The first quarter of the fiscal year was a very productive time for our department. New grant funding was secured, manuscripts were published and the Advanced Life Support in Obstetrics (ALSO) Course was a great success. Congratulations to Susan Nash, Ph.D., MA, and Larissa Grigoryan, M.D., PhD, MPH, MSc, department faculty who were promoted to Assistant Professor during the quarter.

The following pages highlight some of the great work being done across the department by our dedicated faculty, staff, and trainees. Thanks to everyone for your hard work!
Welcome

We are pleased to welcome seven new faculty and six first year residents. We wish you much success at Baylor College of Medicine.

Top row:  Mónica Alzate, Ph.D., LCSW, MA; Susette Arrazolo, FNP; Maria La Cruz Rondon, M.D.; Carmen Robinson, M.D.; Henry Siem, M.D.

Bottom row (PGY1 Residents): Sheldon Gaines, M.D.; Roslyn Oduro, M.D.; Amanda Patterson, M.D.; Reginald Nguyen, M.D.; Stephanie Vachirasudlekha, M.D., MPH, MSW; Eloy Galvan, M.D.

Not pictured: Rosemin Alimohammad, M.D.; Sana Khan, D.O.

Compassion and the Art of Medicine elective series began August 12 and Elective Director, Dr. Kenya Steele, presented an orientation lecture about compassion and self-care to 112 first-year students. The following week, the Matthew Carter Memorial Lecture was presented by Dr. Niraj Mehta (“Healing begins with feeling”). Other presenters this year from Family and Community Medicine include Dr. Alisha Kidane (Compassion and the care for the whole person); Dr. Sherri Onyiego and Mr. Leonid Onyiego (Maji 4 life); and Drs. Fareed and Rubina Khan (Tania’s life story and the inspiration for Touch Base Center for the Deafblind).

Funding for the elective is provided by the Department of Family and Community Medicine and the Maye E. (Pat) and Alan Lambert, M.D. ‘52, Family and Community Medicine Endowment.
Recently Funded Research

Rustveld Receives CPRIT Grant
Under the leadership of Luis O. Rustveld, Ph.D., RD, LD, the Department of Family and Community Medicine received a Cancer Prevention Research Institute of Texas (CPRIT) award of $1.5 million. The grant responds to the critical need to improve systems efficiency for navigating and coordinating timely completion and follow-up of colorectal cancer screening (CRC). The target patient population are those between the ages 50 and 74 and high risk patients. Our approach for improving referral, scheduling and completion of colonoscopies is to implement an innovative multi-faceted patient navigation program embedded in EPIC to consistently track all aspects of CRC screening and patient navigator-led CRC education.

Peer Recovery Expansion Project (PREP)
The Department of Family and Community Medicine has partnered with the Center for Recovery and Wellness Resources to launch the Peer Recovery Expansion Project (PREP), a community-wide collaboration to improve peer recovery support services in three neighborhood centers in the Greater Houston area. The project will prepare and support individuals in addiction recovery who are making the transition to careers as recovery support specialists through the Texas Peer Recovery Coach Institute. The Substance Abuse and Mental Health Services Administration (SAMHSA) through the Center funds the three-year project. Leading the department’s efforts is Samuel MacMaster, Ph.D.

National Research Service T-32 Award (HRSA). Faculty in the Department of Family and Community Medicine, with guidance from Program Director, Roger Zoorob, M.D., MPH, FAAFP, received a the Primary Care Research Fellowship Grant, a 5 year award of $1.6 million awarded by the Health Resources and Services Administration (HRSA). The fellowship, open to MDs, PhDs and other doctoral degree holders, aims to implement a multifaceted training program that comprehensively prepares health care professionals for a career in primary care research. This fellowship features core curriculum based on faculty-developed modules, emphasizes multidisciplinary team-based mentoring, and offers a diverse spectrum of primary care research opportunities from an existing interinstitutional collaborative housed within the largest medical center in the world. (Jul 2016 - Jun 2021)

Fetal Alcohol Spectrum Disorders Practice and Implementation Centers: High Impact Projects and Systems Change (CDC). (Sep 2016 - Sep 2019)

Surveillance, Intervention, and Referral to Services Activities for Infants with Microcephaly or Other Adverse Outcomes Potentially Linked to Zika Virus. Grant awarded by the CDC. Florida Department of Health and the University of South Florida (PI). Jason L. Salemi, Ph.D., MPH BCM Sub-Contractor (Oct 2016 - Jul 2017)

The article was e-published in July and the phone began to ring. In fact, Dr. Grigoryan and her colleagues have been inundated with phone calls and emails from news outlets desiring a quote. Dr. Grigoryan has taken the public’s interest in stride. “So often science news is just for scientists. This project, however, has piqued the public’s interest.”

Below are links to a sampling of the news agencies that have quoted Dr. Grigoryan or her colleague, Dr. Barbara Trautner, about their antibiotic stewardship work.

**DEPARTMENT UPDATES**

**Faculty Spotlight**

The article “Nonprescription Antimicrobial Use in a Primary Care Population in the United States” published by Antimicrobial Agents Chemotherapy has garnered a lot of interest.

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Below are links to a sampling of the news agencies that have quoted Dr. Grigoryan or her colleague, Dr. Barbara Trautner, about their antibiotic stewardship work.

**ABSTRACT**

Community antimicrobial resistance rates are high in communities with frequent use of nonprescription antibiotics. Studies addressing nonprescription antibiotic use in the United States have been restricted to Latin American immigrants. We estimated the prevalence of nonprescription antibiotic use in the previous 12 months as well as intended use (intention to use antibiotics without a prescription) and storage of antibiotics and examined patient characteristics associated with nonprescription use in a random sample of adults. We selected private and public primary care clinics that serve ethnically and socioeconomically diverse patients. Within the clinics, we used race/ethnicity-stratified systematic random sampling to choose a random sample of primary care patients. We used a self-administered standardized questionnaire on antibiotic use. Multivariate regression analysis was used to identify independent predictors of nonprescription use. The response rate was 94%. Of 400 respondents, 20 (5%) reported nonprescription use of systemic antibiotics in the last 12 months, 102 (25.4%) reported intended use, and 57 (14.2%) stored antibiotics at home. These rates were similar across race/ethnicity groups. Sources of antibiotics used without prescriptions or stored for future use were stores or pharmacies in the United States, “leftover” antibiotics from previous prescriptions, antibiotics obtained abroad, or antibiotics obtained from a relative or friend. Respiratory symptoms were common reasons for the use of nonprescription antibiotics. In multivariate analyses, public clinic patients, those with less education, and younger patients were more likely to endorse intended use. The problem of nonprescription use is not confined to Latino communities. Community antimicrobial stewardship must include a focus on nonprescription antibiotics.
Dr. Anjali Aggarwal (*left*) welcomes residents to the second annual Advanced Life Support in Obstetrics (ALSO) Course, an evidence-based multidisciplinary training program that prepares maternity health care providers to better manage obstetric emergencies. The course is sponsored by American Academy of Family Physicians.

Forty-six family medicine residents representing five family medicine residency programs and six other providers were in attendance: Baylor College of Medicine, Houston Methodist, UTMB-Galveston, UT McGovern Medical School and DeTar Healthcare System. (August 2016)

The ALSO curriculum addresses preventive care and practice concerns: First-trimester complications; helping parents cope with a birth crisis; and diagnostic ultrasound.

A highlight of the event is the use of beef tongue to mimic perineal laceration repair.

Congratulations to our faculty who received recognition from Harris Health System during the quarter. We appreciate your dedication to your patients and to the department.
Publications


Skelton FM, Grigoryan L, Ying J, Homes SA, Trautner B. Poster 210 Urine study results of persons with spinal cord injury presenting for annual evaluation. *PM R* 2016 Sep 24 [Epub ahead of print]


Reed B. Practice Pearls: Inform patients about delays. *Fam Pract Manag* 2016 Sep-Oct;23(5):47


**PRESENTATIONS**


**Kidane A, Lancaster J.** How providers can offer patients compassionate care. BTGH Trauma Conference. Aug 2016


**Juneja M.** Assessing and addressing diabetes internal distress. AAFP FMX. Orlando, Florida. Sep 2016

**Roger Zoorob, M.D., MPH, FAAFP present at the European FASD Conference in London.**

**James H. Bray, Ph.D. in Yokohama, Japan**
September 9th is celebrated annually as International FASD Awareness Day to highlight that there is no known amount or type of alcohol to that is safe to drink when pregnant or planning to become pregnant. “In spite of the surgeon general’s warning on the back of alcoholic beverages, the common public knowledge is that drinking a little bit during pregnancy is okay, when it really isn’t,” said Dr. Roger Zoorob. “Not even one drink is acceptable.”

Dr. Zoorob was interviewed for BCM Reproductive Health News. Sep 2016
For the record

Stephanie Vachirasudlekha, M.D., MPH, MSW is a first year resident in our Family Medicine Residency Program. She agreed to share her thoughts as she settles into the new routine of an intern.

As I approach the halfway point of my intern year, I am amazed at how quickly the time has passed since the first day of orientation. I remember being full of nervous energy as I met my Family Medicine co-interns for the first time and we embarked on this incredible journey together. In just the past few months, I have already grown in so many ways and find that I am continually pushing myself to become a better practitioner.

I am constantly working on strategies to increase my efficiency and ability to organize care for multiple patients on the inpatient service. In the outpatient setting, I am learning how to elicit relevant information in a timely manner in order to see all of my scheduled patients before the clinic closes. I have also observed that perhaps I spend a little too much time talking with my patients. As a medical student, I could afford the time to really get to know my patients. In residency, however, I need to learn how to form those same bonds with my patients, just in a shorter amount of time due to increased responsibilities.

Coordinating patient care and expanding my medical knowledge can be very exhausting. The mentors and role models I have found within Baylor’s Family Medicine Residency Program have made this transition much easier than I could have hoped for. The wonderful faculty members challenge residents to become competent and independent, while also being very accessible for our many questions. They offer years of experience and wisdom, and I love hearing anecdotes of their own residency experiences. The department staff has also been so supportive of all of us. They make our jobs much easier and I know that I am not the only one who appreciates their hard work.

My co-residents are also an amazing group of individuals. Many have gone out of their way to ensure that I have a grasp on new concepts, sending me articles on topics we have discussed. They have also stopped what they were doing to show me how to find things in the electronic medical record, teach me something new, or run downstairs to grab a snack for hungry teammates on a busy admission day. The senior residents serve as great role models and I hope to someday help incoming interns navigate residency, just as they have done for me. My co-interns and I also bond over shared experiences and laugh through some of the common rookie mistakes we have made. I could not imagine going on this adventure with anyone else.

It is hard to believe that new applicants are currently interviewing to become the next class of Baylor Family Medicine interns. Soon, I will be tackling new responsibilities as a second year resident, but those fears will be better addressed in a different essay. For now, I will focus on the tasks ahead of me as I complete my intern year. I know that there will be many challenges that will test my stamina, but I also know that I will be stronger for having overcome them. I look forward to continuing this journey, acquiring the knowledge and skills that will shape me into a compassionate and capable family physician.
Family and Community Medicine Quarterly Report is a publication of the Department of Family and Community Medicine at Baylor College of Medicine.

To be added to the Report email listserve, please email Joan Newell joan.newell@bcm.edu

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