

ALUMNI PULSE



Department of Physical Medicine and Rehabilitation
New Jersey Medical School

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Chair's Corner

By Joel A. DeLisa, M.D., M.S.

This is my final Alumni Pulse and a time to reflect and say, "thank you." Pages 2 & 3, has an article with respect to some of the highlights for the department and myself over the past 25 years.

I have always stated that my legacy is not bricks and mortar. It is the textbook and those we trained and their accomplishments. I am particularly proud of our mandatory two-week PM&R clerkship (begun in 1992) and the Annual PM&R Board Review Course (24 years). I do believe the Residency Training Program is one of the best in the nation.

Some of my general principles are:

1. Quality rises to the top – strive for it.
2. Take calculated risks.
3. Have people around you who challenge you. Surround yourself with smart people.
4. Try to make data-based decisions.
5. Make decisions, but continue to monitor the results.
6. Tell the truth.
7. Try not to touch a paper more than once.
8. Don't get mad, get even.
9. Fight for social justice – be an advocate for your patients.

With respect to the challenges ahead, my advice is: set clear priorities, yet maintain a broad agenda; manage the diversity of those we serve and help followers be leaders.

In summarizing my career, I like these lyrics from Frank Sinatra's song, "My Way:"

*Regrets, I've had a few
I did what I had to do, each careful step along the way
And more, much more than this
I did it my way.*

Please check the department's website:

(http://njms.umdnj.edu/departments/physical_medicine_rehabilitation/chairs_office.cfm) to see the updated Department History (December 2011) and the list of annual faculty publications (2005 through 2011).

By virtue of your friendship and support, my career has been profoundly enriched. To you, I can only say, "thank you and best regards."



The PM&R and UMDNJ “Times They are a-Changing”

*Patrick Foye, M.D.,
Interim Chair, PM&R*

As I write this (my first column as the Interim Chair of PM&R), I am mostly thinking about Dr. DeLisa and the legacy that he has left us, and our calling to carry the torch forward.

As you know, in mid-June 2012 **Dr. DeLisa retired after 25 years** as Chairman of the PM&R department here at NJMS. Dr. DeLisa’s achievements are deservedly legendary, and Dr. Bach’s article (below) does a fantastic job of outlining many highlights. Dr. DeLisa’s final “Chair’s Corner” (page 1) offers his parting thoughts.

During the **flurry of tribute events** for Dr. DeLisa in June, I repeatedly witnessed the respect, admiration, and appreciation expressed by such a wide variety of faculty, department chairs, the Dean, NJMS administration, as well as physicians and employees from what seemed like every branch and division of the university.

My favorite event was a dinner attended by most of the current residents and faculty, as well as a terrific number of alumni. It was truly fantastic to see so many former residents come back to toast Dr. DeLisa and take turns standing up to tell their **favorite Dr. DeLisa stories**. The vignettes they shared spanned a quarter-century stroll down memory lane. There were many happy laughs, some warmly-felt tears (yes, Dr. Benevento, you got us!), a live musical tribute by the V.A.’s Dr. Gautam Malhotra, and then Dr. Susan Garstang and Gautam presented Dr. DeLisa a really cool printed book containing photos and quotes from every residency class since Dr. DeLisa first came here.

Dr. DeLisa’s most emphatic comments at that event were that now it is up to all of us to carry the torch forward. To strive for excellence. To create a better tomorrow. To build upon the successes that we have here. He repeatedly expressed his confidence that throughout our many sites we have such talent, wisdom and commitment that his departure should not create any gap that cannot be filled... if we all do our best where needed. While I think he humbly underestimates the gap he leaves behind, his point is valid that our department has great strengths and from this time forward where we go is up to us.

For me, carrying the torch means **doing my best as interim Chair**. When the Dean asked me to take on this role, I was mostly shocked (I didn’t apply!), then a little scared, and now inspired. While we don’t know how long the “interim” role

will last, my pledge is to face our department’s challenges and opportunities head-on in the here and now. I would be foolish to treat the interim time as a period of dormancy or waiting, since our challenges and opportunities keep coming.

A huge state-wide change coming our way is that within less than a year **there will no longer be any “UMDNJ”!!** Via a law recently approved by the NJ state legislature (with the Governor’s signature coming soon), effective July 1, 2013, most of UMDNJ’s various schools will become part of Rutgers University’s newly-created “School of Biomedical & Health Sciences”. Some exceptions are UH and SOM. The University Hospital in Newark will be a stand-alone state entity (owned directly by the state, not by the school, but still serving as the principal teaching hospital for the Newark-based schools). The School of Osteopathic Medicine (SOM) will become part of Rowan University. There are LOTS of details that need to be worked out to merge such huge schools like UMDNJ and Rutgers within less than a year. There will no doubt be growing pains during the transition, but I think when we look back years from now we’ll see this as a good move. I’ll keep you posted!

Please contact me (Patrick.Foye@umdnj.edu) if you have insights or ideas about ways to improve our department’s residency, our teaching, our research, our patient care, our advocacy role with the disabled community, or the strength of our relationship with our students, residents, faculty, affiliates, and alumni. Working together to strive for excellence is our best way to honor Dr. DeLisa and what he has bestowed on us.



“From Pisces to Aquarius, from the end to the beginning”

By John Bach, M.D.

It was 1985. The UMDNJ-New Jersey Medical School Department of Physical Medicine and Rehabilitation at University Hospital had one full-time and three part-time physiatrists including one with obesity hypoventilation syndrome who slept in his office with a newspaper on his head waiting to sign the in-patient resident’s consultations and charge slips. The Acting Chairman of 5 years at that point was 20% NJMS and 80% of time Kessler Institute Medical Director. He came to University Hospital one morning to find that his office had been moved without his knowledge or consent and to an unknown location. There was a residency program with 7 residents that was on terminal probation. One of the 7, when quizzed to name any lower extremity muscle that crosses 2 joints, could not name one but declared the joints to be the hip and the ankle to the merriment of a passing physical therapist. This resident had been dropped from a pediatrics residency one

year, did not get credit for his year with us the next, then was terminated from the Beth Israel pediatrics residency for incompetence and cheating the next year before becoming an Emergency Medicine physician in New York City.

Then, in January, 1986, a search committee including Drs. Sheela Jain, John Bach, and Dennis Quinlan interviewed three candidates, including Dr. Joel DeLisa, for Chairman of PM&R and Medical Director of Kessler Institute for Rehabilitation. We questioned Dr. DeLisa's administrative experience. So, in putting it to his colleagues on the Seattle VA Spinal Cord Injury Service where he was the Chief from 1984 to 1987, we were reassured, I suppose, to hear that when Dr. DeLisa arrived early every morning he immediately began "directing traffic." We suspected that even if he were to come here he might not stay very long. After all, his family and entire formal education was in Washington State. He had graduated Washington State University in Pullman, Washington with a BS in Zoology in 1964 which must have prepared him well for a career in New Jersey politics. He graduated the University of Washington School of Medicine in 1968 and received a Master of Science degree there in 1976. After a rotating internship in Phoenix, Arizona and a 2 year stint as a Medic in the U.S. Army Medical Corps, just to keep him "on his toes," he returned to the University of Washington to complete a PM&R residency in 1975 before eventually becoming Chief of the Seattle Veterans Administration Medical Center Spinal Cord Injury Service through 1987. Despite thinking that he might leave us at any time, we proposed only Dr. DeLisa to Dean Lanzoni who then offered him a 3 contract deal that he "could not refuse."

Dr. DeLisa joined us on July 1, 1987 as Professor and Chairman, the first Chairman of the Department of Physical Medicine and Rehabilitation UMDNJ-New Jersey Medical School, with a mandate to expand the department from one to three physiatrists, expand the residency, and establish a mandatory medical student rotation. He was also appointed as the Medical Director and Chief Medical Officer, Kessler Institute for Rehabilitation. He subsequently became the Chairman of Physical Medicine and Rehabilitation at St. Barnabas Medical Center, Livingston, NJ (1990-1999), Senior Vice President and Chief Medical Officer, Kessler Institute for Rehabilitation (1994-1997), Senior Vice President and Chief Medical Officer, Kessler Rehabilitation Corporation (1998-2000), Interim Dean of UMDNJ-New Jersey Medical School (2000), President and CEO of the Kessler Medical Rehabilitation Research and Education Corporation (1998-2006), President, Kessler Medical Rehabilitation Research and Education Center (2007-2008), and in 2008 the Founding Director of the Kessler Foundation Research Center. As Medical Director of Kessler Institute for Rehabilitation, he administered its rise

in status as number 2 in the U.S. according to US News and World Report's list of the best rehabilitation institutions in the country.

Not satisfied with simply achieving American Board of Physical Medicine and Rehabilitation certification in 1977, he voluntarily had himself re-certified by the board in 2007 when he entered the American Board of Physical Medicine and Rehabilitation Maintenance of Certification Program. In 1998 he was given certificate #3 for the subspecialty of Spinal Cord Injury Medicine and was re-certified in 2008 for another 10 years.

Dr. DeLisa did establish a highly regarded mandatory two-week medical student clerkship in PM&R in 1991, one of only 4 in the U.S. He has seen to it that our department remains actively involved in teaching during all four years of the medical school curriculum including in teaching clinical correlations within the first year anatomy course, lectures and hands-on workshops for the second year CORE-2 course, and elective rotations for the third and fourth year students, about 100 per year, as well as the mandatory two-week clerkship for the seniors. Each medical student's competency in musculoskeletal physical examination is documented. Because of the exceptional exposure to our faculty, 13 NJMS students applied for PM&R residencies this year and the Medical Student PM&R Club is one of the most active in the United States. Last year the club was led by an eight person executive committee and had over 120 members on its roster. Dr. DeLisa also established the first Objective Structured Clinical Examination (OSCE) for PM&R residents and published this in 1997 and 1998.

From "terminal" provisional accreditation our residency became one of the four most highly regarded physiatry residencies on the East Coast with only 5 year ACGME Residency Review Committee accreditations with commendations for a quarter of a century. During his reign no residents have ever failed part 1 of the PM&R boards and 7 have won the Elkins award for the highest score on the board examination (with no other program having more than 4 winners). In the last accreditation of August 2009, the "Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Requirements for Graduate Medical Education without citations. The committee particularly commended the program for its extensive and excellent educational curriculum, use of OSCE for competency assessment, the emphasis on scholarly activity among its faculty and residents, and its ABPMR Board scores.

The department now offers physician fellowships in seven subspecialty areas and was one of the first PM&R

departments to offer such a large selection. The Spinal Cord fellowship has been accredited since its inception. In 2011 our pediatric physiatry fellowship based at Childrens Specialized Hospital was also accredited for the first time. Fellowships are now offered in spinal cord injury medicine, musculoskeletal/pain medicine, traumatic brain injury, stroke, pediatric physiatry, neuropsychology and neuroscience research, and medical rehabilitation outcomes and intervention research and effectiveness. In all, the department has trained over 150 postdoctoral and clinical fellows.

Dr. DeLisa built the Education Department at Kessler that became an ACCME accredited site for providing Physician Category 1 CME credits and put on the best attended annual Board Review Course since 1989. In addition, the Education Department produced numerous other "state-of-the-art" conferences and courses including two that resulted in supplements to major peer-reviewed journals.

Dr. DeLisa has published over 150 papers on electrodiagnostic, musculoskeletal medicine, and more recently, on educational topics but he considers his most important work to be his text book. The Fifth Edition of Dr. DeLisa's "Physical Medicine and Rehabilitation, Principles and Practice" was released November 15, 2010 and is now being translated into Chinese. Amazon.com notes: "It is thoroughly updated and now in full color, DeLisa's Physical Medicine and Rehabilitation is the 'gold standard' in the field of physical medicine and rehabilitation. It is the most modern and comprehensive book in the field. It can serve as both an introductory book for residents and a comprehensive reference book for practitioners."

With an initial research budget of \$295,000 and no dedicated research space, the Kessler Foundation now has about 37,000 square feet at 2 research sites in West Orange and an annual research budget of about 10 million dollars. As the principal investigator, Dr. DeLisa brought to us National Institute for Disability and Rehabilitation Research (NIDRR) Model System five-year SCI grants in spinal cord injury since 1992 and Model Systems Grants in Traumatic Brain Injury twice, most recently in 2008. Currently we are one of only five locations to have both model systems designations. As a principal investigator Dr. DeLisa has \$6 million in funding to his credit. We have had continuous training grant funding since 1988 from the NIDRR, NIH, and the National Multiple Sclerosis Society.

Dr. DeLisa increased the full-academic titled faculty from 2 in 1986 to the current 49 and from 15 to 106 faculty overall. He established a departmental committee system and monthly faculty meetings with minutes to inform the

faculty. The Newark-based faculty continues to serve on most major University Hospital and Medical School Committees and has recently updated its website.

Dr. DeLisa has also been chair of the Education Commission for Foreign Medical Graduates (ECFMG) and was instrumental in the establishment of the USMLE - Step 2 clinical skills examination. He served as chair of the American Board of Medical Specialties (ABMS), the umbrella organization above all the certification Boards. He also served as chair of the Council of Academic Societies (CAS) of the Association of American Medical Colleges (AAMC) which represents all 133 accredited U.S. and 17 accredited Canadian schools, approximately 400 major teaching hospitals and health systems, the Department of Veterans Affairs medical centers, and nearly 90 academic societies. No physiatrist had previously held these positions.

He was a member of the National Board of Medical Examiners (NBME), President of the International Society of Physical and Rehabilitation Medicine (ISPRM), President of the American Association of Electrodiagnostic Medicine (AAEM), and Chair of the American Board of Physical Medicine and Rehabilitation (ABPM&R), the Association of Academic Physiatrists (AAP), and the American Paraplegia Society (APS). He was editor of the Journal of Spinal Cord Medicine from 1999 to 2005 and served on other editorial boards. He was the driving force in establishing the first subspecialty certification examination in SCI medicine. From his first publication in 1978 where he advocated "Shedding some light on a little understood specialty," Dr. DeLisa has advocated for PM&R. His JAMA publication on "Physical Medicine and Rehabilitation" in 1991 was the first on PM&R in a major journal.

The Kessler Foundation put up \$1 million dollars to establish the Joel A. DeLisa, MD Award for Excellence in Research and Education in the Field of Physical Medicine and Rehabilitation. Dr. DeLisa is also proud of being the recipient of the Derrick T. Vail Award by the American Board of Medical Specialists (ABMS), only the second time ever given to an individual and for having received the Ellis Island Medal of Honor. He was inducted into the prestigious Institute of Medicine (IOM) as one of only a handful of physiatrists to have ever achieved this honor. The IOM is the think-tank for medical policy development in Washington.

Dr. DeLisa will be sorely missed. We wish him the best in his new life. Hopefully he will in a real sense continue to be with us. Indeed, I have the intention of seeing to that. If that does not please him he would be well advised to

change his cell phone number and keep his future whereabouts a mystery.

Acknowledgment: I want to thank Dr. Sheela Jain for the preliminary work she put into preparing this material.



Rutgers-UMDNJ-Rowan Reorganization

Following is an update on the proposed Rutgers-UMDNJ-Rowan Reorganization legislation provided by the AAUP Council of Chapters.

It is reported that after months of lobbying and advocacy by the AAUP and our coalition partners in the Higher Education and Health Care Coalition, the revised bill includes many of the protections and principles important to you.

The following is a summary of the latest version of the proposed legislation:

1. New Structure

- RWJMS, NJMS, NJDS, SHRP, SN, GSBS, SPH will merge into Rutgers University;
- SOM will merge into Rowan;
- University Hospital will be a stand-alone state entity;
- Cancer Institute of New Jersey will be independent institute at Rutgers; and
- Rutgers-Camden will be an autonomous unit with joint Rowan and Rutgers oversight.

2. Collective Bargaining and Terms and Conditions of Employment

- The AAUP will remain your bargaining representative;
- The terms of the existing AAUP contract will transfer and will be maintained;
- The terms of your existing appointment letter are maintained - as well as any other written

agreements you have with UMDNJ;

- Faculty tenure, rank, and academic track are maintained and transferred;
- Accrued Seniority (years of service) will transfer;
- You will not be treated as a new employee;
- There will be no impact on your pension, health insurance, or retirement benefits;
- No Layoff through July 1, 2014 of any faculty member hired prior to the effective date of the act as a result of the reorganization;
- Transfers existing school rules and regulations (i.e. Bylaws, FCAP procedures, etc.); and
- Labor-Management Committee to review all proposed restructuring and reorganization plans of which the AAUP will be a member.

THESE ARE MAJOR ACHIEVEMENTS THAT SERVE TO MAINTAIN YOUR RIGHTS AND BENEFITS

3. Operational Safeguards

- University Hospital
 - Commitment to honor the Newark Accords;
 - Commitment to provide comprehensive healthcare program and services to the Newark Community;
 - UH will remain the principal teaching hospital of NJMS, NJDS, and any other Newark-based medical education program;
 - State funding shall be sufficient to maintain the level of community services provided on the effective date of the Act;
 - UH will continue as an acute care facility and trauma center;
 - University Oversight, Board to ensure the mission of the Hospital and to honor intent of the Newark Accords;
 - Prerequisites to transfer of Hospital:
 - NJ Superior Court approval
 - Satisfy the requirements of the Community Health Care Assets Protection Act
 - Approval from the Department of Health and Senior Services
 - Satisfy Certificate of Needs Requirement
 - 5-year review by Oversight Board of any transaction
 - management contract subject to competitive bidding and other prerequisites
- Newark Schools
 - Must be maintained in Newark – cannot be moved;
 - Maintain existing contracts with Department of Corrections and the Department of Children and Families; and
 - Maintain UBHC and School of Nursing Services.

- **SOM**
 - Rowan obligated to maintain SOM accreditation;
 - Academic programs will be separate and distinct from Cooper Medical School;
 - SOM will retain control of GME;
 - SOM will maintain existing faculty practice plan;
 - SOM will be provided with its fair share of state appropriations.

The implementation date is July 1, 2013.

As a direct result of our advocacy via the Coalition, the legislation is now responsive to the many questions that were previously unanswered. While these gains provide many protections to you and to the services you provide, our work is not done.

The AAUP and our coalition partners will continue to work with the bill's sponsor to ensure that the State provides the necessary resources to implement the proposed reorganization and to ensure SOM continues to be the gem the Advisory Committee identified it as.

The full Senate and Assembly passed the bill and the governor signed it. The only thing that remains, is how the estimated \$750 million cost of the merger will be funded.

The AAUP will continue to advocate on your behalf and update you on new developments. Please call us at (973) 972-5875 with any questions.



***f**rom the residency director...*

By Susan Garstang, M.D.

Greetings! Hope all of you are well. This month marks the beginning of my seventh year here as Program Director! I am proud to see another class graduate and go out into the world.

Our seniors yet again got amazingly competitive fellowships, and showed once more the variety of settings we have interests in as a program. Eleven seniors graduated this year; and nine are doing fellowships!

Here are their specialties and where they are going:

SuAnn Chen, M.D. – TBI fellowship, RIC/Northwestern, Chicago, IL

Eduardo Cruz-Colon, M.D. – Sports fellowship, OSS, York, PA

Amanda Farag, M.D. – SCI Medicine fellowship, NJMS/Kessler, Newark, NJ

Debra Ibrahim, D.O. – Group private practice, Coordinated Health, PA

Monika Krzyzek, D.O. – Pain Medicine fellowship, U.S. Army, Ft Sam Houston, TX

Anthony Lee, M.D. – Academic/private practice, Kessler Institute, Saddlebrook, NJ

Kirk Lercher, M.D. – TBI fellowship, University of Pittsburgh, PA

Christine Pfisterer, D.O. – Interventional spine fellowship, Coordinated Health, PA

Christine Roque-Dang, D.O. – Musculoskeletal/spine fellowship, NJMS, Newark, NJ

Mark Sison, M.D., PT – Interventional spine/pain fellowship, OSS, York, PA

Alon Terry, M.D. – Musculoskeletal/spine fellowship, HSS, NY, NY

The incoming residents are a great group, and will add to the excellence of our program (more about them on the following page).

We have recently made some changes in the program based on resident feedback, which hopefully will improve the experiences residents have in the program. The curriculum has been updated to include SAE question review monthly, and more lectures in Neuromuscular Medicine by our 4 faculty who are subspecialty board certified in this area. We have added eight hours of ultrasound workshop training each year, as well as an EMG skills workshop. These have been possible in part due to our new faculty member Dr. Oh-Park, as well as many of our other key faculty who are expert in these skills. Dr. Oh-Park is adding EMG clinics weekly at Kessler North and West, as well. We also have new ultrasound equipment at Kessler West and at the East Orange VA, which has allowed us to add ultrasound-guided injection clinic at the Lyons VA. We have hired two new attendings at Kessler, Dr. Coba at Kessler West and Dr. Lee at Kessler North. Both are former residents in our program, and very committed to resident education. This change also will decrease workload for each service, and allow an increase in bedside teaching time. Our research training has also been improved; the facilities are being completely renovated, and new equipment like a 3 Tesla MRI for fMRI research is going to be installed in Kessler Foundation space (behind the outpatient offices). We also have two new clinical physician scientists, who will be mentoring research projects and teaching in the research course.

We are continuing some of the programs we are most proud of; Kessler's Board Review Course will be continuing with Kessler Institute as the sponsor, and we continue offering the Prosthetics and Orthotics Course to residents and faculty in the Northeast. We pride ourselves on always striving to improve our program, and welcome feedback from anyone to make positive changes!

Please visit our website at:
http://njms.umdnj.edu/departments/physical_medicine_rehabilitation/residency. We are always interested in your feedback and suggestions for improving our residency; please feel free to contact me at susan.garstang@va.gov with any ideas for things we need to do better.

Best Wishes!

Note: For those of you alumni out there who may be seeking a job change, please be aware that I keep every job offer that comes into our office (several per month) from all over the country. I'd be happy to share these with you at your request. Just e-mail me with your preferred location or job type and I'll send you the information.

PM&R Department Welcomes Incoming Residents...

The faculty and trainees welcome the following members of the PM&R residency class of 2015, who entered our program on July 1, 2012.

Patrick Buchanan, M.D.

Saint George's University, Grenada, West Indies
PGY-1: Long Island College Hospital, NY

Suma Chandra, M.D.

Georgetown University, Washington, DC
PGY-1: Georgetown University/Inova Fairfax Hospital, VA

Ummais Khan, M.D.

UMDNJ-New Jersey Medical School, NJ
PGY-1: Jersey Shore University Medical Center, NJ

Lawrence Lai, M.D.

Drexel University College of Medicine
PGY-1: UMDNJ-Robert Wood Johnson Medical Ctr, NJ

Victoria Lin, M.D.

Harbor-UCLA Medical Center, Torrance, CA
PGY-1: UMDNJ-Robert Wood Johnson Medical Ctr, NJ

Leroy Lindsay, M.D.

University of Rochester School of Medicine & Dentistry, NY
PGY-1: Mount Sinai Hospital, NY

Yan Liu, M.D.

New York Medical College, NY
PGY-1: Richmond University Medical Center, NY

Michael Monfett, M.D.

Saint George's University, Grenada, West Indies
PGY-1: Jersey City Medical Center, NJ

Ravi Patel, M.D.

Drexel College of Medicine,
PGY-1: Hahnemann University Hospital, PA

Wesley San, M.D.

Saint George's University, Grenada, West Indies
PGY-1: Wilson Medical Center, NY

Graduating Clinical Fellows

Wesley Chay, M.D. (SCI) – Moss Rehab in Philadelphia
Mohammad Hussein Dorri, M.D. (MSK/Pain) Information unavailable at this time.

Benjamin Levy, M.D. (MSK/Pain) – Information unavailable at this time.

Salvador Portugal, M.D. (MSK/Pain) – Information unavailable at this time.

PM&R Department Welcomes Incoming Clinical Fellows

Katherine Bentley, M.D. – Pediatric Rehabilitation
Residency: UMDNJ-New Jersey Medical School, NJ

Susan DiStasio, D.O. – MSK/Pain/Spine
Residency: New York Medical Center, NY

Amanda Farag, M.D. – Spinal Cord Injury
Residency: UMDNJ-New Jersey Medical School, NJ

Michael Goldin, M.D. – MSK/Pain/Spine
Residency: Stanford University Hospital, CA

Emerald Lin, M.D. – Traumatic Brain Injury
Residency: Mount Sinai School of Medicine, NY

Justin Mendoza, M.D. – MSK/Pain/Spine
Residency: New York University Medical Center, NY

Christine Roque-Dang, D.O. – MSK/Pain/Spine
Residency: UMDNJ-New Jersey Medical School, NJ



**UMDNJ-New Jersey Medical School
By Samuel Chu, MD, New Jersey Medical School
Class of 2011, President, NJMS PM&R Student
Interest Group 2010-2011**

It is almost impossible for a student at New Jersey Medical School (NJMS) to go through four years of training without gaining a significant understanding of and exposure to Physical Medicine & Rehabilitation. The strength and reputation of the NJMS/Kessler Residency Program coupled with the active involvement of the PM&R Interest Group throughout the past decade has helped to integrate physiatry into the academic and extracurricular fabric at NJMS.

Physiatrists are involved in medical education from the start, serving as lecturers in the first year exam course, mentors in student career advising groups and instructors in the fourth year mandatory clerkship. The PM&R Interest Group is also involved from the very beginning of the first year at the annual student activities fair where students can sign up to participate in a multitude of educational events, activities and electives held throughout the year. Needless to say, PM&R has a significant presence in the medical student life in Newark, New Jersey.

Taken from Association of Academic Physiatrists (AAP) Medical Student Interest Group SIG Newsletter, June 2012



Faculty Publications

Bach J.R. (in press). Noninvasive respiratory management of high level spinal cord injury. *Journal of Spinal Cord Medicine*, 35(2), 72-80.

Bauman, W.A., Emmons, R.R., Cirnigliaro, C.M., Kirshblum, S.C., & Spungen, A.M. (2011). An effective oral vitamin D replacement therapy in persons with spinal cord injury. *Journal of Spinal Cord Injury Medicine*, 34(5), 455-460.

Chiao, C., Weng, L., & Botticello, A.L. (2012). Social participation reduces depressive symptoms among older adults: An 18-year longitudinal analysis in Taiwan. *Revised & Resubmit, BMC Public Health*, 11, 292.

Cirnigliaro, C.M., Lesser, M., Moyer, J., Kirshblum, S.C., et al. (2012). Reproducibility and effect of posture on impulse oscillation parameters in persons with spinal cord injury. *Journal of Spinal Cord Medicine*, 35(1), 28-35.

DeLuca, J. & Nocentini, U. (2011). Neuropsychological, medical and rehabilitative management of persons with multiple sclerosis. *NeuroRehabilitation*, 29, 197-219.

Fichtenbaum, J. & Kirshblum, S.C. (2011). Psychological Adaptations after Spinal Cord Injury. In S. Kirshblum & D. Campagnolo (Eds), *Spinal Cord Medicine*. (2nd edition, 382-398). Philadelphia: Lippincott Williams and Wilkins.

Fyffe, D.C., Botticello, A.L., & Myaskovsky, L. (2012). Vulnerable groups living with spinal cord injury. *Topics in Spinal Cord Injury Rehabilitation*, 17(2), 1-9.

Goedert, K.M, Chen, P., Botticello, A.L., Masmela, J.R., Adler, U.S., Barrett, A.M. (2012). Psychometric evaluation of neglect assessment reveals motor-exploratory predictor of functional disability in acute-stage spatial neglect. *Archives of Physical Medicine & Rehabilitation*, 93, 137-142.

Goverover, Y., Basso, M., Wood, H., Chiaravalloti, N., & DeLuca, J. (2011). Examining the benefits of combining two learning strategies on recall of functional information in persons with multiple sclerosis. *Multiple Sclerosis Journal*, 17(12), 1488-1497.

Kirshblum, S.C., Anderson, K., Krassioukov, A., Donovan, W. (2011). Assessment and Classification after Spinal Cord Injury. In S. Kirshblum & D. Campagnolo (Eds), *Spinal Cord Medicine*. (2nd edition, 85-105). Philadelphia: Lippincott Williams and Wilkins.

Kirshblum, S.C., Bloomgarden, J., Nead, C., McClure, I., Forrest, G., Mitchell, J. (2011). Rehabilitation after Spinal Cord Injury. In S. Kirshblum & D. Campagnolo (Eds), *Spinal Cord Medicine*. (2nd edition, 309-340). Philadelphia: Lippincott Williams and Wilkins.

Kirshblum, S.C., Burns, S., Biering-Sorensen, F., et al. (2011). International standards for neurological classification of spinal cord injury. *Journal of Spinal Cord Medicine*, 34(6), 535-546.

Kirshblum, S., O'Connor, K., Radar, C. (2011). Pressure Ulcers and Spinal Cord Injury. In S. Kirshblum & D. Campagnolo (Eds). *Spinal Cord Medicine*. (2nd edition, 242-264). Philadelphia: Lippincott Williams and Wilkins.

Kirshblum, S.C., Waring, W., Biering-Sorensen, F., et al. (2011). Reference for the 2011 revision of the International Standards for Neurological Classification of Spinal Cord Injury. *Journal of Spinal Cord Medicine*, 34(6), 547-554.

Leavitt, V.M., Sumowski, J.F, Chiaravalloti, N.D., & DeLuca, J. (In Press, March 2012). Warmer outdoor temperature is associated with worse cognitive status in multiple sclerosis. *Neurology*. Published online before print March 7, 2012, doi: 10.1212/WNL.0b013e31824d57834.

Leavitt, V.M., Wylie, G. Genova, H.M., Chiaravalloti, N.D. & DeLuca, J. (2012, in press). Altered effective connectivity during performance of an information processing speed task in Multiple Sclerosis. *Multiple Sclerosis Journal*. Published online, ahead of print, 30 September 2011. doi: 10.1177/1352458511423651

Noehren, B., Barrance, P.J., Pohl, M., & Davis, I. (2011). A comparison of tibiofemoral and patellofemoral alignment during a neutral and valgus single leg squat: an MRI study. *Knee*, epub date 2011/07/05.

Schelza, W.M., Dyson-Hudson, T.A. (2011). Neuromusculoskeletal complications after spinal cord injury. In S. Kirshblum & D.I. Campagnolo (Eds). *Spinal Cord Medicine*, (2nd edition). Baltimore, MD: Lippincott Williams & Wilkins.

Strober, L.B., Christodoulou, C., Benedict, RHB, Westervelt, H, Scherl, W, Weinstock-Guttman, B, Rizvi, S, Goodman, A, & Krupp, L.B. (in press). Unemployment in multiple sclerosis: the contribution of personality and disease. *Multiple Sclerosis*, 18(5), 644-650.

Sumowski, J.F., Chiaravalloti, N., Erlanger, D., Kaushik, T., Benedict, RHB. & DeLuca, J. (2011). L-amphetamine improves memory in MS patients with objective memory impairment. *Multiple Sclerosis Journal*, 17(9), 1141-1145.

Sumowski, J.F., Chiaravalloti, N., Leavitt, V.M., & DeLuca, J. (2012). Cognitive reserve in secondary progressive multiple sclerosis. *Multiple Sclerosis Journal*. Published online before print March 2, 2012, doi: 10.117/1352458512440205.

Walker, H., Kirshblum, S. (2011) Spasticity due to disease of the spinal cord: Pathophysiology, epidemiology and treatment. In A. Brashear & E. Elovic (Eds.). *Spasticity: Diagnosis and Management*. New York: Demos Medical Publishing.

Wecht, J.M., Rosado-Rivera, D., Jegede, A., Cirnigliaro, C.M., Jensen, M.A., Kirshblum, S., Bauman, W.A. (2012). Systemic and cerebral hemodynamics during cognitive testing. *Clinical Autonomic Research*, 22(1), 25-33.

Wylie, G.R., Sumowski, J.F., & Murray, M.M. Are there control processes, and (if so) can they be studied? *Psychological Research*. [Epub ahead of print] DOI: 10.1007/s00426-011-0354-3



Faculty Promotions

We congratulate **Victoria Leavitt, Ph.D.** and **Denise Krch, Ph.D.**, both promoted to Assistant Professor of Physical Medicine and Rehabilitation, effective July 1, 2012.



Alumni Donations

Thanks to the following individuals for their generous contributions to the *PM&R Residency Training Program Fund*. These contributions go a long way in keeping our program going strong. Please consider making a donation.

Boqing Chen, M.D., Ph.D.
Hang Lee, M.D.



FACULTY & ALUMNI NEWS

Congratulations to **Drs. Jeffrey Cole, Patrick Foye, and Jonathan Kirschner** (Class of '09) for their article, "Piriformis syndrome, diagnosis and treatment." *Muscle & Nerve*, 22 May 2009, DOI:10.1002/mus.21318, just named their journal's #1 most read article of all 2011.

Bradley Marcus, D.O. (Class of '95) shares that he has started a non-profit neurorehabilitation center called VIP Neurorehabilitation Center, www.vipneurorehab.com. He is also trialing the REWALK robotic gait orthosis system.

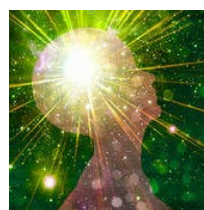
We congratulate **Juan Carlos Arango-Lasprilla, Ph.D.** (Class of '06), former post-doc fellow in the NNL, who was the 2011 recipient of the Early Career Award from the National Academy of Neuropsychology (NAN). The award is based on reviews by the Award Committee and the Board of Directors of NAN to have made substantial early career contributions within 10 years of the doctoral degree, particularly regarding scholarly activity.



Congratulations to **Olga Nikelshpur, Ph.D.** and her husband, Demetri on the birth of their daughter, **Sophia**. Little Sophia was born on June 21, 2012, weighing 7 lb. 5 oz. and measuring 20 inches long.



Philosophical Sayings



"The marvel of all history is the patience with which men and women submit to burdens unnecessarily laid upon them by their governments."

Senator William E. Borah

Culinary Corner

One-Pot Clam Bake

Serves 6

Active time: 10 min

Total time: 40 min

- 1¼ cup cups dry white wine
- 6 cloves garlic, peeled
- 2 large shallots, quartered and peeled (root end left intact)
- 1½ pounds small red potatoes
- red-pepper flakes (optional)
- 6 ears corn, shucked and halved
- 5 dozen clams, scrubbed
- 2 lemons, quartered
- 1 pound shell-on extra-jumbo shrimp (16 to 20)
- 4 tablespoons unsalted butter
- ½ cup chopped fresh parsley
- 2 tablespoons chopped fresh oregano leaves

1 In a 12-quart stockpot, bring wine and ¾ cup water to a boil. Add garlic, shallots, potatoes, and ½ to ¾ teaspoon red-pepper flakes, if using; cover and cook 8 minutes. Add corn, clams, and lemons; cover and cook until clams have opened, 10 to 12 minutes. Add shrimp in a single layer, cover, turn off heat, and let sit until shrimp are opaque throughout, about 3 minutes.

2 With tongs or a spider, transfer shellfish and vegetables to a serving platter, setting lemons aside; discard any unopened clams. Pour broth into a bowl and whisk in butter, parsley, and oregano. Scrape flesh from half the lemons into broth, discarding skins. Serve shellfish and vegetables with remaining lemons and broth for dipping.

per serv: 463 cal; 11 g fat (5 g sat fat); 34 g protein; 52 g carb; 6 g fiber

Taken from Everyday Food Summer Special, July/August 2012



Watermelon Mojitos

Makes 6

Active time: 10 min

Total time: 10 min

- ½ small seedless watermelon cut into chunks
- 1 bunch mint, tough stems removed, 6 sprigs reserved for serving
- 1 tablespoon superfine sugar
- 1 lime, cut into wedges
- 1¼ cup white rum



1 In a blender, in batches, puree watermelon. Pour through a fine-mesh sieve into a liquid-measuring cup, pressing on

solids to extract as much liquid as possible (about 3 cups); discard solids.

2 In a large container, combine mint, sugar, and lime. With the back of a wooden spoon, crush mint and lime until sugar is dissolved. Add watermelon juice and rum, fill container with ice, and stir to combine. Serve over more ice with mint sprigs.

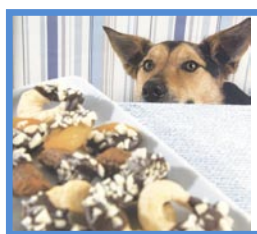
per drink: 138 cal

Taken from Everyday Food Summer Special, July/August 2012



For the pooch in your family

Fruity Furrballs



This treat is health and simple. Dried fruit is a natural alternative to low-quality manufactured treats. If you have a very small dog, cut the apple rings in half before dipping in carob.

Makes 20-30

Prep time: 15 min

- 5 oz (150 g) carob chips or carob bar, broken into small pieces
- 1 tablespoon pure vanilla extract
- 8 oz (250 g) naturally dried apricots, apple rings and bananas (non-sulfur varieties)
- 2 oz (50 g) blanched almonds, chopped



1 Place the carob in a heatproof glass bowl. Set the bowl over a saucepan of lightly simmering water and heat until the carob has melted. Stir in the vanilla extract.

2 Use a fork to dip each piece of dried fruit into the carob so half of the fruit is coated. Then dip into the chopped nuts and place on a greaseproof paper.

3 Leave to set for 20 minutes. Transfer to an airtight container and chill until hard. Fruity Furrballs will keep for up to 4 weeks in the refrigerator.

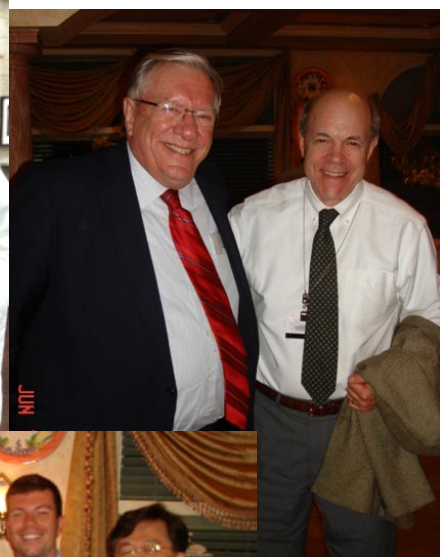


Tips 'n Tails

Carob is a safe alternative to chocolate as chocolate is poisonous for dogs. Carob is full of vitamins, including vitamin A, which is necessary for good vision, and vitamins B1 and B2, which aid growth. It is also rich in calcium, phosphate, protein, potassium, iron, silicon and magnesium.

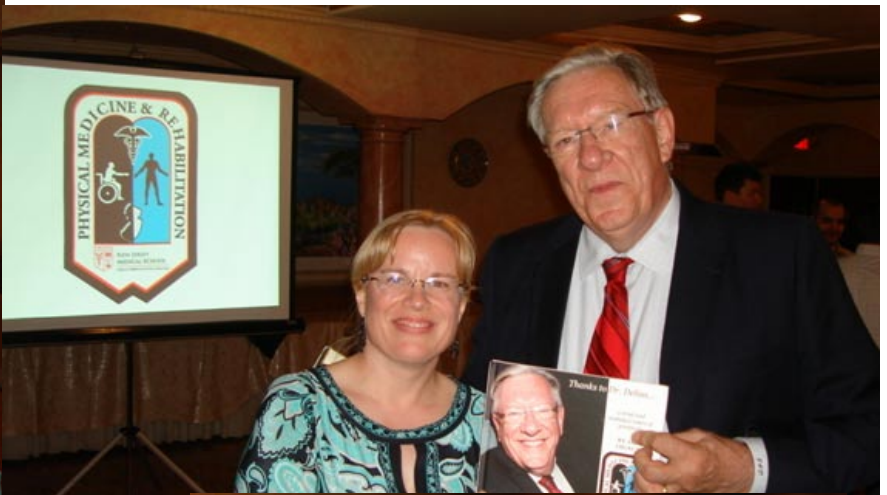
Taken from PUPSNACKS

Happy Retirement Celebrations for Dr. DeLisa



There is a **blue** shirt requirement to attend!
True or False





*The
memorial
book
created for
Dr. DeLisa*



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