Building team players

Interprofessional training days prepare students to join the health care delivery team
On behalf of the faculty, staff and students, I welcome you to Extension. In early March, we got the happy news that in the 2012 rankings of Physical Therapy programs released by US News and World Report our Doctor of Physical Therapy program was ranked number 7 (moving up from the number 11 spot) out of more than 200 programs in the country. Clearly this is a testament to the stellar work of our faculty, staff, students and alumni.

In May, we graduated the DPT Class of 2012. Dr. Anthony Delitto, Professor and Chair of the Department of Physical Therapy as well as Associate Dean of Research at the School of Health and Rehabilitation Sciences at the University of Pittsburgh, gave the commencement address. And in mid-June we matriculated the DPT Class of 2015, represented by 65 students from 26 states, 50 universities and 25 majors.

Our faculty makes it possible to fulfill our educational, clinical and scholarly endeavors, and to bolster these efforts we are excited to welcome Drs. Kathy Lee Bishop, Laura Zajac-Cox and Trisha Kesar to our fold. See page 9.

At Emory, we have always strived to build the future leaders of our profession. I am particularly pleased that we can count at least six such alumni who are leading the way by being at the helm of other PT programs in the country. A profile of these alumni appears on page 8.

Finally, I am pleased to announce the graduation of our first two orthopedic residents (see page 6). We plan to expand the number of residents accepted in the orthopedic residency program beginning this fall. Also, we are adding other residency programs in the near future in keeping with the need for more specialized training in the physical therapy profession.

I hope you enjoy this issue of Extension, and my thanks to all who support the Division of Physical Therapy in so many ways.

Best Wishes,

Zoher Kapasi, PT, PhD, MBA
Associate Professor and Director
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“At the very least, a sports medicine professional needs to have some understanding of the ethical issues they’ll face and have some level of training in ethical decision making,” — Bruce Greenfield
Building team players

By Martha Nolan McKenzie

From the day students enter the Emory DPT program, they are immersed in all things physical therapy. They study alongside other physical therapy students, attend lectures given by physical therapists and practice their new clinical skills under the guidance of physical therapists. Yet upon graduation, these newly minted DPTs will be expected to leave that physical therapy silo and interact seamlessly with members from various health care disciplines to form a cohesive unit dedicated to caring for the patient.
“Health care delivery is a team sport,” says Bethany Robertson, DNP, CNM, clinical assistant professor in the Nell Hodgson Woodruff School of Nursing. “Doctors, nurses, physical therapists and others all train independently, but at the end of the day they have to all come together as a team to deliver the best possible care for the patient.”

To prepare students for that day, Emory brings students from all the clinical health science disciplines together twice during their academic career for Interprofessional Team Training Days (ITTDs). Shortly after they begin their studies and again before they graduate, students from the programs of physical therapy, medicine, nursing, physician assistant, medical imaging and anesthesia assistant come together. The goal – to teach these future health care providers how to communicate efficiently and effectively within a team.

“We teach different communication strategies and skills through lectures and role-playing,” says Beth Davis, PT, DPT, MBA, assistant professor of rehabilitation medicine and a member of the Emory Interprofessional Team Training Planning Team. “For example, if you are not the team leader but you notice a problem, how do you make others on the team aware of it? How do you convey patient information efficiently? How can you be very succinct yet also courteous and respectful to others on the team?”

These “soft” skills may seem unworthy of valuable class time, but in reality they can be as critical as “hard” clinical skills. “Just ask a clinician who has been practicing for 20 years,” says Robertson. “They’ve likely seen that their individual clinical expertise is not enough – it’s the entire interprofessional team that ensures the patient’s outcome.”

Indeed, a 1999 Institute of Medicine report, “To Err is Human,” brought the importance of healthcare teamwork into the national spotlight. The report estimated that 44,000 to 98,000 Americans die in hospitals each year because of medical errors. For every mistake that ends in death, there are countless more with less severe outcomes. Many of these errors stemmed from a breakdown in communication somewhere along the care provider chain.

That report led to a push to improve the collaboration and communication within the health care team. As part of that push, the School of Nursing secured funding from the Robert Woods Johnson Foundation to mount an interprofessional collaboration. Robertson, who was co-PI for the foundation proposal, partnered with Douglas Ander, professor of Emergency Medicine and director of Emory’s Center for Experiential Learning, to create the first ITTD. In 2007, 213 medical and nursing students participated in a curriculum based on TeamSTEPPS team-training protocol, a program developed by the Agency for Health Care Research and Quality and the Department of Defense, which aims to improve patient safety and improve communication and teamwork skills among health care professionals.

The program was so successful that they decided to include the other health professions programs, and in 2008 all the clinical health care disciplines began to participate. Each student attends a session early in their first year and again near their graduation.

The first session, held in the fall, is an introduction to the concept of team communication. “We start off talking about why communication and teamwork is important and the safety implications for patients,” says Ander. “We also introduce each discipline. Most students have no idea what other the other health specialties are and how they interact.”

After the introductory lecture, students are broken...
into small groups of 10 students from various disciplines facilitated by two inter-disciplinary professionals. They start out with an ice-breaker exercise – making a paper chain out of construction paper as a team, first being able to use both arms and speak to each other and then using only one arm and not speaking to each other.

The students then participate in several role-playing scenarios, one involving patient care and one not. “In our group, someone had to pretend to be stuck in traffic and late for an important conference, and someone else was the leader of the conference,” says Jennifer Lee Ko, a second-year DPT student who participated last year. “The person stuck in traffic had to call the leader and they had a conversation. In another session we had to convey patient information over the phone to another team member. Some groups went back and forth with that a lot, but in the real world physicians don’t have that much time to stay on the phone, so you have to say what you need to say very efficiently.”

Students attend their second ITTD in the spring prior to graduation. “Students often come into the second session a lot more interested in the topic,” says Ainsley Rossi, PT, DPT, OCS, who facilitates the sessions. “In the first year, it’s all very theoretical. But by their second session, they’ve been out on their clinical rotations, and they’ve seen how critical good communication really is. They may have even witnessed a communication breakdown and its repercussions.”

The second session, again through lectures and role-plays, delves into the role of the team leader, conflict management and patient-centered care. “We set up a scenario where someone disagrees with the doctor and needs to speak out,” says Ander. “The key to reducing medical errors is empowering everyone to speak and to be heard.”

Jill Cannoy, DPT ‘12, found the session eye-opening. “It was interesting to see what the different professions would do in different settings, and it was particularly helpful to see that there is not necessarily one right answer,” says Cannoy.

“The key to reducing medical errors is empowering everyone to speak and to be heard.”

“Rather, everyone can work together to resolve an issue.”

The students aren’t the only ones to benefit from the ITTDs. “Each time we run a session, we train our facilitators beforehand,” says Davis. “I think those training sessions and the ITTDs strengthen their attitude toward team work. And they impart that to their students. This is critical for educators teaching students and clinicians working to improve patient care.”

Rossi agrees. “At the training session we have to practice the skills ourselves,” she says. “It’s a chance to interact with other professionals whom I’ve not had a lot of interaction with. There were physicians role-playing as nurses and vice versa. It made us all aware that in terms of patient care, we must all be working together cooperatively and be less concerned about our specific title or position.”

Are two days enough to teach students what they need to know about operating as part of a team? “Absolutely not!” says Robertson. “Teaching people how to function together as a team is hard work. There is a whole body of science around it. Like any other skill you have to learn, it takes time and practice. But this is a start. A very good start.”
Bridging the gap

A novel course brings together physical therapy and bioengineering students

This past Spring, three third-year DPT students, three engineering PhD students from the Georgia Institute of Technology and one Emory neuroscience PhD student came together for a first-of-its-kind course. Titled “Interfacing Engineering Technology and Rehabilitation,” the class aimed to bridge the gap between engineering theory and rehabilitation reality.

The seeds for this novel course were planted three years ago with the Physical Therapy and Society Summit (PASS) sponsored by the American Physical Therapy Association. “One of the recommendations to come out of the Summit was the need to bridge communication and collaboration between physical therapists and bioengineers,” says Steven Wolf, PhD, professor and a member of the PASS steering committee. “We felt such a collaboration should not wait until those folks are in their professional environment. Rather, it should begin in classroom.”

The concept sounds great in theory, but how do you turn it into reality? Emory may be uniquely suited for the task. Over the years, Emory has built a close collaborative tie with Georgia Tech. And the Emory DPT faculty includes a member who can speak both languages – Randy Trumbower. In addition to his master’s degree in PT, Trumbower has master's and doctoral degrees in biomedical engineering, and he has program faculty appointments in the Department of Biomedical Engineering as well as the Robotics PhD program at Georgia Tech.

Trumbower and Wolf designed the course to introduce students to the emerging trends in rehabilitation technologies. A unique feature – in addition to lectures and labs, students got to interact with actual patients, who are, after all, the real consumers of rehabilitative technologies.

For example, students met with one patient who had suffered a stroke, which affected his ability to use his arm. The students were divided up into three teams, each charged with coming up a technology to aid the patient’s rehabilitation.

“It was such a unique opportunity to collaborate with other professionals who have parallel interests but in different fields of medicine and science,” says Anita Krishnan, DPT ’12. “Everyone brought a different perspective to the table.”

Krishnan’s project partner, Ramaldo Martin, agrees. “The course helped me put the technology in perspective,” says Martin, who is in his final year in Georgia Tech’s School of Electrical and Computer Engineering PhD program. “As an engineer, I might come up with an amazing tool, but it may not end up being used because the patient may find it too difficult to use.”

This kind of conversation is exactly what Trumbower and Wolf hoped for in designing the course. “The overarching goal was to break down the inherent barriers between physical therapists and engineers,” says Trumbower. “The two groups don’t often have the opportunity to interact, and when they do, they are not sure how to communicate with each other.”

Trumbower and Wolf hope to expand the course to include more students, both at Emory and Georgia Tech and beyond. Says Wolf, “We hope to be able to use this course as a model for others to build upon.”
Orthopedic Residency

Emory DPT’s new orthopedic residency program graduated its first two students. Sara Knight, DPT ’11, and Rob Riesing, DPT ’11, completed the residency on July 31st and will sit for their orthopedic boards in March of 2013.

The establishment of the residency program follows a push for more specialized training within the physical therapy profession. “The profession in general has moved toward the doctoral level, and in the future specialties will be more and more important to overall career prospects,” says Knight. “There has been an exponential increase in physical therapy residency programs as the profession moves toward being direct access practitioners.”

The year-long residency program consisted of 40 hours per week of clinical practice, a monthly lecture course and monthly grand rounds during which the students and faculty discussed research. In addition, Knight and Riesing provided pro bono services through the South Georgia Farmworkers project (see story below), shadowed a radiologist and were actively involved in teaching orthopedic content to the second-year DPT students.

Knight plans to use her advanced orthopedic skills to practice in a general outpatient clinical practice. She was drawn to the residency as a chance to enhance her skill set. “I actually plan on practicing in a more generalized setting, but having specialized skills in orthopedics allows you to bring more treatment options to the patient,” she said.

Riesing also saw the residency as a way to ensure he provides the best care possible for his future patients. He was also eager to be among the first participants. “I thought it was great that Sara and I would be trailblazing this new program at Emory,” he said.

Kathleen Geist, PT, DPT, OCS, COMT, assistant professor and head of the orthopedic residency program, hopes to grow the program. “We would like to expand to four to seven residents in the coming years,” says Geist. “We are trying to move the application deadline for the 2013 residency to February 1. Specialized residencies are definitely the direction of the future for physical therapy.”

Service Learning

For two weekends in June, half of the second-year DPT class journeyed to South Georgia to bring treatment to farmworkers where they live and toil. For each of the past five years, students from the DPT, physician assistant and nursing schools have participated in the South Georgia Farmworker Health Project, but this past summer saw the biggest response from the DPT program ever.

“Thirty-three out of a total of 66 second-year students went,” says Sara Pullen, PT, DPT, MPH, CHES and assistant professor. “It was so exciting for me to see how dedicated this class is to treating the underserved.”

Under the supervision of Pullen and other faculty and alumni, students set up clinics that traveled to various farms and mobile home communities in Bainbridge and Valdosta. “The project started out just for farmworkers, but now because of recent legislation, we are seeing fewer farmworkers visiting the clinics. They’re afraid to come,” says Pullen. “So this year we also went to trailer home communities and a homeless shelter.”

In each location, the students come armed with a tent, two exam tables and a few bins of supplies. There is no high-tech clinic. In fact, there is usually no electricity. And the working conditions are less than ideal.

“It was pretty much what I expected – gnat infested, 100 degree temperatures and very few creature comforts,” says Michael Saunders, MA, PhD and second-year DPT student. “It may look like we don’t come with much, but actually we bring quite a toolbox – the skills we have acquired and continue to acquire in the program.”

Indeed, one of Pullen’s main goals is to show the students how much they can accomplish with very little. “It really shows students their greatest tools are their brains and their education,” says Pullen.

Second-year student Tessa Cook got that message loud and clear. “It was amazing to actually be able to use the skills I’ve been learning in class,” says Cook. “To take information you got in a lecture or a textbook and apply it to an actual patient and see it make a difference is a great feeling.”
A teacher’s teacher

Pat Nichols receives the prestigious School of Medicine Dean’s Teaching Award

Pat Nichols is considered by her colleagues to be a teacher’s teacher. Nichols, B.Sc and assistant professor, has taught physiology to Emory physical therapy students for the past 27 years. During that tenure, she has made a big footprint. “We have a lot of very good, very experienced teachers on our faculty,” says Marie Johanson, PT, PhD, OCS, associate professor and associate director of the program. “But we look at Pat as a resource for how to become better teachers.”

Apparently a lot of others agree with Johanson. Nichols recently received the Emory University School of Medicine Dean’s Teaching Award. “We have over 2,000 faculty in the school of medicine, and only seven or eight people get this award” says Zoher Kapasi, PT, PhD, MBA and director of the DPT program. “It’s very prestigious, and it’s the first time anyone from our department has gotten it. We are extremely proud of Pat.”

The laurels are well deserved, say her colleagues. “Pat has a passion and dedication to teaching and to students in an environment that has historically rewarded researchers to a greater extent,” says Johanson. “And while Pat has done some research, teaching is her focus and her calling.”

Nichols earned her degree in physiology from the University of London and has spent her entire career teaching the subject at various universities in Canada and the United States. She joined Emory in 1985 and quickly established herself as a professor to be reckoned with. Students consistently rate her physiology course as one of the most rigorous classes in the program. “I have to admit, I’m ambitious for the students,” says Nichols. “I do believe that people learn through challenging themselves. However, the students can take me up on my offer of help and support too”

Those challenges don’t stop after the physiology course since Nichols co-teaches several of the clinical courses. “Pat is a rarity in that she is not a physical therapist,” says Johanson. “She’s somebody with a lot of basic science knowledge who knows how to translate that into a clinical model. One of her amazing talents is that she is able to come in and co-teach case-based seminars. She is able to talk about the pathophysiology underlying a disease or condition in much greater depth than the typical physical therapist can. It’s a great team-taught approach to a patient problem.”

For Nichols, the team-teaching method is central to the curricular goal of integrating material. “I help the students see the relationship between the basic and clinical sciences through team teaching with my clinical colleagues” says Nichols.

Her rigor and high expectations pay off for the students. “We do student exit interviews and alumni surveys, and Pat is consistently the star,” says Kapasi. “Our students say they had the strongest background in physiology by far compared to other students they encountered in their clinical rotations. Alumni credit her with making them better physical therapists. And our clinical instructors always compliment our students on their in-depth knowledge of physiology and pathophysiology.”

Nichols was also responsible for bringing a genetics course to the physical therapy program. “We were among the first physical therapy programs in the country to offer a genetics course in the early ’90s, and that was thanks to Pat’s foresight,” says Kapasi.

After a teaching career that has spanned nearly 50 years, Nichols will begin to gradually cut back her teaching responsibilities as she eases into retirement. “I hope to have a bit more time to pursue some passions of mine that have had short shrift lately,” she says. “I would like to rescue my garden. I’m an enthusiastic tennis player. I’d like to have time for travel and reading, and I’ve started painting. There are a lot of avenues to explore.”

She’s happy to be winding down her career on such a high note as receiving the teaching award. “Teaching is very rewarding,” says Nichols. “The relationships with the students and with faculty colleagues is in many ways its own reward, but it doesn’t hurt to be acknowledged. I really do feel very honored.”
Where do physical therapy graduates go after they leave Emory? In many cases, they go on to head other physical therapy programs. Meet the Emory physical therapy alumni who have done just that:

Bob Barnhart, PT, ScDPT, PCS is the director of the physical therapy program at Concordia University Wisconsin, Mequon, WI. He got his start in the profession when he earned a certificate in physical therapy from Emory in 1979.

Barnhart spent the next 17 years in the clinical realm, including in the pediatric rehabilitation program at Vanderbilt University Medical Center in Nashville. He accepted the position of director of clinical education at East Tennessee University's newly established physical therapy program in 1996, and in 2010 he took on his current position at Concordia.

Along the way to his current post, Barnhart earned a Master's (The University of Tennessee/Knoxville) and Science Doctorate (The University of Tennessee Health Science Center, Memphis) in physical therapy. However, he says the certificate program at Emory was the most academically rigorous. “They had very high standards,” he says. “They really emphasized critical thinking and critical reading of research. Both of those skills served me very well as I worked on my master’s and doctorate and in my career.”

Stuart Binder-Macleod, PhD, PT, FAPTA, is Edward L. Ratledge Professor and chair of the Department of Physical Therapy at the University of Delaware in Newark, DE. He earned his Bachelor of Science in physical therapy in 1974 from the State University of New York at Buffalo and Master's in Medical Science in physical therapy from Emory in 1978.

After earning his MMSc, Binder-Macleod stayed on at Emory for five more years, teaching and doing research. He left in 1983 to pursue his PhD in physiology at the Medical College of Virginia in Richmond, and he joined the University of Delaware in 1987. He credits his experience at Emory for setting him on his career path. “At Emory, I learned a great deal about neuroscience, but also about education,” he says. “My years on the faculty there were an important part of my professional development.”

Meryl Roth Gersh, PT, PhD, is professor and chair of the Department of Physical Therapy of Eastern Washington University in Spokane, WA. She got her undergraduate BS in physical therapy from the State University of New York in Buffalo in 1974.

Gersh then obtained her Master's in Medical Science in physical therapy from Emory in 1978. For two years after graduation, she continued to teach in the physical therapy program and to work as a research associate.

After moving to Spokane, she worked part-time as a clinician until Eastern Washington University began an undergraduate physical therapy program. Gersh joined as a faculty member, and the program opened its doors in 1985 with 20 students and four faculty. Today the university has a DPT program with 38 students per class and nine full-time faculty. Gersh became chair of the department in 2010.

David J. Miller, PT, PhD, was a member of Emory’s 1977 graduating class in physical therapy. Today Miller is dean and professor of the School of Health Sciences and Rehabilitation Studies at Springfield College in Springfield, MA. He chaired the physical therapy department from 2003 to 2008, became interim dean in 2009 and was named dean in 2011.

Miller made several stops between Emory and Springfield. He worked at Duke University as a staff therapist and inpatient medicine coordinator and at a rehab hospital in Charlotte as a clinician. He went on to earn his Master’s of Science in biomechanics at the University of North Carolina Chapel Hill and his PhD in exercise science (now called kinesiology) at the University of Massachusetts Amherst.

Miller credits Emory with the strong foundation for his career. “Emory was a wonderful
place, not just for the opportunity to learn the basics of physical therapy,” he says. “It was just a wonderful place to learn and grow and be inspired.”

David Morrisee, PT, PhD, OCS, ATC, FAAOMPT, is professor and director of the Division of Physical Therapy in the College of Health Professions at the Medical University of South Carolina in Charleston. He earned the title of director just over a year ago, after serving as interim director for seven years.

Morrisee earned his certificate in physical therapy from Emory in 1983 and stayed in Atlanta for five more years. He studied toward a Master’s in Orthopedic Physical Therapy from Georgia State and got a PhD from MUSC, but it was his experience at Emory that really shaped his career.

“Even though at that time the practice of physical therapy was largely prescriptive – physicians would tell the therapist what to do – Emory taught us to function well independently. It was ahead of the curve in that way,” says Morrisee. “The education I got there really changed the way I look at the world, and it opened a lot of doors for me.”

Dee Schilling’s journey to her current post as chair of the Department of Physical Therapy Education at Western University of Health Sciences in Pomona, CA, has been circuitous. Schilling, PT, PhD, was a member of Emory’s second physical therapy class, earning her graduate certificate in 1976.

During her career, Schilling has worked as a physical therapist in school systems in Georgia and in Washington, as an instructor at at SUNY Upstate in Syracuse, NY, and as a rehabilitation medicine research coordinator at the Cleveland Clinic. She also earned her Master’s in Rehab Science and her collaborative PhD in rehab medicine and special education, both from the University of Washington.

In 2007, she accepted her current post as chair of the Department of Physical Therapy Education at Western University of Health Sciences. Schilling is a member of Emory’s second physical therapy class, earning her graduate certificate in 1976.

New DPT faculty

The physical therapy division welcomed three new faculty members. Kathy Lee Bishop, DPT, MS, CCS, (pictured left, above) joined the staff as an assistant professor, although she has been a familiar face in Emory DPT classrooms since 1999. That’s the year she became manager of Emory’s HeartWise and began giving lectures as a guest faculty member.

In her new role, Bishop will co-teach “General Medical Conditions” and advise students on their administrative and consultative projects on their clinicals. She remains the manager of HeartWise.

Prior to coming to Atlanta, Bishop worked at the University of Pennsylvania Medical Center in Philadelphia as a cardiopulmonary clinical specialist. She earned her MS and DPT from the Institute of Health Professions at Massachusetts General Hospital in Boston.

Trisha M. Kesar, PhD, PT, (middle) came on board in May as an assistant professor. While she will teach one course in neuroscience, research will claim most of her time. Kesar’s research goal is to develop novel gait rehabilitation interventions and strategies.

“There are very few physical therapy programs that have a strong focus on research, and Emory is one of them,” says Kesar. “That’s definitely one of the things that drew me here.”

Prior to joining Emory, Kesar was doing research at the University of Delaware, where she earned her MS and PhD degrees in biomechanics and movement science. Kesar completed her bachelors degree in physical therapy from Post Graduate Institute of Medical Education and Research, India in 2002.

Laura Zajac-Cox, PT, NCS, (right) is also no stranger in the DPT program. Although she came on board as an instructor in June, her history with Emory dates back to 1997, when she joined the Center for Rehabilitation Medicine as a clinician and began teaching as a guest lecturer. She left Emory in 2010 to join DeKalb Medical Center but returned in 2012.

In her current post, Zajac-Cox will teach neurologic rehab courses as well as practice in the faculty clinic. She will begin a transitional DPT program in January. In addition, she will spearhead the development of a neurologic residency program at Emory next year.

Zajac-Cox got her PT degree from the Medical College of Georgia.
**Research**

**Touchdown for professor-student collaboration**

It’s not every DPT student who gets published in a peer-reviewed journal. But that’s just what second year Rob West has done – almost. West and Bruce Greenfield, PT, MA (bioethics), PhD, OCS and associate professor, collaborated on an article titled “Ethical Issues in Sports Medicine: A Review and Justification for Ethical Decision Making and Reasoning” that will appear in an upcoming issue of *Sports Health*.

Greenfield was invited to submit the article by one of the journal’s associate editors because of his strong background in ethics. Greenfield’s PhD work focused on the moral practice of physical therapy, he has a master’s in bioethics and he is a faculty affiliate in the Center for Ethics.

So the journal’s choice of Greenfield to write an article on ethics in sports medicine was logical, but why bring in a then-first-year DPT student as a co-author? “I think some people were skeptical,” says Greenfield. “I thought this would be a really good teaching and learning opportunity.”

Greenfield created an outline of how he wanted the paper to flow and then charged West with searching the literature to find all articles that explored issues faced by health care professionals working in team sports. West then wrote an abstract of each pertinent document, which Greenfield used to develop the paper.

In addition to asking West to review each section of the paper, Greenfield allowed him to develop and write the implications section that would provide concrete suggestions to address some of the ethical issues identified.

Overall, Greenfield is satisfied with the experience of co-authoring a paper with a student. “I think this is a good precedent and a good model,” he says. “We should do more of it to try to nurture passion in our students and give them opportunities like this when they arise.”

West couldn’t agree more. “It was a tremendous learning opportunity for me, especially working with someone like Dr. Greenfield who has so much expertise in ethics,” says West. “It was a very generous thing for him to do, and I’m very grateful.”

**Ethics in Sports Medicine**

Health care professionals are routinely confronted by ethical issues, but those working within sports medicine face unique pressures. After reviewing the literature addressing sports medicine, Greenfield and West defined the overarching problem faced by health care professionals as an inherent conflict of interest. What’s best for the athlete may not be what’s best for the team. Who is the health care provider obligated to serve? In concept, the answer is obvious – the athlete. But in reality health care professionals may be pressured to serve the interest of the team.

This conflict of interest puts the team physician in another tight spot regarding the principles of doctor-patient confidentiality. To what extent does the team management and related stakeholders have a right to medical information about the athlete?

Greenfield and West developed suggestions to handle the inevitable ethical issue, including clear rules governing relationships between medical practitioners and athletic teams.

And they suggested that sports medicine fellowship programs include an ethics component. “At the very least, a sports medicine professional needs to have some understanding of the ethical issues they’ll face and have some level of training in ethical decision making,” says Greenfield. “In fact, in sports medicine clinical decision-making and ethical decision-making need to go hand-in-hand.”
Class of 2012  Where are they now?

**State**
- Georgia: 48.7%
- North Carolina: 7.7%
- South Carolina: 7.7%
- Illinois: 5.1%
- Washington DC: 5.1%
- Oregon: 5.1%
- Pennsylvania: 2.6%
- New Jersey: 2.6%
- Tennessee: 2.6%
- Indiana: 2.6%
- Maryland: 2.6%
- Virginia: 2.6%
- Kentucky: 2.6%
- Colorado: 2.6%

**PT career practice setting**
- Outpatient clinic: 61.5%
- Acute care: 10.3%
- Rehab/Sub acute rehab: 17.9%
- Research center: 5.1%
- Wellness/prevention/sports/fitness: 2.6%
- Other: 2.6%
Phoneathon

The Emory Division of Physical Therapy’s star is rising. It recently climbed to the No. 7 spot in the U.S. News & World Report rankings of physical therapy programs, up from the 11th slot ranked previously.

To continue along this trajectory, we need to be able to attract the best and brightest students. To do this, we must be able to compete with other programs in offering scholarship funds to offset the high cost of quality education. We have established the Emory Physical Therapy Scholarship Fund to raise these needed funds.

We’ll be reaching out to all alumni on Monday, Oct. 28 in our annual phone-a-thon. Expect a call between 6:30 p.m. and 8:30 p.m. EST from a current student asking for your contribution. Our goal this year is to raise $25,000 with 100% participation. Please consider donating any amount that you can.

Your gift will go directly to our students to help offset their educational costs and reduce their debt loads. These students are the health care leaders of tomorrow, and your support will ensure that they are able to receive the same first-class education you received.

If you will be unable to receive the phone-a-thon call, you can also give by returning the enclosed envelope or going to emory.edu/give and select “Health Professions” from the first menu, “Physical Therapy” from the second menu, and continue to follow the online form. Please make your donation to the Emory Physical Therapy Scholarship Fund and help ensure our division continues on its upward path.

DPT Scholarship Fund Donors

We’d like the thank the alumni who have already generously made donations to our scholarship fund!

Dr. Douglas Grant Andrews II
Dr. Stuart A. Binder-Macleod
Dr. Carrie Elizabeth Black
Dr. Sarah Richardson Blanton
Dr. Amanda McGinnis Chiagouris
Beth C. Ciche
Dr. Beth Parker Davis
Lisa A. Diller
Dr. Brett Louis Eberle
Dr. Monica Mone Ferguson
Norma Fraser
Dr. John Henry Goodrich
Dr. Cecilia Louise Graham
Dr. Lauren Greenfeld

Dr. Gail Erwin Hale
Dr. Rebecca Lee Halperin
Dr. Shirley Kate Hamilton
Roline Hamilton McGinnis
Leslie Reaver Heinrich
Amanda Long Jackson
Dr. Marie A. Johanson
Louise Mallet Kelley
Dr. Emily Marie Lanham
Nancy Lehrer
Dr. Brian Joseph Maloney
Elizabeth Elliott O’Donoghue
Dr. Stacey Jo Pagorek
Sandra Kay Paxton Thompson

Dr. Lisa Marie Resutek
Dr. William Lee Robert
Dr. Elizabeth Ross
Christine Gillespie Tolerico
Madeline L. Versteeg
Karen A. Vespa Under
Lois B. Wolf
Proactive Physical Therapy
Wells Fargo Foundation
Gail “Cookie” Freidhoff-Bohman 81MPT retired from the University of Kentucky Sports Physical Therapy Oct. 1, 2010. She now works two days a week at a Lexington private practice clinic specializing in women’s health issues.

Stacey Pagorek 05DPT and Freidhoff-Bohman attended a weekend in Valdosta as part of the South Georgia Farmworkers Project.

Amelia E. Haselden 97MMSc is the primary physical therapist for Cardiology/Cardiothoracic Surgery at Emory University Hospital.

Meredith Katherine Ireland 10DPT obtained her Orthopedic Certified Specialist and is a physical therapist at SportsCare Physical Therapy.

Karen Drilling 80PT is a Senior Leader in the new Rehabilitation Services Department at HCA's Spotsylvania Regional Medical Center in Fredericksburg, VA.

Charles Thomas Brocato 93MPT is the director of services for Apalachicola Physical Therapy, Carrabelle Physical Therapy and Apalachicola Wellness. He is a service dog trainer for Lucky Dog Farm.

Calvin Hung 00MPT is the director of physical therapy and the Wheelchair Seating Clinic at Carolinas Rehabilitation in Charlotte, NC. In 2006, he obtained his Master’s in Healthcare Administration and, recently, obtained the credential of Fellow from the American College of Healthcare Executives.

Barbara J. Baker 83MPT received her PhD in Interdisciplinary Health Sciences. She is currently a professor in the physical therapy department at Grand Valley State University in Grand Rapids, MI.

Holly A. Bonasera 93MPT is the owner of AwareCare, a private practice, and also a part-time physical therapist at a private manual therapy clinic in Council Bluffs, IA. She became a certified feldenkrais practitioner (GCFP) in 2003.

Stephanie Wong Ewing 09DPT was selected to be the PT Resident for the upcoming year at Children’s Healthcare of Atlanta. She will complete her Pediatric Residency Program in August 2013.

James A. “JAK” Korte 84MPT is director of Rehab Services at Russell Medical Center in Alexander City, AL.

Spencer Lasky 10DPT is a clinic director with Benchmark/Rehab South Physical Therapy and a board certified orthopedic clinical specialist (OCS).

Marc David Cavallino 01MPT is owner/partner of ISR Physical Therapy in New Orleans. He was awarded credentialing through McKenzie Institute in Mechanical Diagnosis and Treatment of Spine in 2011 and an OCS through APTA 2004.

David Komeiji 86MMSc is currently working as a school based PT for Estacada School District, Estacada Oregon. He has served as co-chair for state-wide Regional Program-Severe Orthopedic Impairment work group, Oregon Department of Education.

Elizabeth Granger Bryant 08DPT obtained her PCS and is a pediatric physical therapist for Therapy 2000 in Dallas, TX. She also serves as a lead mentor for High Risk Infants and NICU “graduates.”

Julie Granger Jesse 09DPT obtained her SCS and works for Back 2 Motion in Atlanta.

Mike Ellis 00MPT 03DPT is an assistant professor at Northwestern University Department of Physical Therapy and Human Movement Sciences. He recently received a grant from the National Institute of Disability and Rehabilitation Research.

Rebecca Halperin Grant 09DPT is a certified bi-lingual physical therapist in English and Spanish and a candidate for APTA Pediatric Certified Specialist.

Jessica Drummond 99MPT works in women’s health nutrition and health coaching in Fairfield, CT. She was certified as a health coach by The Institute for Integrative Nutrition in NYC. She is currently enrolled in the doctoral program at Hawthorne University in holistic nutrition.

Karen Gurucharri Speropulos 98MPT received her PCS four years ago and currently practices at Niswonger Children’s Hospital in Johnson City, TN.

Janet Laura Kindschuh 03BS 06DPT is a physical therapist with Physiotherapy Associates in Alpharetta, GA. She received the Physical Therapy Associates 2010 Peer Excellence Award.
PHONE-A-THON 2012

Hello! It’s Emory DPT calling!

Our annual phone-a-thon will be Monday, Oct. 28 between 6:30 p.m. – 8:30 p.m. EST.

Proceeds go to support the newly established Emory Physical Therapy Scholarship Fund. Please help us continue to attract the brightest students. Our goal is 100% participation. We’d like to count on your support!