

UNIVERSITY OF WISCONSIN

DEPARTMENT OF FAMILY MEDICINE AND COMMUNITY HEALTH

MADISON RESIDENCY PROGRAM

Welcome to Madison

2022 - 2023



RESIDENTS - FACULTY - STAFF - COMMUNITY - CURRICULUM - CLINICS



Department of Family Medicine
and Community Health

UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH



Department of Family Medicine and Community Health

UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH

Dear Future Family Physician:

Welcome! Thank you for your interest in our residency program. We have a terrific program, filled with energetic, committed, and bright residents, faculty, and staff. We believe in this journey, and we encourage you to join us!

This process truly is a match. We created this resource so you may learn about us and decide if we are the physicians you want to work with and learn from over the next three years. In addition, we hope this booklet will help you determine whether Madison is a place you would like to live for the next three years.

So, what is it we do here every day? Our core value is a commitment to the personal and professional growth of each resident in our program. That growth is fostered within the framework of a dynamic curriculum and is nurtured by the many extraordinary people who are our residents, faculty, and staff. We are, together, a community of colleagues who are generous in our support of each other. We celebrate what you bring to the program and learn from your perspectives and professional goals. We are proud of our graduates and all they contribute to the lives of their patients, their communities, and the health of people on broader scales.

Here are the people, the places, and the processes that make up our program. We continue to evolve in response to new challenges and new opportunities. Since 1969, when our program was founded, it has been based on several important principles:

- We are connected to our community and we are committed to serving its people. Madison is a great place to live and to learn. We strive to be part of the solution to problems – both the challenge of urban need and the demand of rural service. Wherever our graduates practice, we want them to have the skills and the desire to focus on their community and respond to its needs.
- We believe in full-range family medicine: outpatient care, hospital care, maternity care and procedures. We have been pioneers in family-centered maternity care training. We are convinced that our nation will continue to need full service family doctors and we gear our training to meet that expectation.
- We believe that understanding the complexity of personal, family, and societal dynamics are essential to maintaining and restoring health. This is enhanced by stimulating each other to develop a greater awareness of our own perspectives.
- We are committed to offering the best in evidence-based medical care. This requires state of the art information management resources and skills, and is increased by active participation in the process of scientific inquiry. When evidence fails to provide obvious direction, we accept uncertainty.
- We have fun! A career in family medicine is an extremely fulfilling pursuit. It is important for us to enjoy our work and to enjoy working together. Further, caring for ourselves, our families, and the parts of our lives that bring us joy and meaning are critical for our own personal and professional well-being.

We are proud of our program and of our department. As one of the original programs in family medicine over 50 years ago, we continue to be ranked as one of the top departments of family medicine in the country in the annual U.S. News and World Report.

Still, you should not take my word for what makes our program special: during your visit, investigate how these ideals are infused into the daily experience. Ask questions, seek out those who might share common interests, and see if we feel like your home for the next 3 years. We think you will find Madison to be a beautiful and vibrant place. It is a city that you, your family, and your friends will enjoy. We are confident that in our program you will find yourself among interested, enthusiastic, and caring people who share an exciting vision. Family medicine as a specialty choice is a means – not an end – to your journey. COVID-19 has certainly created a lot of changes and I can honestly say I have never been more proud of our residents and our program.

So, welcome! We are excited to get to know you during this recruitment process, and for you to get to know us.

Sincerely,

A handwritten signature in cursive script, reading "Ildi Martonffy, MD". The signature is written in black ink and is positioned below the word "Sincerely,".

Ildi Martonffy, MD
Madison Residency Program Director

Section 1

MADISON OVERVIEW

“The UW Madison FM Residency Program shines not only for its exceptional breadth of clinical experience and education but perhaps more importantly for the tireless enthusiasm and commitment of the faculty, residents, and staff. I am so thankful to have been a part of this residency community and have felt simultaneously challenged and supported every step of the way.”

Alyssa Bruehlman, MD, 2020 Graduate

THE CITY OF MADISON

Madison is Wisconsin's capital and has a metropolitan population of approx. 650,000. Madison is the second largest and fastest growing city in Wisconsin. It consistently ranks as one of the best places in the country in which to live, work and play, and is known as a center of innovation and advocacy. Madison has been honored for its business climate, arts and music scene, and recreation and sports teams. Madison is truly one of the nation's top cities.

Madison's history goes back to the indigenous Ho-Chunk people, who have been in this region for over 12,000 years. They named this area Tee Jop or the Four Lakes. In 1829, Judge James Duane Doty bought the area and renamed it after President James Madison. While many Ho-Chunk people were forced onto reservations in neighboring states, some resisted the displacement and others have returned. The culture of Madison is additionally influenced by diverse communities within the city including Black, Latinx, and Hmong populations.

The Capitol building is built on an isthmus bounded by Lake Mendota on the north and Lake Monona on the south. The Overture Center, an exciting performing arts complex, is located in the heart of downtown Madison. Sailboarders and the UW rowing team prefer Lake Mendota. Sailors, fishermen, water-skiers, and swimmers enjoy Lake Monona. Paddlers prefer Lake Wingra, a smaller and quieter lake just a few hundred feet from the residency offices and St. Mary's Hospital. Many distinct neighborhoods contribute to Madison's unique character. Its growing metropolitan area also encompasses many of the small communities that comprise Dane County.

Madison is home to the University of Wisconsin-Madison, one of the leading public universities in the United States. In addition to being an outstanding academic institution, state residents take great pride in the Wisconsin Badgers, with numerous Big 10 and NCAA championships in women's and men's athletics.

In addition, Madison is home to excellent public schools; world class theater, dance, and music on tour; live music offerings of all types; the Henry Vilas Zoo; the UW Arboretum; many hiking, biking and cross-country skiing trails; interesting ethnic restaurants; one of the largest farmers markets in the Midwest; shopping malls; and health clubs. The UW offers many recreational facilities; the lakes offer swimming and other water sports; and an array of opportunities for other leisure time activities for children, adults, and families.

Madison is growing in diversity. Healthcare leaders and community leaders, alike, are committed to addressing disparities in wellness, employment, and education amongst its citizens. The 2013 Race to Equity report (<http://racetoequity.net>) highlighted some of these disparities. History is often intertwined with oppression of those in the minority; this report has helped to energize our community to work strategically to change systems and structures and improve equity in our community. For those of us working with and living in diverse communities, addressing health disparities and working in support of health equity continues to be at the heart of our calling to medicine.

MADISON IS RANKED:



Most Bike-Friendly Cities in the U.S.
– Fast Company, 2019



Fittest Cities in America – Men's
Health, September 2019



#1 Best Cities for Work Life
Balance– Go Banking Rates,
November 2020



#2 Best Cities for Farmers Markets –
Better Homes & Gardens,
August 2022



Among Top LGBTQ Friendliest cities
– Human Rights Campaign
Municipal Equality Index 2021

EXPLORE MADISON:

[City of Madison](#) (official website)

[Greater Madison Convention &
Visitor Bureau](#)

[Isthmus – The Daily Page](#) (Resource
for local news and events)

[Madison Chamber of Commerce](#)

[Wisconsin's Farm Fresh Atlases](#)

[Yelp Madison](#)

[Travel Wisconsin](#)

[Wisconsin.gov](#)



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2022-2023

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THIRD – YEAR
RESIDENTS



Ropes Course Teambuilding
June 2021



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2022-2023

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SECOND – YEAR
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Orientation
June 2021



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2022-2023

FIRST – YEAR
RESIDENTS



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**FIRST – YEAR
RESIDENTS**



Orientation
June 2022



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Madison Residency Administration

Faculty Leadership



Ildi Martonffy, MD, Program Director, learned she was no longer a “flat-lander” when she came to Madison for her residency after completing medical school at the University of Illinois at Chicago following her undergraduate degree in biology from the University of Chicago. She finished residency in 2005 and then worked at the Beloit Area Community Health Center in Beloit, Wisconsin for almost five years before returning to Wingra Clinic as faculty. She enjoys the diversity of Wingra's patient population and is happy to care for many patients she has known for more than a decade. She enjoys spending time with her husband and children, which occupies most of her “free time.” Ildi became the Program Director in March 2017. ildi.martonffy@fammed.wisc.edu



Thomas Hahn, MD, Associate Director, grew up in rural Wisconsin and received his undergraduate degree from the University of Wisconsin – Eau Claire. He attended medical school at the University of Wisconsin School of Medicine Public Health and completed residency and an academic fellowship at the UW-Madison Department of Family Medicine and Community Health. Tom is faculty at the Verona Clinic. He practices full spectrum family medicine including inpatient and obstetrics and is involved with resident and medical student education. Tom enjoys running, music, and sculpting balloon animals. Thomas.hahn@fammed.wisc.edu



William (Billy) Michael, MD, Associate Director, has a medical degree from the University of Illinois College of Medicine in Chicago, IL and he completed residency at Puget Sound Family Medicine Residency program in Washington state. Prior to pursuing a career in medicine, Dr. Michael enlisted in the United States Marine Corps from 2001-2007 and this experience motivated him to pursue a navy commission through the Health Professions Scholarship Program (HPSP). After residency, Billy served as a US Navy physician practicing full scope family medicine at Naval Hospital Twentynine Palms, near Joshua Tree National Park. Upon the completion of his commitment to the US Navy, Billy and his family decided to move back to the Midwest and beautiful Madison, WI. Billy's academic interests include, among others, mental health prescribing and treatment in primary care and exploring relationships between specialists and primary care physicians, especially in a rural practice setting. Outside of medicine, Billy enjoys playing sports (especially ice hockey), reading nonfiction and science fiction books, exploring national parks, playing board games and spending time with his family – spouse, Jessika, two daughters, Madeline and Josephine and son, Liam. william.michael@fammed.wisc.edu

Residency Staff Team



Jenny White, GME Program Manager, joined the Madison Residency Team in December 2008. As Program Manager, she oversees the residency staff and operations. After earning her Bachelor's Degrees at UCLA in Political Science and German, she went on to be a Peace Corps Volunteer in Belize, where she worked with the youth development organization 4-H. Jenny lives in Madison with her husband, Nick, and kids, Elsie and Cam. At the moment, her favorite things include spending time with her family, knitting, board games and traveling. jennifer.white@fammed.wisc.edu



Katy Bixby, Health Professions Education Coordinator, joined the Madison Residency team in September 2014. Her responsibilities include coordinating the resident inpatient schedules, coordinating the faculty call and attending schedules, and providing administrative support to both the St. Mary's and UW Hospital services. In her free time, Katy likes to crochet, and read books. kathryn.bixby@fammed.wisc.edu



Vicki Daniels, Master Schedule & Outpatient Schedule Coordinator, joined the Madison Residency team in 2010. Originally from the small rural town of Richland Center, WI, Vicki received her BBA in Marketing from UW-Eau Claire. Vicki oversees the resident master schedule, helps assign and schedule outpatient rotation learning experiences, and handles time-away requests for second- and third-year residents. Vicki is blessed with a wonderful husband and four beautiful children. She enjoys digital scrapbooking, reading, creative writing, playing volleyball, and doing various volunteer

work. vicki.daniels@fammed.wisc.edu



Danielle Eithun, Residency Program Assistant, joined the Madison Residency Team in January 2020. As program assistant, she helps all members of the Residency Staff as needed. Depending on the time of year she may be coordinating food for orientation, helping with schedules, pulling reports for semi-annual evals or other tasks the team needs help with. Danielle has spent most of her life in the Madison area. She enjoys baking, reading, hiking, and biking with her three kids. danielle.eithun@fammed.wisc.edu



Dillon Novak, Health Professions Education Coordinator & Notary, joined the Madison Residency team in the winter of 2020. Dillon handles resident outpatient schedules, faculty evaluations, clinical adjunct faculty appointments, verifications, notarizations, pathway coordination, and other residency support. Originally from Chicago, he graduated from Northern Illinois University with a bachelor's in entrepreneurship and social responsibility. You can often find him in the history section of bookstores, playing video games, guitar, camping year-round, kayaking, or cooking new recipes. dillon.novak@fammed.wisc.edu



Dan Samuelson, Recruitment Coordinator, has been a member of the residency staff since July of 2007. Dan is the recruitment coordinator for the Madison and Baraboo programs, arranges R1 orientation, and serves as our New Innovations expert. As a lifelong Madison resident, he's excited to share everything that Madison has to offer. Outside of work, he enjoys lifting weights, writing and staying active in Madison.

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Justin Sena, MA, GME Coordinator has been with the Madison Family Medicine residency since 2016. He is originally from Albuquerque, NM, and he earned his Bachelor's degree in political science and theology from the University of Notre Dame and his Master's degree in the social sciences from the University of Chicago. Justin enjoys organization and creating order, which he does with resident evaluations, resident scholarly work, the community health curriculum, the Program Evaluation Committee, the Rural Health Equity Track, and many other residency activities. Justin enjoys exploring cities, urban architecture, and urban planning and he is a commercial aviation geek. He likes exploring Madison with his wife and basset hound. justin.sena@fammed.wisc.edu



Tressa Spingler is a Residency Assistant Education Coordinator and provides support and coordination for resident seminars, evaluations, rural rotations scheduling and recruitment. Tressa has lived in Madison since 2018 and has enjoyed all the outdoor activities Madison has to offer. She was born and raised Santa Maria, California and moved to Tennessee for most of her twenties. She received a Bachelor’s in Social Work from Middle Tennessee State University and worked in the TN state foster care system for many years. In her free time, she enjoys concerts, singing, photography, traveling and volunteering in her church community. Tressa hopes to soon complete her goal of visiting all 50 states with only three left to go. tressa.spingler@fammed.wisc.edu

Statewide GME Staff



Randy Ballwahn, Graduate Medical Education Contracts/Finance/Regulatory Specialist, manages CMS and ACGME regulatory compliance and oversees educational and financial agreements for all DFMCH residency programs. In addition, he manages the budgets for the Madison and Baraboo programs and Statewide GME. He and his wife Kelli love to travel, support local food systems, and drink good lagers and pilsners. Their son Isaac is a grad student in the iSchool Digital Archiving program at UW-Madison. Randy enjoys obscure music, plays drums with The German Art Students, rides bikes, and obsesses over baseball. randy.ballwahn@fammed.wisc.edu



Elizabeth Bingman, MS, Director of Educational Services, joined the DFMCH Education Team in September 2018. She earned her Bachelor’s and Master’s degrees at the University of Wisconsin-Madison. Elizabeth supports and provides administrative leadership, strategic planning and oversight for the department’s statewide Graduate Medical Education programs, Statewide Osteopathic Collaborative, fellowship programs, Office of Medical Student Education, and the Madison residency program as well as administrative leadership for the Wisconsin Rural Physician Residency

Assistance Program (WRPRAP). Elizabeth enjoys spending time with her family, and loves year-round hiking around Wisconsin. elizabeth.bingman@fammed.wisc.edu



Denise Hix, GME Coordinator/UW Statewide Osteopathic Collaborative Coordinator, recently joined the DFMCH Education team in April 2021. She grew up in rural Iowa, attending Iowa State University for her undergraduate degree in psychology, and University of Colorado-Boulder for her graduate degree in behavioral genetics. She has worked as a biology academic advisor, neurology practice manager, and EHR software tester. As a wildlife foster, her summers are filled with baby squirrels. She enjoys spending time with her son, daughter-in-law, and twin granddaughters, and always has photos to share. denise.hix@fammed.wisc.edu

Contact Information

-- For information about the application process or your scheduled interview, contact Dan Samuelson at madisonbaraboo.applicant@fammed.wisc.edu or call (608) 265-4668.

-- For information about the program, email Ildi Martonffy at ildi.martonffy@fammed.wisc.edu or Jenny White at jennifer.white@fammed.wisc.edu.

WHY CHOOSE MADISON?

Residents

The strength of our program relies on our outstanding residents. In addition to their patient care responsibilities, residents are involved at every level of administrative and educational policy and decision-making in the program.

An eclectic group of 47 people, the Madison residents come to the program with diverse backgrounds, medical school experiences, political opinions, and personalities. In this environment, kindred spirits are easy to find.

Faculty

Our residency faculty is a talented and dynamic group of academic family medicine educators and clinicians, complemented by fellowship recipients and community family physicians.

The Madison Residency is an integral part of the University of Wisconsin Department of Family Medicine and Community Health (DFMCH), which includes faculty involved in research, medical student education, outreach, and administrative leadership. Most faculty are active participants in the residency—seeing patients, teaching seminars, and precepting residents. Our faculty has special expertise in many areas including:

- Addiction Medicine
- Advanced Life Support in Obstetrics
- Community Health
- Developmental Disabilities
- Epidemiology
- Evidence-based Medicine
- Geriatrics
- Global Health
- Integrative Health
- LGBTQIA+ Health
- Management of Health Systems
- Pregnancy Care
- Osteopathic Manipulation
- Pain Management
- Palliative Care
- Population Health
- Practice-based Research
- Rural Medicine
- Sports Medicine
- Women's Health

Our behavioral health faculty has extensive experience working with family medicine residents. In addition to leading seminar presentations, they are always available for consultation and co-therapy. They offer a rotation in counseling for interested residents. In addition, residents work closely with faculty nurse practitioners and physician assistants for obstetric, geriatric, and pediatric visits, as well as in nutrition, weight control counseling, and chronic illness care.

Our residents annually evaluate the faculty and consistently rate them as excellent clinicians, educators, and researchers.

Family Medicine Centers – FMC's

Each of our FMCs (Belleville, Northport Dr (Northeast), Verona, Wingra) offers a large and varied patient population from which residents build their practice. Each center has full-time residency faculty members who provide care to their own active practices in addition to teaching residents.

Our residents benefit from preceptors who are involved in the research, medical student education, and community health within our department.

While each center has its own distinct characteristics, all provide residents with a full range of family medicine experience. Resident graduates from each of our clinics go on to practice in cities, rural areas, underserved communities, and international locations. Our graduate surveys continue to reinforce that preparation at each clinic site is comparable in all aspects of family medicine including pregnancy care, geriatrics, community medicine, counseling, and procedures.

After matching with our program, incoming residents are asked if they have a clinic preference. Over the years, we have been consistently successful in pairing residents at clinics where you feel a sense of community, experience your first “own” clinical practice, and leave well trained. We are fortunate that all the centers have busy, diverse practices. Two residents each year will be selected to participate in the Rural Health Equity Track at the Belleville Clinic. This selection is made by the program director based on demonstration of interest in rural medicine and predictors of future practice in a rural area.

To learn about each center, watch our clinic video tour, provided on your interview day.

The Best of Both Worlds: St. Mary’s Hospital, Meriter Hospital & UW Hospital

For many students, an important consideration is whether they prefer the kind of training available in a setting where they are the only residents as family medicine residents, or part of a system with multiple residency programs. While the final value of a training experience rests largely on the resident him or herself, location and structure are important. The UW-Madison Family Medicine Residency is a university program primarily located in our community: our family medicine clinics, St. Mary’s Hospital and Meriter Hospital. Our program combines a “high touch” community practice and community hospital flavor with the strengths of being an active and critical part of the University of Wisconsin School of Medicine and Public Health.

SSM Health—St. Mary’s Hospital (SMH): SMH is a major regional medical center offering state of the art medical care. Family medicine residents are the only full-time graduate medical trainees at the hospital. A dynamic, forward-looking institution, St. Mary’s has steadily supported our program since 1970. SMH’s medical staff is highly qualified and come to St. Mary’s knowing that they will be involved in the clinical education of family medicine residents and are enthusiastic teachers. SMH also has excellent nursing and ancillary support as well as a creative and engaged administration. St. Mary’s wins quality awards annually, including Magnet Hospital status as one of the best places in the country for nurses, the Guardian of Excellence award for high-level patient satisfaction in inpatient care from the Press Ganey organization, Thomson Reuter’s 100 Top Hospitals, and IBM Watson Health’s Top 100 Teaching Hospitals.

The Family Medicine Department at St. Mary’s is the largest section in the hospital and represents the only full-time house staff. The case mix is typical of a full-service community hospital, and residents are respected as important members of the health care team.

Unity Point Health—Meriter Hospital (Meriter): Meriter Hospital is a nonprofit, 448-bed community hospital, providing a complete range of medical and surgical services. Meriter has grown to become the largest delivering hospital in the state of Wisconsin and is regionally known as a center for

maternal-newborn care. Our residents and faculty run a Family Medicine Obstetrics and Newborn Service (FMONS), utilizing the family medicine model of taking care of both moms and babies. Family medicine faculty are in house to provide education and support to residents. Residents also deliver and round on their continuity OB patients at Meriter.

University of Wisconsin Health – University Hospital (UWH): UWH has been rated as one of the top 50 hospitals in the country for the past decade. In 2021, U.S. News and World Report ranked UWH as one of “America’s Best Hospitals,” ranking UWH as the top hospital in the state of Wisconsin for the 11th consecutive year. All our teachers are members of the UW faculty, and we take full advantage of the wide variety of opportunities offered by the medical school and our major university environment. The UW Hospital Family Medicine Inpatient Service is a “self-contained” service in which our faculty are the attending physicians and senior residents lead the team. First year residents see a robust number of cases while rotating on the UWH Pediatrics service. Many residents elect time in one or more specialized outpatient clinics at UWH during their second and third year of training. Thus, while SMH is “home,” you benefit from exposure to the different clinical approaches and educational opportunities that exist only at an academic medical center.

Recognition of Different Learning Styles

As a sophisticated adult learner, you, of course, are responsible for your own education. We recognize that you come with diverse educational backgrounds and learning styles. In response, we make a number of educational opportunities available.

Peer Education: Family Medicine residents are the primary house staff at SMH. Our second- and third-year residents work with first-year residents on OB, MICU, Family Medicine Service, and Pediatrics at SMH, the Family Medicine Service at UWH, and Family Medicine Obstetrics and Newborn Service at Meriter. For those of us who learn best by teaching others, it is an optimal learning environment. In addition, senior residents from the obstetric and surgery programs rotate in a limited way through St. Mary’s, and fellows from other specialties work on consulting services at UWH. Our residents enjoy interacting with these residents and the perspective they bring to the educational environment.

Ambulatory Care: We learn by doing: you learn how to care for a population of patients by doing exactly that. Physician faculty are always available for one-on-one teaching before, during, and after patient care hours. Behavioral health faculty participate in consultations, joint visits, or referrals. Business office and patient care staff at each center are valued partners who have chosen to be involved in resident education; they too have much to offer.

Small Group Format: As a UW-Madison resident, one half-day each week in all three years is protected for our seminar series. These seminars focus on clinical, behavioral, and population health topics. Wildlife, an occasional Wednesday or Thursday conference open to everyone in the program, is a venue for the exploration of an eclectic mix of topics. Clinic-based educational afternoons are protected time for clinic residents, faculty, and staff to work on the proactive care and systems-based design required in the patient-centered medical home.

Lectures: There are many opportunities for didactic learning, including rotation-specific presentations, Monday morning group rounds, and Wednesday morning Primary Care Conference. First-year residents have every Thursday afternoon protected from clinical duties so they may participate in Family Medicine seminar, a variety of wellness skills, EKG readings, and “Survival Skills” lectures. First-year residents enjoy the weekly opportunity to socialize afterwards.

Clustered Didactics: Clustered Didactics for second- and third-year residents brings classmates together for two weeks combined in their second and third years. During these weeks, residents spend time focusing on clinical areas such as sports medicine, geriatrics, gynecology, addiction medicine, men’s health, nutrition, and management of health systems. These workshops tend to be hands on and interactive. Residents still participate in their continuity clinic and seminar during this week.

Computer Resources: As University employees, access to online resources is almost infinite. Residents incorporate evidence-based resources including Family Practice Inquires Network (FPIN), Dynamed, Essential Evidence, podcasts, and audience-based response systems into their teaching. All clinical sites have fully integrated electronic medical records and are all Epic brand.

Medical Student Teaching

Residents in the Madison program have the opportunity to interact with and teach medical students in several settings:

In the Family Medicine Center: All UW SMPH students take a required, 12-week Chronic and Preventative Care rotation in their second and third year, and a required ambulatory acting internship in their fourth year. During most rotations, one student is assigned to work in each residency clinic. In addition, many fourth-year students from UW SMPH and other medical schools choose to do a one-month elective in our residency clinics. Residents serve as co-teachers of these students.

In the medical school: Residents have the opportunity to help teach history taking and physical exam skills to first- and second-year medical students and also help teach the internship prep course for fourth year students going into family medicine. Some residents have been involved in activities of the UW SMPH Family Medicine Interest Group, including participation in our recently established “Shadow a Resident” program. Residents are also teachers at our annual DFMCH sponsored Procedures Fair for medical students.

In the hospital: Medical students may choose an elective at either the St. Mary’s or UW Family Medicine services, offering a more extended opportunity to help students grow in their clinical skills.

Collegiality

Faculty and residents are truly colleagues in the Madison program. Resident leadership is a core value of the Madison program. Residents and faculty work together on patient care, academic pursuits, and administration. They jointly present conferences, conduct journal club, write articles, and work on research and audit projects.

Residents participate actively on all committees as well as on ad-hoc working groups designed to continually improve clinical, educational, and community health efforts.

Support/Social Network

During the two-week orientation for first-year residents, the process of building a support network among new colleagues begins. There is ample time to get to know each other, including

participation in a team-building day. Senior residents, faculty and staff are very sensitive to the anxieties and long hours that are facts of life for first-year residents.

Throughout the year, resident support is available in a number of ways:

Resident Network: Our residents are a social group. Residents often gather informally at each other's homes or popular spots in the city, such as the Memorial Union Terrace on the UW campus. Ongoing activities have included a monthly book club for residents and significant others, a co-ed volleyball team, an Ultimate Frisbee team, monthly brunch gatherings, and a play group for residents with young children. Significant others, children, and friends are a welcome addition to program social activities.

Support for Partners: A support group for residents' significant others connects resident families as well. This group provides resident partners a means to support each other and have residency be just a bit less challenging for a resident's partner. The group learns from those who came before and passes on wisdom regarding rotations, call, great restaurants, stores, sports groups, etc.

Program Support: We care about the health and well-being of our residents. As such, we have many activities that are supported by the residency program:

- The famous mid-winter "Fizzler" Dinner. First-year residents and their significant others mark the half-way point in the year with food and drink at a local Madison restaurant. Each intern is presented with a special award from the chief residents, and this event is always a fun time.
- Chief Resident Rounds bring residents together every other Wednesday and Thursday before lecture to discuss pertinent issues and enjoy each other's company.
- Wildlife seminars provide a forum for residents to learn about topics of interest that aren't taught in the regular seminar series.
- A yearly resident retreat that includes families takes place over a fall weekend at an outdoors-oriented site outside Madison. Faculty cover patient care responsibilities during the retreat.
- Monthly resiliency training sessions, Mindfulness or Balint Groups during protected seminar time provides all residents the opportunity to support one another in a safe environment.

In addition, the program director and all faculty and residency staff are open and available to residents for any purpose. We truly care about our residents' quality of life as well as promoting the best educational experience.

"The entire clinic and residency staff helped me grow as not only a physician, but a better person. I was able to explore niches of family medicine I wasn't aware existed and got amazing training in a wide variety of areas. Most importantly, my residency class provided me with several lifelong friends."

–Anne Drolet, MD, 2022 Graduate

PROGRAM HIGHLIGHTS

Strong Continuity Practice

Our Madison program clinics are well-established family medicine practices with high community visibility. Each resident has their own panel of patients who identify them as their family physician. Residents in our program learn how to effectively function as a member of a care team in the patient-centered medical home. First year residents start off residency with a 2-week clinic and community orientation where they spend 2 weeks learning clinic workflows, getting to know clinic staff, seeing patients, and learning principles of community health, as well as exploring their clinic communities. This orientation helps to establish the continuity clinics as the home base and hub of education during residency.

We seek to model excellence in all aspects of our clinical work. Fundamental to that goal is a commitment to patient- and family-centered care. We feel a particular responsibility to offer and to teach an approach to patient care that is uniformly based on principles of respect, flexibility, collaboration, and responsiveness to the needs and desires of those who choose to come to us. We have an expectation that in the context of our individual practice styles, each of us will provide care in a consistent and integrated manner. Though the patient-centered medical home (PCMH) model is now a formal designation, we have provided care consistent with those principles for years. Our sophisticated database and quality support staff allow us to monitor and improve the quality of care we provide at each site. To assure that patients receive consistent care, we have an expectation that all providers in our system will present patients with the full range of legally acceptable options in reproductive health, end-of-life care, and other such areas in a supportive manner that respects patient preferences, even when choices may not perfectly align with the opinions of individual providers.

Our clinics also provide education in the real world of complex medical care systems. We pride ourselves on responsiveness to the challenges faced by uninsured and underinsured patients. Residents leave the program possessing a familiarity with the ever-evolving economics of medicine.

Behavioral Health

The behavioral health curriculum has long been a strong foundation of our program. Faculty and residents passionately advocate for the mental health of patients and their families, including working closely with the behavioral health faculty to offer a collaborative care behavioral health model in primary care. Faculty and residents share visits with and refer patients to our behavioral health faculty. In addition to regular behavioral health didactic seminars, groups, and office-hour drop-ins, residents can take a behavioral health elective to further strengthen their primary care-based, brief intervention psychotherapy training.

- **Julia Yates, LCSW**, directs the behavioral health and wellness/resiliency curriculum for all residents.
- **Erin Ford, LCSW, PMH-C** sees patients and teaches at the Belleville Family Medical Center.
- **Olga Arrufat-Tobon, LCSW** and **Bethany Garcia, PsyD**, see patients and teach at the Northport Dr (Northeast) Clinic.
- **Gretchen Straus, LPC**, sees patients and teaches at Verona Family Medical Center.

- Wingra Clinic has an integrated behavioral health model, with a team of Behavioral Health specialists from the Access Community Health Centers who rotate in the clinic on an ongoing basis.

Balint Leadership trained faculty provide a Balint group processing experience every few months for residents. These groups support residents in exploring the power of relationship in medicine while empowering empathy and social connection.

Community and Population Health

Our longitudinal community and population health curriculum features an understanding of how to practice community-based medicine and work with key community resources that are important to patients. During the first year, residents meet with stakeholders and representatives from community agencies to network with community partners, learn advocacy skills, and be able to speak to patients about community resources. Residents then individualize their experience in addressing health and wellness issues associated with their center’s patient population. During protected time in the next two years, residents participate in a community health learning experience to continue developing as a physician-leader within the community with the assistance of community health and clinic faculty, other residents, and community members.

The goals of the community and population health curriculum include the following:

- To understand the community served by the clinic.
- To familiarize residents with the local resources that address community health issues.
- To integrate the use of local health and social resources into clinical care.
- To understand the differences between “health” and “the healthcare system.”
- To gain skills around partnering with communities, including when to lead and when to step back.
- To understand the impact of social determinants of health on the health outcomes and well-being of patients.
- To understand how health and social policy at the local, state and national levels interfaces with patient health.
- To gain awareness around opportunities for physician advocacy in support of patients and equitable systems.

Maternity Care

The Madison program has made a sustained commitment to prepare residents in maternity care and has developed a well-deserved reputation for strength in this area. We have a well-established rotation at St. Mary’s hospital where our residents have been delivering babies since the inception of the program. First year residents experience delivery of obstetrical care with our teaching obstetricians and community family physicians. Nearly all the intrapartum care for these patients and their families included family medicine residents.

Residents also experience obstetric and newborn care in a family medicine model on the Family Medicine Obstetric and Newborn Service at Meriter hospital. Residents work with community family medicine physicians to provide care to the mother-baby dyad from admission through discharge.

Meriter has grown to become the largest delivering hospital in the state of Wisconsin and is regionally known as a center for maternal-newborn care. There were over 4,600 births at Meriter in 2021. Family medicine faculty are in house to provide education and support at Meriter hospital.

Residents can expect to be involved in 100+ deliveries on our OB rotations. In addition, all residents manage their own obstetric patients in our family medical centers—from first visit to delivery to postpartum ongoing care, which brings the total for some residents to 120+ deliveries over the three years.

ALSO® (Advanced Life Support in Obstetrics): In 1992, DFMCH faculty members John Beasley, MD, and Jim Damos, MD, with contributions from many other DFMCH faculty, developed the acute obstetrics management course entitled ALSO®. Similar in its protocols to ACLS and ATLS, the course is well known and now taught nationally and around the world. Madison residents take ALSO® at the beginning of their first year.

Osteopathic Recognition

Our program was among the first residencies to achieve ACGME Osteopathic Recognition in 2015. Our osteopathic residents participate in the DO Track, which provides excellent training in Osteopathic Principles and Practice (OPP) and Osteopathic Manipulative Treatment (OMT). Residents have regular OMT clinic sessions with a DO preceptor at their continuity clinic. They are also encouraged to think about ways to apply OPP and OMT to any clinic visit. Additionally, as part of the Statewide Osteopathic Collaborative, DO residents attend quarterly Osteopathic Conferences with other DO residents and faculty from around the state. These conferences focus on topics specific to family medicine, and provide an opportunity for residents to practice, deepen their osteopathic assessment and manipulation skills, and participate in osteopathic scholarly activity. Allopathic residents have the opportunity to learn OPP and OMT from their osteopathic colleagues by participating in the longitudinal elective OMT4MD. Residents on this elective complete readings on their own, shadow osteopathic faculty in clinic, then participate in 8 hands-on lab sessions throughout the year.

Rural Health Equity Track (RHET)

The Rural Health Equity Track prepares residents to be leaders in improving rural health care. Through a customizable community focus and emphasis on health equity, RHET prepares residents for rural practice and rural health advocacy. The program facilitates rural rotations and resident engagement in rural Wisconsin communities. RHET residents gain skills to help patients with needs that otherwise might go unmet in rural communities, such as medication assisted therapy (MAT) for opioid use disorder. RHET residents receive specific training to practice family medicine in rural areas and gain specific skillsets focused on population health analysis and reducing health care disparities for rural communities.

The Rural Health Equity Track provides added value to the traditional Madison residency by incorporating rural health and leadership experiences into the scheduled curriculum. RHET residents have their continuity clinic at our rural Belleville practice. In addition, RHET residents complete more rural rotations than the standard Madison resident and receive specific training on mental health and addiction issues in rural communities. RHET residents participate regularly in a rural free clinic and rural critical access hospital work in the R2 and R3 years. These rural rotation experiences and community involvement give RHET residents an opportunity to target and train for a specific rural Wisconsin community for future practice. Additionally, RHET residents are funded and scheduled to attend two national meetings related to Rural Health, such as the National Rural Health Association

Annual Conference, during their three-year residency. The RHET's leadership curriculum deepens the residents' understanding of rural health issues and avenues for improving rural health and rural health care as well as connects the residents with mentors and organizations that further their lifelong involvement as rural health advocates.

Residents in the Rural Health Equity Track fully participate in the Madison residency curriculum, which emphasizes broad skills, including OB, ICU care, and strong elective options. They attend the same didactic sessions and participate in rotations through St. Mary's, UW, and Meriter Hospitals. Two resident physicians join the RHET each year through a post-match selection process.

Rural Rotation

To maximize residents' training experience, a four-week rural rotation is required for all residents in the second year. During this rotation, residents not only gain exposure to small town practice, but they also get an intense hands-on experience that has an important impact on self-confidence, maturity, and clinical competence. Rural rotation sites throughout Wisconsin include Beaver Dam, Dodgeville, Lancaster, Richland Center, Shawano-Menominee, and Watertown. Living accommodations are made for residents at each of the alternate sites as needed, and financial support is provided for travel costs.

Rural Training Track in Baraboo

In July 1996 the Madison Residency Program expanded to create an outstanding rural training track in Baraboo, WI, 40 miles from Madison. There are two resident positions each year in this program. The first year of training is almost identical to that of the 16 residents matched to the core program in Madison. The Baraboo residents rotate on inpatient services at St. Mary's Hospital, Meriter and at UWH. The second and third years are spent primarily at SSM Health Dean Clinic - Baraboo and SSM Health St. Claire Hospital with continued connection to the core program through conferences, elective rotations, and resident support activities. The rural program is fully accredited with osteopathic recognition. Separate information and materials are available upon request.

Management of Health Systems

Our management of health systems/practice management curriculum aspires to give our residents the tools and experience that will prepare them to be innovators and leaders in practice redesign. We believe that thoughtfully configured health systems improve patient outcomes, enhance efficiency, reduce error, and support adequate reimbursement.

All residents have a four-week rotation with longitudinal experience in Management of Health Care Systems. The rotation is led by Brian Arndt, MD. Topics including quality improvement, managed care, health insurance and Medicare, personal finances and retirement planning, practice site selection, personnel management, clinical operations, and practice finances. Most topics are introduced through learning modules. On a quarterly basis, residents also receive disease registries and other data about their own practices. Panels of program graduates share their experience in a variety of settings with current residents. Faculty and staff are available to help with career planning and other aspects of practice management.

Family Medicine Seminars

Our weekly Family Medicine Seminars present a comprehensive curriculum. First-year sessions concentrate on common inpatient and outpatient medical topics, while the second and third year

seminars take a deeper dive into full spectrum family medicine topics. Topics are listed later in this booklet.

Clustered Didactics

Each resident is scheduled for one clustered didactic week in each the second year and third year. During that week the residents spend two days in small groups discussing two or three topics. By clustering a set of topics into smaller groups, problem based learning and procedure skills can be taught more effectively. Areas of focus are: Gynecology, Management of Health Systems, Men's Health, Addiction Medicine, Geriatrics, Nutrition and Musculoskeletal. A competency evaluation is integrated into each session.

Medical Informatics and Computer Support

The DFMCH is a founding member of the Family Practice Inquiries Network. FPIN is a dynamic collaboration of academic departments and individuals from around the country to create an evidence-based resource that is uniquely configured to meet the information support needs of family physicians at the point of care. Many residents are able to write FPIN articles that answer specific clinical questions and are published. We believe evidence-based medicine skills assure our patients receive state of the art care, both now and through our graduates' careers. Residents lead Journal Club conferences in the second-year using EBM tools and present an in depth Primary Care Conference in their third-year based on the best available evidence.

The Information Technology Services (ITS) unit of the DFMCH keeps abreast of new technology and strives to provide computer users with the best service possible. Our website provides online curriculum, including videoconferences in both real time and archived. Clinic-based resources and electronic health record tips are constantly shared and improved. Our email system is web accessible from anywhere in the world. Additionally, we have access to the many resources available through the UW School of Medicine and Public Health's Ebling Library.

Global Health

Global health interests are shared by several DFMCH faculty who have been involved in establishing clinical training sites internationally. Ann Evensen, MD and Lee Dresang, MD have substantial international experience and assist residents who wish to take electives abroad. There are opportunities for senior electives in Belize, Haiti, Honduras, Ecuador, Uganda, Ethiopia, India, and other international settings. Conferences, seminar time and informal interest groups provide additional support for residents who anticipate pursuing international health experiences. The Madison program has also developed a Global Health Pathway for residents with a special interest in this area.

Integrative Health

Integrative Health is defined as healing-oriented medicine that takes account of the whole person (body, mind, and spirit), including all aspects of lifestyle. It emphasizes the therapeutic relationship and makes use of all appropriate therapies, both conventional and complementary. Our belief is that integrative health is synonymous with family medicine. Both are rooted in finding the most efficient and effective ways to enhance the body's ability to self-heal. The UW Department of Family Medicine and Community Health has a nationally prominent integrative health program and fellowship. Residents may receive education in acupuncture, nutrition, bodywork, botanicals/supplements, mind-body therapies, energy medicine, mindfulness, and spiritual connection.

A number of integrative health experiences are built into the curriculum for all residents, and resident may elect to do additional training as well. Options include the Integrative Health Pathway, which assists residents with tailoring outpatient electives toward an integrative health focus; residents also have the option of applying for the Academic Integrative Health Fellowship, which offers two years of additional training for those wishing to become leaders in the field.

The “Aware” Curriculum is a longitudinal, integrated thread throughout all three years of residency. The curriculum focuses on mindfulness, self-care, and various approaches residents may follow to explore how their beliefs inform not only their medical practices, but all aspects of their lives. The Aware Curriculum, includes experiential learning opportunities, didactics, development of Integrative Health-style self-care plans, mindfulness training, and more. Residents are encouraged to participate in mindfulness-based stress reduction and be proactive participants in a healthy work-life balance and overall wellness.

Salary and Benefits

Residents in the Madison program are University of Wisconsin employees. Salaries set through the state personnel system are for all UW resident physicians regardless of specialty. 2022-2023 resident compensation is as follows:

	Monthly	Annually
First-year	\$5,298	\$63,583
Second-Year	\$5,520	\$66,246
Third-Year	\$5,764	\$69,175

Health Insurance: Residents may choose from among several different health insurance plans and can include their immediate family (spouse, as well as dependents) in their coverage. The University of Wisconsin pays 80 to 90 percent of the cost, depending on the plan selected. Preventative dental care is part of several plans.

Other Benefits:

- Disability insurance is also provided to our residents with premiums fully paid by the DFMCH.
- Term life, major medical, accidental death, vision care insurance, and supplemental dental insurance options are available at low group rates.
- Participation in the UW’s tax sheltered annuity investment program and an employee reimbursement account that allows the use of pre-tax funds for childcare and uncovered medical expenses.
- Access to UW recreational facilities, libraries, technology support services, and other resources.

Malpractice Coverage: Malpractice insurance is provided to all residents through the University of Wisconsin for clinical activities that are within the scope of residency duties. Moonlighting is permitted during the second and third years with program approval. Residents must obtain their own malpractice coverage and separate DEA for moonlighting activities.

Time Away: The following numbers of working days are available per year for vacations, attendance at professional meetings, and participation in CME.

	PGY 1	PG Y 2	PGY 3
Vacation	15	20	20
CME	0	5	5

Our program has well defined and gracious policies for parental, medical, and other leave. These policies and other important personnel information are compiled in the Residency Employment Information manual that is updated annually. It is available for review during the interview day and is available online:

Resident Employment Manual

<https://www.fammed.wisc.edu/files/webfm-uploads/documents/residency/residency-manual.pdf>

Life Support Courses

The DFMCH offers a full range of life support courses, as part of the curriculum at **no cost to residents**.

- **ACLS (Advanced Cardiac Life Support)** Certification is expected prior to beginning residency. It can be scheduled before orientation for incoming first-year residents who are not yet certified and residents can get these costs reimbursed.
- **ACLS** re-certification is offered in April during the second year.
- **ALSO® (Advanced Life Support in Obstetrics)** is incorporated into first-year orientation.
- **PALS (Pediatric Advanced Life Support)**, including an overview of neonatal resuscitation, is incorporated into orientation.
- **NRP (Newborn Resuscitation Program)** is incorporated into the first-year seminar series.

Educational Allowance

Residents receive an educational allowance during each year of residency to be used for supplemental medical education conferences, exams, licensing, medical-related memberships not covered by the program, and other educational expenses. In 2022-2023, allowances are as follows: **first-year: \$1000; second-year: \$1000; and third-year: \$1000**. This allowance is in addition to the life support courses already provided by the program.

GRANTS, RESEARCH AND FELLOWSHIPS

The University of Wisconsin - Madison Department of Family Medicine and Community Health is one of the top academic departments in the country and is annually among the leaders in National Institutes of Health (NIH) funding for research. Several projects have gained national and international recognition. Most importantly, these projects offer residents excellent learning opportunities. Faculty areas of interest and projects are described below.

Tenured Family Medicine Faculty Research

Bruce Barrett, MD, PhD is a 1997 graduate of the DFMCH Eau Claire residency program. He completed the Madison-based Primary Care Research Fellowship in 1999 and is now the DFMCH Vice Chair of Research. He served as director of this fellowship from 2008-2014. He is also the director of a T32 grant from the National Center for **Complementary and Alternative Medicine (CAM)** designed to provide research training to individuals aiming for careers in health science research related to CAM. He has conducted numerous studies relating to upper respiratory infection and has developed an outcomes instrument for measuring the common cold (Wisconsin Upper Respiratory Symptom Survey). He was recently awarded an NIH grant from the National Center on Complementary and Alternative Medicine to continue his study on Meditation and Exercise for the Prevention of Acute Respiratory Infection (MEPARI-2).

Randy Brown, MD, PhD joined the DFMCH as a fellow interested in research in **drug and alcohol abuse and dependence**. He received an NIH K23 award to study the treatment outcomes of drug court programs that address dependence issues. He is also the Director of the UW Addiction Medicine Fellowship. This fellowship, in collaboration with the William S. Middleton Memorial Veterans Hospital, provides clinical experience and instruction in the management of substance use disorders. Created in 2010, it is one of the first programs in the country that provides training to family physicians with an interest in becoming Board Certified in the newly recognized specialty of Addiction Medicine.

Valerie Gilchrist, MD, is a past-chair of the DFMCH. Her research interests include **primary care health care delivery systems**, preventive services, cardiovascular risk and hypertension, management of chronic conditions, women's health, primary care research networks, community medicine, and qualitative methodology. Dr. Gilchrist is also the Principal Investigator of an NIH grant from the Health Resources and Services Administration to develop the infrastructure for the transformation of the department to the Department of Family Medicine and Community Health.

Jon Temte, MD, PhD, joined the faculty of the DFMCH in September 1993. His work centers on novel approaches for infectious disease (predominantly influenza) detection in schools, long-term care facilities, clinics, and other sites where infections can quickly surge. By constantly monitoring patterns of illness and disseminating up-to-date data on disease prevalence, we provide clinic teams necessary tools for situational awareness, allowing them to make the best possible clinical choices for their patients.

Wisconsin Research and Education Network (WREN):

The Wisconsin Research and Education Network, directed by Sarina Schrage, MD, is a statewide practice-based research network of over 300 primary care clinicians and academic researchers. Over 50 WREN member-clinicians conduct high-quality translational research and quality improvement

projects in "real-world" family practices across 35 Wisconsin communities. Many of these projects have been published in peer-reviewed journals.

Examples of WREN-supported projects include a study addressing practice-based research networks to accelerate implementation and diffusion of chronic kidney disease guidelines in primary care practices, evaluation of a Health Information Technology workflow assessment tool, a project designed to study collaboration among pharmacists and physicians to improve outcomes (CAPTION), and a study examining interaction analysis as a novel approach to understanding patient trust in physician and patient outcomes.

Research Opportunities:

Research projects of interest in the DFMCH are being pursued by family medicine faculty on topics such as alcohol brief intervention and treatment, chronic pain, nutrition, childhood obesity, cost-effective care, HMO development, clinical epidemiology, physician satisfaction, integrative health, nasal irrigation, community based participatory research, clinical interventions, care and study of the family, and other clinical topics. Numerous opportunities exist for collaborative efforts between faculty and residents. Each year, several residents elect to work with individual faculty members on research projects, either on a longitudinal basis or during an elective block. If you have specific research interests, please let the residency staff know, and we can connect you with faculty and residents who share your interests. The Research Director for the DFMCH will also be happy to discuss your interest in working with ongoing projects in the DFMCH and to connect you with the physician or research faculty investigators.

DFMCH Scholarly Small Grant Program: Each fiscal year, the Department of Family Medicine and Community Health allocates funds to support scholarly projects. These funds can be used by DFMCH faculty, fellows, residents and academic staff for research and other scholarly projects. The small grant program supports the Department's overall research mission by funding small research studies, academic projects, or evaluation of educational interventions that are expected to lead to the development of presentations, extramural grants, and publications in peer-reviewed journals. Additional information is available on the [DFMCH Small Grant website](#).

Fellowship Opportunities:

Integrative Health Fellowship allows participants to combine academic and Integrative Health interests into a two-year fellowship experience to create national and international leaders in Integrative Health. Fellows participate in an intensive online Integrative Health curriculum with topics including nutrition, Chinese medicine, manipulative therapies, mind-body techniques, supplements, energy medicine, spirituality, the philosophy of medicine, Ayurveda, Integrative Health and the law. In addition to their continuity clinic practice at Yahara Integrative Family Medicine Clinic, fellows see patients one half-day per week at the University of Wisconsin Integrative Health Clinic and become board-certified with the American Board of Holistic Medicine. Fellows choose one or two healing modalities of particular interest to them for more intensive training. For more information, see: <http://www.fammed.wisc.edu/fellowships/integrative-med>

Academic Medicine Fellowship is an opportunity for family physicians to enhance their teaching, clinical, scholarly, and leadership skills in preparation for a faculty position in an academic setting. The one- to two-year program is designed to be flexible, allowing each adult learner to participate in a variety of professional and academic opportunities that best meet his or her professional interests and career goals. For more information, see: <http://www.fammed.wisc.edu/fellowships/academic>

The Primary Care Research Fellowship is a two- to three-year post-residency program where clinicians have protected time for research and skills development. The course work and seminars taught by faculty from Family Medicine, Medicine, Pediatrics, Preventive Medicine, Bio-statistics, and associated fields incorporate work in the area of the fellow's scholarly focus while developing the fellow's basic research skills and an understanding of the social networks necessary for success in the field. Clinical work and teaching options are available to help the fellow maintain and further develop skills as a clinical provider and teacher. The Program's goals are: 1) to increase the number of qualified health services researchers conducting community-based clinical research; 2) to contribute to the academic base of departments of family medicine, internal medicine, and pediatrics; and 3) to increase the number of researchers who can successfully compete for NIH funding. Six full-time positions are available through this fellowship. For more information, see: <https://www.fammed.wisc.edu/fellowships/primary-care-research/>

The Primary Care Sports Medicine Fellowship is a one-year fellowship under the direction of Drs. David Bernhardt and Kathleen Carr, in partnership with the Primary Care Research Fellowship, to train primary care physicians in the field of sports medicine to become academic leaders in dealing with a wide variety of sport and physical activity related problems. The fellow is expected to engage in clinical care, as well as teaching and research. The fellow serves as a team physician for both the University varsity and local high school teams. A wide variety of research opportunities are available, and the fellow is expected to publish at least one review article and a peer-reviewed paper during their two years. Training will lead to eligibility for the CAQ in sports medicine. For more information, see: <http://www.fammed.wisc.edu/fellowships/sports-med>

The DFMCH Addiction Medicine Fellowship is a one-year fellowship that provides clinical experience and instruction in the management of substance use disorders. Successful completion allows the trainee to sit for examination to attain Board Certification in Addiction Medicine. The Addiction Medicine Fellowship, created in 2010, is one of the first programs in the country that provides training to family physicians with an interest in becoming Board Certified in the newly recognized specialty of Addiction Medicine. In addition to clinical experiences, trainees will gain experience in management of acute withdrawal syndromes, medication-assisted treatment of substance use disorders, medical management of substance use disorders and their complications, chronic pain and addiction, and relapse prevention. For more information, see: <http://www.fammed.wisc.edu/fellowships/addiction-med>

The American Medical Association Foundation National LGBTQ+ Health Fellowship is a one-year fellowship that aims to transform the health equity landscape for the LGBTQ+ community with a focus on primary care. Fellows will interact daily with faculty members and other learners, including fellows, across all primary care fields. They will benefit from close supportive interactions with a mentoring committee that includes faculty members with primary care clinical leadership and research skills, with LGBTQ+ education expertise, and with national recognition in LGBTQ+ health issues. <https://www.fammed.wisc.edu/fellowships/lgbtq/>

In addition, the University of Wisconsin School of Medicine and Public Health Department of Medicine provides the following fellowships:

Geriatrics Medicine Clinical Fellowship, which has a long and successful history of training physicians to become excellent clinicians and academicians in the field of geriatrics and aging research. For more information, see: <http://www.medicine.wisc.edu/geriatrics/fellowship>

Hospice and Palliative Medicine Fellowship, which provides fellows training experiences that include an important variety in settings and patients. Fellows will become experts in pain and symptom control, psychosocial support of the seriously ill and their families, care of the dying, and advance care planning. For more information, see: <https://www.medicine.wisc.edu/hematology-oncology/hospice-and-palliative-medicine-fellowship>

Section 2

Family Medicine Centers:
Belleville, Northport Dr,
Verona and Wingra

“I would not be the physician, nor the person, I am today without the training, guidance, and opportunity given to me at the University of Wisconsin Family Medicine Program. I am thankful for all the staff, nurses, and faculty members for their help training me over the past 3 years.”

AJ Sheehan, DO, 2022 Graduate

FAMILY MEDICINE CENTERS

The Madison program has four family medicine centers: Belleville, Northport Dr (Northeast), Verona, and Wingra. Each center has a dynamic mix of physician faculty, behavioral health professionals, and advanced practitioners. Residents are the family physicians leading the care for their patients with support from faculty and staff in a team-based structure. Madison residents have opportunities to work with all faculty, though they work particularly closely with the faculty at their continuity site.

As a Madison resident, you will share care with faculty who are dynamic teachers and physicians. You are involved in research, medical education, medical administration, and public health responsibilities. Faculty and residents work together on the family medicine services at St. Mary's Hospital and the University of Wisconsin Hospital, inpatient rounds, partnering for continuity deliveries, quality initiatives, hospital presentations, research projects, written clinical inquiries for FPIN, committees, on-call, medical student education, etc.

A comprehensive description of each continuity clinic site can be found in this section. Also included is a list of the faculty, and residents who comprise the group practice for each center.

What will you find at each center?

- Faculty who identify resident education as their professional passion and primary focus.
- Faculty who also teach medical students and/or conduct research.
- Family physician faculty proficient in a wide range of clinical and procedural interests.
- Behavioral health faculty members, nurse practitioners, and physician assistants who participate in patient care, teaching, and support of residents in their first practice.
- Clinic staff who are committed to excellence in resident education and patient care. The clinic manager keeps the practice running smoothly and is actively involved in teaching residents about what they need to learn about clinic operations.
- A full range of medical care, including maternity care, home care, and nursing home coverage.
- Opportunities for residents to teach fellow residents, medical students, and other learners.
- Provision of a broad range of procedures, including colposcopy, OB ultrasound, suturing, lesion removal, endometrial sampling, skin biopsies, cryotherapy, vasectomies, and a variety of gynecological procedures.
- Computer access in each exam room, the "staffing room", resident work stations, as well as a library with reference books and other educational resources.
- An integrated electronic health record system.

BELLEVILLE FAMILY MEDICAL CENTER



“I feel so fortunate to work with the fabulous team we have assembled out here in Belleville! We are a wonderfully cohesive group of colleagues. From receptionists and medical assistants, to lab personnel and nurses, to faculty and residents - we all value each other and our roles in providing excellent health care to the people of our community while also fostering a great learning environment.”

Jennifer Lochner, MD – Site Lead

The UW Health Belleville Family Medicine Clinic is located in a 21,000 sq. foot prairie style building, complete with a healing garden. The space was designed to accommodate group visits and extended hours. The facility also has 3 procedure rooms where residents gain experience in a range of skills including skin procedures, vasectomy, and OB Ultrasound. Belleville residents obtain significant experience managing substance use disorders including prescribing medications for opioid use disorder (buprenorphine and naltrexone). Belleville serves several counties in southern Wisconsin and northern Illinois and has a well-established relationship working with incarcerated patients.

The clinic’s small group practice is a highly cohesive team of faculty physicians, physician assistants, a clinical social worker, and twelve residents. It also serves as a teaching site for medical students. Belleville faculty have a wide variety of interests and expertise including research, leadership, OB, global health, gender affirming care, addiction medicine and geriatrics.

A key factor in the success of our clinic as a clinical and teaching site has been its extensive involvement in the Belleville community. Our physicians are engaged with Belleville EMS, the school district, and most recently through involvement in policies and procedures around COVID. We work closely with the Green County Dept of Human Services in addressing opioid use disorders. We provide nursing home patient care at five different care facilities around the community. Most clinical staff, such as MAs and nurses, live in nearby small towns and therefore have an intimate understanding of the local surrounding communities. Because we have been in this community for over 25 years, our patients readily accept residents as their personal physicians. For outdoor enthusiasts, Belleville is a biking mecca and a great spot for fishing.

Two Belleville residents per year are selected to participate in the Rural Health Equity Track, a customizable curriculum with a community focus and emphasis on health equity, advocacy and leadership in rural communities and practices. Rural health interest is not necessary to be a Belleville resident. Belleville residents appreciate the balanced mix of pediatric, adult, OB, and older adult patients.

BELLEVILLE BY THE NUMBERS

Distance from Madison:
19 miles, 26 minutes

Total patient visits/year:
~17,000

Services offered on-site:

- Lab
- X-ray
- Behavioral health
- Treatment for opiate use disorder including medication prescription
- OB ultrasound

Common Procedures:

- LARC (Nexplanon, IUDs)
- Vasectomy
- Skin procedures
- Joint injections
- Toenail removal

Unique Characteristics:

- Most staff live in community, so taking care of neighbors and friends
- Crosses two counties (Dane and Green) with patients coming from as far away as IL
- No nearby Urgent Care so take care of acute issues, minor trauma, lacerations
- Good balance of age groups

Belleville Faculty, Residents, and Staff

Belleville Faculty

Brittany Alioto, PA-C

Jensena Carlson, MD

Erin Ford, LCSW, PMH-C – *Behavioral Health Faculty*

Brenna Gibbons, MD – *Academic Fellow*

Valerie Gilchrist, MD

Bethany Howlett, MD

Jillian Landeck, MD

Jennifer Lochner, MD – *Site Lead*

Julia Lubsen, MD

William Michaels, MD

Belleville Residents

Abigail Cox, MD – *First Year*

David Hardin, MD – *First Year (Rural Health Equity Track)*

John Kalmanek, MD – *Second Year*

Colin Kavanaugh, MD – *Second Year (Rural Health Equity Track)*

Brian Kenealy, MD – *Third Year (Chief Resident)*

Camila Khan, MD – *Second Year*

Kane Laks, MD – *Third Year (Rural Health Equity Track)*

Eleanor Meisner, MD – *Third Year*

Viktoriya Ovsepyan, MD – *First Year*

Luke Ragon, MD – *Second Year (Rural Health Equity Track)*

Stefanie Sippl, MD – *Third Year (Rural Health Equity Track)*

Logan Yeager, MD – *First Year (Rural Health Equity Track)*

Belleville Staff

Sally Jeglum – *Clinic Operations Assistant, Clinic Scheduler*

Christy Hunter, RN – *Clinic Manager*

NORTHPORT DR FAMILY MEDICAL CENTER



"Northport Dr is a place for everyone to feel valued and included. We are proud of our reputation in the community for effectively tailoring care to the needs of populations who too often face marginalization: gender expansive and trans patients, LGBTQ+ patients, BIPOC, folks with disabilities -- we find joy in our diversity and strive to be a safe and affirming place for all people."

Adrienne Hampton, MD (She/Her) – Site Lead

The Northport Dr Family Medical Center is a longstanding, thriving practice located near the Dane County Airport in Madison. Formerly known as Northeast Family Medical Center, the facility, which opened in February 2001, is positioned on the edge of many intersecting Madison communities, including subsidized housing, retirement apartments, immigrant communities, middle class working people, and the affluent neighborhood of Maple Bluff. While the majority of our patients are urban and low-to-middle income, the clinic also has nearby rural families as longstanding patients. A core aspect of the Northport Dr mission is to assure that services are delivered in a way that is sensitive to the needs of the different racial and ethnic minority populations receiving care at Northport Dr, including significant numbers of Southeast Asian, African American, and Latino patients.

In addition to 26 exam rooms, the building has two procedure rooms for minor surgery. Residents gain expertise in a wide range of procedures. Several exam rooms are configured to facilitate osteopathic manipulation, as Northport Dr has a long history of providing OMT services to patients. The clinic also has its own ultrasound machine, and faculty and residents perform OB ultrasound exams weekly.

The Northport Dr faculty have diverse interests and areas of specialization within family medicine, including disability medicine, chronic pain management, osteopathic manipulation, women's health, obstetric ultrasound, transgender medicine and integrative health. Our care teams include experienced nurse practitioners and physician assistants who partner with residents to care for patients. Our social worker/counselor is at the center five days per week for patient care, consultation and assistance with mental health issues.

Community engagement has been an important part of the Northport Dr Clinic mission for years. We have a close relationship with nearby Lakeview Elementary School, and have hosted an annual wellness fair for the students since 2012. In 2017, Northport Dr became only the second UW clinic to host a student-run health resource navigator program, which assists patients with social determinants of health on an ongoing basis. Two of our LPN's coordinate a monthly Patient and Family Advisory Committee meeting to have discussions with obtain feedback directly from patients we care for.

NORTHPORT DR HIGHLIGHTS

Distance from St. Mary's Hospital:
5 miles, 15 minutes

Total patient visits/year:
~23,000

Services offered on-site:

- Lab
- X-ray
- Pharmacy
- Behavioral health
- OMT
- Diabetes Educator
- Patient Navigators
- OB ultrasound

Common Procedures:

- LARC (Nexplanon, IUDs)
- Colposcopy
- OMT
- Skin procedures
- Joint injections

Unique Characteristics:

- Offer integrative treatments such as acupuncture, yoga therapy, prolotherapy, etc.
- Serve a large number of patients seeking gender care
- Faculty experience in caring for patients with disabilities
- Diverse patient population

Northport Dr Faculty Residents and Staff

Northport Dr Faculty

Olga Arrufat-Tobon, MSSW - *Behavioral Health Faculty*
Jared Dubey, DO
Jennifer Edgoose, MD, MPH
KatieENZler, PA-C
Bethany Garcia, PsyD – *Behavioral Health Faculty*
Adrienne Hampton, MD – *Site Lead*
KJ Hansmann, MD, MPH – *Research Fellow*
Ronni Hayon, MD
Tyler Ho, Pharm-D
Russell Lemmon, DO
Sarah McNiel, PA-C
Sarina Schragger, MD
Anne Schmitz, NP
Bill Schwab, MD
Nicholas Sullivan, DO – *Academic Fellow*
Joan Uminski, PA-C
Lashika Yogendran, MD

Northport Dr Residents

Yusuf Abdullah, DO – *Third Year*
Melanie Biegler, DO – *Second Year*
Andre Biscaye, MD – *Third Year*
Ashlyn Brown, MD – *Second Year*
Charissa Etrheim, MD – *Third Year (Chief Resident)*
Peter Fink, MD – *First Year*
Noah Garber, MD – *First Year*
Rachel Her, MD – *Second Year*
Micah Larson, MD – *First Year*
Stephanie Liu, MD – *Third Year*
Jagpreet, Sekhon, DO – *Second Year*
Joanna Sherrill, MD – *First Year*

Northport Dr Staff

Laura Jameson, RN - *Clinic Manager*
Deb Sands – *Clinic Operations Assistant, Clinic Scheduler*
Rita Teniente – *Nursing Lead*

VERONA FAMILY MEDICAL CENTER



“The Verona Clinic is a great place to train based on the diversity of resident and faculty interests. We practice in one of the fastest growing communities in Wisconsin which provides myriad opportunities for creative community health engagement.”

Brian Arndt, MD – Site Lead

The Verona Family Medical Center serves a unique patient population that is a blend of young and old, rural and urban, and many young families that provide great exposure to a wide spectrum of patient demographics and medical issues. Care is provided in a team-based approach including faculty physicians, APPs, residents, behavioral health clinicians, primary care pharmacists, and physical therapists.

The clinic has adopted many concepts of the patient centered medical home model including group medical visits co-led by residents and faculty to provide a unique and engaging approach to chronic disease management. The “Fitness and Lifestyle Challenge” occurs annually over 20 weeks for 20 patients with prediabetes or diabetes and a BMI of 30 or greater. The clinic partners with local businesses to offer discounts on groceries and fitness centers. During the group visits, weight and vital signs are checked; patients participate in guided yoga and relaxation exercises; there is teaching about nutrition, meal planning, and food preparation; and shared goal setting occurs at the end of each visit. Patients and clinicians alike get great satisfaction from participation.

The Verona Clinic’s faculty physicians have broad interests in obstetrics, women’s health, gender services, chronic disease management, osteopathic medicine, integrative health, international health, practice management, quality improvement, and research. Two faculty physicians are board-certified sports medicine physicians and care for UW-Madison athletic teams.

The clinic has excellent relationships with community partners and is involved in several initiatives to cultivate healthy lifestyles in the community. There is a thriving community garden on site that physicians, staff, and patients tend, which contributes about 1000 pounds of fresh produce annually to a local food pantry. In collaboration with a local nutritionist and UW Health dietetics interns, faculty and residents lead cooking classes within the community for seniors and young families. In addition to on-site fitness equipment shared with physical therapy, the clinic has healthy, affordable meal kits delivered to the clinic weekly as a direct approach to enhancing UW Health employee wellness.

VERONA HIGHLIGHTS

Distance from St. Mary’s Hospital:
11 miles, 17 minutes

Total patient visits/year:
~30,000

Services offered on-site:

- Lab
- X-ray
- Behavioral Health
- Primary Care Pharmacists
- Physical Therapy
- RN Care Coordination
- Group Visits
- Lactation Support
- OB ultrasound

Common Procedures:

- Vasectomy
- LARC (Nexplanon, IUDs)
- Colposcopy
- OMT
- Laceration repair/Skin procedures

Unique Characteristics:

- On-site fitness facility and shower for residents and staff
- Fitness and Lifestyle Challenge group visits
- Frequent travel medicine consults based on faculty global health expertise
- Two board-certified sports medicine faculty and sports medicine fellow

Verona Faculty, Residents and Staff

Verona Faculty

Brian Arndt, MD – *Site Lead*

Karina Atwell, MD

Bruce Barrett, MD, PhD

Mark Beamsley, MD

Kathleen Carr, MD

Allison Couture, DO

Hallum Dickens, MD

Ann Evensen, MD

Tom Hahn, MD

Erin Hammer, MD

Sarah James, DO

Maggie Larson, DO

Heidi Stokes, PA-C

Karen Wendler, PA-C

Mark Wirtz, MD

Behavioral Health: Lori Klein, Gretchen Strauss

Primary Care Pharmacists: Kristina Heimerl, Kayla McGowen

Physical Therapy: Bekah Chapman, Ken Krogman, Julie Sherry

Verona Residents

Adam Cordum, MD – *Third Year (Chief Resident)*

Camille Gonzalez, MD – *Second Year*

Nathan Gorman, DO – *Third Year*

Alex Hanna, MD – *Second Year*

Jenny Ho, DO – *Second Year*

Bradley Pfeifer, MD – *Second Year*

Kailin Randolph, MD – *First Year*

Melissa Ricker, MD – *Third Year*

Rutvi Shah, MD – *First Year*

Kyle Sherwin, DO – *First Year*

Molly Vernon, MD – *First Year*

Verona Staff

Cheryle Sickles, RN – *Clinic Manager*

Kimberly Volk – *Clinic Operations Assistant, Clinic Scheduler*

Access Community Health Center (ACHC) WINGRA FAMILY MEDICAL CENTER



“We are privileged to be part of the vibrant community on the near south side of Madison. Residents have deep learning experiences while caring for patients from diverse cultural, linguistic, and economic backgrounds. Residents often care for several generations of families who have been with Wingra for decades.

Stacy Leidel, PhD, APNP – Site Lead

Wingra Family Medical Center was the first Madison residency clinic. Opened in the early 1970s, it was originally housed in the current DFMCH offices at Alumni Hall. Wingra Family Medical Center is now located on Park Street in a racially, ethnically and linguistically diverse community. Wingra has always had a diverse patient population, including many patients with Latinx, Black and Southeast Asian backgrounds. Many staff members and medical providers speak Spanish, and interpreter services are available both in person and via telephone. Wingra residents, faculty and staff are mission-driven and enjoy working, teaching, and learning in this multifaceted community.

Since 2009, Wingra Family Medical Center has been affiliated with Access Community Health Centers (ACHC), Dane County’s network of federally qualified health centers (FQHCs). This affiliation enables residents to learn about the resources that FQHCs offer, like integrated behavioral health, that enhance patients’ health while providing an enriching learning experience for residents.

Wingra clinic hosts a student-run resource navigator program, assisting patients with social determinants of health. Wingra is also the outpatient site for the Addiction Medicine Program, providing residents the opportunity to collaborate with their faculty and fellows to enhance care for patients suffering from addiction. In 2014, Wingra began offering group prenatal visits through the Centering Pregnancy program as part of UW Health’s multi-tiered effort to address birth outcome disparities for Black women in Dane County.

Creating a safe environment for teaching and learning is a strong, shared value at Wingra. Medical students from all four years frequently come to learn at the clinic, providing residents with numerous opportunities to teach clinical medicine.

Physician assistant, nurse practitioner, pharmacy, behavioral health and social work students also rotate in the clinic, and faculty are involved in a pathway program for Latinx health professions students.

WINGRA HIGHLIGHTS

Distance from St. Mary’s Hospital:
0.5 miles, 2 minutes

Total patient visits/year:
~20,000

Services offered on-site:

- Lab
- X-ray
- Pharmacy
- OB Ultrasound
- Social Worker
- Integrated AODA Clinic
- Gender-affirming care

Common Procedures:

- LARC (Nexplanon, IUDs)
- Colposcopies
- Endometrial biopsies
- Vasectomy
- Skin procedures

Unique Characteristics:

- Majority minority patient population – 58% identify as BIPOC
- 23% of patients prefer their healthcare communication in a language other than English
- Joint operations with ACHC mean patients can register for public benefits in clinic and receive sliding scale discount for services including pharmacy

Wingra Faculty, Residents and Staff

Wingra Faculty

Yohualli Anaya, MD
Alyssa Bruehlman, MD – *Addiction Med Fellow*
Jessica Dalby, MD
Lee Dresang, MD
Sean Duffy, MD
Joel Hill, PA-C
Jonas Lee, MD
Stacy Leidel, APNP, PhD – *Site Lead*
Ildi Martonffy, MD – *Program Director*
Kirsten Rindfleisch, MD
Patricia Tellez-Giron, MD
Jon Temte, MD, PhD
Jennifer Terasa, PA-C
Angela Vitcenda, MS, PA-C
Morgan White, MD

Wingra Residents

Estefan Beltran, MD – *Third Year*
Jose Carrillo, MD – *Second Year*
Caroline Hensley, MD – *Third Year (Chief Resident)*
Kimberly Krawzak, MD – *First Year*
Rebeca Liebl, MD – *Second Year*
Evelyn Luner, MD – *First Year*
Nivedita Nair, MD – *Second Year*
Ana Pearson, MD – *Third Year*
Taylor Ross, MD – *Second Year*
Justin Temple, MD – *Third Year*
Elisabetta Tyrriver, MD – *First Year*
Aimée Wattiaux, MD – *First Year*

Wingra Staff

Mary Vasquez, APSW - *Clinic Manager*
Zeltcin “Z” Ramirez Reyes – *Clinic Admin Supervisor*
Amber Karow – *Clinic Operations Assistant, Clinic Scheduler*

Section 3

MADISON RESIDENCY PROGRAM CURRICULUM

“My Family Medicine training with UWFM provided me a full spectrum experience in addition a longitudinal experience of continuity care at my core clinic. This training was truly a once in a lifetime journey where my resident colleagues became my lifelong friends”

Jake Starsiak, DO, 2022 Graduate

MADISON RESIDENCY PROGRAM CURRICULUM

Background

The Madison program curriculum has always been in excellent standing with the Accreditation Council for Graduate Medical Education's (ACGME) Residency Review Committee Requirements for Residency Training in Family Medicine. The Program Evaluation Committee continuously monitors and revises the curriculum to meet changing needs and institutional standards. With the institution of the New Accreditation System, the Madison program again received the highest accreditation. The program also received ACGME Osteopathic Recognition in 2015 for its high-quality training in Osteopathic Principles and Practice and Osteopathic Manipulative Treatment for DO residents in the DO Track.

Intern Partnership

On entry into the residency, all residents are partnered with another entering resident from their clinic; progression through many of the first-year inpatient rotations and the outpatient Community Health rotation facilitates collaborative learning and community partnership. Resident partners often become important built in sources of support for each other.

Team Structures

In the outpatient family medicine centers, residents are assigned to teams. The partnership and team systems allow residents to provide continuity of care to their patient panels and to responsibly cover inpatient rotation duties while assuring adequate learning and personal time away from the residency. Our residents learn by doing, by providing patient- and family-centered care to a panel of patients who identify the resident as their primary care physician. Each resident is assigned a patient panel inherited from exiting third-year residents, and their practices grow with new patients. In addition to residents, teams typically include faculty, nurse practitioners or physician assistants, RNs and MAs. Hospital and specialty outpatient experiences support this professional identity and development.

St. Mary's Attendings and Staff

Family Medicine residents have always been the principal house staff at St. Mary's Hospital. New residents find they are fitting into an established and highly organized system. Attending physicians in all specialties are enthusiastic teachers and excellent clinicians who know and understand family medicine. Many have been affiliated with the program for years. The nurses at St. Mary's are well trained, hardworking, helpful, and skilled at many basic procedures including IV's, NG tubes, wound care, and blood gases. Their expertise and support is highly appreciated by our residents.

Rotations and Duty Shifts

While each rotation has unique scheduling needs, all inpatient rotations utilize a night float system to provide coverage for hospitalized patients and ensure sufficient periods of rest for both day and night residents. The Madison Program has prioritized creating a strong culture of education during overnight shifts.

For first-year residents, the rotations that include weeks of night/day shifts are MICU, SMH OB, and Family Medicine/Peds Night Float. The St. Mary's and Community ER rotations also include some overnight shifts to maximize after-hours learning opportunities in the Emergency Care environment. First-year residents work primarily during the day on the St. Mary's and UWH Family Medicine

Services. First-year residents work only during the day on the Family Medicine Obstetrics and Newborn Service (FMONS) at Meriter.

Second- and third-year residents are scheduled for 4 weeks of night float each year (2 weeks at SMH and 2 weeks at UWH). The second-year FMONS rotation also includes 3-4 weeks of night shifts. While on other inpatient rotations, senior residents work primarily during the day in a teaching and supervisory role.

Our program is committed to ensuring that residents have the support they need to provide quality patient care at all times. First-year residents always have the in-house support of a senior resident, and backup assistance is available to all residents at all times. Regular monitoring takes place to document our continued compliance with ACGME work-hours mandates.

Educational Pathways

The Madison program has created a mechanism for resident physicians interested in specific topic areas to pursue individualized, yet structured longitudinal curricular experiences called *Educational Pathways*. These Pathways provide experiences and learning above usual residency curricular opportunities in an integrated approach. Each Pathway delineates learning goals, objectives, and educational opportunities for interested residents. Pathways currently approved by the Madison Program Evaluation Committee include Addiction Medicine, Community Health, Developmental Disabilities, Geriatrics, Global Health, Integrative Health, LGBTQ+ Health, Pregnancy Care, Research, Rural Health, Sports Medicine, and Women's Health. Participation in a pathway is entirely optional.

Rotation Summary

2022-2023

First Year Rotations

18 Blocks (each block is 3 weeks)

Adult Medicine – 5 Blocks

- St. Mary's Family Medicine Service – 2 blocks
- UW Hospital Family Medicine Service – 1 block
- Medical Intensive Care Unit at St. Mary's Hospital – 2 blocks

Pediatrics – 2 Blocks + 4 weeks

- Pediatrics Service at St. Mary's Hospital – 1 block
- Pediatrics Service at UW American Family Children's Hospital – 1 block + 1 week
- Pediatrics/FM Nights Cross Coverage at St. Mary's Hospital – 3 weeks

Obstetrics/Newborn – 3 Blocks

- Obstetrics Service at St. Mary's Hospital – 2 blocks
- Family Medicine Obstetric and Newborn Service (FMONS) at Meriter Hospital – 1 block

Surgery – 1 block

- Rural Surgery Preceptorship (Baraboo, Dodgeville, or Stoughton) – 3 weeks

Emergency Medicine – 2 Blocks

- Rural ER (Baraboo, Dodgeville, or Sauk) – 1 block
- St. Mary's Hospital ER – 1 block

Community Health – 3 weeks longitudinally

- One week is completed with the Continuity Clinic Orientation in July

Outpatient Rotations – 3 Weeks

- Nutrition – 1 week
- Sports Medicine – 1 week
- Newborn – 1 week

Vacation – 3 Weeks (taken out of Surgery, ER or Outpatient time)

Second- and Third-Year Rotations

Outpatient rotations can be taken in either 2nd or 3rd year, unless otherwise designated

Adult Medicine – 8 Blocks

- Medical Intensive Care Unit at St. Mary's Hospital – 1 block (2nd year)
- Family Medicine Service at St. Mary's Hospital – 1 block (3rd year)
- St. Mary's Hospital Night Float – 4 weeks (2 each 2nd & 3rd year)
- Family Medicine Service at UW Hospital – 2 blocks (1 each 2nd & 3rd year)
- UW Hospital Night Float – 4 weeks (2 each 2nd & 3rd year)
- Dermatology (Outpatient) – 2 weeks
- Geriatrics-Palliative Care – 4 weeks (3rd year)

Pediatrics – 2 Blocks

- Pediatrics Service at St. Mary's Hospital – 1 block (2nd year)
- One additional block chosen from available out and inpatient rotations – 4 Weeks

Family Medicine Obstetrics and Newborn Service (FMONS) at Meriter Hospital – 2 Blocks (2nd year)

OB Float – 3-4 weeks (3rd year)

Gynecology – 3 Weeks

Nutrition – 1 Week

Surgical Subspecialties - 10 Weeks

- ENT – 1 Week
- Musculoskeletal Medicine (Orthopedics, Ortho-Related, and Sports Medicine) – 8 Weeks
 - Orthopedics – 3 Weeks (Includes MSK Radiology and Ortho Clinic)
 - Orthopedics-Related – 2 weeks (Includes Rheumatology, PT, and Selectives)
 - Sports Medicine – 3 weeks (Includes Sports Medicine Clinic, Sporting Event Coverage, Orthotics Lab, and Athletic Training Room)
- Ophthalmology – 1 Week

Management of Health Systems - 4 Weeks (2 each in 2nd & 3rd year)

Community Health – 4 Weeks (2 each in 2nd & 3rd year), longitudinal

Rural Rotation – 4 Weeks

Electives – 6 Blocks

- Medicine Electives may be chosen from required rotations above, as well as others: Allergy, Cardiology, Endocrine, Pulmonary Medicine, Neurology, and Wound Care.
- Other electives available include Addictive Disorders, Behavioral Health, Integrative Health, Psychiatry, Palliative Care and Hospice, Medical Informatics, Research, Out-of-Town or International rotations, and others.

Clustered Didactics – 2 weeks (1 each in 2nd & 3rd year)

Vacation – 4 weeks (each year)

CME time – 2 weeks (1 each in 2nd & 3rd year)

FIRST YEAR CURRICULUM

Outpatient Care

Belleville, Northport Dr, Verona, and Wingra Family Medical Centers: The core of our resident education is the continuity clinic in the Family Medicine Center. Each center operates as a group practice, and residents have their own panel of patients. Within the center organization, emphasis is placed on the team structure to facilitate continuity of care, awareness of complex patients, and after-hours coverage. Working with physician faculty, nurse practitioners, physician assistants, and behavioral science faculty allows the resident to experience a multidisciplinary approach to patient care. First-year residents average 2 half-days per week at the family medical center. They start out seeing one patient an hour and increase the pace throughout the year.

In July, residents will participate in a two-week Clinic-Community Orientation. This allows residents to get to know clinic staff, clinic workflow, the basics of coding, efficient use of the EHR, and learning principles of community health as well as exploring their clinic communities.

Residents will also have several weeks of outpatient specialty rotations, such as Newborn, Nutrition, Sports Medicine, and other required or elective rotations, during which they spend four half-days in the continuity clinic, one half day in seminar, and the remaining time with the specialists.

Adult Medicine

Family Medicine Inpatient Service at SMH (2 Blocks): Two first-year residents work with a third-year family medicine resident and a DFMCH family medicine faculty physician, primarily managing patients from our own clinic practices and Access Community Health Centers. *Ildi Martonffy, MD* coordinates this rotation.

Family Medicine Inpatient Service at UWH (1 Block): One first-year resident works with a first-year psychiatry resident, a second-year family medicine resident, and a third-year family medicine resident. Attending physicians are DFMCH faculty from the family medicine residency and university hospitalist physicians. A nurse practitioner provides continuity on the service. Residents care for patients from our own family medicine centers, Access Community Health Centers, and other UW Health family medicine clinics. The coordinator of this service is *Alex Milsap, MD*.

Medical Intensive Care Unit Service at SMH (2 Blocks): Two first-year residents work with a second-year family medicine resident on this service. Working closely with St. Mary's intensivists, they manage the care of MICU patients. *Ildi Martonffy, MD* coordinates this rotation.

Pediatrics

Pediatric Inpatient Service at SMH (1 Block): One first-year resident works with a second-year family medicine resident and pediatric hospitalists on this service. Family physicians who practice at the hospital also admit to the service. The pediatric hospitalist is active in teaching and bedside family-centered patient care rounds. *Jonas Lee, MD* is the rotation coordinator.

Pediatric Inpatient Service at UW's American Family Children's Hospital (1 Block + 1 week): One first-year resident works with the pediatric team on the general pediatrics service for this rotation. The first three weeks the resident works day shifts with the team. During the fourth week, they work

a swing shift in the evening covering primarily admissions. Residents work with the same group of pediatric hospitalists on both pediatric services (SMH and AFCH). **Jonas Lee, MD** is the rotation coordinator.

Inpatient Pediatric & Family Medicine Service Nights at SMH (3 weeks, longitudinal): First-year residents work with an in-house senior family medicine resident to cover patient care and overnight admissions for the St. Mary's Pediatrics and Family Medicine Services.

Obstetrics and Newborn

Obstetrics at SMH (2 blocks): Two first-year family medicine residents, one first-year OB resident, and one floating third-year resident cover the low-risk obstetrical service at St. Mary's. The overnight resident rounds on postpartum patients each morning. Residents take turns covering the labor floor in 12-hour shifts. The on-call resident is responsible for evaluating patients in triage and developing an appropriate treatment plan. Residents admit and manage all low-risk OB patients, including performing the delivery and managing postpartum care. Other resident duties include managing scheduled inductions and participating in obstetrical procedures such as external cephalic version. Patients on the low-risk service come from several obstetrical and family medicine groups and residents work with attending physicians from these groups. Residents additionally have some exposure to high-risk obstetrical patients while working on the floor, including assisting at cesarean sections. Residents evaluate and manage all family medicine patients (including high-risk patients) until they determine through consultation with the attending that an OB/GYN consultation is warranted. An obstetrician and senior OB/GYN resident are in house at all times for high-risk care. The coordinator of the OB rotation is **Jensi Carlson, MD**.

Family Medicine Obstetrics and Newborn Service (FMONS) at Meriter (1 block): One first year and two second year residents cover the family medicine obstetric and newborn service at Meriter. The first year works exclusively on day shifts and second years work both days and nights. The residents round on the postpartum and newborn patients that they have delivered each morning. The on-call resident is responsible for evaluating patients in triage and developing an appropriate treatment plan. Residents admit and manage all family medicine managed OB patients including delivery, postpartum, and newborn care. Other resident duties include managing scheduled inductions, participating in obstetrical procedures, managing antepartum and postpartum complications that require admission, and newborn procedures, such as circumcisions. The patients on the teaching service come from several family medicine groups and residents work with attendings from these groups. A family medicine residency attending is also in house during the weekdays to provide teaching and support of the residents. Residents manage all family medicine patients (both low and high risk) until they determine with the attending that an OB/GYN consultation is warranted. An obstetrician and OB/GYN resident team are in house at all times for high-risk care. The coordinator of the FMONS rotation is **Jensi Carlson, MD**.

By the completion of their first-year OB rotations, most residents have completed 45-60 deliveries (80-100 total deliveries by the completion of two years or five blocks).

Newborn clinical experience is incorporated into the FMONS rotation. Additionally, residents complete a one-week rotation that includes an online curriculum for self-directed, longitudinal learning, as well as opportunities to work with lactation consultants and genetic counselors. The coordinator of the newborn rotation is **Billy Michael, MD**.

Surgery

Rural Surgery Preceptorship (3 Weeks): During this block of surgery, first-year residents work with surgery preceptors in outlying community hospitals close to Madison. Residents evaluate this rotation very highly because most of the time is spent involved in procedures and first assisting in the OR in addition to mentored involvement in pre- and post-operative care. **Katy Bixby** coordinates this rotation.

Emergency Medicine

Rural ER (1 Block) and SMH ER (1 Block): Two ER blocks are required; one is in a community hospital in one of our community sites (Baraboo, Dodgeville, or Sauk) and the other is the SMH ER. Vacation time is permitted during these blocks, so the total time spent is approximately five weeks. Residents work 8-12 hour shifts under the direction of ER physicians at all sites, seeing patients as they present for emergency care. The amount of work and responsibility given to the resident increases over the duration of the rotation. **Katy Bixby** coordinates the ER rotations.

Community Health

Community Health (3 Weeks Longitudinally): A unique experience in the first year, the Community Health rotation helps residents understand community-based health issues and the organizations and resources available to assist physicians in community-oriented care through an equity lens. There is a specific focus on population health, health policy, and health equity. Residents learn first-hand the best practices of partnering with communities through involvement with community health projects and research related to their specific interests. Goals of the rotation include helping each resident understand the health care issues, problems, and resources in the community in which their family medicine center is located, and teaching residents to integrate these health resources into their patient care. Another goal is to demonstrate the impact of socio-economic conditions and health policy on patient health and well-being. The rotation also strives to teach residents to work as members of interdisciplinary primary health care teams. The rotation includes core experiences such as meetings with community organizations that serve vulnerable populations as well as opportunities to learn how to advocate for systemic change to improve the health of our community. It also includes experiences specific to the individual family practice centers, such as school health visits, meetings with community leaders, and engagement with senior, neighborhood and community centers. The rotation is directed by **Jennifer Edgoose, MD**.

Critical Care Courses

Entering first-year residents complete required ALSO and PALS courses during the first two weeks of residency. NRP, also required, is held during the first months of R1 year. Incoming residents are expected to be BLS and ACLS certified before starting in our program, and our staff will provide information about courses offered in the Madison area.

Family Medicine Seminars

The family medicine seminar for first-year residents meets Thursday afternoons. The first-year seminar series provides a comprehensive orientation to family medicine and ambulatory care. During the first four months of the year, part of the seminar time is devoted to the Survival Skills series, which is presented by senior residents and covers the basic acute inpatient problems that residents encounter. Topics for the first-year seminar series are included later in this booklet. An EKG teaching series is also a longitudinal part of this weekly seminar.

SECOND- AND THIRD-YEAR CURRICULUM

Overview

The second- and third-year curriculum is well established and flexible. Rotations are available in most subspecialty areas; electives are offered in addition to required rotations. The Madison area medical community offers many educational options. For example, residents on Sports Medicine may choose to work with UW Sports Medicine faculty at the UW Research Park Clinic, or with family physicians who provide sports medicine services in the Dean Health system. Residents choosing to take Allergy may select either the UWH Allergy Clinic or the Pediatric Allergy group in the SSM Health system. Our outpatient rotations are regularly reviewed and revised in order to address the wide variety of needs of different residents, the continuing evolution of health care, and the changing availability of educational resources.

Residents also can develop new or alternate rotations in Madison or elsewhere. A policy for submitting a proposal is available, and examples of electives initially developed by residents are Diabetes Management, Vasectomies, Practice Styles, Palliative Care and Hospice, and Wound Care. In addition, time is available for an out-of-town rotation. Many residents have gone to Indian Health Service sites, while others choose out-of-town rotations at or near potential fellowships or practice sites. Interest in international sites has increased over the past several years. There are established International Rotations in Honduras, Ecuador, Uganda, and other countries.

Second- and third-year residents divide their time between hospital or outpatient rotations and seeing their own patients in the family medicine center. The team system plays a vital role in maintaining continuity of patient care and balancing the resident's experience between service and education.

Outpatient Care at Belleville, Northport Dr, Wingra or Verona Family Medical Centers (FMC)

While on inpatient rotations, second- and third-year residents are scheduled in the FMC two times per week on average. During their outpatient and elective rotations, second- and third-year residents are generally scheduled to see patients in the FMC five half-days per week. Most subspecialty outpatient rotations are four half-days per week. An example of a typical week is four half-days of outpatient rotation, five half-days in the FMC, and one half-day for Family Medicine Seminars. Time spent in the family medicine center is reduced to four half-days if the resident is giving public school education talks, doing nursing home rounds, home visits, etc.

Many of the attending physicians in both inpatient and outpatient settings have been teaching for many years. These teachers have developed strong ties with our program. They continue to teach year after year with tireless enthusiasm.

Primary Care Conference and Family Medicine Seminar

- **Monday Morning Report (Monday mornings):** Second- and third-year residents, as well as faculty, attend teaching rounds on Monday mornings from 7:30 – 8:30 am. A senior resident generally presents clinical cases that are inpatient focused, as well as some that are outpatient. An EKG teaching series is also a longitudinal part of this morning didactic. Clinic-based patient rounds, didactics, and case discussions are held at various times in the four FMC's. Most inpatient services also have focused educational discussions and/or conferences.

- **Joint Primary Care Conference (Wednesdays, 7:30 to 8:30 am at St. Mary's):** The Madison Family Medicine Residency has combined with the SMH Family Medicine Department (many members are our graduates) for this Wednesday morning conference. DFMCH faculty physicians, as well as St. Mary's and guest physicians, present at this conference on a wide range of topics relevant to Primary Care. In addition, second-year residents lead a Journal Club presentation at the conference, and third-year residents present a review of a clinical topic of their choice. The conference is protected time for second- and third-year residents on most rotations. First-year residents attend this conference as often as scheduling permits.
- **Family Medicine Seminars (Wednesdays afternoons):** These seminars include the basics of family medicine, behavioral science, preventive medicine, practice management and community medicine in a two-year cycle. Each Seminar session ends with Resident Teach Time, a standardized format for resident-led teaching about common primary care topics. Residents access a repository of useful teaching cases and cover mock board exam questions.

Other Wednesday Activities

- **Chief Rounds** are scheduled twice a month preceding the seminars. All residents are encouraged to come.
- **Wildlife Seminars** are scheduled at the request or approval of residents. The series title highlights the eclectic nature of the content. A wide variety of topics, including subjects such as advances in medical informatics, international health, preventive and alternative medicine, and community medicine are potential offerings.

SECOND AND THIRD YEAR ROTATIONS

Adult Medicine

- **Medical Intensive Care Unit Service at SMH (1 Block second year):** Senior residents supervise the first-year residents but do not take any overnight call.
- **Family Medicine Inpatient Service at SMH (1 Block third year):** The senior resident is in a teaching and supervisory role.
- **Family Medicine Inpatient Service at UWH (1 Block second year, 1 Block third year):** The second- and third-year residents have teaching and supervisory responsibility as part of the daytime team.
- **UWH and SMH Night Float (4 weeks second year, 3-4 weeks third year):** Residents on night float at St. Mary's Hospital have a teaching and supervisory role with the night intern in the MICU and night intern covering the FM and Peds services. At UWH, the resident on night float covers the Family Medicine Service, including admissions, overnight.
- **Outpatient Dermatology (2 Weeks)**

Pediatrics

- **Inpatient Pediatrics at SMH (1 Block second-year):** The senior resident is in a teaching/supervisory role.
- **Pediatric Selectives (4 Weeks second or third year):** Choices include one or a combination of the following: Parenting and Infant Development; Outpatient Pediatrics in Madison with local pediatricians; Pediatrics Fitness Clinic at Research Park; Child Psychiatry Consultation Service- UWH; Developmental Pediatrics at the Waisman Center; Pediatrics Specialty Clinics; and/or Pediatric Allergy.

Surgical Specialities

The following surgery-related rotations are all required outpatient rotations.

- **ENT (1 Week)**
- **Ophthalmology (1 Week)**
- **Orthopedics (3 Weeks)**
- **MSK Orthopedics-Related (2 Weeks):** Two weeks of musculoskeletal orthopedic-related rotations are required: 1 week rheumatology and 1 week of selectives, which includes physical therapy, pain management, prolotherapy, pediatric orthopedics, podiatry, Spine Clinic, and work-hardening.
- **Sports Medicine (3 Weeks):** **Locations include one or a combination of the following:** UW Research Park, Dean clinics, or Sauk Prairie Health Care in Spring Green. This rotation also requires residents to spend two afternoons in a high school training room and cover two sports events.

Obstetrics/Newborn

Family Medicine Obstetrics and Newborn Service (FMONS) at Meriter (2 Blocks second year):

Residents take turns covering the labor floor in 12-hour shifts. In addition to the required blocks of FMONS, a high risk OB elective rotation is available for third-year residents at Meriter Hospital.

OB Float (3-4 Weeks third year): Residents cover several 12-hour shifts per week on the SMH OB service and Meriter FMONS.

Rural Rotation

Residents are required to complete one four-week block in a Wisconsin rural practice site their second year. Residents can choose from a variety of well-established practice locations including: Beaver Dam, Dodgeville, Lancaster, Richland Center, Shawano-Menominee and Watertown. Some sites are commutable while others provide lodging for residents. Residents return to Madison weekly for their continuity clinic and for the weekend if they are not on call.

Gynecology

Three weeks of Gynecology are required in the second and/or third year with LARC, Pelvic Floor PT and Menopause Clinic experiences included.

Management of Health Systems

Two weeks of Management of Health Systems are required in the second year, and two weeks in the third year. Residents learn how to implement a quality improvement project in their own practices. A combination of independent learning and facilitated and shadowing opportunities allow residents to explore the types of practices they are interested in pursuing after residency as well as key factors in managing their practices.

Community Health

During the first year, residents complete a longitudinal Community Health rotation. Residents explore agencies, organization, and resources around the Madison area and specifically their continuity clinic area, along with faculty discussions, readings and modules. After their first year, residents are given 8 half days in their second year and 8 half days in their third year to work on a community health learning experience.

Clustered Didactics

In each of the second and third years, one week of Clustered Didactics is required. Second-year resident sessions emphasize Management of Health Systems, Men's Health and Gynecology. Curriculum for third-year residents focuses on Musculoskeletal Medicine, Geriatrics, Addiction Medicine, and Nutrition.

Electives

Residents have a minimum of 12 weeks of elective time. Established electives are listed below:

Addiction Disorders	Palliative Care and Hospice
Allergy	Practice Styles
Behavioral Health	Procedures
Cardiology	Prolotherapy
Diabetes Management	Psychiatry
Endocrine	Radiology
Geriatrics	Research
Global Health	Resident as Teacher
Guardian Angel	Urgent Care
Integrative Health	Urology
Neurology	Wound Care
OMT 4 MD	Vasectomies

Residents may also develop their own electives or take additional weeks of rotations that meet requirements (e.g. sports medicine). Longitudinal electives can be arranged to meet individual educational goals.

Call for Second- and Third-Year Residents

Night call for the FMC patients are shared by all second- and third-year residents and has been consolidated into the UW and SM Night Float weeks.

EDUCATIONAL CONFERENCES AND SEMINARS

All Residency Conferences, Meetings, and Seminars are listed in *Madlines*, a weekly publication that is distributed electronically to all residents. **First-year** residents attend **Thursday afternoon** seminars, a combination of core family medicine topics, and senior resident-presented Survival Skills. **Wednesday conferences and seminars** are primarily for **second- and third-year** residents.

Survival Skills for First Year Residents

Survival Skills seminars are conducted by senior residents during the first half of the academic year to provide support and information on common first-year call questions and issues. A range of topics are addressed including On-Call 101, OB 101, Pre-Code Scenarios, Inbasket Management, Chest Pain, Sepsis, DKA, GI Bleed, Sickle Cell/Acute Pain Management, Peds Respiratory Illness, etc. Survival Skills Seminars are one hour long and held during the Thursday afternoon seminar series.

First-Year Resident Family Medicine Seminar Series

The first-year seminar series provides a comprehensive orientation to family medicine and ambulatory care. The first six months focus on common inpatient and outpatient medical topics. Seminars also include other health-related topics such as behavior health, community health, health disparities, and mindfulness and resiliency training. We strive to make our seminars interactive, and case based. As part of our EKG curriculum, first year residents take turns presenting an EKG at the start of each seminar. Seminar is protected time for most residents on Thursdays afternoons. A sample list of topics appears below:

Adolescent Health	Low Back Pain
Asthma	Lower Respiratory Infections
Chest Pain/Angina	Nexplanon Training
Chronic Illness	Nursing Home Orientation
Contraception	Nutrition for Health Promotion & Disease Prevention
Dermatology	Postpartum Exam
Diabetes	Practice Management
EKG	Prenatal
Evidence Based Medicine	Psychiatry/Anxiety/Depression
Fracture Management	Quality Improvement
Geriatrics	Shoulder Exam
Headaches	Smoking Cessation
Hyperlipidemia/Heart Disease/Lipids Basic	Sports Physical
Hypertension	STIs
IBS, GI Bleeds, Gastritis	Stroke Evaluation and Treatment
Immunizations	Substance Abuse
Infant and Toddler Nutrition	Suture Lab
Integrative Health	Trauma Work-up
Knee Exam	Upper Respiratory Infection

Family Medicine Seminar Series for Second- and Third-Year Residents

Seminars for second- and third-year residents are held on Wednesday afternoons. These seminars take a more in depth look at full spectrum family medicine topics. A sample of second and third-year seminar topics appears below:

Abdominal Pain in Children	Dysfunctional Uterine Bleeding	Nephrology
Adolescent Medicine	Environmental Health	Newborn Lab
Allergy Syndromes in Children	Exercise Rx/Cardiac Rehab	Osteoporosis
Amenorrhea	Evaluation of a Pelvic Mass	Pain Management
Ankle Exam	Failure to Thrive	Palliative Care/Hospice
Back Pain	Female Incontinence and Organ Prolapse	Pediatric Anemia
Behavioral Problems in Children	Fibromyalgia/Chronic Fatigue	Pediatric Enuresis and Encopresis
Breast Cancer	Fine Tuning Contraception	Pediatric Orthopedics
Breast Feeding	Foot Exam	Pelvic Pain
Cancer Screening	Hand/wrist Exam	Polycystic Ovarian Cyst/Hirsutism
Casting Lab	Headache	Preventive Health in the Elderly
CHF	Health Literacy	Procedures Lab
Child Abuse	Hepatitis Viral and Non-Viral	Provider Patient Communication
Child Development	HIV	Radiology Cases
Childhood Asthma	Hospital Nutrition	Rheumatology
Chronic Coronary Artery Disease	IBS and GERD	Rehabilitation
Chronic Grief/Coping	Infertility	Seizure Disorders
Chronic Kidney Disease	Immunizations/Vaccine Safety	Sinusitis/ENT/Tonsillitis/Otitis
Clinical Nutrition	Integrative Health	Sleep Disorders
Coding and Documentation	Joint Injection Lab	Somatization
Colon Cancer Screening	Knee Exam	Stress Tests and Cardiac Imaging
Coughs, Colds and Allergy Medications	Male Reproductive Health	Substance Abuse
Cross-Cultural Issues/Use of Interpreter	Management of Abnormal Pap Smears	Suturing Lab
Dermatological Therapeutics	Menopause	Teaching Skills for Residents
Dermatology (Advanced)	Miscarriage	Thyroid Diseases
Disclosing unanticipated outcomes	Motivational Interviewing	Type I & II Diabetes
Domestic Violence	Musculoskeletal Imaging	Vaginitis, PID, STDs: Update and New Treatment Guidelines

Resident Teach Time

At the end of each second- and third-year Wednesday seminar, residents participate in peer teaching during Resident Teach Time: a standardized format for resident-led teaching about common primary care topics that are facilitated with minimal to no prep work ahead of time. Residents access a repository of cases from various resources, useful teaching x-rays, dermatology resources, etc. This increases participatory learning and resident opportunities to teach without increasing resident workload or prep work.

Wildlife Seminar

The Wildlife seminars are optional sessions for all residents with topics that do not fit into the regular required seminars. Topics have included:

- Family Medicine and Primary Care in a Developing Country
- Rural Health Practice Panel
- Quality of Work life for Family Physicians in Wisconsin
- Health Care/AIDS in Kenya
- Limiting Common Prescription Errors
- ER at Indian Health Services
- Prolotherapy in Honduras
- Occupational and Environmental Health

Wellness Curriculum

We offer various activities and methods of learning as part of our wellness curriculum. These sessions are part of regularly scheduled seminar time. First year residents receive resiliency training and mindfulness training, and all residents participate in Balint groups to discuss and explore difficult patient interactions.

Monday Morning Report and Journal Club/Primary Care Conference

Monday Morning Report (Monday mornings): Second- and third-year residents, as well as faculty, attend teaching rounds on Monday mornings from 7:30 – 8:30 am. A senior resident generally presents clinical cases that are inpatient focused, as well as some that are outpatient. An EKG teaching series is also a longitudinal part of this morning didactic.

Joint Primary Care Conference (Wednesdays, 7:30 to 8:30 am at St. Mary's): At this Wednesday morning conference, second-year residents lead a Journal Club presentation at the conference, and third-year residents present a review of a clinical topic of their choice relevant to primary care. Some DFMCH faculty physicians or St. Mary's and guest physicians present at this conference as well. The conference is protected time for second- and third-year residents on most rotations. First-year residents attend this conference as often as scheduling permits.

Inpatient Rotation Didactic Sessions

There are also resident conferences on the inpatient services. At UWH, the Family Medicine Service team participates in Internal Medicine Rounds as able. The SMH Family Medicine Service team attends Monday Morning Report and Journal Club/Primary Care Conference on Wednesday mornings each week. Additionally, our department's Addiction Medicine faculty hold Addiction Medicine rounds with the team monthly, and St. Mary's offers Ethics Rounds every other month.

Scheduled Resident Social and Support Activities

- ◆ **Annual Residency Picnic** - The annual residency picnic, held each June, marks the transition of the interns into the residency and the graduating residents' departure. Held at a local park for residents, faculty, staff and families, it is an evening of food and fun for all!
- ◆ **Resiliency Training and Support Groups** - Recognizing that residency is demanding and often draining, residents formed two monthly support groups – one for interns and one for second- and third-year residents, held during protected seminar time. The group for first-year residents is facilitated by an expert in mindfulness meditation and provides time for residents to support each other in a safe and nurturing environment. The second- and third-year group is focused on resiliency training, facilitated by a physician outside of the DFMCH who is trained in life coaching and physician resiliency. They are also a great time to catch-up with colleagues.
- ◆ **Mindfulness-Based Stress Reduction Training** – Residents learn skills and techniques in mindfulness meditation and how to apply these skills at work to reduce stress. Residents are introduced to this in the first-year seminar series and can optionally pursue further training.
- ◆ **Balint Groups** – Balint groups are available for residents in each year of training. Facilitated by our trained family medicine faculty, these groups are case-based, allowing residents to process difficult doctor-patient encounters in a safe space that focuses less on the facts and more on the relationships.
- ◆ **Aware Curriculum** - This innovative curriculum provides residents with an eclectic mix of experiences, reflection, study, and mentoring to promote personal and professional growth. Residents have access to financial resources to pursue particular areas of interest in conjunction with individual development plans. The Aware Curriculum aims to help residents nurture their abilities to provide more compassionate and humanistic care throughout their medical careers.
- ◆ **Chiefs' Rounds** - Chiefs' Rounds occur twice a month and are part business, part social. They serve as the primary way for residents to keep up to date with residency (and resident) happenings.
- ◆ **Resident Retreat** - The end of summer brings a retreat for residents and their families. This is a protected time to relax and get to know fellow residents without the pressures of work. There are no required activities other than being present. Highlights of past retreats have included scavenger hunts, yoga, pottery classes, swimming and canoeing, campfire singing and plenty of food!
- ◆ **Fizzle Dinner** - Each February the Residency invites all first-year residents (as well as significant others) to dinner to celebrate being “over the hump” of the intern year.
- ◆ **Graduation** - An evening celebration with family, friends, colleagues, faculty and staff marks the end of the residency journey for the Madison residents. It is an evening to remember for the good food and good friends.

Section 4

FACULTY BIOSKETCHES

“I would not trade my time in this program for the world. The faculty and staff are second to none in terms of experience, approachability, and support, especially during what was a hard year ('20-'21). I feel ready to practice independently with a solid foundation on which to continue learning and growing as a physician.”

James Ircink, MD, 2021 Graduate

MADISON PROGRAM FACULTY



Madison Residency Program Faculty

Belleville Faculty



Jensena Carlson, MD grew up in Eau Claire, Wisconsin and attended the University of Wisconsin – Madison for undergraduate and medical school. She completed her family medicine residency and an academic teaching fellowship at UW – Madison. After fellowship she joined the faculty at the Belleville clinic where she is committed to providing full spectrum family medicine with particular interests in women’s health and maternity care. She also has a focus on resident physician training and professional development. Jensena enjoys teaching medical students and is the course director for the Healer’s Art course at UWSMPH. Outside of medicine, Jensena loves music and is in perpetual search for a band needing a bassist. She also enjoys cross country skiing and spending time on the water.



Dr. Valerie Gilchrist, MD received her medical degree (honors) from the University of Toronto, in Toronto, Ontario, Canada. She was a graduate scholar and awarded membership in Alpha Omega Alpha. She attended a Fellowship in Faculty Development at the University of North Carolina-Chapel Hill 1982-1983, and the Hedwig Van Ameringen Executive Leadership in Academic Medicine (ELAM) Program 1999-2000. She is board certified in Family Medicine and was the Chair of Family Medicine at the Northeastern Ohio Universities College of Medicine 1997-2005, and Brody School of Medicine East Carolina University 2005-2007, and University of Wisconsin School of Medicine and Public Health (2008-2019).



Bethany Howlett, MD, MHS Originally from Texas, Bethany Howlett earned her bachelor's degree in Biology from Johns Hopkins University and an MHS from the Johns Hopkins Bloomberg School of Public Health. While working in the field of emergency relief and humanitarian assistance, she planned and implemented healthcare programs in South Sudan, Jordan, West Bank, and Syria. Themes of health equity, resilience, primary care, and advocacy led her to return to the US and complete a medical degree at the Medical College of Virginia so that she might provide direct patient care and health professional training while working to center the voices of socially vulnerable and historically marginalized communities. She completed her residency training at Aurora Family Medicine Residency Program in Milwaukee, WI and joined the faculty at UW-Madison in 2015. Her professional interests include full scope family medicine with maternity care, vulnerability and innovation in medicine, and health equity. Outside of work, she can be found wrangling cows, goats, chickens, dogs, cats, and bees on her 1890s farm property with her veterinarian partner.



Jillian Landeck, MD grew up in Sister Bay, WI, a small town on the Door County peninsula. She earned her B.A. in Anthropology and International Development and an M.A. in Physical Anthropology at Tulane University. She has a medical degree from the University of Wisconsin –Madison and completed her residency at United Family Medicine Residency Program in St. Paul, MN. She joined the UW Department of Family Medicine as an Assistant Professor in September 2017. Dr. Landeck’s specific professional interests include full spectrum family medicine with OB, global health, geriatrics and rural health. Outside of work, Dr. Landeck enjoys baking, sailing and gardening.



Jennifer Lochner, MD Dr. Lochner's affiliation with the UW Department of Family Medicine and Community Health began when she was born at St. Mary's Hospital while her father was a family medicine resident (in the second graduating class of the then newly formed specialty and UW Department). She grew up in the small town of Waupaca, WI and learned about family medicine first hand before attending college and medical school at UW followed by residency at Oregon Health & Sciences University in Portland, Oregon. She stayed on at OHSU as a 4th year Chief Resident and then joined the full time faculty there, eventually taking on the role of Associate Residency Director and Medical Director of the South Waterfront clinic. After 11 years in Portland her Wisconsin family ties overcame the wonderful relationships she had found with patients, friends and colleagues and so she moved back to Madison in December (yes, December) of 2010. She practices full spectrum Family Medicine at the Belleville clinic and feels lucky to have found such a wonderful group of staff, partners, residents and patients with whom to partner. When not at work Jen enjoys spending time with her husband Steve and their 2 young children and occasionally even finds time to hit a spin class, read or knit.



Julia Lubsen, MD Originally from Virginia, Julia Lubsen earned her bachelor’s degree in Neurobiology from Harvard University and her medical degree from Yale University. Julia brings to Family Medicine a passion for serving all members of the community, including the uninsured. During medical school, she was an active volunteer at the student-run HAVEN Free Clinic, and after her third year she accepted a one-year fellowship to serve as co-director of the clinic. Over the course of the year, the clinic provided more than 800 visits to uninsured patients in a predominantly Latino community in New Haven. Julia also has strong interests in disease prevention, nutrition, and primary care delivery. As a research fellow with the Fair Haven Community Health Center, she studied the relationship between family functioning and diabetes risk and the effects of family functioning on participation in an intensive lifestyle intervention. She also served as Co-Leader for Yale’s Family Medicine Interest Group, and has taught fellow students in both the first-year Histology Lab and The Healer’s Art course. Her other interests include meditation, integrative health, and rural medicine. In her free time she enjoys rowing, running, yoga, hiking, cross-country skiing, knitting, vegetarian cooking, and playing the piano.

Billy Michael, MD - Associate Director (see page 9 for full bio)

Northeast Faculty



Jared Dubey, DO Jared Dubey graduated from the University of California—Santa Cruz with a bachelor's degree in Mathematics, and he remained at UCSC for five years as a wilderness instructor with the Recreation Department. He then went on to complete his medical degree at Touro University College of Osteopathic Medicine in California and his residency training in family medicine at the University of Wisconsin—Madison.

Dr. Dubey's interests in educating patients, treating the whole person, and helping the underserved are what initially drew him to both family medicine and integrative health. In addition to his passion for osteopathic medicine, he brings to the fellowship strong interests in yoga, tai chi, massage, structural integration, chiropractic, and acupuncture.



Jennifer Edgoose, MD, MPH joined the UW medical faculty in 2010 from the Pacific Northwest, where she worked for more than a decade in a community health clinic. She graduated from Wellesley College with a B.A. in biological chemistry and Columbia University where she received her M.D. and M.P.H in 1996. There she developed a strong interest in primary care and patient advocacy which led her to enter a family medicine residency at the University of Washington where she piloted a new track that focused on

the urban underserved. She followed this by joining a community health clinic providing full spectrum family medicine including obstetrical care to the uninsured and underserved of greater Tacoma, WA. Her interests lie in care of the underserved and medically disadvantaged; cross-cultural care; population and community health; evidence-based medicine; and the patient-doctor relationship, particularly relationships with our most challenging patients. In 2014 she was honored with the Baldwin Lloyd Teaching Award from Madison residents. Currently, she is championing the 2020 Initiative engaging the entire department in renewed conversations and commitment to diversity, inclusion and health equity.



Adrienne Hampton, MD earned her B.A. in Biology from Longwood University in Virginia and completed her medical degree at Northwestern University's Feinberg School of Medicine. She was initially drawn to family medicine through her strong interest and investment in the community. Before beginning medical school, she completed an AmeriCorps year of service as an HIV counselor and tester in Washington, DC, where she witnessed firsthand how profoundly social forces shape

health outcomes. She also worked as an intern with the Mautner Project in Washington, DC, where she designed and implemented a wellness intervention for African American women who partner with women. During medical school, as an Albert Schweitzer Fellow, she implemented prenatal yoga programs in two low-income Chicago communities to combat the stress experienced by so many of the expectant mothers in those areas. These experiences reaffirmed her calling to family medicine, as well as her ultimate goal of creating an inclusive, family-centered practice that will make a positive difference in the health-status of low-income communities. In her free time, Adrienne's hobbies include yoga, classical vocal music, and creative writing.

Ronni Hayon, MD joined the Department of Family Medicine and Community Health as an Assistant Professor CHS in October 2012. She received her medical degree from Drexel University College of Medicine in Philadelphia and she completed her Family Medicine residency at the UW-Madison Family Medicine Residency Program. Following residency, Ronni completed a one-year Academic Fellowship with the Department of Family Medicine. Ronni is committed to providing full-spectrum family medicine but has particular interests in women's health, OB care, LGBT health and adolescent medicine. In her spare time, Ronni can often be found knitting.



Russell Lemmon, DO completed his medical training at the Chicago College of Osteopathic Medicine and the MacNeal Hospital Family Medicine Residency in Illinois. Following residency he served as a family physician in the U.S. Air Force, stationed at Luke Air Force Base in Arizona. While on active duty he was the medical director for the Family Medicine department and was deployed as a physician with the special forces in Iraq. He also completed training in medical acupuncture and used this modality to treat military personnel in both the U.S. and Iraq. After 4 years in Arizona, Russ and his family moved back to the Midwest, first working in private practice in the Chicago suburbs before transitioning to academic family medicine here at the DFM in Madison. His professional interests include medical acupuncture, osteopathic manipulation and integrative health. Outside of work Russ enjoys chasing around his 3 young kids and biking around Madison.



Sarina Schrage, MD, MS joined the Northeast faculty in 1996. A graduate of Dartmouth College with a BA in French Literature, Sarina received her MD degree from the University of Illinois College of Medicine at Chicago in 1992. She completed her residency in family medicine at the MacNeal Hospital program in Berwyn, Illinois in 1995 and then completed a one year self-designed fellowship in Women's Health at MacNeal that combined graduate work in Women's Studies with clinical care in family practice. She completed a MS in population health sciences at the University of Wisconsin in 2006. She is the director of faculty development for the DFMCH. Her teaching focus is on women's health education for residents. Her current research interests include osteoporosis prevention, vitamin D testing in primary care, work life balance, and dual physician families. She is also the director of the department's academic fellowship.



William E. Schwab, MD – Vice Chair of Education is a native of Madison and attended the University of Wisconsin as an undergraduate. He graduated from the Case Western Reserve University School of Medicine in 1980 and went on to complete his family practice residency at the University of Virginia in Charlottesville. After residency, he worked as a family physician at a community health center in the coal fields of southern West Virginia. Bill joined the DFMCH faculty in 1985 and was director of the Madison Residency Program from 2002 until 2008. He currently serves as the DFMCH's Vice Chair for Education. Bill is a nationally respected clinician, educator and policy consultant about the care of children with special health care needs and adults with disabilities and chronic illnesses from a patient- and family-centered perspective. He is a member of the Board of Directors and senior teaching faculty of the Institute for Patient- and Family-Centered Care in Bethesda, Maryland. In conjunction with the UW Waisman Center, he was principle investigator for the National Medical Home Autism Initiative, funded by the federal Maternal and Child Health Bureau from 2004-2008, and of a project funded by the Centers for Disease Control from 2008-2011 to enhance developmental screening by family physicians. Bill was honored as Family Physician of the Year by the Wisconsin Academy of Family Physicians in 1999 and received the Baldwin Lloyd Teaching Award from Madison Program residents in 1987 and 2008.



Lashika Yogendran, MD's passion for global health grew naturally from her personal experiences. Born in Saudi Arabia, she has also lived in Toronto, North Carolina, Shanghai, Brooklyn, and Chicago. Lashika earned her BA in chemistry and classics from the City University of New York – Brooklyn College before going on to earn her MD and MS from the Chicago Medical School at Rosalind Franklin University of Medicine and Science. During medical school, Lashika completed extensive global health work. She volunteered in hospitals in Cuzco, Peru and worked in a clinic in Uganda. These experiences shaped her worldview and she hopes to pursue global health work after residency. Lashika is drawn to family medicine by its care for diverse patient populations and the focus on care across the life-span. Lashika enjoys playing volleyball, cheering on the Chicago Cubs, checking out new restaurants, and playing trivia – she has even appeared on “Who Wants to Be a Millionaire.”

Verona Faculty



Brian Arndt, MD is a true Wisconsin Badger at heart as he completed his undergraduate degree in mechanical engineering, medical degree, and family medicine residency training all at the University of Wisconsin-Madison. Dr. Arndt provides the full spectrum of family medicine including OB and inpatient care. He has special interests in preventive health and nutrition. His diabetes group medical appointments allow him to share these interests with his patients and engage with them in a dynamic setting for shared decision making and developing self-management goals. His interest in chronic disease management is also reflected in his work with multidisciplinary team development to enhance patient-centered care between visits. He is interested in patient care handoffs and transitions in care and has worked to develop electronic signout tools for our inpatient teams. Research areas of interest include collaboration with public health to estimate chronic disease prevalence through evaluation of EMR data. He also works collaboratively with the UW Department of Industrial Engineering to better understand the complexity of primary care and patient safety in the inpatient and outpatient settings. Dr. Arndt enjoys everything outdoors, especially fishing, and is well-known by his colleagues for his occasional lumberjacking in his prairie restoration work. His wife Kimberly is also a UW Health physician in Physical Medicine and Rehabilitation.



Karina Atwell, MD, MPH is an Associate Professor and core Family Medicine residency faculty at the UW Department of Family Medicine and Community Health. She is also boarded in Public Health and General Preventative Medicine. Karina is co-director of the Community and Population Health rotation for the family medicine residency, and holds several roles within medical student education, including Quality Improvement Coach for student teams completing their primary care clinical rotations and associated QI projects, and facilitating PaCE (Patient Centered Education) case-based learning groups. She is passionate about bridging the gaps between community health, public health and clinical primary care, and fostering the education of "community-aware" clinicians. Outside of her professional roles she enjoys the many adventures of being a mom to 2 young daughters, 2 bulldogs and a cat, supporting her globe-trekking photographer husband, and fitting in a HIIT workout or long run wherever she can.



Bruce Barrett, MD, PhD received M.D. and Ph.D. (Anthropology) degrees from the University of Wisconsin-Madison in 1992, then did an international health fellowship with Johns Hopkins University at a World Health Organization research institute in Guatemala. A 1997 graduate of the Eau Claire residency program, Dr. Barrett completed the Madison-based primary care research fellowship in 1999. Dr. Barrett now directs research fellowships in primary care and complementary and alternative medicine. His work has been supported by grants from the National Center for Complementary and Alternative Medicine at the National Institutes of Health, and the Robert Wood Johnson Foundation. His research focuses on acute respiratory infection, placebo effects, herbal medicines, mindfulness meditation, and exercise. Bruce also works with Physicians for Social Responsibility, focusing on climate change, environmental health, and universal health care. When not busy with clinical care, community service, research or teaching, Bruce can be found with his family, and/or running, biking, swimming, skiing, hiking, climbing, canoeing or sailing.



Mark Beamsley, MD grew up with two artist parents, who served as an inspiration for Mark, and his early career ideas included being an animator for films. At the same time, he enjoyed science of all sorts, and could often be found doctoring small animals or occasionally running experiments around the house. Not surprisingly, he attended a liberal arts school, Knox College in Illinois, and eventually found that medicine represented for him the perfect combination of science and art. He attended Loyola School of Medicine in Chicago, and ventured to UW Madison for Family Medicine residency, where he has remained since graduating from the program in 2002. He is especially interested in working with medical students and currently is the Director of Medical Student Education for our department. Professional interests also include hospital medicine. In Mark's spare time, his current "art" includes gardening and working on random tiling projects around the home.



Kathleen Carr, MD completed undergraduate (Exercise Physiology) and medical degrees at the University of Wisconsin-Madison, residency training at the University of Michigan, and a two-year fellowship in primary care sports medicine at the University of Wisconsin-Madison in 2002. She joined the Madison Campus faculty in July 2002, and was the Associate Residency Director from 2006 until 2013. She has been the Associate Director of the Primary Care Sports Medicine Fellowship since 2005. Dr. Carr also serves as a team physician for the University of Wisconsin athletes. She is the curriculum director for musculoskeletal medicine in the residency, and her other professional interests are injuries in female athletes, mental health issues of athletes, and sports injury prevention. She enjoys cheering on the Badgers and outdoor activities with her family.



Allison Couture, DO grew up in Appleton, Wisconsin, and she earned her bachelor's degree from the University of Notre Dame in Indiana. She then went on to complete her medical degree at the Chicago College of Osteopathic Medicine of Midwestern University. She was drawn to Family Medicine as the specialty that best encompasses her strong interests in obstetrics and pediatrics, and much of her volunteer work has focused on children. As a medical student, she volunteered at Almost Home Kids, a transition home for medically fragile children in need of care and access to advanced medical equipment. She also served as president of her local chapter of the Student Osteopathic Pediatric Association. In this role she organized monthly events and established an annual Bullying Awareness Discussion Panel. Her interest in maternal and child health has also inspired an interest in advocacy, and she traveled to Washington DC to advocate for health policy changes as part of the DO Day on the Hill. In her free time, Allison enjoys yoga, baking cakes, and watching the musical theatre productions of her husband.



Hallum Dickens, MD has a medical degree from UNC School of Medicine in Chapel Hill, NC. After completing his education, he completed his residency in Family Medicine at the Mountain Area Health Education Center (MAHEC) in Asheville, NC. Before coming to DFMCH, Hallum worked at Piedmont Health Services in Chapel Hill, NC. Hallum's clinical interests include improving healthcare access, full-spectrum family medicine, mental health, and addiction medicine. He is fluent in Spanish and enjoys teaching and working with students and patients from diverse backgrounds. In his free time, Hallum enjoys reading, hiking, traveling, and art.



Ann Evensen, MD completed her undergraduate and medical degrees at the University of Wisconsin-Madison. She had residency training at the University of Washington-affiliated program in Renton, WA. Since residency she has practiced part-time but full-scope family medicine in rural and private practices in Covington, WA, Platteville, WI, and Monona, WI. She was named a Master Teacher by the UW Department of Family Medicine and Community Health and joined the Verona faculty in 2007. Her professional interests are

low-risk obstetrics, women's health, international health, office-based procedures, and practice improvement. She loves to explore the ethnic food riches of Madison and lives in Verona with her husband and three children.

Thomas Hahn, MD – Associate Director (see page 9 for full bio)



Erin Hammer, MD earned her medical degree from the University of Washington School of Medicine in Seattle, Washington. After completing her education, she completed her Residency in the Department of Family Medicine at the University of Wisconsin-Madison and Primary Care Sports Medicine Fellowship at the University of Wisconsin-Madison. She then earned a Master of Public Health degree from the University of Wisconsin-Madison and completed a research fellowship through the Department of Family

Medicine. Dr. Hammer's specific professional interests include concussion management, care of the female athlete, musculoskeletal ultrasound, and teaching learners at all levels. Additionally, she serves as the team physician for the Badger wrestling team and as a team physician for USA Ski and Snowboard in the medical pool.



Sarah James, DO is the associate osteopathic program director for the dually accredited multi-site family medicine residency program for University of Wisconsin. She completed her osteopathic medical education at Des Moines University. Then, she completed her family medicine residency at Columbia St. Marys in Milwaukee Wisconsin and a one year residency in neuromuscular medicine and osteopathic manipulation medicine at the University of North Texas Health Science Center, Texas College of Osteopathic Medicine,

Fort Worth. She has been featured in an article in *The DO*, the online publication of the American Osteopathic Association, for her efforts and advocacy in instructing MDs in the UW residency program in using OMM techniques to treat patients. Currently works at the UW Health Verona Clinic doing full spectrum family medicine. Dr. James still has family located in the Verona area and is happy to be a member of this community.



Maggie Larson, DO grew up in rural MN and received her B.A. in Psychology at Carleton College in Northfield, MN, while studying abroad in Spanish language and completing her pre-medical requirements. She then lived in the greater Chicago area for a short time working as a live-in counselor for teenage girls and as a medical assistant in a pediatric medical clinic affiliated with the Chicago Children's Hospital. After completing medical school at Kansas City University of Medicine and Biosciences College of Osteopathic

Medicine, she stayed in the Kansas City area at the Research Family Medicine Residency, completing her third year as chief resident. As part of a National Health Service Corps scholarship repayment program, Dr. Larson worked for 5 years in a rural health system in central Minnesota practicing full spectrum family medicine including hospital and obstetrical patient care, periodically supervising visiting medical students, PA students and residents. She is excited to return back to academic medicine by joining the staff at UW-Madison. Outside of work, she keeps busy with her husband, Jay, and three boys Jack, Erick, and Leif.



Mark Wirtz, MD has a medical degree from Northwestern University Feinberg School of Medicine in Chicago, IL and completed his residency at Naval Hospital Pensacola Family Medicine Residency. Additionally he has a certificate in Healthcare Modeling and Simulation from the Naval Postgraduate School. Before coming to the Department of Family Medicine and Community Health, Dr. Wirtz served as full time faculty in the National Capital Consortium Family Medicine Residency at Fort Belvoir Community Hospital. Dr. Wirtz's specific professional interests include healthcare simulation and graduate medical education. Outside of the clinic, he enjoys gardening and engaging in the community and church. He is looking forward to braving his first Wisconsin winter with his wife, Sarah, and three young boys, Elijah, Joshua and Isaiah.

Wingra Faculty

Yohualli Anaya, MD, MPH has a medical degree and Master of Public Health from Keck School of Medicine of USC in Los Angeles, California. After completing her education, she completed residency training at the UCLA Family Medicine Residency Program. Before coming to DFMCH, Dr. Anaya was core residency faculty at the Department of Family Medicine at the David Geffen School of Medicine at UCLA and the co-chair for the Family Medicine Core Clerkship. Dr. Anaya's professional interests include the application of research to promote policies and programs that address health equity. Her research interests include health care disparities in marginalized and minoritized communities and physician workforce diversity. Dr. Anaya is passionate about improving the health and healthcare of underserved and marginalized communities. Her clinical interests include full-spectrum primary care for the whole family, outpatient procedures, and providing language-concordant care to Spanish-speaking patients.



Randy Brown, MD, PhD, FASAM attended medical school at the University of Washington, Seattle. He completed his family practice residency at the University of California Davis-affiliated Stanislaus County Family Practice Residency Program. He has achieved Board Certification in Addiction Medicine (2009) and a PhD in Population Health Sciences (UW Madison, 2009). Additional training experiences have included University of California San Francisco's Faculty Development Fellowship (2001-2002), the UW HRSA Primary Care Research Fellowship (2001-2004), and the UC San Diego Alcohol

Medical Scholars Program (2002-2004). Dr. Brown's research focuses upon services to addicted individuals in non-traditional settings and via non-traditional means, including in primary care, general hospitals, and criminal justice supervision and through the use of mobile technology. He is a licensed provider of office-based treatment for opioid dependence. Dr. Brown speaks fluent Spanish and enjoys serving the local Latino population at the Wingra Clinic. He is the Director of the Center for Addictive Disorders at University of Wisconsin Hospital and Clinics, the Director of the UW-VA Addiction Medicine Fellowship Program, and Medical Director of the Madison VA Interprofessional Advanced Fellowship in Addictions Treatment. He is adjunct faculty in the Department of Population Health Sciences, and a Center Scientist with the Center for Health Enhancement and Systems Studies in the UW Dept. of Industrial Engineering. He is the Medical Director for Overdose Prevention with the AIDS Resource Center of Wisconsin, LifePoint Program. He served as the President of the Wisconsin Society of Addiction Medicine for three years (2007-2009).



Jessica Dalby, MD joined the Wingra faculty in 2012 after completing a residency in family medicine and an academic fellowship at UW Madison. Before finding her home in Madison, she was living in Texas, where she completed her B.S. in biochemistry at the University of Texas in Austin and attended medical school at Baylor College of Medicine in Houston. In Texas, and while studying and traveling abroad in Spain and the Americas, she developed fluency in the Spanish language. Her clinical interests are wide-ranging and include full spectrum family medicine, including obstetrics. She has pursued additional training in reproductive health and teaches residents skills in this area. She spends most of her free time outside, biking around town, and enjoys gardening at her community garden plot and cooking good, fresh food. She is currently learning home canning methods to preserve the bounty of summer from her garden.

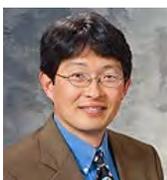


Lee Dresang, MD graduated from the Indiana School of Medicine and completed his family medicine residency at the New Mexico Family Practice Residency. He then completed the Tacoma Rural Health Fellowship before coming to Wisconsin. His special interests include women's health, Latino and international health and violence prevention. He is currently the OB Coordinator for the Madison Family Medicine Residency Program. He is also currently a member of the ALSO Editorial Board and Family Practice Inquiry Network (FPIN) Board.



Sean Duffy, MD Originally from Milwaukee, Sean Duffy earned his bachelor's degree in anthropology from the University of Notre Dame and his medical degree from the University of Wisconsin School of Medicine and Public Health. He then went on to complete his residency training, as well as the Academic Medicine Fellowship, with the UW Department of Family Medicine and Community Health before beginning the Primary Care Research Fellowship. Dr. Duffy's research focuses on the management of chronic

disease in low resource settings, particularly the management of diabetes in low- and middle-income countries. He is currently involved in a quality improvement project in Guatemala to develop and evaluate a smartphone application to assist community health workers with titrating oral medications for patients with diabetes living in rural villages. Dr. Duffy is also interested in global health education and training and is working with a group of researchers from several institutions to assess the current state of clinical fellowships in global health in the US and Canada.



Jonas Lee, MD grew up in the suburbs of Kansas City and graduated from Princeton University with a degree in Ecology and Evolutionary Biology. He struggled to choose between a career in medicine versus teaching. Ultimately, he decided to return to the much more friendly Midwest to attend the University of Kansas School of Medicine. John McPhee's description of the first family medicine graduates in "The Heirs of General Practice" convinced him to become a family physician. During medical school, Jonas

spent a month traveling through Mexico followed by several weeks caring for the homeless population in Colorado Springs, CO. He volunteered regularly at a Catholic Worker hospitality house in Kansas City. The experiences solidified his desire to serve the needy close to home. He completed his family medicine residency at the University of Wisconsin--Madison in 1999. After serving as medical director at a community health center in Beloit for eleven years, Jonas returns to Madison with a passion for caring for underserved populations. He also has an interest in natural childbirth, addiction medicine, and inpatient medicine. Jonas enjoys homeschooling his five children, exploring cities on foot, helping out with the CSA renting the family land, and restoring bicycles. With the help of family and friends, he's been building his dream eco-home since 2006, with the hopes of finishing during his lifetime.

Ildi Martonffy, MD, Madison Program Director (see page 9 for full bio)



Kirsten Rindfleisch, MD received her B.A. from Sarah Lawrence College, her M.D. from Johns Hopkins School of Medicine, and completed her family medicine residency training and academic fellowship at UW Madison. She is the medical director at Wingra Family Medical Center. Her academic interests include health disparities and population and community health. Outside of work, Kirsten enjoys spending time with her husband and sons, traveling, and reading.



Patricia Tellez-Giron, MD Raised in Mexico City, Dr. Tellez-Giron received her medical degree, with honors, at the National University of Mexico (UNAM). She moved to the United States 14 years ago to be with her family and to continue her education. She completed the University of Wisconsin Family Medicine Residency program and soon after graduation joined the faculty at Wingra clinic. Dr. Tellez-Giron received the public health award for community advocacy for her work with the Latina community and the Wisconsin Well Women program in 2000. Other awards include the AIDS Network Executive Director's Award for Outstanding Community HIV/AIDS Service in 2004 and the Faculty Excellence Award for Community Service also in 2004. Dr. Tellez-Giron teaches physicians and other health care professionals about cultural competency in working with Latino/communities. She is the chair of the Latino Health Council in Madison and under her leadership several community initiatives have been implemented including a monthly health prevention Spanish radio program, annual Latino Health fair, and a Latino Chronic disease summit among many others.

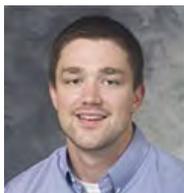


Jonathan Temte, MD, PhD joined the faculty of the DFMCH in September 1993. He received his BA from Luther College, Decorah, Iowa, in 1980, an MS in biological oceanography from Oregon State University in 1986 and a PhD in zoology (minor: epidemiology) from the University of Wisconsin in 1993. He is published widely in the area reproductive ecology and birth timing of seals and sea lions. Jon pursued his medical training at the UW-Madison Medical School receiving his MD in 1987. He is a 1993 graduate of the Madison Family Practice Residency. He has an extensive variety of research and teaching experience, and received the Resident Research Award in 1993 and the Baldwin Lloyd Clinical Teaching Award in 1996. He served as the director of the Wisconsin Research and Education Network (WREN) from 2000-2005. Jon chaired the American Academy of Family Physicians (AAFP) Commission on Science in 2008 and currently chairs the Wisconsin Council on Immunization Practices. He served as AAFP liaison to the Advisory Committee on Immunization Practices (ACIP) from 2004-2008, and was appointed as a voting member of ACIP (2008-2015) where he is the current chair (2012-2015). Jon has been active on pandemic influenza and bioterrorism working groups for the state of Wisconsin. His current research interests include viral disease surveillance in primary care, seasonality and epidemiology of influenza, attitudes toward immunization, and assessment of workload in primary care settings.



Morgan White, MD sees family medicine as a platform to address healthcare disparities affecting underserved communities, with a particular emphasis on the African-American population. Morgan is from Crystal Lake, IL and earned her undergraduate degree in molecular, cellular, and developmental biology from Yale University. She went on to earn her medical degree from the University of Michigan Medical School. While in medical school, Morgan served as president and treasurer of the Black Medical Association. She has committed herself to addressing issues affecting the healthcare needs of the black community and supporting the educational pipeline to train more black doctors. Morgan forms deep relationships with each of her patients, from birth through old age, in sickness and in disease prevention. For Morgan, medicine is more than just physical conditions and treatments; it is about relationships, values, and creating communities that promote health. Morgan enjoys watching Michigan football and basketball teams (Go Blue!), cooking, playing tennis, and gardening.

UW Family Medicine Service Faculty



Alex Milsap, MD was born and raised in Madison, WI. He completed his B.S. in Psychology with a minor in Business Administration at UW—La Crosse. He then went on to complete his medical degree at the UW School of Medicine and Public Health. Alex was drawn to family medicine for its focus on long-term relationships with patients, families, and communities. His specific interests include sports medicine, urgent/emergent care, and medical education. His most valuable experience in medical school came from spending time with patients and from observing his preceptor on his family medicine rotation, who balanced his time between the clinic and hospital, in addition to taking care of patients in their homes. As a medical student, Alex did stroke research at Gundersen-Lutheran Hospital and also organized and implemented a series of health talks in conjunction with the La Crosse County board of health. Working in this community showed him the importance of education, outreach, and maintaining good relationships with the community. Outside of medicine, Alex enjoys spending time with family and friends. He is an avid sports fan and enjoys playing basketball, golf, and cheering on his favorite teams.



Amanda Goplen, NP is a proud Dane County native and mother of a gaggle of three girls. She completed undergraduate degrees in Biology at UW-Madison in 2007 and Nursing at Binghamton University in up-state New York in 2008. She subsequently earned her MSN as a Family Nurse Practitioner at Allen College in Waterloo, Iowa in 2012. Her involvement with the UW-Madison residency program began in 2013 when she took on the role of Family Medicine Hospitalist NP and became the “glue” of the active UW Hospital Inpatient Family Medicine service. She is passionate about the powerful role of the patient, nurse, and provider triad during inpatient encounters. When not at UW Hospital, Amanda enjoys coaching Girls on the Run, geocaching, volunteering at a Stoughton elementary school, running, coordinating Girl Scout cookie sales, and spending time with family.

Behavioral Health Faculty



Julia Yates, MSSW, LCSW completed her Master of Science and Clinical Social work degree with an emphasis in structural family therapy in 2003 from the University of Wisconsin- Madison. She completed her post graduate clinical externship on an Adult Inpatient Psychiatric unit which included extensive Emergency room training along with individual and group therapy. Julia’s professional interests include: women’s health, working with adolescent populations, grief counseling, couples counseling, motivational interviewing, holistic approaches to healing, and diagnosis and treatment of mood disorders. Julia was introduced to the Department of Family Medicine and Community Health while working with the Wisconsin Initiatives to Promote Healthy Lifestyles, which also afforded her the opportunity to strengthen her motivational interviewing skills. She joined the UW Health Verona team in March of 2008 and became full time after closing her private practice in Janesville in February 2011. Julia provides psychotherapy and brief consultation services to a wide age range at the Verona clinic, and she draws from multiple therapeutic, holistic approaches including cognitive behavioral therapy, solution focused therapy, and acceptance /commitment therapy. She also thoroughly enjoys working with residents through direct teaching, observation, and shadowing opportunities.

Osteopathic Faculty

Sarah James, DO, Director of Osteopathic Education (see page 60 for full bio)

Maggie Larson, DO, Associate Director of Osteopathic Education (see page 60 for full bio)

Allison Couture, DO (see page 59 for full bio)

Jared Dubey, DO (see page 56 for full bio)

Russell Lemmon, DO (see page 57 for full bio)

Section 5

RESIDENT BIOSKETCHES

“The most impactful part of residency has been learning from and working with my co-residents and attendings; they exemplify compassion and excellence in providing care to not only patients, but also to each other. Knowing that I had such a supportive wonderful group of individuals on my team is what helped to make residency special.”

Laura Shingleton, DO, 2022 Graduate

MADISON PROGRAM RESIDENTS

Belleville Residents



Abigail Cox, MD (she/her) (PGY-1), fell in love with family medicine because of the kind and caring culture that is present throughout the field. She believes that kindness is an essential aspect of providing excellent care. She aims to combine the science of medical care with the human touch of kindness and a smile to bring positivity to her patients' lives. Abigail is from Rochester, NY and she earned her bachelor's degree in Biology from Duquesne University in Pittsburgh, PA. She went on to attend the University of Pittsburgh School of Medicine. While in medical school she pursued her interests in behavioral health and the treatment of substance use disorders. She also contributed to her medical school community by participating in a wellness committee and mentoring junior students. In her medical practice, Abigail has strong interests in addiction medicine, behavioral health, dermatology, and women's health. Abigail loves to dance – she started dancing at the age of 12. She also enjoys sampling ice cream, watching movies (especially Marvel movies), and playing board games.



David Hardin, MD (he/him) (PGY-1), enjoys practicing full-spectrum, rural family medicine. From seeing patients in clinic to being called into the hospital for deliveries to caring for patients of all ages in all settings, David is committed to the life of a rural family doctor. He welcomes the opportunity to build long lasting relationships with his patients and hone the skill to care for all aspects of his patients' health. In addition to rural medicine, he is also interested in addiction medicine and adolescent health. David is from Fredericksburg, TX and he earned his undergraduate degree in Biomedical Sciences at Texas A&M University. He attended medical school at the University of Texas Medical Branch at Galveston School of Medicine. While in Galveston, David volunteered at the local student-run free clinic, where he held several leadership roles. He was also involved with his school's family medicine interest group, and he worked with other students to promote the broad scope of family medicine as a specialty. Outside of medicine, David enjoys exploring the outdoors and, coming from Texas, he is very excited to experience Wisconsin winter activities, especially on frozen lakes. His hobbies also include canning, spending time with his partner and their dog, and trying out new restaurants.



Viktoriya (Vika) Ovsepyan, MD (she/her) (PGY-1), is committed to breaking down barriers to healthcare and advocating for social justice. She is from Cedarburg, WI and she earned her undergraduate degree in Gender and Women's Studies, with a minor in Global Health, from the University of Wisconsin-Madison. While in college, Vika worked at the UW Women's and Sexual Health Clinic, which sparked her interest in women's health and taught her the importance of providing reproductive health services and empowering young adults to lead healthy lives. She completed a community health internship with a domestic violence women's shelter in Wisconsin Rapids, WI. From this, she experienced the importance of providing trauma-informed care. Vika earned her medical degree from the UW School of Medicine and Public Health. She participated in the TRaining in Urban Medicine and Public Health (TRIUMPH) program in Milwaukee. This experience prepared Vika to serve medically under-resourced populations and promote health equity through advocacy and community engagement. As part of the TRIUMPH focus on public health, she partnered with the Milwaukee Health Department to increase access to sexual health services for uninsured patients. Outside of medicine, Vika enjoys spending time with family and friends, being in the great outdoors, and traveling.



Logan Yeager, MD (he/him) (PGY-1), is a native Wisconsinite from Dodgeville. He is committed to rural family medicine and building strong connections with his community. He has volunteered for over 6 years at the Community Connections Free Clinic in Dodgeville, where he has helped with projects including improving blood pressure control. He earned both his bachelor's degree in biology and his medical degree from the University of Wisconsin – Madison. While in medical school, Logan founded WisCARES Social Chats, a program that provides recurring phone call check-ins to individuals struggling with social isolation and loneliness. He also volunteered with Doctors Ought to Care where he led educational activities in local communities to teach kids about the human body and how to live a healthy lifestyle. Logan's interests include full spectrum family medicine and the treatment of substance use disorders. He is honored to join his patients' journeys and work with them to build care plans and goals. His goal is to practice in rural Wisconsin and partner with patients as they face issues and stresses impacted by rural health. Logan can often be found fishing, biking, playing the guitar, and spending time with his wife and friends.



John Kalmanek, MD (he/him) (PGY-2), is passionate about primary care; he enjoys patient education, preventive medicine, community health, and providing care for marginalized populations. John is from Homer Glen, IL and he earned his bachelor's degree in Science-Business from the University of Notre Dame. He went on to earn his medical degree from the University of Virginia. While there, he developed his interests in learner-centered teaching by serving as a peer mentor for other students and leading health education classes at a local jail. During a "Caring for Refugees" elective, he discovered a passion for the challenge and value of providing care for refugee patients. He also participated in the Generalist Scholars Program, which allowed him to focus on developing as a primary care physician who is devoted to holistically improving the lives of others. John worked with an interdisciplinary team of students to create a mobile application designed to make it easier for caregivers to receive help; this experience fueled his passion for innovation and the team-based, multidisciplinary approach to healthcare. He loves playing and watching sports (go Bears!) and he enjoys playing board games with friends and trying new foods.



Colin Kavanaugh, MD (PGY-2) is drawn to rural family medicine because of the opportunity to do something different every day. He is interested in working with his hands to do procedures and he wants to practice full scope medicine in a small town. Colin is from Sandwich, IL and he earned his bachelor's degree in Health Science from Bradley University in Peoria, IL. Colin went on to participate in the Rural Medical Education Program at the University of Illinois College of Medicine – Rockford. In this program, Colin saw firsthand what it meant to be a rural full-scope family medicine physician. He also conducted research on the stigma towards mental illness in rural communities. Drawing on his passion for exploring the outdoors, he created a wilderness medicine interest group. Colin is interested in teaching learners and served as a clinical mentor. Colin enjoys developing relationships with his patients and his favorite interactions are when patients feel comfortable to speak casually and trust that he has their best interest in mind. Colin and his wife love spending time in the great outdoors – hiking, fishing, boating, and spending time at the lake. He also enjoys hunting and cooking different fresh fish and wild-game recipes.



Camila Khan, MD (PGY-2), is drawn to helping patients manage their health so that they can live the life they want. Camila hails from St. Louis, MO and she earned her bachelor's degree in Economics from Truman State University in Kirksville, MO. She then went on to earn her master's degree in Economics from Miami University in Oxford, OH. Prior to starting medical school at the University of Wisconsin School of Medicine and Public Health, Camila worked at Epic. She began to consider a career as a doctor as she witnessed the direct and important impact physicians have on patients. Camila is also interested in advocacy, and she participated in initiatives with Doctors for America regarding gun violence prevention, women's reproductive rights, treatment of asylum-seekers and migrants, and the opioid epidemic. She worked with Centro Hispano of Madison to help train community health workers on maternal and infant health and recruit expecting or new mothers to their group support sessions. Camila's medical interests include maternal health and newborn deliveries, addiction medicine, and integrative medicine. In her free time, Camila enjoys reading, watching movies and television, and taking walks with her friends.



Luke Ragon, MD (PGY-2), is drawn to rural family medicine because of its focus on disease prevention, care for medically underserved populations, and outpatient procedures. His goal is to work in a small, rural town, developing enduring relationships with his patients and engaging with the community. Luke is from Dansville, MI and earned his undergraduate degree in Biology from Hope College in Holland, MI. He earned his medical degree from Wayne State University School of Medicine in Detroit. While in Detroit, Luke was involved with community service and clinical outreach. He was a part of the Fabric of Society program that allowed him to volunteer with local organizations providing clinical and social care. Through his volunteer work, Luke learned how people are adversely affected by socioeconomic disparities and how this directly impacts health. He also volunteered with Street Medicine Detroit to provide care for the unreached and homeless population. From these experiences, Luke learned empathy, compassion, and a renewed respect for the resilience of the human spirit. He also learned the joy of working with patients in limited resource settings. When he is not in the clinic, Luke enjoys spending time outdoors hiking, camping, hunting, and fly fishing and fly tying. He also enjoys cheering for the Cleveland Browns and the Ohio State Buckeyes.



Brian Kenealy, MD, PhD (he/him) (PGY-3) is a native Madisonian, having grown up in the Monroe Street neighborhood. He attended the University of Wisconsin – Madison, where he earned his bachelor's degree in Molecular Biology and his doctorate in Endocrinology and Reproductive Biology. He attended medical school at the Medical College of Wisconsin. In medical school, Brian participated in the Health Systems Management and Policy Pathway, which exposed him to ways in which systems can be leveraged to improve health and wellness, such as advocacy at Doctor Day at the Capitol. He also participated in leadership, teaching, and mentorship activities and is committed to medical student education. Drawing on his research training, he conducted research on how psychosocial determinants affect diabetes and how fat cells regulate cholesterol. He also used his research skills to inform community projects and mentor the next generation of medical professionals and scientists. Brian is committed to caring for patients across their lives and medical conditions. He is interested in obstetrics, chronic disease management, shared decision making, and community-focused preventative care. Brian finds joy in spending time with his wife and daughter, walking his dog and tending to his backyard chickens, indulging in science fiction, and playing ultimate Frisbee and basketball.



Kane Laks, MD (he/him) (PGY-3) is from Hannibal, MO. Kane studied Biology and French at Saint Louis University and earned his medical degree from the University of Missouri – Columbia School of Medicine. Kane is committed to providing care for underserved and rural populations: in medical school, he volunteered at the student-run free clinic in Columbia, MO and rotated at the Menominee Tribal Clinic in Keshena, WI. Kane is also interested in academic medicine; as a medical student, he worked with his junior peers to teach them how to develop differential diagnoses, interpret lab results, and explore treatments. Kane is drawn to family medicine because the variety allows him to care for patients in clinics and hospitals and ranges from obstetrics to psychiatry to palliative care. His passion for working with underserved populations and his drive for life-long learning combine to create an evidence-based, nuanced approach to medicine that places the patient and the community at the center. Kane enjoys playing the clarinet and saxophone, learning more about the French language and culture, following the Oscars, reading fantasy and thriller novels, and cooking Indian food.



Eleanor (Elle) Meisner, MD (PGY-3) hails from Richmond, IL and received her bachelor's degree in Molecular and Cellular Biology from the University of Illinois Urbana-Champaign. While in college, Elle volunteered at the refugee center in Urbana and provided afterschool educational activities for first generation and immigrant children. Elle went on to attend the University of Illinois College of Veterinary Medicine and earned a master's degree in Comparative Biosciences. Prior to starting medical school at the University of Illinois College of Medicine – Rockford, she studied the role of exposure to endocrine disrupting chemicals during early development in animal models and developed a passion for the crossover between basic science and clinical research. While in medical school, she volunteered in the homeless department at the underserved clinic in Rockford and saw firsthand the impact of social determinants of health, poor environments, and economic difficulties on patients' lives and healthcare. This experience deeply impacted her career choice and she is focused on advocacy, health communication, evidence-based medicine and research, and geriatric, palliative, and preventative medicine. When she is not serving her community, Elle enjoys being outdoors, skiing, biking, hiking, yoga, and trail running. She also enjoys experimenting with new recipes and traveling.



Stefanie (Stef) Sippl, MD (she/her) (PGY-3) is drawn to family medicine because of the opportunity to form long-term relationships, care for whole families, and advocate for patients in the clinic, hospital, and community. Stef is originally from Wausau, WI and earned her undergraduate degree in Biology and Biochemistry from the University of Wisconsin – La Crosse. Prior to medical school, she worked at the University of Minnesota in the Schulze Diabetes Institute. She returned to Wisconsin and earned her medical degree from the University of Wisconsin School of Medicine and Public Health. Stef conducted research examining the practice locations of Wisconsin family medicine residency graduates in relation to three different measures of medical need, which highlighted the importance of providing care to underserved communities. This was emphasized by her rotation in Hayward, a small town in northern Wisconsin, where she gained insight into the value of full-spectrum family medicine in rural areas. Volunteering at the MEDiC student-run free clinics in Madison explicitly showed her the importance of considering all aspects of health in patient care. Beyond full-spectrum family medicine, she is passionate about women's health, obstetrics, sports medicine, mental wellness, and care for the underserved. Stef likes ultimate frisbee, camping, hiking, knitting, playing board games, and spending time with friends, family, and her cats.

Northport Dr (Northeast) Residents



Peter Fink, MD (he/him) (PGY-1), values being a family physician for the approach of not only treating illness, but also promoting long-term wellness. Peter is committed to caring for the whole person across all ages, organ systems, and acute and chronic stages. He also incorporates evidence-based integrative medicine into his practice to help patients actively cultivate wellness. Peter is from Valparaiso, IN and graduated from the University of Notre Dame with a degree in American Studies / Preprofessional Studies. He then worked as a community health specialist in AmeriCorps at a Federally Qualified Health Center in Portland, OR, where he enrolled patients in Medicaid, implemented a screening tool to assess patients' social determinants of health, and helped introduce Community Supported Agriculture and Cooking Matters programs to the local neighborhood. Peter earned his medical degree from the David Geffen School of Medicine at the University of California Los Angeles. While in medical school, he helped design and implement a screening tool for Adverse Childhood Experiences and led health education classes at an underserved school in East LA. Peter enjoys playing guitar and trombone, running, playing basketball, and rooting for Notre Dame sports. He also finds fulfillment through his daily mindfulness meditation practice and involvement with spiritual communities.



Noah Garber, MD (he/him) (PGY-1), is drawn to family medicine because of the ability to build meaningful, long-term relationships with patients at all stages of life. He is from Farmington Hills, MI, and he studied Cellular and Molecular Biology, with a minor in Biological Anthropology, at the University of Michigan – Ann Arbor. He attended medical school at the Oakland University William Beaumont School of Medicine. He participated as a trainee in the Michigan Leadership Education in Neurodevelopmental and Related Disabilities (MI-LEND) program, which taught him about the challenges faced in schools and healthcare systems by children on the autism spectrum and exposed him to the importance of community resources that are available for patients and families. Noah also volunteered as a camp counselor for a summer camp designed for children with serious medical conditions to have a fun and safe experience. Noah's medical interests include preventative health, obstetrics, and outpatient procedures. He enjoys everything outdoors, especially playing tennis, rock climbing, hiking, and skiing. He also loves live music and spending time with family and friends.



Micah Larson, MD (they/them) (PGY-1), is a native Wisconsinite and claims Madison as their hometown. After completing their undergraduate degree in Anthropology and Biochemistry from Arizona State University, Micah returned to Madison to attend medical school at the University of Wisconsin School of Medicine and Public Health. While in medical school, they spent a month working with adolescent medicine physicians learning about eating disorders and reproductive health, two of Micah's interest areas. They also spent a month learning about transgender health with a family physician in Green Bay. In addition to learning the medical aspects of transgender medicine, Micah learned how to be an advocate for the trans community in areas not yet accustomed to gender affirming approaches. Micah also led their medical school's chapter of Students for a National Health Plan and became very dedicated to advocating for a national health plan and healthcare as a human right. Micah is also dedicated to caring for people with developmental disabilities and underserved populations. To unwind from a busy day in the clinic and hospital, Micah enjoys crocheting, cooking, and cuddling with their dog.



Joanna (Jo) Sherrill, MD (she/her) (PGY-1), knew that she would be a family physician when she saw that each day brought the opportunity to care for a wide variety of patients and build connections with patients at every stage of life. In addition to providing broad spectrum care, she is particularly interested in LGBTQ+ care, women's reproductive rights, health equity, and underserved medicine. Jo is from Dallas, TX and she earned her undergraduate degree in Healthcare Studies from the University of Texas at Dallas. She saw firsthand the profound impact access to medical care can have on a person when she volunteered with a research project which provided medical care to sex workers. This experience ultimately led her to pursue her medical degree at the University of Texas Medical Branch. Her advocacy for access to medical care was reinforced when she volunteered in the Texas prison hospital. From this experience, she learned the importance of meeting patients where they are at on their own unique journeys and advocating for them when it is most needed. Jo can often be found hiking with her partner and dog, gardening, and thrifting.



Melanie Biegler, DO (she/her) (PGY-2) is drawn to family medicine for its ability to address health in the full context of family and community. Melanie is from Elmhurst, IL, and earned her undergraduate degree in Biomedical Sciences from Marquette University. While at Marquette, she completed a public health internship where she served as an urban farmer and nutritional instructor in Milwaukee. Prior to starting medical school, Melanie served with the National Health Corps Chicago through AmeriCorps as an asthma educator. Melanie attended AT Still University School of Osteopathic Medicine in Arizona.

Melanie developed her interests in providing culturally competent care while completing her clinical rotations in urban, suburban, and rural settings in Ohio, Kentucky, and Virginia. While in medical school, Melanie was involved with the Ohio Academy of Family Physicians in their Public Policy and Social Determinants of Health committee and served as a student board member. Her experiences have led her to her interests in advocacy, policy, women's health, community health, and using her voice to address the social determinants of health for patients and communities. Melanie enjoys running, reading, and exploring neighborhoods through their coffee shops. She also enjoys painting, writing poetry, and spending time with family and friends.



For **Ashlyn Brown, MD (she/her) (PGY-2)**, growing up on a pig farm in Avella, PA and participating in 4-H spurred her interests in community health and ultimately led her to a career in family medicine. Ashlyn attended Westminster College in New Wilmington, PA, where she earned her degree in Neuroscience. While in college, she developed interests in pediatrics and teaching through working in a preschool and alongside an education student to develop a neuroscience curriculum for kids. Ashlyn earned her medical degree from the Drexel University College of Medicine in Philadelphia. She volunteered as a patient advocate at Eliza Shirley Women and Children's Shelter where she helped connect families who were temporarily experiencing homelessness to child and healthcare services. Ashlyn also served as a coordinator for a regional Racism in Medicine Conference to bring together health professionals and community advocates to discuss how racism is prominent in medicine and to develop tools to address these issues and advocate for patients. Ashlyn is passionate about equitable and socially attentive healthcare and reproductive health. She also enjoys working with pediatric populations, patients with substance use disorders, and patients in the LGBTQ+ community. In her free time, Ashlyn can be found reading, knitting, and crocheting, baking, and playing with her dog.



Rachel Her, MD (she/her) (PGY-2), calls both Madison, WI and SeaTac, WA home. Rachel chose to be a family medicine physician because this specialty recognizes, celebrates, and defends the humanity of patients. She brings her interests in building community partnerships and advocacy to her clinical care and she is also interested in behavioral health and addiction medicine. She earned both her undergraduate degree in Medical Microbiology and Immunology and her medical degree from the University of Wisconsin – Madison. Rachel is committed to increasing diversity in the health professions and she served as a student coordinator of the Health Care in Diverse Communities elective, where she coordinated guest speakers and led discussions about the unique healthcare needs and challenges of diverse populations in Madison. Rachel participated in the Training in Urban Medicine and Public Health (TRIUMPH) Program, which allowed her to complete her clinical rotations in Milwaukee and participate in a structured long-term curriculum focusing on community responsive medicine and health equity, including developing longitudinal community-directed health projects with local organizations. Rachel enjoys baking desserts and playing board games, such as Dungeons and Dragons. She also enjoys singing and musical theatre and is a karaoke enthusiast.



Jagpreet Sekhon, DO (she/her) (PGY-2), calls Madison, WI home. She became a family doctor because she wants to help patients overcome suffering and navigate their care. Jagpreet is committed to creating spaces for her patients to feel safe and supported during difficult conversations about goals of care. She earned her bachelor's degree in Biology and a certificate in Global Health from the University of Wisconsin – Madison. While in college, she interned for STREETS (Social Transformations to End the Exploitation and Trafficking of Sex) and she learned about health disparities while working as an intern with the Area Health Education Center Community Health Internship Program in Milwaukee, WI. Jagpreet attended the Alabama College of Osteopathic Medicine. At her clinical rotation in Bayou La Batre, AL, she saw firsthand the necessity of providing culturally competent care that addresses the social determinants of health. Jagpreet's interests include providing trauma informed care, improving access to care, community medicine, and providing mental healthcare to BIPOC communities. She is also interested in adolescent medicine, preventative care, and integrative health. In her free time, Jagpreet enjoys music, poetry, and curating cheese boards.



Yusuf Abdullah, DO (PGY-3) is drawn to family medicine because of the comprehensive care he witnessed family medicine residents provide to his family. Yusuf was born in Afghanistan and spent his early years there and in Moscow before moving with his family to Waukesha, WI. Yusuf earned his undergraduate degree in biology from Carroll University. Prior to starting medical school, Yusuf worked as a CNA at a Wisconsin nursing home; this experience helped solidify his commitment to patient care and medicine. He earned his medical degree from A.T. Still University – School of Osteopathic Medicine in Arizona. While in medical school, Yusuf served in student government as a Senator for Activities and organized events like the school formal and Halloween costume contest. He also was a Student Ambassador and participated in applicant interviews. His interests in family medicine include preventative, hospital, and sports medicine, patient education, and osteopathic manipulative treatment. As a life-long learner, Yusuf is excited to provide care across the lifespan and for people of all backgrounds. Yusuf enjoys reading and writing poetry, learning how to cook new dishes, and participating in and watching mixed martial arts. He also enjoys spending time with his family and friends in Waukesha.



André Biscaye, MD (PGY-3) is devoted to creating longitudinal relationships with his patients. He claims Denver, CO as his hometown, and has also lived in Mauritania, Senegal, Burkina Faso, and Cambodia. He earned his undergraduate degree in Biology at Westminster College of Salt Lake City and his medical degree at the University of Rochester. Between his 3rd and 4th years of medical school, he lived in Lima, Peru, and learned about the treatment of drug-resistant tuberculosis in the city's most

impoverished areas. This deepened his passion for serving underserved and Spanish-speaking patients. In Rochester, André served as a student leader of a smoking cessation group and saw firsthand the difficulties of overcoming addiction and the importance of patient-centered, shared decision making. From his experience in caring for people with mental illnesses, he sees every person as having a hidden story just waiting to be heard by an understanding, compassionate ear. He approaches his patients with love and kindness and works with patients to help them uncover what makes life meaningful, even in the face of devastating illness. André is interested in addiction medicine, global, behavioral, and women's health, and palliative care. André enjoys climbing, drumming, cooking, reading graphic novels, and playing with his black lab.



Charissa Etrheim, MD (PGY-3) hails from Brandon, SD. While earning her undergraduate degree in Biology and Spanish from Augustana University, Charissa coached Girls on the Run, a program that taught elementary-aged girls how to lead a physically, socially, and emotionally healthy lifestyle. She attended the University of South Dakota Sanford School of Medicine and served as a committee member and volunteer for the student-run free clinic. While in medical school, Charissa participated in a medical trip to San

Lucas Tolimán, Guatemala, where she provided medical care in rural villages and was able to gain experience with global medicine, including the importance of learning about the people and culture of the patients she serves. Charissa's rural family medicine rotation deepened her love of full scope family medicine by instilling in her the responsibilities communities expect from a small-town doctor. Charissa is drawn to family medicine because of the variety of care she is able to provide and the opportunities to build relationships with patients from all walks of life. Her medical interests include women's health and obstetrics, public health, and preventative and sports medicine. Charissa can be found running, camping, snowshoeing, exploring the outdoors, reading, spending time with friends and family, and cheering for the US Women's National Soccer Team.



Stephanie (Steph) Liu, MD (she/her) (PGY-3) approaches medicine with an awareness that patients place an extraordinary amount of trust in their doctors by sharing deeply personal stories and moments. She loves developing meaningful, long-lasting relationships with her patients of all ages. Steph is originally from Ann Arbor, MI and earned her bachelor's degree in Neuroscience from the University of Michigan. She earned her medical degree from the Western Michigan University Homer Stryker MD

School of Medicine. While in medical school, she helped develop a curriculum for teaching health literacy in partnership with a local agency that teaches adults who struggle with reading. This experience gave her an appreciation for the obstacles faced by patients with low health literacy and strengthened her commitment to patient education. Her interests in behavioral health and caring for young adults led her to join a research team on the topic of ADHD in adolescents. Steph is also interested in preventive medicine and weight-loss counseling. As a family physician, she is committed to being present for her patients, providing quality care, and helping them improve their health and their lives. Outside of medicine, Steph likes cooking and trying new recipes, listening to music, watching TV and movies, going to the gym, trivia, and pop culture.

Verona Residents



Kailin Randolph, MD (she/her) (PGY-1), is a family physician because of the opportunity to see patients of all ages and across generations. She enjoys building long-term relationships with her patients and helping them achieve their health goals. She is passionate about understanding and addressing the complex factors that impact patients' health. Kailin earned her bachelor's degree in Applied Health Science and a certificate in Human Needs and Global Resources from Wheaton College. She completed an internship at a hospital in Uganda in which she saw firsthand the importance of addressing social determinants of health and increasing access to healthcare. After college, she earned her master's degree in Teaching from Dominican University. Her participation in Teach for America and time in the classroom shaped Kailin's desire to go into primary care. She is thankful to her students and their families for the countless lessons in leadership, communication, authenticity, and relationships. Kailin attended the Chicago Medical School at Rosalind Franklin University of Medicine and Science and was an active volunteer at the Interprofessional Care Clinic and learned the importance of allowing patients the time and space to communicate their care goals. Kailin can often be found hiking, running, cooking, crossword puzzling, and taking long walks with her dog.



Rutvi Shah, MD (she/her) (PGY-1), is drawn to family medicine because she appreciates the continuity of care and the ability to build long-term relationships with patients and families. She is from Madison, WI and she earned both her bachelor's degree in Biology and her medical degree from the University of Wisconsin – Madison. While in medical school, she served as her class representative and as a leader in the Family Medicine Interest Group. She participated in a research experience examining workflow patterns among primary care physicians, with the ultimate goal of advocating for system changes to improve physician satisfaction and reduce burnout. Rutvi is passionate about STEM education and has mentored students and volunteered at local schools and science fairs to teach kids about careers in medicine. She enjoys seeing the variety of patients in clinic and works with them to address acute and chronic concerns. She enjoys the wide range of procedures that family physicians include in their care, and she is always looking for opportunities to be involved in patient advocacy and community engagement. She can often be found spending time with family and friends, traveling (she's visited 25+ states so far), playing cards and board games, and exploring all Madison has to offer, from restaurants to walking trails.



Kyle Sherwin, DO (he/him) (PGY-1), is from St. George, UT and he earned his bachelor's degree in Exercise Science from the University of Utah. He earned his medical degree from the Midwestern University Arizona College of Osteopathic Medicine. While in medical school, Kyle completed an osteopathic fellowship during which he spent additional time training in the osteopathic manipulative medicine (OMM) clinic, completing research and service projects, and teaching OMM to junior medical students. He was also involved in various mental health outreach events on campus, and he founded a resiliency forum that provided students a place to discuss ideas on building and maintaining resiliency throughout medical school. Kyle is drawn to family medicine because he is committed to providing the human connection patients need to achieve their healthcare goals. He also loves the breadth of care offered which allows him to care for patients in a variety of ways and tailor care to each individual need. Kyle relaxes by playing sports, exercising, cooking, reading, studying philosophy, and playing along with *Jeopardy!*.



Molly Vernon, MD (PGY-1), enjoys the variety and scope of care she is equipped to provide as a family physician. She is committed to serving both individual patients and helping communities thrive. She is originally from Chapel Hill, NC and grew up as a huge UNC sports fan. She studied Health Sciences at Furman University and she earned her medical degree from the Virginia Commonwealth University School of Medicine. She is committed to building strong relationships with her patients and earning their trust so they can partner to achieve their healthcare goals. She is passionate about women's health and advocacy, reproductive health, and gender affirming care. She is also

committed to working with patients and families to address the obesity epidemic. She employs motivational interviewing and partners with patients to develop actionable goals to promote healthy lifestyles. Molly's interests also include lifestyle medicine, family planning, and advanced gynecological procedures. She can often be found baking, cooking, playing sports, and exploring the outdoors. Her favorite Saturday morning activity is getting fresh produce from the farmers market and cooking for the week.



Camille Gonzalez, MD (she/her) (PGY-2), is drawn to family medicine because of the trusting, caring relationships that she is able to build with her patients. Camille claims both Oconomowoc, WI and Corning, NY as her hometowns. She earned her undergraduate degree in Nutritional Science from the University of Wisconsin – Madison and she earned her medical degree from the Geisinger Commonwealth School of Medicine in Scranton, PA. While in medical school, Camille helped at a youth homeless shelter and helped translate information at the health fair so participants could more easily understand the information being shared. As part of the Medical Spanish Club, she also worked to expand ways for students to be more active in the Spanish-speaking community. Camille volunteered with Alley-Oop for Autism; she created a tournament where community members could donate and participate in friendly games of basketball. Camille's medical interests include sports medicine, obstetrics, and women's health. She is passionate about preventative care and helping her patients develop and maintain healthy diets and lifestyles. She relaxes by staying active playing soccer, running, skiing, cycling, and hiking. She also enjoys camping, cooking, and traveling.



Alex Hanna, MD's (PGY-2) approach to medicine is through the lens of the story that connects us with one another and teaches us what it means to be human. Alex's hometown is Muskego, WI, and he earned his undergraduate degree in Preprofessional Studies and Theology from the University of Notre Dame. After college, he spent a year living and working in a school and parish in Wexford, Ireland, during which he learned more about the power of fostering and investing in relationships within a local community. Alex earned his medical degree from the Loyola University Chicago – Stritch

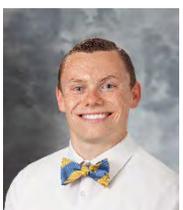
School of Medicine. While in medical school, he participated in a global health service immersion trip in Corozal, Belize, where he worked with and learned from local physicians as well as community health workers in the surrounding villages. Alex also served as his campus' Family Medicine Interest Group president and helped create shadowing and mentoring opportunities for students interested in family medicine. Alex's interests also include sports medicine, integrative medicine, and community health and he strives to create lifelong partnerships with his patients. Alex relaxes by playing piano and guitar, singing, cooking, recreational biking, going on family vacations in Door County, and yelling at the TV during Packers games. He is also a self-proclaimed Disney trivia expert.



Jenny Ho, DO (she/her) (PGY-2), is from San Diego, CA and earned her undergraduate degree in Economics from the University of California, San Diego. She earned her medical degree from the AT Still University School of Osteopathic Medicine in Arizona. In medical school, Jenny volunteered with underserved communities by working at free clinics, participating in after school programs for children with disabilities, and assisting at rehabilitation centers for older patients. She was the president of the Osteopathic Practice and Principles Club and had the opportunity to collaborate with attendings from various specialties to provide weekly osteopathic manipulative technique presentations for her peers. Jenny completed her clinical rotations in Hawaii. While there, she learned what it means to have an aloha spirit and was able to bond with patients' "talking stories" so she could provide culturally competent care that was informed by their lifestyles and diets. Her work with low-income elementary students reinforced her passion to bring health education outside the healthcare system and tailor preventative therapies to different lifestyles. Jenny's medical interests include osteopathic manipulative medicine, sleep medicine, integrative medicine, and preventative medicine. She enjoys playing tennis, bouldering, hiking, and playing piano. She also likes trying new restaurants and making charcuterie boards.



Bradley (Brad) Pfeifer, MD (he/him) (PGY-2) comes to family medicine with an enthusiasm for local and national advocacy, ethical and equitable clinical practice management, optimal mental health and physical wellness, and physician leadership in both healthcare and local communities. Brad is from Sheboygan, WI and he earned his undergraduate degree in Biomedical Sciences from Marquette University. He earned his medical degree from Creighton University School of Medicine. He is currently pursuing a master's in Business Administration from Marquette and a master's in Organizational Leadership from Creighton. Brad was very involved with student government at Creighton, the American Medical Association, and the American College of Physicians. He is committed to mentoring and he started a 400-person pre-health professions mentoring group for college students. He also created a peer-led fitness program for graduate students. Brad is interested in sports medicine, nutrition, LGBTQ+ care, global health, and healthcare systems / IT. His career goals include practicing full-scope Family Medicine in small-town Wisconsin, becoming a clinical preceptor and working adjacent to academia, and gaining further training in global health and obstetrics. To unwind, Brad enjoys long-distance running, piano, guitar, and traveling. He likes being in nature, hiking, and exploring national parks.



Adam Cordum, MD (PGY-3) is passionate about the relationships he forms with his patients and his teammates. Adam grew up in Edmond, OK and earned his undergraduate degree in psychology and his medical degree from the University of Oklahoma in Norman, OK. While in medical school, he worked extensively with a free clinic in Oklahoma City that served the uninsured, predominantly Latino, population in the area. He also served on the executive committee for the OU Community Health Alliance, which coordinates the partnership between local free-care clinics and the medical school, facilitating both medical student volunteering and ongoing financial support through fundraisers, donations, and university support. As a co-intramural chair, he helped organize sporting events and recreation league participation for his medical school class. Adam loves family medicine's broad focus on prevention and community involvement in health and wellness. As a family physician, he strives to make a powerful impact by advocating on patients' behalf, working alongside them to see the entire picture of their health and integrating all contributing factors into a care plan. He is specifically interested in sports medicine. Outside of medicine and community involvement, Adam is interested in board games, taking his puppy on walks, fitness, and all recreational sports, especially soccer.



As a military child, **Nathan Gorman, DO (PGY-3)** spent his childhood moving around the country (Delaware, Colorado, Kansas, Virginia, Alabama, and Missouri) and world (Russia) but calls Kansas City, MO his hometown. He earned his undergraduate degree in Exercise Science and played four years of college football at Truman State University before earning his medical degree from Rocky Vista University College of Osteopathic Medicine. While in medical school, he developed a novel way of quantifying osteopathic manual therapy with ultrasound and presented his findings at the national Student American Academy of Osteopathy Convocation. Nathan is most motivated by working directly with patients and seeing each of his colleagues develop a unique style to connect with patients and deliver high quality care. Nathan's interest in family medicine comes from his desire to be dynamic and innovative in his approach to healthcare, allowing him to create a practice that follows his passions: osteopathic manual therapy, bedside ultrasonography, obstetrics, and inpatient, emergency, and sports medicine, all within a holistic clinical model. When he is not in the clinic or hospital, Nathan enjoys being outside: backpacking, backcountry skiing, fishing, golf, and playing basketball.



Melissa (Mel) Ricker, MD (she/her) (PGY-3) is from Green Bay, WI. She attended the University of Notre Dame and earned her bachelor's degree in Science Pre-Professional Studies and Psychology. While in college, Mel worked as a certified nursing assistant, where she realized her love of working with geriatric patients, and learned the importance of doing all jobs, no matter how big or small, with compassion. Mel returned to Wisconsin to attend the University of Wisconsin School of Medicine and Public Health. In medical school, she served in student government as a Class Representative and Student Body Vice President, where she developed an interest in medical student education while collecting feedback on the new ForWard curriculum. As a part of the National Alliance on Mental Illness, Mel raised awareness of mental health illnesses in high school classrooms across Wisconsin. She also participated in a public health trip to Thailand where she developed a passion for improving health literacy. Her main interests within family medicine include pediatrics, geriatrics, mental health, health literacy, and community engagement. She was drawn to family medicine because of the focus on taking care of the whole person and forming deep, long-term relationships with her patients. She cheers for the Packers, Fighting Irish, and Badgers and enjoys running, board games, being on the water, and singing karaoke.

Wingra Residents



Kimberly Krawzak, MD (she/her) (PGY-1), was born and raised in Streamwood, IL. She earned her undergraduate degree in Biology and Biochemistry from Lawrence University in Appleton, WI. While in Appleton, Kimberly volunteered with a local hospice organization, where she enjoyed getting to know patients and their families and sharing in their grief, happiness, and nostalgia. She returned to Illinois and earned her medical degree from the University of Illinois College of Medicine – Peoria. As a member of the public health interest group, Kimberly helped organize the annual Health Disparity Forums for the local community. Her experience coordinating the disability and ableism workshop helped shape her passion of working to ensure that healthcare services are accessible to all patients. She also conducted research on patients' experiences utilizing food pantries, soup kitchens, and government assistance to combat food insecurity. This has inspired her to think creatively about working with patients and building coalitions of community partners to break down complex social situations. Kimberly strives to provide public health-informed family medicine to resolve health disparities and provide holistic patient care. Kimberly's hobbies include collecting indoor plants, finding new places to eat, hiking, singing, painting, video games, and enjoying the next big Netflix show.



Evelyn Luner, MD (she/her) (PGY-1), is drawn to family medicine because of the ability to form long-term relationships with patients and partner with them in their care. She also is passionate about community engagement and advocating for her patients. Her underlying approach to medicine and community health is doing the small acts that make things better for patients and communities. Evelyn is from Waterford, CT and she earned her undergraduate degree in Neuroscience and Public Health from the College of William and Mary. She worked as a clinical research coordinator at Massachusetts General Hospital, where she discovered how much she enjoyed working directly with patients and developing relationships with them. While in medical school at the University of Connecticut, she participated in the Urban Service Track program which sparked her interest in working with urban and underserved populations, as well as a desire to partner with communities to address social determinants of health and healthcare disparities. Evelyn is passionate about women's health, reproductive justice, advocacy, public health, primary care, health equity, and gender-affirming care. When Evelyn is not in the clinic, she enjoys hiking, cooking, baking, yoga, reading, and exploring new coffee shops and restaurants.



Elisabetta (Betta) Tyrriver, MD (she/her) (PGY-1), hails from the Madison and Fox Cities metro areas. Prior to starting college, she was a Rotary Exchange Student in Lima, Peru, which introduced her to global health and where she gained Spanish fluency. Betta attended Johns Hopkins University and earned her degree in Public Health Studies. She then served as a Global Health Fellow for a non-profit in Thomassique, Haiti where she partnered with community health workers and clinic staff to improve their child malnutrition program, pre- and peri-natal services, and disease prevention and chronic disease management offerings. She earned her medical degree from Loyola University Chicago Stritch School of Medicine. Betta spent the summer after her first year in medical school in the rural Peruvian Amazon interviewing community members, patients, and clinic staff to conduct a community health needs assessment. She also volunteered with the Community Health Clinic in West Town, Chicago to provide medical care to low-income, uninsured Chicagoans. Betta is interested in women's and reproductive health, LGBTQ+ healthcare, global health, substance use, and integrative medicine. Outside of the clinic, Betta can often be found cooking Italian food and hosting dinner parties, biking around the city with her husband, travelling, and listening to podcasts.



Aimée Wattiaux, MD (she/her) (PGY-1), is originally from Madison, WI, and she values personal connection with patients and enjoys working with people in the context of their community, values, and lived experiences. She earned her undergraduate degree in Biology from McGill University. She returned to Madison and worked as a certified nursing assistant at a long-term acute care facility. From this, she learned firsthand about the importance of interdisciplinary teams to support the physical and psychosocial wellbeing of medically complex patients. Aimée earned her medical degree and master's in public health from the University of Wisconsin School of Medicine and Public Health.

Her capstone project for her public health degree included assembling a series of micro-learnings examining weight bias and developing a toolkit for clinicians to provide weight-inclusive care. During a global health field course in Ecuador, Aimée examined the interdependence of people, animals, and environmental health and gained proficiency in Spanish. She is passionate about weight-inclusive care, LGBTQIA+ care, and sexual and reproductive health. She enjoys reading, learning, and discussing body liberation and weight inclusivity. Aimée revels in spending time with her partner and their toddler.



Jose Carrillo, MD (he/him) (PGY-2) is dedicated to providing care to historically marginalized and low-income populations. He is from Aurora, IL and earned his undergraduate degree in Biomedical Engineering from Northwestern University. He then went on to earn his master's degree in Bioengineering from the University of Illinois at Chicago and his medical degree from the University of Wisconsin School of Medicine and Public Health. While in medical school, Jose served as the chapter secretary of the Latino Medical Student Association, which allowed him to bring attention to health disparities in the Latinx community. He is interested in diversifying the medical workforce and has

mentored high school students interested in health sciences, organized mentorship events for underrepresented undergraduate students, and led discussions about implicit bias and microaggressions for first year medical students. He also volunteered with FOSTER of Dane County as a COVID-19 relief volunteer, where he helped distribute food to children, ran food drives, and distributed information about COVID in Spanish and English. Jose is committed to providing LGBTQ+, gender affirming, and Spanish-speaking care and he is passionate about community engagement, underserved medicine, and integrative health. Jose enjoys cooking and exploring new cuisines, yoga, hiking, traveling, and spending time in Eagle River, WI.



Rebeca Liebl, MD (she/her) (PGY-2) chose family medicine because of its flexibility and breadth as well as the opportunity to create long-term relationships with patients and their families. Rebeca grew up in Managua, Nicaragua and moved to Madison as a young adult. She earned her undergraduate degree in International Relations and Environmental Studies from Edgewood College in Madison. After college, Rebeca worked as a Spanish medical interpreter for inpatient, emergency, and clinical services. She went on to earn her medical degree from the Indiana University School of Medicine. While in

medical school, she volunteered at the student-run free clinic. As she worked alongside other health professions students, she solidified her commitment to the importance of multidisciplinary care. Rebeca is committed to diversifying the healthcare workforce and was a member of the Student National Medical Association and the Latino Medical Student Association. With both organizations, Rebeca was able to mentor junior students and to create a community that celebrated under-represented minorities in medicine. Rebeca's clinical interests include sports medicine procedures and she is also interested in advocacy for gynecology and women's health. She finds joy in going out dancing with her friends and exploring parks and trails in the summer and snow shoeing and cross-country skiing in the winter.



Nivi Nair, MD (she/her) (PGY-2) is drawn to family medicine because of her desire to create deep and trusting relationships with her patients. Nivi is from the Madison area and she attended the University of Wisconsin – Madison for her bachelor’s degree in Psychology, her Masters of Public Health, and her medical degree. She participated in the Training in Urban Medicine and Public Health (TRIUMPH) Program, completing her clinical rotations in Milwaukee. While in Milwaukee, Nivi learned firsthand the struggles faced by urban underserved communities and how community engagement is truly part of the practice of medicine. She is committed to collaborating with community partners to improve population health. Nivi is also interested in maternal-child health, mental health, and the care of patients with alcohol and other drug abuse disorders. She frames her medical knowledge through the lenses of service, community, and social justice. She hopes to use her physician voice to partner with underserved patients and populations to advocate for and providing healthcare across the lifespan, particularly around reproductive justice and family health. Nivi unwinds by reading, hiking, playing with her dogs and cat, and exploring the city by eating at local restaurants.



Taylor Ross, MD, MPH (she/her) (PGY-2) is drawn to family medicine because of her passion for advocacy, social justice, and community medicine. Taylor is originally from Nixa, MO and she earned her bachelor’s degree in Cell and Molecular Biology from Missouri State University. She then went on to earn her Masters of Public Health and medical degree from the University of Missouri. She served as Director of Clinic Services and started the Food Security Team at MedZou Community Clinic, the student-run free clinic. During her last year of medical school, she served as an intern at the Boone County Department of Health and Human Services, where she helped with contact tracing and the translation of COVID-19 infographics. Taylor also worked with Live Well by Faith, a Community Health Worker program that partnered with Historically Black Churches to create a system to match community members with primary care providers. Taylor believes that forming relationships outside of the clinic is essential in providing practical advice and interventions to improve the health outcomes of communities. Taylor’s medical interests also include women’s health, medication assisted therapy, gender affirming care, and sports medicine. In her free time, Taylor enjoys growing plants, cooking, baking, hiking, and enjoying life with her husband and their two dogs and cat.



Estefan Beltran, MD, (PGY-3) is drawn to family medicine because it allows him to engage with and serve his community. He is driven to explore how the medical community can advocate for and empower underserved communities. Estefan is from Germantown, MD and earned his undergraduate degree in Biology from the University of Maryland – College Park. After graduating from college, Estefan taught high school biology in Miami Gardens, FL through Teach for America. While a teacher, he saw firsthand the negative health outcomes that were caused by disparities and violence and he was compelled to help his community as a doctor and advocate. He moved to Chicago to earn a Master of Science in Biomedical Sciences and medical degree from Rosalind Franklin University. While in medical school, Estefan’s interest in providing quality care for the underserved led him to serve as the Executive Officer of Community Outreach for the student-run clinic, where he was in charge of community outreach, patient education, and the referrals process. Estefan is interested in developing and strengthening health professional pipeline programs and he founded an outreach program in which health professional students mentored and taught high school students, who then taught fourth grade students. Estefan enjoys playing team sports, R&B, NeoSoul, and Afrobeats music, food – both cooking and eating, and watching TV.



Caroline Hensley, MD, MPH (she/her) (PGY-3) hails from Wheaton, IL, and spent many of her formative years in Cincinnati, OH. Caroline is committed to learning the story of each of her patients – how they live, work, and play – to provide care that is tailored to each person. She earned her undergraduate degree in Spanish and Biology, her Master of Public Health degree, and her medical degree from the University of Cincinnati. While she was growing up, her parents regularly assisted refugee families and this experience instilled a strong commitment to caring for underserved populations. She also conducted research related to the social determinants of health and the structural barriers patients face as they seek quality medical care. This research led her to develop and lead programs to address the social needs of patients at a local federally qualified health center. Caroline evaluated the need for and established a student run free clinic for the uninsured in Cincinnati; her success solidified her motivation to creatively address health disparities and advocate for the needs of communities. In addition to her interests in health equity and care for vulnerable populations, Caroline is also interested in maternal-child health. Caroline enjoys participating in community building activities, gardening, nail art, and fitness.



Ana Person, MD (she/her) (PGY-3) is from Hudson, WI and earned her undergraduate degree in Neuroscience from the University of Pittsburgh. While in high school and college, Ana worked as a certified nursing assistant at an assisted living facility, where she developed a passion for forming relationships with patients. In college, she worked on a research team that studied mental health in women and children; this fueled her interest in mental health and women’s health and how families and communities can impact individuals’ health. She also participated in a research trip to Bolivia to study mental health in the Quechua culture; she gained an immediate appreciation for the importance of incorporating patients’ backgrounds into their care plans. Ana attended the University of Wisconsin School of Medicine and Public Health and she served as the volunteer clinic coordinator at the Share the Health free women’s clinic in Madison. She also volunteered at the Wil-Mar Neighborhood Center and in her community garden. Ana’s medical interests also include pediatrics, gender-affirming care, and providing care to the underserved. When Ana is not in the clinic or working in the community, she can be found gardening, cooking and baking, learning about film, watching Survivor, and reading good books.



Justin Temple, MD's (he/him) (PGY-3) approach to patient care is informed by the principles of addressing all aspects of a patient’s health, forming longitudinal relationships with patients, and advocating for their needs. The patient is always at the center of his care and he practices narrative-driven medicine. Justin is from Aurora, IL and earned his bachelor’s degree in Animal Sciences from the University of Illinois at Urbana-Champaign. He then went on to earn his medical degree from the University of Illinois at Chicago College of Medicine. In medical school, Justin participated in a medical mission to the Dominican Republic and learned how care is provided in impoverished areas. He also volunteered with Chicago Street Medicine, a group which provides medical care to the homeless population of Chicago. Justin served as the vice president of his school’s Queers and Allies group and as the wellness representative for his medical school class. Justin conducted Type 1 diabetes research at Columbia University through a National Institute of Diabetes and Digestive and Kidney Diseases program. Justin’s medical interests include women’s health, LGBTQ health, HIV medicine, and providing quality care for underserved and Spanish speaking populations. Justin enjoys eating and exploring the food scene of each city he visits, watching bad reality TV, playing video games, and spending time with his friends, family, and cat.