicine physicians interactive CME.

Dr. Neal attended the fall American College of Physicians (ACP) Board of Governors meeting in Vancouver, BC in September, 2012 and in San Francisco (April 2012). ACP Governors met and voted on a number of resolutions regarding ACP educational and health policy.

Dr. J. Matthew Neal, Executive Medical Director Academic Affairs IU Health Ball Memorial Hospital, has been invited to serve as a peer reviewer for the American College of Physician Executives (ACPE) Leape Ahead Award. Dr. Neal was chosen for his significant commitment to leadership and work with future physician leaders. The award recognizes people and institutions that are dedicated to improving the quality of health care by developing medical students and residents into future health care leaders.
IU Health Ball Memorial Hospital Family Medicine Residency faculty and resident presented nationally at the Society of Teachers of Family Medicine annual Conference on Practice Improvement November 29 & November 30 in Greenville, South Carolina. The poster entitled, “Evaluation of a Resident Training Curriculum on Unhealthy Pediatric Weight through Process Improvement” was presented by Carolyn Shue, PhD, Justin Whitt, MD, Linda Daniel, PhD, Alan Young, MD, all of the IU Health Ball Memorial Family Medicine Residency. The national conference engages participants through discussions about the changing health care landscape, and provides steps to redesign a practice to thrive in the new environment.

The IU Health Ball Memorial Hospital Family Medicine Residency received full funding of a $30,000 grant to fight childhood obesity. The residency will be collaborating with a local community center, the Ross Center. Family Medicine Residency Program Directors noted that this is an example of making a local difference, getting involved on a local level and it aligns well with the IU Health Pillars. The American Academy of Family Physicians awarded nine residency programs across the U.S. grants as part of its Americans In Motion-Healthy Interventions, or AIM-HI, initiative. The grants will help each program develop a one-year, family-centered, community project based on AIM-HI fundamentals and designed to reduce childhood obesity and promote fitness. At the end of the grant cycle the Family Medicine Residency provided the following outcome synopsis: The Family Medicine Residency has finished the “Home for Supper: Creating Family Mealtimes that sustain Mind, Body, and Spirit” community intervention sponsored by a grant through the American Academy of Family Physicians. Thirteen families completed the six-month program designed to address childhood obesity. We met the second and fourth Friday of the month, March through August, at the Ross Community Center. Students from the BSU Health Sciences and Physical Education Departments facilitated cooperative fitness activities for the children while the parents received instruction in healthy behavior. Parents learned how to set healthy nutrition goals and how to overcome barriers to healthy eating. Other topics included getting the most nutrition at the lowest cost, positive parenting, and stress management. Ivy Tech Culinary Arts provided healthy cooking demonstrations at the end of each session. Special activities included a field trip to the Wednesday Farmer's Market at Minnetrista and a chili supper reunion in October. On November 9, the group met at the downtown YMCA for orientation to the sustainability portion of the intervention. We are still in the process of data analysis. We plan to submit outcomes for presentation at national conferences including those sponsored by The Society of Teachers of Family Medicine.

Dr. Jeffrey Glant, PGY-2 Internal Medicine Resident at IU Health Ball Memorial Hospital, has been elected Chair of the American College of Physicians’ Indiana Chapter Associates’ Council for 2013-14. Dr. Glant was elected by his peers (residents and fellows from the state of Indiana) and will serve as Chair-Elect until summer 2013. The Associates’ Council represents the interests of residents, fellows, and junior staff internists, and is essential to the functioning of the ACP Chapter. Duties of the Chair include: planning educational activities; conducting monthly meetings; charitable and fund-raising events; serving on the Governor’s Council; attending Leadership Day in Washington, DC.

Dr. Jennifer Bunch and Dr. Justin K. Whitt, Family Medicine Residency Directors, have been approved as Advanced Life Support in Obstetrics (ALSO®) Advisory Faculty. As Advisory Faculty their role is to maintain the integrity and consistency of the ALSO Course. The ALSO Provider Course offers methods for improving the management of obstetrical urgencies and emergencies. This two-day course is geared to all maternity care providers, including physicians, residents, nurse midwives, registered nurses and other clinicians. The IU Health Ball Memorial Hospital Family Medicine Residency Directors have hosted an ALSO Provider Course for residents, physicians, and nurses since 1996.
Dr. J. Matthew Neal, Executive Medical Director of Academic Affairs, has been appointed to the American College of Physicians’ (ACP) Governance Committee and Subcommittee on Nominations for 2013-14. Dr. Neal is the current Governor of the ACP Indiana Chapter through 2016 and will make periodic trips to ACP Headquarters in Philadelphia for this key committee.

Dr. J. Matthew Neal (Executive Medical Director, Academic Affairs), Dr. Brandon Dickey (Associate Director, IM Residency), and Dr. Jeffrey Glant (PGY-2 resident, IM Residency) represented Indiana with three other ACP members at ACP Leadership Day in Washington, DC on May 21-22, 2013. The group met with a total of seven members of Congress or their staff, focusing on the following issues:

1. Eliminate Medicare’s Sustainable Growth Rate (SGR) and transition to better payment systems.
2. Ensure full funding for essential health programs. Congress should consider the trillions in across-the-board sequestration cuts, which do not take into consideration the importance or effectiveness of any particular program or activity, with a fiscally-responsible alternative that addresses the real cost-drivers in healthcare, as proposed by ACP, with emphasis on outcomes and value-based medical care.
3. Reform and sustain graduate medical education (GME) financing and restore cuts due to sequestration; re-align the program with the state’s workforce needs. Primary care is in short supply in Indiana, and investment in GME will help preserve funding for our future physicians.

Internal Medicine Residency Program Director, Dr. Ryan Johnston, presented “When One of the Holes in the Cheese in Me”-Understanding the Role of Cognitive Error in Adverse Clinical Outcomes at Medicine Grand Rounds on May 29, 2013.

Family Medicine Residency Faculty Development

August 2012, Faculty Development for all Directors. Topics: Curriculum, Lectures, and Policies.
November 2012, Faculty Development for all Directors. Topics: Faculty Recruitment & Overall Faculty Assignments.
March 2013, two-day Faculty Development & Planning Retreat for all Directors and Chief Residents. Topics: Mission/Vision/Goals, curriculum restructure, expansion of residency, CCC, milestones, and proposed RRC Requirements.
April 2013, all Directors attended all or part of the 5 consecutive day AAFP Residency Education Symposium: Program Director Workshop and Residency Program Solutions in Kansas City, KS Stanford Clinical Teaching Sessions with Dr. Deb Litzelman
October 24, 2012 – Learning Climate
February 28, 2013 – Communication of Goals
June 6, 2013 – Feedback

Family Medicine Residency Faculty CME/Scholarly Activity

Jennifer Bunch, MD, Associate Director
November 2012 - Pediatric Review
April 2013 – AAFP Program Directors’ Workshop

Justin Whitt, MD, Associate Director
July 2012 – IAFP Scientific Assembly
November 2012 – STFM Conference on Practice Improvement
April 2013 – AAFP Program Directors’ Workshop & Residency Program Solutions Workshop

Christian Shue, DO, Associate Director
April 2013 – AAFP Program Directors’ Workshop & Residency Program Solutions

Melanie Schreiner, MD, Associate Director
August 2012 – AAFP Family Centered Maternity Care Conference & ALSO Instructor Course
October 2012 – Cerner Conference
April 2013 - AAFP/Residency Program Solutions

Linda Daniel, PhD, Director Behavioral Science
April 2013 - Challenges of Geri Pharmacology Benefits & Dangers of Medication Interventions in Older Adults

National Presentations:
Grant Funding
The Indiana Medical Education Board has approved the IU Health Ball Memorial Hospital Family Medicine Residency 2013-14 grant proposal for $94,518.72 which is the full amount requested. The residency provides state of the art training in all aspects of family medicine including procedures and health promotion. The faculty is committed to scholarly activity involvement to provide evidence-based instruction to residents and contribute to medical knowledge. Specific goals of the residency focus on promoting the appropriate use of community health resources, implementing preventative services, and educating patients about health care and wellness issues. The grant funds will be focused on elements of the residency and curriculum that meet the mission, goals, and training needs of the residents including:

- Provide patient education to the underserved in Muncie and the surrounding areas.
- Engage in scholarly activities through research and practice improvement projects.
- Train residents on family medicine procedures.

Family Medicine Residency Faculty Scholarly Activity


Regional Presentations:

Local Presentations:
Whitt, J.K., Daniel, L.L. (October 2012). Helping Children, Helping Families: Achieving and Maintaining Healthy Weight. A CME live lecture at the Fall Family Medicine Symposium IU Health Ball Memorial Hospital, Muncie, IN
Brown, S.C., Wilson, J.L., Sutton, W. (October 2012). Substance Abuse Across the Age Spectrum – What all physicians should be aware of. A CME live lecture at the Fall Family Medicine Symposium IU Health Ball Memorial Hospital, Muncie, IN
Shue, C.B. (October 2012). Cardiovascular Update 2012. A CME live lecture at the Fall Family Medicine Symposium IU Health Ball Memorial Hospital, Muncie, IN
Bunch, J.R., Schreiner, M.A. (October 2012). Making Sense out of Well-Woman Visit – New Guidelines for Breast and Cervical Cancer Screening. A CME live lecture at the Fall Family Medicine Symposium IU Health Ball Memorial Hospital, Muncie, IN

**Internal Medicine Residency Faculty Development**

- All directors participated in the Stanford Faculty Development curriculum. Subject included modules on setting the education environment, setting goals and expectations, and giving feedback.
- All associate directors regularly participate in individual educational activities (e.g., national American College of Physicians meetings, APDIM Meetings, ACGME Meetings, AHME Meetings, etc.).

**Internal Medicine Residency Faculty CME/Scholarly Activity**

- Dr. Johnston attended the QSEA Conference in May, 2013, in Tempe, AZ.
- Dr. Dickey attended the ACGME Conference in March, 2013, in Orlando, FL.
- Dr. Yuhico attended the APDIM Spring Conference in April, 2013, in Orlando, FL.
- Dr. Yuhico presented Alzheimer/Dementia and the Primary Care Physician at IUHBMH Grand Rounds on February 20, 2013.
- Dr. Johnston presented “When One of the Holes in the Cheese is me;” Understanding the Role of Cognitive Error in Adverse Clinical Outcomes at IUHBMH Grand Rounds on May 29, 2013.
- Dr. Brandon Dickey served as the chair for the ACP Annual Scientific Meeting.
- Dr. Heidi Lakanen served on the Planning Committee for the ACP Annual Scientific Meeting.
- Dr. Johnston presented an ABIM Self-Evaluation Module (SEP) at the Indiana Chapter ACP Scientific Meeting.
- Dr. Dickey attended the ACP leadership conference in May 2013.
- Chief Residents, Dr. Karna Sarin and Dr. Adrian Singson, attended the APDIM Spring Conference in April, 2013, in Orlando, FL.
- Dr. Burugapalli attended the International Biannual Evolution and Cancer Conference in June, 2013, in San Francisco, CA.

**Program Coordinator/Staff Development.**

- Vana DuBois, Program Coordinator Transitional Year Residency, AHME May 2013
- Susie Tharp. Program Coordinator Internal Medicine Residency, APDIM April 2013 and AHME May 2013
- Susan Little, Administrative Coordinator, Graduate Medical Education, AHME May 2013

**Awards for Excellence in Teaching**

Dr. Brandon Dickey, Associate Director/Internal Medicine Residency, was selected “Teacher of the Year” for the second time by students at Indiana University School of Medicine—Muncie. This award is voted on by the second year medical students and was presented at the May 11, 2012 second year graduation banquet.
The Family Medicine Residency honored the following physicians at their banquet on June 28, 2013:

- Family Medicine Teacher of the Year was presented to Stewart C. Brown, MD.
- Specialty Physician Teacher of the Year was presented to Joseph Landwehr, MD.
- Resident Physician Teacher of the Year was presented to Ryan Brown, MD.
- The Family Medicine Residency’s “Anne Eliades, MD Award” honoring a physician for a distinguished career in teaching was presented to Stewart C. Brown, MD.
- The “William Stinson Award” was presented to Alan Young, MD. This award, given through the St. John’s Health System in Anderson, recognizes a resident who demonstrates excellence in patient care, particularly with underserved populations.
- The Family Medicine Residency Award for Scholarship was presented to Dr. Erin Young.

The Internal Medicine Residency honored the following physicians:

- The John Lawton Cullison, MD Outstanding Teacher Award was presented to Dr. Frank Conte.
- The William Boyd Fisher, MD Outstanding Resident Award was presented to Dr. Rey Arcenas.

X. Undergraduate Medical Education.

The Indiana University School of Medicine – Muncie (IUSM-Muncie) on the campus of Ball State University (also known as the Center for Medical Education) provides an education to first and second year students within the Indiana University School of Medicine. We also serve the local and national medical community through research and education. Under-graduate and graduate students from Ball State University train as research assistants in our faculty research labs. BMH faculty provide instruction for clinical courses such as Introduction to Clinical Medicine I (first year) and II (second year). Many IUSM-Muncie students return after their training for residency or clinical practice.

Planning is under way to start third year clerkships on the Muncie campus starting in 2014. These rotations will mirror those of the Indianapolis campus and will allow a small group (8-10 students) to remain in Muncie for all four years of medical school. (Sufficient 4th year clerkships already exist to accommodate these students).

Six new fourth year clerkships are being planned for the 2013-14 academic year to supplement existing clerkships.

Another exciting development was the creation at IUSM-Muncie of a satellite Admissions Committee that, for the first time, will interview medical school candidates at a site away from Indianapolis. Interviews for the 2013 academic year began September 2012.

Visiting Medical Students/Residents/Fellows from Indiana University School of Medicine on Rotations at Ball Memorial Hospital for Academic Year 2012-2013:

- 3 Interventional Radiology Fellows
- 21 Fourth Year Medical Students (Rotations: Sub-Internship, FM, Cardio, Sports Med, Wards, Surgery, Hematology/Oncology, and Gastroenterology.
- 17 Third Year Medical Students (Rotations: FM, OB, Internal Med, Peds)
- 25 Second Year Medical Students (MSII)
- 24 First Year Medical Students (MSI)
XI. Additional GME Training Opportunities through Continuing Medical Education

The IU Health Ball Memorial Hospital CME Department submitted the 2012 annual report to the Indiana State Medical Association as part of the process to continue as an accredited CME provider. Impressive records were compiled during 2012. A total of 183 continuing medical events were held through IU Health Ball Memorial Hospital with a total of 2,497 attendees. Of these attendees 1,609 were physicians and 888 were non-physicians which participated in one or more of the activities for a total of 187 instruction hours given. This resulted in the IU Health Ball Memorial Hospital CME Department issuing 1,659.25 hours of CME to physicians.

The CME Department conducted monthly live webinars (in conjunction with the American College of Physicians) as part of the ACP's Young Leaders Program.

The CME Department underwent its accreditation site visit from the Indiana State Medical Association in Fall 2012. IUH BMH again received “accreditation with commendation” (a six-year accreditation cycle, the maximum possible).