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PG 7

Social Media and Electronic Communication: Assets or Liabilities?
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Contents

News from the Alabama Board of Medical Examiners:
Questions About the New RMS Rule ........................................ 4
Primary Care Physician Opportunity ........................................ 4
Telehealth Helps Patients Overcome Barriers to Care .............. 7
Social Media and Electronic Communication:
Assets or Liabilities? ................................................................. 8
2017 University of Alabama Rural Medical Scholars XXII ...... 10
12th Rural Medicine Program ................................................. 12
2018 Physicians’ Alabama Opportunity Fair ....................... 14

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Recap of the Rule
The rule requires the use of medically appropriate risk and mitigation strategies (RMS), which will vary from patient to patient.

Examples of risk evaluation and mitigation strategies include, but are not limited to, pill counts, urine drug screening, prescription drug monitoring program (PDMP) checks, consideration of abuse-deterrent medications, monitoring the patient for aberrant behavior, providing a patient with opiate risk education prior to prescribing controlled substances and using validated risk assessment tools.

It is not expected that a physician would use all RMS with all patients on every visit.

The Board received comments regarding the use of RMS when prescribing controlled substances for treatment of conditions other than chronic pain, such as psychiatric conditions, cancer and end of life. All controlled substances carry some risk of abuse or misuse, so RMS should be used as one element of a physician’s “best practice” when prescribing controlled substances for any reason.

However, the rule requires use of these strategies only when prescribing controlled substances for the treatment of pain. Concerning the use of RMS in the treatment of cancer patients with controlled substances, the Board is of the opinion that the best practice when prescribing controlled substances for the treatment of acute, chronic or cancer pain includes the use of medically appropriate RMS, which will vary from patient to patient at the discretion of the physician.

For Physicians
Beginning January 1, 2018, all Alabama Controlled Substances Certificate (ACSC) holders must earn or obtain, every two years (for current registrants, during 2018-2019, 2020-2021 and so on), two AMA PRA Category 1 Credits™ or equivalent continuing medical education credits in at least one of the following areas:

• Controlled substances prescribing practices
• Recognizing signs of the abuse or misuse of controlled substances
• Controlled substance prescribing for chronic pain management

For Physician Assistants and Nurse Practitioners
Qualified Alabama Controlled Substances Certificate (QACSC) holders (PAs/CRNPs/CNMs) are required to obtain, every two years, four AMA PRA Category 1 Credits™ or equivalent continuing medical education credits through a board-approved course or courses. Note: Beginning with the 2018 renewal application, QACSC holders will be required to input the name and date of the course(s) taken and upload documentation of course completion.

Visit our practice website at perrymedicalclinic.com for additional information. Cherokee County is located on Weiss Lake, surrounded by the Appalachian Mountains. Cherokee-chamber.org provides information about our location and other resources. Send résumé or inquiries to perrymedadministrator@tds.net.
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The Alabama Department of Public Health (ADPH) began pursuing telehealth in 2014, using its technical expertise with video production, distance learning and video conferencing for the public health workforce. In 2015, the department initiated the Public Health Telehealth Network.

Telehealth can increase access to preventive and specialty care, address health disparities, and save money. Transportation costs are not only reduced, but efficiency is increased because of shared health professional staffing through telehealth.

The need is great. Fifty-four of Alabama’s 67 counties are considered rural, and there is a large population of medically underserved residents. Alabama’s health professionals are unevenly distributed throughout the state. While about 75 percent of health care providers are located in Jefferson County, only about 25 percent of the state lives there.

“Telehealth is a perfect opportunity to bring specialty care into a community while saving time and travel expense,” said Michael Smith, director of the Distance Learning and Telehealth Division. Public health departments are especially desirable sites for patients because they offer a neutral point of entry for all health care services, are available to the public statewide, and have clinical and technical staff available.

The Public Health Telehealth Network presently facilitates telehealth encounters/appointments for the following conditions: HIV/AIDS, mental health counseling, sexually transmitted disease interviews with clients, routine nephrology appointments for home dialysis patients, and nephrology consultations. The network currently has five active partners: AIDS Alabama, the Sexually Transmitted Diseases (STD) Division of the Bureau of Communicable Disease, The University of Alabama at Birmingham Medical Center, the University of South Alabama School of Medicine, and the Department of Veterans Affairs. In addition, the number of telehealth collaborating partners as well as the services soon to be offered are growing rapidly.

Telehealth encounters are encrypted and compliant with the Health Insurance Portability and Accountability Act (HIPAA). Each ADPH custom cart includes a computer; a high-definition pan, tilt and zoom video camera and codec; two 24-inch monitors; a 3M Bluetooth stethoscope; and a JedMed handheld examination camera with three lenses.

“A telehealth program requires agency commitment and staff participation from throughout the organization—a teamwork approach to make it successful—and ADPH staff have embraced the new technology, and it is slowly becoming part of our culture as the technology is incorporated into our daily work activities,” Smith explained.

Sixty county health departments now have the required bandwidth capacity for telehealth. “And while we presently have 23 county health departments with telehealth carts,” Smith continued, “we are in the process of deploying an additional 30 carts over the next few months.”

The lack of reimbursement for telehealth services in Alabama is a financial barrier for health care providers. Alabama has no parity coverage laws that would require reimbursement by health plans for telehealth services at the same rate as those paid for in-person visits. Adopting parity legislation in Alabama would incentivize health care professionals to use telehealth.

However, Blue Cross Blue Shield of Alabama recently adopted reimbursement for telehealth services for six conditions: cardiology, dermatology, infectious diseases, behavioral health, nephrology and neurologic diseases, including stroke. More health conditions are expected to be added in the coming months. The department is working with the The University of Alabama Medical Center and other institutions to engage partnerships with providers and health systems as well as to establish a statewide coordinating council.

Telehealth may actually encourage more physicians to locate in rural areas because they can more easily refer their patients to out-of-town specialists who would treat patients remotely at the county health department through telehealth.

For more information, please contact Michael Smith at michael.smith@adph.state.al.us or Dr. Jessica Hardy at jessica.hardy@adph.state.al.us.
Social Media and Electronic Communication: Assets or Liabilities?

by ProAssurance Indemnity Company, Inc.

You may have heard the adage, “Don’t put anything on the internet that you wouldn’t want tacked to a bulletin board in the town square.” Thanks to smartphones and their applications, that adage is easier than ever to ignore. Over the past several years, there have been numerous news stories of physicians being reprimanded after inadvertently identifying patients on social media, nurses being fired for posting photos taken during surgeries, etc. So what may a physician do to minimize liability risk when using smartphones? There are many areas of concern — social media, email, text messages and smartphone applications. While these may be viable tools for communicating with patients, there are inherent risks — confidentiality, data security and the potential for email and text to replace open communication. The following tips may help minimize your risk.

Social Networks
Social media has exploded from Facebook and its ancestor MySpace to Twitter, LinkedIn, Pinterest — the list goes on — and according to Facebook’s third-quarter 2017 earnings, more than 2.07 billion people use Facebook monthly¹, and 1.37 billion are active users.

You’ve heard ad nauseam that patients who perceive they have a good relationship with their physicians are less likely to sue, even in the event of an adverse outcome, and heard more times than you can count that communication is the cornerstone of your relationships with your patients. But that advice is proffered for the therapeutic, professional setting.

So how do you navigate the boundary between therapeutic and personal — or social?

When asked about the topic, Hayes V. Whetstone, MD, chief medical officer and senior vice president of risk resource at ProAssurance, said, “As a physician, I understand the perceived value of the ways in which patients tend to rely on Facebook to communicate with family and friends. However, we physicians need to be sure of a couple of things: One, communication about a patient’s therapeutic course happens face-to-face and, at times, is supplemented with phone conversations, with the common thread of give-and-take interaction, and two, ethically, that we don’t blur the line between therapeutic care and the social relationship.”

Generally, the best advice is to keep your professional and personal lives separate when using Facebook — and not accept friend requests from patients. Facebook friends typically have access to all other friends, to photos posted, and notes and messages posted on your wall. No matter how tightly you lock down your privacy settings, there’s no guarantee of privacy.

If you decide to use Facebook or other social media professionally, it’s a good idea to set up an account for your practice only and consider these suggestions:

- Add a disclaimer statement along the lines of, “Our clinic cannot give medical advice to any individual over Facebook. This Facebook page is for general informational purposes only and should not be used in place of a consult with your regular medical provider. The information presented here is not intended to be used as a diagnosis or treatment. If you need emergency medical attention, please call 911 or go to the nearest emergency room. If you need to be seen in our office by a physician, please call [telephone number] for an appointment.”

- Frequently monitor privacy settings and the page itself.

- Create guidelines or policy for staff regarding who may post updates to the page and under what circumstances, including who will redirect questions on the page to appropriate physicians for follow-up when a question is not general enough to be answered on the practice’s page, or when doing so would compromise patient privacy.

- Ensure patient confidentiality. Refrain from publicly posting any protected health information — whether in discussion with a patient or other physician on the practice’s Facebook page. Doing so could result in a Health Insurance Portability and Accountability Act (HIPAA) violation.

The American Medical Association (AMA) has issued “Opinion 9.124 – Professionalism in the Use of Social Media,” and it may be found here: http://journalofethics.ama-assn.org/2015/05/coet1-1505.html.

Communication Via Email and Text
While email and, to a certain extent, texts may be viable tools for communicating with patients, there are some inherent liability risks. Issues such as confidentiality, data security and the potential for email to replace open communication are examples of those risks. If email or text is used, risk management experts recommend physicians refrain from sending time-sensitive, highly confidential or emergency information. Information concerning prescriptions, normal lab results regarding nonsensitive medical issues, appointment reminders and routine follow-up inquiries may be appropriate to transmit via email.

Confidentiality and security become issues of primary concern. Who will be process-
The AMA’s opinion may be found here: http://medical-economics.modernmedicine.com/medical-economics/content/tags/hipaa/text-messaging-patients-steps-physicians-must-take-avoid-liabil?page=full.

**Smartphone Apps**
With 84 percent of physicians using smartphones for professional purposes, it’s wise to be concerned about potential risk management implications. While such medical apps are great tools, there are innate risks — the unsecured smartphone, for example. Risk management experts recommend evaluating the types of information stored on a personal device. Research apps such as Epocrates should not be subject to HIPAA risks if used for research purposes only. However, apps allowing mobile dictation of information that can be transferred to an electronic medical record may be, as they may contain confidential patient health information. Another consideration is security. Apps that transmit information may be vulnerable to hacking. Some medical apps bill themselves as HIPAA-compliant. It is wise to examine an app’s privacy policy and take reasonable steps to verify security. It’s also wise to keep in mind that no apps — especially free ones — are 100 percent secure.

Regardless of whether a smartphone app transmits, stores or simply accesses patient health information, physicians should ensure the apps are HIPAA- and Health Information Technology for Economic and Clinical Health Act (HITECH)-compliant.

**Tips to Keep in Mind**
- HIPAA requires data security and proper destruction and/or file retention of patient health information when appropriate.
- Physicians should remove patient health information from devices with apps before discarding/replacing the device.
- Wireless apps should be reviewed to ensure security at all levels.
- A security policy addressing mobile devices and apps that can be used, along with the appropriate use and destruction of patient health information, should be in place.
- Work closely with information technology personnel to address security issues.

ProAssurance-insured physicians and their practice managers may contact Risk Resource for prompt answers to liability questions by calling 205-802-4712 or by emailing riskadvisor@proassurance.com.

Sources:
Austin Brooks was raised in Cleburne County, Alabama, where he graduated from Cleburne County High School. As an undergraduate, Brooks attended The University of Alabama, where he majored in biology, on a Presidential Scholarship. While at UA, Brooks conducted research in the Earley Lab. He completed his Bachelor of Science in biology and graduated *cum laude* with university honors and honors in biology. Brooks is currently employed by Northstar EMS in Tuscaloosa and by Cleburne County EMS as an emergency medical technician.

Bailey Bryant is the daughter of LeAnne and Jeff Bryant of Albertville, Alabama, where she graduated from Albertville High School. Bryant earned her Bachelor of Science in nursing from Jacksonville State University in Jacksonville, Alabama. She practiced as a registered nurse at Huntsville Hospital in the surgery and trauma intensive care unit and the Gadsden Regional Medical Center emergency department before enrolling at The University of Alabama at Birmingham to pursue a graduate degree. She holds a Master of Science in nursing and has practiced as an adult and gerontologic acute care nurse practitioner with the hospitalist and emergency physicians groups at Marshall Medical Center North. Bryant went on to practice as a pulmonary and critical care nurse practitioner in the intensive care unit of Gadsden Regional Medical Center.

Jeb Cowen is the son of Dr. Gary and Julie Cowen of Jasper, Alabama. He graduated from Walker High School before attending Samford University in Birmingham, Alabama, where he earned his Bachelor of Science in sports medicine. While there, Cowen participated in Alpha Epsilon Delta, a pre-medical society; Gamma Sigma Alpha, an academic honor society; and the American Chemical Society. Cowen has volunteered with Hope for Women and Habitat for Humanity, along with a number of community churches and nursing homes. He received the Chemistry Academic Excellence Award his freshman year and the Most Outstanding Sports Medicine Student Award his senior year at Samford. Cowen also participated in a medical mission trip to the Dominican Republic and spent a summer shadowing an internal medicine physician in his hometown.

Charity Cypert is the daughter of Mr. and Mrs. Jody Cypert. She graduated from Wilson High School in Florence, Alabama, before attending The University of Alabama. While pursuing her degree, Cypert served as the director of Alpha Epsilon Delta’s CAPS mentoring initiative and co-founded The Society of Women in Medicine. She also served as a lead undergraduate research assistant and has volunteered for several organizations, including the American Cancer Society and Best Buddies. Cypert graduated from UA with honors and received a Bachelor of Science in biology. Cypert first became interested in medicine after her grandmother was diagnosed with an advanced stage of lung cancer. Her passion for medicine continued to grow as she shadowed physicians and became more involved in the prehealth community at UA.

McKenzie Donald is the daughter of Dr. Steve and Karen Donald of Chatom, Alabama. She graduated from Jackson Academy and currently attends The University of Alabama. She plans to graduate with a Bachelor of Science in food and nutrition, with a minor in biology. Donald is an undergraduate research assistant in the UA nutrition department and is the current president of the UA chapter of the Alabama Student Rural Health Association. She has worked as an office assistant in her father’s clinic and has shadowed in family medicine, hospice and palliative care. In her community, Donald has volunteered with Relay for Life and the Washington County Hospital and Nursing Home.

Kathryn Gray is from Alexander City, Alabama, and graduated from Benjamin Russell High School before attending Troy University in Troy, Alabama. While there, she was a member of Alpha Epsilon Delta honor society, Alpha Lambda Delta honor society, Mortar Board honor society, Phi Kappa Phi honor society, Beta Beta Beta honor society and the American Medical Student Association. Aside from shadowing physicians in her hometown, she was also able to spend a few weeks overseas learning about the health care system in Spain. Gray graduated *summa cum laude* with a Bachelor of Science in biology.
Brionna McMeans

Brionna McMeans, of Fort Deposit, Alabama, is the daughter of Angela McMeans and Jackie Williams. After graduating as salutatorian of The Calhoun School, she attended Stillman College in Tuscaloosa, Alabama, where she was active in the Student Government Association and the Pre-Alumni Association. McMeans then completed a nursing assistant certification course at Shelton State Community College, which she says provided her with insight to the role of a health care professional and the functionality of a health care team.

Peyton Powell

Peyton Powell is the son of Mark and Dr. Angela Powell of Monroeville, Alabama. He graduated from Monroe Academy and participated in The University of Alabama Rural Health Scholars program prior to attending UA. As an undergraduate, Powell was a member of the American Institute of Chemical Engineers and he received a Bachelor of Science in chemical engineering. He now works as a medical scribe at University Medical Center in Tuscaloosa, Alabama, in the pediatrics and family medicine clinics.

Kristin Pressley

Kristin Pressley is the daughter of Eddie and Eurica Pressley of Harvest, Alabama, and graduated from Sparkman High School. She graduated summa cum laude from The University of Alabama with a Bachelor of Science in general health studies. She performed research under SCOPE (Scholars for Community Outreach, Partnership and Engagement) through the Center for Community-Based Partnership. Pressley is also a member of various honor societies, including Golden Key and Sigma Alpha Lambda. She has volunteered with the Benjamin Barnes YMCA and Oak Hill School-Stillman Heights, and hopes one day to serve women and children in her professional career. Pressley has shadowed several Huntsville and Tennessee Valley physicians in a variety of fields, including family medicine and OB-GYN, in addition to nurses and other allied health professionals.

Ashlyn Shields

Ashlyn Shields is the daughter of Scott and Melissa Shields of Hokes Bluff, Alabama, and graduated from Hokes Bluff High School. She earned a Bachelor of Science in biology from The University of Alabama. Shields interned with Project Health at UA’s Student Health Center for five semesters, during which she worked to educate her peers about health topics relevant to college-age students. She participated in the Huntsville Rural Pre-Medical Internship, where she learned about health care disparities in rural Alabama. Shields has volunteered with Sewing Seeds of Hope in Marion, Alabama, through which she assisted in providing blood pressure and blood sugar screenings for that community. She also worked with the Salvation Army to give nutrition and health counseling to the homeless population of Tuscaloosa.

Robert Weaver

Robert Weaver is the son of Dr. Randall Weaver and is from Alexander City, Alabama. He graduated as valedictorian from Benjamin Russell High School, where he participated in various volunteer organizations that include Key Club, National Honor Society and Boy Scouts of America, through which he attained the rank of Eagle Scout. While attending The University of Alabama, Weaver was a member of the pre-health honors society Alpha Epsilon Delta and volunteered with the Center for Service and Leadership (CSL). He was an assistant team leader with the CSL and served as weekly volunteer coordinator for the campus chapter of Habitat for Humanity. Weaver graduated summa cum laude with a Bachelor of Science in biology from UA and has shadowed with several former Rural Medical Scholars in various locations of rural Alabama.
12th Rural Medicine Program

Adam Bashir

My name is Adam Bashir, and I was born and raised in Selma, Alabama. I attended Auburn University, where I double majored in chemistry and biomedical sciences. While at Auburn, I conducted research into the design and characterization of novel MRI contrast agents for three years. My passion for rural medicine was sparked by witnessing the effects of poor health care access in the Black Belt. After completion of my residency, I hope to return to Selma to practice family medicine.

Janison W. Hunter

My name is Janison W. Hunter, and I am proud to be from Cedar Bluff, Alabama. I completed my undergraduate coursework at The University of Alabama and received a Bachelor of Science in biology. While at UA, I was involved in Alpha Epsilon Delta, Al’s Pals, undergraduate research and extensive shadowing. I am also an active member of Cherokee County Carpenters for Christ, which is a community service ministry that helps build and renovate churches. I was blessed with the opportunity to spend time with a local family medicine doctor, which solidified my commitment to rural family medicine. I look forward to completing my medical training and being able to return to rural Alabama and establish a family medicine practice. I hope to provide quality care while being fully integrated into all aspects of the community and maintaining its health.

Lee Butler

My name is Lee Butler, and I grew up in Haleyville, Alabama. I received my bachelor’s and master’s degrees from The University of Alabama in electrical engineering. While at UA, I worked for two years in a laboratory researching devices and materials for both medical and military applications. I then worked as an engineer for five years in the defense industry and became involved with various forms of community service. After shadowing a rural family physician, I decided to pursue a career in medicine so I can serve my community full time. After graduation from medical school and completion of my residency training, I plan to return to rural Alabama to practice family medicine with my wife.

Sydney Blankenship

My name is Sydney Blankenship. I was raised in Abbeville, Alabama. I attended Auburn University and received a Bachelor of Science degree in biomedical sciences with a minor in English. While at Auburn, I served as a Camp War Eagle orientation counselor, a High School Leadership Conference mentor, a Panhellenic Cabinet member and a member of Omicron Delta Kappa honor society. Additionally, I have volunteered at the local nursing home for the last four years. These service and leadership activities have each played a large role in establishing my passion for working with others. I look forward to one day continue serving my local community through working as a physician.

Bess Rhodes Butler

My name is Bess Rhodes Butler, and I grew up in East Limestone, Alabama. I received a bachelor’s degree in chemical engineering from The University of Alabama. While at Alabama, I worked as a resident adviser and was involved with the College of Engineering’s Mentor UPP program, which is a program that helps underclassmen assimilate to campus and also to the engineering curriculum. I worked for a couple of years in the defense industry but ultimately felt called to pursue a career in medicine. I shadowed a recent Rural Medicine Program graduate practicing in my hometown and knew that this program and family medicine would be the perfect fit for me. After completing the program, my husband and I plan to settle and practice in rural Alabama.

Chirag Patel

My name is Chirag Patel, and I am from Enterprise, Alabama. I received my undergraduate degree in biomedical sciences from The University of Alabama in Birmingham. I am currently a junior Board member in the UAB National Alumni Society. During my time at UAB, I was the president of Pi Kappa Phi fraternity, executive director for the University Programs Board, vice president of finance for the Undergraduate Student Government Association, and worked in a lab for three years that focused on pain perception/management in people with knee osteoarthritis. Through these experiences, I learned the meaning of servant leadership, which will help me make a positive impact in a community like I was raised in.
Hannah Howard

My name is Hannah Howard, and I am from Lowndesboro, Alabama. I graduated summa cum laude with an undergraduate degree in biochemistry from Huntingdon College. At Huntingdon, I was the treasurer of the Student Government Association, a cheerleader, and in Alpha Omicron Pi sorority. During my sophomore year, I volunteered at Medical Outreach Ministry, a health care clinic for people without health insurance, which taught me the great importance of patient-centered family medicine. Upon completion of medical school and residency, it is my goal to return to a small rural town to practice family medicine.

Austin Martindale

My name is Austin Martindale. I am from Russellville, Alabama. I attended The University of Alabama for undergrad, where I received a degree in biology. During my time at Alabama, I worked in a laboratory that researched bacteriophage therapy as an alternative to antibiotics and as a combatant against antibiotic-resistant bacteria. Upon graduation from medical school and residency training, I would like to return to a rural area and give back to a community like the one that shaped me into the person I am today.

Yesenia Lopez

My name is Yesenia Lopez, and I grew up in Crossville, Alabama. I completed my bachelor’s degree in biomedical sciences at The University of Alabama at Birmingham. During my undergraduate years, I worked at a family clinic as a translator, volunteered at the Veterans Affairs hospital, and, as a member of Alabama Student Rural Health Association (ASRHA) and Alpha Epsilon Delta, was involved with Spirit of Luke, a free mobile clinic that serves the Black Belt of Alabama. Upon graduation from medical school and completion of residency, I plan to practice family medicine in a rural area.

Paul Morris

My name is Paul Morris, and I grew up in Sylacauga, Alabama. I received my undergraduate degree in biology from Troy University. I was involved in Alpha Epsilon Delta, Delta Kappa Epsilon fraternity and Habitat for Humanity. While at Troy, I worked in an organic chemistry research lab synthesizing a new type of antidepressant. After graduating from Troy, I spent time shadowing a group of family medicine physicians in Sylacauga. This is when I realized that I wanted to practice family medicine after the completion of medical school. My goal is to practice medicine in rural Alabama and eventually serve as a preceptor for medical students.

Wallace Timms

My name is Wallace Timms, and I am from Elmore County, Alabama. I graduated from Huntingdon College in Montgomery with a major in biochemistry and a minor in religion. In addition to being an offensive lineman on the Hawks football team, I was the president of external affairs for the Huntingdon Collegiate Exchange Club, a member of the Huntingdon College Chapter of American Chemical Society and a third-degree black belt in taekwondo. In my sophomore year, I was fortunate to be able to participate in the Huntsville Rural Pre-Medical Program. I have been fortunate to be able to spend time shadowing in small family practice clinics and a metro emergency room. Each shadowing experience was different but highlighted the necessity for excellent primary care and how a shortage of care in rural Alabama truly is a crisis in the making. I look forward to making a difference in these communities.
Physicians’ Alabama Opportunity Fair showcases more than 30 of Alabama’s rural communities as well as Alabama’s primary care residency programs!

If you are considering a rural or small-town medical practice, or want to learn more about practicing in rural Alabama, join us on February 17 to explore the opportunities available to you.

Who Can Participate?
• Primary care residents
• Medical students in their third or fourth year (limited number)
• Licensed physicians currently practicing but interested in relocating to a small or rural community

What Is PAOF?
The 26th annual Physicians’ Alabama Opportunity Fair (PAOF) will be held at the Perdido Beach Resort in Orange Beach, Alabama, on Saturday, February 17, 2018. PAOF is sponsored by 12 health care organizations interested in helping rural Alabama communities facilitate the excellent health care they deserve. Each year, more than 30 rural Alabama communities highlight the resources of their areas and offer the opportunity to come and practice medicine in a small-town environment. Created in 1990 as a vehicle to match small Alabama communities with primary care physicians, PAOF is a partnership of the following:
• Alabama Academy of Family Physicians
• Alabama Chapter of the American Academy of Pediatrics
• Alabama Department of Public Health
• Alabama Family Practice Rural Health Board
• Alabama Hospital Association
• Alabama Medical Education Consortium
• Alabama Primary Health Care Association
• Alabama Public Health Association
• Medical Association of the State of Alabama
• TAHEC, Inc.
• The University of Alabama School of Medicine
• University of South Alabama College of Medicine

For more information and to get registered, visit www.paof.info.

What Former Residents Have to Say About PAOF
“Absolutely wonderful weekend. I met many great potential employers and learned more about areas of Alabama I would like to practice in. Can’t imagine a better use of my weekend.”
– Past resident/student participant

What Community Practitioners Have to Say About PAOF
“This is a wonderful way to see all the different opportunities that are out there for primary care residents. It is a must-see! The location is wonderful, and the participants are informative and friendly.”
– Charlene Grigsby, former chief resident, family medicine, University of South Alabama

Communities That Have Hired Physicians as a Result of PAOF
• Boaz
• Cullman
• Evergreen
• Fayette
• Geneva
• Guntersville
• Hartford
• Hartselle
• Lawrence
• Ozark
• Rockford
• Sardis City
• Selma
• Wedowee

Schedule
11:30 a.m.-1 p.m. Kickoff Luncheon: Featuring Keynote Speaker Julia Booth, MD, FAAFP, Pickens County Primary Care, Reform, Alabama
1-4 p.m. Adjourn to Exhibit Hall
4-5 p.m. Reception
5 p.m. $250 Grand Prize Drawing

“What is PAOF?”
“PAOF is a unique opportunity to showcase the many positive attributes of practicing medicine in a smaller community. The event provides an economical format to gain one-on-one time with future practitioners and their families in a relaxed atmosphere.”
– Jennie Rhinehart, CEO, Community Hospital, Tallassee, Alabama

“Dr. Agustín Flores filled a very important position as staff physician at Sardis City Medical Center. We would never have known about him had it not been for PAOF. This carefully organized event is critical to keep our medical school graduates and Alabama residency graduates in this state.”
– Amelia Wofford, Quality of Life Health Services, Inc.
**Project ECHO: Autism**

A unique opportunity for YOU to help kids with autism

**What is Project ECHO: Autism?**
Project Echo: Autism is an innovative "telementoring" system that allows virtual real time access to autism experts to help you care for your patients with autism in your own community.

**Why should Project ECHO: Autism matter to you?**
- 1 in 68 children have autism
- 50-80% have trouble with sleep
- 40-80% have GI issues
- More than half have co-occurring anxiety or behavioral difficulties
- Parents and families need medical support in their home communities

**What do you need to participate?**
- Internet access and a front-facing camera via smartphone, tablet or computer
- Time — every other Friday from 11:45 am · 1:15 pm (90 minutes)

JOIN US IN BRINGING THE BEST AUTISM CARE TO PRIMARY CARE.

Email echoautism@peds.uab.edu or call 205.638.9254 to sign up TODAY!
improving health in your community

The University of Alabama College of Community Health Sciences operates one of the largest and oldest family medicine residencies in the nation. Our renowned program offers seven fellowships for family medicine physicians, including behavioral health, emergency medicine, geriatric medicine, rural public psychiatry, obstetrics, hospital medicine and sports medicine.

Each fellowship is concentrated in addressing health care needs of West Alabama communities, as well as further preparing family medicine doctors to provide comprehensive, competent and compassionate care for all patients.

For more information about the fellowships and the residency program, visit fmr.ua.edu.