

# *Shots, Drugs, and Rock and Roll*

by Lori McCallister

The OMSL is the Office of Medical Service-Learning, an office with a broad range of responsibilities and services in the IU School of Medicine. This office is headed and staffed by Dr. Patricia Keener, Steve Kirchhoff and Shirley Lawson. Dr. Patricia Treadwell is also now working with the student volunteer project wing of the OMSL.

I want to focus us on the volunteer projects of the OMSL. The projects continue to grow in both number and size each year, and many of them continue to reach for ever higher project goals. The projects are headed by students like you and me, providing opportunities for leadership experience (which is always nice when preparing for life in the real world), a great excuse to take a break from studying, and a window into life outside of the walls of our school.

## *The Projects*

(All contact emails end in @iupui.edu):

**Alternative Spring Break Nicaragua:** 1<sup>st</sup> and 2<sup>nd</sup> year students have the opportunity to participate in short-term community building projects and health initiatives in Nicaragua over spring break. Participation in the trip is limited to 7-10 students. Interested?

Contact Tracy Guildenbecher (tguilden).

**ASAP- the Adolescent Substance Abuse Program:** Student volunteers present a dynamic and hands on program to students in grades 5-7, highlighting the relationship among organ physiology, a healthy body and harmful substances. Students can choose how many of the 1.5 hour sessions they would like to help to lead. If you want to help out with this project, contact Maggie McClelland (mmccllell).

**Best Buddies:** Allows you to develop a one-to-one friendship and make a big difference in the life of an adult with an intellectual disability by participating in regularly scheduled activities. Hours are flexible, and most of the scheduled events are on the weekends. Think this project is for you? Contact Melissa Spurr (mspurr).

**Boggy Creek Gang Camp:** 1<sup>st</sup> and 2<sup>nd</sup> year students serve as "camp counselors" for a one-week camp, working with children with serious illnesses and their families. 7-10 students will be selected for the camp and will need to be able to help raise funds to cover the \$200 per student out-of-pocket costs. Wanna join? Email Heather McDaniel (hlmcdani).

**Calnali Health Education Outreach:** This trip sends Spanish-speaking 1<sup>st</sup> and 2<sup>nd</sup> year students to a medically underserved Mexican village over spring break to provide basic health care and education to the people of the village. Out of pocket cost is estimated at \$300/student. Email Domingo Maynes (dmaynes).

**CLMP is the Community Leadership Mentor Program:** Helps medical students to increase their understanding of the operation of nonprofit organization boards and leadership skills. Students can start in their 1<sup>st</sup> or 2<sup>nd</sup> year of school and attend training sessions at Wishard Memorial Hospital. The topics of the sessions include the United Way, trustee responsibility, leadership skills, fiscal oversight, and governance vs. management. The educational sessions are followed in the second year by participation in site visits at three nonprofit agencies and 3<sup>rd</sup> and 4<sup>th</sup> year participation in 3 nonprofit agency board meetings. Wanna prepare for a lifetime of community leadership? Email Susan McDowell (smmcdowe).

**Diversity Week:** In January of 2005, watch for the topics of the lunchtime seminar series which explores medical issues affecting racial minorities and their roles in health care outcomes. Food is provided and the speakers are nationally known. Wanna help? Contact the program's creator, medical student Robert Patterson (rdpatter).

<< **Doctor Camp:** This project is my personal favorite. I'm working with it for a 3<sup>rd</sup> year and I have a lot of fun with it. We give inner-city minority children ages 11-13 a chance to learn about medical topics ranging from x-rays to the effects of disease on human organs to hands-on experiences with basic medical tools and more. It's a great way for you to be a leader for a day (in early June) and encourage these kids to attain higher education. Contact me if you'd like to work with these kids for a day! Lori McCallister (lmccalli).

**Project Joy:** Students with Project Joy plan and lead a wide variety of fun monthly interactive projects with geriatric patients at Lockefield Village, and have a chance to meet with Lockefield Village therapists and physicians. The activities usually last for about 2 hours, and interested students can also help to plan projects at the rehabilitation center. If this is the project for you, email Wesley Lackey (wlackey) for more info.

**Reach Out And Read (ROAR):** Reach out to young kids by reading storybooks to them! This young program sends students to medical clinic waiting rooms to read to kids waiting for doctor appointments. The project demonstrates how parents might read to their children at home and encourages increased literacy and interest in written stories. Contact Danielle Burket (dburket) to help!

**Rock for Riley:** Help plan next year's concert to benefit Riley hospital! Contact Joe Frank (jfrank) or the program's MS3 creator, Greg Berman (gberman).

**Safe Sitter:** This program teaches kids aged 11-13 how to handle medical emergencies when caring for younger children, as well as safe, nurturing child care techniques and behavior management skills. Medical students are trained as Safe Sitter instructors and teach 2 classes at the IU Med Center or local Indianapolis grade schools over the course of a year. If you would like to get more information on this project, email Molly Bozic (mbozic).

**Spring House Calls:** This is THE largest OMSL service project. It provides yard and exterior home maintenance for elderly homeowners on the West side of Indianapolis. The participants include IUSM staff members. To help with this project, email: Jonathan McCrea (jmmccrea).



# *Iatrogenesis*

*Student newspaper of the Indiana University School of Medicine*

*January 2005*

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# Campus News

## MSI: One Done Brian Meek, MSI

Well, one semester is done. We have successfully left behind Friday afternoons in Anatomy lab, Wektures, and a lot of fears we had coming into medical school. I remember foreseeing the unavoidable butt-load of work during finals week and thinking that I was probably going to implode. But I got through, as did everyone else, most likely a result of our reciprocal empathy. Before one exam, I remember the awe I and others had of one student who got a full four hours of sleep before the exam. Finals finished quickly though and left us with what we all needed, nearly a full month to relax. The first years had a few nights out on the town, one night at Land Sharks and a house party here or there. Some, like myself, are from Indy and are home while others hit the road early after finals to see their families. I'm thinking after a few egg-nogs and glasses of champagne we should all be ramped up again to tackle next semester. It's not like we'll be watching Hoosier basketball.

## MS2: How far have we come in 100+ years?

by Derik Geist

We're not far from half way through med school. I am sure all of the MS II'ers are glad for the Fall semester to be behind them. Everyone in our class had the opportunity to visit the Indiana Medical Museum when we got back from Thanksgiving break. It is a pretty neat experience, and amazingly it is in such good condition. Hard to imagine that there were faculty and students using the building up until the late 1960s! We should appreciate all the technology we have access to, both as patients receiving good treatment and as physicians with the satisfaction of treating a wide array of diseases and conditions. It must have been frustrating for doctors a hundred years ago, not even having the opportunity to effectively treat a lot of their patients. It really put things in perspective when we were told there weren't any medicines for even hypertension until the 1930s. Imagine all of the chaos that would result based upon the American lifestyle if we didn't have these medications today. Scary stuff, yet at the same time impressive in how far technology has come along in just 100+ years.

Bad thing though is that we can't have an old stand-by diagnosis like physicians had back then for things they had no idea about, such as, "Evil Spirits," or, "Consumption." (Was "The Itis" a diagnosis back then? YEEEE-YA-YAH!!!). We need some of our own, more modern, vague diagnoses to serve as a cop-out, such as "That Thing where Those Five Markers are Expressed in High Levels," or "That Disease Where if You Squint your Eyes Real Tight You Can See an Imaginary Invisible Dot on Tissue Section," or the ever-popular, "That Disease That is Still Named After that Dead Guy which Clues Me Into Nothing About the Disease Itself and Makes It that Much Harder for me to Remember Anything About It."

## MS3: 2006 not so far away after all by Jessie Stewart

Seven months down, five more to go. 2004 was a big year. Step I is history. Since June, we have gotten much better at walking around the hospitals, pretending to be competent medical professionals. Sometimes we even fool ourselves. Last year we did some amazing things. We saw (brains, hearts, guts, vessels), we smelled (infections, unwashed bodies, the bovie), we heard (orthopedic surgery, a baby's first cry, long long histories). Some never-befores and some never-agains. We long for the rotations that let us sleep past six, but very few of us would trade even our long days for lecture notes.

2005, we notice, is very nearly 2006. A lot to do this year, so that we will have a job after graduation. We have received notice that it is time to choose a faculty advisor, to plan our fourth year schedule, and to get our school picture taken. Many of us are getting close to a residency decision, though if our attending is asking, we stick with a carefully non-committal response. We wonder: do we want to stay in Indy or go somewhere that doesn't ever require an ice scraper, how much does lifestyle matter really, and the most pressing question, what do we wear on

## MS4: Frequent Flyers by Toni Lin

Greetings from a sticky table between the Asian Chao and Sbarro at the Philadelphia International Airport food court. I would love to say that I'm actually supposed to be in Philadelphia, but I'm not. I was scheduled to arrive in Baltimore for an interview two hours ago. That's right, *arrive*.

Things don't always go as planned; I know this. While the fourth year class officers have been preparing for the Match Day party in March, I find myself wondering if I'll have anything to celebrate. I mean, you allow plenty of time between connections, try to take direct flights, start your journey early in the day, and you still find yourself pondering the pronunciation of "Sbarro" in a strange city. Seriously, can you really pronounce *both* the "S" and the "b"? Anyway, my point is, no matter how you prepare for residency match, the truth of the matter is that good people go unmatched. This is more likely to occur in dermatology than pathology and the probability is like 1 in 100. But when you're that one, it seems more like 100% than 1%.

In a sea of red flashing CANCELLED's on the Departures monitor, my connection to Baltimore lists a calming green ON TIME. Time to skedaddle. In situations like these, it's better to be lucky than good.

## The MSIV Bankroll as seen by Toni Lin and sponsored by Jose Espada

Renting a car for an away rotation \$746  
Applying to 54 program on ERAS \$940  
Flights and hotels for interviews \$3000  
Never again answering the question, "Tell me about yourself?" priceless

## What's the Happy-Haps at IU this month...

By Juliana Meyer

As many of us 4<sup>th</sup> years prepare CVs and schedule flights around the globe for interviews, it won't hurt to be reminded that there are things going on around campus that have nothing to do with Match Day or finally buying that house.

For instance, there was lots of talk about Riley fundraising earlier this year with a hugely successful event. Not to be forgotten, the IUPUI side of campus is holding their annual dance marathon in March and you can register now! Coincidentally, Riley is celebrating 10 years of excellent cancer care this winter. For more information on helping Riley by shaking your groove thing, go to [www.iupui-dm.org](http://www.iupui-dm.org). On a musical note, there are new offerings in the school of music. One is a new class entitled "Music in Medicine" that explores literature describing the medical application of music. The course is lead by a professor of music who conducts music therapy research at IU Cancer Center and will tie in clinical experience and theory.

The second lyrical option is a new series of guitar classes for spring of 2005. It just might be your time to learn that guitar that you always wanted to – strumming your life (or something like that...). There is even an online course offered. Contact Michele at 278-3264 if interested.

On the flip side, for those uber-focused students, you now never have to leave your home to read. You can have the bookstore deliver books right to your doorway! Simply go to [www.bookstore.iupui.edu](http://www.bookstore.iupui.edu) and they will have the books waiting on your doorstep (assuming you ever leave home...). Could it be any easier? Well, you could buy all my old books, but that's just easier for me...but cheap for you!

Wanna get more money to get the med school job done? You could get a job tending bar at a local Broadripple establishment or...you could look into winning a grant this winter! Included in the options are the Showalter Trust Fund for biomedical research. Apparently for this you need some sort of PhD –minor detail there – but I have faith in the ingenuity of the average med student! Also the AAMC will "dontate" a couple thou' for papers describing innovating health promotion or disease prevention projects. I'm not exactly sure if you actually have to accomplish these projects or just think about them. Give the AAMC website ([www.aamc.org](http://www.aamc.org)) a gander and see what you think.

A way to detox over the holidays – yoga! For this, IUPUI can help as the healing art of yoga will be offered on campus. Check Onestart for registration information in order to get centered and relaxed. Have a happy holiday break and remember to look outside the med school walls every now and then!

## Putting Faces on Places: James Whitcomb Riley

by Mike Boger



James Whitcomb Riley was born in Greenfield IN, 1849. He was a traveling actor, a sign painter, newspaperman and eventually became known as the "Hoosier poet." His verse was enjoyed by many for its humor, simplicity and sentimentality.

Especially well-known are his children's poems such as "Little Orphan Annie" and "The Runaway Boy." Among the collections of his verse are *Rhymes of Childhood* (1890) and *Knee Deep in June* (1912). He died of a stroke in 1916 and in the same year the Riley Memorial Association was founded with the goal of building a children's hospital in his memory. Riley Hospital for Children opened in 1924. For more visit the Riley Museum located at 528 Lockerbie St., or to read the complete collection of his works visit <http://www.underthesun.cc/Classics/Riley/completeworks/>.



## Holiday Rental Review

**Elf.** Will Ferrell at his best with some good, clean, holiday fun

by Mike Rerko



*Elf* is an absolutely hilarious comedy guaranteed to make even the most downtrodden, final exam-beaten, sleep deprived med school student laugh for much of the 95 minute length of this

film. Will Ferrell, with help from the writer, David Berenbaum, takes the energy from the best of his *Saturday Night Live* and *Old School* performances and throws it into one hilarious scene after another in this "North Pole cheer takes on New York gloom," comedy. Best of all, the humor is equally entertaining and appropriate for your whole family. So if listening to Christmas carols and your father's stories, which you've heard three times already, gets a little tiring, definitely go out and rent, borrow, or buy *Elf* to really perk up your family gathering, without having to add some whiskey to the egg nog. The only disclaimer is that the movie mentions that some people believe Santa is not real and that parents just put presents under the tree, but the characters dispel this notion by bringing back Christmas spirit and

making people believe in Santa.

The movie is obviously about an elf, played by Will Ferrell, named Buddy. The only problem is that he is human, not elfish, and was raised by the elves as an elf after inadvertently crawling into Santa's bag as a baby and ending up in the North Pole. His adventure starts after overhearing some elves mention



that he is not an elf, which is obvious to everybody else since he is twice the size of any other elf and doesn't fit in anywhere in the North Pole. Buddy then learns that his only biological parent alive is his father, played well by James Caan, who didn't even know that he had a son with Buddy's mother. Buddy embarks on a quest to find his father and hopefully a place that he could fit in. Much of the movie then involves Buddy, a naive and fully grown man, trying to put his North Pole-style, merry and innocent knowledge to use in the real world of New York, and failing miserably in some memorable and delightful scenes. The rest of the movie involves bringing Christmas spirit and the belief in Santa Claus back to people, especially Buddy's father, who happens to be on Santa's naughty list for being a harsh, uncaring publisher who makes children's books without the last couple pages. The plot may not be the best, but it is original and the humor overshadows any small shortcomings.

*Elf* is perhaps Will Ferrell's best work, and will be enjoyed around the holidays for years to come. This should definitely be on your must-see rental list, and it is the perfect movie to watch with the entire family, perhaps even more than once if the conversation really starts to lag.

# Entertainment

## Music Reviews

by Greg  
Berman



### Brian Wilson *Smile*

The Beach Boys were always America's answer to England's Beatles. While history has always shined greater on the Beatles' career, it can be argued that the Beach Boys forced the fab four to have to be good enough to remain on top of the pop music world. The Beach Boys were equally effective at starting trends in music, and with *Pet Sounds* had the best album of all time, at that time. The Beatles responded with *Sgt. Peppers*, which forced the B-Boys back to the drawing board. Brian Wilson, the leader of the Boys, began working on what was to be their masterpiece *Smile*. Unfortunately, the pressure and drugs led to a well known period of psychosis for Wilson, supposedly involving spending a year in his bedroom, with only a bed and a grand piano in the middle of a giant sand box. So with the help of Van Dyke Parks and Darian Sahanaja, Wilson decided to dig up the scraps, demos and snippets of the project and try to recreate what has been the long lost album of American pop music. The results are gratifying with an entire pop-orchestral production, which almost sends you back in time. The only disappointments are that the story may be better than the actual listen, and that the best song (top 10 of all time??), "Good Vibrations", has been released for years.



### Elliot Smith *From A Basement On the Hill*

One of the saddest aspects of the music industry is that the best way to sell albums is to die. As harsh as that sounds, consider that Tupac has sold 35 million albums since his death compared with only 6 million before with nearly two-thirds of his albums released posthumously. Sublime, no doubt a good band, would be hard pressed to find its ways into so many ears had their lead singer not died from an overdose. The



fact is that there is something very unique about rock stars, and especially fans' appreciation for them, when they pass before their time; it adds some sort of intensity to their work, not to mention the media exposure. With this in mind Elliot Smith, previously best known for his work on *The Good Will Hunting Soundtrack*, will probably see his best album sales to date for his first album released since his untimely suicide in October of 2003. Smith has always been a master of depression rock, always singing sad songs but it doing it in a beautiful way, and this album is no exception. The finely tuned songs are some of Smith's finest and are worthy of the praise he will now receive despite having deserved it his entire career.

### Rich Robinson *Paper*

Rich Robinson is best known for being brother to Chris Robinson in the Black Crowes. Since the Crowes split-up, Chris has been in the spotlight both for his famous wife and new band, New Earth Mud, while Rich has apparently spent his time crafting an excellent album. *Paper* houses the familiar Southern Rock feel that the Crowes had mastered, while also adding in other interesting genres seamlessly throughout. With rumors of a Crowes reunion, the only thing missing from this album is Chris wailing out the tunes with his unique rock voice.



## Movie Review *Kinsey*: The Science of Sex

by Adri Lona



Leave it to the son of a preacher to be the first to stir up the forbidden and uncharted waters of sex in the name of science, and change our understanding of it forevermore. This work would not only reform our understanding of sex, but also our thoughts surrounding complex subjects to which it's inextricably linked, such as gender and psychology. In *Kinsey*, Bill Condon writes and directs a portrait of the life of Dr. Alfred C. Kinsey, decorated former faculty of Indiana University and pioneer in the study of human sexuality. Continuing in the vein of *Gods and Monsters*, Condon embarks on another intellectual exploration of sexuality and human genius, employing his talent to delicately depict subjects considered taboo by making formerly noxious ideas palatable for almost all. Thus, there is little to fear when watching this movie whose subject matter is based solidly on sex.

Kinsey (Liam Neeson—*Schindler's List*, *Gangs of New York*) arrived at Indiana University in 1920 as an Assistant Professor of Zoology where he began a career based on painstakingly meticulous evaluations in taxonomy and evolution. By the late 1930's, he was already regarded as one of the most respected minds in science for his revolutionary innovations regarding methods and techniques in biological research, almost a decade before the publication of his groundbreaking work on human sexuality. During this time, Kinsey weds a bright, former student, Clara McMillen (Laura Linney—*Mystic River*, *The Mothman Prophecies*) and begins teaching a sexual education class for married couples within the university. The abundance of ignorance regarding sex among the seemingly "well-educated" astounds Kinsey, prompting him to begin work on the research of sexual experiences and practices in the population at large.

The film does a superb job recreating the academic and scientific world of the 30's, 40's and 50's as well as the microcosm of Kinsey's own tightly knit laboratory. Condon succeeds in bringing to life the excruciating labor that's necessary when working with a pioneer. We see how one's work must also become one's life when taking on such an endeavor and that such intensity leaves few unscathed. Neeson's ability to convey the inhibited emotions of a timid scientist trying to conquer one of the most intimidating subjects in human experience is commendable, but unfortunately seems limited at certain critical moments. Ultimately, I think Neeson's acting abilities are outshined by those of the younger Peter Sarsgaard (*Shattered Glass*, *Boy's Don't Cry*), who plays Kinsey's indispensable assistant, Clyde Martin. Despite its shortcomings, the historical significance of the movie is undeniable and reason enough for any adult's viewing.

The 1948 publication of "Sexual Behavior in the Human Male" helped create to a new era of human understanding and formed the scientific landscape of sexual research to come. All puns set aside, it should go without saying that the study of sex is an integral part of the study of human experience and that in order to understand experience it must first be examined, even if it means having to leave the lights on.



# The Best Way to Burn Bridges and Stomach Linings

by Michael Harwood and Joe Koury



We've all been there. And we've all known my recent pain: tequila shots. I woke up last Saturday morning (2:00 pm) with my friend's couch's pattern imprinted nicely on the right side of my face. There was the faint aroma of too much booze and maybe a hint of vomit in the air. As I recall, my night consisted of too much beer and an unknown number of tequila shots (stupid "Ten rounds with Jose Cuervo" song.) As I started to pick up my personal belongings and get ready to go home so I could nurse my hangover from the comfort of my own bed, I realized I was missing one critical item: my cell phone. Incidentally, I was also missing a sock, which I still have not found.

I knew that I had made some drunk dials the night before, but who hasn't done that? It is a foregone conclusion that before I pass out around 4:30 am, I will wake up several of my friends and leave them messages telling them about my night and about how drunk I am. Either that or they'll answer their phone and we can brag about the heights of stupidity we've managed to achieve via our combined efforts. Remember, there's always strength in numbers.

Anyway, my friend finally found my phone, in the most obvious of places - his refrigerator.

I remembered having a weird dream last night too. After I'd done my regular drunk dialing I dreamed that I'd called a girl, and not just any girl, but a girl I've been friends with for years and whom I have always had a secret crush on. But of course this is something that, due to the minimal amount of common sense I sometimes manage to cling to, I've never told her. I did dream about professing my love last night - or so I thought. I went through my phone's "outgoing calls" list, and in addition to the standard college drinking buddies I normally call, I found that the last number in my outgoing calls list was the girl, whom I'd called at 4:40, which is unfortunate since my last memory of the night was at 4:25-ish.

Now, let me tell you more about this dream/reality phone call I made. Not only did I tell this girl about the crush I'd been secretly hiding for years but, on top of all of that I professed my undying love for this girl. I ranted on and on and on to this girl - and by ranted, I mean probably spoke in monosyllabic grunts about how much I love her.

As I lie here in my bed now too tired not to sleep and too anxious not to, I'm faced with the very vexing question of what to do. First of all, I'm going to do what I do every time my hangover is this bad: promise myself that I'll never drink again - until next Friday. My next decision is how to handle this delicate and possibly disastrous situation. I will present you with my options. And you can hope that I chose the one you would have; for the sake of originality we're going to make this a "Choose Your Own Adventure" story from here on out. When you read the option you think I ought pursue, read the lettered paragraph that corresponds to the option you've chosen.

If you think I should:

Be honest and confess, read paragraph (A)

Ignore the problem, read paragraph (B)

Admit to the crime but play it off as a drunk dial, read paragraph (C)

Call her, pretend I know nothing and see what happens, read paragraph (D)

- A.) My first option, the one all you good, honest people out there choose - confess, admit to being drunk and stupid, apologize and hope for forgiveness. While I admit this is the noble thing to do, I personally believe it's equally as stupid as the phone call itself - it was honesty that got me in this situation in the first place. While I admire your integrity I do NOT recommend this course of action for myself. I know that I said this would be "choose your own adventure," but I'm going to veto this choice and assert my own free will twice, once to be dishonest and again to call you stupid.
- B.) Never speak with her again - potentially brilliant but also potentially devastating. This pretty much eliminates any future friendship I have with this girl because to ignore the problem means I have to ignore the girl. Not my best option since I've been friends with this girl for a number of years and she's someone who knows enough dirty laundry about me that I can't afford to have her out there being angry with me. She's probably got several stories on which the statue of limitations hasn't run out and that could cost me big in lawsuit money. After taking that "darn" (please insert your own original and better explicative here) CS exam that's something I don't have much of anymore - I still have to shower in the sink at the library because I can't afford to pay my water bill.
- C.) But then again she might see through it and know that I'm full of crap and a terrible liar, which, if you know me, is absolutely true. Plus again this invokes some element of honesty and if you didn't read paragraph (A) you should because it's brilliant humor (I think so anyway and again from paragraph (A) if you don't think so you're still stupid) and you missed my opinions on honesty.
- D.) To me, this option is the winner. Maybe she'll bring it up, but then again, maybe she won't, then we can both go on with our lives like it never, ever happened. On the other hand, it may be the first thing she hits me with when I call her up. Now, what to do here is a tricky situation. What I'm going to assume will happen is that she will, soberly, confess to having similar feelings for me. I mean obviously this is what will happen because if drinking has taught me anything, it is that alcohol is the cause of and solution to all of life's problems.

Okay, let's face it - no matter what I do, I'm hosed, but not for a lack of genius on my part. I blame everyone else for not being drunk and not understanding where I'm coming from when I drunk dial and confess my love to them.

## AAdvice

By Aaron  
Anderson  
and  
Ahmed  
Athar



Dear AAdvice,

I am a fourth year med student, and like all other fourth years, I am in interview season. I have noticed that some places pay for my hotel stay, while others refuse to pay for anything. I have been on eight interviews already, and frankly I'm tired. I already have a solid rank list in mind where I could stay close to home. Before all of these interviews, I had never been outside the borders of our great state. I was scared at first to find out first hand what Chicago was like, but it turned out to be a fun visit. As I look at the rest of my scheduled interviews, there are a few places I wouldn't mind visiting. As for the programs, I'm not so much interested in ranking them. How do you suggest I optimize my time while in Florida, New York City, and California?

Sincerely,  
Sheltered

Dear Sheltered,

Well, I'm assuming your plane tickets are already purchased since you don't want to cancel the interviews altogether. So, if you are interested in the cities and not the programs, you are questioning how to get out of the interviews yet still have time to explore the city. I can only come up with two possible solutions. One: Fake being sick at the start of the interview and be sent back to the hotel. Two: Don't show up to the interview at all; just stay in the hotel they provided the night before the interview, then explore the city. You have a unique opportunity to see both oceans in less than a month. I would say go for it.

One thing you should be aware of is that program directors talk to each other frequently. If word gets out that you are skipping interviews but staying in the hotel rooms paid for by the programs, you will most likely have a hard time matching. In order to avoid repercussions of this sort, you have to call immediately the following morning explaining how you 1.) got sick, 2.) overslept, 3.) were too drunk, 4.) were in jail, 5.) had an accident, 6.) were kidnapped, or 7.) were assaulted on your way to the interview and could not make it. You sincerely apologize and try to reschedule the interview. This way they may even feel sorry for you (except if you say you were drunk). You can call a week later and cancel the interview. You have now enjoyed multiple cities and have made only a few, if any, enemies along the way.

Enjoy your adventures,  
AA



# THE TOP TEN

A Tribute to the One-Liners of the Late, Great Rodney Dangerfield (1921-2004) from his greatest role ever: Al Czervik in Caddyshack. Any fan of the 1980 classic or any golfer who can't go a round without swapping quotes from this film knows my pain. We'll miss you Rodney.

-Nick Nelson



10. "He called me a baboon, thinks I'm his wife."
9. "Hey, doll. Could you scare up another round for our table over here? And tell the cook this is low grade dogfood. I've had better food at the ballgame, you know? This steak still has marks from where the jockey was hitting it."
8. "Oh, this your wife, huh? A lovely lady. Hey baby, you must've been something before electricity... You're a lot of woman, you know that? Yeah, wanna make 14 dollars the hard way?"
7. "Hey Smails! My dinghy is bigger than your whole boat!"
6. "Oh, this is the worst-looking hat I ever saw. What, when you buy a hat like this I bet you get a free bowl of soup, huh? Oh, it looks good on you though."
5. "Hey this is my friend Mr. Wang... No offense."
4. "Let's go, while we're young."
3. "Ugh, the people here ... look at that one! Last time I saw a mouth like that, it had a hook in it."
2. "Hey, did somebody step on a duck?"
1. "Boy, I tell ya' now I know why tigers eat their young."

## 2005 INTERVIEW DAY February 5th

### Medical Student Council and Dean Appointed Positions

#### MSC Appointed Positions

Admission Ambassadors  
Co-editor of *Iatrogenesis*  
Evening of the Arts Co-Chair  
Graduate Student Council  
Liaison Committee Student Rep  
Peer Sponsorship Co-Chair  
Regional Center Liaison  
Spring Formal Committee  
Student Alumni Ambassadors  
Used Book Sale Committee Co-Chair  
Volunteer Services Co-Coordinator  
IU Medicine Magazine Editorial Board

#### Dean Appointed Positions

Academic Standards Committee  
Curriculum Council Steering Committee  
Curriculum Council Subcommittees  
Organization of Student Representatives  
Parking Policy Committee  
Student Promotions Committee  
Student Research Committee  
Teacher-Learner Advocacy Committee

**- NOW ACCEPTING APPLICATIONS -**

**<http://www.iupui.edu/~mscstaff/application.htm>**

Questions? [mverones@iupui.edu](mailto:mverones@iupui.edu)



# *The O'Manakas* *Factor:* Psychosis-Induced Random Thoughts

by Chris Manakas

## Opinions

### **If You Can Dodge Traffic While Typing, You Can Dodge a Ball**

As I type this rather haphazard installment of *The Factor*, my fiancée and I are driving with our dogs up I-65 to my parents' house in Valpo. We (she) hope(s) to take care of some wedding errands and do some Christmas shopping in Chicago. Why Chicago? Because few things are more exciting than paying \$30 to park while Mom or Sister deliberates over whether or not the purse is "worth it." I'll be avoiding Michigan Ave. and the banquet hall with what I've found to be a tried and true, iron-clad excuse: "I've got to study." When I think about them going to Chicago, one thing becomes abundantly clear: I'm completed f\*&%@d when it comes to Christmas shopping this year. I haven't even *thought* about what I might get my woman, let alone other relatives. If you have any ideas about a gift I might be able to buy my future wife, please submit them to [cmankas@iupui.edu](mailto:cmankas@iupui.edu) and the idea I like the best will get a special prize, to be determined by the editorial staff.

### **I'm Against Cancer**

I just saw a bumper sticker that said: "Honk if you understand punctuated equilibria." It made me laugh. That makes me want to talk about the stupid ribbons that are plastered all over every idiot's car on the road: yellow ones with "Support our Troops" or red, white, and blue ones with "God Bless America." First of all, the concept that anyone wouldn't support our troops is ridiculous—almost as ridiculous as the idea that putting a stupid ribbon on your car does anything but decrease its resale value. Who doesn't support the troops? That's like saying "I'm against cancer." It's the reason for going to war that people may or may not support. However, as you might realize, that makes a much less viable bumper sticker. Who wants a bumper sticker that says "Yay War! Let's shoot some Iraqis!"

### **Some Vacation**

Sorry about that little rant. So anyway, November and December were *supposed* to be two months of vacation for me. I had grand ambitions of ruling XBOX Live with Halo 2 and NFL 2K5, but as the interviews started to come and go and Step 2 (CK) started to bear down my ass like a clinical clerkship director looking for the procedure log book, it became all too clear that this wasn't going to be too much of a break. I know, I know, I have only myself to blame for not taking the test sooner...there were multiple reasons for this that I won't get into; now they all seem pretty dumb. But really, I don't know what I would've done had I been on an actual rotation with all of this other crap to do. It says a lot about how cumbersome the application process is and makes me wonder why in the world I'm still paying tuition. Seriously, as MS4's we should get a discount for a year that has essentially been just one long application.

Needless to say, on the evening of December 21<sup>st</sup>, I'll be quite relieved and pretty hammered...and on the 22<sup>nd</sup> (late, late afternoon on the 22<sup>nd</sup>) I'll probably start my Christmas shopping.

### **Stupid Spoiled Whore Video Playset**

I don't know if you folks are South Park fans, but the funniest episode I've seen in recent memory aired on December 1<sup>st</sup>. This time, Trey and Matt stuck it to none other than super-trashy, ass-crack bearing celebrity, Paris Hilton. For some reason, it continues to surprise me why this (I think) ugly hussy with shit loads of money (answered my own question) gets any attention at all. The episode did an amazing job of ripping on everything Paris...from the way she smothers her dog with attention (the dog eventually shoots itself) to her drunken promiscuity (throughout the whole show she's coughing up handfuls of a "mysterious" milky-white substance). The premise of the episode was that she opened a new store in South Park called "Stupid Spoiled Whore" where all the young women of South Park could now buy all the equipment they needed to become just like Paris. One of the products was this *Stupid Spoiled Whore Video Playset*. It included video camera, night vision lens, losable cell phone, and 15 hits of ecstasy so that you can make videos of yourself having sex with your boyfriend! It was at this point that I knew I was watching something special. I still have it Tivo-ed and if you'd like a copy, let me know. It's well worth it. Great holiday family-time viewing: "Daddy, why is Paris sticking the business end of a pineapple between her legs?"

### **Last Holiday Season...Without a Pager**

I really hope everyone in the fourth year class does their best to take advantage of what is most likely the last care-free holiday season we're going to have for a long time. Chances are, for the next several years we'll be working/on-call five days in a row over Christmas or New Years, seriously limiting the time I've grown accustomed to sharing with my loved ones. It hit me hard as I'm debating whether or not to spend *more* money this interview season on a ski trip with my woman. I quickly realized that I'd be stupid not to: who knows what it's going to be like when I'm a resident? If I have any advice this holiday season it's *go there, buy that, make that extra trip to see Grandma and Grandpa (even if they're crazy), and spend as much time as you can with your family* because we won't be able to do much more of this for a while. At least until residency is over.

That's it for this edition of *The Factor* folks. I hope you've enjoyed the last few articles. I've had a great time writing them. I look forward to the New Year and all the changes the next six months will bring us all. Take care and thanks for reading, I'll see you all in January!

P.S. By the way, my fiancée wants me to be sure to let you know that she's not crazy-obsessed about the wedding. We're both surprisingly calm. It is four months away though...Jesus Christ, only four months away!

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# Vent! Vacation...Or Is It?

by Stephanie Cohen

So, the semester is finally over. Wahoo! Now I have some time to relax and talk to people I have not talked to since, oh, August. I have nothing to do for school till January, right? Wrong! I have to evaluate my courses for the semester.

So evaluations are under big scrutiny lately at school. Students just don't seem to be filling out the evaluations for the courses and the higher-up's can't seem to figure out why. Here are a few ideas. Since the beginning of September, I have received forty-eight (yes, I counted) emails with a title along the lines of "You have been issued new evaluation forms." Forty-eight. That is roughly 16 a month or an email every other day. My friends don't even email me that often (hmm, not sure what it says about them, or me for that matter).

Now, I am sure you would say that if I just filled out the evaluation when I got the first email, then I would not have all these emails cluttering my inbox. Well, 2 problems with that. One is that if I did fill out the evals on time, I would not have anything to complain about and then I'd really be in a jam to write this column. The real reason, though, is that I would do the evaluation if it took about 5 minutes. However, when each evaluation takes about, oh, 10 hours to do because you have to evaluate the class, and each and every professor, in excruciating detail, I simply don't have that kind of spare time. Especially when there are still new episodes of ER on (can I just say how much I love that there is a "rock and roll" doctor now on the show? Where is the rock and roll bad boy med student at our school? That is really what I want to know! Oh, oops, I digress...as usual). But seriously, the evaluations are too ridiculously long. Especially if you take the time to make serious comments about the course, which I thought was kind of the point. So, unless the evaluators want me to mark "good" for everything, the evals won't get touched until Christmas break. There goes my 3 blissful weeks of sleep.

I do, for once, think I have a solution to my complaint (shocking, I know). I think we should go back to good old-fashioned paper evaluations on the last day of class. If you make us give our opinions on the spot in class, we can't procrastinate about it (not that we ever procrastinate, of course). And yes, we really do have opinions that we are more than willing to share. So, if anyone ever wants to know what we really like and don't like about the courses, they should go stand next to mailboxes and listen to the conversations. And until the evaluations become more time efficient for us students, this is the only way many of our opinions are going to be heard; oh, and this column too.





## *I Used to Like Sixth Grade Girls* by Ryan Brown

I “like, liked” a girl in the sixth grade. She was a brunette and wore a pink headband that perfectly separated her curly bangs from the larger portion of long straight hair. She wore a white cashmere sweater that would sometimes brush my arm as she passed homework up from the back row. I suppose I had a grade school infatuation that stemmed appropriately from the proximity of our seats secondary to the alphabetical seating chart. I had grown so accustomed to lending her pencils and passing notes for her that I considered our relationship to be one of necessity.

Late in autumn, she suffered a Salter-Harris type II fracture of her left distal radius. I signed her cast and depicted Bart Simpson quipping “Snot happens, man.” However, everyone in sixth grade knew that “snot” was replacing the true sentiment, and we were careful not to speak of its meaning because the adults might decipher the clever cryptic euphemism. I was lauded for my genius until Danny thought to add an enormous afro to Bart’s head and suddenly the genius torch was passed his way... and rightfully so. I laughed for what seemed like ten minutes when I saw the picture, and Josh erupted into a fountain of white, frothy panic as he lost voluntary control and homogenized 2% milk shot from his nose.

The girls, in general, thought boys were dumb. I know this because those were pretty much the words that they used. However, as much as that statement was wildly contested by angry shouts of “Nuh-uuh,” I do remember a group of us trying in vain to get Jimmy to blow Jell-O out of his nose for a comparison. Somewhere between that day and today the world grew a little bit colder with cynicism. I’m not blaming the girls who went around calling people “dumb” all of the time, but it certainly didn’t help. Something about getting older and experiencing life seemed to hyperkeratinize my baby soft skin and make me slightly more cynical with each passing day.

Now, I don’t intend to dissect the worldly reasons for vilification. We could blame politics and wars and gas prices and video games or reality TV shows that don’t actually reflect anything in this “reality” for which they are named. But, in consideration of my audience, I would like to blame medical school. It should come as no surprise to anyone that certain people associated with academic medicine are cynical for whatever reason. It should also not be surprising to find out that many people in medicine know about this negative aspect and fewer still have attempted to eliminate what seems like compounding pessimism. Unfortunately, this influence is constantly grating against the bright-eyed medical students that arrive each year with idealism and compassion and the best of intentions.

Before you jump on the bandwagon of blaming Indiana University specifically, I present this excerpt of a letter from Rob Morris, a student of medicine at the University of Sheffield in England:

*Coming to the end of my gastrointestinal attachment, I had to fulfill the course requirements by handing in histories of 10 gastrointestinal conditions from the list of 15 in my log book. The first six were easy: jaundice, colorectal carcinoma, gall stones, hernias, ulcerative colitis, and Crohn’s disease. I seemed to trip over these conditions every time I stepped onto a ward. But where was I going to find a patient with achalasia? And why didn’t appendicitis ever come in when I was on call? I was no longer viewing patients as “individuals with illness.” They had become walking (or preferably supine) pathologies, and annoyingly, they weren’t even the right pathologies. Worse was to come. I kept my fingers crossed as I clerked an emergency admission who had “?acute upper GI haemorrhage” written at the top of his notes. The reason for crossing my fingers wasn’t because I hoped he’d get better soon and resume his previous quality of life. Oh no. I was praying he’d have a perforated peptic ulcer, so I could tick another box in my log book. When nothing showed up on his endoscopy I began to worry, and when he was discharged a few days later I was furious that he’d had the temerity to get better without developing a single tickable pathology. He was of absolutely no use to me at all.*

Sound familiar? A failure of our system is placing the accountability of a fluctuating learning environment on our students’ shoulders. Our prime example at IU is the monthly scramble on OB to perform the required number of vaginal deliveries. Some students easily perform fifteen while many more are forced to fight for their opportunity to fulfill the minimum requirement. Suddenly, *failure to progress* becomes more distressing to the med student than the laboring patient.

I’m not sure what the answer is. I might be able to put a little more thought into it if I was offered a level three competency in Problem Solving, but most likely not. In reality, we are surrounded by items that are constantly ticking away at our optimism. I would be remiss if I didn’t get the chance to type one more example: Step II Clinical Skills. Though we do not have the ability to eliminate the cynicism that is rampant in medical school, we need not be consumed by it. I eventually asked out that girl in sixth grade, she politely declined and the world grew a few degrees colder.



## *The Monthly Motivator*

by Pamela Cates



### **Every Act**

- Whatever you do, do it with passion, with love, with full attention and awareness. Put all you have into even the smallest of acts.
- The richness of life is in the doing. Fulfillment comes not from getting, taking, having or keeping, but from being and becoming.
- In every action there is the opportunity for greatness. The more of yourself you put into all that you do, the more successful you will be.
- This moment is not a practice or preparation. Now is when real life happens.
- Give your energy, your attention, your thoughts and your love to what you are doing with now. Put yourself fully into what you do, and whatever you do will be of much value.
- There is no task too small or too large to ignore. Life is truly rich when you can see that every moment, every act has its own special greatness.

### **Powerful Messages**

- What kind of life are you attracting to yourself with your thoughts? Is it a life of peace, serenity, positive achievement and fulfillment, or a life of stress, disorder and disappointment?
- Thoughts of worry and despair bring to you those negative things about which you are so worried. Thoughts of positive possibilities, on the other hand, bring you the opportunity to make those possibilities real.
- Do your thoughts of others attract interesting, loving, caring, generous and helpful people into your life? Or do you think the worst of everyone, and then watch as those thoughts are played out in the experience of each day?
- Your thoughts continuously send powerful messages to life about what you expect from it. What kind of messages are you sending each day?
- In every moment, let your thoughts send a positive message to yourself, to those around you, and to the world at large. You’ll attract to yourself the best that life has to offer.

# *It's not my Problem*

by Joe Krug



Many moons ago President Roosevelt implemented a novel idea in our capitalistic society—the idea that the government would sequester a portion of your earnings so that the people would have money for retirement. Now, some 70-years later, there is a consensus that the Social Security system is in need of reform. Just why should a bunch of twenty-somethings like us care? Because the shape of this reform will impact our parents, our taxes, and our retirement funding (or lack thereof) over the many years that we will actually earn a paycheck.

There are three issues that currently plague the Social Security system. First, the money collected for Social Security is not used for Social Security. Social Security has a “trust fund” drawer full of government bonds, which are nothing more than pledges to use ever-larger amounts of general revenue taxes to pay benefits. When it comes time to repay those bonds, the federal government will have to reduce spending on other government programs, increase taxes, and/or increase government borrowing. Second, it is universally known that current payouts depend on current Social Security withholdings. In the very near future, the number of elderly recipients will be greater than the number of working payees. This will create a great debt that will most assuredly come at the expense of higher withholdings or lower payouts. Finally, Social Security withholdings hurt the average family that tries to save for their retirement. Because the withholding is mandatory, this burden is absorbing a large proportion of earnings that moderate- and low-income workers could otherwise use to save for retirement or other purposes (these mandatory payroll deductions are actually larger than the income tax burden for 80% of Americans). The money that you forcibly save is not

guaranteed to you—a 25-year-old with an average income is pre-dicted to receive a (-)0.82 % rate of return on his Social Security taxes, and legally that money is not necessarily yours in the end. The Supreme Court has ruled that the government has the right to cancel Social Security at any time.

The most logical compromise that I have seen comes from The Heritage Foundation, a think-tank in Washington D.C. Currently, the payroll deduction for Social Security is 12.4% of the first \$87,900 that you earn. The plan is to allow people to voluntarily take 5% of the first \$87,900 and invest that in a personal savings account. A simple administrative and investment structure will be implemented to allow for personal freedom in how that money is to be invested; the options will be a limited listing of proven investment strategies. This will practically guarantee that one's money returns more than the current (-) 0.82%. Second, these accounts will actually be owned by the employee and not subject to the whim of the federal government. So, if you die or are disabled, you or your family will be able to collect on your hard-earned money.

The other aspect of a fair system must address the people who are owed currently, people who depend on their Social Security payments. The other 7.4% of earnings will be used specifically to pay for, and pay-off, the current Social Security debt. It is estimated—based on population demographics and inflation models—that Social Security can be completely self-reliant in 8-12 years. This assumes, and a big assumption it is, that the government will actually use the Social Security funds for Social Security and not to pay for the overall slush fund of government.

Anytime the government makes a mandate, you will be affected. Stupid laws and orders permeate our society and it is up to the informed citizen to stand-up when the government impinges on our right to life, liberty, and property. The debacle of confiscatory retirement “saving” must addressed and changed to benefit the people, not government. To learn more, visit The Heritage Foundation at <http://www.heritage.org/research/socialsecurity/index.cfm>.

## *The Wonderful World of Medicine*

### *An Interview with Dr. Leapman:*

### *Working to Improve our Medical Education*

by Micah Smith and Mike Rerko

Many of you probably have seen Dr. Leapman on campus, at Dean's Lunches, or on the MECA Competency video. His official title is the Executive Associate Dean for Educational Affairs at IUSOM. In case you were wondering what this entails, Dr. Leapman is pretty much in charge of all the educational aspects of the medical school, including undergraduate medical education (us), graduate medical education (residents), and Continuing Medical Education. Medical Student Affairs, MECA, admissions, and the regional centers all fall under this umbrella.

Dr. Leapman's aim is to make our education the best experience possible. He believes that “education is the essence of medical school,” setting us apart from entities such as research companies. And it is his opinion that medical education is changing for the better. For example, he feels that the 80-hour workweek will push medicine to find more inventive in teaching styles. Additionally, he really likes the Relationship Centered Care Initiative and has high hopes that students will become more relaxed in talking to deans and to faculty. Dr Leapman feels that we are already his colleagues and so strives to listen to our concerns and to act upon them.

Part of this vision for the future of medical education is centered on problem based learning. Ideally, Dr. Leapman would like for medical education to integrate teaching cases into every aspect of the current curriculum. He would also include social aspects of the cases, like expenses, ethical issues, insurance, and the law. Dr. Leapman feels that the Northwest center is moving in the right direction, but this form of teaching is not currently cost effective on a larger scale.

In the short term, Dr. Leapman has a number of goals. First, he would have more small group sessions integrating clinical medicine with the basic sciences. Second, he is working to create a comfortable and energetic atmosphere to promote passionate learning through all four years of medical school. He envisions all of us here at IUSOM working productively as a team. Finally, Dr. Leapman personally would like to see the competencies fully embraced and utilized at all levels of the school to optimize our educational experience at IUSOM.

On a more personal level, Dr. Leapman grew up in a small Pennsylvania town near Philadelphia. He attended the University of Pittsburgh for his freshman year and then transferred to Albright College, a very small liberal arts school that happened to be closer to his future wife. His original plans after Albright were law school. However, while an undergraduate student, he roomed with a bunch of pre-med “gunners” who thought they were the best of the best. Curious to see if you really had to be the best to take pre-med classes, Dr. Leapman took a few and surprised his roommates by soaring past their top marks in these classes. With this success to motivate him, plus his enjoyment of the material and some encouragement from his advisor, Dr. Leapman entered the medical profession as a student at the University of Pennsylvania Medical School. He married between his first and second years. When he reflects on his own education, a particular Saturday morning psychiatry course stands out. His professor made it more interesting than the average lecture by beginning each class period with a patient who exhibited the characteristics for a certain disease and then built the lecture around this case. He believes in the effectiveness of this teaching style. Med school was followed by residency at Harvard Children's Hospital and the Boston University Medical Center and a transplant fellowship before serving three years at the Naval Medical Research Institute. In 1977, Dr. Leapman came to Indianapolis to join the transplant team.

Dr. Leapman enjoys snow skiing and gardening. His favorite vegetable to grow is corn, but he really enjoys harvesting potatoes to see what odd shapes might come out of the ground. He loves to grow Habanero peppers to make his signature salsa, but he is the only one in his family that can stand the intense heat. And he enjoys reading Michael Crichton, an author who earned an MD from Harvard solely as background research for his writing.

Dr. Leapman ended our interview by sharing a teaching case. He described a patient he met before a hernia repair. The patient was at ease with the procedure and had confidence in Dr. Leapman's ability. In fact, the patient's biggest concern was not his upcoming surgery, but rather his hospital stay. The patient's first priority each day was to be home at a certain time to care for his autistic grandchild. He could not imagine missing that experience for even one day and wanted to make sure that he would be home to help take care of him. Dr. Leapman's teaching point is how crucial it is to find out what is most important to our patients. This may not be what is most important to us.





# Is it time to get away?

by Nathalie Coeller

This column is mostly for the third years, as visions of fourth year and its blissful freedom dance in their heads. But if you're an eager first or second year, you too will someday be planning electives and if you're a fourth year, you can use this to forget about the stress of interviewing and the panic of figuring out the rest of your life.

Anyway, for those of you thinking about fourth year, this is a shameless plug for going away from IU for as many electives as you can. And now, the 2005 list of top reasons for away rotations:

1. You get to go to some place you've always wanted to go. Had visions of exploring the Amazon or trekking through the Himalayas? There's a way to turn that into an exciting elective. Many organizations and schools sponsor programs for fourth years around the world, and with a little legwork and initiative you can find the venue that's right for you.
2. There's more than one way to do things. IU is a great medical school and each one of us can leave here confident in our training. That said, there are other good schools out there. Being exposed to different faculty, residents, med students and methods of operation can only serve to make you a better doctor. In addition, a letter of recommendation from an outside school can be quite a boon during the interview process.
3. You're single. Just think, traveling to exotic places, meeting new people, experiencing new cultures—how could romance not bloom?
4. You're in a casual relationship. Not sure where that new relationship is headed? Why not give it a little test? Nothing like a couple of months away to figure out if it's got what it takes.
5. You're in a serious relationship. Who'd have thought your anatomy partner would end up being your boyfriend? You know you'll spend the rest of your lives together, so why not take this opportunity for a little time apart?
6. You're married. I spent three months in a row away from my husband this summer. It sucked at times, but it reminded me how much I love my independence as well as how much I love him. And there's nothing like a reunion to put a little spark back in the relationship.
7. The food. There's only one way to find out if Thai One On and India Garden get it right—you have to sample the real thing. Fortunately, the Pad Thai in Thailand only costs about 20 cents. Of course, if you factor in the flight...
8. The people. I spent one month at Vanderbilt University's Emergency Department and could not believe how great everyone was. Not that the people in Indiana aren't super, but there's a lot to be said for southern charm and hospitality.

There are countless other reasons to do away rotations, far too many to list here. Talk it over with you advisor and your fourth year friends who have gone away. You won't regret it.

# Environmentalism 101: Let the Testing Begin

by Allison Meadows

In light of the new semester, and the fact that finals are a distant memory, I thought this would be a good time to revisit my environmental quiz. Never fear- for those of you who read the recycling quiz last year, there are new questions, and new shocking facts to amaze and appall you. Hopefully after taking this quiz, everyone will have learned something, whether or not you consider yourself an environmentalist. And for those of you who still don't know what those big green containers in the hallways are for, maybe this will encourage you to find out...So here it goes!



- 1) Approximately how many *extra* tons of trash were produced in the U.S. between Thanksgiving and New Years?
- 2) Can organic materials (like an apple core) decompose in a landfill?
- 3) One acre of trees is cut down every \_\_\_ seconds.
- 4) A VW Beetle-sized piece of bauxite ore will yield enough aluminum for how many new aluminum cans?
- 5) Approximately how many pounds of garbage does the average Hoosier throw away *every day*?
- 6) Which of the following items should *never* be thrown in the garbage? A) lightbulbs B) batteries C) old cell phones D) old cleaning products E) all of the above
- 7) Several species of fish, including Atlantic and farm-raised salmon, should not be eaten due to poor harvesting practices and high levels of \_\_\_ in their bodies.
- 8) The amount of energy conserved by recycling *one pound* of aluminum could generate enough power to supply the average household for \_\_\_ months.
- 9) How much longer will Indiana's landfill space last at the current rates of waste disposal?
- 10) Producing a single \_\_\_ requires enough fossil fuel to drive a small car 20 miles. (*hint: it's a food item*)
- 11) What is the only recyclable material that will never diminish in quality, regardless of the number of times it has been recycled?

**Answers:** (5 million; no; 8 seconds; one can; 8.5 pounds; all of the above; antibiotics and heavy metals; 22 months; 8 years; hamburger; glass)

I hope you learned something new from this quiz! As a little side-note, if this has encouraged you to be more proactive in recycling and other environmental issues, you may want to attend the next meeting of sPSR in early January - where we will address some of the problems with recycling at IUSM! Hopefully I'll see many of you there!

# African Americans in Medicine: Alexa Canady

by Aaron M. Anderson



Alexa Canady was born in 1950 in Lansing, Michigan. Her father was a dentist, and her mother was elected to the Lansing School Board. Growing up she became very goal-oriented and entered University of Michigan with a major in mathematics. As she continued through college, her interest in the subject weakened and she dropped math as her major. During the following summer, she was able to participate in a medicine-related summer program. This is when a spark was ignited in her.

Dr. Canady graduated from University of Michigan School of Medicine with Alpha Omega Alpha standing. Her internship was completed at Yale University. She trained at University of Minnesota where she was not only the first black, but also the first female resident in neurosurgery. She went on to do a pediatric neurosurgery fellowship at Children's Hospital of Philadelphia. After completing all of her training, Dr. Canady returned to Michigan where, at the age of 30, she was named chief of Pediatric Neurosurgery at Children's Hospital of Detroit.



The department quickly rose to excellence with areas of expertise in Craniofacial Abnormalities, Epilepsy, Hydrocephalus, and Tumors of Spinal Cord and Brain.



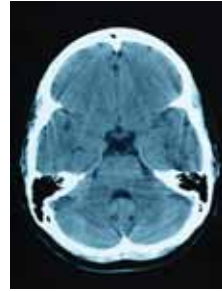
Dr. Canady helped design a programmable shunt for use in children with hydrocephalus. She has now retired, but her role in making the neurosurgery department a top

referral center has not been forgotten by all her friends and colleagues at Children's Hospital.



## Brain Scan

by Jessie Stewart



CONGRATULATIONS to David Stiasny, MS2, winner of the November Brain Scan. It was a complicated puzzle with a complicated answer. David won by less than 2 hours- you guys are QUICK.

For this month, a puzzle in honor of the many abbreviations that make up the language of medicine, without which writing a progress note would take even more time than it does. Abbreviations like CHF, CRF (which has become CKD), TIA, BRBPR, WNL, AF, VSS and of course, PERRLA.

These abbreviations are a little different. Rather than keep just the first letter of the each word, I have kept all the consonants and dropped all the vowels. Be the first person to decipher all 10, and WIN a \$15 GIFT CERTIFICATE to the JAGS Bookstore.

1. CNGSTV HRT FLR
2. CRTNN CLRNC
3. MYCRDM
4. NRLGC XM
5. CT NTRSTTL NPHRTS
6. DBTS MLLTS
7. CHRNC NM
8. STPRSS
9. STHM XCRBTN
10. BRBR

## Tips for that New Year's Resolution

by Micah Smith



New Years- a time of celebration and resolution. One of the most popular New Year's resolutions is to loose weight or to get in shape. To help those who may not know where to start or how to ensure that they keep it up, I have a

few quick and easy suggestions to help you succeed.

1. Get a workout partner. Having someone else there you trust who will push you each day to get into the gym is extremely important; it's easy to get "too busy," "too tired," or "too (insert your best excuse here)" as your motivation wanes. A workout partner can also help spot you while you exercise, let you know when your form is not correct and encourage you to get extra reps out.

2. At the beginning, you may need to schedule time to exercise to ensure your success. It may seem that you don't have time to workout, but by outlining your day you can find time to make this work. This is crucial with medical school because it can be difficult to balance everything, especially for those with a family.

3. Get a journal or notebook to keep track of your progress. Record keeping will make it easier to know what weights to use the next workout and how many reps you completed at those weights last time. Writing down the date of each workout will also let you know when you miss days. I can't emphasize enough the importance of this tip. Without a log, you will lift aimlessly and may not achieve the initial gains you were hoping for. This could lead to early frustration and eventually, quitting.

4. Your success will undoubtedly depend on eating clean, healthy food. I love grocery shopping, especially shopping for desserts. One way to help eliminate buying extraneous and unhealthy foods is to lay out a list before you leave for the grocery store. You still have to exhibit the will power to buy only what is on your list, but it definitely helps.

5. When it comes to food, a notebook can help out with this as well. Log all of the food you eat and beverages you drink...ALL of it! It is important to include all food because it is easy to forget about the little snacks or handfuls of nuts,

candy, etc that you throw in your mouth. Additionally, juices and pop are added calories that many people neglect to account for. Furthermore, pop and lunchmeat contain lots of sodium stressing your body and aiding in water retention. I suggest buying a large turkey or chicken breast, baking it, and slicing it up for healthy, flavor-filled lunch sandwiches. To help with the busy schedule of school, make larger batches of food and divide it into small portions that will make easy lunches later in the week.

There is no reason why your New Year's resolution should add stress to your life...it should deliver you from stress! The most important tip is to have fun with your workouts. Make them enjoyable and your escape from medical school. This is your time away from it all. Good Luck!

## Jordan's Meatballs



by Jordan Drazer

- 1 large or 2 small bags Italian Meatballs -thawed
- 1 jar Heinz chili sauce
- 1 can sauerkraut
- 1 can whole cranberry sauce
- 1 cup brown sugar.

Mix and let marinate in fridge overnight. Bake @ 350 for 30 minutes, stirring after 15 minutes. Or you can use a crockpot and keep on low for several hours until heated throughout.



Honesty \* Collegiality \* Fairness  
Equal Treatment \* Mutual Respect

# Teacher Learner Advocacy Committee



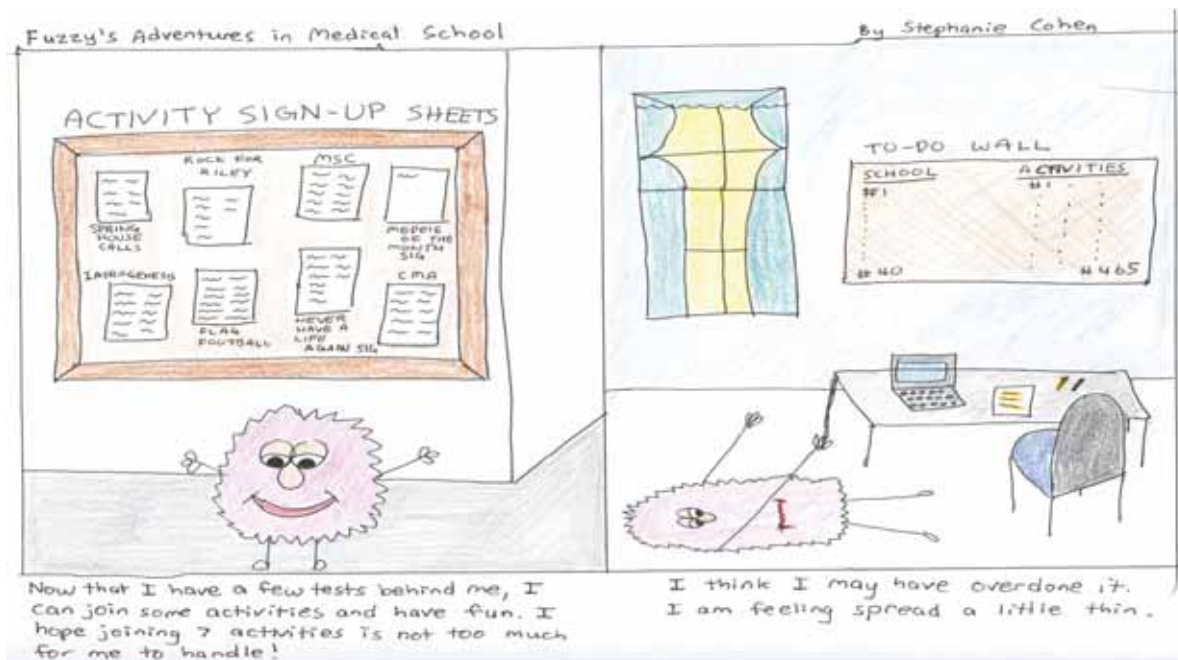
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suggestions for improving our  
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Visit:  
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Mutual Respect \* Equal Treatment  
Fairness \* Collegiality \* Honesty



## *A Call for Nominations*

Is there a professor/faculty member that you feel has gone above and beyond their call of duty towards student education or philanthropy? If so please take several moments to help your outstanding educator gain national recognition for their superlative efforts. Nominate an educator for the AAMC Humanism in Medicine Award.

The AAMC Humanism in Medicine Award is made possible through the generous support of the Pfizer Medical Humanities Initiative. The recipient of the award will receive \$5,000, and the OSR chapter from the recipient's institution will receive \$1,000. The recipient will be announced at the 2005 AAMC Annual Meeting in Washington, DC. It would be wonderful to have one of our own outstanding faculty members nationally recognized for their contributions to the IUSOM and Indianapolis community.

To nominate a Indiana University School of Medicine faculty or professor please contact Anthony Harris via e-mail at [<antnharr@iupui.edu>](mailto:antnharr@iupui.edu).