Simulation

Among the many ways the College of Medicine is leading collaboration to improve health
Features

4 New Researcher Joins UICOMP
8 Local Medical Study Using Simulation to Reduce Complications
10 Jump Trading Simulation & Education Center: A Dawn in a New Era of Medical Education, Training and Innovations
14 When Medicine and Engineering Collide
15 See how Simulation is having an Impact in the Real World

Departments

3 From The Dean
6 Student Life
16 College Notes
17 Resident Rounds
18 Announcements & Events

Questions, comments or story ideas for Pathways? Call 309-671-8404 or email dhaney@uicomp.uic.edu.

Pathways is also available online at peoria.medicine.uic.edu/pathways.
In the following pages, you will get a glimpse of the exciting programs of the Jump Trading Simulation & Education Center (Jump). Jump is a collaboration between OSF HealthCare and the University of Illinois College of Medicine at Peoria. Although the building is just opening this April, the educational and research programs at Jump are well underway. Thanks to the generosity and vision of donors Bill DiSomma and the DiSomma Family Foundation, Jump will improve outcomes and lower healthcare costs through innovative simulation training of medical professionals. When people ask me “what is simulation or why is simulation important” I tell them about the first time I was handed a simulation baby. This baby, a manikin, actually coos when it’s ‘happy,’ cries when it’s ‘unhappy,’ and can even stop breathing. As I’m holding this simulated baby in my arms, it suddenly begins to cry, so naturally I start rocking this baby – this plastic baby – to soothe it because it seemed so real when it happened. It’s this ability to make a simulated event feel real that allows us to provide exceptional training to residents, medical students and healthcare providers. The advantage of simulation is that you can teach skills you couldn’t teach in real life without involving real patients, or you can teach events that don’t happen very often. For example, mercifully, it is a rare situation when a child stops breathing – but when it does happen, you want everything to work perfectly, every member of the team to do their job and know what should happen and perform it flawlessly. So how do you practice that response? How do you improve that response? You can do that with simulation. But simulation goes well beyond manikins and devices. You can also teach communication skills. I think that communication is at the heart of everything we do, whether you’re a physician or a nurse, or even a patient. It’s how we communicate together that makes the system work. People want their physician to show that they care about them as a human being, not just that their doctor is treating an ailment. We really need to emphasize these communication skills, and I believe that simulation is one way of teaching that. Jump offers so many opportunities…collaboration on biotech devices with engineers, new curriculum that builds stronger physician-nurse teams, process redesign that improves patient education, evaluation of patient safety issues, the list goes on. I believe we have exceptional health care in central Illinois. As Jump evolves it will help attract future physicians, spur scholarship and research, create innovations in health care and have a huge net impact on our community, our region and perhaps the world. Generations of learners and instructors will come to Jump to study, collaborate, and create, all with the same goal – to provide the best care to every patient, every time.

Sincerely,

Dr. Sara L. Rusch
Regional Dean
UICOMP recently welcomed a new researcher and her work in cell “signal reception and desensitization” which could provide future, unique methods for delivering cancer-fighting drugs.

Dr. Eleonora Zakharian brings funded research to Peoria in Transient Receptor Potential ion channels and biological polymers such as Polyhydroxybutyrate and Inorganic Polyphosphates – molecules found in all living organisms.

Zakharian says understanding how certain molecules and their complex structures operate could shed light on more easily delivering cancer-fighting treatments and inhibiting cancer cell growth.

Think of when you get a new perfume or cologne but soon after lose your ability to “smell” it?

While a simplistic analogy, that same sort of reception and desensitization is at the heart of Zakharian’s research, which is funded by the National Institutes of Health and by the American Heart Association.

“Cells, like our noses, can become desensitized, and ‘close’ up,” says Zakharian. “We’re looking at finding the tools to keep specific cells ‘open’ and hopefully answer some of the questions of how to treat cancer doing so.”

Zakharian’s arrival at UICOMP represents continued growth in research at the College of Medicine, including in the area of cancer. She is joined in her lab by her research assistants, Drs. Lusine Demirkhanyan and Xiaohui Sun.
Nearly 50 fourth-year medical students from the University of Illinois College of Medicine at Peoria “matched” to residency programs in their chosen medical career path.

Jubilation and cheers erupted at 11 a.m. when students tore open the white envelopes containing their name and the program of where they would train to continue their career in medicine during a ceremony at WeaverRidge Golf Club in Peoria.

“It’s a big day, an exciting day,” said UICOMP Regional Dean Dr. Sara Rusch. “It’s a step toward the rest of your life. I think back to the day that I matched to Peoria. I came here and I met my husband — and seven children, six grandchildren and a full career path (later), I remain in Peoria. So the place you go next will have a big impact on your life, but in turn what you are and who you are will have a bigger impact. So wherever you go, you will have the opportunity to follow the career you have chosen, an opportunity to meet wonderful new people and an opportunity to become what you want to become. This is a step forward will bring you many good things and help you fulfill your dreams.”

In Peoria, all 70 open residency positions were filled. About 13,500 students applied to the Peoria programs and 800 interviews were held. Among those filling the first-year residency positions in Peoria included four UICOMP students in Emergency Medicine, Pediatrics and Surgery.

For a list of UICOMP students and their “matched” residency programs, visit us online at peoria.medicine.uic.edu, click on “Match Day” and then “Class of 2013.”
Merci to all who attended this year’s Snowball! About 200 people made the voyage for the soiree, this year themed a “Midnight in Paris” to enjoy the dancing, dinner, auction, music and fun at the Embassy Suites Conference Center.

Docapella made an appearance along with smaller representations of the Eiffel Tower and the Arc de Triomphe. SnowBall provides a unique opportunity for students, staff, and faculty members to gather for fun-raising and FUND-raising. Proceeds from SnowBall are applied to scholarships that help medical students participate in rotations in underserved areas.

Boule de neige
(Snowball) 2013

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PeoriaCares

UICOMP joined some 60 medical schools and institutions across North America in taking a stand for humanism in medicine by observing the third Gold Humanism Honor Society (GHHS) Solidarity Day for Compassionate Patient Care.

Members of the Peoria community were invited to submit their story of caring behavior that has occurred or is occurring in a local healthcare setting in the online journal.

The Peoria Chapter of the Gold Humanism Honor Society announced the results of its first annual Expressions in Humanism contest.

The winning entry was “A Measure of Performance,” by Matthew Chia, Class of 2015. Honorable Mention goes to Brittany Price, Class of 2015, for her poem, “Perception.”

Entries are posted to the GHHS online journal PeoriaCares, which can be found at: http://peoriacares.blogspot.com/.

PERCEPTION
By Brittany Price, Class of 2015

It could have been the most miniscule part of your day
But through the eyes of another, their life could change.
Whether it is talking with a lonely person, or sitting with someone who is sad,

You never really know the impact you will have.
So, maintain an awareness of others
While fumbling throughout your day,
Because in some cases, you may never be able to take your influence away.

Five minutes with a piece of your heart shining through.
What could five minutes mean to you?

David Holt, a second-year medical student at UICOMP, was among 40 health care students nationwide selected for academic excellence, leadership and community involvement and named 2012 Tylenol Future Care Scholars.

The application for the scholarship included an essay.
“I have developed an intense interest in understanding what I can do to better people’s lives through improving their health,” Holt wrote.
“Medicine is the area where I feel I can make the most meaningful impact.”
The scholarships range from $1,000 to $5,000.
Mini med school
STILL GOING STRONG 10 YEARS LATER

Where Valentine’s Day is about opening one’s heart to share feelings, a group of UICOMP and Manual Academy students literally opened some hearts in February. They were pig hearts, of course.

Called the Manual Science Enrichment Program, the annual series of interactive classes is put on by volunteer UICOMP medical students and is designed to encourage minorities and students of low socioeconomic background to gain more interest and knowledge in science, and hopefully to pursue careers in medicine.

Among the topics this year included pig heart dissection to help teach cardiology, a suturing clinic, sex education and relationship health as well as a career pane. Each of the 10 two-hour programs include dinner, time for medical students to mentor Manual students and the activities.

This is the 10th year since the inception of the program, funded solely through donations. The Manual program was founded in 2002-2003 by ’04 UICOMP grad Patrice Carter.

Reached by phone recently, Carter, a surgeon in the Chicago area, said the idea for the “mini med school” program started as a way to provide community service and mentorship, adding she was thrilled UICOMP students have kept it going.

“I guess that means it was really needed in the community,” said Carter, who after hearing the program’s agenda and structure this year added “that’s great, very much like the mission that we started.”
Infections related to a single medical procedure causing thousands of deaths each year and adding billions of dollars to the cost of the U.S. healthcare system is getting a thorough exam by doctors at the University of Illinois College of Medicine at Peoria and OSF Saint Francis Medical Center.

Using simulation technology, doctors are looking at how they teach residents how to insert a central line. It’s also one of many simulation projects already taking place under Jump Trading Simulation & Education Center.

“What we’re improving on is physician resident education, patient care and patient safety,” says Dr. Joe Peters, a Clinical Assistant Professor of Surgery at UICOMP and the primary investigator behind the procedural study.

Peters, an emergency medicine physician at OSF, walks resident physicians step-by-step through the process of preparing patients, their work space and tools, and then through the procedure using actual medical equipment and a specially-constructed manikin.

“Inserting a central line is more than just the procedure itself,” notes Peters, “it’s about appropriate set up and preparation, maintaining sterile technique and learning how to avoid complications of the procedure. With experience in the procedure comes confidence.”

Dr. Lisa Barker, Dr. Saad Alvi and Dr. Elsa Vazquez-Melendez are co-researchers in the project. Barker says simulation is increasingly becoming a vital and practical part of education for medical students and resident physicians.

“Everything is how it would be in the Intensive Care Unit or Emergency Room– the only difference being there’s not a real person lying in the bed,” says Barker, also an emergency medicine physician at OSF. Dr. Barker also runs a “blue alert” simulation – when a patient becomes unresponsive and has no pulse – to improve communication and skills for UICOMP medical students.

The UICOMP study will assess more than 80 physician residents at OSF, and in fact, OSF is requiring catheter placement training for all residents. The goal is to learn the most cost-effective way to improve medical training and in turn improve health outcomes for patients.

“It’s just one example of the research and training currently taking place that will continue and grow under the Jump Trading Simulation and Education Center,” adds Barker.

Nationally, serious or fatal complications related to medical examination or treatments occur in about 3 percent of hospitalized patients, according to the National Academies Press. Medical errors account for more than one million injuries and up to 98,000 hospital deaths each year. One study notes central venous catheter infections in the U.S. are associated with increased hospital length of stay and excess healthcare costs, ranging up to $56,000 per infection episode.
Twenty to 30 years ago, one of the big advancements taking off in surgery was laparoscopic surgery. Today, a new technique using a single incision through the belly button, essentially a “scarless” surgery, is increasingly gaining in use among surgeons.

The single incision procedure is still so new, Mohammed Admani, a second-year med student at UICOMP, believes residents and surgeons could benefit from a simulator device to train this new technique.

Early in the design phase, Admani will spend much of the next two years planning, building and testing a device to simulate an appendectomy on a pediatric patient, as part of a James Scholar research project, currently named Construction and Validation of Novel Pediatric Single Incision Laparoscopic Surgery Simulator.

“While there is no substitute for hands-on training, it is absolutely risky for patients if you have a novel surgeon, and with that risk, it probably limits the amount of training that residents actually get starting out,” says Admani. “I feel like this simulator can add to the training obtained through programs like the Fundamentals of Laparoscopic Surgery. This way people have a new way to practice this technique.”

Admani, a bioengineering graduate from the McCormick School of Engineering at Northwestern University, is paired up with Dr. Charles Aprahamian, a pediatric surgeon at Children’s Hospital of Illinois and Clinical Assistant Professor of Surgery at UICOMP and Dr. John Vozenilek, Executive Director of Jump Trading Simulation & Education Center and Associate Professor of Clinical Surgery at UICOMP.

Admani says he is observing the actual procedures and researching anatomy using patient imaging; he wants it to “feel like the real thing” when performing the minimally invasive operation.

For nearly 40 years at UICOMP, medical students have conducted research projects with faculty members to develop in-depth knowledge in specific areas of medicine as part of the James Scholars. The program takes students from concept, through proposal, design, implementation, data gathering, analysis and finally to writing about the findings.
A Dawn in a New Era of Medical Education, Training and Innovations

Jump Trading Simulation & Education Center nearing completion

A 58-year-old man arrives at the hospital, complaining of not feeling well when a nurse notices he is suddenly unresponsive.

An infant, acutely ill with breathing problems, is progressively getting worse.

Tests show a patient has diabetes but the patient has yet to be told.

What happens next in each of these situations is vital to the patient’s health outcome – actions that can impact life or death, recovery time, even a patient’s experience that will affect future choices. The decisions that happen next in each instance also critically impacts health care resources.

Jump Trading Simulation & Education Center (Jump) is revolutionizing medical education and training by replicating realistic events in a world-class simulation facility so patients receive the best outcome and experience every time.

Here, teams learn and train together, just as they work in the real world. Here, individuals and teams can hone their skills – even create and test innovative medical devices and training models – in a safe environment to benefit and improve the entire health care system model.
The finishing touches

The finishing touches are taking place and equipment is starting to go in for what soon will house the future to improving healthcare, and changing the model by which it is delivered. Construction of the state-of-the-art virtual medical training center is moving along on budget, and on time in order to be completed in April 2013.

A collaboration of the University of Illinois College of Medicine at Peoria and OSF HealthCare, Jump is among very few centers in the country using simulation across the spectrum to advance education, improve performance and build research. The finished building, being erected adjacent to OSF Saint Francis Medical Center, is six stories tall and cover more than 150,000 square feet. Jump and all the vital aspects of a virtual hospital, including a virtual Intensive Care Unit, inpatient and outpatient rooms, an operating room and transport area – all to simulate medical scenarios – will be located on the first two floors.

Education & Performance Improvement

Simulation offers learners the opportunity for improvement and enhanced learning that a lecture or traditional learning doesn’t.

Medical students, residents, physicians and nurses together can practice “blue alert” responses in Jump’s virtual Intensive Care Unit. Medical students can practice suturing or drawing blood in Jump’s Skills Lab. Patient transfers from the bed of an ambulance will be assessed in Jump’s Regional Transport Center, and residents and physicians may practice laparoscopic surgery in the virtual training lab. Jump was planned for and is poised to improve core competencies skills and enhance performance.

Simulation provides learning opportunities that have a real impact on lives.

“A resident, who was the senior resident on call for the general pediatric unit, had a patient with acute anaphylaxis (a life threatening allergic reaction) requiring immediate management," recalls Trina Croland, MD, assistant professor of clinical pediatrics at UICOMP and a hospitalist at Children’ Hospital of Illinois. “The resident said the only place she’d ever seen what was happening was in the sim lab when we taught a similar case. She said she remembered exactly what to do and the child did fine but without the sim lab case she felt she wouldn’t have been prepared to act so quickly.”

“With Jump, we will be able to research which devices and strategies provide the best outcomes for patients. These outcomes include better health, but also shortened hospital stays, increased cost-effectiveness and improved patient satisfaction.”

Sara Rusch, MD
Regional Dean, University of Illinois
College of Medicine at Peoria
IN THE NAME
The Jump Trading Simulation & Education Center is funded in part by a $25 million gift from Jump Trading, a Chicago-based trading firm. The gift was the largest individual gift in either institution’s history.

IN THE BUILDING
VIRTUAL UNITS
Intensive Care (ICU): Two units will simulate an ICU patient room using high fidelity patient manikins.

Operating Room: From scrubbing down to the light booms, this room is fully equipped to be arranged as a surgical suite, interventional lab or trauma room.

Patient Care: Six patient rooms can be set up to simulate an inpatient nursing unit, outpatient physician office or consultation rooms.

SIM LABS
Innovation Lab: Engineers and clinicians will investigate how simulation can increase health care quality and safety.

Skills Lab: 24 work stations provide space to train students in medical skills, including laparoscopy, central line placement, drawing blood and catheterization.

Virtual Reality: Up to eight gaming-like simulators provide training for surgical procedures.

Regional Transport: An ambulance and studio apartment provide simulation for patient transfers and at-home response and care.

Conference areas: A 250-person auditorium, 75-person lecture hall and eight conference rooms provide ample space for conference-style learning events and presentations.

Abraham Hafiz Rodriguez was a second-year medical student at UICOMP when he underwent a blue alert simulation – responding to a patient in cardiac arrest. In the first two weeks of his third-year while on a rotation of internal medicine, he experienced the real thing.

“I did what I was supposed to do, I went into the room, looked around to see what I could help with – and I felt very comfortable in that situation despite the high amount of stress involved,” Rodriguez recalls, who took over chest compressions for a person who was quickly tiring. “I really have no doubt in my mind that had I not had that simulation experience I would not have stepped in and done as good a job (reacting so quickly) trying to save that person’s life.”

Every day, new curriculum using simulation is being developed to enhance communication skills, leadership, knowledge and competency. Jump combines the teaching and research know-how of UICOMP alongside the clinical expertise at OSF to ensure the best teaching practices are taught across all disciplines.

Innovation
Jump will be a training- and testing-ground for research and development of new procedures and medical devices, including a way to improve community education.

Innovation at Jump involves clinicians collaborating with engineers to solve clinical problems, developing and patenting new devices and producing new simulators to address clinical demands. Jump provides simulated clinical space to improve new and existing medical equipment and is increasing research capacity.

Jump is pairing faculty and clinicians at the University of Illinois College of Medicine at Peoria and at OSF with engineers and biomedical engineers at the University of Illinois and Bradley University.
Already, several projects are underway, including construction of an abdominal examination trainer, a simulated foot to practice toe taps and a simulator that will help practice for testing and identifying potentially life-threatening circulation loss.

A research and training project is looking at how residents learn and practice inserting an intravenous catheter into the neck and shoulder, a practice sometimes linked to infection.

Measured outcomes are key

If simulation training leads a patient to spend even one less day recovering in an ICU, there is a definite savings to the provider, to the insurer, and for the patient – both in terms of cost and reduced suffering. If simulation training improves communication skills so patients are more likely to follow after-care instructions, there can be a huge savings. If Jump, a virtual hospital, can provide a better, faster way to turn over a room or eliminate redundancies, there is a savings. If a new simulator device helps rural doctors identify potentially life-threatening situations, there is a savings.

Jump is doing this and much, much more. A forward thinking environment is integral for innovation to succeed.

And in doing so, Jump will attract a whole new wave of physicians and health care professionals to Peoria to conduct research, to teach and provide additional patient care.

“Once open, this facility will transform the way we train our physicians, caregivers, and first responders; when they are faced with a ‘real world’ situation, they will have lived it in simulation and be able to provide the best possible care for those we serve.”

John Vozenilek, MD
Executive Director and Chief Medical Officer at the
Jump Trading Simulation & Education Center

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Fun Facts

All Shapes, Sizes, and Costs

Jump has a family of medical manikins, from sim adolescent to sim man to sim mom who gives birth to sim baby. Some have basic functions, while others (technically speaking) breathe, blink, cry, sweat, and have pupils that dilate. The average cost is $50,000 but may range up to $150,000 or more.

Ultimate Room Makeover

Six patient rooms can be designed for inpatient, outpatient or consultation settings, depending on the simulation. That means individual furniture is needed for each room for each of the three settings.

And Action…

Jump will be outfitted with more than 50 high definition cameras and 113 microphones, including Jump’s virtual operating room, where cameras will be located in the lighting booms for a top-down look.
When Medicine and Engineering Collide

Imagine holding a model replica of your brain or heart, or other part of your body in the palm of your hand just hours after undergoing a simple scan. The technology is here. Thanks to advances in computer software and improvements in manufacturing capabilities, a doctor could order up a CT scan for their patient, and hold a replica model the very same day.

Jump Trading Simulation and Education Center took that first step recently. Image data collected from a CT scan of a foot was uploaded to software that interfaced with a 3D printer, a machine that can fabricate objects from a powder using a layering process called additive manufacturing.

"Medicine in some areas is just starting to catch up with technology," says Sabeen Admani, a bioengineer and simulation specialist at Jump Trading Simulation and Education Center, holding the model bone structure of the foot in her hand. "I really think this is going to pave the way for medicine – this is the future."

The material resembles tiny sand particles fused. It can be sanded or coated for any number of desired finishes.

For the foot, Admani and Jim Rowland, another simulation expert at Jump, are teamed up with Dr. Thomas Santoro, a rheumatologist and Associate Dean of Graduate Medical Education for the University of Illinois College of Medicine at Peoria, to create a foot model to train physicians how to "tap" a toe joint.

Santoro recalls the first time he "tapped" a toe joint – a vital procedure needed in order to ascertain whether a patient has gout or a possible bacterial infection: "You have to see someone with gout to appreciate it," says Santoro, adding that in the throes of a gouty attack, the big toe can get quite inflamed and swollen, "even laying a sheet on it can be painful for the person."

As such, pawing around a person’s toe with gout or infection, much less piercing it with a syringe, is an excruciatingly painful experience for patients. Complicating matters – especially for a physician novice to the procedure – is the space to target, which is "hairline." But foregoing the procedure means a possible infection could go untreated, a potentially lethal complication.

Rowland will use the manufactured bone structure of the foot for the core of the model and use the same data to produce a hollowed mold. The mold will help to create the layers of muscle, fat and skin to encompass the model. A joint space at the big toe will hold fluid, simulating an actual joint.

When complete, the gouty toe model will offer the opportunity for medical students, physician residents and practicing doctors the chance to train on the model before they perform it once on a live person.

Congenital Heart Series

Jump is working to 3D print accurate models from MRI and CT scans of pediatric congenital heart disease patients. Ultimately, we hope to delineate the different heart chambers and major vessels by printing them in a range of colors. Additionally, extra focus is being placed on creating models with accurate intracardiac structures. Once perfected, these models will not only serve as a good learning tool, but could eventually be used in the planning of difficult surgeries.

Compartment Pressure Testing

Common in athletes, compartment syndrome is when there is increased pressure in one of the muscle compartments, restricting blood flow and leading to nerve and tissue damage. To accurately diagnose this potentially life-threatening condition, a needle with a pressure gauge needs to be inserted into the selected compartment. The simulator will serve to teach students the techniques involved in compartment pressure testing in a safe training environment.

Abdominal Examination Simulator

Abdominal exams are a common procedure. The exam involves palpation of the four quadrants of the abdomen. This simulator will serve to build confidence and teach students how to properly perform an abdominal exam by outputting the force reading and location of force applied. Ultimately, students will be able to compare the data collected during their simulated abdominal exam to that of an expert examiner and adjust their methods accordingly.
"I did a Code Blue Simulation at UICOMP before the start of my M3 year, and it ended up paying off big time – during the first week of my first rotation of Internal Medicine at OSF, I was put in a code blue situation.

The simulation experience I had allowed me to feel comfortable enough to jump in and help perform chest compression rotations until the code was called off. It was a scary experience, but thanks to the simulation training, I was able to get into the crowded room, see that help was needed with compressions, and volunteer to help with them successfully. Given my lack of hospital experience at that time, without the simulation training I do not feel I would have been as confident and capable in that situation."

HUGH ADAMS, MD
UICOMP Med-Peds Resident

"We had a transfer of a 2-month-old from an outside hospital. We were told that she had RSV with a potentially serious illness, but she was stable. When I first assessed her, she had an abnormal breathing pattern that wasn’t very efficient."

After placing the infant on a nasal cannula, followed shortly thereafter by a breathing treatment, she initially responded well, he said. But that soon changed and the baby needed to be intubated.

"Simulation lab gave me a foundation for when to use what therapy. It allowed me to test that knowledge practically, in a pretty ‘real’ setting and gave me feedback in a non-confrontational way. In reality this baby would have likely done just fine with all the hospital support, but I was more apt to manage her because of sim lab, things went very smoothly and she was fine."

ALLISON FAHY, MD
Department of Pediatrics, Medical College of Wisconsin
(And former UICOMP Pediatrics Resident)

"We had a session in the sim lab where a patient was given an antibiotic and developed an anaphylactoid reaction. Within a week of the session, I was on call when the charge nurse called and said that one of the patients was having difficulty breathing and I needed to see the patient right away.

I couldn’t believe how similar the case played out in real live when compared to the simulator.

The simulator sessions are excellent. I felt confident heading into that emergency situation. Sim sessions are great because they help us work together and trust each other. Although some sim has challenges with being ‘not as life-like’ as the real world, I think the overall teaching lesson is 100 percent applicable.

When we did simulator we talked about particular signs and symptoms that show you the patient is deteriorating. It’s like an outline of what to expect next after an intervention."

TRINA CROLAND, MD,
Assistant Professor of Clinical Pediatrics
University of Illinois College of Medicine at Peoria

“When you hear the impact that simulation is having on the care of real patients, it’s really the essence of why we do simulation. Simulation is really about improving patient care.”

– Trina Croland, MD
Duane and Mary Cullinan
PROFESSORSHIP IN SIMULATION OUTCOMES

The Duane and Mary Cullinan Professorship in Simulation Outcomes was established thanks to the generosity of the Cullinan Children, Elizabeth, Michael and Stephen.

In May, the University of Illinois College of Medicine at Peoria will hold the investiture ceremony for Dr. John Vozenilek, Executive Director of the Jump Trading Simulation & Education Center and Associate Professor of Clinical Surgery for the College of Medicine.

The event will recognize the Cullinans for their generous gift, which establishes the new professorship, and Dr. Vozenilek, who leads the Jump Trading Simulation & Education Center, a collaboration of the University of Illinois College of Medicine at Peoria and OSF HealthCare.

ARCHITECTURE AWARD

From discovering cell structures to the building structure – the University of Illinois College of Medicine at Peoria is among the top.

The Central Illinois Chapter of the American Institute of Architects recently awarded the new Cancer Research Center and entrance at the University of Illinois College of Medicine at Peoria (UICOMP) an Honorable Mention at their annual Design Awards.

Thanks to unwavering public-private collaboration and support, the Cancer Research Center at UICOMP completed a $13 million expansion project in December 2011. Architects for the project were from Peoria-based Farnsworth Group, Inc. The 2012 AIA Central Illinois Design Awards recognize significant achievements in the profession of architecture.
Resident ROUNDS

Enthusiastic about the Changes

To Aura Badin, UICOMP and OSF have built a Cadillac in terms of the new Cardiology Fellowship Training Program, the first in Central Illinois.

"Establishing a new program is like buying a new house or car, you manage it with extra care to assure its success," says Badin, "and I feel there was attention to details here with the program – how it was to be academically and clinically structured."

"Some people may be skeptical about going into a new program but I had seen it inside and out. I'm excited about the opportunity and the challenges, and I made the decision to stay here in part because I'm confident we are going to be able to achieve a lot. The cardiology fellowship is a game changer here and a cornerstone for many other subspecialty fellowships in the Department of Internal Medicine. This will translate into better patient care, more regional oriented research, and improvement in education as a whole."

UICOMP announced in October the establishment of a new three-year Cardiovascular Disease Fellowship Training Program, which was approved by the Accreditation Council for Graduate Medical Education. By the summer of 2015, the program at OSF Saint Francis Medical Center will have up to nine fellows.

Badin, 32, Internal medicine faculty at UICOMP, this summer will be one of three new fellows. A native of Syria, he graduated from Damascus University – Faculty of Medicine before completing an internal medicine residency at Mount Sinai – Jersey City Campus. Badin then went on to complete a cardiology research fellowship at Mount Sinai-New York before coming to Peoria in 2011 as Chief Resident of Internal Medicine.

People here seem to be very enthusiastic about the changes, he adds.

"The fact this program got approved from the first shot, that some experts said it doesn’t need revisions and we applied for three positions and got all three, means a lot," says Badin. "Dr. Graumlich, Dr. Oren, in collaboration with Dr. Lynch are very pro-active; already, they’ve started a structured cardiology rotation for residents and they keep revising it to integrate more and to improve. They also are hiring research staff – everyone is so enthusiastic."

Candidate suggestions for a future Resident Rounds can be directed to dhaney@uicomp.uic.edu.
Dr. de Alarcón

Dr. Pedro A. de Alarcón, William H. Albers Professor and Chair of the Department of Pediatrics at UIICOMP, was the lead editor on a new book release this year titled “Neonatal Hematology,” which documents the pathogenesis, diagnosis and management of hematologic problems.

A description of the second edition book notes a focus “on clinical issues and problem-solving, this is a fully revised and updated revision of a successful practical guide to the pathogenesis, recognition and management of hematologic problems in the neonate … New to this edition are an expanded coverage of neonatal oncology, cord blood utilization, neonatal screening, prenatal diagnosis and hyperbilirubinemia.”

Three other UIICOMP faculty are contributors to the book as well: Dr. Karen Fernández, Dr. M. Jawad Javed and Dr. Mary Beth Ross.

Dr. Finkenbine

Ryan Finkenbine, M.D., Chair and Professor of Clinical Psychiatry of the Department of Psychiatry and Behavioral Medicine for the University of Illinois College of Medicine at Peoria, was named among the Best Doctors in America by his peers.

Founded in 1989 by Harvard Medical School physicians, Best Doctors serves 30 million members in 70 countries. For over 20 years, the organization has asked physicians to identify the doctors they consider the leaders in their field.

This is the eighth year Finkenbine has earned such recognition.

Finkenbine, board certified in general and forensic psychiatry, came to UIICOMP in 2009. Since then, Finkenbine and his staff in collaboration with Methodist Medical Center have developed a psychiatry residency program, which is ACGME-accredited and accepted its first group of students in 2011.

Faculty News  The following is a summary of recent faculty additions and promotions:

Dr. Lusine Demirkhanyan has accepted the position of Research Associate II in the Department of Cancer Biology and Pharmacology.

Dr. George Johnson has accepted the position of Visiting Professor of Clinical Pediatrics in the Department of Pediatrics.

Dr. Francis J. McBee Orzulak accepted the position of Associate Residency Program Director, Department of Medicine/Pediatrics.

Dr. Xiaohui Sun has accepted the position of Research Associate II in the Department of Cancer Biology and Pharmacology.
Library Of The Health Sciences Names Featured Authors

Peoria’s Library of the Health Sciences recognizes the following Featured Authors:


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**upcoming UICOMP events**

**Thursday, April 25**
*Jump Trading Simulation & Education Center*
Dedication and blessing of the new, world-class simulation facility

**Thursday, April 25**
*Robert D. Hart, MD Endowed Lecture*
Keynote speaker is Dr. Bruce Perry, Senior Fellow of the Child Trauma Academy, author of *The Boy Who Was Raised As A Dog* and adjunct Professor in the Department of Psychiatry and Behavioral Sciences at Northwestern University School of Medicine
Embassy Suites Conference Center • East Peoria • 6 p.m.
For more information, call Pediatrics at 309-655-4242

**Monday April, 29**
*Jump Trading Simulation & Education Center open house*
UICOMP students, faculty and staff are invited to interactive simulation tours of the new, world-class simulation facility
Jump is located on the OSF campus in downtown Peoria
11:30-2 p.m.
309-677-0800

**Thursday, May 2**
*Student Awards Night*
Embassy Suites Conference Center • East Peoria • 5-8:30 p.m.

**Saturday, May 4**
*Convocation*
Peoria Civic Center Ballroom • Peoria • 1:30 p.m. ceremony, followed by a reception from 3:30-5 p.m.
CARING FOR THE STATE

Without the College of Medicine, physicians in the state of Illinois would be considerably fewer and farther between. The University of Illinois College of Medicine and its four campuses train and retain physicians across the state who serve nearly 90 percent of the counties in Illinois. Our mission is to produce new knowledge in the medical sciences, develop best practices in health care delivery and educate the next generation of physicians and biomedical scientists committed to serving the needs of Illinois and the nation.

1 of 6 physicians in Illinois have received their MD or resident training from the College of Medicine.

12,411 total alumni in Illinois

Nearly 70% of minority physicians in Chicago received College of Medicine training.

60% of Illinois’ minority physicians are trained at the College of Medicine.

47th in NIH funding among 128 medical schools.

3rd among all U.S. medical schools graduating primary care physicians.