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BUCKEYE OSTEOPATHIC PHYSICIAN MAGAZINE

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For advertising information: 614-299-2107, cmarkino@OhioDO.org

Executive INSIGHT

Strengthening the Osteopathic Continuum

By Matt Harney, MBA, CAE

Just as osteopathic medicine takes a holistic view of wellness, the OOA takes a holistic approach to membership and the profession. The OOA seeks to serve our members regardless of where they are in their career—whether they are a student, resident, or a seasoned DO. Every step of the journey is important for future success—both for the individual as well as the profession more broadly.

Professional membership organizations like the OOA unite behind a common cause. This is true across industries and regardless of whether the organization represents individuals or entities.

The osteopathic profession has occasionally been challenged in its efforts to easily define its distinctiveness—which serves as the heart of this common cause. Perhaps this is true because there are many ways to do it (and many things to love about osteopathic medicine!). We can talk about emphasizing prevention, the use of osteopathic manipulative treatment to resolve somatic dysfunction, the interrelationship between structure and function, and the unity of body, mind, and spirit. All are important in making osteopathic medicine truly unique. This uniqueness must be protected, strengthened, and widely shared.

As COMs continue to grow and the number of osteopathic graduates skyrocket, it will be increasingly important to promote this essential distinctiveness of osteopathic medicine. This is even more true following the transition to single accreditation as well as changes in “joining behavior” of younger demographics as it relates to professional organizations.

Reinforcing osteopathic philosophy is important at each step of the continuum—starting with recruiting and accepting students genuinely motivated by this comprehensive form of



wellness, then expanding and bolstering OR (Osteopathically-Recognized) programs, and ultimately supporting osteopathic principles and practices through lifelong learning. Combine this with engagement and association membership all along the way and we have very likely reshaped health care for the better.

It is our professional responsibility to deliberately spotlight and connect the segments of the osteopathic continuum. The degree of fulfillment of this mission will surely define our sustained success in the decades and generations to come. Undoubtedly, any one segment that falls short can harm any segment of the continuum thereafter. This effort to strengthen the continuum is essential for associations but it's also of great importance for the rest of the osteopathic family and partners.

In addition to working on behalf of the OOA and our foundation, the Ohio Osteopathic Foundation; I have the honor of serving as Vice President of the National Association of Osteopathic Foundations. In that role, I enjoy the charge to develop programming for my colleagues. My goal has been to spotlight opportunities to align the distinctiveness of osteopathic medicine with philanthropic priorities. Opportunities exist at every segment of the osteopathic continuum—and the OOA encourages your participation in this effort.

Together—as an osteopathic family—we will strengthen the connection from osteopathic student to resident to attending DO and positively impact patient care throughout the world! ■



Gwilym Leads the OOA

Jennifer L. Gwilym, DO, a family physician from Athens, was installed as Ohio Osteopathic Association president for 2022-2023. The ceremony was held in-person at a special luncheon at the Ohio Osteopathic Symposium, held April 28-May 1 in Columbus.

A member of the OOA Board of Trustees since 2014, she has been actively involved in organized medicine for many years—particularly health policy issues—and chairs the OOA Legislative Committee and serves on the Ohio Osteopathic Political Action Committee. She was Ohio ACOFP president in 2019-2020 and currently serves on the American Osteopathic Association Commission on Osteopathic College Accreditation.

Gwilym has held numerous leadership positions at Ohio University Heritage College of Osteopathic Medicine where she serves as interim chair for the Department of Primary Care and assistant professor of family medicine. She has served as a clinical faculty member since 2007.

She is the recipient of numerous honors, including Clinical Faculty of the Year and Family Medicine Educator of the Year. ■



Symposium in Photos

The annual Ohio Osteopathic Symposium returned in person this spring (April 28-May 1), the first time since 2019 due to the COVID-19 pandemic. The continuing medical education program offered 29 AOA category 1-A credits as well as the opportunity to attend virtually.

The Symposium covered a variety of medical topics, including a compelling patient story from Keynote Speaker Adan Fuentes, DO, of Dayton who shared details of his own battle with COVID-19. Attendees heard how his experience changed his approach to medicine. →





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2022 Award Winners

Osteopathic physicians across Ohio are doing tremendous work for the profession, their patients, and their communities. Those accomplishments were recognized at a special ceremony and evening reception during the Ohio Osteopathic Symposium. The Ohio Osteopathic Association (OOA), Ohio University Heritage College of Osteopathic Medicine Society of Alumni and Friends (OU-HCOM), and Ohio State Society of the American College of Osteopathic Family Physicians (Ohio ACOFP) presented their highest honors.

OOA Life Members

John S. Belany, DO
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Katherine A. Clark, DO
John A. Cocumelli, DO
Jeffrey R. Cohen, DO
Robert J. Downey, DO
Douglas A. Dunlap, DO
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David M. Zapf, DO →



OOA Distinguished Service Award

Geraldine N. Urse, DO
Columbus



OOA Trustees Award

Eugene D. Pogorelec, DO
Massillon



M. Terrance Simon, DO
Massillon



OOA Meritorious Service Award

Sandi Foster, PhD
Warren



**M. Bridget Wagner, DO,
Humanitarian Award**

Allan Miller, DO *posthumously*
Toledo



**OOA/Osteopathic Heritage
Foundations George L. Eckert, Jr.,
DO, Mentor of the Year**

Ronald J. Russ, DO
Hudson



**OOA/Osteopathic Heritage
Foundations JO Watson, DO,
Memorial Lecture Award**

Mitchell J. Silver, DO
Columbus



**Ohio ACOFP Family Physician
of the Year**

James E. Preston, DO
Sandusky



**Ohio ACOFP Distinguished Service
Award**

Edward E. Hosbach II, DO
Fort Recovery



**Ohio ACOFP Young Family Physician
of the Year**

Ryan K. Bleck, DO
Hicksville



**Ohio ACOFP Family Medicine
Resident of the Year**

Amy N. Horwitz, DO
Center for Family Medicine, Lakewood



OU-HCOM Medal of Merit

Gregory Hill, DO
Copley



**OU-HCOM Distinguished Service
Award**

Jennifer J. Hauler, DO
Tipp City



OU-HCOM Outstanding Alumnus

Mark A. Foglietti, DO
Chagrin Falls



OU-HCOM Honorary Alumnus

Wayne R. Carlsen, DO
Athens



OU-HCOM Recent Graduate Award

Kristin Astrom, DO
Nevada ■



House of Delegates Sets Policy

Nicklaus J. Hess, DO, of Dayton, was elected OOA president-elect at the OOA House of Delegates, held April 29, 2022. He is board certified in family medicine and OMT and works with residents and students. The elected slate of officers also includes Vice President Douglas W. Harley, DO; and Treasurer Edward E. Hosbach II, DO. Speaker of the House David A. Bitonte, DO; and Vice Speaker of the House Michael E. Dietz, DO, were both re-elected. Two Ohio Osteopathic Foundation board members were elected, Richard Manchur and Sharon George, DO. Delegates adopted four amendments to

the Constitution and Bylaws and considered eight resolutions, including one new policy position to fight medical misinformation. The resolution, which passed unanimously, encourages education of the general public on how to interpret medical information to determine its legitimacy. It was taken up by the AOA House of Delegates in July where it was referred back for clarification.

Two Reference Committees with physicians representing each of the OOA's 10 districts met via videoconference two weeks prior to the House session. Melinda E. Ford, DO, of Athens, and Edward E. Hosbach II, DO, of Fort Recovery,

chaired the committees. Members included John C. Baker, DO; Sandra L. Cook, DO; Nicole Danner, DO; Nicholas G. Espinoza, DO; Andrew P. Eilerman, DO; Sharon L. George, DO; Jennifer L. Gwilym, DO; Douglas W. Harley, DO; Mark S. Jeffries, DO; Gordon J. Katz, DO; Nicholas J. Pfleghaar, DO; James R. Pritchard, DO; Nathan P. Samsa, DO; Joseph S. Scheidler, DO; Sean D. Stiltner, DO; Henry L. Wehrum, DO; Robert A. Zukas, DO; and Ayoub Harb, OMS-I.

About 75 people attended the House—including a group of Doctors Hospital family medicine residents who were guests. ■

Annual Research Competition Takes Hybrid Approach

The annual osteopathic research competition held in the spring was a hybrid approach this year as abstract submissions were narrowed to the top 20 who were then invited to submit a brief video presentation, which was peer reviewed. Five winners were chosen to do in-person podium presentations at the Ohio Osteopathic Symposium, April 30. The remaining were invited to display posters of their research.

The competition was open to medical students, interns, residents and fellows, but only biomedical/clinical research projects were eligible.

The Osteopathic Poster Competition started in 2003 as a small statewide contest. It grew into a regional contest and, pre-pandemic, had entries from as many as 11 states and cash prizes of more than \$3,000.

Five students from Ohio University Heritage College of Osteopathic Medicine were recognized for their scholarly work this year:

Jonathan Major, OMS III

Targets for Intervention: A Glance at the Risk Factors Contributing to Rising Hypertensive Disease Burden in Lima, Peru

Nathan Gregg, OMS II

Understanding the Viability of the Novel Material Onyx™ for use in Total Knee Arthroplasty Instrumentation Sets

Marija Rowane, OMS IV

Predictors of intravenous immunoglobulin influence on fractional exhaled nitric oxide levels in common variable immunodeficiency

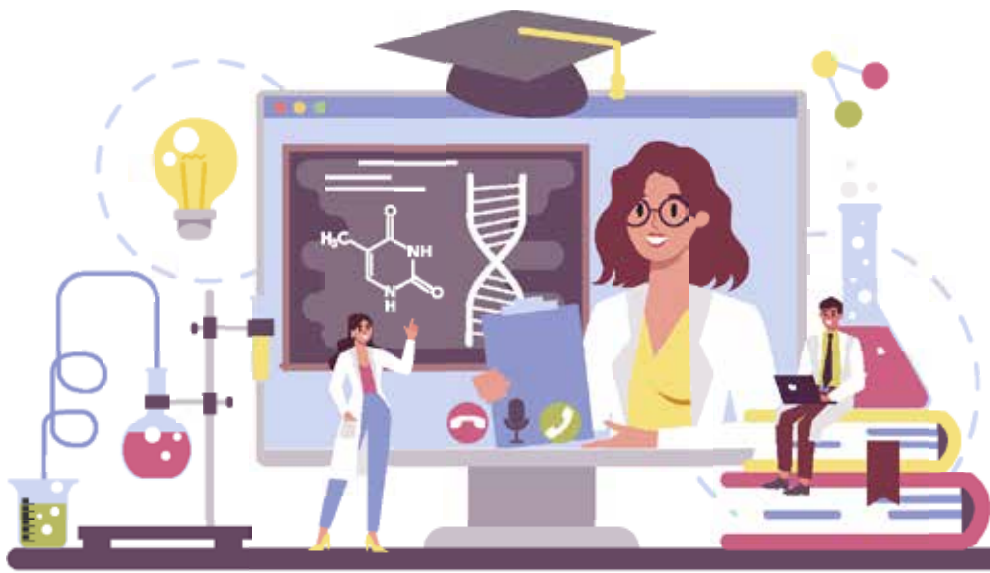
Joseph Miller, OMS II

Pediatric Lateral Humeral Condyle Fractures: Reliability of a Modified Jakob Classification System and Its Impact on Treatment Planning With or Without Arthrography

Nathaniel Starcher, OMS II

Correlation of Lisfranc Injuries with Regional Bone Density ■





Number of DOs, OMS is at **All-Time High**

The osteopathic medical profession has experienced another year of record-breaking growth, according to the latest Osteopathic Medical Profession (OMP) Report.

Each year, the American Osteopathic Association produces the OMP Report to track expansion and growth within the osteopathic medical profession and examine demographics and trends related to DOs and osteopathic medical students.

Ohio continues to be an osteopathic hot spot. While DOs practice medicine in all 50 states, half of DOs practice in eight states: California, Pennsylvania, Florida, Michigan, New York, Texas, Ohio and New Jersey. In addition, Ohio is home to the Heritage College of Osteopathic Medicine with campuses in Athens, Dublin, and Cleveland.

Over the last decade, the number of students attending osteopathic medical schools has grown by 77%, leading to an overall increase in the total number of DOs and osteopathic medical students in the US of 81%. This increase brings the total number of DOs and students to over 178,000 across the country, another all-time high. In the 2022-23 academic year, approximately 36,500 osteopathic medical students are attending DO schools, an all-time high.

Growing number of trainees, young DOs

Approximately 36,500 osteopathic medical students are learning at 38 colleges

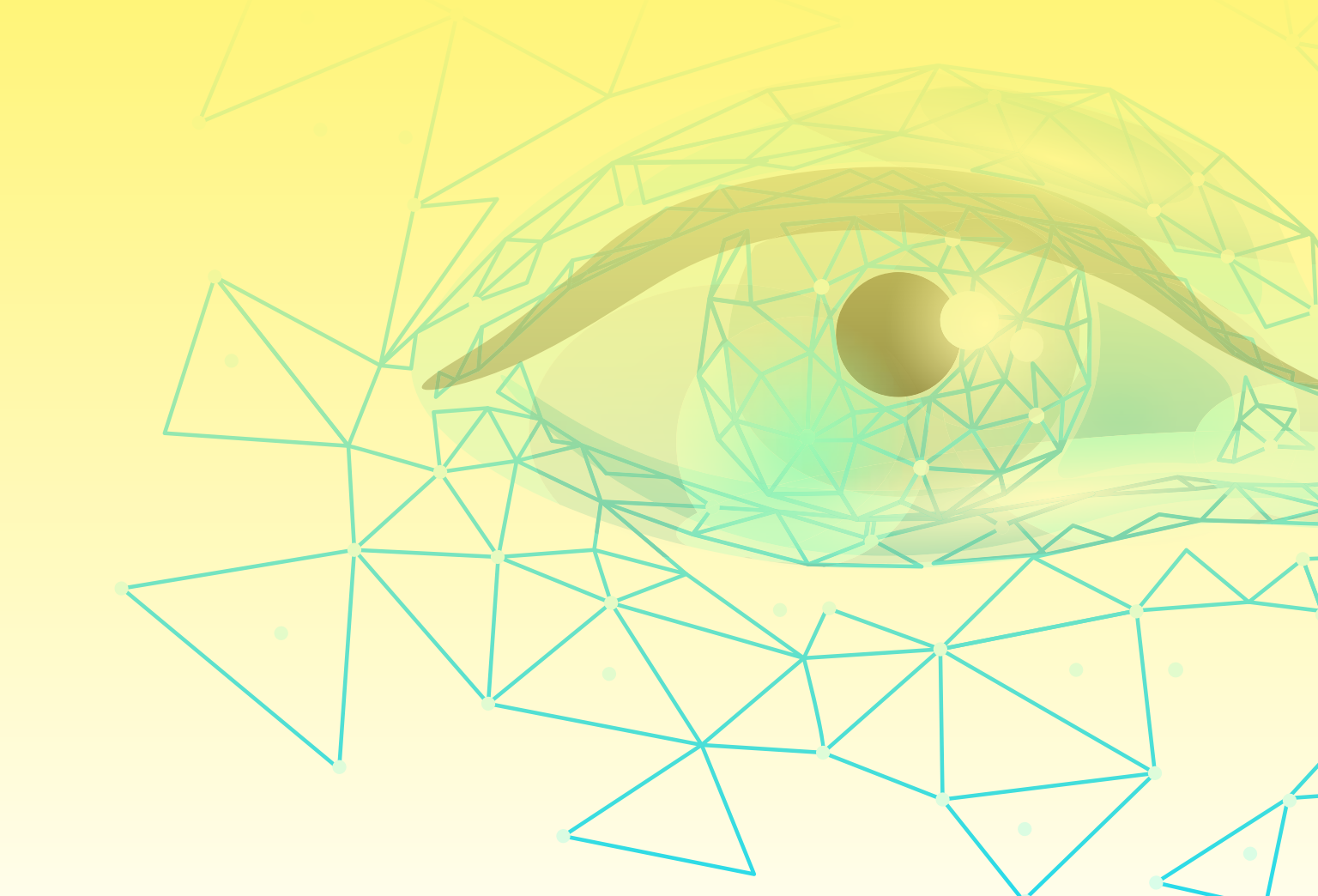
of osteopathic medicine, according to the AOA's Commission on Osteopathic College Accreditation (COCA). More than one in four of all US medical students choose to pursue osteopathic medicine. As more medical students choose osteopathic programs, the demographic makeup of the profession continues to evolve.

More than 82,000 DOs practicing in the US are younger than 45, representing over two-thirds of the profession; there are over 141,000 DOs in the US. Additionally, more females are choosing to become DOs; over the last decade, the number of female DOs has risen by 18% and is expected to continue growing.

Specialty breakdown

Over half of the nation's DOs currently in practice are in primary care specialties such as family medicine, internal medicine and pediatrics while the remainder provide care in specialties like emergency medicine, obstetrics and gynecology, surgery and many more.

Osteopathic medical schools comprised of all of the top five and eight of the top ten spots on the *US News & World Report* list of medical schools with the most graduates practicing in primary care. Overall, 24 osteopathic medical schools were ranked in the top 50 schools on the list. DO schools were also featured prominently in the publication's list of medical schools with the most graduates providing direct patient care in rural areas, showing the osteopathic profession's commitment to underserved populations. ■



Using Health Surveillance Data to Assess Barriers to Vision Care in the State of Ohio

In 2016, the National Academies of Science, Engineering, and Medicine (NASEM) released a report outlining the importance of vision as a public health challenge.¹ The findings of this report highlighted the need for increased integration of vision into more holistic approaches to healthcare. The authors examined core principles and public health strategies needed to reduce visual impairment and promote eye health in the United States, which they noted was under-resourced and under-appreciated. This assessment included short- and long-term strategies that prioritized eye and vision health through collaborative actions across a variety of topics, settings, and different sectors of communities and levels of government. At the conclusion of the report, the committee outlined several recommendations to address the gaps in knowledge, research, clinical practice, and policy as it relates to vision health and vision impairment. These recommendations included a need to identify and eliminate barriers within healthcare and public health systems to →

eye care, especially comprehensive eye exams, appropriate screenings, and follow-up services, as well as items and services intended to improve the functioning of individuals with vision impairment. The report underscored the need to encourage physicians and health professionals to ask and engage in discussions about eye and vision health as part of patients' regular office visits. These discussions could be particularly impactful when encouraging patients to seek eye care services, as the most common causes of irreversible vision loss are often asymptomatic in the earliest stages. Early detection and effective management of many sight-threatening conditions could result in a considerable reduction in avoidable vision loss. The National Eye Institute, for example, notes that 95% of vision loss caused by diabetic eye disease is avoidable.² This is a considerable public health challenge, as diabetic eye disease represents the most common cause of permanent vision loss in the working-age adult population in the United States.³

Understanding barriers to care is an important step in addressing this challenge. In addition to more collaborative approaches to address vision health, the NASEM report noted a need to build state and local public health capacity, coordinated by the Centers for Disease Control and Prevention. This recommendation recognized the importance of partnerships between state-based chronic disease programs and other clinical and non-clinical stakeholders. The NASEM recommendations stressed the need to integrate eye-health outcomes, objective clinical measures, and risk/protective factors into existing clinical-health and

population-health data collection forms and systems. This includes analyzing, interpreting, and disseminating information to the public in a timely and transparent manner. Some of the most useful data are those found in population-based epidemiologic and clinical research on the major causes and risks and protective factors for vision impairment.

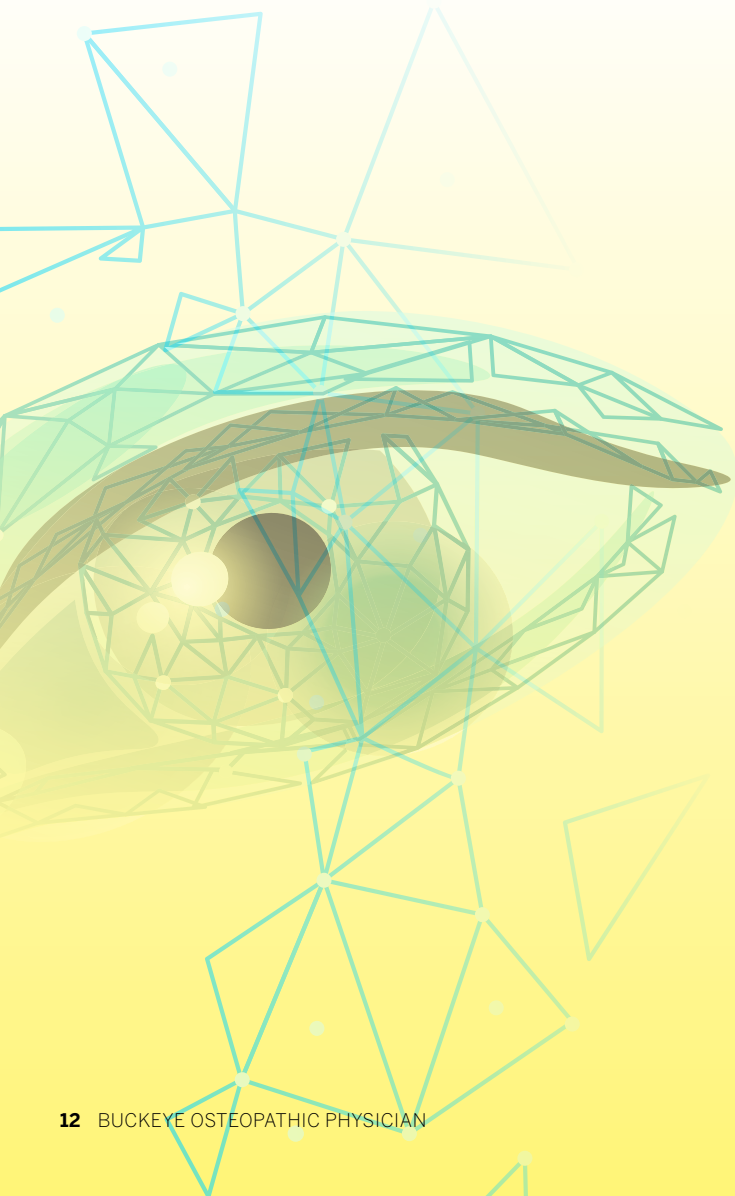
As part of a pilot project funded by the Centers for Disease Control and Prevention and the National Association of Chronic Disease Directors, Ohio State University, the Ohio Department of Aging, and the Ohio Affiliate of Prevent Blindness began working on a collaborative project, using population health surveillance data to identify important barriers to vision care utilization. The state of Ohio has been uniquely proactive when collecting vision-oriented data through population health surveys, including the Behavioral Risk Factor Surveillance System (BRFSS), which can be used to better understand vision care utilization patterns and access to insurance. Using data collected from 2005-2011 (pre-Medicaid expansion) and comparing to data collected from 2018-2019 (post-Medicaid expansion), we found that utilization of vision care services remained relatively stable, despite the fact that the number of individuals reporting insurance coverage that included vision care services increased across all demographic categories. The primary reason for not seeking vision care services remained consistent, with the main reason for not seeking vision care services was the perception that there was no need to do so.

Because of the asymptomatic nature of many sight-threatening diseases, increased access and utilization of vision care services has the potential to reduce preventable vision loss. Health literacy and recognition of the importance of vision health continues to represent a considerable barrier to addressing avoidable vision loss. Previous research suggests that primary care physicians can play an important role in facilitating discussions that result in improved utilization of vision care services. A report by the National Eye Institute released in 2005 found that primary care physicians were more influential in recommending eye care than any other individual, including an individual's friends and family.⁴ Those experiencing vision loss also experience other systemic chronic conditions at higher rates than those without vision loss.^{5,6,7} Our recent findings suggest that the future of vision health in the state of Ohio could truly benefit from the influence of primary care physicians in advancing health literacy in vision eye care.

Acknowledgement: This article was made possible with the support of Prevent Blindness, Ohio Affiliate.

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The Baby Bag Project Helps Mothers in Need

The birth of a newborn should be a time of rejoicing, connection and leaning into paternal instincts. However, it is not always a happy moment for every new mother. Some parents lack the resources or funds to give their newborn everything that's needed, and poor health outcomes may result. Four students from Ohio University Heritage College of Osteopathic Medicine have partnered in an effort to help ease the concerns of parents facing disparity.

Aptly named "The Baby Bag Project," Class of 2022 graduates and project co-founders Saron Checkole, Ziyue Wang, Alicia Rodgers and student Ayah Said have all worked together to compile bags of infant supplies to deliver to parents who can't afford them.

"It was started by medical students about maybe two years ago now, and its aim is to raise funds to then use those funds to buy resources that help with infant mortality and basic child rearing during the newborn up to infant stages," Wang said.

Born in China, Wang moved to Columbus when he was three. As an undergraduate at Ohio State, he studied abroad in Finland, which has had a "baby box" program for over 70 years. After starting medical school at the Heritage College, Wang continued to think about the program. He approached Checkole about it. The two were diversity scholars and had collaborated on other projects promoting racial awareness and socioeconomic disparities.

"At the end of our two years of working together during pre-clinical in Athens, we looked at each other during the COVID pandemic and said, why don't we do something? We're both clearly interested in this. Why don't we try to start something?" said Wang. →





Checkole was raised in Ethiopia and witnessed the consequences of health care disparities, including the death of her uncle from leukemia when she was fifteen. These experiences fueled Checkole's involvement in the project.

"Growing up in a third world country with multiple health care disparities including physician shortage, lack of easy access to health care, lack of medication and treatment facilities, I understand why my uncle had poor outcomes," Checkole said. "This project is very near and dear to my heart. I have always had the passion for caring for underserved populations and underrepresented minorities, and the project directly helps those who are impacted by social determinants of health."

The project has two main stages: fundraising, then distribution of the supplies. When one set of kits is handed out, the fundraising has already begun for the next set. This cyclical structure works best to meet the need for supplies. Wang has been pleased with the amount of support the project has received.

"It'd be difficult for us to coordinate all of this ourselves, so it has been incredibly encouraging that there is a heart still in the medical community for something like this," said Wang. "A lot of people have seen a space that needs something like this. That's been incredibly encouraging and certainly has been something that's made me feel a lot better about my career choice."

For Rodgers, also a co-founder of the Baby Bag Project, the statistics concerning infant mortality are disturbing.

"Specifically in Ohio and its major metropolitan areas, there is a huge gap in babies of color who make it to their first birthday,"

Rodgers said. "The number is too high. It has improved, but it's still higher than the national average, and even the state average for babies of color. We provide items like diapers and nursing clothes in bottles and materials like that, that can really help offset costs."

Recent addition to the team, Ayah Said, joined the project with the mission of helping others in need. "From reading the stories from the moms who are participating in this project, it seems to just reinforce how much I do want to help women, especially underserved women, in our community," said Said. "We've seen a steady increase of newborns dying within their first year, and we wanted to address that issue by providing breastfeeding supply bags, diaper changing bags, all of what they need."

The students have partnered with different medical organizations to help with the project including the Family Medicine Residency Program at OhioHealth Riverside Methodist Hospital and Wellness on Wheels, a mobile clinic associated with OhioHealth in Columbus. The project was executed with the support of faculty advisor Robin Newburn, DO. Funding was provided by the Arnold P. Gold Foundation National GHHS, and individual donors.

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To get involved or make a donation, contact OhioBabyBag@gmail.com and check out their Instagram page [@ohiobabybagproject](https://www.instagram.com/ohiobabybagproject).

New Project Addresses Vaccine Hesitancy

The Ohio Osteopathic Association has been working with the American Osteopathic Association (AOA) and a handful of other state osteopathic associations on an initiative to help DOs and their practice staff discuss the importance of COVID-19 prevention, including vaccinations. As part of the project, a special page was added to the OOA website to provide resources and tips when talking with vaccine-hesitant patients.

Since physicians are regarded by the public as a trusted source of health information, vaccine-hesitant patients are more likely to choose to be vaccinated if they learn about the benefits and receive accurate information from a trusted doctor. Attendees at the Ohio Osteopathic Symposium received “Facts on Vax” buttons to encourage their patients to ask questions.

Other initiatives include a continuing medical education lecture and development of patient intake forms. The forms include 10-12 easy-to-understand questions to help facilitate dialogue. A second page for physicians and medical staff provides a brief talking point for each question.

Other participants in the project, in addition to the OOA and AOA, include the Florida Osteopathic Medical Association, Michigan Osteopathic Association, Oklahoma Osteopathic Association, and Pennsylvania Osteopathic Medical Association.

Go to the resource page at OhioDO.org/FactsOnVax.



Donors Contribute Over \$4600 to White Coat Fund

Members of the Ohio University Heritage College of Osteopathic Medicine Class of 2026 received their first white coats, courtesy of the Ohio Osteopathic



Foundation and individual donors. A total of 36 physicians and friends of the profession contributed \$4,635 to the White Coat Fund this year.

Students received their coats at the Convocation & White Coat Ceremony, held August 12, 2022, as a gift to commemorate the beginning of their academic career as medical students.

OOA President Jennifer L. Gwilym, DO, was at the Ceremony to welcome the class to the profession. Her remarks included a summary of how the OOA serves students. “You are the future of osteopathic medicine—and we are committed to your success,” she said. “The OOA is your professional home and we will be here for you over the next four years and beyond providing legislative advocacy that will protect the value of your medical degree and ensure your role as leader of the health care team.”

She also encouraged these newest members of the osteopathic family. “We

wish you well in your studies and hope you wear your white coats with pride,” she said. “We are proud that our patch, sewn onto your coat, will accompany you on your journey and serve to always remind you that the OOA is here to support you.”

CME Available On Demand

The OOA now has 23 education programs available on demand at The CME Center, a collaborative website sponsored by state societies to provide high quality online education for the osteopathic physician community.

Lectures cover a variety of clinical topics as well as practice management and health care regulation issues. All programs are eligible for AOA Category 1-A credit and credits are reported monthly to the AOA.

OOA members receive a discount on all lectures produced by the OOA. Use the discount code OOAfamily for 25% off the list price! Details are at TheCMECenter.org.

Deaths in the Family

John C. Biery, DO, of Lima, died August 13, 2022, at Mercy Health St. Rita's Medical Center. He was 77 years old.

A family and sports medicine physician, he was a Fellow of the American College of Sports Medicine, Fellow of the American College of Osteopathic Family Physicians, and Fellow of the American Osteopathic Academy of Sports Medicine. He was active in his community. He served as chair of the Allen County Water District, Putnam County health commissioner, Putnam County coroner, and Allen County and Putnam County jail physician for 28 years.

Biery was a US Air Force veteran of the Vietnam War and a member of VFW Post 1275.

Survivors include his wife Kathleen; son John C. (Shari) Biery, DO, of Pensacola, Florida; a daughter; five grandchildren; two great-grandsons; and two brothers.

Memorial contributions may be made to Kirksville College of Osteopathic Medicine or Truman State University, both in Kirksville, Missouri.

Delbert A. Hoppes, DO, 68, died April 21, 2022, in Aurora.

Hoppes was a family practice physician in Columbus, Cleveland, and Mt. Gilead. He provided medical care to adults with special needs, volunteered as a ringside physician for amateur boxing, and loved teaching medical students and residents. He was affiliated with several primary care residency programs.

Hoppes grew up in Columbus and graduated from Capital University in 1975. He then earned his DO degree from Kansas City University in 1980.

He enjoyed sports, collected sports memorabilia for 30+ years, and was a diehard Green Bay Packers fan.

Survivors include his wife; three children; three grandchildren; sister; nieces and nephews; and in-laws.

Hoppes endowed a scholarship at his medical school. Memorial donations can be made to the Delbert A. Hoppes, DO PHOS Scholarship at <https://kansascity.edu/give>.

Life Member **William D. Weaver, DO**, of Cortland, died July 8, 2022. He was 92 years old.

He was a graduate of Kent State University and then went to Kansas City University to receive his Doctorate of Osteopathic Medicine.

He opened his own family practice in 1956. After 34 years of practice, he retired



OHIO OSTEOPATHIC ASSOCIATION

in 1990. Weaver was one of the founding physicians of Warren General Hospital.

Weaver was a member of First Presbyterian Church where he served as an elder. He enjoyed golfing and playing on the church league, fishing at the cottage on Pymatuning Lake and coaching Little League baseball for his son's teams.

Left to cherish his memory are his wife of 68 years, Beverly, son, brother, and grandchildren.

Physician News

Three Ohio DOs Selected to Lead National Leadership Council

Three osteopathic family physicians in Ohio, Kristin Oaks, DO, of Central Ohio Primary Care; Victoria DiGennaro, DO, of Pioneer Physicians; and Amanda Williams, DO, of South Zanesville Family Medical Center, have been selected to lead the Agilon Health Female Physician Leadership Council, an organization of women who are "breaking the glass ceiling" for female physicians nationwide. Agilon Health created the council to celebrate and honor women doctors across the US while raising awareness about the specific challenges they face in the health care system.

"One of the challenges female physicians may deal with is inequity. Research shows that females in health care are paid less and underrepresented in leadership roles as

compared to their male counterparts," said Williams, one of the founders of the council with Oaks and DiGennaro.

A new report published in *Health Affairs* shows a 25% lifetime pay gap between male and female physicians in the US, which adds up to a difference of slightly more than \$2 million over a 40-year practice. In addition, females represent 3% of health care CMOs, 6% of department chairs and 9% of division chiefs according to data from the American Medical Association. Ironically, studies reported in peer-reviewed medical journals, such as *Lancet* and *JAMA*, reveal that female physicians deliver better patient outcomes, including lower readmission and mortality rates.

The council's collective goal is to foster the collaboration of women physicians and male physician allies across a broad network of more than 1,600 PCPs nationwide. Drs. Oaks, DiGennaro, and Williams will join forces with other health care leaders nationwide to address gaps and challenges currently impacting female physicians and explore opportunities for improvement.

"I'm excited to be one of the founding members of this prestigious council paving the way for the advancement of women in the field of medicine," Oaks said. "We are empowering a new generation of women leaders who are transforming our delivery system on behalf of our patients." ■

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Buckeye Osteopathic Physician
Ohio Osteopathic Association
53 West Third Avenue
Columbus, Ohio 43201-0130
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