



In brief

- We are pleased to announce the creation of the Indiana Children's Health Services Research Fellowship, chaired by Dr. Aaron Carroll. The first year will begin in July 2006. Applications must be received no later than February 28, 2005 for full consideration.
- Stephen M. Downs, MD, associate professor of pediatrics and director of Pediatric Health Services Research, has been named the first Jean and Jerry Bepko Scholar.
- Aaron Carroll has received a K Award for his research, "Design, Development, and Study of a Mobile Tool for Adolescent Diabetes Management. The award, totaling \$606,260, will cover direct costs for the next five years.
- Dr. Nancy Swigonski was awarded a Clarian Values Grant to develop a pediatric dental health education program.

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Dr. Swigonski: At home with CHSR

By Nancy L. Swigonski, MD, MPH

As an "Air Force brat" I spent the majority of my childhood in Europe with moves every three years, so it still amazes me to find that I have spent nearly 18 years of my life in Indianapolis at varying stages of my training and career. That, I think is a testament to Indianapolis and especially to the wonderful Department of Pediatrics, here at Riley Hospital.

I received my MD from the University of Kentucky then completed my internship and residency in Pediatrics at the Indiana University School of Medicine. I was married soon after residency and moved to Cleveland where my husband did a neonatal and research fellowship. I taught pediatric residents at Case Western Reserve University but then did something I always thought I would enjoy -- joined a private practice. I loved practice and the relationships I built with families but after a very quick two years, IU was calling my husband back to join the faculty and be part of the newly formed Wells Research Center. At that point I wasn't sure what to do - I had loved practice but practice had raised several questions that I was not equipped to answer. Very good general pediatricians made decisions differently in practice than at the medical center! Maybe that's not news to most people these days



Dr. Nancy L. Swigonski

but evidence-based medicine and epidemiology were not taught at the time I was in medical school and residency. Things like referral bias and changes in the positive predictive value of a test based on the prevalence of the disease in a population were music to my ears - my world was beginning to make sense.

So I completed a health services research fellowship at the Regenstrief Institute for Health Services

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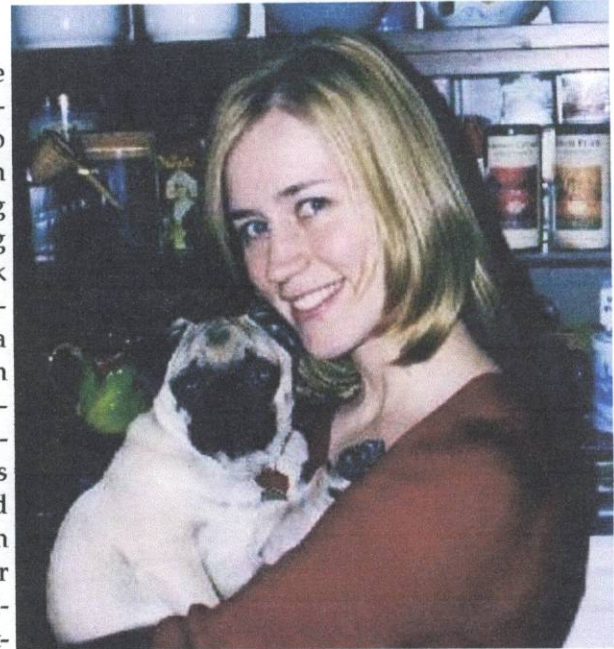
Resident Profile : Rachel Vreeman

By Rachel Vreeman, MD

Reflecting on my childhood years in Grand Rapids, Michigan, I can find some of the seeds of my current interests. My younger brother Dan and I used to engage in letter-writing campaigns regarding issues close to our hearts. Using our Commodore 64, we printed out pleas to maintain the cleanliness of the waters of Lake Michigan in which we swam each summer, to continue financial support for our favorite bicycle destination – the local library, and to avoid the overuse of Styrofoam by fast food restaurants. (My brother's lament against Styrofoam took the form of a very memorable rap, recorded on cassette tapes and distributed with flyers.) Looking back at our early efforts, I realize that perhaps I should not be surprised that both of us continue to attempt to effect change, using the best technology available to us, within our chosen field of health care. I am pleased to report that our efforts have become slightly more refined. While my brother is pursuing a fellowship in medical informatics at the Regenstrief Institute, I hope to pursue a career in academic pediatrics, focusing on child advocacy and community intervention.

Although my belief in advocacy began early on, my interest in pediatrics and academic medicine blossomed more gradually. While attending Cornell University, I was drawn to medicine because I felt it provided an op-

portunity to benefit the lives of others in a tangible sense, but I also pursued a major in English while exploring the sciences. During college, through a work study-community partnership, I worked for a non-profit organization called Educate the Children that provided educational opportunities for impoverished women and children in Nepal. Serving as their public relations coordinator, I created newsletters and brochures, arranged media coverage, and wrote grants. During my years with this organization, I saw our programs expand from sponsorships targeted to individual children into community-based outreach programs that created alterations in the local and national governmental policies and substantially benefited the health and development of children in this developing country. This experience solidified my understanding of using broad-based initiatives to impact the lives of the greatest number of children. I took this understanding, as well as my growing commitment to helping underserved and impoverished children, into medical school with me. On a more personal note, I also took my new husband, Joe Fick, from New York to Michigan. While in medical school at Michigan State University, my interest in the involvement of healthcare pro-



Dr. Vreeman and her dog, Olie

professionals with current affairs and advocacy continued to evolve. I often found myself involved in projects to connect these interests. For example, I coordinated Kosovo Refugee Awareness Day, a series of workshops and fund-raising events that increased community awareness about the refugee situation while raising money to provide medical supplies for the refugee camps in Albania. From anti-smoking presentations for fourth-graders to building projects with Habitat for Humanity, I enjoyed organizing activities that provided me and my fellow medical students with opportunities to serve others practically, though in ways slightly outside the traditional scope of medicine.

A curriculum for pediatric continuity clinics

By Gilbert Liu, MD, MS

During my residency and fellowship, I served on the Residency Review Council (RRC) for Pediatrics. As a member of the RRC, it was my privilege to examine numerous residency programs and see a wide range of approaches for delivering excellent patient care and medical education. One particularly widespread educational and service challenge for pediatric residencies is the "Continuity Experience." Residencies are mandated by The Accreditation Council of Graduate Medical Education (www.acgme.org) to provide a "Continuity Experience" in which residents take ownership of a panel of patients and learn ambulatory pediatric medicine. Almost uniformly, this experience takes place in "continuity clinics" where trainees should gain an "understanding of and appreciation for the longitudinal nature of general pediatric care, including aspects of physical and emotional growth and development, health promotion/disease prevention, management of chronic and acute medical conditions, family and environmental impacts, and practice management." The ACGME goes on to say that ideally, continuity clinics should be "structured and designed to emulate the practice of general pediatrics and that is

conducive to efficient processing and management of patients."

Well, it's been said that learning primary care in a large, university-based tertiary medical center is like learning about forestry in a lumberyard. Sadly, I think this may be especially true of learning primary care pediatrics in most continuity clinics. Continuity clinics are vastly different from most community offices and the care is usually discontinuous. Recent resident work-hour regulations have added to the difficulty in achieving a quality "Continuity Experience" for both residents and their patients. In fact, some IU residents missed 16 clinics last year. It's a complicated problem.

Phil Siefken and I are working in collaboration with the Dyson Initiative to improve the "Continuity Experience" by developing a curriculum. Though we acknowledge this won't "fix" the problem of the continuity experience, we do think establishing a standardized set of didactics is a worthwhile effort. The ACGME calls for a curriculum that empha-

sizes "the generalist approach to common office-based pediatric issues including anticipatory guidance from birth through young adulthood, developmental and behavioral issues, and immunization practices and health promotion, as well as the care of children with chronic conditions."

The ACGME also says that residents must learn to serve as "the coordinator of comprehensive primary care for children with complex and multiple health-related problems and to function as part of a health care team." We agree! With this in mind we're designing a set of topics for an 18-month long period (so that the curriculum rotates twice in a 3-

year residency) that draws on the expertise of the faculty in General and Community Pediatrics and particularly incorporates insights from the Dyson Project. The didactics are meant to be highly pre-packaged, quick (easily discussed in less than 10 minutes) and are available on the web-based ANGEL server.

We're over half way done, but still could use your input and help - if interested, contact either Phil or myself at 317-278-0552.



Swigonski continued...

Research and heard another song calling me - that of population medicine and health policy. So I went on to complete a Masters in Public Health. At the completion of my fellowship, I joined the faculty of General and Community Pediatrics and Adolescent Medicine. General and Community Pediatrics gave me a clinical home and Dr. Donald Orr, Division Chief of Adolescent Medicine gave me a much appreciated research home. However, when the division of Children's Health Services Research was formed, I found a "natural" home and an

exciting opportunity to work with Dr. Stephen Downs, so I moved into this division to pursue my areas of interest. My research interests include underserved populations, access to health care, quality of health care, educational methods during residency and postgraduate training, and evaluation and implementation of Medical Home. I hold an adjunct appointment in the School of Nursing and am an affiliate scientist of the Regenstrief Institute. I am also on many national and state boards including the AAP's Medical Home Initiative Project Advisory

Committee, Indiana AAP Executive Board, legislative co-chair, and the RWJ Covering Kids and Families. I am a co-PI of the Anne E. Dyson Community Pediatrics Training Initiative..

My time in adolescent medicine is serving me especially well now that I have two teenage boys and a nine year old. Between cross-country, track, swimming, backyard basketball and sculling, weekends and evenings are kept full.

Administrative Staff Spotlight: Monnica Lewis

By Monnica Lewis

What I appreciate most is the positive, supportive environment I have found in Children's Health Services Research, and opportunities to take on new challenges. I look forward to coming to work each day, and I am grateful that the work I do contributes, in some small way, to the betterment of the lives of others.

A lifelong Indianapolis resident, I completed an undergraduate degree in psychology at Butler University with plans to pursue a doctorate degree in social psychology. My particular interests centered on criminal behavior and social deviance,

however after a year-long stint as a psychology technician with the juvenile court system I realized it wasn't for me. Since then, life has taken me in many other directions, including work in advertising as a media buyer, eventually leading me to rediscover my first passions. I love fiction writing and hope to one day finish, and publish, a full length novel. Not surprisingly, I am also an avid reader. Henry Miller, Toni Morrison, Jack Kerouac, Knut Hamsun and Shay Youngblood are favorites; I should hope to write half as well as any one of them.

This fall and winter, I plan to teach myself French (I chose to

study Spanish in high school and Russian during my first two years of college), which I hope to test out on the locals when I visit France in the not too distant future.

I also enjoy baking, and for a little over three years, I have maintained a blog, with a modest readership, where I post daily musing on various topics.

Visit our website at

www.ichsr.org

Works in Progress

Hear ye, hear ye! Calling all critical and collaborative thinkers! The Children's Health Services Research team wants YOU to attend our weekly Works in Progress (WIP) meetings.

When: Every Tuesday from 11:30AM-12:30 PM
Where: Riley Research conference room # 339
What: A FREE, NUTRITIOUS, DELICIOUS LUNCH for those who RSVP (bring your own beverage)

The WIPS are meant to be informal times where one can consult with a collegial scientific community. The meetings typically consist of a 30 minute presentation and lots of questions and attempts at answers. We particularly welcome:

- presentation of work at any stage from conception to final interpretation
- practice presentations
- idea-sharing on the development of health services research and informatics at IU.

If you are interested in presenting ideas or practicing presentations at future meetings, please contact Loyce Stultz lstultz@iupui.edu to get on the schedule or invitation list.

In brief continued...

- Children's Health Services Research, the Regenstrief Institute, and the American Academy of Pediatrics will co-sponsor the Pediatric Electronic Medical Records planning meeting. The meeting will be held on the IUPUI campus, September 17-19.
- Vickie Cater has joined our staff as a project manager for the Clarian Values grant. She comes to us from a position with the Cancer Center.
- Loyce Stultz has joined our team in the role of senior administrative secretary. She previously held a similar position with the Office of International Affairs.

*Upcoming WIP Session presentation schedule

10-Aug	Leslie Earle	2-Nov	Aaron Carroll
17-Aug	Paul Biondich	9-Nov	Open
24-Aug	Gil Liu	16-Nov	Paul Biondich
31-Aug	Vibha Anand	23-Nov	No WIP
		30-Nov	Stephen Downs
7-Sep	Stephen Downs		
14-Sep	Open	7-Dec	Marc Rosenman
21-Sep	Marc Rosenman	14-Dec	No WIP
28-Sep	Open	21-Dec	Aaron Carroll
		28-Dec	Sarah Stelzner
5-Oct	Nancy Swigonski		
12-Oct	Open		
19-Oct	AMIA Practice		
26-Oct	No WIP - AMIA		

* Schedule of presenters subject to change.

The Pediatric Examiner is a publication of Children's Health Services Research, Department of Pediatrics, Indiana University School of Medicine.

Mission: We strive to improve the health and healthcare of children by developing and applying best scientific evidence and methods in health services research and informatics.

Values: We are guided by compassion for children, partnerships with others, and scientific rigor.

Vision: We seek to become the nation's preeminent center for children's health services research and informatics. We strive for excellence in research, education and service to children, their families, their communities and the professionals who serve them.

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Introducing the newest member of our team: Loyce Stultz

By Loyce Stultz

Born and raised in Indiana, I grew up in Irvington, married after high school and began moving about the country, while managing a household and successfully raising three daughters. When my marriage ended, I moved to South Flor-

of Eli Lily, where I am an active member of the board of directors and neighborhood association. I love living in the city in a transitional urban neighborhood, even though it can be quite a challenge. A developing interest in English Cottage gardening takes up a



ida to care for my mother and stepfather, who had moved from the Caribbean to Miami. After their deaths, and tiring of the heat and humidity, I eventually returned to Indiana in 1991 and began to work in administrative support at IUPUI, starting in Riley Child Psychiatry and most recently in the Office of International Affairs.

Three years ago I purchased an 1890 Victorian house in the Bates Hendricks neighborhood directly south

lot of my time especially during the spring and fall. My interests include decorating (I recently completed stenciling bathroom doors and faux stained glass in the transoms over the door), reading *Anna Karenina* in my spare time, taking care of my indoor feline population (5 in all) and volunteering with Indy Feral and CatsHaven.

All of this keeps me pretty busy.