Rural Health Care

PROVIDER SPOTLIGHT

Tyler Hughes, M.D.

McPherson Medical & Surgical Associates at McPherson Memorial Hospital

McPherson, Kansas

Written by Regina Roths

Tyler Hughes, M.D., knows the role of the surgeon in rural communities can be a daunting task: long hours, professional isolation, and maintaining the breadth of knowledge needed to handle a wide range of illnesses and emergencies are just a few of the challenges a rural health care provider faces daily.

But he also knows the rewards far outweigh any difficulties. “Rural practice allows me to experience the full impact of what I do,” said Hughes. “I see the results of my work every day, and with each year the sense of accomplishment increases. Patients are people and not just another operation on the schedule. I have influence over the course of medical care and can help guide local medical policy for the betterment of the community.”

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A native of Dallas, Texas, where he graduated from medical school, completed his residency and practiced for 15 years, Hughes moved his family to McPherson, Kan. in 1995 to get back to his calling of working with patients rather than taking an offer of administrator over a large physician group in Texas. “It was kind of love at first sight,” he recalled of his visit to McPherson. “It suddenly dawned on me how I could have a more rewarding career and this was a community that I thought I would fit well in.”

Since then, Hughes has gone above and beyond the call, using his energy and talents to grow interest in rural surgery as a viable career choice. Hughes has trained more than 80 medical students, and allowed dozens of area youngsters to shadow him during the working day. “I particularly like teaching medical students because they are at a stage of training in which everything they see is new and the excitement they feel about becoming real doctors is very satisfying,” he said.

Hughes added that, while teaching helps hone his own skills, he also feels a certain obligation to share his knowledge. “I recognize that it is the moral duty of a physician to give back to the profession. I have no doubt that my teachers and mentors sacrificed time and effort to bring me to the level of proficiency necessary to practice surgery. If we surgeons do not do the same, who will follow those like me and how else will they be taught the values necessary to care for patients well?”

In part for his efforts to promote rural practice, Hughes was named the National Rural Health Association’s 2012 Rural Health Practitioner of the Year.
Year. “My award from the NRHA was a total shock,” he said. “I am certainly honored beyond belief. My award recognizes that surgeons are very much needed in the rural environment and are one of the primary medical assets to a community.”

Hughes also fosters interest in the profession on a national scale through an online community he helped redesign and upgrade on the American College of Surgeons website. “I thought the web portal was a way to bring people together, because it’s so easy, if you’re in an urban practice, to get comfortable with what you’ve always done,” said Hughes. “But medicine just keeps moving at increasing speeds, and it’s so easy to get out of touch with what is current. I’ve felt it as a rural surgeon and I figured if I was feeling it, other people did, too.”

Unexpectedly, the site has also become something of a rallying point for a growing movement to replace a generation of retiring rural surgeons. “There is a real concern about repopulating rural areas with well-trained surgeons, because if all that work were to suddenly shift to every major center, they’d be so overloaded, it’d be a real crisis,” said Hughes.

Despite his busy schedule, Hughes still manages to find time to serve a six-year term as at-large director of the American Board of Surgery, a volunteer role in which he works on certification and recertification standards and exams.

Most of this volunteer work is performed at home in McPherson, which Hughes said couldn’t have been a better place for a life well spent with his wife, Mary Henry Hughes, and to raise two grown children, Dorothy Hughes, chief lobbyist for the University of Kansas Hospital, and Tyler Junior, an electrical engineer at Burns and McDonnell in Kansas City. “It’s a wonderful environment for families and provides excellent services to its older population,” he said, adding that the commute to work is about three minutes. “I don’t know what the cost of a gallon of gas is, I don’t use enough to impact my lifestyle.”

Other plusses of Hughes’ practice include low cost of living and doing business. “Kansas is a pretty favorable state in terms of malpractice rates, and a lot of rural states are like that, because rural patients are not terribly litigious. They know you as a person, they know you’re trying to do your best,” said Hughes.

Unfortunately, one of the hazards of rural practice stems from one of the things that make small-town living great, said Hughes. “The biggest emotional component of rural surgery is, every time you’re called to the emergency room, while you’re interested in the case and you want to help, you sure don’t want to find out it’s your best friend, or one of your friend’s children, because keeping that detached, clinical focus, is so important and yet so difficult in our little microenvironment.”

While Hughes is careful to note that a rural practice may not be the career for someone concerned with netting huge sums of money, he is quick to add that the rewards for an enthusiastic idealistic such as himself are many. “There’s a myth that rural practice is terribly difficult and underpaid,” said Hughes. “The truth is that if one seeks a broad-based practice that challenges one’s skills and rewards them every day, rural practice is the ideal environment. You get to know your staff and your patients very well. They become like an extended family, making life extremely rewarding.”

Tyler Hughes, M.D., and his partner, Clay Fetsch, M.D., perform a wide range of surgeries at McPherson Hospital, including trauma, emergency vascular issues, thyroid and minor orthopedic surgeries, some gynecologic surgery, and minimally invasive techniques for abdomen and chest.