



THE PULSE

OF THE OSTEOPATHIC FOUNDATION OF WEST MICHIGAN

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MESSAGE FROM THE CHAIRMAN, FRANK MARCZAK



As I reflect worldwide on a year dotted with spectacular highs and desperate lows, I am reminded how much good is happening right here in West Michigan, and of the substantial impact of this foundation as we endeavor to create a healthier community and to support osteopathic medicine. Let me share some examples:

In 2010, the OFWM awarded \$42,000 in medical education scholarships to support students on their journey to become physicians. In addition, \$10,000 was awarded to physicians who graduated from Mercy Health Partners' OMM-NMM residency program who committed to stay and practice in our community.

Eighteen high school juniors and seniors received support so they could attend the intense OsteoCHAMPS summer program at MSU, followed by a year of mentoring and education guiding them toward college. The feedback from – and about – these young people is nothing short of phenomenal. Some of our first OsteoCHAMPS are now in medical school. WOW! The program works!

The foundation also awarded \$24,670 in grants to local health agencies and to programs that work directly with men, women and children in this community, providing them with essential medical care and helping them make healthy choices that lead to healthier lives.

Are we finished with these efforts? Not by a long shot. There is much to be done and many needs to address, especially during these tumultuous times.

This is the time of year when many worthy organizations ask for your support. On behalf of the Osteopathic Foundation, I ask you, too, and I want to be specific about how you can help.

It costs the foundation \$2,000 to send a high school student through the OsteoCHAMPS program.

These students are interested in pursuing careers in osteopathic medicine but are short on the means to get there. They benefit greatly from the mentoring and support that OsteoCHAMPS offers. This is an important investment in the future of osteopathic medicine as we work to “grow our own.” Will you sponsor a student?

We also need mentors to give these kids a person-to-person look at what it takes to be a physician. That’s an investment of your time rather than money. Will you volunteer?

Will you provide a full or partial scholarship for an intern or resident? These scholarships help future doctors with the increasing costs of essentials such as tuition and books. Remember your own financial struggles during medical school? A donation of \$500 to \$1,000 will go a long way toward helping one of your future colleagues complete his or her education. Will you help?

There are other programs as well for which you can designate a gift. Want to know more? Call me directly and I’ll fill you in. After two years serving as chairman of this foundation, I have learned how much our grants and scholarships make possible—how vital they are to individuals, families and to this community—and I’d love to talk with you about it. If you will help, we can do more.

With that said, I invite you to sit back and enjoy a lively article from one of your colleagues who took a look over his shoulder and reflects here upon a satisfying career steeped in medical service. Our dear friend Dr. Pat Walsh retired this year and is basking in the sun in Florida as of this writing. I know you will enjoy his story, and I hope it inspires you to think of doctors past, present and future as you consider your holiday giving.

The directors of the Osteopathic Foundation of West Michigan send our greetings and wishes to you and your family for a most joyous holiday season. Thank you for all you do.

Frank Marczak
Chairman

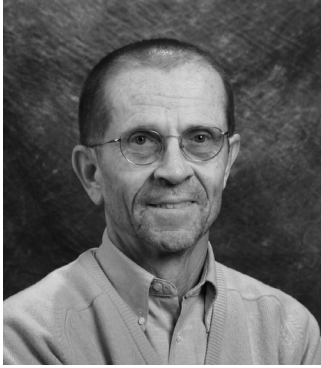
... much good is happening right here in West Michigan, ...



“Twenty years from now you will be more disappointed by the things you didn’t do than by the ones you did do. So throw off the bowlines. Sail away from the safe harbor. Catch the trade winds in your sails. Explore. Dream. Discover.” — Mark Twain

DREAMS FULFILLED

By Pat Walsh, DO



It all started in 1969

when I came to Muskegon to intern after having graduated from medical school in Kirksville, MO. I, like so many other physicians, had been called to medicine. From the age of 12, and largely because of an uncle who was a physician, I really never wanted to do anything else but be a physician. The joys and privileges of being a physician were so fulfilling, so satisfying that there was never once a moment that I regretted my decision. What a career I've had. Exhilarating.

well-structured intern training programs of today, the internship back then was relatively primitive with very few formal didactics and rotations that were so loosely structured that we were free to go anywhere in the hospital at any time to seek out "the action". For a highly motivated intern, the freedom was thrilling. Our days were spent going from the OR to OB to ICU to ER and being exposed to the most interesting and challenging patients. While didactics were virtually non-existent, bedside teaching and training were abundant, as the medical staff was vitally interested in our education. It was a wonderful year.

PURSUING SPECIALTIES

During internship, I found myself drawn to the ER with its array of challenging and interesting patients. I figured if I could handle most anything that came into the ER, I could be a pretty good physician, so I spent considerable time honing my emergency skills.

Since there were no emergency medicine residencies available in 1970, I decided to become a full-time staff physician in the ER after internship with two colleagues, one of whom was Dick Huff of OMM fame! It was exciting to be a part of medicine's newest specialty back then, but it was a terrifying first few years, and I read voraciously to further my knowledge of medicine. Yes, it's true that

emergency patients used to be delivered in the

back of hearses without any trained EMTs or paramedics, and there was no radio communication system warning of their arrival. They would simply hit the door, and you had better be ready. Gradually, I gained a sense of competency, and I and three others formed Muskegon's first full-time ER coverage team staffed by physicians whose chosen specialty was emergency medicine.

It was during the 1970s and 1980s that the old Muskegon General Hospital added key staff members which enabled it to become a vibrant, albeit small, hospital. Back in those days, relationships between DOs and MDs were icy and adversarial except for a handful of MDs, such as Ralph Ryan and John Skallerup, who would come over to General for consultations in cardiology. A wonderful man by the name of Larry Grennan came to the ER to render plastic repairs of complex lacerations, and Dick Moulton assisted us with orthopedics.

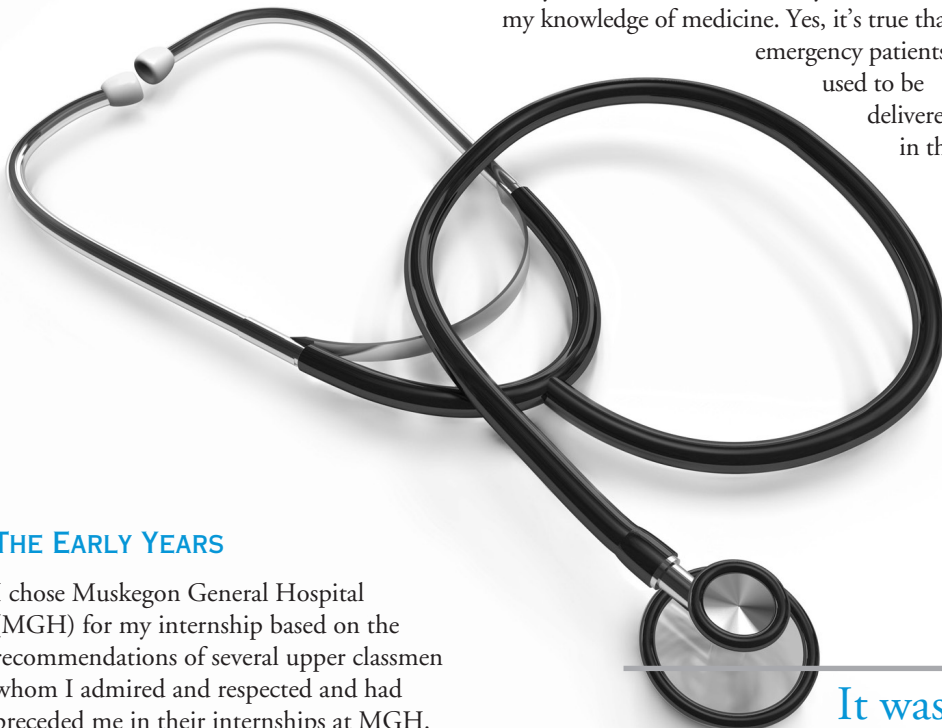
The atmosphere inside of General Hospital in those days was one of camaraderie, enthusiasm and genuine caring – both for the patients and one another. We might disagree vehemently at times, but for the most part, we were all pulling in the same direction; and the hospital was full of patients who chose to receive their care at General. I vividly recall medical staff meetings which were basically standing room only and could be highly contentious with many spirited battles over turf issues and power plays. Some of the physicians on staff were the most eccentric and aberrant characters that even the greatest of novelists couldn't have possibly dreamed up. It was great fun and a very special time for DOs in West Michigan.

During this time, I came to know Roger Spoelman, who came on board at General in 1981 as an exercise physiologist and director of the cardiac lab. Of course, he later became CEO of General and then president and CEO of Mercy General Health Partners and, now is CEO of Mercy Health Partners. Roger's charismatic appeal and leadership skills typified the people who chose to work at General during its halcyon days. Many members of Roger's original leadership team at General are still in place at Mercy Health Partners.

It was exciting to be a part of medicine's newest specialty back then, but it was a terrifying first few years ...

THE EARLY YEARS

I chose Muskegon General Hospital (MGH) for my internship based on the recommendations of several upper classmen whom I admired and respected and had preceded me in their internships at MGH. One was Dennis Smallwood, who was the godfather of our first daughter. Two others, Bob Pierce and Paul Haight, still practice in the area today. Compared to the



ADDING FAMILY PRACTICE AND URGENT CARE

In the ER, we would work seven consecutive days, 14-hour nights and 10-hour days, so we would have every other week “off.” However, Dick Huff and I decided we didn’t want the time off, so we started a family practice “on the side” which became immensely gratifying and presented completely different challenges from that of emergency medicine. Each of the two specialties required a different mind set and disparate approaches to patient care. I became a better physician while practicing both at the same time.

During that period, Dr. Huff and I also provided physician services to the new state prison in town. Dr. Huff would go on to become the medical director at the prison while I proceeded to go through two more partners crazy enough to split their time between emergency medicine and family medicine. One of them would become a neonatologist in Kansas City. When my third partner in nine years left, I was forced to choose between EM and FM and, of course, I chose my first love, emergency medicine. Sadly, I turned my family practice over to John and Terry Collett who ran it for a number of years before moving to Florida.

Dr. Joel Martin joined our group in the 1970s. He was bright, energetic, passionate, good natured, imaginative and visionary. He became the finest emergency physician I ever knew and soon became the tacitly appointed leader of our ER group, which included Harry Arthur and J.B. Gilleland. It was Dr. Martin who decided to establish Muskegon’s first urgent care center on Norton Avenue across from Meijer’s, much to the dismay of other DOs and especially MDs who were incensed that a group of osteopaths had moved into “their” neighborhood.

Joel and I, along with Paul Ponstein and Dan Fett, now a local orthopedic surgeon, put many hours of “sweat equity” into the Norton Shores Medi-Center to make it go. Joel and I ultimately became chiefs of staff at Muskegon General in the 1980s. Joel became the co-director of the ER at Mercy following the merger with General Hospital in 1998. Not long thereafter, he died suddenly and unexpectedly at the age of 51 from a massive heart attack, but not before we had started an occupational medicine clinic and health club in Holland with Paul Ponstein. Joel was a dear friend. It was an enormous privilege to be his partner and business colleague in the ER and several business ventures. I miss him still.

History book in progress

A few years ago, we began compiling information about the history of osteopathic medicine in West Michigan, complete with first-hand stories from those who helped build and shape the profession here.

Bill Jacobks, who is a recently retired instructor of history at Muskegon Community College, has taken on the project. If you have a story to tell, or documents, articles, pictures and other osteopathic medical memorabilia to share, Bill would like to talk with you! Please contact him at 231-755-6266 or send him an e-mail at williamjacobks1303@comcast.net.

GENERAL BECOMES A TEACHING HOSPITAL

Muskegon General’s internship program went through a dormant period in the early and mid-1970s due mostly to a lack of leadership, I believe. In the late 1970s, a medical education committee was formed and the internship program was reinstated with radiologist Kent Graham serving as director of medical education (DME.) Dr. Graham moved to Lansing, and in 1981, I volunteered to replace him. I had always been fascinated by the educational process, most especially the process of transforming a young, idealistic pre-med student into a full-fledged, competent physician. This was an opportunity I could not pass up, and I yearned to make our program better.

As DME, I brought structure and organization to the program with an emphasis on didactics and education rather than service to the medical staff. I learned a great deal from other, more experienced DME’s at other osteopathic teaching hospitals across the state who mentored me during my early years. We met every month in Lansing and spent hours discussing ways to improve our postgraduate training programs. To that end, we formed Consortium for Osteopathic Graduate Medical Education and Training (COGMET) which was the predecessor for today’s Statewide Campus System (SCS.)

This educational model and system is now nationally acclaimed.

“My” first intern graduates in 1982 included Drs. Patti Roy and Dan Fett. Both are still practicing in Muskegon. Patti is a prominent family physician, and Dan is an orthopedic surgeon with Tri County Orthopedics.

Soon there was talk of establishing an OB/Gyn residency. With the help of Drs. Carol Markiewicz and Ford Grimshaw, our OB residency began in 1984. Dr. Grimshaw was a marvelous surgeon and mentored many outstanding young obstetricians and gynecologists until he retired at age 65. It took me a number of years before I was able to persuade Dr. Gus Barkett to assume the program directorship, which he continues very capably to this day.

Not long thereafter, discussions began to arise regarding a family medicine residency program. Again, I recruited (he would say I pestered) Dr. David Dora vigorously for a couple of years before he agreed to come on board as the program director of our new FM residency program in 1989. Finally, Dick Huff and I thought Muskegon was ripe for an OMM residency, and we were fortunate enough to attract the very talented Mike Carnes, who started our Plus One OMM residency in 2003. That was followed by our traditional neuromuscular medicine residency in 2008, which is now highly regarded. Without the financial assistance of the Osteopathic Foundation of West Michigan, the success of the Huff-Carnes practice and their residency might never have happened.

AFFILIATION WITH MSU

I wanted the best people in place to lead our residency programs. During the 1980s and 1990s, Muskegon General became a full-fledged teaching hospital affiliated with the Michigan State University College of Osteopathic Medicine (MSUCOM.) It has continued to grow its residency programs for two decades and through two separate mergers.

In the 1990s, we also began to have medical students from MSUCOM utilize MGH as their base hospital for their last two years of medical school training. Starting with an intern class of three in 1982, Mercy Health Partners now has 30 or more medical students, interns, OB and FM residents, plus visiting residents and medical students from other institutions. We’ve come a long way baby!

See *Walsh*, back page.



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None of this could have been accomplished, of course, without the support of the hospital administration and the immense help of countless staff physicians – both DOs and MDs – who volunteered their time to lecture, train and mentor the hundreds of people who have now trained at MGH/MGHP/MHP. It was those dedicated physicians who were the backbones of our programs, the selfless contributors to so many young people. They are truly extraordinary people.

All of the above took place during my peak years in emergency medicine while co-owning and managing two medical clinics. In 1984, I proudly attained the status of board certification in emergency medicine from the American Board of Emergency Medicine, after having practiced for 14 years. I felt validated as did my colleagues in the ED who also worked hard to pass the written and oral boards.

MEDICAL EDUCATION TAKES PRIORITY

When the merger occurred with Mercy Hospital in 1998, I decided to step away from emergency medicine in order to devote more time to the increasing demands of my roles as director of medical education and continuing medical education. And so it was that, with both sadness and relief, I retired from emergency medicine after 28 years. The memories and stories and wonderful people that I was privileged to work with will be with me always. I had started my career when the specialty of emergency medicine was in its infancy and had grown up with it while watching it become a huge specialty and a critical component of the health care system. It had been quite a ride but it was time to focus on other things.

Over the next several years, both medical education and continuing medical education would continue to evolve with ever increasing demands, regulations, requirements and new policies. I took even greater pride in the sometimes astonishing development and talent of some of our residents and the deepening relationships with both them and my colleagues. Just as I had, in a sense, loved many of my patients, so too did I become aware of a similar feeling towards some residents and colleagues. It was tremendously satisfying work and I considered myself so fortunate to have had so many different “lives” in my career.

THE FINAL YEARS

In 2006, Dr. Dora took over from me the position of director of medical education that I held for 25 exciting years. And a more capable replacement could not have been possible. He has continued to grow and improve all aspects of our med ed programs. There really wasn't much I could teach him, owing to his already extensive background and experience in medical education. I remained as CME Director until this past June when Dr. Dora assumed that role also. Perfect. Knowing that he will finish what I started brings me great satisfaction, but realizing that he has taken our programs to new levels of excellence brings me ineffable pleasure and relief.

I look back on my 41 years in medicine with tremendous pride, gratitude and humility. Without the support of my loving wife and children, as well as my countless coworkers, my fascinatingly varied career in this beloved profession would not have been possible. I thank each and every one of them from the bottom of my heart.

WHY A HISTORY OF OSTEOPATHY IN WEST MICHIGAN?

By William Jacobks

DOs have provided compassionate care to our community since 1942 when Muskegon Osteopathic Hospital (MOH) was founded. When MOH became Muskegon General Hospital in the 1960s, that care continued. Now we have only one hospital system in Muskegon County, and its two primary campuses, Mercy Hospital and Hackley Hospital, are associated in the public's mind with MDs. As a result, osteopathy is losing its public identity in West Michigan.

Through historical research, I have already uncovered much material about the founding of MOH, but I need your help to uncover the next two parts. One part is 1942 to 1967 and the other part is 1967 to 2000. Few records remain that document the work of osteopathic physicians here. I can only get that information from DOs, nurses and others who have been part of the osteopathic family in the past. Let me interview you and let your voice be heard!



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