

UNIVERSITY OF WISCONSIN

DEPARTMENT OF FAMILY MEDICINE AND COMMUNITY HEALTH

MADISON RESIDENCY PROGRAM

Welcome to Madison ~ 2024-2025




RESIDENTS - FACULTY - STAFF - COMMUNITY - CURRICULUM - CLINICS



**Department of Family Medicine
and Community Health**

UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH

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Department of Family Medicine and Community Health

UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH

Dear Future Family Physician:

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

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

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

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

- We are connected to our community, and we are committed to serving its people, especially those who are most underserved in rural and urban areas and those who have been historically marginalized. Partnering with community organizations to serve the health needs of our community is a priority of our department and of our educational mission. 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, pregnancy care and procedures. We have been pioneers in family-centered pregnancy 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 are committed to diversity, equity, inclusion, and anti-racism in all aspects of our work. We strive to create inclusive clinical environments and to meet the diverse healthcare needs of our patients with services such as gender-affirming care, addiction treatment, and reproductive healthcare. We educate and support residents with our robust health equity curriculum and opportunities such as racial affinity support groups.

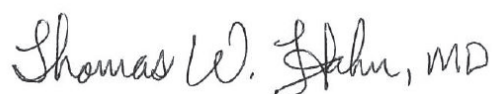
- We support residents and their wellness in a variety of ways and recognize that each resident has different needs. Residents learn mindfulness and participate in Balint discussion groups. We offer “sunshine days” for flexible wellness time, have a behavioral health specialist who is available to support residents, and offer administrative electives to provide time for administrative tasks. We have a multidisciplinary team to support residents in their educational growth and prioritize the things that make day to day life better like accessible parking and food!
- 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.
- We have fun! A career in family medicine is an extremely fulfilling pursuit. It is important for us to enjoy our work and to enjoy working together. Further, caring for ourselves, our families, and the parts of our lives that bring us joy and meaning are critical for our own personal and professional well-being.

We are proud of our program and of our department. As one of the original programs in family medicine over 50 years ago, we continually strive to adapt and innovate to meet the changing landscape of medicine and medical education to provide the best education and patient care possible.

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 an exciting beginning to the rest of your journey!

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

Sincerely,



Thomas Hahn, MD
Madison Residency Program Director

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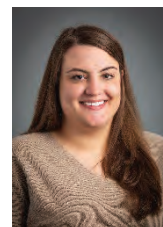
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June 2023



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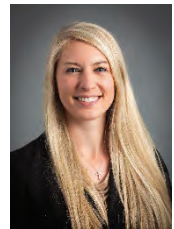
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2024-2025

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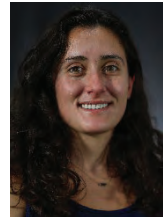


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FIRST – YEAR RESIDENTS



Orientation
June 2024



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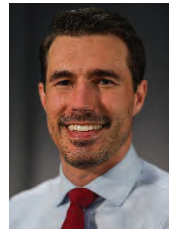


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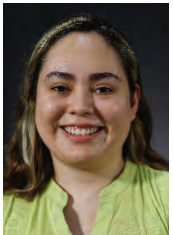


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Madison Residency Administration

Faculty Leadership



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



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

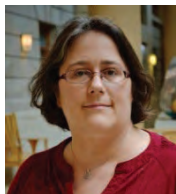


Lashika (Lash) Yogendran, MD, Associate Director, has a passion for global health that grew naturally from her personal experiences. Born in Saudi Arabia, she has also lived in Toronto, North Carolina, Shanghai, Brooklyn, and Chicago. Lashika earned her BA in chemistry and classics from the City University of New York – Brooklyn College before going on to earn her MD and MS from the Chicago Medical School at Rosalind Franklin University of Medicine and Science. During medical school, Lashika completed extensive global health work. She volunteered in hospitals in Cuzco, Peru and worked in a clinic in Uganda. These experiences shaped her worldview, and she hopes to pursue global health work after residency. Closer to home, she was involved with her medical school's oncology interest group and helped organize the annual St. Baldrick's Day fundraiser to raise money for pediatric cancer research. Lashika is drawn to family medicine by its care for diverse patient populations and the focus on care across the lifespan. Lashika enjoys playing volleyball, cheering on the Chicago Cubs, checking out new restaurants, and playing trivia – she has even appeared on "Who Wants to Be a Millionaire." lashika.yogendran@fammed.wisc.edu

Residency Staff Team



Kacia Stevenson, GME Program Manager, recently returned to the Madison Residency team in 2023. As Program Manager, she oversees the residency staff and operations. Kacia earned her bachelor's degree from the University of Madison, WI. Kacia lives in Madison with two kids, Karis and Jace, and their dog, Tails. Her favorite things include spending time with her family, kayaking, hiking, and traveling. kacia.stevenson@fammed.wisc.edu



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



Vicki Daniels, Health Professions Education Coordinator, joined the Madison Residency team in 2010. Vicki oversees the resident master schedule, helps assign and schedule outpatient rotation learning experiences, and handles time-away requests for Madison Family Medicine and Community Health residents. Outside of work, Vicki enjoys traveling with her family, digital scrapbooking, reading, playing volleyball and board games, and doing various volunteer work. vicki.daniels@fammed.wisc.edu



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



Dillon Novak, Residency Assistant Education Coordinator & Notary, joined the Madison Residency team in January of 2020. Dillon handles outpatient rotation scheduling and development, faculty evaluations, critical care course support, clinical adjunct faculty appointments, resident verifications, notarizations, pathway coordination, Step & COMLEX 3 coordination, and other residency support. You can often find him reading, playing video games, playing guitar, camping year-round, kayaking, baking bread or cooking new recipes. dillon.novak@fammed.wisc.edu



Dan Samuelson, Recruitment Coordinator, has been a member of the residency staff since July of 2007. Dan is the GME recruitment coordinator for the Madison, Baraboo and Monroe programs, arranges R1 orientation, and assists in tracking Work Hours. 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. dan.samuelson@fammed.wisc.edu



Tressa Spingler, Residency Assistant Education Coordinator, provides support and coordination for resident seminars, didactics, events, recruitment and rural rotations. Tressa has lived in Madison since 2018 and is originally from the central coast of California. She received a bachelor's in social work from Middle Tennessee State University and worked in the Tennessee state foster care system for many years. In her free time, she enjoys concerts, singing, photography, traveling and volunteering in her church community. Tressa hopes to soon complete her goal of visiting all 50 states with only ND, MT and AK left to go. tressa.spingler@fammed.wisc.edu

Statewide GME Staff



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



Elizabeth Bingman, MS, Director of Educational Services, joined the DFMCH Education Team in September 2018. She earned her bachelor's and master's degrees at the University of Wisconsin-Madison. Elizabeth supports and provides administrative leadership, strategic planning and oversight for the department's statewide Graduate Medical Education programs, Statewide Osteopathic Collaborative, fellowship programs, Office of Medical Student Education, and the Madison residency program as well as administrative leadership for the Wisconsin Rural Physician Residency Assistance Program (WRPRAP). Elizabeth enjoys spending time with her family, and loves year-round hiking around Wisconsin. elizabeth.bingman@fammed.wisc.edu



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

Contact Information

-- For information about the application process or your scheduled interview, contact Dan Samuelson at dan.samuelson@fammed.wisc.edu.

-- For information about the program, email Tom Hahn at thomas.hahn@fammed.wisc.edu or Kacia Stevenson at kacia.stevenson@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 48 people, the Madison residents come to the program with diverse backgrounds, medical school experiences, political opinions, and personalities. In this environment, kindred spirits are easy to find.

Faculty

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

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

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

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

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

Family Medicine Clinics

Each of our clinics (Belleville, Northport Dr, 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 research, medical student education and community health.

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

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

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

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

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

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

award for high-level patient satisfaction in inpatient care from the Press Ganey organization, Thomson Reuter's 100 Top Hospitals and IBM Watson Health's Top 100 Teaching Hospitals.

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

UnityPoint Health – Meriter Hospital (Meriter): Meriter Hospital is a nonprofit, 448-bed community hospital, providing a complete range of medical and surgical services. Meriter has grown to become the largest delivering hospital in the state of Wisconsin and is regionally known as a center for maternal-newborn care. Our residents and faculty run a Family Medicine Obstetrics and Newborn Service (FMONS), utilizing the family medicine model of taking care of both birthing person 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.

UW Health University Hospital (UWH): UWH has been rated as one of the top 50 hospitals in the country for the past decade. In 2024, U.S. News and World Report ranked UWH as number 1 in Wisconsin. All our teachers are members of the UW faculty, and we take full advantage of the wide variety of opportunities offered by the medical school and our major university environment. The UW Hospital Family Medicine Inpatient Service is a "self-contained" service in which our faculty are the attending physicians and senior residents lead the team. First year residents see a robust number of cases while rotating on the UWH Pediatrics service. Many residents elect time in one or more specialized outpatient clinics at UWH during their second and third year of training. Thus, while SMH is "home," you benefit from exposure to the different clinical approaches and educational opportunities that exist only at an academic medical center.

Recognition of Different Learning Styles

As an 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 several educational opportunities available.

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

Ambulatory Care: We learn by doing: you learn how to care for a population of patients by doing exactly that. Physician faculty are always available for one-on-one teaching before, during and after patient care hours. Behavioral health faculty participate in consultations, joint

visits, or referrals. Business office and patient care staff at each center are valued partners who have chosen to be involved in resident education; they too have much to offer.

Small Group Format: As a UW-Madison resident, one half-day each week in all three years is protected for our seminar series. These seminars focus on clinical, behavioral and population health topics. Clinic-based educational afternoons are a 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 colleagues 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 are hands on and interactive. Residents still participate in their continuity clinic and seminar during this week.

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

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. 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 or the Family Medicine Obstetrics and Newborn Service at Meriter, 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 and on ad-hoc working groups designed to continually improve clinical, educational and community health efforts.

Support/Social Network

During the two-week orientation for first-year residents, the process of building a support network among new colleagues begins. There is ample time to get to know each other, including participation in a team-building day. Senior residents, faculty and staff are very sensitive to the anxieties and long hours that are facts of life for first-year residents.

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

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

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 mid-winter "Fizzle" Dinner. First-year residents and their significant others mark the half-way point in the year with food and drink at a local Madison restaurant. Each intern is presented with a special award from the chief residents, and this event is always a fun time.
- Chief Resident Rounds brings residents together every other Wednesday and Thursday before lecture to discuss pertinent issues and enjoy each other's company.
- A yearly resident retreat that takes place over a fall weekend at an outdoors-oriented site outside Madison. Faculty cover patient care responsibilities during the retreat.
- Group wellness sessions Balint Groups, and sunshine days during protected seminar time provide all residents the opportunity to support one another in a safe environment. We also encourage residents to participate in the Guardian Angel elective, which gives them structured time to meet with our behavioral health faculty and support their co-residents.

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.

"Simply put, this program exemplifies the spirit of family, both in medicine and connection. The full-spectrum training and smorgasbord of faculty interests have allowed me to find nearly any opportunity I can conjure up. Moreover, I feel incredible support from my co-residents, the faculty, and the staff. Somehow, in a field that can be quite hardened on the outside, this program creates and prioritizes space for vulnerability, crying, laughing, and fully living. I am very grateful to have landed here in Madison."

–David Miller, MD, PGY-2

PROGRAM HIGHLIGHTS

Strong Continuity Practice

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

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

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

Behavioral Health

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

- **Julia Yates, LCSW**, directs the behavioral health and wellness/resiliency curriculum for all residents.
- **Erin Ford, LCSW, PMH-C** sees patients and teaches at the Belleville Family Medical Center.

- **Olga Arrufat-Tobon, LCSW** and **Bethany Garcia, PsyD**, see patients and teach at the Northport Dr (Northeast) Clinic.
- **Gretchen Straus, LPC**, sees patients and teaches at Verona Family Medical Center.
- Wingra Clinic has an integrated behavioral health model, with a team of Behavioral Health specialists from the Access Community Health Centers who rotate in the clinic.

Balint Leadership trained faculty provide a Balint group processing experience every few months for residents. These groups support residents in exploring the power of relationships 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 important to patients. During the first year, residents meet with stakeholders and representatives from community agencies to network with community partners, learn advocacy skills, and be able to speak to patients about community resources. Residents then individualize their experience in addressing health and wellness issues associated with their center's patient population. During protected time in the next two years, residents participate in a community health learning experience to continue developing as a physician-leader within the community with the assistance of community health and clinic faculty, other residents, and community members.

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

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

Maternity Care

The Madison program has made a sustained commitment to prepare residents in maternity care and has developed a well-deserved reputation for strength in this area. We have a well-established rotation at St. Mary's hospital where our residents have been delivering babies since the inception of the program. First year residents experience delivery of obstetrical care with

our teaching obstetricians and community family physicians. Nearly all the intrapartum care for these patients and their families included family medicine residents.

Residents also experience obstetric and newborn care in a family medicine model on the Family Medicine Obstetric and Newborn Service at Meriter hospital. Residents work with community family medicine physicians to provide care to the mother-baby dyad from admission through discharge. Meriter has grown to become the largest delivering hospital in the state of Wisconsin and is regionally known as a center for maternal-newborn care. There were over 3,500 births at Meriter in 2023. 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 can learn OPP and OMT from their osteopathic colleagues by participating in the longitudinal elective OMT4MD. Residents on this elective complete readings on their own, shadow osteopathic faculty in clinic, then participate in 8 hands-on lab sessions throughout the year.

Rural Health Equity Track (RHET)

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

practice family medicine in rural areas and gain specific skillsets focused on population health analysis and reducing health care disparities for rural communities.

The Rural Health Equity Track provides added value to the traditional Madison residency by incorporating rural health and leadership experiences into the scheduled curriculum. RHET residents have their continuity clinic at our rural Belleville practice. In addition, RHET residents complete more rural rotations than the standard Madison resident and receive specific training on mental health and addiction issues in rural communities. RHET residents participate regularly in a rural free clinic and rural critical access hospital work in the R2 and R3 years. These rural rotation experiences and community involvement give RHET residents an opportunity to target and train for a specific rural Wisconsin community for future practice. Additionally, RHET residents are funded and scheduled to attend two national meetings related to Rural Health, such as the National Rural Health Association Annual Conference, during their three-year residency. The RHET's leadership curriculum deepens the residents' understanding of rural health issues and avenues for improving rural health and rural health care as well as connects the residents with mentors and organizations that further their lifelong involvement as rural health advocates.

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

Rural Rotation

To maximize residents' training experience, a four-week rural rotation is required for all residents in the second year. During this rotation, residents not only gain exposure to small town practice, but they also get an intense hands-on experience that has an important impact on self-confidence, maturity, and clinical competence. Rural rotation sites throughout Wisconsin include Beaver Dam, Dodgeville, Lancaster, Richland Center, Shawano-Menominee, Watertown and more. 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. quarterly, residents also receive disease registries and other data about their own practices. Panels of program graduates share their experience in various 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 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 can 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 an online curriculum, including videoconferences in both real time and archived. Clinic-based resources and electronic health record tips are constantly shared and improved. Our email system is web accessible from anywhere in the world. Additionally, we have access to

the many resources available through the UW School of Medicine and Public Health's Ebling Library.

Global Health

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

Integrative Health

Integrative Health is defined as healing-oriented medicine that takes account of the whole person (body, mind, and spirit), including all aspects of lifestyle. It emphasizes the therapeutic relationship and makes use of all appropriate therapies, both conventional and complementary. Our belief is that integrative health is synonymous with family medicine. Both are rooted in finding the most efficient and effective ways to enhance the body's ability to self-heal. The DFMCH 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 residents 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. 2024-2025 resident compensation is as follows:

	Annually
First Year	\$65,649
Second Year	\$68,233
Third Year	\$71,077

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

Other Benefits:

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

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

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

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

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

Resident Employment Manual

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

Life Support Courses

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

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

Educational Allowance

Residents receive an educational allowance during each year of residency to be used for supplemental medical education conferences, exams, licensing, medical-related memberships not covered by the program, and other educational expenses. In 202-202, 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.

KJ Hansmann, MD, completed her Family Medicine Residency with the DFMCH. She joined the Primary Care Research Fellowship to evaluate population health interventions that address social determinants of health. Her medical education and career have been greatly informed by a desire to make positive change in the communities where patients live. As an undergraduate, Dr. Hansmann's political advocacy and community organizing efforts taught her that health begins where people live, learn, work, and play. As a medical student and Family Medicine resident, Dr. Hansmann participated in multiple projects outside of clinical duties that aimed to create safe spaces for people to live healthy, active lives. Dr. Hansmann continues to partner with Lake View Elementary School and local advocacy organizations near her home clinic, Northport Dr, and strives to integrate her interest in community-based projects with her research goals as faculty with the Department.

Dave Rakel, MD is Professor & Chair of the Department of Family Medicine and Community Health at the University of Wisconsin. He joined the faculty of the UW School of Medicine and

Public Health in 2001 as an assistant professor of family medicine. During his time at UW–Madison he founded the Integrative Medicine Program (now known as the Integrative Health Program) and received the Gold Foundation’s Leonard Tow Humanism in Medicine Award, the school’s highest honor for excellence and compassion in care. His team worked with more than 50 clinical systems within the Veterans Health Administration to implement changes to make care more personalized, proactive, and patient driven. An author of both academic and popular writings, Rakel says one of his missions is to communicate medical information in a way that is accessible to people of all backgrounds. He has published 11 books, including the Textbook of Family Medicine, Current Therapy, and Integrative Medicine, as well as peer-reviewed research on the impact of measures such as mindfulness meditation and the power of the therapeutic encounter. He serves as editor-in-chief of Practice Update, a website devoted to commentaries on primary medical care research. His 2018 book *The Compassionate Connection* focuses on how relationship-building can influence health outcomes.

Marlon Mundt, PhD has been a productive principal investigator, collaborator, and co-investigator on fifteen National Institutes of Health (NIH) R01 grants and scores of other research projects totaling more than \$47 million in overall combined NIH and other agency funding. His research is focused on three broad aims: (1) to determine the cost-effectiveness of various smoking cessation treatments for socio-economically disadvantaged US adults who smoke; (2) to evaluate the cost-effectiveness of Electronic Health Record (EHR) clinical decision support (CDS) screen alerts, artificial intelligence (AI) natural language processing (NLP) automated CDS approaches, and mobile health (mHealth) applications designed to improve patient outcomes; and (3) to facilitate health system improvements targeting higher quality of care delivery at lower medical costs.

Andrew Quanbeck, PhD heads the Implementation Science and Engineering Lab at UW. His research draws upon concepts from systems engineering to develop innovative approaches to implementing evidence-based practices. His research focuses specifically on the implementation of evidence-based practices and technologies for the prevention and treatment of substance use disorders in medical care settings.

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

Wendy Slutske, PhD has been conducting epidemiologic and behavioral genetic research on addictive disorders for nearly 30 years. The lion’s share of her career has been devoted to studying alcohol use disorder and disordered gambling, but she has also conducted research on the misuse of tobacco, cannabis, and illicit drugs.

Earlise Ward, PhD, MS is the co-director of the T32 Primary Care Research Postdoctoral Fellowship. She conducts community engaged clinical intervention research focused on African American adults' mental health and culturally competent mental health services. As a researcher and licensed psychologist, Dr. Ward has witnessed first-hand in her clinical practice the impact of mental health disparities among African Americans and is committed to advancing health equity. Her program of research focuses on developing and testing culturally tailored mental health behavioral interventions for African American adults with clinical depression. Dr. Ward has expanded her research on an international level; she is collaborating with researchers in the US Virgin Islands and Ghana, Africa, to develop and test culturally tailored behavioral treatments for clinical depression. July 2020, Dr. Ward joined UW Carbone Cancer Center (UWCCC) in the role of faculty director for the Cancer Health Disparities Initiative (CHDI). She leads the CHDI in its mission to increase access to cancer care and engagement in clinical research among under-represented racial and ethnic minority populations. Dr. Ward is partnering with the researchers at UWCCC to examine efficacy of her culturally tailored depression intervention among patients with cancer comorbid with depression. Dr. Ward has disseminated her research findings in multiple venues including peer reviewed publications, presentations at national and international conferences, as well as presentations to local community agencies and partnerships.

Wisconsin Research and Education Network (WREN):

The Wisconsin Research and Education Network, directed by Sarina Schrager, 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 specific research interests, please let the residency staff know, and we can connect you with faculty and residents who share your interests. The Research Director for the DFMCH will also be happy to discuss your interest in working with

ongoing projects in the DFMCH and to connect you with the physician or research faculty investigators.

DFMCH Scholarly Small Grant Program: Each fiscal year, the DFMCH 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.

Fellowship Opportunities:

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

<http://www.fammed.wisc.edu/fellowships/integrative-med>

The 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, Biostatistics, 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 University varsity and local high school teams. A wide variety of research opportunities are available, and the fellow is expected to publish at least one review article and a peer-reviewed paper during their two years. Training will lead to eligibility for the CAQ in sports medicine. For more information, see:

<http://www.fammed.wisc.edu/fellowships/sports-med>

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

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

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

Geriatrics Medicine Clinical Fellowship, which has a long and successful history of training physicians to become excellent clinicians and academicians in the field of geriatrics and aging research. For more information, see:

<http://www.medicine.wisc.edu/geriatrics/fellowship>

Hospice and Palliative Medicine Fellowship, which provides fellows training experiences that include an important variety in settings and patients. Fellows will become experts in pain and symptom control, psychosocial support for 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>

FAMILY MEDICINE CLINICS

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

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

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

What will you find at each clinic?

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

BELLEVILLE FAMILY MEDICAL CENTER



"Welcome to UW Belleville Clinic, where compassionate care meets community at the crossroads of multiple counties in rural, south-central Wisconsin. Situated at the southern reach of the UW Health system, our clinic proudly stands as a haven for those often underserved and marginalized, such as patients with addiction concerns and opioid use disorder. 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." Billy Michael, MD

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

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

A key factor in the success of our clinic as a clinical and teaching site has been its extensive involvement in the Belleville community. Our physicians are engaged with Belleville EMS and the school district. We work closely with the Green County Dept of Human Services in addressing opioid use disorders. We provide nursing home patient care at five different care facilities around the community. Most clinical staff, such as MAs and nurses, live in nearby small towns and therefore have an intimate understanding of the local surrounding communities. Because we have been in this community for over 25 years, our patients readily accept residents as their personal physicians. For outdoor enthusiasts, Belleville is a biking destination 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
- Treatment for opioid 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 Illinois
- No nearby Urgent Care so take care of acute issues, minor trauma, lacerations
- Good balance of age groups

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

Belleville Faculty, Residents, and Staff

Belleville Faculty

Brittany Alioto, PA-C
 Jensena Carlson, MD – *Site Lead*
 Erin Ford, LCSW, PMH-C – *Behavioral Health Faculty*
 Brenna Gibbons, MD
 Bethany Howlett, MD
 Brian Kenealy, MD, PhD
 Jillian Landeck, MD
 Jennifer Lochner, MD
 Julia Lubsen, MD
 William Michael, MD – *Associate Program Director*

Belleville Residents

Julia Beccue, MD – *Second Year*
 Julie Connor, MD – *First Year*
 Abigail Cox, MD – *Third Year (Chief Resident)*
 David Hardin, MD – *Third Year (Rural Health Equity Track)*
 Noah Maerz, MD – *Second Year (Rural Health Equity Track)*
 Rebeka Mercker, MD – *First Year (Rural Health Equity Track)*
 Hailey Milakovich, MD – *First Year*
 Nathan Miller, MD – *First Year (Rural Health Equity Track)*
 Viktoriya Ovsepyan, MD – *Third Year*
 Justine Resnik, MD – *Second Year*
 Julie Vaughan, MD – *Second Year (Rural Health Equity Track)*
 Logan Yeager, MD – *Third Year (Rural Health Equity Track)*

Belleville Staff

Sally Jeglum – *Clinic Operations Assistant, Clinic Scheduler*
 Christy Hunter, RN – *Clinic Manager*

NORTHPORT DR FAMILY MEDICAL CENTER



“At Northport Dr Clinic we take pride in serving a robustly diverse patient population and are committed to providing equitable healthcare to all communities and populations. Our passionate team of physicians, APPs, RNs, LPN/MAs work hard to support and collaborate with residents to ensure a rich learning environment. Together, we aim to make a positive impact on the health and well-being of our community.” Sarah McNiel, PA–Site Lead

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

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

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

Community engagement has been an important part of the Northport Dr Clinic mission for years. We have a close relationship with nearby Lakeview Elementary School and have hosted

NORTHPORT DR HIGHLIGHTS

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

Total patient visits/year:
~23,000

Services offered on-site:

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

Common Procedures:

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

Unique Characteristics:

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

an annual wellness fair for the students since 2012. In 2017, Northport Dr became only the second UW clinic to host a student-run health resource navigator program, which assists patients with social determinants of health on an ongoing basis. Two of our LPNs coordinate a monthly Patient and Family Advisory Committee meeting to have discussions and obtain feedback directly from patients we care for.

Northport Dr Faculty Residents and Staff

Northport Dr Faculty

Olga Arrufat-Tobon, MSSW - *Behavioral Health Faculty*

Ashlyn Brown, MD - *Academic Fellow*

Jared Dubey, DO

Jennifer Edgoose, MD, MPH

Katie Enzler, PA-C

Bethany Garcia, PsyD - *Behavioral Health Faculty*

Adrienne Hampton, MD

KJ Hansmann, MD, MPH

Ronni Hayon, MD

Tyler Ho, Pharm-D

Russell Lemmon, DO

Sarah McNiel, PA-C - *Site Lead*

Sarina Schrager, MD

Anne Schmitz, NP

Bill Schwab, MD

Joan Uminski, PA-C

Lashika Yogendran, MD - *Associate Program Director*

Northport Dr Residents

Peter Fink, MD - *Third Year*

Noah Garber, MD - *Third Year (Chief Resident)*

Rita Henien Bybee, DO - *Second Year*

Aidan Khoda, DO - *First Year*

Sinduja Kilaru, MD - *First Year*

Kelly Kramer, MD - *Second Year*

Micah Larson, MD - *Third Year*

Spenser Marting, MD - *Second Year*

David Miller, MD - *Second Year*

Rachel Munson, MD - *First Year*

Hannah Ray, MD - *First Year*

Joanna Sherrill, MD - *Third Year*

Northport Dr Staff

Kris Haldiman – *Clinic Manager*

Deb Sands – *Clinic Operations Assistant, Clinic Scheduler*

Rita Teniente – *Nursing Lead*

VERONA FAMILY MEDICAL CENTER



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

Brian Arndt, MD – Site Lead

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

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

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

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

VERONA HIGHLIGHTS

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

Total patient visits/year:
~30,000

Services offered on-site:

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

Common Procedures:

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

Unique Characteristics:

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

clinic has healthy, affordable meal kits delivered to the clinic weekly as a direct approach to enhancing UW Health employee wellness.

Verona Faculty, Residents and Staff

Verona Faculty

Brian Arndt, MD – *Site Lead*

Karina Atwell, MD

Bruce Barrett, MD, PhD

Mark Beamsley, MD

Kathleen Carr, MD

Allison Couture, DO

Hallum Dickens, MD

Ann Evensen, MD

Tom Hahn, MD – *Program Director*

Miena Hall, MD – *fellow*

Erin Hammer, MD

Sarah James, DO

Jennifer Svarverud, DO

Karen Wendler, PA-C

Mark Wirtz, MD

Behavioral Health: Mario Carrillo, LPC

Primary Care Pharmacists: Rebecca Lausher, Kayla McGowen

Physical Therapy: Bekah Chapman, Ken Krogman, Julie Sherry

Verona Residents

Claire Boyce, MD – *First Year*

Michelle Breuer, DO – *Second Year*

Sheza Dalloul, MD – *Second Year*

Amy Holzer, MD – *First Year*

Briana Krewson, DO – *Second Year*

Samantha Lease, DO – *Second Year*

Supriya Paidemarry, MD – *First Year*

Kailin Randolph, MD – *Third Year (Chief Resident)*

Rutvi Shah, MD – *Third Year*

Kyle Sherwin, DO – *Third Year*

Kellie Steele, MD – *First Year*

Molly Vernon, MD – *Third Year*

Verona Staff

Cheryle Sickles, RN – *Clinic Manager*

Kimberly Volk – *Clinic Operations Assistant, Clinic Scheduler*

Access Community Health Center (ACHC)

WINGRA FAMILY MEDICAL CENTER



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

Stacy Leidel, PhD, APNP – Site Lead

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

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

Wingra Clinic hosts a student-run resource navigator program, assisting patients with social determinants of health. Wingra is also the outpatient site for the Addiction Medicine Program, providing residents the opportunity to collaborate with their faculty and fellows to enhance care for patients suffering from addiction.

Creating a safe environment for teaching and learning is a strong, shared value at Wingra. Medical students from all four years frequently come to learn at the clinic, providing residents with numerous opportunities to teach clinical medicine. Physician assistant, nurse practitioner, pharmacy, behavioral health, and social work students also rotate in the clinic, and faculty are involved in a pathway program for Latinx health professions students.

WINGRA HIGHLIGHTS

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

Total patient visits/year:
~20,000

Services offered on-site:

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

Common Procedures:

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

Unique Characteristics:

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

Wingra Faculty, Residents and Staff

Wingra Faculty

Yohualli Anaya, MD
Estefan Beltran, MD
Jessica Dalby, MD
Lee Dresang, MD
Sean Duffy, MD
Nora Groeschel, PharmD, RPh
Joel Hill, PA-C
Jonas Lee, MD
Stacy Leidel, APNP, PhD – *Site Lead*
Ildi Martonffy, MD
Kirsten Rindfleisch, MD
Patricia Tellez-Giron, MD
Jon Temte, MD, PhD
Jennifer Terasa, PA-C
Angela Vitcenda, MS, PA-C
Morgan White, MD

Wingra Residents

Parker Brown, DO – *First Year*
Sophie Chatas, MD – *Second Year*
Mario Giacobassi, MD – *Second Year*
Kameron Haake, MD – *First Year*
Kimberly Krawzak, MD – *Third Year*
Evelyn Luner, MD – *Third Year (Chief Resident)*
Ulochi Nwagwu, MD – *First Year*
Alejandra Pineda, MD – *First Year*
Samantha Prince, MD – *Second Year*
Zoe Roth, DO – *Second Year*
Elisabetta Tyrriver, MD – *Third Year*
Aimée Wattiaux, MD – *Third Year*

Wingra Staff

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

MADISON RESIDENCY PROGRAM

CURRICULUM

Background

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

Intern Partnership

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

Team Structures

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

St. Mary's Attendings and Staff

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

Rotations and Duty Shifts

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

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

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

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

Educational Pathways

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

ROTATION SUMMARY

2024-2025

First Year Rotations

18 Blocks (each block is 3 weeks)

Adult Medicine – 4 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 – *1 block*

Pediatrics – 2 Blocks + 4 weeks

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

Obstetrics/Newborn – 3 Blocks

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

Surgery – 1 block

- Rural Surgery Preceptorship (Baraboo, Dodgeville, or Stoughton) – *1 block*

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*
- Newborn – *1 week*
- Electives – *5 weeks*

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

Second- and Third-Year Rotations

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

Adult Medicine – 8 Blocks + 24 weeks

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

Pediatrics – 2 Blocks

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

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

OB Float – 3 to 4 weeks (3rd year)

Gynecology – 3 Weeks

Surgical Subspecialties – 10 Weeks

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

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

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

Rural Rotation – 3 Weeks

Electives – 6 Blocks

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

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

Vacation – 4 weeks (each year)

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

FIRST YEAR CURRICULUM

Outpatient Care

Belleville, Northport Dr, Verona, and Wingra Family Medicine Clinics: The core of our resident education is the continuity clinic. Each clinic operates as a group practice, and residents have their own panel of patients. Within the clinic 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 medicine clinic. 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 workflows, the basics of coding, efficient use of the EHR, learn principles of community health and explore their clinic communities.

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

Adult Medicine

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

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

Medical Intensive Care Unit Service at SMH (1 Block): 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. **Billy Michael, MD** works with the St. Mary's clinicians to coordinate 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 are also admitted 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 (AFCH) (1

Block + 1 week): One first-year resident works with the pediatric team on the general pediatrics service for this rotation. The first three weeks the resident works day shifts with the team. During the fourth week, they work a swing shift in the evening covering primarily admissions. Residents work with the same group of pediatric hospitalists on both pediatric services (SMH and AFCH). **Jonas Lee, MD** is the rotation coordinator.

Inpatient Pediatric & Family Medicine Service Nights at SMH (3 weeks, longitudinal):

First-year residents work with an in-house senior family medicine resident to cover patient care and overnight admissions for the St. Mary's Pediatrics and Family Medicine Services.

Obstetrics and Newborn

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

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

residents. Residents manage all family medicine patients (both low and high risk) until they determine with the attending that an OB/GYN consultation is warranted. An obstetrician and OB/GYN resident team are in house at all times for high-risk care. The coordinator of the FMONS rotation is **Jensi Carlson, MD**.

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

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

Surgery

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

Emergency Medicine

Rural ER (1 Block) and SMH ER (1 Block): Two ER blocks are required; one is in a community hospital in one of our community sites (Baraboo, Dodgeville, or Sauk) and the other is in 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 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 and opportunities to learn how to advocate for systemic change to improve our community's health. 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 **Mark Beamsley, 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 on Thursday afternoons. The first-year seminar series provides a comprehensive orientation to family medicine and ambulatory care. During the first four months of the year, part of the seminar time is devoted to the Survival Skills series, which is presented by senior residents and covers the basic acute inpatient problems that residents encounter. Topics for the first-year seminar series are included later in this booklet. An EKG teaching series is also a longitudinal part of this weekly seminar.

SECOND- AND THIRD-YEAR CURRICULUM

Overview

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

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

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

Outpatient Care at Belleville, Northport Dr, Wingra or Verona Family Medicine Clinics (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. 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 (2 weeks 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 covering the FM and Peds services. At UWH, the resident on night float covers the Family Medicine Service, including admissions, overnight.
- **Outpatient Dermatology (1 Week)**

Pediatrics

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

Surgical Specialties

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

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

Obstetrics/Newborn

Family Medicine Obstetrics and Newborn Service (FMONS) at Meriter (2 Blocks second year): Residents take turns covering the labor floor in 12-hour shifts. In addition to the required blocks of FMONS, a high-risk OB elective rotation is available for third-year residents at Meriter Hospital.

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

Rural Rotation

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

Gynecology

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

Management of Health Systems

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

Community Health

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

Addictive Disorders	OB FLOAT - High-risk
Allergy	OB Teach
Behavioral Health	OMT for non-DOs
Cardiology	OMT4MD (3 week longitudinal)
Clinical Skill Teaching	Pain Management
Diabetes Management	Peds Ortho
Elective - Other (Self-designed)	Physical Therapy
Endocrine	Podiatry
Geriatrics	Practice Styles
Global Health	Procedures
Hospice/Palliative Care	Professionalism
Integrative Health	Psychiatry
Internship Prep Course - Teaching	Pulmonology
Lactation	Radiology
Migrant Mobile Health Clinic	Research
MSK Ortho-related	Transgender Health
Neonatal ICU & Resuscitation	Urgent Care
Neurology	Urology
Obesity	Wound Care
OB Elective	

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

Call for Second- and Third-Year Residents

Night call for the FMC patients is 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, MICU 101, Pre-Code Scenarios, Inbasket Management, Chest Pain, Sepsis, DKA, GI Bleed, Sickie Cell/Acute Pain Management, Peds Respiratory Illness, etc. Survival Skills Seminars are a half 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 wellness. 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 Thursday afternoons. A sample list of topics appears below:

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

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

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

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

Resident Teach Time

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

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 wellness training, and all residents participate in Balint groups to discuss and explore difficult patient interactions.

Monday Morning Report and Journal Club/Primary Care Conference

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

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

Inpatient Rotation Didactic Sessions

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

Scheduled Resident Social and Support Activities

- ♦ **Annual Residency Picnic** - The annual residency picnic, held each June, marks the transition of the interns into the residency and the graduating residents' departure. Held at a local venue for residents, faculty, staff, and families, it is an evening of food and fun for all!
- ♦ **Mindfulness-Based Stress Reduction Training** - Residents learn skills and techniques in mindfulness meditation and how to apply these skills at work to reduce stress. Residents are introduced to this in the first-year seminar series and can optionally pursue further training.
- ♦ **Balint Groups** - Balint groups are available for residents in each year of training. Facilitated by our trained family medicine faculty, these groups are case-based, allowing residents to process difficult doctor-patient encounters in a safe space that focuses less on the facts and more on the relationships.
- ♦ **AWARE Curriculum** - This innovative curriculum provides residents with an eclectic mix of experiences, reflection, study and mentoring to promote personal and professional growth. Residents have access to financial resources to pursue 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. 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.

MADISON PROGRAM FACULTY



Madison Residency Program Faculty

Belleville Faculty



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



Brenna Gibbons, MD 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. She stayed in Madison to complete her Family Medicine Residency with UW and served as a chief resident at the Belleville Clinic her third year. She is particularly interested in hospital medicine, geriatric and palliative care, addiction medicine, and medical ethics. Additionally, she aspires to develop simulation opportunities for residents to improve readiness for rapid responses in the hospital. In her free time, Brenna enjoys singing and playing with her family band, competitive cycling, running, fishing, coaching youth athletics, and writing.



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



Brian Kenealy, MD, PhD 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.



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



Jennifer Lochner, MD Dr. Lochner's affiliation with the UW Department of Family Medicine and Community Health began when she was born at St. Mary's Hospital while her father was a family medicine resident (in the second graduating class of the then newly formed specialty and UW Department). She grew up in the small town of Waupaca, WI and learned about family medicine first hand before attending college

and medical school at UW followed by residency at Oregon Health & Sciences University in Portland, Oregon. She stayed on at OHSU as a 4th year Chief Resident and then joined the full time faculty there, eventually taking on the role of Associate Residency Director and Medical Director of the South Waterfront clinic. After 11 years in Portland her Wisconsin family ties overcame the wonderful relationships she had found with patients, friends and colleagues and so she moved back to Madison in December (yes, December) of 2010. She practices full spectrum Family Medicine at the Belleville clinic and feels lucky to have found such a wonderful group of staff, partners, residents and patients with whom to partner. When not at work Jen enjoys spending time with her husband Steve and their 2 young children and occasionally even finds time to hit a spin class, read or knit.



Julia Lubsen, MD Originally from Virginia, Julia Lubsen earned her bachelor's degree in Neurobiology from Harvard University and her medical degree from Yale University. Julia brings to Family Medicine a passion for serving all members of the community, including the uninsured. During medical school, she was an active volunteer at the student-run HAVEN Free Clinic, and after her third year she

accepted a one-year fellowship to serve as co-director of the clinic. Over the course of the year, the clinic provided more than 800 visits to uninsured patients in a predominantly Latino community in New Haven. Julia also has strong interests in disease prevention, nutrition, and primary care delivery. As a research fellow with the Fair Haven Community Health Center, she studied the relationship between family functioning and diabetes risk and the effects of family functioning on participation in an intensive lifestyle intervention. She also served as Co-Leader for Yale's Family Medicine Interest Group, and has taught fellow students in both the first-year Histology Lab and The Healer's Art course. Her other interests include meditation, integrative health, and rural medicine. In her free time she enjoys rowing, running, yoga, hiking, cross-country skiing, knitting, vegetarian cooking, and playing the piano.

Billy Michael, MD – Associate Program Director ([click here for full bio](#))

Northport Dr 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.



Adrienne Hampton, MD earned her B.A. in Biology from Longwood University in Virginia and completed her medical degree at Northwestern University's Feinberg School of Medicine. She was initially drawn to family medicine through her strong interest and investment in the community. Before beginning medical school, she completed an AmeriCorps year of service as an HIV counselor and tester in Washington, DC, where she witnessed firsthand how profoundly social forces shape health outcomes. She also worked as an intern with the Mautner Project in Washington, DC, where she designed and implemented a wellness intervention for African American women who partner with women. During medical school, as an Albert Schweitzer Fellow, she implemented prenatal yoga programs in two low-income Chicago communities to combat the stress experienced by so many of the expectant mothers in those areas. These experiences reaffirmed her calling to family medicine, as well as her ultimate goal of creating an inclusive, family-centered practice that will make a positive difference in the health-status of low-income communities. In her free time, Adrienne's hobbies include yoga, classical vocal music, and creative writing.

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



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



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

Lashika Yogendran, MD – Associate Program Director ([click here for full bio](#))

Verona Faculty



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



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



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



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



Kathleen Carr, MD completed undergraduate (Exercise Physiology) and medical degrees at the University of Wisconsin-Madison, residency training at the University of Michigan, and a two-year fellowship in primary care sports medicine at the University of Wisconsin-Madison in 2002. She joined the Madison Campus faculty in July 2002, and was the Associate Residency Director from 2006 until 2013. She has been the Associate Director of the Primary Care Sports

Medicine Fellowship since 2005. Dr. Carr also serves as a team physician for the University of Wisconsin athletes. She is the curriculum director for musculoskeletal medicine in the residency, and her other professional interests are injuries in female athletes, mental health issues of athletes, and sports injury prevention. She enjoys cheering on the Badgers and outdoor activities with her family.



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



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



Ann Evensen, MD completed her undergraduate and medical degrees at the University of Wisconsin-Madison. She had residency training at the University of Washington-affiliated program in Renton, WA. Since residency she has practiced part-time but full-scope family medicine in rural and private practices in Covington, WA, Platteville, WI, and Monona, WI. She was named a Master Teacher by the UW Department of Family Medicine and Community Health and joined the Verona faculty in 2007. Her professional interests are low-risk obstetrics, women's health, international health, office-based procedures, and practice improvement. She loves to explore the ethnic food riches of Madison and lives in Verona with her husband and three children.

Thomas Hahn, MD – Program Director ([click here for full bio](#))



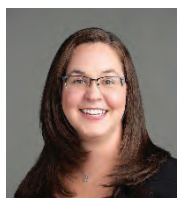
Erin Hammer, MD earned her medical degree from the University of Washington School of Medicine in Seattle, Washington. After completing her education, she completed her Residency in the Department of Family Medicine at the University of Wisconsin-Madison and Primary Care Sports Medicine Fellowship at 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. Mary's 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.



Jennifer Svarverud, DO is an Assistant Professor and core Family Medicine residency faculty at the UW Department of Family Medicine and Community Health. Prior to joining the faculty at UW-Madison, Dr. Svarverud was a Major in the United States Air Force and stationed at Nellis Air Force Base in Las Vegas, Nevada where she was a core faculty member at the Nellis AFB Family Medicine Residency program. Prior to joining the program as faculty, she completed her residency training at Nellis AFB and is board certified in Family Medicine. She also completed a fellowship in Faculty Development at the University of North Carolina Chapel Hill. She attended medical school at Western University of Health Science COMP-NW in Lebanon, Oregon and received her bachelor's degree from Washington State University in Pullman, Washington. When she is not

working with patients, residents and medical students, Dr. Svarverud enjoys spending time with her husband, son and their dog while they explore the Madison area. She also enjoys riding bikes, reading, and spending time outdoors.



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

Wingra Faculty



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



Randy Brown, MD, PhD, FASAM attended medical school at the University of Washington, Seattle. He completed his family practice residency at the University of California Davis-affiliated Stanislaus County Family Practice Residency Program. He has achieved Board Certification in Addiction Medicine (2009) and a PhD in Population Health Sciences (UW Madison, 2009). Additional training experiences have included University of California San Francisco's Faculty Development Fellowship (2001-2002), the UW HRSA Primary Care Research Fellowship (2001-2004), and the UC San Diego Alcohol Medical Scholars Program (2002-2004). Dr. Brown's research focuses upon services to addicted individuals in non-traditional settings and via non-traditional means, including in primary care, general hospitals, and criminal justice supervision and through the use of mobile technology. He is a licensed provider of office-based treatment for opioid dependence. Dr. Brown speaks fluent Spanish and enjoys serving the local Latino population at the Wingra Clinic. He is the Director of the Center for Addictive Disorders at University of Wisconsin Hospital and Clinics, the Director of the UW-VA Addiction Medicine Fellowship Program,

and Medical Director of the Madison VA Interprofessional Advanced Fellowship in Addictions Treatment. He is adjunct faculty in the Department of Population Health Sciences, and a Center Scientist with the Center for Health Enhancement and Systems Studies in the UW Dept. of Industrial Engineering. He is the Medical Director for Overdose Prevention with the AIDS Resource Center of Wisconsin, LifePoint Program. He served as the President of the Wisconsin Society of Addiction Medicine for three years (2007-2009).



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



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

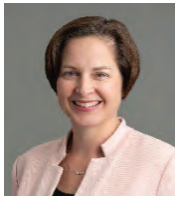


Sean Duffy, MD Originally from Milwaukee, Sean Duffy earned his bachelor's degree in anthropology from the University of Notre Dame and his medical degree from the University of Wisconsin School of Medicine and Public Health. He then went on to complete his residency training, as well as the Academic Medicine Fellowship, with the UW Department of Family Medicine and Community Health before beginning the Primary Care Research Fellowship. Dr. Duffy's research focuses on the management of chronic disease in low resource settings, particularly the management of diabetes in low- and middle-income countries. He is currently involved in a quality improvement project in Guatemala to develop and evaluate a smartphone application to assist community health workers with titrating oral medications for patients with diabetes living in rural villages. Dr. Duffy is also interested in global health education and training and is working with a group of researchers from several institutions to assess the current state of clinical fellowships in global health in the US and Canada.



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

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



Ildi Martonffy, MD– Vice Chair of Education 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. Outside of work, she enjoys spending time with her husband and children and specializes in signing up for (and completing!) athletic events she has no business doing.



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



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



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



Morgan White, MD sees family medicine as a platform to address healthcare disparities affecting underserved communities, with a particular emphasis on the African-American population. Morgan is from Crystal Lake, IL and earned her undergraduate degree in molecular, cellular, and developmental biology from Yale University. She went on to earn her medical degree from the University of Michigan

Medical School. While in medical school, Morgan served as president and treasurer of the Black Medical Association. She has committed herself to addressing issues affecting the healthcare needs of the black community and supporting the educational pipeline to train more black doctors. Morgan forms deep relationships with each of her patients, from birth through old age, in sickness and in disease prevention. For Morgan, medicine is more than just physical conditions and treatments; it is about relationships, values, and creating communities that promote health. Morgan enjoys watching Michigan football and basketball teams (Go Blue!), cooking, playing tennis, and gardening.

UW Family Medicine Service Faculty



Alex Milsap, MD was born and raised in Madison, WI. He completed his B.S. in Psychology with a minor in Business Administration at UW-La Crosse. He then went on to complete his medical degree at the UW School of Medicine and Public Health. Alex was drawn to family medicine for its focus on long-term relationships with patients, families, and communities. His specific interests include sports medicine, urgent/emergent care, and medical education. His most valuable experience in

medical school came from spending time with patients and from observing his preceptor on his family medicine rotation, who balanced his time between the clinic and hospital, in addition to taking care of patients in their homes. As a medical student, Alex did stroke research at Gundersen-Lutheran Hospital and also organized and implemented a series of health talks in conjunction with the La Crosse County board of health. Working in this community showed him the importance of education, outreach, and maintaining good relationships with the community. Outside of medicine,

Alex enjoys spending time with family and friends. He is an avid sports fan and enjoys playing basketball, golf, and cheering on his favorite teams.



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

Behavioral Health Faculty



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

MADISON PROGRAM RESIDENTS

Belleville Residents



Julia Beccue, MD (she/her) (PGY-2) grew up in rural Illinois, attending the University of Illinois at Urbana-Champaign for her undergraduate degree, and the University of Illinois College of Medicine – Rockford for her medical degree. Growing up in a rural area instilled a desire to strengthen her community by helping individuals in it to thrive and influenced her journey through medicine. Julia is particularly interested in behavioral health, addiction medicine, and preventative medicine. It is important to her to provide better access to care and help patients take charge of their health. Julia has enjoyed designing and implementing health education events that focus on physical and mental health topics. Caring for communities by participating in Wrap Around Rockford, a mobile healthcare initiative, and working in the Pilsen Food Pantry have been formative experiences for her. Julia stays active by playing basketball and volleyball. She enjoys traveling, trying new cuisine, and spending time with family and friends.



For **Julie Connor, MD (she/her/hers) (PGY-1)**, to be a physician is to be a compassionate listener and partner for each patient in building a plan that maximizes their health and well-being. While earning her undergraduate neuroscience degree from the University of Vermont, Julie researched the influence of pain in the development of mental health disorders. This led to her interests in clinical research, behavioral health, and the intersection of physical and mental health. Prior to medical school, Julie was a research assistant at the Osher Center for Integrative Medicine in Boston, which furthered her interests in pain management and integrative medicine. While earning her medical degree from the University of Vermont, Julie led the student interest groups for family medicine, integrative medicine, and yoga. Her rural family medicine rotations in medical school introduced her to the broad scope of care she wants to practice caring for newborns, elderly patients, and everyone in between. She has a strong passion for promoting wellness and providing comprehensive care. Her interests include obstetrics and women's health, rural health, behavioral health, integrative medicine, and procedures. Julie spends her free time running, road and mountain biking, playing tennis, doing yoga, reading, and enjoying time with friends and family. She is from Montpelier, VT.



Abigail Cox, MD (she/her) (PGY-3), fell in love with family medicine because of the kind and caring culture that is present throughout the field. She believes that kindness is an essential aspect of providing excellent care. She aims to combine the science of medical care with the human touch of kindness and a smile to bring positivity to her patients' lives. Abigail is from Rochester, NY and she earned her bachelor's degree in biology from Duquesne University in Pittsburgh, PA. She went on to attend the University of Pittsburgh School of Medicine. While in medical school she pursued her interests in behavioral health and the treatment of substance use disorders. She also contributed to her medical school community by participating in a wellness committee and mentoring junior students. In her medical practice, Abigail has strong interests in addiction medicine, behavioral health, dermatology, and women's health. Abigail loves to dance – she started dancing at

the age of 12. She also enjoys sampling ice cream, watching movies (especially Marvel movies), and playing board games.



David Hardin, MD (he/him) (PGY-3), enjoys practicing full-spectrum, rural family medicine. From seeing patients in clinic to being called into the hospital for deliveries to caring for patients of all ages in all settings, David is committed to the life of a rural family doctor. He welcomes the opportunity to build long lasting relationships with his patients and hone the skill to care for all aspects of his patients' health. In addition to rural medicine, he is also interested in addiction medicine and adolescent health. David is from Fredericksburg, TX and he earned his undergraduate degree in

Biomedical Sciences at Texas A&M University. He attended medical school at the University of Texas Medical Branch at Galveston School of Medicine. While in Galveston, David volunteered at the local student-run free clinic, where he held several leadership roles. He was also involved with his school's family medicine interest group, and he worked with other students to promote the broad scope of family medicine as a specialty. Outside of medicine, David enjoys exploring the outdoors and, coming from Texas, he is very excited to experience Wisconsin winter activities, especially on frozen lakes. His hobbies also include canning, spending time with his partner and their dog, and trying out new restaurants.



Noah Maerz, MD (he/him) (PGY-2) is a Wisconsin native with a passion for rural medicine and community health. He is drawn to family medicine because of the potential for long-term relationships with patients, as well as being able to focus on a patient as a whole and getting to know them on a deeper level. Noah received his undergraduate degree from UW-Madison in Biochemistry and obtained a Certificate in Global Health, before completing his medical degree at the University of Wisconsin

School of Medicine and Public Health. Participating in the Wisconsin Academy for Rural Medicine (WARM) program gave him the opportunity to see a wide range of medical cases. Noah also has experience in mobile medicine, providing care for disadvantaged populations, and strives to improve access to care. He enjoys volunteering for hometown events and teaching high school students about careers in the medical field and the importance of rural medicine. In his free time, he enjoys hiking, golfing, playing cards, and snowmobiling.

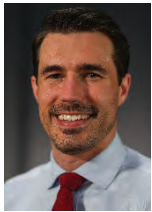


Rebeka Mercker, MD (PGY-1) was born and raised in Fulda, IN, "the smallest of small towns." Within a population of 38, Rebeka learned the importance of building strong community ties with her patients. Rebeka chose family medicine because of the in-depth relationships she can build with patients and their families. Rebeka earned her undergraduate degree in Biology from the University of Southern Indiana. She spent eight weeks studying abroad in Gaborone, Botswana, during which time she was

exposed to different health systems by working at various urban and rural clinics. Rebeka also served a summer as a member of the AmeriCorps Hoosier Public Health Corps, where her work was focused in nonprofit LGBTQ+ services in Indianapolis. She earned her medical degree from the Indiana University School of Medicine. She was the women's health liaison for her medical school's student outreach clinic. In this role, she deepened her passion for women's health and the importance of providing easily accessible care to underserved populations. All these experiences have led to Rebeka's committed interests in women's health, LGBTQ+ care, and rural healthcare. Rebeka unwinds through her hobbies of long-distance running, playing soccer, putting together puzzles, and listening to audiobooks.



Hailey Milakovich, MD (she/her/hers) (PGY-1) is a proud Wisconsinite. Born and raised in Oconomowoc, she moved to Madison for college and has never left. She earned her bachelor's degree in biology and psychology and her medical degree from the University of Wisconsin – Madison. Hailey has worked as a medical assistant in women's health clinics; this experience fostered her commitment to women's health, prenatal, and obstetric care. She volunteered with MEDiC, UW's student-run free clinic, and she also taught about health and organ systems at local schools through Doctors Ought to Care. Hailey is drawn to family medicine by the lasting therapeutic relationships she can form and its holistic approach to health and wellness. Hailey is committed to providing full spectrum primary care for all genders and ages, from birth to geriatrics and everyone in between. She also has a strong interest in rural medicine and community health engagement. Hailey enjoys spending time with her partner and their two cats, especially while watching spooky movies. She also enjoys going outside, whether it's for hiking, camping, boating, barbequing, or pickle balling. She loves hosting gatherings with friends and spending time with family around the dinner table.



Nathan (Nate) Miller, MD (he/him/his) (PGY-1) strives to be a family physician who guides, educates, and partners with patients to empower them to lead healthier lives and achieve their fullest potential. Nate is from Beaver Dam, WI and he earned his bachelor's in business management from Hope College in Holland, MI. Nate then participated in the Wisconsin Academy for Rural Medicine (WARM) while earning his medical degree from the University of Wisconsin School of Medicine and Public

Health. This provided him with the opportunity to immerse himself in a rural community and learn about the unique medical needs that rural communities face. This experience solidified his passion to practice full-spectrum family medicine and build long-term relationships with patients. Nate also was able to introduce the next generation to the incredible world of medicine and careers in healthcare by presenting to students at La Crosse-area schools and colleges. Nate's interest areas include procedures, vasectomies, and practice management and healthcare operations. Nate can often be found in his garage woodworking shop, perfecting his skills with downhill and water skiing, cooking, and playing sand volleyball. He relaxes by enjoying a great book and painting.



Viktoriya (Vika) Ovsepyan, MD (she/her) (PGY-3), is committed to breaking down barriers to healthcare and advocating for social justice. She is from Cedarburg, WI and she earned her undergraduate degree in Gender and Women's Studies, with a minor in Global Health, from the University of Wisconsin-Madison. While in college, Vika worked at the UW Women's and Sexual Health Clinic, which sparked her interest in women's health and taught her the importance of providing reproductive health services and empowering young adults to lead healthy lives. She completed a

community health internship with a domestic violence women's shelter in Wisconsin Rapids, WI. From this, she experienced the importance of providing trauma-informed care. Vika earned her medical degree from the UW School of Medicine and Public Health. She participated in the TRaining in Urban Medicine and Public Health (TRIUMPH) program in Milwaukee. This experience prepared Vika to serve medically under-resourced populations and promote health equity through advocacy and community engagement. As part of the TRIUMPH focus on public health, she partnered with the Milwaukee Health Department to increase access to sexual health services for uninsured patients. Outside of medicine, Vika enjoys spending time with family and friends, being in the great outdoors, and traveling.



Justine Resnik, MD (she/her) (PGY-2) chose family medicine to reach the most patients covering all stages of life. With key interests in rural medicine, women's health, and preventative medicine, she would like to provide care in communities where medical access may be limited. As a medical student during peak times of the COVID-19 pandemic, Justine learned how important it is to be adaptable and the importance of constantly learning new skills to best take care of patients Belleville Clinic. She attended the University of Nevada-Reno for her undergraduate and medical degrees, and was part of the Healthy Nevada committee, which designed and taught preventative health modules to high school students. Justine had the opportunity to live in Japan for a year, where she taught English while learning about Japanese traditions and culture. She enjoys teaching and looks forward to continuing to participate in medical education. Her hobbies include snowboarding, hiking, camping, ceramics, and knitting.

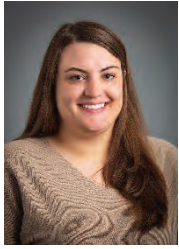


Julie Vaughan, MD (she/her) (PGY-2) has a passion for healthcare access, which is her driving force for education and activism. Advocating for patients, caring for those with complex needs, and caring for underserved populations is important to her. She has worked on food insecurity initiatives, receiving a grant for the Healthy Community Connections project. She was on the board of a student-run outreach clinic, where she provided care. Julie served as a rural class representative while a medical student at the Indiana University School of Medicine, involved in increasing opportunities for rural health experiences for her classmates. Her key interests include preventative/lifestyle medicine, chronic disease management, women's health, and reproductive justice. Julie loves traveling to experience new cultures, hiking in beautiful places, and nature photography. At home with her two cats, she loves to bake for family and friends and design charcuterie boards.



Logan Yeager, MD (he/him) (PGY-3), is a native Wisconsinite from Dodgeville. He is committed to rural family medicine and building strong connections with his community. He has volunteered for over 6 years at the Community Connections Free Clinic in Dodgeville, where he has helped with projects including improving blood pressure control. He earned both his bachelor's degree in biology and his medical degree from the University of Wisconsin – Madison. While in medical school, Logan founded WisCARES Social Chats, a program that provides recurring phone call check-ins to individuals struggling with social isolation and loneliness. He also volunteered with Doctors Ought to Care where he led educational activities in local communities to teach kids about the human body and how to live a healthy lifestyle. Logan's interests include full spectrum family medicine and the treatment of substance use disorders. He is honored to join his patients' journeys and work with them to build care plans and goals. His goal is to practice in rural Wisconsin and partner with patients as they face issues and stresses impacted by rural health. Logan can often be found fishing, biking, playing the guitar, and spending time with his wife and friends.

Northport Dr Residents



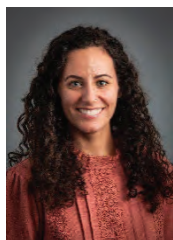
Michelle “Mickey” Breuer, DO (she/her) (PGY-2) earned her bachelor’s degree in biology at UW-Madison and is happy to return to Madison as a family medicine resident. As a medical student during the COVID-19 pandemic, she learned the importance of being a recognizable face and providing consistent care and comfort to patients who were admitted long term, unable to have visitors. She looks forward to expanding her expertise in hands-on procedures and further pursuing her interests in sports medicine, women’s health, and preventative medicine. An avid sports fan, she enjoys spending time with her family while rooting for all Wisconsin teams. You will often find her active in the great outdoors, though she also enjoys relaxing by listening to comedy podcasts, organizing and decluttering.



Peter Fink, MD (he/him) (PGY-3), values being a family physician for the approach of not only treating illness, but also promoting long-term wellness. Peter is committed to caring for the whole person across all ages, organ systems, and acute and chronic stages. He also incorporates evidence-based integrative medicine into his practice to help patients actively cultivate wellness. Peter is from Valparaiso, IN and graduated from the University of Notre Dame with a degree in American Studies / Preprofessional Studies. He then worked as a community health specialist in AmeriCorps at a Federally Qualified Health Center in Portland, OR, where he enrolled patients in Medicaid, implemented a screening tool to assess patients’ social determinants of health, and helped introduce Community Supported Agriculture and Cooking Matters programs to the local neighborhood. Peter earned his medical degree from the David Geffen School of Medicine at the University of California Los Angeles. While in medical school, he helped design and implement a screening tool for Adverse Childhood Experiences and led health education classes at an underserved school in East LA. Peter enjoys playing guitar and trombone, running, playing basketball, and rooting for Notre Dame sports. He also finds fulfillment through his daily mindfulness meditation practice and involvement with spiritual communities.



Noah Garber, MD (he/him) (PGY-3), is drawn to family medicine because of the ability to build meaningful, long-term relationships with patients at all stages of life. He is from Farmington Hills, MI, and he studied Cellular and Molecular Biology, with a minor in Biological Anthropology, at the University of Michigan – Ann Arbor. He attended medical school at the Oakland University William Beaumont School of Medicine. He participated as a trainee in the Michigan Leadership Education in Neurodevelopmental and Related Disabilities (MI-LEND) program, which taught him about the challenges faced in schools and healthcare systems by children on the autism spectrum and exposed him to the importance of community resources that are available for patients and families. Noah also volunteered as a camp counselor for a summer camp designed for children with serious medical conditions to have a fun and safe experience. Noah’s medical interests include preventative health, obstetrics, and outpatient procedures. He enjoys everything outdoors, especially playing tennis, rock climbing, hiking, and skiing. He also loves live music and spending time with family and friends.



Rita Henien Bybee, DO (she/her) (PGY-2) was born in Thun, Switzerland and has made her home in St. Joseph, Michigan, Lake Havasu City, Arizona, and now Madison. Her experiences developing meaningful relationships with patients led Rita to understand how health encompasses significantly personal and holistic priorities, physical wellbeing, and elimination of disease. She appreciates full spectrum family medicine, the opportunity to pursue her medical interests in prenatal care and obstetrics, geriatric and palliative medicine, and LGBTQ+ and gender-affirming care. With experience as a liaison and a service project event coordinator of a community health center in Flagstaff, AZ, Rita learned firsthand the importance of addressing social determinants of health. She rotated in many community health center sites, from critical access clinics to rural hospitals, which provided her with exposure to diverse patient populations from varying cultural and socioeconomic backgrounds. This enriched her mission to uplift the individualized health aspirations of her patients, recommend practical and accessible treatments for their lifestyle and continually adapt her approach to serving her community's health needs. Rita stays well-rounded in her activities outside of medicine- trail running, hiking, cross-country skiing, reading, and live musical theater. She also enjoys traveling and trying new outdoor activities with her family and friends.



Aidan Khoda, DO (he/him/his) (PGY-1) comes to family medicine with a strong passion for providing inclusive healthcare for the LGBTQ+ population and advocating for all his patients. Aidan was born and raised in Oklahoma City and Edmond, OK. As a rural track student, he earned his bachelor's degree in Physiology from Oklahoma State University. He went on to earn his medical degree from the Oklahoma State University College of Osteopathic Medicine at the Cherokee Nation. As part of the inaugural class from the first tribally affiliated medical school in the country, Aidan lived on the Cherokee Nation's reservation for three years, learning about the tribal healthcare system and seeing firsthand the disparities that affect Indigenous people. While in medical school, Aidan developed a dedication to providing LGBTQ+ care and was involved in his school's Gay and Lesbian Advocacy in Medicine Club, where he promoted awareness about LGBTQ+ medicine to other future physicians. He is also interested in reproductive health, addiction medicine, osteopathic manipulative medicine, and integrating each of these areas into LGBTQ+-friendly clinical spaces. Some of Aidan's hobbies include listening to and singing off-key to pop music, taking care of his guinea pig, exploring museums, and trying new restaurants. He is also a big fan of *Pirates of the Caribbean*.



Sinduja Kilaru, MD (she/her/hers) (PGY-1) is drawn to family medicine because of the specialty's breadth of care, commitment to advocacy, and the understanding of patients within the greater context of their community. Her hometowns include Fenton, MI and Ann Arbor, MI. She earned her bachelor's degree in biomolecular science from the University of Michigan. While an undergraduate, she worked at a Detroit nonprofit and created summer camps that provided free and subsidized childcare to over 230 children. Sinduja also was a research assistant for a National Institutes of Health study on the Environmental Influences on Child Health Outcomes-Neonatal Neurobehavior and Outcomes in Very Preterm Infants (ECHO) at Harbor-UCLA. She then earned her medical degree from the Loyola University Chicago Stritch School of Medicine. While in Chicago, she volunteered at Community Health Clinic, the largest free clinic in the nation. Her experiences throughout her training have led Sinduja to her interests in integrative medicine, reproductive health, and child and adolescent behavioral health. She is committed to actively

listening to each of her patients and being a part of their story. Outside of medicine, Sinduja enjoys reading, yoga, spending time with friends and family, and hiking.



Kelly Kramer, MD (she/her) (PGY-2) is a Wisconsinite through and through—growing up in Sherwood and attending St. Norbert College in De Pere for her undergraduate degree, and UW-Madison for her medical degree. Her passion for providing quality healthcare for people with developmental disabilities led her to found a local chapter of the American Academy of Developmental Medicine and Dentistry. She studied the transition from pediatric to adult healthcare for patients with Down Syndrome at the Waisman Center. She has also participated in a

leadership training program that works to improve services and support for children with neurodevelopmental disabilities, where she developed a deep understanding of their unique healthcare needs. Kelly is also interested in women’s health and obstetrics, addiction medicine, and community health. She is an avid reader and unwinds listening to podcasts. She stays active by hiking and playing tennis. Quality time with her family and friends is spent playing card games and board games.



Micah Larson, MD (they/them) (PGY-3), is a native Wisconsinite and claims Madison as their hometown. After completing their undergraduate degree in Anthropology and Biochemistry from Arizona State University, Micah returned to Madison to attend medical school at the University of Wisconsin School of Medicine and Public Health. While in medical school, they spent a month working with adolescent medicine physicians learning about eating disorders and reproductive health, two of Micah’s interest areas. They also spent a month learning about

transgender health with a family physician in Green Bay. In addition to learning the medical aspects of transgender medicine, Micah learned how to be an advocate for the trans community in areas not yet accustomed to gender affirming approaches. Micah also led their medical school’s chapter of Students for a National Health Plan and became very dedicated to advocating for a national health plan and healthcare as a human right. Micah is also dedicated to caring for people with developmental disabilities and underserved populations. To unwind from a busy day in the clinic and hospital, Micah enjoys crocheting, cooking, and cuddling with their dog.



Spenser Marting, MD (he/him) (PGY-2) chose family medicine because of its emphasis on the social and community structures that promote healthy people and communities. While attending medical school, he served as board chair of a student-run free clinic during the first year of the COVID-19 pandemic, expanding the care options through a new telehealth program. Spenser continued scholarly work at the free clinic while participating in the Urban and Community Health pathway. He established a patient and family advisory council, addressed food insecurity, and

advised new managers and volunteers. As a resident, he looks forward to having the opportunity to foster therapeutic partnerships with people at every stage of life. In addition to practicing full-spectrum family medicine, he is interested in mental health, addiction medicine, community engagement, and medical education. Spenser enjoys swimming, listening to public radio, learning how to backpack, and spending time with his wife and friends.



David Miller, MD (he/his) (PGY-2) grew up in Allentown, Pennsylvania and is drawn to family medicine because of the connections he makes with the people he works with- colleagues and patients. With core tenets of kindness, openness, and compassion, he is particularly interested in primary care mental health, gender-affirming care, addiction medicine, and integrative medicine. David is certified to teach yoga and taught virtually during the pandemic. He finds that yoga can be accessible to many people looking to increase their movement and is passionate

about promoting physical and mental wellness. His experience tutoring medical students has made him eager to do further teaching in medicine. He loves the process of cooking and learning new techniques to de-stress. He and his partner enjoy nature and look forward to hiking and exploring Wisconsin.



Rachel Munson, MD (she/her/hers) (PGY-1) is a family physician because she is passionate about providing direct patient care to individuals and addressing system disparities that harm the community. Rachel is from Milwaukee, WI and she earned her undergraduate degree in Human Physiology and Psychology from the University of Minnesota – Twin Cities. She returned to Wisconsin to attend the University of Wisconsin School of Medicine and Public Health. While in Madison, Rachel developed her passion for advocacy and worked to advocate for reproductive justice, racial

equity, and size inclusivity in medicine through her leadership of student groups and her participation in the Wisconsin Medical Society Medical Student Section. She also volunteered with Special Olympics Wisconsin and MEDiC, UW's student-run free clinic. Rachel was drawn to family medicine because of the incredible opportunity to provide care across the spectrum of life. Outside of medicine, she enjoys walking and biking around Madison, traveling to new places both in and outside of the US, swimming, hiking, reading, baking, and knitting sweaters to survive the chilly Wisconsin winters.



Joanna (Jo) Sherrill, MD (she/her) (PGY-3), knew that she would be a family physician when she saw that each day brought the opportunity to care for a wide variety of patients and build connections with patients at every stage of life. In addition to providing broad spectrum care, she is particularly interested in LGBTQ+ care, women's reproductive rights, health equity, and underserved medicine. Jo is from Dallas, TX and she earned her undergraduate degree in Healthcare Studies from the University of Texas at Dallas. She saw firsthand the profound impact

access to medical care can have on a person when she volunteered with a research project which provided medical care to sex workers. This experience ultimately led her to pursue her medical degree at the University of Texas Medical Branch. Her advocacy for access to medical care was reinforced when she volunteered in the Texas prison hospital. From this experience, she learned the importance of meeting patients where they are at on their own unique journeys and advocating for them when it is most needed. Jo can often be found hiking with her dog, gardening, and thrifting.

Verona Residents



Claire Boyce, MD (she/her/hers) (PGY-1) is drawn to family medicine because of her interest in walking alongside every patient through their health journey. Claire is originally from St. Louis, MO. She earned her undergraduate degree in biology and psychology from the University of Notre Dame. She earned her medical degree from the University of Missouri – Columbia School of Medicine. While in medical school, Claire volunteered with MedZou, a student-run free clinic in Central Missouri. She participated in the Global Health Scholars Program, and she also worked on an initiative with Central Missouri Community Action to educate children and families about the positive health benefits that can come from healthy diets and exercise. Claire's goal is to build trusting relationships with each of her patients and advocate for their needs within complex medical systems. She has special interests in academic medicine, public health, and women's health. In her free time, she can be found watching sports (Go Chiefs! Go Irish!), working out, watching romcoms, or reading. She also enjoys doing DIY projects around the house and trying to find a bargain at a thrift store or estate sale.



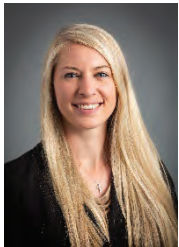
Sheza Dalloul, MD (she/her) (PGY-2) calls Vernon Hills, Illinois home, and attended DePaul University and Chicago Medical School at Rosalind Franklin University. As a medical student, she enjoyed volunteering in a free clinic while on her family medicine rotation. Sheza finds connections with diverse communities by practicing medicine. To Sheza, humanity and empathy are the foundation of medicine. Hearing her patients' stories is a highlight in building a relationship between Sheza and her patients. She is passionate about being a physician for a diverse range of people, of all ages, to uplift and support those persevering through medical difficulties. Outside of medicine, Sheza loves hiking, cooking, and working out.



Amy Holzer, MD (she/her/hers) (PGY-1) is drawn to family medicine for the amazing opportunity to provide care to any person, in any setting, at any point in their life. She is excited to manage both chronic and acute conditions and provide obstetric care for her patients. She also has a passion for addiction medicine. Amy is from Hartford, WI and she earned her undergraduate degree in General Biology from Saint Norbert College in De Pere, WI. She then earned her medical degree from the University of Wisconsin School of Medicine and Public Health. While in medical school, she served as a student leader for the Mentorship Achievement Program, which connects medical students with local middle schoolers to provide mentorship. She also developed and presented a preventive health curriculum for the Boys and Girls Club of Dane County's summer program. Amy values building trusting, enduring relationships with her patients, which she embodied through her participation in the Senior Chats program by making weekly phone calls to local seniors early in the COVID-19 pandemic. In addition to providing non-judgmental, patient-centered care, Amy enjoys spending her free time outdoors, especially hiking, fishing, and golfing.



Briana Krewson, DO, MPH (she/her) (PGY-2) developed her passion for family medicine as a community project manager and director of a student-run clinic for the homeless in Philadelphia. She has interests in many areas of family medicine—compassionate humanistic care, preventative and lifestyle medicine, osteopathic manipulative treatment, integrative, holistic medicine, women’s health, leadership in medicine, teaching in medicine, and underserved rural medicine. She has had experiences across the globe that have shaped her and continues to travel as much as possible. As a Fulbright Fellow, Briana taught English to university students in Rzeszow, Poland, while immersing herself in the local culture. She conducted a medical research project within Alaskan native populations as the Anne C. Carter Global Health Fellow for the American Medical Women’s Association, and worked in subarctic Canada at the Institute for Circumpolar Health Research. As a physician she looks forward to strengthening the health of her community and supporting long-term relationships with patients at both their healthiest and most vulnerable moments. She is an enthusiastic vegetable and herb gardener and loves baking desserts. She keeps active by hiking with her rescue dog Jake, running, and yoga.



Samantha Lease, DO (PGY-2) is from St. Cloud, Minnesota. As an undergraduate she studied biochemistry, music, and Hispanic studies, and is fluent in Spanish. While a medical student at Des Moines University Sam was selected as an Osteopathic Manipulative Medicine (OMM) Teaching Fellow and taught OMM to first and second-year medical students, while also working in an OMM clinic where she further honed her skills. She is particularly interested in preventative medicine, lifestyle management, and Osteopathic Manipulative Treatment (OMT). Sam loves the broad scope of family medicine and looks forward to offering her community a wide range of services. She enjoys the variety of patient encounters and management needs that family medicine provides. Outside of medicine, she has a variety of interests and hobbies. She is an accomplished musician, playing both the harp and piano. In addition, she is a published author, having written a novel in her spare time. Sam and her partner enjoy spending time together and living as modern homesteaders.



Supriya Paidemarry, MD's (she/her/hers) (PGY-1) approach to medicine is that every patient is a person, and behind every person is a story. She strives to build trusting relationships with her patients so she can join their story and provide healthcare that is personalized to each patient’s story and community. Supriya grew up in the metro Detroit, MI area before moving to Baltimore to earn her undergraduate degree in molecular and cellular biology and psychology from Johns Hopkins University. She then moved to Phoenix, AZ, where she was an AmeriCorps member who worked with and advocated for survivors of intimate partner violence. She went on to earn her medical degree from the Saint Louis University School of Medicine. While in medical school, she volunteered as a job coach for individuals who were recently released from prison. She also conducted addiction medicine research that was focused on older adults who use prescription opioids. Supriya appreciates the ability foster long-term, meaningful relationships with her patients. While she enjoys full-spectrum care, she is particularly interested in women’s health, pediatrics, and mental health. She unwinds by playing with her cat, traveling, trying new restaurants, baking, and watching TV shows.



Kailin Randolph, MD (she/her) (PGY-3), is a family physician because of the opportunity to see patients of all ages and across generations. She enjoys building long-term relationships with her patients and helping them achieve their health goals. She is passionate about understanding and addressing the complex factors that impact patients' health. Kailin earned her bachelor's degree in applied health science and a certificate in Human Needs and Global Resources from Wheaton College. She completed an internship at a hospital in Uganda in which she saw firsthand the importance of addressing social determinants of health and increasing access to healthcare. After college, she earned her master's degree in teaching from Dominican University. Her participation in Teach for America and time in the classroom shaped Kailin's desire to go into primary care. She is thankful to her students and their families for the countless lessons in leadership, communication, authenticity, and relationships. Kailin attended the Chicago Medical School at Rosalind Franklin University of Medicine and Science and was an active volunteer at the Interprofessional Care Clinic and learned the importance of allowing patients the time and space to communicate their care goals. Kailin can often be found hiking, running, cooking, crossword puzzling, and taking long walks with her dog.



Rutvi Shah, MD (she/her) (PGY-3), is drawn to family medicine because she appreciates the continuity of care and the ability to build long-term relationships with patients and families. She is from Madison, WI and she earned both her bachelor's degree in biology and her medical degree from the University of Wisconsin – Madison. While in medical school, she served as her class representative and as a leader in the Family Medicine Interest Group. She participated in a research experience examining workflow patterns among primary care physicians, with the ultimate goal of advocating for system changes to improve physician satisfaction and reduce burnout. Rutvi is passionate about STEM education and has mentored students and volunteered at local schools and science fairs to teach kids about careers in medicine. She enjoys seeing the variety of patients in clinic and works with them to address acute and chronic concerns. She enjoys the wide range of procedures that family physicians include in their care, and she is always looking for opportunities to be involved in patient advocacy and community engagement. She can often be found spending time with family and friends, traveling (she's visited 25+ states so far), playing cards and board games, and exploring all Madison has to offer, from restaurants to walking trails.



Kyle Sherwin, DO (he/him) (PGY-3), is from St. George, UT and he earned his bachelor's degree in Exercise Science from the University of Utah. He earned his medical degree from Midwestern University Arizona College of Osteopathic Medicine. While in medical school, Kyle completed an osteopathic fellowship during which he spent additional time training in the osteopathic manipulative medicine (OMM) clinic, completing research and service projects, and teaching OMM to junior medical students. He was also involved in various mental health outreach events on campus, and he founded a resiliency forum that provided students a place to discuss ideas on building and maintaining resiliency throughout medical school. Kyle is drawn to family medicine because he is committed to providing the human connection patients need to achieve their healthcare goals. He also loves the breadth of care offered which allows him to care for patients in a variety of ways and tailor care to each individual need. Kyle relaxes by playing sports, exercising, cooking, reading, studying philosophy, and playing along with *Jeopardy!*



For **Kellie Steele, MD, MPH (she/her/hers) (PGY-1)**, to practice family medicine is to treat patients within the clinic, engage with communities, and address health disparities systematically. Kellie is from Metamora, IL and she earned her bachelor's degree in biology, chemistry, and Spanish from Greenville University in Greenville, IL. After graduation, she spent a year in the Dominican Republic doing community health work in the areas surrounding Jarabacoa. This work included hosting mobile rural primary care clinics, conducting home visits, and leading health education talks at local schools. Kellie then returned to Illinois and earned her medical degree and her master's in public health from Loyola University Chicago Stritch School of Medicine. While in Chicago, she participated in an interprofessional collaborative that was formed to help mitigate the impacts of COVID-19 on the local underserved community. She also was involved in a local food pantry; by helping with set-up and food distribution, she found joy in connecting with clients through shared recipes. Kellie is dedicated to providing broad spectrum care and she has specific interests in public health and community engagement, rural medicine, women's health, obstetrics, and gender-affirming care. Outside of the clinic, Kellie enjoys hiking, backpacking, camping, reading, and knitting.



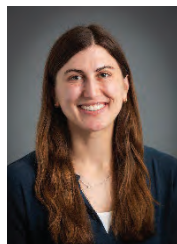
Molly Vernon, MD (PGY-3), enjoys the variety and scope of care she is equipped to provide as a family physician. She is committed to serving both individual patients and helping communities thrive. She is originally from Chapel Hill, NC and grew up as a huge UNC sports fan. She studied Health Sciences at Furman University, and she earned her medical degree from the Virginia Commonwealth University School of Medicine. She is committed to building strong relationships with her patients and earning their trust so they can partner to achieve their healthcare goals. She is passionate about women's health and advocacy, reproductive health, and gender affirming care. She is also committed to working with patients and families to address the obesity epidemic. She employs motivational interviewing and partners with patients to develop actionable goals to promote healthy lifestyles. Molly's interests also include lifestyle medicine, family planning, and advanced gynecological procedures. She can often be found baking, cooking, playing sports, and exploring the outdoors. Her favorite Saturday morning activity is getting fresh produce from the farmers market and cooking for the week.

Wingra Residents



Parker Brown, DO (he/him/his) (PGY-1) is from Portland, OR and earned his bachelor's degree in general science from the University of Oregon. While an undergraduate student, he worked as an HIV and HCV testing technician and counselor at The HIV Alliance. His time with The HIV Alliance is what drew him to be a physician and what taught him the importance of providing compassionate, nonjudgmental care. He also was a certified nurse assistant in long-term care and post-acute rehabilitation facilities. These experiences reinforced the importance of building trusting, long-term relationships with his patients. He attended the Kansas City University College of Osteopathic Medicine. While in medical school, he volunteered with Counseling and Testing Services (CATS) at KC Care, a community clinic in Kansas City. This role further solidified his interest in full-spectrum family medicine, addiction medicine, HIV and HCV medicine, and gender-

affirming care. His goal is to provide comprehensive primary care for all patients, with a special focus on working with patients with substance use disorders. Outside of medicine, Parker enjoys making ceramics and pottery, cheering for the Oregon Ducks football team, and exploring the great outdoors by hiking and camping.



Sophie Chatas, MD (she/her) (PGY-2) is interested in full-spectrum family medicine, with interests in community engagement and women's health. She looks forward to continually expanding her knowledge of health issues, building enduring relationships with patients, and serving as an advocate in a complex healthcare system. While a medical student at the University of Michigan, Sophie was committed to improving the medical education experience for all students as chair and member of a learning environment task force. She further developed her advocacy skills through mentoring, projects for at-risk populations, and support groups aimed at mental wellness. Growing up in Columbus, Ohio, Sophie fell in love with Williamstown, Massachusetts, where she attended Williams College. Sophie loves running and spending time outside. She enjoys baking and ice cream making and unwinds by reading on the couch with her two cats.



Mario J Giacobassi, MD (he/him) (PGY-2) has had an adventurous journey to becoming a family medicine physician. Growing up near Milwaukee, he moved to Utah and got a degree in Emergency Services Administration. He spent six years as a wildland firefighter, then worked in neuroscience research studying the mechanisms of pain and sensation. While in medical school he became a father to two children, which shaped his medical school experience. Mario enjoys the broad scope of practice within family medicine and appreciates the opportunity to build longitudinal relationships with patients. He enjoys taking his kids to the woods, backpacking, camping, or even just short walks after school. Mario plays the violin and piano, which has become part of his children's bedtime routine. He loves cycling- from mountain biking to commuting year around and enjoys weightlifting.



Kameron Haake, MD (she/her/hers) (PGY-1) comes to family medicine with a strong passion for community engagement and building strong relationships with patients. She claims both Springfield, MO and Albuquerque, NM as her hometowns. She earned her bachelor's degree in biochemistry from the University of Denver and her medical degree from the University of Missouri – Columbia. Prior to entering medical school, Kameron worked as a medical assistant at a family practice office where she saw firsthand the importance of caring for multiple generations of the same family and fostering deep connections with patients. In medical school, her passion for health policy and advocacy flourished; she was involved with the American Medical Association and learned to use her voice to help protect patients' healthcare interests. Kameron also completed an Indian Health Service rotation with the Menominee Tribe; this experience highlighted the importance of recognizing and respecting cultural influences on healthcare while also highlighting the joy and barriers of rural medicine. Her interest areas include full-spectrum family medicine, academics, education, and community and public health. Outside of the hospital and clinic, Kameron can be found exploring the great outdoors, knitting, crocheting, woodworking, and exploring with her partner and their dog.



Kimberly Krawzak, MD (she/her) (PGY-3), was born and raised in Streamwood, IL. She earned her undergraduate degree in Biology and Biochemistry from Lawrence University in Appleton, WI. While in Appleton, Kimberly volunteered with a local hospice organization, where she enjoyed getting to know patients and their families and sharing in their grief, happiness, and nostalgia. She returned to Illinois and earned her medical degree from the University of Illinois College of Medicine – Peoria. As a member of the public health interest group, Kimberly helped organize the annual Health Disparity Forums for the local community. Her experience coordinating the disability and ableism workshop helped shape her passion of working to ensure that healthcare services are accessible to all patients. She also conducted research on patients’ experiences utilizing food pantries, soup kitchens, and government assistance to combat food insecurity. This has inspired her to think creatively about working with patients and building coalitions of community partners to break down complex social situations. Kimberly strives to provide public health-informed family medicine to resolve health disparities and provide holistic patient care. Kimberly’s hobbies include collecting indoor plants, finding new places to eat, hiking, singing, painting, video games, and enjoying the next big Netflix show.



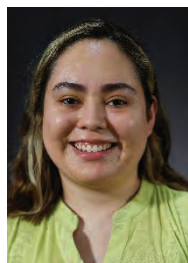
Evelyn Luner, MD (she/her) (PGY-3), is drawn to family medicine because of the ability to form long-term relationships with patients and partner with them in their care. She is also passionate about community engagement and advocating for her patients. Her underlying approach to medicine and community health is doing the small acts that make things better for patients and communities. Evelyn is from Waterford, CT and she earned her undergraduate degree in Neuroscience and Public Health from the College of William and Mary. She worked as a clinical

research coordinator at Massachusetts General Hospital, where she discovered how much she enjoyed working directly with patients and developing relationships with them. While in medical school at the University of Connecticut, she participated in the Urban Service Track program which sparked her interest in working with urban and underserved populations, as well as a desire to partner with communities to address social determinants of health and healthcare disparities. Evelyn is passionate about women’s health, reproductive justice, advocacy, public health, primary care, health equity, and gender-affirming care. When Evelyn is not in the clinic, she enjoys hiking, cooking, baking, yoga, reading, and exploring new coffee shops and restaurants.



Ulochi Nwagwu, MD, MPH's (she/her/hers) (PGY-1) path to medicine was shaped by her journeys through Chicago, IL, Atlanta, GA, Guadalajara, Mexico, and St. George’s, Grenada. She grew up in the under-resourced neighborhood of Englewood in Chicago, which instilled in her resilience and determination to overcome obstacles. She earned her bachelor’s degree in community health from the University of Illinois – Urbana-Champaign and her master’s in public health from Emory University. She worked extensively in public health and clinical research, which provided her the opportunity to build relationships with patients and listen to their stories, which deepened her appreciation for the human aspect of healthcare. Ulochi participated in global health experiences in which she learned to be resourceful and adaptable in providing care. The experiences also broadened her perspective on healthcare disparities and challenged her to contribute to innovative solutions. Ulochi earned her medical degree from St. George’s University School of Medicine. She is drawn to family medicine because of her wide-ranging interests in women’s health, obstetrics, gynecology, adolescent and pediatric reproductive health, dermatology, preventative

medicine, and lifestyle medicine. Ulochi spends her free time journaling, thrifting, cooking, baking, and exploring perfumery and nail artistry.



Alejandra Pineda, MD (she/her/hers) (PGY-1) is passionate about engaging with her communities and using her voice as a physician to advocate for patients as both individuals and as communities. Alejandra grew up in Elgin, IL. She earned her undergraduate degree in biochemistry and molecular biology from the University of Miami. She returned to Illinois to earn her medical degree from the University of Illinois College of Medicine – Peoria. While in medical school, Alejandra started a mobile food pantry that provided culturally appropriate healthy foods and recipes to the Hispanic population in Peoria. This experience affirmed her passion for community engagement as she was able to successfully connect with the Hispanic community and bring medicine through food. She enjoys practicing family medicine because of the unique opportunity to be a part of her patients’ lives and become extended family to her patients. Alejandra is passionate about mental health, addiction medicine, women’s health and obstetrics, and procedures. Outside of the clinic and hospital, Alejandra can often be found enjoying arts and crafts, exploring trails either on foot or on a bike, trying new recipes, rewatching tv shows, and spending time with family and friends.



Samantha Prince, MD (she/her) (PGY-2) has always called Wisconsin home, having lived in Oconomowoc, Milwaukee, and Madison. She obtained her bachelor’s degree from UW-Milwaukee in Cell and Molecular Biology and Women’s and Gender Studies. Samantha is drawn to the breadth of practice in family medicine. She is looking forward to developing long-term connections with patients and building relationships with entire families. She has been shaped by her experience participating in TRIUMPH- the Training in Urban Medicine and Public Health program- working on a community project involving assessing traumatic brain injury in survivors of domestic violence. Co-leading a medical humanities interest group fostered her interests in women’s health, gender-affirming care, disparity in public health, mental health, and palliative care. Samantha loves traveling anywhere and everywhere, finding new places to go hiking with her partner. She recharges by painting, playing with her cat and dog, and watching movies.



Zoe Roth, DO (she/her) (PGY-2) hails from the Rocky Mountains where she attended the University of Colorado-Boulder and the Rocky Vista University College of Osteopathic Medicine. She is interested in osteopathic manipulative medicine (OMM), sports medicine, healthcare advocacy, LGBTQIA+ healthcare, gender affirming care, and Latinx healthcare. As a sports medicine intern for the University of Colorado Athletic Department, Zoe worked with the women’s basketball, volleyball, and lacrosse teams. She was a founder and president of the Osteopathic Medical Student Coalition of the Colorado Society of Osteopathic Medicine. An avid photographer, Zoe shared her love of subject, composition, and light by teaching photography to children and teens battling cancer through the PabLove Foundation. She is fluent in Spanish and is passionate about bridging communication barriers and providing inclusive, unbiased, and equitable care. Zoe stays active with powerlifting, CrossFit, mountain biking, and snowboarding.



Elisabetta (Betta) Tyrriver, MD (she/her) (PGY-3), hails from the Madison and Fox Cities metro areas. Prior to starting college, she was a Rotary Exchange Student in Lima, Peru, which introduced her to global health and where she gained Spanish fluency. Betta attended Johns Hopkins University and earned her degree in Public Health Studies. She then served as a Global Health Fellow for a non-profit in Thomassique, Haiti where she partnered with community health workers and clinic staff to improve their child malnutrition program, pre- and peri-natal services, and disease prevention and chronic disease management offerings. She earned her medical degree from Loyola University Chicago Stritch School of Medicine. Betta spent the summer after her first year in medical school in the rural Peruvian Amazon interviewing community members, patients, and clinic staff to conduct a community health needs assessment. She also volunteered with the Community Health Clinic in West Town, Chicago to provide medical care to low-income, uninsured Chicagoans. Betta is interested in women's and reproductive health, LGBTQ+ healthcare, global health, substance use, and integrative medicine. Outside of the clinic, Betta can often be found cooking Italian food and hosting dinner parties, biking around the city with her husband, travelling, and listening to podcasts.



Aimée Wattiaux, MD (she/her) (PGY-3), is originally from Madison, WI, and she values personal connection with patients and enjoys working with people in the context of their community, values, and lived experiences. She earned her undergraduate degree in Biology from McGill University. She returned to Madison and worked as a certified nursing assistant at a long-term acute care facility. From this, she learned firsthand about the importance of interdisciplinary teams to support the physical and psychosocial wellbeing of medically complex patients.

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