Welcome to Madison ~ 2020-2021

RESIDENTS - FACULTY - STAFF - COMMUNITY - CURRICULUM - CLINICS
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 45 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 you to know you during this recruitment process, and for you to get to know us.

Sincerely,

Ildi Martonffy, MD
Madison Residency Program Director
“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, fortunately, 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 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 in the midst of grappling with an awareness of the extent to which opportunities for wellness, employment, and education vary amongst its citizens. The 2013 Race to Equity report (http://racetoequity.net) demonstrated immense racial disparities experienced by Black people in Dane County. Our history is often intertwined with oppression of those in the minority, and this report has helped to energize our community to work to strategically 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.

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
Madison Click
Travel Wisconsin
Wisconsin.gov
2020-2021

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2020-2021

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Residents on the Family Medicine Service
June 2020

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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 has a particular interest in working with the underserved as well as in helping patients with breastfeeding. She enjoys spending time with her husband and children, who occupies most of her “free time.” Ildi became the Program Director in March 2017.

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**Jensena Carlson, MD, Associate Director**, 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. Jensi has a passion for helping each resident define and achieve their goals through residency. Outside of medicine, Jensi loves music and is in perpetual search for a band needing a bassist. She also enjoys spending time with her husband and twin sons, especially camping and playing in/on the water. [jensena.carlson@fammed.wisc.edu](mailto:jensena.carlson@fammed.wisc.edu)

**Thomas Hahn, MD, Associate Director**, while growing up in small-town Wisconsin, Tom’s parents, both teachers, instilled in him the importance of helping others, serving his community, and, most importantly, the value of education. Tom earned a B.S. in Psychology from the University of Wisconsin – Eau Claire and his medical degree at the UW-Madison School of Medicine and Public Health. As a medical student, Tom volunteered at the Southside MEDIC clinic in Madison, and served on the executive planning committee for the annual Medical Students for Minority Concerns’ health fair to promote wellness and provide free health care screenings. He also found ways to incorporate teaching into his medical school career, giving talks to children in local schools about pertinent health topics through the Doctors Ought to Care (DOC) program, and working as a tutor for first and second year medical students. Tom enjoys running, music, photography, and has a special gift for sculpting balloon animals.

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Residency Staff Team

**Jenny White, Education Coordinator**, joined the Madison Residency Team in December 2008. As Education Coordinator, 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, daughter, Elsie, and son, Cam. At the moment, her favorite things include making her kiddos laugh, knitting, board games and traveling. [jenny.white@fammed.wisc.edu](mailto:jenny.white@fammed.wisc.edu)
**Katy Bixby, Inpatient Schedule Coordinator,** joined the Madison Residency team in September 2014. Her responsibilities include coordinating the resident inpatient schedules, coordinating the faculty call schedules, and providing administrative support to both the St. Mary’s and UW Hospital services. Katy has worked in a variety of situations and places including University of Minnesota—Minneapolis, St. Paul; University of California—San Diego; Divine Savior Extended Care in Portage, WI, and most recently the Bureau of Laboratory Services at WI Dept. of Agriculture, Trade and Consumer Protection. In her free time, Katy likes to knit, crochet, garden and read books.  
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**Vicki Daniels, Outpatient Scheduler,** 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 helps assign and schedule outpatient rotations and handles time-away requests for second and third year residents. Vicki is blessed with a wonderful husband, Jeff, and two beautiful children, Lukas and Holly. She enjoys scrapbooking, reading, playing volleyball, and doing various volunteer work.  
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**Danielle Eithun, Residency Program Assistant,** joined the Madison Residency Team in January 2020. As Residency Support, she assists all members of the Residency Staff as needed, additionally she makes sure there is food for the weekly Resident Seminars. After earning her Bachelor’s Degree in Business Management from the UW-La Crosse she moved to Philadelphia, PA with her husband, Ben. After 10 years she talked her husband into moving back to Madison with their 3 kids. Danielle enjoys baking, reading, hiking and biking with her family, and exploring the various state and local parks around the area. 
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**Dillon Novak, Outpatient Scheduler,** joined the Madison Residency team in 2020. Dillon handles resident outpatient schedules, clinical adjunct faculty appointments, verifications, and other residency support activities. 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 military history section of bookstores, playing video games, guitar, camping year round, kayaking, or cooking new meal-prep recipes.  
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**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, Assistant Education 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 is also enjoying the newly wed life. justin.sena@fammed.wisc.edu
**Tressa Spingler, Assistant Education Coordinator** has lived in Madison for two years and has enjoyed all of the music, food and winter activities Madison has to offer. She is originally from Santa Maria, California but spent most of her twenties in Tennessee and considers herself a southerner. She received a Bachelor’s in Social Work from Middle Tennessee State University and worked in the state foster care system for many years. Tressa provides support for resident seminars, evaluations, rural rotations, and other residency support activities. In her free time, she enjoys concerts, singing, taking dance classes, photography, backpacking, 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. Randy has a long history in non-commercial radio, enjoys obscure music of many genres, and has written about it for a variety of publications. He and his wife Kelli love to travel, support local food systems, and drink good lagers and pilsners. Their son Isaac is a student at NYU. Randy 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 Office of Community Health. Elizabeth enjoys spending time with her family, and loves year-round hiking around Wisconsin. *elizabeth.bingman@fammed.wisc.edu*

**Orsi Szecsi, Educational Services Administrative Support**, joined the Madison program in 2018 after playing professional basketball for three years. She grew up in Budapest, Hungary and received her Bachelor’s degree in International Business and Marketing from Duquesne University. Orsi provides administrative oversight for the GME, residency programs and fellowships. She moved from Washington D.C. with her wife, Deb, and enjoys baking, trying out new things, and putting pineapple on pizza. *orsolya.szecsi@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 *jenny.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
- LGBTQ+ Health
- Management of Health Systems
- Maternity Care
- Osteopathic Manipulation
- Pain Management
- Palliative Care
- Population Health
- Practice-based Research
- Rural Medicine
- Sports Medicine
- Women’s Health

Our behavioral science 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, 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 maternity 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 of the centers have busy, diverse practices. Difficulties with resident clinical site assignments have been essentially non-existent. 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 are 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. 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 Maternal Child Teaching Service, 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 2020, 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 ninth consecutive year. All of 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 Mother Child Teaching 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 science 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 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, pod-casts, 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, recently adapted to meet
COVID guidelines:

**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
soccer 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, hockey 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 “Fizzles” 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 “gift” from the chief residents, and this event is always a fun time.

- Chief Resident Rounds bring residents together every other Wednesday over lunch 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.

“I am amazed by the amount of support I received from everyone involved in the
program. The clinical and didactic experience and the compassion I received from the
program has made me a better doctor and human.” – Kristi Smith, DO, 2020 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 by doing a 2-week clinic-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 Science

The behavioral science 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 science faculty to offer a collaborative care behavioral health model in primary care. Faculty and residents share visits with and refer patients to our behavioral science faculty. In addition to regular behavioral science 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 science and wellness/resiliency curriculum for all residents.
- Olga Arrufat-Tobon, LCSW and Bethany Garcia, PsyD, see patients and teach at Northeast Family Medical Center.
- Janet Billerbeck, LCSW, sees patients and teaches at Belleville Family Medical Center.
- Gretchen Straus, LPC, sees patients and teaches at Verona Family Medical Center.
Integrative health faculty provide expertise in mind-body-spirit wellness and the importance of a patient-guided approach to healing.

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 of 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 Maternal Child Teaching 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 4,500 births at Meriter in 2019. 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, 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 addiction. 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, 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.

International Health
International medicine interests are shared by several DFMCH faculty who have been involved in establishing clinical training sites around the globe. 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. 2020-2021 resident compensation is as follows:

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<th></th>
<th>Monthly</th>
<th>Annually</th>
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<tr>
<td>First-year</td>
<td>$5,007</td>
<td>$60,090</td>
</tr>
<tr>
<td>Second-Year</td>
<td>$5,255</td>
<td>$63,060</td>
</tr>
<tr>
<td>Third-Year</td>
<td>$5,461</td>
<td>$65,531</td>
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**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. Basic 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.

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<th></th>
<th>PGY 1</th>
<th>PGY 2</th>
<th>PGY 3</th>
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<tbody>
<tr>
<td>Vacation</td>
<td>15</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>CME</td>
<td>0</td>
<td>5</td>
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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:


**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, other educational expenses, and computers, tablets, and smartphones. In 2020-2021, 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.

Wisconsin Research and Education Network (WREN):

The Wisconsin Research and Education Network, directed by Paul Hunter, 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 practiced-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 particular 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 Arboretum 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-VA Addiction Medicine Fellowship is a one-year fellowship in collaboration with the William S. Middleton Memorial Veterans Hospital 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

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, Northeast,
Verona and Wingra

“Medicine is a career of lifelong learning and experience, and the DFMCH has provided me with the most phenomenal foundation to begin that path. I am so immensely grateful for the patients who helped me learn, the mentors who encouraged my growth, and the friends who always provided laughter and unwavering support.”

Sadie Mitten, MD, 2020 Graduate
The Madison program has four family medicine centers: Belleville, 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 practice 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 science 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.
- Precepting with low resident to faculty ratios for optimal learning. Often, two preceptors are available to ensure the best learning. Community faculty who are physicians in full-time practice also precept at the family medical centers which provides additional perspectives on approaches to care.
- 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, casting, 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 square foot prairie style building, complete with a healing garden. The space was designed to accommodate group visits and extended hours. The clinic’s small group practice is a highly cohesive team of faculty physicians, two physician assistants, a clinical social worker, and twelve residents. It also serves as a teaching site for medical students.

In addition to the clinical services offered onsite, there are two conference rooms and ample resident workspace with a personal workstation including a computer for each resident. The facility also has 3 procedure rooms where residents can gain experience in a range of skills including skin procedures, vasectomy, and colposcopy.

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, partnering around education and care delivery for our community. Faculty, residents, and staff are actively involved in the school district, 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.

The community of Belleville has a well-deserved reputation for friendliness, and because we have been in this community for over 25 years, our patients readily accept residents as their personal physicians. Belleville is a quintessential small Wisconsin town, and the beautiful drive from the Madison hospitals provides a therapeutic break in a busy clinician’s day. For outdoor enthusiasts, Belleville is a biking mecca and a great spot for fishing.

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
- OMT
- 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
<table>
<thead>
<tr>
<th>Belleville Faculty</th>
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<tbody>
<tr>
<td>Brittany Alioto, PA-C</td>
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<tr>
<td>Janet Billerbeck, LCSW - Behavioral Science Faculty</td>
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<tr>
<td>Laura Berkner, PA-C</td>
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<tr>
<td>Jensena Carlson, MD</td>
</tr>
<tr>
<td>Ann Figurski, DO (OMT consultation only)</td>
</tr>
<tr>
<td>Valerie Gilchrist, MD</td>
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<tr>
<td>Bethany Howlett, MD</td>
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<tr>
<td>Jillian Landeck, MD</td>
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<tr>
<td>Jennifer Lochner, MD – Site Lead</td>
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<tr>
<td>Julia Lubsen, MD</td>
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<tr>
<td>William Michaels, MD</td>
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<tr>
<th>Belleville Residents</th>
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<tbody>
<tr>
<td>Nicole Altman, MD – Second Year (Rural Health Equity Track)</td>
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<tr>
<td>Taylor Boland, MD – Third Year (Rural Health Equity Track)</td>
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<tr>
<td>Brenna Gibbons, MD – Second Year</td>
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<tr>
<td>Tyler Grunow, MD – Second Year</td>
</tr>
<tr>
<td>Brian Kenealy, MD – First Year</td>
</tr>
<tr>
<td>Kane Laks, MD – First Year (Rural Health Equity Track)</td>
</tr>
<tr>
<td>Samantha Mayhew, MD – Third Year (Chief Resident)</td>
</tr>
<tr>
<td>Eleanor Meisner, MD – First Year</td>
</tr>
<tr>
<td>Stefanie Sippl, MD – First Year (Rural Health Equity Track)</td>
</tr>
<tr>
<td>Neal Smith, MD – Second Year (Rural Health Equity Track)</td>
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<tr>
<td>Nicholas Squires, MD – Third Year (Rural Health Equity Track)</td>
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<th>Belleville Staff</th>
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<tr>
<td>Sally Jeglum – Clinic Operations Assistant, Clinic Scheduler</td>
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<tr>
<td>Maegen Hufton, RN – Lead RN</td>
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<tr>
<td>Peggy Soehnlein, CPC - Clinic Manager</td>
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The Northeast Family Medical Center is a longstanding, thriving practice located near the Dane County Airport in Madison. 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 Northeast 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 Northeast, 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 Northeast has a decades-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 Northeast 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 Northeast 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, Northeast 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.
### Northeast Faculty

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Olga Arrufat-Tobon</td>
<td>MSSW - Behavioral Science Faculty</td>
</tr>
<tr>
<td>Jared Dubey</td>
<td>DO</td>
</tr>
<tr>
<td>Jennifer Edgoose</td>
<td>MD, MPH</td>
</tr>
<tr>
<td>Katie Enzler</td>
<td>PA-C</td>
</tr>
<tr>
<td>Adrienne Hampton</td>
<td>MD</td>
</tr>
<tr>
<td>Ronni Hayon</td>
<td>MD</td>
</tr>
<tr>
<td>Tyler Ho</td>
<td>Pharm-D</td>
</tr>
<tr>
<td>Russell Lemmon</td>
<td>DO – Site Lead</td>
</tr>
<tr>
<td>Sarah McNiel</td>
<td>PA-C</td>
</tr>
<tr>
<td>Lou Sanner</td>
<td>MD, MSPH</td>
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<tr>
<td>Sarina Schrager</td>
<td>MD</td>
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<tr>
<td>Anne Schmitz</td>
<td>NP</td>
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<tr>
<td>Bill Schwab</td>
<td>MD</td>
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<tr>
<td>Joan Uminski</td>
<td>PA-C</td>
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### Northeast Residents

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<thead>
<tr>
<th>Name</th>
<th>Year</th>
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<tbody>
<tr>
<td>Yusuf Abdullah</td>
<td>First Year</td>
</tr>
<tr>
<td>Megan Bartz</td>
<td>Third Year</td>
</tr>
<tr>
<td>Andre Biscaye</td>
<td>First Year</td>
</tr>
<tr>
<td>Megan Dudek</td>
<td>Second Year</td>
</tr>
<tr>
<td>Charissa Etrheim</td>
<td>First Year</td>
</tr>
<tr>
<td>Bob Freidel</td>
<td>Third Year</td>
</tr>
<tr>
<td>Allison Jenness</td>
<td>Third Year (Chief Resident)</td>
</tr>
<tr>
<td>Stephanie Liu</td>
<td>First Year</td>
</tr>
<tr>
<td>Elise Malzer</td>
<td>Second Year</td>
</tr>
<tr>
<td>Laura Shingleton</td>
<td>Second Year</td>
</tr>
<tr>
<td>Nicholas Sullivan</td>
<td>Second Year</td>
</tr>
<tr>
<td>Alexandra Wolf</td>
<td>Third Year</td>
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### Northeast Staff

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<thead>
<tr>
<th>Name</th>
<th>Title</th>
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<tbody>
<tr>
<td>Laura Jameson</td>
<td>Clinic Manager</td>
</tr>
<tr>
<td>Deb Sands</td>
<td>Clinic Operations Assistant, Scheduler</td>
</tr>
<tr>
<td>Rita Teniente</td>
<td>Nursing Lead</td>
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The Verona Family Medical Center was started in 1994. The center serves a unique patient population that is a blend of young and old, rural and suburban, 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, with teams of faculty, residents, and APPs.

The clinic has excellent relationships with its community partners, and is currently 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. Faculty and residents also lead two cooking classes within the community, one for seniors and one for families, along with local nutritionists. The Verona Clinic also has healthy, affordable meal kits delivered to the clinic once per month as a direct approach to enhancing UW Health employee wellness.

The clinic has adopted many concepts of the patient centered medical home model. Group medical visits co-led by residents and faculty are offered on a regular basis, and robust disease registries allow for organized patient recruitment and proactive disease management. The “2020 Fitness and Lifestyle Challenge” occurs annually over 20 weeks for 20 patients with 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 faculty physicians have broad interests in osteopathic medicine, obstetrics, women’s health, chronic disease management, integrative health, and research. Multiple faculty physicians are sports medicine trained and care for UW Madison athletic teams. In combination with osteopathic care, the musculoskeletal medicine training at the clinic is particularly strong.
# 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
- 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
- Jason Wray, PA-C

## Verona Residents
- Diana Cowdrey, MD – Third Year (Chief Resident)
- Adam Cordum, MD – First Year
- Nathan Gorman, DO – First Year
- Parker Hanson, DO – Third Year
- Danielle Hartwig, MD – Second Year
- Mark Matusak, DO - Third Year
- Melissa Ricker, MD – First Year
- Thomas Ridella, MD – Second Year
- Stacey Schley, MD – Third Year
- AJ Sheehan, DO – Second Year
- Jake Starsiak, DO – Second Year
- Zoe Taylor, DO – First Year

## Verona Staff
- Cheryle Sickles – Clinic Manager
- Kimberly Volk – Clinic Operations Assistant, Clinic Scheduler
Access Community Health Center (ACHC)
WINGRA FAMILY MEDICAL CENTER

“We are privileged to be an integral resource in South Madison, which is an ethnically and economically diverse community. Residents have a great educational experience in both clinical medicine and community responsive care.”

Kirsten Rindfleisch, MD – Site Lead

The Wingra Family Medical Center is located on Madison’s south side. Opened in the early 1970’s, it was the first Madison residency clinic and was formerly housed in the current DFMCH offices at Alumni Hall. In July 2009, the Wingra Family Medical Center affiliated with Access Community Health Centers (ACHC), Dane County’s network of federally qualified health centers. In addition to providing more services to patients, the affiliation enables residents to learn how an FQHC operates.

The clinic is located in a section of the city that is racially, ethnically and linguistically diverse. Latinx, Black and Southeast Asian patients make up the majority of the population served. Many staff members and medical providers speak Spanish, and interpreter services are available both in person and via telephone. Wingra residents as well as the faculty and staff are grateful to work and learn in this rich and complex environment.

The Wingra clinic hosts a student-run resource navigator program, which assists patients with social determinants of health on an ongoing basis. Wingra also houses Health Promotions, a twice-weekly clinic which provides AODA services for ACHC patients in Dane County. Health Promotions is led by UW Addiction Medicine faculty together with 1-2 fellows. 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.

Teaching is a big part of what happens at Wingra Clinic. Medical students from all four years frequently come to learn at the clinic, providing residents with numerous opportunities to teach clinical medicine. PA, pharmacy, behavioral health and social work students also rotate in the clinic, and faculty are involved in a pipeline 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
- Randy Brown, MD, PhD
- Jessica Dalby, MD
- Lee Dresang, MD
- Sean Duffy, MD
- Joel Hill, PA-C
- Jonas Lee, MD
- Stacy Leidel, APNP, PhD
- Ildl Martonffy, MD – Program Director
- Kirsten Rindfleisch, MD - Site Lead
- Patricia Tellez-Giron, MD
- Jon Temte, MD, PhD
- Jennifer Terasa, PA-C
- Angela Vitcenda, MS, PA-C

### Wingra Residents
- Estefan Beltran, MD – First Year
- Jonathan Christ, MD – Third Year
- Anne Drolet, MD – Second Year
- Melanie Hellrood, MD – Second Year
- Caroline Hensley, MD – First Year
- James Ircink, MD – Third Year (Chief Resident)
- Ana Pearson, MD – First Year
- Carly Salter, MD - Third Year
- Jeremiah Shaw, MD – Second Year
- Andrea Suarez, MD – Third Year
- Justin Temple, MD – First Year
- Morgan White, MD – Second Year

### Wingra Staff
- Mary Vasquez - Clinic Manager
- John Tovar – Clinic Admin Supervisor
- Amber Karow – Clinic Operations Assistant, Clinic Scheduler
“I have been blessed to have trained at such a wonderful residency program with intelligent, approachable and down-to-earth faculty and a rigorous and full-spectrum family medicine residency experience.”

Jeffrey Berry, MD, 2020 Graduate
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 and does not anticipate a site review until April of 2023. 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 medical home, 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
First-year residents work only during the day on the Maternal Child Teaching Service 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 Maternal Child Teaching Service 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 Community Health, Developmental Disabilities, Geriatrics, Global Health, Integrative Health, Maternity Care, Research, Rural Health, Sports Medicine, and Women's Health. Participation in a pathway is entirely optional.
Rotation Summary
2020-2021

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
- Maternal Child Teaching Service at Meriter Hospital – 1 block

Surgery – 2 blocks
- Rural Surgery Preceptorship (Baraboo, Dodgeville, or Stoughton) – 4 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 either 2\textsuperscript{nd} or 3\textsuperscript{rd} year, unless otherwise designated

Adult Medicine – 8 Blocks
- Medical Intensive Care Unit at St. Mary’s Hospital – 1 block (2\textsuperscript{nd} year)
- Family Medicine Service at St. Mary’s Hospital – 1 block (3\textsuperscript{rd} year)
- St. Mary’s Hospital Night Float – 4 weeks (2 each 2\textsuperscript{nd} & 3\textsuperscript{rd} year)
- Family Medicine Service at UW Hospital – 2 blocks (1 each 2\textsuperscript{nd} & 3\textsuperscript{rd} year)
- UW Hospital Night Float – 4 weeks (2 each 2\textsuperscript{nd} & 3\textsuperscript{rd} year)
- Dermatology (Outpatient) – 2 weeks
- Geriatrics-Palliative Care – 4 weeks (3\textsuperscript{rd} year)

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

Maternal Child Teaching Service at Meriter Hospital – 2 Blocks (2\textsuperscript{nd} year)

OB Float – 3-4 weeks (3\textsuperscript{rd} year)

Gynecology – 3 Weeks

Nutrition – 2 Weeks

Surgical Subspecialties - 15 Weeks
- ENT – 3 Weeks
- Musculoskeletal Medicine (Orthopedics, Ortho-Related, and Sports Medicine) – 10 Weeks
  - Orthopedics – 3 Weeks (Includes MSK Radiology and Ortho Clinic)
  - Orthopedics-Related – 3 weeks (Includes Rheumatology, PT, and Selectives)
  - Sports Medicine – 4 weeks (Includes Sports Medicine Clinic, Sporting Event Coverage, Orthotics Lab, and Athletic Training Room)
- Ophthalmology – 2 Weeks

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

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

Rural Rotation – 4 Weeks
Electives – 5 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 2\textsuperscript{nd} & 3\textsuperscript{rd} year)

Vacation – 4 weeks (each year)

CME time – 2 weeks (1 each in 2\textsuperscript{nd} & 3\textsuperscript{rd} year)
FIRST YEAR CURRICULUM

Outpatient Care

**Belleville, Northeast, 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 work flow, 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 Center. *Jillian Landeck, 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 Center, and other UW Health family medicine clinics. The coordinator of this service is *Nicole Bonk, 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. *Jillian Landeck, 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.
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):** This rotation alternates weeks of inpatient pediatric night duty with weeks of outpatient rotations. While on **Inpatient Peds/FM Nights**, 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 Jens Carlson, MD.

**Maternal Child Teaching Service 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 alternate weeks of 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 week days 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 OB rotation is Jens Carlson, MD.

By the completion of their first-year OB rotations, most residents have completed 60-75 deliveries (120-150 total deliveries by the completion of two years or five blocks).

Newborn clinical experience is incorporated into the Maternal Child Teaching Service. 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 (4 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 afternoon from 1:00-5:00pm. 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 have the opportunity to 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 the Children’s Hospital ER in Milwaukee, 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 Belize, 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, Northeast, 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; Children’s Hospital ER in Milwaukee; 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 (3 Weeks)**
- **Ophthalmology (2 Weeks)**
- **Orthopedics (3 Weeks)**
- **MSK Orthopedics-Related (3 Weeks):** Three weeks of musculoskeletal orthopedic-related rotations are required: 1 week rheumatology and 2 weeks of selectives, which include casting, physical therapy, pain management, prolotherapy, pediatric orthopedics, podiatry, Spine Clinic, and work-hardening.
- **Sports Medicine (4 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

**Maternal Child Teaching Service at Meriter (2 Blocks second year):** Residents take turns covering the labor floor in 12-hour shifts. In addition to the required blocks of OB, 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 Maternal Child Teaching Service.

### 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 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:

<table>
<thead>
<tr>
<th>Addiction Disorders</th>
<th>OMT 4 MD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allergy</td>
<td>Palliative Care and Hospice</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Practice Styles</td>
</tr>
<tr>
<td>Cardiology</td>
<td>Prolotherapy</td>
</tr>
<tr>
<td>Diabetes Management</td>
<td>Psychiatry</td>
</tr>
<tr>
<td>Endocrine</td>
<td>Radiology</td>
</tr>
<tr>
<td>Geriatrics</td>
<td>Research</td>
</tr>
<tr>
<td>Global Health</td>
<td>Resident as Teacher</td>
</tr>
<tr>
<td>Guardian Angel</td>
<td>Urgent Care</td>
</tr>
<tr>
<td>Integrative Health</td>
<td>Urology</td>
</tr>
<tr>
<td>Neurology</td>
<td>Wound Care</td>
</tr>
<tr>
<td>Nutrition</td>
<td>Vasectomies</td>
</tr>
</tbody>
</table>

Residents may also develop their own electives or take additional weeks of rotations that meet requirements (e.g. physical therapy). 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 from 1:00-5:00 pm. A sample list of topics appears below:

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

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

Seminars for second- and third-year residents are held on Wednesday afternoons from 1:30 – 4:45 p.m. 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:

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

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. 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.
Scheduled Resident Social and Support Activities

*Some activities modified to meet public health guidelines due to COVID

- **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, refection, 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.
“I gained another family while learning and growing as a family medicine physician during my time at DFMCH. I feel so incredibly grateful to have learned from the most compassionate and knowledgeable attendings, co-residents, and staff.”

Rachel Erickson, DO, 2020 Graduate
Jensi Carlson, MD – Associate Director (see page 9 for full bio)

Bethany Howlett, MD
Bio coming soon!

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 has a medical degree from the University of Illinois College of Medicine in Chicago, IL. After completing his education, he went on to residency at Puget Sound Family Medicine Residency program in Washington state, part of the University of Washington’s WAMI network. Following residency, Dr. Michael and his family moved to the Mojave Desert in California and he practiced full scope family medicine as a US Navy Physician at Naval Hospital Twentynine Palms, near Joshua Tree National Park. Upon the completion of his commitment to the US Navy, Billy resigned his commission as a Lieutenant Commander and he and his family decided to move back to the Midwest. Prior to pursuing a career in medicine, Dr. Michael was in the USMC from 2001-2007. Dr. Michael’s specific professional interests include, among other things, patient health, disease education, and studying the most effective ways in which physicians learn over the spectrum of their careers. Outside of Medicine, Billy enjoys playing sports (especially ice hockey), science fiction books and movies, national parks, board games and spending time with his wife, Jessika, and two daughters, Madeline and Josephine.
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.

Lou Sanner, MD, MSPH received his MD degree from Stanford University in 1983. He completed a family practice residency at the University of Missouri Columbia in 1986 and stayed on there as a Robert Wood Johnson Foundation Practice Fellow from 1986 to 1988, earning an MS degree in public health. He joined the DFMCH in July 1988 and was the Madison Program Director from 1996 through June 2002. He teaches and practices at Northeast Family Medical Center. His academic interests center around resident education, particularly training for underserved rural and urban practice. He serves as a national consultant to Family Practice residencies for the AAFP. Lou received the Baldwin E. Lloyd, MD Clinical Teaching Award from the residents in June 1993.

Sarina Schrager, 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 DFM'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.
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** A Madison native, Karina Atwell earned her degree in Kinesiology-Exercise Science at UW-Madison before heading to Milwaukee to complete her medical degree at the Medical College of Wisconsin. Karina’s interests in community health and underserved populations fueled her engagement in many outreach projects during medical school; and ultimately inspired her commitment to primary care. She has an ever-growing passion for global health and spent five weeks in Haiti during her residency training as part of her Global Health Pathway designation. Karina aims to provide excellent care for individual patients, but also pursue public and population health training so she can impact health disparities on a broader scale. In her spare time, she enjoys being outdoors any chance she can get, travel, running, cooking, seeing movies with her film-loving husband and cheering on the Badgers.

**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.

**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

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.

UW Family Medicine Service Faculty

Nicole Bonk, MD grew up in Aurora, Illinois and graduated from the University of Notre Dame, where she studied Science Professional Studies. After graduation, she spent one year working as a house assistant at L’Arche Syracuse, a residential community in Syracuse, New York for adults with developmental disabilities. In addition to house management, Nicole’s responsibilities included advocacy, development of daily and long-term rehabilitation plans, and healthcare for the residents. Her work at L’Arche Syracuse cultivated her interest in developmental disabilities that continued with her during medical school at Loyola University of Chicago Stritch School of Medicine. In her second year of medical school, she began working with L’Arche Chicago, another of the residential communities located across the United States. By her fourth year at Loyola, she served on the Board of Directors, the fundraising committee, and the community council, which is the advisory board to the executive director. She has also represented the community at regional and national meetings. Dr. Bonk is a 2012 graduate of the UW Dept of Family Medicine and Community Health, Madison Residency Program, and became the UW Family Medicine Service director in 2017. Outside of medicine, Nicole’s interests include learning conversational Spanish, playing tennis, biking, camping, and skiing.

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)**

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

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

**Maggie Larson, DO (see page 60 for full bio)**

**Russell Lemmon, DO (see page 57 for full bio)**
Section 5

**RESIDENT BIOSKETCHES**

“I came to this program both because I knew I would get excellent training in Family Medicine, and even more so for the remarkable people in this department. I can't imagine a group of physicians and staff as supportive, kind-hearted, passionate, and fun as the one I've gotten to know over the past three years.”

Chelsea Thibodeau, DO, 2020 Graduate
MADISON PROGRAM RESIDENTS

Belleville Residents

**Brian Kenealy, MD PhD (PGY-1)** 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 (PGY-1)** 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-1)** 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 (PGY-1) 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.

Nicole Altman, MD (PGY-2) loves family medicine because of the lifelong relationships and connections that she builds with her patients. She is thrilled to provide care to whole families and communities. Nicole is from Merrill, WI. She earned both her undergraduate degree in biology and her medical degree from the University of Wisconsin-Madison. Nicole is passionate about practicing family medicine in a rural Wisconsin community. She participated in the Wisconsin Academy for Rural Medicine (WARM) program and completed her clinical training in and around Marshfield, WI, where she gained a better appreciation and understanding of the unique health care challenges of rural Wisconsin. While in college, Nicole was a certified nursing assistant; this helped her develop a compassionate bedside manner and see the importance of maintaining patient dignity and autonomy. Nicole completed a Path of Distinction in Public Health and worked to improve the Marshfield community’s knowledge of NSAIDs through a media campaign she implemented. Nicole is passionate about primary care, rural medicine, public health, women’s health, pediatrics, and preventative medicine. Nicole enjoys getting outdoors and staying active. She likes to hike, fish, kayak, snowshoe, and camp. She also enjoys cooking, going to farmer’s markets, and playing with her wirehaired pointer.

Brenna Gibbons, MD (PGY-2) grew up in the tiny town of Coon Valley, WI, nestled in the Driftless area. Brenna moved to Decorah, IA to earn her degree in biology. While in Decorah, she coached collegiate basketball, volunteered with Iowa Hospice and a free clinic, and gained an appreciation for tightly knit communities. Brenna returned to Wisconsin to attend medical school at the University of Wisconsin School of Medicine and Public Health. While in Madison, Brenna co-founded the Alumnus Project, a non-profit organization promoting cycling in the Madison area and encouraging kids to ride bikes. This experience blended her passions of sports and public health, and she organized a seminar for cyclists on concussion recognition and safe return to sports. Brenna also served as a coach for the Allied Running Club to promote healthy lifestyles. Brenna is drawn to family medicine because it provides the opportunity to meet the needs of the community through inpatient, outpatient, obstetrical, and pediatric care. She is also interested in palliative care, women’s health, hospital medicine, and medical ethics. In her free time, Brenna enjoys singing and playing with her family band, competitive cycling, running, fishing, coaching youth athletics, and writing.
Tyler Grunow, MD (PGY-2) is dedicated to the broad scope of practice of family medicine and developing personal, long-lasting relationships with his patients. His goal is to work with patients to improve their health by preventing disabling and costly chronic diseases and providing evidence-based care. By partnering with each of his patients, Ty hopes to transform the health of his whole community. Originally from Dodgeville, WI, Ty attended the University of Wisconsin – Platteville, where he majored in biology. Before starting medical school, Ty worked as a medical scribe in the emergency room at St. Mary’s Hospital. He earned his medical degree from the University of Wisconsin School of Medicine and Public Health. While in medical school, Ty was part of the Wisconsin Academy for Rural Medicine (WARM) program and completed his clinical rotations at the La Crosse Gunderson campus. While in medical school, Ty organized and participated in training exercises for local EMS squads to improve the care provided for severe rural and farm injuries. As a public health intern with the Jackson County Public Health Department, he developed educational materials about infectious diseases and vaccinations and developed emergency preparedness plans for tornado and thunderstorm disasters. In his spare time, Ty enjoys exercising, playing with his dog, and spending time with his friends and family.

Neal Smith, MD (PGY-2) is from Verona, WI and takes great honor and humility in the responsibility he has to care for patients. Neal earned his degree in community health education from the University of Wisconsin – La Crosse. He went on to serve as a health extension agent in the Peace Corps in Cambodia. He provided health education on many topics, including childhood nutrition and sanitation. Neal returned to Wisconsin to attend medical school at the Medical College of Wisconsin Central Campus. As a member of the new campus, he helped establish new student groups on campus, including the cultural competency and medical Spanish student group. While in Wausau, he worked with the Marathon County Child Development Agency to develop and implement a project to identify and address the barriers to receiving dental health care for children enrolled in Head Start in Marathon County. Neal has strong passions for community medicine, mental health, point of care ultrasound, and advocating for the needs of rural underserved patients. Neal is always looking for opportunities to play soccer, disk golf, and to go downhill skiing. He enjoys watching Wisconsin sports teams with friends and family and joking about fantasy football.

Taylor Boland, MD (PGY-3), views family medicine as more than just patient care. Although she is especially interested in rural, addiction, and integrative medicine, women’s health, and end of life care, Taylor is also active in advocacy and community engagement. Taylor is from rural Stoddard, WI (near La Crosse). She received her undergraduate degree in biological sciences and Spanish from the University of Notre Dame. Taylor returned to Wisconsin to earn her medical degree from the University of Wisconsin School of Medicine and Public Health. Taylor is an advocate, having been involved with professional societies, writing resolutions and advocating for a variety of policies including infant mortality, opioid use, and alcohol abuse. She has met with legislators on several occasions to discuss upcoming bills and how they impact the healthcare system. While in medical school, Taylor created “Every Patient Has a Story” which is a narrative medicine project that interviews hospital patients about their life stories in order to provide more holistic care and better understand their medical needs. Taylor also traveled to China to learn about their healthcare system and how to incorporate integrative medicine techniques to supplement Western medicine. Taylor can often be found outdoors running, hunting, and sailing or cheering on the Badgers and the Packers.
Samantha Mayhew, MD (PGY-3), loves small town rural medicine, women’s health, and geriatrics. Originally from Delphi, IN, Sam earned her bachelor’s degree in chemistry from Indiana University. During her junior year, she traveled to Honduras for a week to help educate children about healthy habits, build showers and bathrooms, and do other renovations for the homes. After graduating from Indiana University, Sam attended the University of Cincinnati College of Medicine. While in medical school, Sam was involved in community outreach, including mentoring a middle school girl and participating in geriatric events and fundraisers such as the Alzheimer’s Walk. Sam was a Geriatric Medical Student Scholar. She enjoys the close relationships she develops with her patients and their families. Between her first and second years of medical school, Sam worked at Johns Hopkins University doing research on the communication between caregivers and elderly patients in an adult day care center. She works daily to show that good health is more than being free from disease – it is about lifestyle, access to healthcare, and building a strong social network. Sam enjoys playing tennis, kayaking, trying new restaurants, and spending time with friends, her boyfriend, and their puppy.

Nicholas Squires, MD (PGY-3), is drawn to the broad scope of family medicine, both in caring for babies to adults to seniors, and having direct positive impacts on lives through outpatient and inpatient care. Nick is a native Wisconsinite, hailing from Altoona (near Eau Claire). He earned his bachelor’s degree at the University of Wisconsin–River Falls before moving to Minneapolis for 2 years. He then earned his medical degree from the Tulane University School of Medicine. Nick’s family medicine clerkship in Opelousas, LA showed him what kind of doctor he wanted to be – one that fosters strong relationships with patients, sees a wide variety of conditions, and does many procedures. This experience also showed him the benefits of practicing rural medicine and living in a small town. He looks forward to knowing each of his patients personally and adapting his care for their unique situations. In his patient care, Nick focuses on prevention and follow-up as he works with patients to manage acute and chronic illnesses. Outside of medicine, Nick enjoys playing video games and chess, reading fantasy novels, and exploring nature through hiking and fishing.

Northeast Residents

Yusuf Abdullah, DO (PGY-1) 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-1)** 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-1)** 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 (PGY-1)** 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.
Megan Dudek, DO (PGY-2) is originally from Pulaski, WI and earned her undergraduate degree in biochemistry and molecular biology from the University of Wisconsin – Eau Claire prior to earning her medical degree from Des Moines University. Megan is interested in LGBT / Trans healthcare, mental wellness, integrative and preventative medicine, and nutrition. She chose family medicine so she can provide accepting, non-judgmental care to patients of all ages and identities. She served as a leader in her medical school’s Gay Straight Alliance Club and provided input on the new gender identity portion of the electronic medical record that was being implemented at one of her clinical rotation sites. While in medical school, Megan volunteered at a free clinic where she learned first-hand about the disparities and medical needs of her community. Megan also has a strong interest in mental health compassion and care. After witnessing the struggles of her peers and loved ones, she became involved with stress management groups and other projects to help others express their struggles in a safe, confidential, and supportive environment. Megan is committed to helping her patients live healthy lives by promoting disease prevention and nutrition. Megan’s hobbies include kayaking, playing board games, cooking, baking, and walking, hiking, and snuggling with her two huskies.

Elise Malzer, MD (PGY-2) is drawn to family medicine because of the long-term relationships that she builds with her patients. Elise is originally from Chicago, IL, where she spent her early years, and moved to La Crosse, WI prior to starting school. Elise earned her undergraduate degree in psychology from the University of Pennsylvania and completed a post-baccalaureate program at the University of Chicago. Elise developed an interest in mental health through her work as a dormitory counselor and special education teaching assistant at a residential psychiatric school prior to starting medical school. She earned her medical degree from the University of Wisconsin School of Medicine and Public Health. She is passionate about advocacy, women’s health, and obstetrics. As the president of the University of Wisconsin’s Medical Students for Choice group, she worked with students, faculty, and local activists and lawmakers to advocate for women’s reproductive healthcare needs. She also submitted testimony on several Wisconsin bills that would impact the quality and availability of graduate medical education in the state. In her free time, Elise enjoys running, hiking, ultimate Frisbee, cooking, baking (especially sourdough), fly fishing, playing board games, and spending time with her husband and daughter.

Laura Shingleton, DO (PGY-2) is driven by learning about people’s stories, cultures, and languages through her interactions with patients and through her travels. Laura grew up in Baltimore, MD and attended Johns Hopkins University, where she studied the Writing Seminars and Russian. She earned a master’s degree in the biological sciences form the Drexel University College of Medicine. Prior to starting medical school, Laura moved to Xela, Guatemala without knowing Spanish and had to quickly learn how to communicate in a new language and culture. She took the lessons learned during this experience with her to Maine, where she earned her medical degree from the University of New England College of Osteopathic Medicine. While in medical school, Laura volunteered in Bolivia and studied HIV mortality. Laura is drawn to family medicine because of the capacity to develop strong relationships with patients that are built in the context of both health and disease. Laura is interested in working with people of all ages and has strong interests in osteopathic manipulative treatment, obstetrics, and caring for underserved communities in the U.S. and abroad. Laura enjoys spending time outdoors, cooking, reading nonfiction, writing, enjoying live music, and playing the harp.
Nicholas Sullivan, DO (PGY-2) grew up in Naperville, IL. He studied exercise science and Spanish at Creighton University. While at Creighton, he worked as a patient advocate and interpreter in a federally qualified health center where he worked to overcome existing healthcare inequities and learned that quality healthcare is more than just physical health. Nick attended the Kansas City University of Medicine and Biosciences College of Osteopathic Medicine to earn a master of arts in bioethics as well as a medical degree. As an osteopathic manipulative medicine (OMM) fellow, Nick spent a year teaching junior medical students physical exam skills, clinical medicine, and OMM while learning skills in teaching methods and adult learning theory. Nick participated in medical trips to the Dominican Republic and Guatemala, where his Spanish improved and he developed a passion for caring for Hispanic and Latino communities. Nick is drawn to family medicine by the breadth, continuity, and comprehensiveness of care he can provide to his patients. His specific interests include full spectrum medicine including OB, newborn, and pediatric care, nutrition and wellness, and bioethics and social determinants of health. Nick enjoys running, basketball, tennis, board and card games, and cheering on the Green Bay Packers and the Creighton Bluejays. He also enjoys reading, trying new restaurants, and sampling coffees.

Megan Bartz, MD (PGY-3), chose family medicine because it provides longitudinal care, fosters strong relationships with patients, and cares for all people. She grew up in Eau Claire, WI, and earned her undergraduate degree in biochemistry from the University of Wisconsin – La Crosse. While in La Crosse, Megan helped support and connect with families and patients while volunteering with hospice. She then went on to pursue her medical degree at the University of Wisconsin School of Medicine and Public Health. As a medical student, she served as a leader in the Family Medicine Interest Group and helped organize a Wellness Day at Lakeview Elementary. She also collected warm clothing for Madison-area homeless shelters. She finds great joy in giving back to her community and listens to each patient with compassion as they share their story. She cares for her patients' whole health and incorporates eating, exercise, better sleep, social health, spiritual health, and environmental health into a patient’s goals. In addition to her interests in whole health, she is also passionate about obstetric care and women's health. Outside of medicine, Megan's hobbies include cooking, dog agility, playing the harp, and reading.

Robert Freidel, MD (PGY-3), has wide ranging interests, which is why he enjoys family medicine. Bob grew up in a small town called Byron just outside of Rockford, IL. Bob was raised amongst cows and cornfields, and grew to appreciate rural and urban living and hoped to one-day serve people from all walks of life. Bob studied biochemistry at the University of Wisconsin – Madison. After graduating, he worked at Epic Systems Corporation where he focused on software for ambulatory clinics and federal regulations. Bob earned his medical degree from the University of Illinois College of Medicine at Rockford. While in Rockford, Bob analyzed Rockford’s social and economic factors of health and identified root causes of poor health and provided recommendations to community leaders and agencies. Among his many interests in providing full-spectrum family medicine, Bob seeks to understand social and economic factors of health – and take action to improve them. Bob also wants to provide preventive healthcare, inspire lifestyle modification, better utilize healthcare information technology, and advocate for primary care at all levels. Outside of work, Bob can be found snow- and water-skiing, running, or trying new things.
Allison Jenness, MD (PGY-3), is drawn to family medicine by the strong patient–physician relationships that form and enhance patient care. Within family medicine, she is interested in geriatrics, women’s health, adolescent medicine, and global health. Allison is originally from Prior Lake, MN and attended the University of Wisconsin–Madison for her undergraduate degree. She earned her medical degree at Chicago Medical School at Rosalind Franklin University of Medicine and Science. Allison was a peer tutor for three years in medical school, where she refined her teaching skills and she is looking forward to teaching opportunities during residency. Allison was also the president of the International Health Interest Group which allowed her to grow her communication and teamwork skills with patients and colleagues. Her experiences in Chicago and in Billings, MT, where she spent half of her third year, gave her the opportunity to see how medicine is practiced throughout the United States and cemented for her the fact that all people face similar healthcare triumphs and struggles. Allison loves to travel both across the US and abroad so she can learn more about people, cultures, and herself. Cooking and baking are great stress relievers for Allison and it is always rewarding for her to share her creations with others.

Alexandra Wolf, DO (PGY-3), is a native Wisconsinite from Green Bay. For Allie, medicine is about taking care of more than just the patient in front of her; it is about the person’s family and communities, which is why she focuses on multigenerational patient-centered care. She is inspired by each person’s unique background and story. Allie earned her bachelor’s degree in biomedical sciences from Marquette University. Before starting medical school, Allie worked at a medical scribe company where she joined the Board of Directors and helped set up new scribe programs across the nation. Allie attended the A.T. Still University Kirksville College of Osteopathic Medicine. She served as president of the school’s chapter of the Student Osteopathic Medical Association, where she expanded leadership opportunities on the board and helped raise nearly $10,000 for St. Baldrick’s to benefit child cancer research. Allie was also involved in the Diversity Club and coordinated the first annual Cultural Diffusion Show. Allie is interested in providing full-spectrum family medicine, including inpatient and outpatient care with OMT, in rural, underserved communities. Allie can often be found singing, running, hiking, cheering on the Green Bay Packers, playing with Taco, her Chihuahua mix, or just enjoying newlywed life with her husband who shares her passion for being a foodie.

Verona Residents

Adam Cordum, MD (PGY-1) 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-1)** 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 (PGY-1)** 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.

**Eartha (Zoë) Taylor, DO (PGY-1)** comes to medicine in response to witnessing the comforting hospice care provided to a close friend. She loves working with patients to optimize their health so that their lives can be lived to the fullest and she is passionate about providing quality patient-centered end-of-life care. Zoë grew up in Houston, TX, but considers Madison to be her adopted home. She has worked as an office administrator for several non-profit organizations, including a homeless services agency, where she developed a strong team-centered work ethic and learned firsthand the importance of empathy and meeting people where they are at on their journeys. She earned her undergraduate degree in Neurobiology from the University of Wisconsin – Madison and her medical degree from Lincoln Memorial University – DeBusk College of Osteopathic Medicine. Zoë enjoys forming deep relationships with her patients and journeying alongside them as they receive care. It is important to her that all people, regardless of background or circumstances, receive high-quality care and is especially eager to provide size-neutral healthcare. She has strong interests in geriatrics, women’s health, and LGBT and gender-inclusive healthcare. Zoë enjoys hiking, cycling, cooking, baking, German Wheel gymnastics, roller skating, and learning how to play the bagpipes.
Danielle Hartwig, MD (PGY-2) is drawn to family medicine because she enjoys forming long-term relationships with patients and because of the broad scope of practice. She approaches each individual patient as their teammate, support system, teacher, cheerleader, and physician. She has special interests in maternity care, women’s health, and procedures. Danielle is from New Berlin, WI and she earned both her undergraduate degree in medical microbiology and immunology and her medical degree from the University of Wisconsin-Madison. Prior to starting medical school, she worked as a lab technician at the Medical College of Wisconsin. While in medical school, she volunteered at the MEDIC student-run free clinics and served in a medical leadership role where she learned more about Madison’s public health needs. Danielle is interested in fostering inter-professional communication and participated in a “nursing for medical students” program at the VA Hospital. Danielle enjoys watching Badger football and hockey, playing board games and trivia, knitting, and spending time with her husband. She will also try to befriend every cat that she meets.

Thomas Ridella, MD (PGY-2) is originally from Detroit, MI. He is drawn to family medicine because of the long-term relationships with patients, the full-spectrum of care, and the positive impact primary care physicians have on both their patients and their community. Tom majored in preprofessional studies and minored in science, technology, and values at the University of Notre Dame and earned his medical degree from the Michigan State University College of Human Medicine. Tom earned a public health certificate and has been extensively involved with improving community health and advocating for the needs of individuals and whole communities. In Flint, Tom helped organize a free dental and health screening fair and in Lansing, he volunteered with the prescription assistance program at a free clinic. He completed a research project on Adverse Childhood Experiences and worked with an organization to help teach a resiliency model and connect people with community resources. He is also interested in preventative medicine, sports medicine, and procedures. Tom enjoys all sports, especially golf, basketball, running, and squash. He can often be found exploring local coffee shops and all of the best brunch spots.

Andrew (AJ) Sheehan, DO (PGY-2) brings empathy and attentive listening to each patient to build a strong, trusting relationship that allows patients to open up about their physical and mental health. A.J. has lived in Danville, PA, Cedar Rapids, IA, Madison, WI, Northfield, MN, and Des Moines, IA. He attended St. Olaf College and earned his degree in English. He earned his medical degree from Des Moines University College of Osteopathic Medicine. While in medical school, A.J. was awarded the Osteopathic Manipulative Medicine (OMM) Teaching Fellowship which allowed him to spend an extra year in medical school caring for patients in the OMM clinic and teaching the OMM course to junior medical students. From this, A.J. developed a strong passion for medical education and advocacy. He is a strong advocate for mental health, has worked to de-stigmatize mental health issues for patients and contributed to a task force with the Iowa Medical Society on combating physician burnout. A.J. is also interested in sports medicine. His hobbies include hockey and other sports, reading and writing, cheering on the Badgers and the Packers, and hanging out with his dog, Enzo.
**Gregory (Jake) Starsiak, DO (PGY-2)** thrives on meeting people from diverse backgrounds, learning their stories, and advocating for their care. Jake grew up in New Berlin, WI and attended the University of Minnesota – Twin Cities, earning a degree in biology. Jake went on to volunteer with Americorps in Boston, MA. In Boston, he learned firsthand how to be a community advocate and how to focus on all aspects of healthcare. Jake earned his medical degree from the Kansas City University of Medicine and Biosciences College of Osteopathic Medicine. While in medical school, Jake also earned an MBA in Healthcare Leadership from Rockhurst University. Jake is interested in osteopathic manipulative medicine, sports medicine, and full spectrum family medicine. He is also interested in community health and advocacy, global health, medical practice management, and group-based health visits. In medical school, Jake was part of a group that provided group-based family nutrition education to combat childhood obesity. He was also the president of his class, where he learned how to be a leader in medical education and emphasize mental health and wellbeing for medical trainees. Outside of medicine, Jake enjoys hockey, soccer, running, and playing with his dog. He also enjoys travel, roadside attractions, storytelling, museums, inventing games, and lake life.

**Diana Cowdrey, MD (PGY-3),** chose to become a family doctor because of the care they provide throughout a patient’s entire life. Diana is from Cambridge, MA, but came to the University of Wisconsin – Madison for her undergraduate degree in biology and for an additional research year in the Department of Neuroscience. She completed the intensive honors biology program and served as a peer mentor and peer mentor coordinator. While there, Diana also played on the UW Women’s Club Ice Hockey team. She then returned to Cambridge to earn her medical degree from Tufts University School of Medicine. While in medical school, Diana worked with a pediatric oncology patient as part of her support team during all her appointments and hospitalizations. Diana also worked as a senior medical student to dissect ahead of the first year anatomy class and to teach them the subject material as well as help them with their own dissections. Within family medicine, Diana is particularly interested in musculoskeletal and sports medicine. She believes that every individual should be active and hopes to treat everyone from those just finding their inner athlete to professional athletes. Diana enjoys playing hockey, watching college football, playing with dogs, sailing, and fitness.

**Parker Hanson, DO (PGY-3),** being a ‘good’ doctor means having the skills to treat both acute and chronic illnesses and address mental as well as physical ailments. He strives to be a doctor who builds trusting relationships with patients and works passionately to prevent illness as well as treat it. Parker calls both Sioux Falls, SD and Minneapolis, MN home. He studied biology, society, and the environment at the University of Minnesota – Twin Cities. As a pre-med undergraduate, he served on the board of Colleges Against Cancer to organize the annual Relay for Life event held at the University of Minnesota as well as other fundraiser and awareness campaigns for different types of cancer. Parker attended medical school at the Alabama College of Osteopathic Medicine. While there, he volunteered at the Friday Night Lights clinic to assess and treat injuries sustained during the regional football games. Parker is dedicated to providing care for all patients across their lives, and he has special interests in sports medicine, osteopathic manipulative treatment, and non-opioid pain management. He is also interested in research. In his free time, Parker likes to spend time with his wife and golden retriever, Bella. He also enjoys playing basketball, running, and golfing.
Mark Matusak, DO (PGY-3), family medicine provides the versatility to fuse his many interests. He enjoys the relationships with his patients and opportunities to give back to the community. Mark is originally from Torrance, CA and studied integrative biology and psychology at the University of California, Berkeley. While at Cal, Mark ran track and cross-country, received All-American honors, and ran under four-minutes in the mile. This, along with his research on lactate metabolism during exercise, fostered his passion for exercise as medicine. Mark earned his medical degree from the University of New England College of Osteopathic Medicine. He was selected to be a predoctoral Anatomy and Osteopathic Manipulative Medicine teaching fellow where he honed his osteopathic skill and developed his passion for medical education. Mark was also involved with the Let’s Go program where he worked with children in Maine to promote healthy lifestyles to prevent childhood obesity. Mark is inspired by the impact family physicians have on patients and communities through full-spectrum family medicine; he has special interests in osteopathic manipulative medicine (OMM), sports medicine, preventive medicine, integrative medicine, and procedures. Mark enjoys running, cycling, cooking, travel, photography, and rooting for Aaron Rodgers.

Stacey Schley, MD (PGY-3), comes to Madison with a strong interest in sports medicine and preventive and lifestyle medicine. Originally from Kalamazoo, MI, Stacy earned her undergraduate degree in sports science from Lasell College. She earned her medical degree from the Michigan State University College of Human Medicine, where she founded the school’s Sports Medicine Student Interest Group and provided medical coverage for sporting events. While in medical school, she implemented and instructed an ultrasound elective for 1st and 2nd year medical students. During her 3rd and 4th years of medical school, Stacy provided medical coverage for the NHL Prospect Tournament / Detroit Red Wings Training Camp. Throughout medical school, Stacy was a mentor and exercise instructor for FitKids360, a multidisciplinary childhood obesity program. Stacy has a background in personal training and she is excited to work with her patients to manage acute and chronic conditions as well as partner with individual patients and whole communities on the preventive aspects of health and well-being. She wishes to establish long-lasting relationships with each of her patients to encourage them to achieve their health goals. Stacy enjoys weightlifting, baking, hiking, and boating on Lake Michigan with her family and friends.

Wingra Residents

Estefan Beltran, MD (PGY-1) 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 (PGY-1) 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 (PGY-1) 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 (PGY-1) 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.
Anne Drolet, MD (PGY-1) is drawn to family medicine because she enjoys building relationships with patients and becoming a part of the community in which she lives and works. Anne grew up in Clarkston, MI and earned her undergraduate degree in biomedical sciences from Central Michigan University. She went on to earn a master’s degree in basic medical sciences from the Wayne State University School of Medicine before earning her medical degree from Michigan State University College of Human Medicine. While in medical school in Flint, Anne earned a certificate in public health and saw firsthand the importance of community resources to building and sustaining the health of a community. Anne’s special interests include women’s health, public health, research, interprofessional education, and advocacy. Anne’s term on the Board of Directors of the Michigan Academy of Family Physicians has helped her understand how medicine works at the larger level and has empowered her to advocate for change to better care for her patients. She also earned a certificate in interprofessional education and recognizes the importance of teamwork in providing care. She is interested in providing full spectrum care and helping whole families throughout all of life’s stages. Outside of medicine, Anne enjoys bouldering, drinking coffee, watching HGTV, and spending time with friends and family.

Melanie Hellrood, MD (PGY-1) values the relationships she is privileged to build with her patients as she cares for all ages and stages of patients’ lives. Melanie grew up in Mosinee, WI and earned her undergraduate degree in biochemistry and biology from the University of Wisconsin – Stevens Point. Before medical school, she was an AmeriCorps member and helped coordinate a program for first-generation middle school students, which focused on career exploration and college readiness. Melanie earned her medical degree from the Medical College of Wisconsin Central Wisconsin campus, where she helped start the Family and Rural Medicine Student Organization. Melanie has been an on-call sexual assault response advocate, which has strengthened her passion for women’s health and taught her how deeply trauma affects people. Along with this, she has worked with a domestic violence and sexual assault prevention program in local high schools to assess the effectiveness of their prevention education. Melanie is also interested in maternity care, underserved medicine, palliative care, rural health, and adolescent medicine. Outside of medicine, Melanie can be found in nature hiking and getting lost in new places. She also enjoys painting, cooking, baking, frequenting ice cream shops, and listening to live music.

Jeremiah Shaw, MD (PGY-1) views family medicine as a responsibility to deliver equitable care such that health becomes accessible for all. Jeremiah is from Yellow Springs, OH. He earned his undergraduate degree in biomedical science and his medical degree from The Ohio State University. In medical school, Jeremiah chaired the Columbus Free Clinic steering committee which allowed him to advocate beyond basic healthcare for the underserved to addressing deep barriers to health. During his time on the committee, the free clinic expanded to include a free refill pharmacy, full EMR integration, improved social work and behavioral health services, specialist care, legal counsel, and an onsite food pantry. Jeremiah is also interested in integrative medicine in the holistic care of both patients and physicians. As president of the Students for Integrative Medicine, he promoted yoga, meditation, relaxation stations, difficult discussion groups, and the creation of a wellness room to encourage access to integrative health. His medical interests also include community medicine, obstetrics, women’s health, population health, advocacy, and care for the underserved. Jeremiah enjoys outdoor activities, running, yoga, meditation, piano, and anything that keeps him inspired and imaginative.
**Morgan White, MD (PGY-1)** 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. In medical school, Morgan completed a month-long palliative care rotation, during which she learned how to have important, difficult conversations with her patients about their end-of-life care. For Morgan, medicine is more than just physical conditions and treatments; it is about relationships, values, and creating communities that promote health. Morgan enjoys traveling with friends, including trips to Barbados and Thailand while in medical school. She also enjoys cheering for the Michigan Wolverine football and basketball teams, cooking, and taking scenic walks.

**Jonathan Christ, MD (PGY-2)**, enjoys partnering with his patients to work collaboratively to achieve their health goals. Jon is originally from Kalamazoo, MI and attended Michigan State University for his undergraduate degree in human biology. After graduating from Michigan State, Jon earned his medical degree from Wayne State University School of Medicine in Detroit. While in medical school, Jon volunteered at many organizations in downtown Detroit to provide medical and social services to the homeless population. This included providing care, making and distributing meals, and working to clean up polluted areas. Jon’s interest in family medicine stems from his experience rotating in inner-city hospitals in Detroit as well as coordinating blood pressure screenings for senior citizens. Jon strives to build strong relationships with each of his patients so he can better understand their medical, social, and family situations to provide the best care. Jon has a special interest in sports medicine, but he is always looking forward to work with all patients and conditions. He enjoys spending time with family and friends and playing golf and basketball. He also unwinds by spending time near water – on a lake or beach – while reading.

**James Ircink, MD (PGY-2)**, brings a holistic perspective to help patients pursue and maintain wellness in the context of their beliefs, values, family, and community. A native Madisonian, James attended the University of Notre Dame to study business administration. While in college, James was an amateur boxer which taught him that fighting for a purpose can make challenges surmountable and sacrifices meaningful. After working in Chicago and later at Epic as a financial analyst, James had a change of heart that led him to earn his medical degree from the University of Wisconsin School of Medicine and Public Health. While in medical school, James volunteered at free clinics and with community outreach groups that serve unsheltered women and men. This compelled him to research and advocate for policy and systemic changes to extend healthcare “beyond clinic walls” to people who are unable to access the medical system. James is interested in full-spectrum primary care, care of vulnerable and unsheltered populations, procedures, humanitarianism, technology in primary care, medical ethics, and health care economics. His hobbies include running, playing soccer, brewing coffee, spending time with family and friends, and participating in the young adult faith community.
Carly Salter, MD (PGY-2), is interested in providing continuity care for families and underserved populations and women’s health. Carly is originally from Fond du Lac, WI and earned her bachelor’s degree in chemistry from the University of Wisconsin – Oshkosh. During college, she participated in a 2-week mission trip to Costa Rica and Nicaragua where she traveled to remote communities with minimal access to healthcare. From this, she gained perspective on poverty’s influence on health. Carly earned her medical degree from the Saint Louis University School of Medicine. While in medical school, Carly volunteered at the student-run free health clinic in the underserved urban community of North St. Louis where she gained experience with trauma-informed care and the barriers faced by marginalized populations. As a result of the unrest and dialogue following Michael Brown’s killing in Ferguson, which happened one week after starting medical school, Carly engaged the local community in conversations about socioeconomic status and ways to collaborate and make a difference. Carly seeks to understand her patients’ stories and experiences so she can provide compassionate care for each individual. When she has some free time, Carly enjoys figure skating, horseback riding, walks in the park, and cheering on the Green Bay Packers.

Andrea Suarez, MD (PGY-2), is dedicated to the care of underserved communities and addressing health disparities. Andrea calls Lima, Peru and Portland, OR her hometowns. She earned her undergraduate degree in biology from Hamline University before attending the University of Wisconsin School of Medicine and Public Health. Andrea also participated in a year-long cultural exchange program in Munich, Germany. Andrea is interested in preventive and global health. In medical school, she participated in a global health trip to China in 2014 and a global health elective in Peru in 2017. She also was involved in the Latino Medical Student Association and volunteered at student-run free clinics for uninsured patients. Andrea has led events to raise awareness of health issues that disproportionately affect diverse communities as well as worked to recruit more diverse clinicians to the health professions. She wants to partner with patients and communities to address poverty, lack of healthcare access, and resource deprivation. She has also worked with child health advocacy and kids’ safety improvement programs across Wisconsin. When she is not caring for patients, Andrea enjoys barbequing, dancing, hiking and other outdoor activities, learning languages, playing soccer, and enjoying live music festivals.