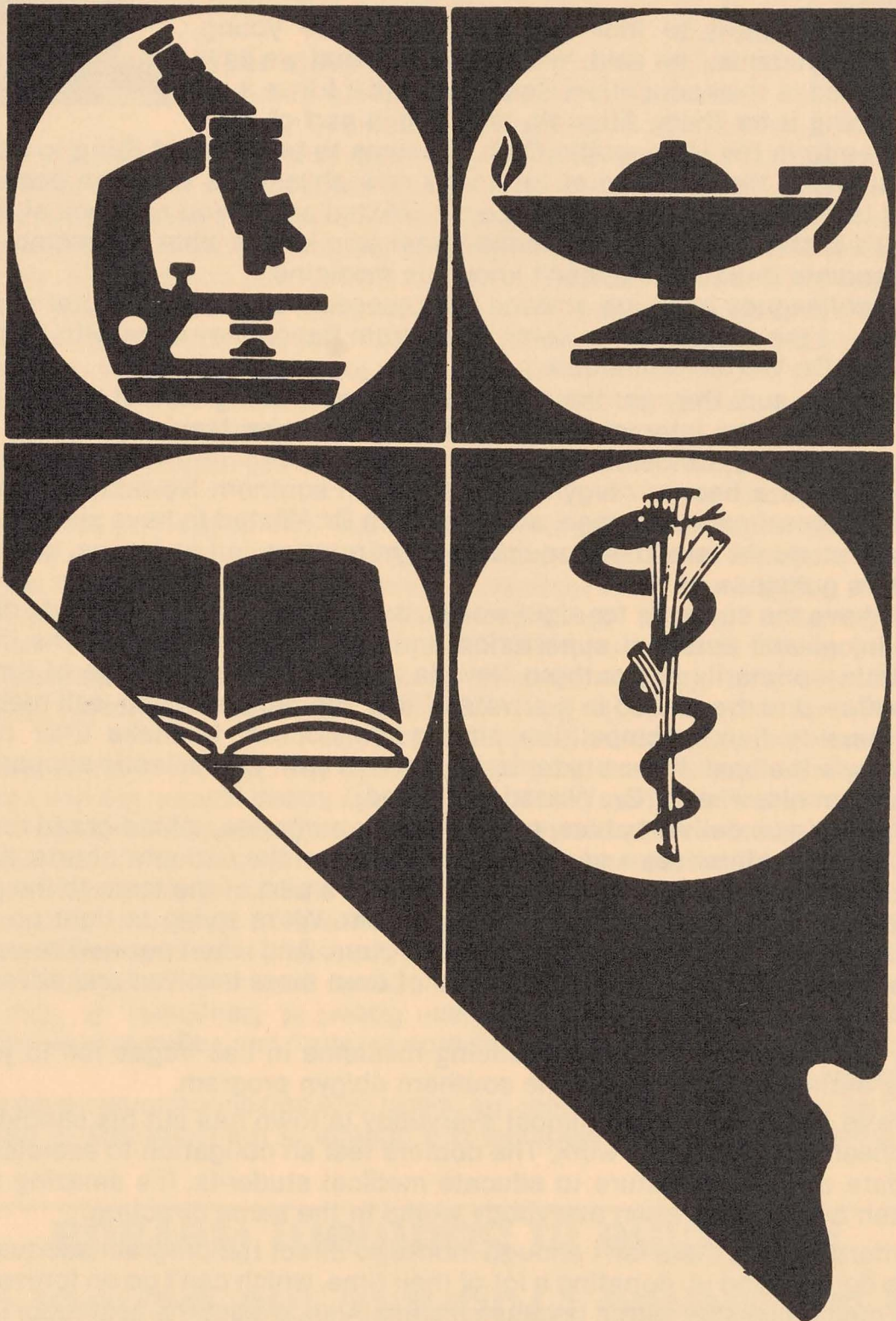


Health News

School of Medicine
University of Nevada-Reno

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VII #1



New Dean for Medical School

Robert M. Daugherty, Jr., M.D., Ph.D., a physiologist and internist, was named dean of the University of Nevada-Reno's School of Medicine in December by the university system's Board of Regents.

Daugherty comes to Reno from the Indiana University School of Medicine, where he was associate dean and director of continuing medical education. He also served as a professor in the departments of physiology and internal medicine.

The new dean was selected from among 65 candidates who applied for the nationally advertised position, vacated in October 1979 when Dr. Thomas Scully resigned because of ill health. Dr. Ernest L. Mazzaferri, chairman of the department of internal medicine, served as acting dean during the 14-month selection process.

Daugherty has been in Reno part-time during January, February and March and will assume his responsibilities full-time in April.

The new dean is a strong believer in community based medical schools which, he says, were conceived in the 1960s as part of the Great Society era. He feels that training students in community hospitals and agencies gives them a "real life look" at the practice of medicine.

Much of Daugherty's early career was spent at the College of Human Medicine at Michigan State University, the first community based school in the country. He is well versed in the logistics of designing training programs in hospitals and doctors' offices and is cognizant and unafraid of traditionally strained relationships between medical schools and community doctors.

The secret of success is patience, he believes. "There is a natural union to occur. We in medical schools are experts in medical education. The community doctors are experts in practice. It's a perfect coupling of talents."

Daugherty has chosen medical education "not by accident, but through concentrated effort," he says.

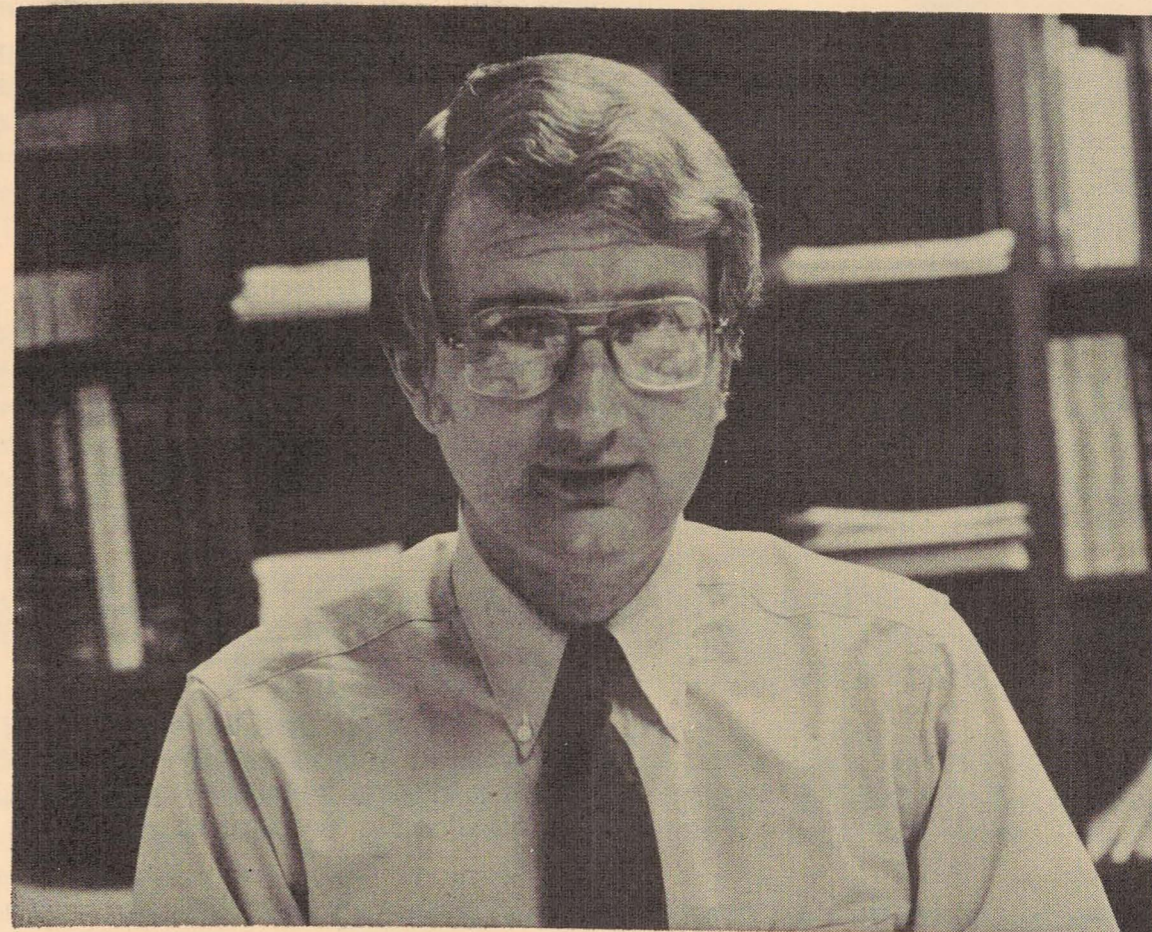
"I can be most creative as an administrator. My excitement comes from bringing people together and creating something. Enjoying that activity makes a dean a good dean."

Daugherty was hired by the University of Wyoming in 1976 to form a new medical school. After he recruited the beginnings of a faculty and outlined a budget, the Wyoming Legislature denied funding for the school. However, Daugherty says he's "undaunted" by the experience and is looking forward to working with the Nevada Legislature.

"In Wyoming, I gained an understanding of the political process and learned that good people *do* make a difference in government. The outcome was disappointing, but the lesson was invaluable," he concludes.

A native of Kansas, Daugherty received his M.D. in 1960 from the Kansas University School of Medicine in Kansas City. He was a resident in internal medicine at the University of Oklahoma Medical Center in Oklahoma City and later earned both a master's and a Ph.D. in physiology at Oklahoma. He also served as a post-doctoral fellow at the National Institutes of Health, the government's biomedical research agencies in Bethesda, Md.

Daugherty's many professional affiliations include the American Heart Association, the American Federation for Clinical Research, the New York Academy of Science, the American Physiological Society and the American Medical Association.



The new dean has given national seminars for the Association of American Medical Colleges, a Washington-based accrediting and coordinating body for the nation's medical schools; has been involved in national smoking and health programs; and served on a national committee for high blood pressure education programs.

Daugherty's numerous publications deal mainly with his research on the vascular system; cerebral circulation; and the screening, detection and follow-up of hypertension. His research has been funded by the National Institutes of Health, the Michigan Heart Association and Pfizer Laboratories.

Former acting dean Mazzaferri said, "Our committee, headed by Dr. John Chappel, spent many difficult hours choosing for Nevada the best possible candidate for dean. I feel—and our faculty feels—that we have selected an outstanding, nationally recognized educator who will bring to the school and to Nevada high standards in medical education."

Daugherty's wife, Sandra, will accompany him to Nevada. She is also an M.D. and Ph.D. with particular interests in epidemiology, preventive medicine and public health. Their three children, Robin, Allison and Chris, will all be in college next year.

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A Statewide Program: the School of Medicine in Southern Nevada

Although the School of Medicine is a college of the University of Nevada-Reno, its mandate is to help meet the health care and educational needs of the statewide community.

"To accomplish this, we have programs in Reno, Las Vegas and throughout Nevada's rural communities," said Dean Robert M. Daugherty, Jr. "Our first- and second-year students study their basic sciences (physiology, pharmacology, microbiology, biochemistry, anatomy and pathology) at our facilities on the UNR campus. When they're ready to study clinical medicine (pediatrics, internal medicine, family medicine, surgery, obstetrics/gynecology and psychiatry), we take advantage of facilities all over the state, utilizing community doctors and hospitals to help us in our training programs.

"This is what constitutes being a community based school. We don't have a university hospital and we don't want or need one. We use already existing, quality medical facilities as teaching hospitals.

Daugherty explained, "In Reno, we have affiliation agreements with St. Mary's Hospital, Washoe Medical Center, the Veterans Administration Medical Center and several small, private agencies. In Las Vegas, we work with Southern Nevada Memorial Hospital, Sunrise Hospital, Women's Hospital and Rose de Lima Hospital in Henderson. In the rural areas, we have doctors in almost every community who take our students into their practices to teach them not only medicine, but also the joys of life and practice in a small community.

"When our students graduate, they are not only well-trained physicians, but also well informed about Nevada," the dean professed.

This is the story of our southern Nevada programs:

Supported by hospital administrators and local physicians, the clinical programs of the University of Nevada-Reno School of Medicine are flourishing in southern Nevada. Third- and fourth-year students take required and elective hospital experiences in internal medicine, surgery and obstetrics/gynecology.

Medical residents, who have completed medical school and are now doing postgraduate work in a specialty area, are involved in patient care and medical student education. First-, second- and third-year residents in internal medicine are currently in place and residents in surgery and obstetrics/gynecology will begin training at affiliated hospitals programs in July.

Community doctors have opened their doors and give generously of their time, talent and energy to help turn eager students and residents into quality practicing physicians.

"Nearly 212—or 20 percent—of the active, practicing doctors licensed in Nevada help us with our educational mission," Dr. Daugherty interjected. "A few are paid as division directors and program overseers, but the majority are volunteers. These include 73 physicians from Las Vegas, with 99 in Reno and the remainder scattered in our outlying areas."

The bulk of the medical school's training programs in Las Vegas take place at Southern Nevada Memorial Hospital (SNMH), a public, regional medical center founded in 1931. Its staff consists of nearly 300 area physicians who provide services ranging from outpatient clinics to open heart surgery, burn care, rehabilitation and poison control.

SNMH is the largest teaching hospital in the south and currently boasts of 17 Nevada medical residents who assist in 24-hour-a-day patient care. In 1979, the hospital added an educational-medical center which houses educational facilities, clinical and business offices and an expanded library, which serves students and residents as well as the hospital's medical staff. (With 217 journal subscriptions, nearly 5,000 bound journals, almost 3,000 textbooks and an audiovisual collection, the library is the largest in Nevada outside the Savitt Medical Library at UNR. The staff will do computerized bibliographic searches, make interlibrary loan requests and provide photocopying facilities.)

Dr. William G. Wixted, Las Vegas vice chairman for obstetrics/gynecology, says that the quality of medical care in Las Vegas is much improved because of the presence of the medical school. Teaching doctors make better practicing physicians, he explained. With students "constantly looking over your shoulder," you're "reminded immediately" if you don't think something all the way through.

"We don't want to look like fools to these young, idealistic students," he said. "We like to feel that we have contributed to their education. Somebody did it for us, now we're doing it for them. After all, teaching is part of what we agree to in the Hippocratic Oath. It seems to be the right thing to do."

Addressing the question of too many new physicians being an economic threat to doctors already in practice, Dr. Wixted said, "You can look at it this way: it's better to have an economic threat who knows what he's doing, than an economic threat who doesn't know his medicine.

"My colleagues and I are amazed—impressed—with the character and the industry of the students who come down from Reno. They learn with amazing rapidity," Dr. Wixted continued.

"We make sure they get the feeling that *they're* taking care of the patients. They wouldn't be interested in the medicine we're teaching if they saw themselves as bystanders."

Because of a heavier ob/gyn patient load in southern Nevada, Dr. George Furman, department chairman, arranged with Dr. Wixted to have all third-year medical students take their required ob/gyn rotation in Las Vegas, under Dr. Wixted's guidance.

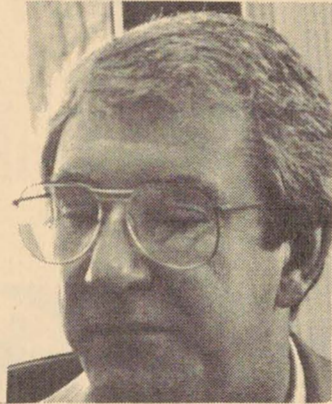
"We have the students for eight weeks, during which time we provide didactic, clinical and personal supervision and training. They spend time in the hospitals—primarily at Southern Nevada and a small percentage of time at Women's—and are placed in a private office. The program is so well received that there is fierce competition among the doctors to make their office experience the best. If the students are not met with enthusiastic support, we place them elsewhere," Dr. Wixted explained.

"They help us deliver babies, perform minor surgeries, attend grand rounds and patient conferences and write up physicals on the patients' charts. It's an interdependent relationship. We've made them a part of the team to the point where we almost can't function without them. We're trying to light up their hearts and make them want to be good doctors. And when our new residents come in July, we hope we'll be capable of even more involved and advanced teaching."

Dr. Wixted, who has been practicing medicine in Las Vegas for 15 years, spoke enthusiastically about the southern ob/gyn program.

"We've been successful. Almost everybody in town has put his shoulder to the wheel to make things work. The doctors feel an obligation to exercise the mandate of the Legislature to educate medical students. It's amazing what you can accomplish when everybody works in the same direction.

"Unfortunately, there isn't enough money to direct the program adequately, so the doctors end up donating a lot of their time, which can't go on forever. All in all, most of us stay with it because it's fun. Also, we got the best report card of any department when the students evaluated us, and that says it all.



Dr. Peter Graze, a graduate of Harvard and advanced programs at UCLA, is vice chairman of internal medicine for Las Vegas. He says that developments in medical school programs in the last year have been so gratifying and so tangible that it's enough to keep him going.

"Because we have a trusting, supportive working relationship with our Reno department chairman, Dr. Ernest Mazzaferri, we have had the freedom and incentive to develop exciting programs," he noted.

"We offer fourth-year students a choice of six elective rotations and, because of the variety and challenge, many of them stay long enough to do two or three. They can choose from general internal medicine, intensive care, cardiology, nephrology, pulmonary medicine and hematology oncology. They can also get experience in dermatology, infectious diseases and gastro-enterology, and Southern Nevada Memorial offers programs in emergency medicine and radiology."

SNMH is anxious to attract as much medical school activity as possible, Dr. Graze said.

"Our training programs are perceived as serving the goals of the hospital. They want our programs and make it easy to implement them.

"The medical school is recognized as not necessarily a threat, but something that is, in fact, a positive force in southern Nevada. We serve the physicians as well as being served by them. There's always initial friction when new programs come to town, but most of the doctors enjoy teaching. And, while some of them are indifferent, not many are antagonistic. They can participate or not in our programs as they see fit.

"Of course, with the home base of the medical school 500 miles away in Reno, we have greater freedoms in developing our programs; there is less direct threat to the doctors and less banging of heads. Too, Las Vegas is 'under-doctored' and the physicians here tend to be interested in medical education."

Dr. Graze continued, "I don't think any student—not a one—has finished a medicine rotation and not gone back and said it's worthwhile. The students get a good educational experience because the doctors are enthusiastic and the hospitals are receptive."

Echoing Dr. Wixted, Dr. Graze said that practicing in a teaching hospital under the constant scrutiny of residents and medical students is like working in a goldfish bowl, but "if what you're doing is good medicine, you're comfortable."

In trying to encourage both students and doctors to be involved in the southern Nevada programs, Dr. Graze teaches, oversees the Las Vegas internal medicine residents and students on rotation, sees private patients in his hematology oncology office and acts as director of medical education at Southern Nevada Memorial Hospital. "It's like a three-ring circus, but I enjoy it all," he professes.

Dr. Charles A. Buerk, a newcomer to the Las Vegas area, is vice chairman for surgery and is developing a small surgery residency to begin in July of this year. He also oversees elective surgical rotations for fourth-year students and hopes to have programs for third-year students once his residents are in place.

"I have been in medical schools and hospitals in Rochester, Cleveland, Denver and Boston among others, and I am very impressed with the competency of our students," Dr. Buerk pointed out. "They are bright and dedicated—they challenge you and keep you on your toes.

"I have been here six months," he continued, "and have been well received. There is a core of Las Vegas surgeons interested in seeing surgical training programs developed; I've had lots of cooperation from them and from the hospital."

Dr. Buerk's program will focus on general surgery, training what he calls "primary care surgeons."

"The patient load down here will allow us to do some good teaching. We won't be the Harvard of the desert; we won't be the biggest, but, someday, it would be nice to be the best," the surgeon mused. "We'll stay small because that's the best way to teach; it creates a good academic atmosphere. Besides, we don't need big-town programs until we see what directions Nevada will take."

Five years are required to train a general surgeon, because, as Dr. Buerk explained, the program is not simply didactic—"it takes longer to teach, and to acquire, the manual dexterity necessary to be a good surgeon."

Dr. Buerk said his program is growing in a favorable climate because of the nature of Southern Nevada Memorial Hospital. The hospital sees a lot of trauma, he explained, and very few trauma programs can develop without a surgery residency to support them.

"It's difficult for a surgeon to stay in the hospital. Our residents can see trauma patients as they are admitted through emergency and check in with the on-call physician, providing a much-needed support system for the hospital staff."

Dr. Buerk, who trained under department chairman Dr. Ralph DePalma at Case Western Reserve, is working with Dr. DePalma to develop a statewide surgery program.

Dr. DePalma said, "It is necessary for surgery to commit our resources to a statewide program that will serve both northern Nevada and the Clark County area. This will be a joint educational and service program that will promote excellence in patient care. To help, our residents will rotate in both parts of the state."

Both physicians agree that SNMH is an integral part of a "clinical campus" in Las Vegas, providing the necessary teaching facility to support residencies and medical student education.

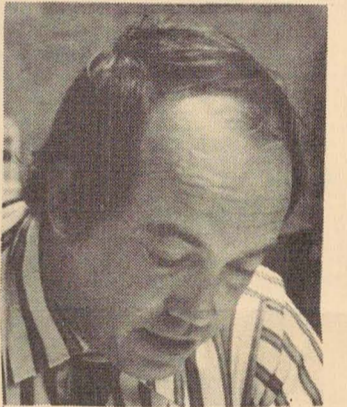
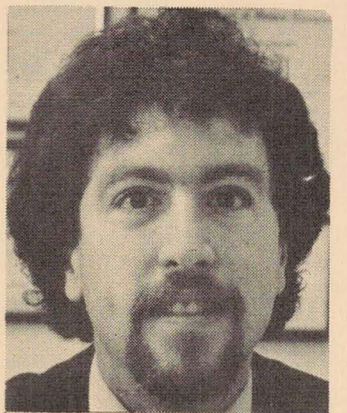
Because he has faculty in Las Vegas, Dr. DePalma regularly consults at Southern Nevada Memorial, periodically conducts a morality conference and often scrubs for surgery with Dr. Buerk.

The Office of Rural Health also directs programs in southern Nevada, according to Dr. DeWitt C. Baldwin, Jr., assistant dean for rural health.

"This year we have 14 students who will do their required rural preceptorships in Clark County," he explained. "Nine physicians in Boulder City, Henderson and Overton will take our seniors into their offices for a one-month preceptorship to give them a first-hand overview of medical practice in a small or rural community.

"We are also active in the Moapa Valley, where the community is trying to improve health care services by upgrading existing clinic facilities. Once we've helped them accomplish that task, we'll help them recruit a physician to live in the valley full-time." (Currently, physician coverage for the Overton clinic is supplied through SNMH.)

Dr. Baldwin continued, "We've already been successful in helping to recruit a family practitioner for Boulder City. In fact, Dr. Warren Smith is a 1975 graduate of the two-year program at UNR and went on to finish his degree in Tucson and his residency in Phoenix. He's quickly becoming an integral part of the Boulder City community and is building a good practice."



According to Dr. William Bishop, associate dean for Las Vegas, "A certain spirit exists here, which, when fully developed, can lead to good things. We've having growing pains, but the system is viable.

"We need the facilities in both the north and the south to provide optimal quality education for our students. Because we want them to be the best doctors possible, we need access to the best teaching and clinical facilities statewide," Dr. Bishop explained.

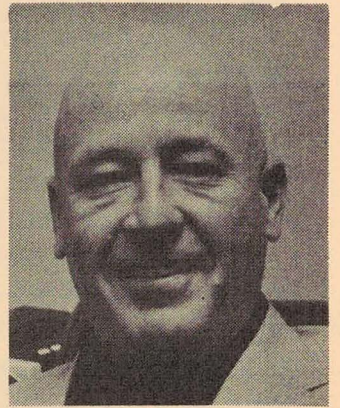
"We have a terrific relationship with the administration at Southern Nevada Memorial. George Riesz has an unusual and very positive attitude toward medical education. He understands the necessity for it and the procedures involved in building quality programs. He also understands the assets of being a quality teaching hospital, especially the capabilities for enhanced patient care.

"Although we're growing now, we plan to keep our programs small, streamlined. That way, our students will not be overwhelmed and can maintain direct personal contact with their instructors and the patients will receive quality care.

"Both Southern Nevada Memorial and Women's hospitals pay our residents' stipends — a vitally important factor in being able to develop and nurture such programs. We also have a working relationship with Sunrise Hospital. They have a good teaching environment, which provides our third- and fourth-year students who rotate through their departments with an excellent experience," Dr. Bishop continued.

"We do have our problems, though. The distance between Reno and Las Vegas makes it difficult for the faculty in the south to know their peers in the north. We need to continually look for ways to enhance interaction among these community physicians and the full-time faculty."

Dr. Bishop added, "As we work to improve this Reno - Las Vegas communication, we must also maintain a good relationship among the disciplines we're developing here. We need to be able to grow and adapt our programs to the local personalities and facilities in order to meet the needs of the Las Vegas community, but we also must be an integral part of the overall medical school program," he proposed.



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