In July 2013 we welcomed a third class of medical students to the Salina campus — the Class of 2017. It also marked the beginning of clinical clerkships for our first class of students — the Class of 2015. This summer, we will welcome eight members of the Class of 2018, bringing our campus to a full complement of 32 students. In addition to a growing student body we have added a host of new volunteer faculty members.

During the past six months, third year students have completed required clinical clerkships in family medicine, internal medicine, surgery, pediatrics, ob-gyn, neurology, psychiatry, and geriatrics. I am extremely pleased by how well the Salina clinical faculty embraced the medical education process, how smoothly the clerkships operated, and the quality of our campus.

Prospective medical students visit Salina for interviews

Strong applicants to the M.D. program at the University of School of Medicine are invited for in-person interviews. For some of the students who aspire to be a part of the Class of 2018, the interviews took place in Salina.

Thirty-seven applicants interviewed at the KU School of Medicine–Salina on Dec. 2 and 3. The prospective students sat for two 30-minute interviews, learned about the curriculum and financial aid, and had lunch and a campus tour with current medical students.

An applicant who interviews in Salina does not necessarily attend the Salina campus if he or she is admitted into the M.D. program. A prospective student who prefers to attend the Kansas City or Wichita campus may interview in Salina because it is near their hometown or undergraduate institution.

“We’re interviewing for the School of Medicine admissions process,” Sandra McCurdy, associate dean of admissions, says. “The campus assignments come later.”

Still, students who interview in Salina because of the convenience are often impressed by what they see and hear. “I have had students who said, ‘I really hadn't thought about the Salina campus,’” McCurdy says.

In 2010, the first year prospective students interviewed in Salina, the campus was still taking shape. At the time, the Braddick Building, the primary home of the KU School of Medicine–Salina, was being transformed from a former nursing dormitory at the Salina Regional Health Center into a modern medical education campus. “Braddick was still being renovated,” McCurdy remembers. “I had to encourage students to think big.”
and how well the Salina students performed on the first six months of their clerkships. I owe a great deal of gratitude to Dr. Scott Owings, associate director for the clinical experiences, and Lucy Kollhoff, our clerkship coordinator, for their tireless work in making the first clerkship experiences successful. It is also important to recognize the efforts of the assistant clerkship directors in Salina who have helped organize and supervise outstanding clinical experiences for our students.

It seems like only yesterday we welcomed our first eight students to our new rural branch campus, and it won’t be long before we celebrate their graduation from medical school and usher them off to residency programs. During the next 14 months these students will remain busy, completing the remainder of their required Year 3 clerkships, Year 4 required clerkships (critical care, health of the public, a sub-internship, and a rural preceptorship), 12-16 weeks of electives, and taking the USMLE Step 2 Clinical Knowledge and Clinical Skills Exams. If this wasn’t enough, they need to decide on a residency discipline, register for the National Resident Matching Program, interview for residency positions, and await The Match, the day in March 2015 when they learn where they will work after medical school.

After two-and-a-half years of operation, what have we learned about creating a rural medical school campus? What can we share with other medical schools wishing to reproduce the Salina experience? I came up with a list of nine key elements for developing and delivering a medical education in Salina: (1) the need for unwavering support from the main campus; (2) early creation of a timeline for completion of facilities, recruitment of faculty, and implementation of educational programs and student support services; (3) recruitment of an enthusiastic core group of local faculty; (4) securing adequate financial resources; (5) identifying required technology resources; (6) cultivating strong support from the local hospital (Salina Regional Health Center); (7) developing a collaborative relationship with the Smoky Hill Family Practice Residency Program; (8) avoiding duplication of support services best handled on the main campus (e.g., financial aid and registrar services); and (9) recognition of the need for members of our small administrative faculty and staff to be able to multi-task.

Due to the hard work of many individuals, the strong support of the main campus in Kansas City and our sister campus in Wichita, and the financial assistance of Salina Regional Health Center, several foundations, and multiple individuals, we are off to a great start. Thanks to all who have contributed to our success.
Faculty Spotlight: Alisa Bridge, M.D.

Entering medical school, Alisa Bridge, M.D., did not think she would become a pediatrician. But during her rotation through obstetrics and gynecology, she found that her attention would drift away from the mother once the baby was born. “I was more interested in going with the baby than delivering a placenta or stitching up an episiotomy or any of that stuff,” Bridge says. “I always wanted to go to the infant warmer and stay with the baby.”

As a pediatrician, Bridge enjoys the opportunity to teach children and parents about health, development and preventive medicine. “Children have very few self-inflicted illnesses,” she says. “We don’t do that until we are adults and pick up bad habits. They’re very teachable.”

Bridge’s teaching goes beyond her patients. On any given day, she may conduct rounds with a resident or allow a high school student to shadow her. In addition to serving as assistant clerkship director, she advises and mentors Salina medical students during their first and second years. Bridge says he likes to help the students fill in the gaps in their medical education. “Tell me what you know and what you don’t know,” she tells them.

Why she enjoys teaching: It makes the days go faster. When you think, ‘Oh, gosh, if I see another case of rotavirus this week I might go have to lock myself in a padded room,’ you remember that the students may be seeing a case for the first time.

On the progress the medical students are making: They’re learning so quickly. It’s good for them. You see 10 of the same type of patient in a week, they’ve got it.

One lesson she likes to share with students: How do you hold the otoscope so that if the child moves you’re not poking them or scratching them. It’s different than if you exam an adult. Adults don’t jump around on you. Two-year-olds do. It is fun to think of all those little tricks that I learned along the way and pass them to somebody else.

Student Spotlight: Eric Easey

First-year student Eric Easey took a nontraditional path to medical school. He worked as a science teacher and in hospital administration before matriculating to the KU School of Medicine–Salina.

Easey, 33, took a pre-med track as an undergraduate at the University of South Florida. But with marriage on the horizon, he worried about the demands medical school would place on a young marriage. So he became an eighth-grade science teacher.

When he and his wife, Maidellyn, talked about having children, they decided it would be too difficult for her stay at home while he earned a teacher’s salary. He obtained a master’s degree in business and went into hospital administration.

Easey’s career took the family from Florida to the Midwest. He was working at a hospital in Minneapolis, Kansas, when he decided that his true calling was working on the provider side of health care. For one thing, becoming a physician would better enable him to do the missionary work he hoped to do. “I was looking around, and I really didn’t have way of doing missions work as a hospital administrator,” he says.

He spent six weeks in intense study preparing for the Medical College Admissions Test. He did well on the test, applied to KU and is now able to apply all that he has learned to his medical education. In addition to his business background, he serves in the Air National Guard as a health care administrator.

“I think my experience lends itself well to understanding the management side of medicine,” he says. “I have had the benefit of working with physicians both in the military and on the civilian side. Having that close connection with practitioners, you pick up on some of the medical lingo.”

Family. Wife Maidellyn and 7-year-old twin boys, Azariah and Jeremiah

Favorite module: Cardiopulmonary. It is the first module that feels like you are studying medicine as opposed to the basic sciences.

Why you wanted to attend the Salina campus: It was my first choice because my family and I are not big city people, and Salina was within driving distance from my house.

What you like about being a Salina student: One of the best parts about the Salina campus is that you know the names of every student from every year and the names of all the local faculty. It feels a lot more like a community than it does a college campus.
Prospective medical students visit Salina for interview

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The prospective students who visited in December did not have to rely on their imaginations. In addition to the classrooms, the Braddick Building has clinical skills labs, an anatomy lab, a testing center, study rooms and a student lounge. Today, 24 students attend the KU School of Medicine–Salina. The campus will reach full enrollment in July, when the Class of 2018 begins its medical education. The inaugural class graduates in 2015.

William Cathcart-Rake, M.D, the director of the Salina campus, and full-time faculty members Scott Owings, M.D., and Michael Robinson, Ph.D., conducted interviews with some of the prospective students in December. Community physicians also participated. Charles Allred, M.D.; Christopher Graber, M.D.; Brian Smith, M.D.; and Keir Swisher, D.O., volunteered, along with Leah Peterson, M.D., a resident training in Salina, and Julianne Schwerdtfager, a fourth-year medical student in Kansas City.

Robinson and Allred are also members of the selection committee, which reviews and votes on each applicant. Allred, a family physician in Salina and 1978 graduate of the KU School of Medicine–Wichita, says he has not forgotten how the stressful the process can be for applicants.

“I remember what it was like to apply to medical school,” he says. “I remember thinking, ‘What if I don’t get in. What am I going to do? I will be a failure.’ For people in that age group, it is a big deal. I take that seriously.”

Allred has served on the admissions committee since 2007, when the Salina campus did not yet exist. “I’m a proponent for the Salina campus,” he says. “There is a maldistribution of physicians in the state of Kansas, and there has been for a long, long time. The more you can broaden the base of medical education, the more likely it is that you might be able to settle in a place other than a metropolitan area.”

The admissions office received more than 3,300 applications to the join the M.D. class that will graduate in 2018. Priority consideration is given to Kansas residents. McCurdy expected that 600 students will be interviewed by Feb. 14, the final date. Notifications are sent in March. Students who opted for the early decision program received their notification letters last fall.

The incoming M.D. class will consist of 211 students. They will attend campuses varying in size and the dates they were established. But as McCurdy notes: “It’s one medical school, one curriculum.”

McCurdy invites community physicians interested in serving as interviewers to contact her at 913-588-5283 or smccurdy@kumc.edu.