

February
2009

Pre-Convo
Issue



The Still Point

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Undergraduate American Academy of Osteopathy

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A Gentle Balance

More and more, I am finding that OMM treatments are a lot like life. In life, each person must strike a healthy balance between work and play, sleep and wakefulness, helping others and helping yourself. Likewise, in OMM treatments, one must find the balance between not enough treatment and too much treatment for the patient. This balance point is a nebulous area that always seems to slip past before you notice it. Then you think “oh, there it went!”

For most of my life, I have been of the mindset that more was better. The more I play, the more fun I have. The more I work, the more productive I am. The more I study, the better I’ll do on the test. Most medical students are like this, I think.

However, somewhere in medical school I realized that my long time belief just wasn’t true.

I can remember two distinct moments that this myth came to light. The test I studied the most for in medical school, I got a C. Another test, I was currently reading one of the Harry Potter books. Completely enthralled, I had a really hard time putting the book down to study for my upcoming test the next day. I made a deal with myself, for every hour I studied I would allow myself 30 minutes to read. I even put an alarm on myself. Those hours of studying were some of the most productive I had during all of medical school. And I received an A on the test.

More recently, during my rotations, I had this pointed out to

me. In September, I was trying to do everything and please everyone. I was doing ER and traveling for several different personal and professional reasons. At the end of the month, I came down with the first illness I have had in over 2 years. I was fatigued, overworked and barely able to find the energy to pack for my next rotation...in Hawaii.

Fast forward to the end of the next month, I was healthier, happier and more energetic than I had been since the beginning of medical school. In Hawaii, I had taken the time to appreciate my time there. My sleep was priority after the rotation and my play came very close after that. Without the other pressures of being back in my normal stomping grounds, I had found a way to balance it all.

Having become consciously aware of this striking difference and need for less swinging of the pendulum in my life, my approach to other areas has changed. I am more willing to say no to friends and even change my plans at the last minute if I don’t feel up to a particular event. Going to bed earlier has always been a struggle for me but I have made my sleep a much higher priority. With this new approach, instead of missing out on things, I find I am enjoying the things I do much more intensely. I am starting to, slowly find a balance even with the normal pressures of life.

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A Gentle Balance

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So what does this have to do with OMM? Becoming more aware of the balance point in my personal and professional areas of my life, I seem to notice the need for balance in other areas to. With the more is better approach, my treatments always hinged on making the problem

better immediately, or having an immediate, noticeable, positive affect. If one type of treatment didn't seem to work, I would try another. Then get frustrated if that didn't work either.

Lately though, my treatments are a little shorter and less intense. When that voice says "I think you are done here", I am

more inclined to listen and tell the patient to let me know in a few days how they feel. The immediate outcome does not seem to have as great a hold on me. With less pressure for the immediate positive affect, I enjoy giving the treatments more. The only reason I can attribute to this change is my desire to find that balance point.

The outcome so far has been a healthier and happier me, willing to go with the flow and take life a bit slower. And the people I treat lately? Well, they seem to be having better and more lasting results, overall, than I have seen in the past.

Jessica Ridgley—National Executive Chair (KCUMB)

A First Year's Guide to the Convo Universe

The answer is 42! What's the question? Well, it could be how many terrific and skilled OMM practitioners will be available to you at the convention. It could be the number of new techniques you'll learn while you attend. It could also be how much you'll pay for a student only item at the auction that's worth three times as much!

I remember my first convocation, and I also remember not really knowing what to do or where to go, so I hope this article may help you around what could be one of the most enriching conventions you will attend. Again, I didn't know much about the convention beforehand. Possibly because I was only in the third class of a newer school, or because I didn't really talk with many people who had been to Convo before. Whatever the reason, I wished I had had someone to give me a few pointers like I am giving you.

First and foremost, stay at the convention hotel (or at least within walking distance). Yes, I realize it's expensive, but it's truly much better to be able to walk downstairs and hit up the early lectures, meet up with friends, or just go back for a quick nap. I learned this the hard way when I tried to save money and had to drive over every day, which really stunk. The problem with this is that the convention is almost always at a

4-5 star hotel which makes for mucho dinero. I had some friends last year that rented a presidential suite and had 8 people in it and it cost them almost nothing.

The next important thing is the

Academy of Osteopathy. Summed up, they are OMM experts and have spent years and years doing manipulation. The Stripes are NUFA members. Again, if your school is like mine and has no NUFA members, I'll

explain it for you. NUFA stands for National Undergraduate Fellows Association, meaning these are students that take 5 years to complete medical school in which the year between the classroom and rotations is spent studying OMM. So during the Night with the Stars & Stripes, there is a room filled with OMM tables and these people that are extremely well versed in manipulation. What do you do? Well, you go up to any of them and ask any OMT question you like. Want to learn a new technique, have a problem with an old one, that's what they're there for. And don't be shy, they enjoy teaching and there is no end to what you can learn these two nights. It's also a great opportunity to make friends with students from other UAAO chapters around the country.

The last two things I'd like to mention are the auction and the student social which happen on Friday and Saturday nights respectively. The auction is a great opportunity to pick up some cool osteopathic stuff. There's also almost always a student OMM table for sale that usually goes pretty cheap. Speaking of which, the table companies usually sell their display tables at the end of the convention for pretty cheap too. The student social is always a themed party and a good way to interact with your fellow UAAO members from around the country. This year's theme is James Bond casino night, so don't forget your tux!

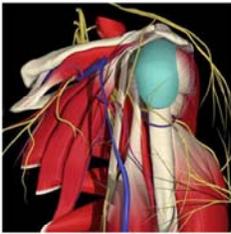
So I hope this gives you a bit of a heads up before you take your first venture into the Convocation Universe. Don't forget your Convo manual that you'll pick up when you register; it's full of all the information you need, but so many forget to read it. Also, the national officers are always around if you have any other questions. Don't be afraid to approach us or our booth in the convention hall with any problems. Can't wait to see you in Little Rock!

Scott Leggoe—National Executive Secretary/Treasurer (VCOM)

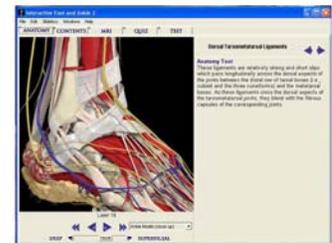
Night with the Stars & Stripes. Now most newcomers have heard this is the must see event but have no idea what it's all about. It happens on Wednesday and Thursday nights of Convo and is an open forum for OMM. The Stars are the FAAOs. If your school is like mine and doesn't have an FAAO, you may not know this means they've done a Fellowship within the

We can help you shorten your study time and raise your grade in anatomy & physiology!

It was great to see you at Dallas for the AAO Conference! Thanks for voting Edu Technology the “Best” and “most useful for a DO student” booth.



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New Beginnings

The start of a new journey is about to begin for me. I am returning to Touro University College of Osteopathic Medicine as one of their new pre-doctoral OMM fellows. I am excited and also nervous about the possibilities that this will allow me. It will allow me to grow in the OMM skills that I have acquired during my first two years and to gain confidence in my hands.

This desire all began when I attended Convocation in Colorado Springs, CO, in March of 2007. This was my first Convo and I will never forget it. It gave me an excitement for our profession that I never knew existed. As a first year I believed that going to an osteopathic school would give me the opportunity to learn only manual medicine, the technique, the finesse, etc. I didn't think that I would want to learn the emotional side behind OMM. There is a power that comes when you lay your hands on another person and treat them. I began to tap into that power at Convo.

I remember going to the "Evening with the Stars" and having the professors from my

school advise me on which doctors to watch and learn from. I didn't realize how much learning potential I had to learn from when I first stepped into that room but by the end I had gained so much.

This year Convocation is in Little Rock, AK. I hope that many of you have made the decision to attend and for those that haven't yet it isn't too late. Get those last minute registrations in and you will never regret that you did.

Things to Remember:

Evening with the Stars, March 25 9-11p, March 26 8-10p

Student Social, March 26 5-8p, 007 Casino Night (with Texas Hold Em Tournament, Costume Contest: dress up in your best James Bond/Bond Girl outfit). Look for more information from your Chapter Presidents.

Student Auction: March 27, 5-6:30p

Practice for A Hollis Wolf presentations: March 27, 7-8p

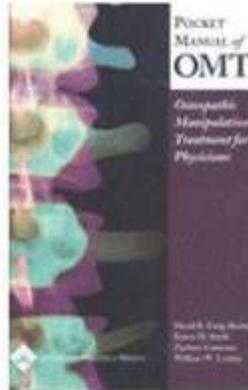
A Hollis Wolf presentations: March 28, 1:30-3:30p

Harold A Blood, DO, FAAO Memorial Lecture given by Michael Kuchera, DO, FAAO: March 28, 3:30-4:30p.

I can't wait to see you guys there this year. If there are any questions on any events or convocation in general please email me at uaaovchair@gmail.com.

Coral Peterson—National Executive Vice Chair (TUCOM)

A Pocket Manual of OMT: Osteopathic Manipulative Treatment for Physicians
David R. Essig-Beatty, Karen M. Steele, Zachary Comeaux, William W. Lemley
ISBN-10: 1-4051-0480-5, ISBN-13: 978-1-4051-0480-7
\$29.95 from Lippincott Williams & Wilkins, Philadelphia, PA 2006;
<http://www.lww.com/product/978-1-4051-0480-7>



This practical, concise, must-have handbook by faculty in the Department of Osteopathic Principles and Practice at the West Virginia School of Osteopathic Medicine will assist physicians, therapists and other practitioners, and medical students in applying manipulative treatment techniques for common problems encountered in primary care practice. For each technique, the book provides indications, contraindications, stepwise description of the technique, and an accompanying photograph—a total of over 350 photographs. Newer OMT techniques, including percussion vibrator and facilitated oscillatory release, are included for each region of the body. Exercises derived from the structural exam and OMT appear at the end of each chapter. The index allows look-up by syndrome, locality, or body region.

What You Can Learn or Do in One Year

This past year has been amazing! No, really, it has. As the National Coordinator, I have met so many people across the country that I would otherwise never would not. I am now well into my fourth semester in school and, despite what I have forgotten, I have learned much. I have had great opportunities to volunteer with the Rural Area Medical. I have brought some of my classmates into the cycling world. All the things that I have learned and seen in just one year are truly unbelievable when I stop to consider it. Everyone knows what I am talking about when I make that statement. I had a discussion almost

10 years ago with a good friend who made this statement: "Time will pass no matter what your decision is." She was referring to my indecision on a couple of topics, including applying to medical school. She was right.

Have you thought about that? Time will pass – what will you do? Of course, everyone will finish school, do a residency, and start in a practice. But during that time what else will you do? It is very easy to just get caught up in all the school activities (studying, studying, and

Stephanie England—Executive National Coordinator (LMU-DCOM)

not sleeping). This is not just the concept of making you a "whole person" but a "real person". How else will you define your life? This thing does not need to be earth shattering but should be something you love.

Start a new hobby or just pick up an old one, just remember that the next year will pass and what will you have to show for it?

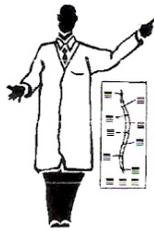
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A Poem: Feeling the Tide

I started with the lumps and bumps of my own body,
 I'd palpated my whole life
 but I found out how different bodies can be in lab class
 My fellow students, softer, denser, thinner, heavier.
 Investigating the tissues, feeling like time is being wasted, I am suddenly reduced to
 someone who doesn't know anything again
 Trying to feel what the instructor describes
 Always trying.
 Proud of my newfound knowledge of bones, muscles, so intricate
 and cumbersome
 But still not knowing enough.

Jeannine Bernet—COMP: NUFA Teaching Fellow

What is it we're looking for here?
 little hints of something, floating bits at the edge of consciousness
 That's it, I've got it! What WAS that? But then it's gone
 Then I gave up finally, and the change occurred
 motion beneath the tissue
 finding life under your hands, "feeling the tide"
 Through time, we always have known,
 life is more than a sum of its physical parts
 but still have to break it down, again, and again, and again
 Accepting the medically unmentionable – we really don't know
 like I told the student, that day in their first Cranial course
 just let your mind go, and the hands will follow

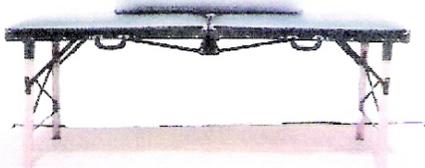


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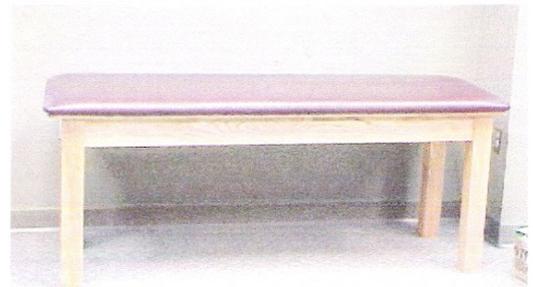
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Cranial Research

Dr. Gregory Thompson (LMU-DCOM UAAO Chapter Advisor) and Dr. Anne Kroman, OMS-II (LMU-DCOM UAAO Chapter President) have been conducting research on the cranial sutures and the correlation between suture fusion and areas of skeletal dysfunction elsewhere in the axial skeleton. Thompson and Kroman took a unique perspective and have been exploring new theories utilizing everything from MRI research to examination of over 250 complete human skeletons. They have found a strong correlation between suture fusion and individuals with severe skeletal pathology elsewhere, such as sacroiliac fusion. The idea of the reciprocal tension

membrane and its tensegrity like connection between the cranium and the pelvis is an idea that has been utilized clinically with success for almost 100 years, but lacked large scale anatomical research based evidence. "I believe our relative expertise in two fields allows us a unique perspective," said Thompson. "To some the findings will be interesting; to others they will be groundbreaking and a bit earth-shaking. For the first time, we have evidence to support some very important theories that have eluded anatomists, anthropologists, physiologists and physicians for a long time." Thompson and Kroman hope that the findings from this study,

as well as other current and future projects will expand the empirical knowledge base behind Osteopathic Principles and Philosophy. Thompson and Kroman presented their re-

search at the AOA Convention in Las Vegas, and will also present the findings at the American Academy of Forensic Science annual meeting in Colorado in February.



Anne Kroman—LMU-DCOM: UAAO Chapter President

In the Beginning...There Was Diagnosis

A "lesson learned" actually forms from contributions by a selective memory and an imagination that fills in the gaps. In fact, it may be a natural tendency to ignore the process by which we learn everything. This is how we are able to individualize our experiences.

The same type of learning pattern ensues with the comprehension of OMM. Once the fingers begin opening the mind to the presence of somatic dysfunction, the fuzziness or clumsy touch is vanquished and the concept of unfeeling is gone. It is hard to even remember not being able to feel the difference between ropy and boggy. Perhaps that is why the teaching of OMM is so difficult.

Many upperclassmen are sages it seems, telling the novice that eventually they will feel it too. Through this form of encouragement, I find students longing for confirmation, rather than a

vague "it". The second year, often enamored with newfound skills, seeks to tutor the bright-eyed first year. The high speed, OMM-jargon filled monologues of "how I learned it" turn into a demonstration of cracking and popping, ME, and FPR OMT. Then, fortified with the name of the treatment, the first year encounters a situation of atypical somatic dysfunction. Chastised and lacking in confidence of a treatment that "should have worked", the student leaves in frustration. As an upperclassman, I am just as guilty of becoming excited with knowledge, even to the point of forced exuberance on everyone else. In a metaphor of my favorite dessert, we place the cherry on the top before instructing in the manner of logical sundae building. There has to be a foundation. Diagnosis is the main foundation of OMM. We are pushing cherries and we need to stop.

The current problem I have with student-to-student tutoring sessions is the dismissal of diagnosis. May be the student teacher is not meaning to side step it, but the reaction of the underclassmen continues to astound. Ask them the "Why?" behind the technique that they seem to trust so much and they are at a loss. A real treatment must follow a diagnosis.

Coherence and logic are expectations in the care of patients. If we are to engage a world of allopathic and osteopathic skeptics, a full understanding of diagnosis is the first step toward maintaining legitimacy. Somatic dysfunction makes sense and so do treatments, when you are able to properly diagnosis. Why is there a rotation to the left instead of the right? Why is there a need to resist on exhalation? Ask questions, their design is to require answers.

A student is at a disadvantage without confidence in diagnosis. They need to learn it. We need to teach it. I have heard laments from professors that the lack of diagnostic confidence is a main hindrance to the success of students in both their practical and real world OMM. I agree.

Diagnosis is an overlooked dimension of teaching OMM. Start with palpation and then gradually bring in the OMT. There are myriads of treatments, an excess of names and techniques to whip up from memory. Focus on a solid diagnosis and correct sequencing and then you will have both confident and competent students representing, not only the greatest club, the UAAO, but the greatest profession, Osteopathic Medicine. So, bring on the somatic dysfunctions and smirk when faced with the atypical. You and your tutee, can handle it.

Jenna L. Shenk—VCOM: UAAO Chapter Secretary

The BioBasics Program Presents

An Osteopathic Approach to Hypertension

June 5-8, 2009

(Indian Head Resort, Lincoln New Hampshire)

*Course Directors; James S. Jealous D.O. and Judith V. Aldrich D.O.
along with the BioBasics faculty*

Course Overview: The Osteopathic management of Hypertension. The underlying cause and the indwelling therapeutic forces. The program will be held in a beautiful setting overlooking the Pemigewasset River in Lincoln, New Hampshire, nestled in the White Mountain National Forest. Time to rest, reflect and celebrate life is built into this program.

CME: The University of New England has requested that the AOA Council on Continuing Medical Education approve this program for 21.5 hours of AOA Category IA CME credits. Approval is currently pending.

*To register for this course or for more information please visit our website at www.jamesjealous.com.

You may also contact Marnee Jealous Long at (813) 765-5005 or mjllong@verizon.net for more information.

Day Three: Sunday, June 7th

Day One: Friday, June 5th

12 noon **Registration**

12:30pm-1:15pm **Osteopathic Principles and Hypertension**
--Lecture
James Jealous, DO, Lancaster, NH

1:15pm-2:45pm **The Diaphragm and Aorta: Rebalancing and the Point of Rest**
--Practical
James Jealous, DO, Lancaster, NH

2:45pm-3:00pm **Discussion in small groups**

3:00pm-6:00pm **Osteopathic Physical Diagnosis of HTN**
--Lecture and Practical together
Judith V. Aldrich, DO, Fairfield, ME
(Each student and faculty member should bring a blood pressure cuff and stethoscope)

8:30am-10:45am **Overview**
--Lecture and Practical
Gregory Yesensky, DO, Hermosa Beach, CA

10:45am-11:00am **Discussion**

11:00am-1:00pm **The Artery Reigns Supreme, but the CSF is in Charge**
--Lecture and Practical
Debra Heath, DO, Mesa, AZ

1:00pm-3:00pm **Break**

3:00pm-5:00pm **Breathing**
--Lecture and Practical
Kevin Zorski, DO, Freeport, ME

5:00pm-6:30pm **Panel discussion**
Moderator: *Stephen Kisiel, DO, Adams, MA*

6:30pm **Dinner**

8:00pm-9:00pm **David Hoke, DVM, Organic Farmer**
--Guest Lecturer
Enosburg Falls, VT

Day Two: Saturday, June 6th

8:30am-10:30am **The Role of Neutral in Growth and Healing**
--Lecture and Practical
Karen Gajda, DO, Deerfield, IL

10:30am-10:45am **Discussion in small groups**

10:45am-12:30pm **Biochemistry and the Fluid Body**
--Lecture and Practical
Jeff Greenfield, DO, Manchester, NH

9:00pm **Music, BioBasics sing-along:**
--bring instruments, songs, dances, voices

Day Four: Monday, June 8th

9:00am-9:30am **Course Summary and Review**
Judith Aldrich, DO, Fairfield, ME

9:30am-10:30am **Family Practice and Osteopathy**
--Lecture
Stephen Kisiel, DO, Adams, MA

10:30am-12:30pm **The Health**
--Practical
Stephen Kisiel, DO, Adams, MA

12:30pm-1:00pm **Students spend time with Individual Mentors**

Efficiency as the Goal of OMM

Fryette's principles? Type one mechanics? Type two? This is something that most medical students take for granted once we memorize it mere weeks into the first year. Then we regurgitate it for exams and boards and except it as fact without really stopping to think about it. But does it really mean anything about the way that we practice OMM? William J. Brooks, DO talked to KCUMB's UAAO chapter tonight about just that topic as part of a monthly lecture series designed to help inter-

ested students broaden our osteopathic horizons beyond just what we are told in our classes.

Dr. Brooks was previously a professor at KCUMB as well of the University of Arizona COM and has extensive experience in OMM dealing with chronic pain and orthopedic surgery. He started his career as protégé of Robert Fulford, DO. Currently Dr. Brooks runs a chronic pain practice and continues his research as part of the Restorative Care Foundation here in Kansas City.

Ashley Weis—KCUMB: UAAO National Representative

Dr. Brooks encourages UAAO members to take the time to think about what they are doing and if it makes sense with what we know about the musculoskeletal system versus other systems of the body. He suggests that the goal of manipulative therapy should be to reach maximum efficiency. This is the way we treat the cardiovascular system, he explains. A patient's blood pressure could be 190/110 and asymptomatic but we would treat it because that is not efficient if we only need

120/80. The system is working harder than it needs to and expending too much energy, etc. This can lead to other problems, so why then don't we apply this to the musculoskeletal system as well? This line of thinking helps students to understand the ideas behind manipulation and how we can step out of the box and use it intuitively ourselves.

A special thanks to Ashley Telisky for helping with background research. For more information on Dr. Brooks please go to wjbroadsdo.com.

Cranial

Work in the cranial field is as much a part of osteopathy as is any of the "bone setting" or soft tissue techniques we may learn during our undergraduate experience. Dr. Still may not have developed this specific application himself, but his teachings of anatomy, function and spirit laid the groundwork for the development of this powerful approach. In June of last year I had the pleasure of attending an Introductory Course in Osteopathy in the Cranial Field hosted by the Cranial Academy in Indianapolis, Indiana.

The class went into depth of the anatomy and mechanics involved in the Primary Respiratory Mechanism (PRM). Topics of the day were typically started via lecture and carried over into

experiences of hands on learning. First, by identifying the anatomy of the bones, their relationship to each other and then their relative motion. This was enough to convince any disbeliever that the bones of the cranium do in fact move and with a purpose. The true realization and appreciation, however, came when we began to feel what was discussed.

As we began our first palpation of the PRM I was at first distracted by the multitude of individuals surrounding me. However, even with almost seventy people in the room, I was amazed at how calm and peaceful the environment quickly became. I realized later that it was much due to the effort of the talented faculty and table trainers in holding the space. It was

within that space that I was able to palpate the PRM for the first time. As subtle as it was, I could actually feel the bones move beneath my fingers!

What also impressed me were the gifted osteopaths who were leading the course. I was amazed at their superior palpatory skills and sixth sense of what was happening in the patient. It was a true testament to the potential that we all possess if we simply take the time to develop it. Despite their elevated level of awareness, they were all very humble and grateful for being able to help people by doing what they love.

During this time I also had the pleasure of meeting and sharing the experience with many wonderful student peers. They were

as excited as I was to be there and learn this powerful modality. It is reassuring to know that there are upcoming DO's who will continue to bring cranial to their patients and further the research and leadership needed to secure a solid future for this work. I, for one, will be among them.

Attending an introductory course in cranial this summer was a life-changing event. It was then that I had my first experience in the dynamic relationship between cerebrospinal fluid and the "breath of life." Palpating the PRM was just the beginning of a life-long study of the spirit of Osteopathy, as Dr. A.T. Still described years ahead of his time. As a future DO, I am ex-

Carmin Van Deven—AZCOM: UAAO Chapter President



Cranial Academy Offerings



February 14-18, 2009

Midwinter Introductory Course, Osteopathy in the Cranial Field
San Francisco Airport Marriott Hotel

February 20-22, 2009

Intermediate Course: The Cranial Base
San Francisco Airport Marriott Hotel

April 17-19, 2009

Intermediate Course: Brain Parenchyma, Nuclei and Fluid
Midwestern University Arizona College of Osteopathic Medicine

June 13-17, 2009

Summer Introductory Course, Osteopathy in the Cranial Field
Hyatt Regency Hotel, Bethesda, MD

June 18-21, 2009

ANNUAL CONFERENCE: Embryology and Osteopathy: Developmental Patterns
and The Template of Health
Hyatt Regency Hotel, Bethesda, MD

For more information and to sign up visit: www.cranialacademy.com

Touro NY's UAAO Turns 1 Year Old

The TouroCOM-NY chapter of the UAAO has experienced many growing pains in our first year of existence. After a slow start, we have seen our membership increase markedly (from three members at Convocation 2008 to over thirty members). As a student organization at TouroCOM, we have held three successful treatment table sales, numerous nametag sales, and a successful Kimberly Manual sale. We have even begun to branch out into community service and educational outreach opportunities.

In October of 2008, the UAAO hosted members of the New York Harriers running club in preparation for the ING New

York City Marathon on November 2nd. The Harriers received instruction in proper gait mechanics from William Morris, DO, with the help of Lillie Rosenthal, DO, Susan Milani, DO and John Juhl, DO. Following Dr. Morris' lecture, the runners were taken into the anatomy lab where they were able to observe the various muscles, bones and joints that were mentioned in lecture. After lunch, members of the UAAO, with the supervision of the instructor-physicians, offered OMM treatments and stretching instruction to the Harriers. The event was garnered to be a great success, and the Harriers look forward to another "Gait and Stretching Clinic" in the future.

Dan Galante—Touro Harlem: UAAO Chapter President

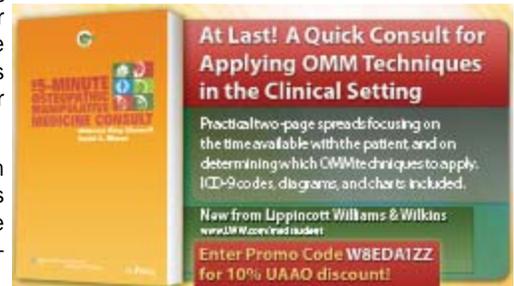
In addition, the TouroCOM UAAO has been active in the instruction of the first year students at school. More than 75 first-year students have attended OMM review sessions in preparation for upcoming practical exams. Not only have these sessions fostered a greater understanding and appreciation for OMM, but they have also acted as a nidus for joining the UAAO. It is our hope that these review sessions will continue for years to come.

As Convocation 2009 grows closer, we have begun our prepara-

tions to head south, and we look forward to seeing everyone in Little Rock. We, in New York City, hope that everyone had a very happy and healthy holiday season, and we wish everyone a very Happy New Year!

-Dan Galante, TOURCOM-NY UAAO President

Daniel.galante@student.touro.edu



A Legend in Osteopathy

Last year, Touro University-Nevada had the privilege of having Dr. Ted D'Amico, D.O. join the Primary Care faculty. Not only is Dr. D'Amico one of the first Osteopathic physicians to practice in the state of Nevada, but he is also one of many Osteopaths that fought the California Merger. Last fall, our UAAO chapter invited Dr. D'Amico to share his experiences with us over a lunch time lecture. During this lecture, Dr. D'Amico shared a little about his history and journey to becoming a Doctor of Osteopathy, discussed his role in fighting the California Merger, and shared a little bit of perspective on Osteopathy and the future of the profession. This is a recap of Dr. D'Amico's lecture.

Dr. D'Amico, like many men of his era, delayed his professional aspirations to serve in the military. Upon returning from war, the California native started applying to medical schools.

After facing rejection from Allopathic Schools, Dr. D'Amico found a home at Kansas City where he felt accepted and valued. Dr. D'Amico returned to his home state of California after receiving his credentials and began to start a medical practice. However, he quickly found out that the Board of Medical Examiners was unable to grant him a license. Because of the California Merger of 1962, Dr. D'Amico was unable to be licensed in California. During this same time period, D.O.'s were commissioned as officers in all branches of military and were being drafted to serve in Vietnam as physicians.

Instead of sitting idly by, Dr. D'Amico started writing letters. He wrote numerous letters to the Board of Medical Examiners, the Governor of California (Ronald Reagan), and the Federal Government. While Dr. D'Amico was writing letters, the California D.O.s that accepted

Heather Werth—TUNCOM: UAAO National Representative

the conditions of the California merger and became M.D.'s were victims of their own success. As Dr. D'Amico explained, these former D.O.'s were not accepted by their M.D. colleagues in California and their degrees were not accepted by other states. Therefore, they were trapped. Finally, as you all know, the issue was resolved in 1974 by the California State Supreme Court and D.O.'s, again, were granted full practice rights in California.

Given Dr. D'Amico's unique experience and long history in the profession, he is able to provide much needed perspective to those of us on our way to becoming osteopathic physicians. Last year, there was much conversation at Touro about the possibility of changing the D.O. title to something like M.D.O. Dr. D'Amico cautions against this. He states that the A.M.A has a long history of wanting to eliminate the competition. Instead of trying to eradicate Osteopathy,

the A.M.A. has sought to consume it. Dr. D'Amico warns against too much assimilation. Instead, he advises that we remember the history of our profession and bear in mind its unique tenants.

Listening to Dr. D'Amico's story was inspiring. I, personally, am grateful for his persistence in fighting the California merger. Dr. D'Amico acknowledges that it may have been easier for him to assimilate or move to a different state. However, he had the forward thinking to recognize that the profession would not have been better. Instead of choosing the easy route, he chose to fight. Because of the persistence of Dr. D'Amico and many other D.O.'s in California, we can appreciate the freedom of full practice rights. As we go forward in our careers, it is important to remember the D.O.'s who fought to make it possible for us to practice as fully licensed Doctors of Osteopathy.

White Coats

LMU-DCOM recently celebrated their second white coat ceremony on October 18th, 2008. The OMSI's proudly received their white coats and were welcomed into the short-coat club by some of our revered faculty. With this momentous event in mind, I wanted to know what the white coat means to my classmates.

This time last year, as we approached the white coat ceremony for the inaugural class, I admit I did not know what to think. I had honestly never seen any of my doctors wear a white coat. I thought the whole process was largely symbolic and I could not grasp the importance. As the date approached, the school began to prepare and I started to fully understand, that although it is ceremonial, receiving

the white coat is really an honor. Having established doctors and our beloved professors put the coats on us was like a beautiful and brief glimpse into the profession for which we came. The white coat commands respect from the observer and reverence for one of the oldest professions for the wearer.

The OMSI's reflected on their white coat experience of just one year prior, Andi Wenner said that getting her white coat meant she didn't have to feel like a dork in front of pts. "It made me feel like a professional. You belong, what you're supposed to be doing." Josh Morris, also an OMSI had similar sentiments, "It's a rite of passage. It's when you really know you're in med school."

Karen Banks' sentiments, "I felt nervous, now I really have to pass. I can't fail," reflect the emotions many of us feel when approached with stress or the possibility of failure. Walter Saba added his thoughts, putting the coat on "now feels like the beginning of my journey to find answers. People will look to me to explain things."

OMSI Angela Thornton, reflected "receiving the white coat signifies the beginning of a long journey, but it also represents a new level – one of greater responsibility and accountability, but also one of greater rewards and satisfaction." After a lengthy response, OMSI, Dina Wilson summed up her feelings with, "beginning the lifelong journey dedicated to learning and improving the health and quality of

life of individuals, one patient at a time." With gravity beyond his years, OMSI Drew Smithers noted, "it's nice to have something that symbolizes our achievement of getting into the medical field, however, it's only a symbol and without skill and knowledge, it becomes an empty coat."

Obviously, receiving that short white coat means different things to different students. It can be one met with considerable pride and respect or one regarded with a certain sense of impending doom, or perhaps a measure of both. Whatever the emotions involving the coat, LMU-DCOM's class of 2011 is happy to welcome the class of 2012 into the fold!

The Power of Electives

The greatest goal and greatest challenge of our UAAO student group is to increase our members' exposure to OMM as well as provide opportunities for them to gain hands-on experience with patients. Amidst numerous tests, never-ending labs, and a sea of lectures accomplishing this goal is not as easy as one would hope. Continually organizing additional lectures and labs for manipulation takes a considerable amount of time and effort in terms of scheduling the instructor, reserving the room, and getting the word out for people to attend. Doing this on a regular basis is oftentimes a full-time job for administrative staff, and is not quite compatible with the medical student lifestyle. In diligent pursuit of a higher level of education pertaining to manipulation, the best solution that we found at MSUCOM is through cunning creation of electives. Although there is a considerable amount of work frontloaded in this effort,

maintaining electives involves much less time and effort than scheduling each event individually. Our chapter currently maintains four different electives:

UAAO Lab Elective:

This elective is offered as a two part series, divided into fall and spring semesters. In the fall, the class meets on a weekly basis in a combined lecture/lab format. Each week has a different topic, and each session is taught by a different OMT professor. The Spring version has a similar structure with the instruction coming from a pool of Osteopathic physicians who practice in the surrounding community. These individuals generously volunteer their time to provide a very practical perspective on using OMT in the clinical setting.

UAAO Community Outreach Elective:

The newest addition to the UAAO elective family, the Community Outreach Elective was dreamed up and implemented by the current e-board. The intent of its creators was to offer UAAO members opportunities to reach out to the Lansing community through OMT and osteopathy. Students practice their manipulation skills by actively participating in community events such as 5K races, health fairs, and clin-

Kathrine Krantz—MSUCOM: UAAO National Representative

ics. All students practice under the direct supervision of MSU faculty, specifically, our prized OMT specialists.

Stress Fracture Study:

The Stress Fracture Study is an ongoing research project dedicated to evaluating the preventative effects of OMT on collegiate athletes, namely cross country runners. Every semester Lynn F. Brumm, D.O., enlists the help of MSUCOM UAAO members to evaluate and treat athletes for the study. The stress fracture study is a unique opportunity for students to not only practice their skills, but to also participate in the growing field of osteopathic manipulative research. 2009 marks the beginning of the 5th consecutive year of the study and we are excited to see what the most recent data reveals.

MSUCOM OMM Student Clinic:

Completely student run, the OMM Student Clinic is a highly sought-after experience for the average MSUCOM student. Every Tuesday evening the clinic opens its doors to the community and students offer treatments to anyone who has the time and a little patience. Each visit is scheduled for an hour and a half, which is generally ample time for a pair of students, one seasoned veteran and one beginner, to learn and work. They practice communication, charting, history taking, soap notes, palpation, diagnosis, and treatment. The clinic is structured in a way such that the experienced student

guides the inexperienced student, but ultimately promotes a great deal of teamwork from the pair before they present to the physician. Students are encouraged and expected to hone all skills possessed by good osteopathic physicians, thus making the clinic a site of substantial learning.

UAAO members all benefit from the opportunity to participate in one or multiple electives through the increase in exposure to OMM, and for those of us who express a genuine interest, the extra time spent learning and practicing manipulation makes our pre-clerkship years that much more bearable. For those of us who organize events for our chapters, electives are invaluable ways to instruct, deliver information, and can do so efficiently. Please feel free to contact us if you have questions or comments about our electives.

Where is Nutrition's Place in Medical Education?

Ryan Skarbek—TUCOM: UAAO National Representative

Why is it that medical schools (osteopathic and allopathic) spend so little time on nutrition. We learn how to calculate the number of calories per gram of fat vs. protein/carbs, but there is much more that we miss out on. So much of a patient's health and healing depends on the foods they are putting into their body. If we don't address nutritional issues are we truly treating the "patient as a whole" or just their symptoms and not the root cause many health problems i.e. lack of proper nutrition and exercise?

I am always amazed by how much material needs to be covered in a curriculum, and how we are all are able to fit into our heads come exam time. Which begs the question, "Is there even time and space for nutri-

tion?" Well, some schools have found such time by instituting nutritional electives. Some students have filled the gap by attending conferences focused on nutrition, while others just pick it up on their own time. However, the vast majority of students end up clueless.

Over a dozen students and 3 faculty members from my school, Touro (TUCOM) California, ended up attending the Food As Medicine Conference for 4 days in San Francisco. Each one of us brought back a plethora of information about grocery shopping, food preparation, biochemical justification for nutrition, public policy, etc...

There is an epidemic of diabetes and obesity in this country. What can we do as healthcare

workers to change this? Or better yet, what can we do as regular people to change this?

Well, I was moved by a presentation by Kelly Brownell, PhD a Professor of Epidemiology and Public Health at Yale. He said, "If we can't get fired up about our kids what can we get fired up about". He was referring the foods our children eat in public school lunches and the vending machines and fundraisers that sell junk food day in and day out. His advice was to join your local Parent-Teacher Organization, and advocate for healthy food choices and get involved in local politics. There are states that are now requiring nutritional labeling of all menu items in fast food restaurants.

I will leave you with one last

quote that I heard from one of the speaker's at the conference, but I can't recall the exact source. She asked us the rhetorical question: "Since when did nutrition become alternative medicine?"

Convocation 2009 Little Rock, AR



The Peabody Hotel March 25-29



Who

The capital of Arkansas, Little Rock is a metropolitan area with a population of 628,293 and more than a million people living within an hour's drive of downtown.

What

Little Rock got its name from the famed La Salle Expedition in 1682, when the party landed at "La Petite Roche" on the southern banks of the Arkansas River.

When

Little Rock became the seat of Arkansas' new territorial government in 1821 and was incorporated as a city in 1831. In 1836, Little Rock was named capital of the newly admitted State of Arkansas.

Where

Centrally located, Little Rock is where the Southeast meets the Southwest, and the delta becomes the mountains. The city is 286 feet above sea level, with residential areas ranging from 300 to 630 feet. The City of Little Rock is 119.5 square miles, while North Little Rock is 49.3. Pulaski County covers 781 square miles.

Memphis	139 miles
Nashville	360 miles
Louisville	522 miles
Atlanta	523 miles
Baton Rouge	361 miles
Houston	434 miles
Dallas	307 miles
Oklahoma City	348 miles
Tulsa	288 miles
Kansas City	405 miles
	360 miles

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New Year, New Life Resolution

Beginning several weeks before the start of the new year, there was an abundance of commercials, advertisements, and promotions geared toward helping you lose weight and get the “body you’ve always wanted.” The number of gym membership sales rise, along with diet pills, exercise equipment and gear. Thousands of people throughout the country vow that this year they are going to eat healthier, workout more, and lose those extra 20 pounds they haven’t been able to. However, it is known that within weeks to a couple months, gym

membership renewals decline, and all of those new faces seen at the local gym gradually disappear again, until that new year arrives once again.

This year, instead of making a new years resolution, why not vow to make a new “life” resolution? Everyone knows that a healthy body and mind lead to a longer and happier life. It’s easy to say that “this year is going to be different.” But why settle there? Why not apply this new found determination forever? Stick to the schedule and the diet and build the foundation that you can grow from for new

years to come.

Getting past the first month can be the hardest. The drive that you had just a few weeks ago is wearing off and your television shows are trying to keep you on the couch for another night. But, getting past those urges will have more benefit than many realize. It will help you have more energy throughout the day and will leave you feeling rejuvenated and happier.

Living a healthy lifestyle is important for everyone, but even more so for physicians. Our advice is only as good as the way

we portray ourselves. We are going to be telling patients on a daily basis that to keep their heart healthy and their blood pressure down, to eat a balanced diet and to be more active. To truly benefit our patients we can not live by the philosophy “do as I say, not as I do.” So once that free one month membership comes to an end, make a plan to continue living a healthy life. Keep getting exercise and maintain that healthy diet you so eagerly began.

Osteopathy: A (sort of) sonnet

By Francis Yoo, National Representative of the NYCOM chapter of the UAAO 2008-2009

Osteopathy – it is what we do.
We’re physicians that seek to unlock health.
Not just the symptoms, we treat the whole you.
We heal with great knowledge, skill, and stealth.

From the cranium to the coccyx bone,
From the finger to the toe phalanges,
From the ligament strength to muscle tone,
From the blood supply to the nerve endings...

But you’re not just a body – that’s a fact.
We take care of your mind and spirit too.
We do our best to keep your life intact
And to have you able to say “yahoo!”

We’ll be proud of our title of D.O.
Represent the osteopathic flow!

Tape Your Labs!

I would like to make a suggestion to all the Osteopathic schools; video tape your osteopathic labs. Video taping the labs allows students to focus on the techniques being taught and not on trying to write as many notes as possible during the demonstration.

At LECOM, the labs were not being recorded when we first started school in August. I found it very difficult to pay attention to the technique and also take notes at the same time for future reference. Once the labs started being recorded about the middle of my first

semester and I could not imagine practicing for my practical exams any other way.

The videos allow the students the chance to re-watch the demonstration over and over again until they fully grasp what they should be doing with each technique. This could mean seeing where they should put their hands or how they should position their body to get the best mechanical advantage. Now that we have this available, there are usually several students at any time practicing techniques in the OPP lab with their laptops open playing the

latest video.

The main obstacle with this idea is who is going to tape the lab and how is it going to be available to the students. I suggest approaching your schools IT and OPP departments with this idea. The lab recording responsibility is best handled by the school because it benefits all students. An ideal situation would be to digitally record the lab and post the video on your schools intranet so that it may be downloaded and viewed at any time. If that is not possible the videos can be transferred to a DVD and put on reserve in the

library for students to copy to their laptops. A final option would be to have your student government association become the leader for this project. One person could volunteer to tape each lab and then the student association could pay for the DVDs to make copies of the videos.

It may take some effort at the beginning but it will change the way you study and approach OPP labs afterwards. As the old saying goes “Practice makes perfect”, with OMT it is best to practice the techniques correctly in the first place.

Bahram Namdari—LECOM: UAAO National Representative

An Interesting Palpation Session

Sarah Sheldon—LECOM-FL: UAAO National Representative

On Thursday, October 16th 2008, LECOM Bradenton's UAAO hosted a lunchtime "palpation event." The event was run by UAAO members, as well as some of the D.O.s on staff. The event consisted of a number of different stations, each with a different activity. One station that was particularly interesting was the "palpate in a bag station." When students arrived at the table, they were instructed to place their hand inside a small bag, palpate the object while keeping their eyes

closed, and then identify the object. Those who correctly identified multiple objects were offered prizes. Sure, it sounds like one of those games we all played in elementary school. But it was also an interesting way to remove one of our senses (sight) and hone in on identification using palpation. The students who attended all had a great time, and I'm sure I speak for all of them when I say I would recommend running a similar event at your school. It's a great way to take a break from studying, interact with fellow

classmates, and practice doing something in which we osteopaths take pride—being able to "see" with our hands and identify what we see accordingly!



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Once we receive the order, your tables should

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I looked at many tables made by different manufacturers.

After much research, I finally found the table that came closest to my ideal, but was amazed to discover there was no one selling it in my home town! I wanted to buy one and to make them available to the Osteopathic community.

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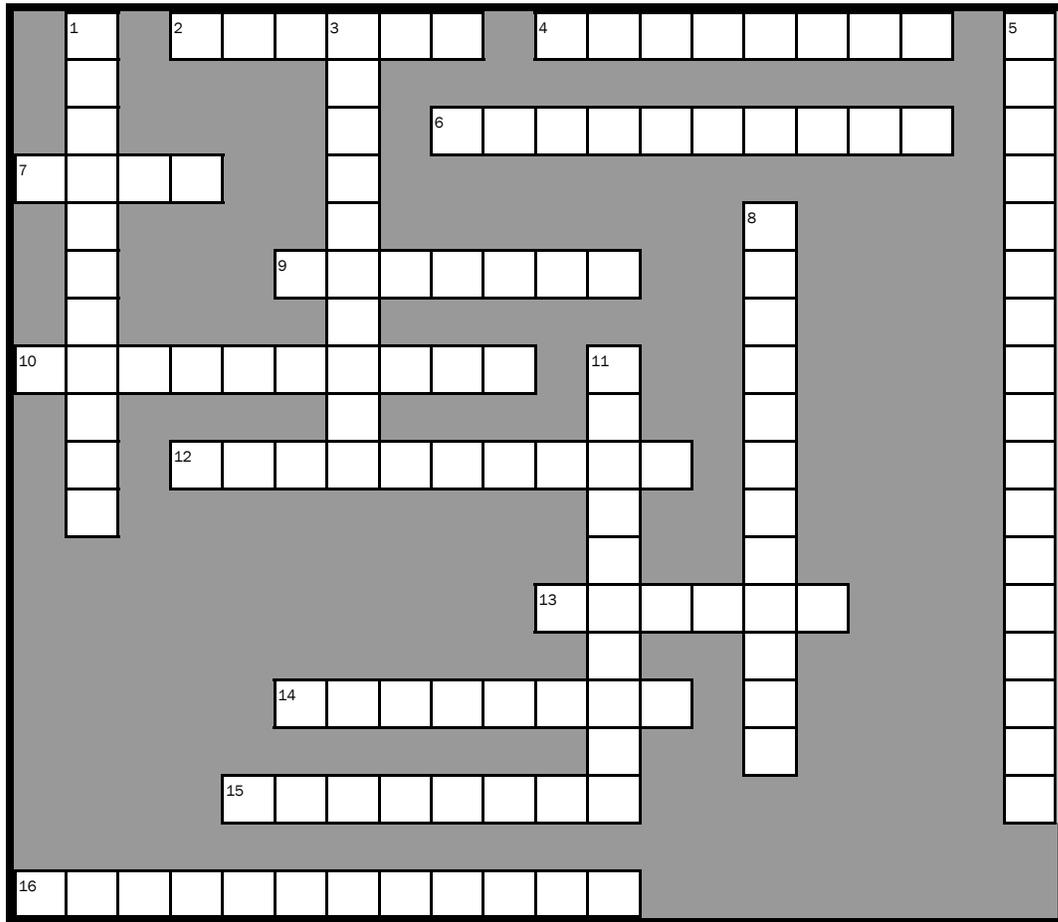


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Crossword of Osteopathy – GA-PCOM

By: Shelby Osborne – GA-PCOM UAAO National Liaison



ACROSS

2. AT Still's middle name
4. state where AT Still was born
6. omm with rhythmic stretching, deep pressure, and traction
7. OMM technique
9. Chair of UAAO national council
10. Student publication of the UAAO
12. AT Still's school
13. DO licensing exam
14. small, discrete points just deep to the skin
15. last state to license DO's
16. where is DO Day on the Hill

DOWN

1. Major UAAO event in March
3. convocation 2009 city
5. what a patient suffers after an omm treatment
8. an active, direct technique to promote muscle relaxation
11. First state to license DO's



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- "Anywhere" height adjustment bar
- Height Range of 16-36 inches
- Lifetime Structural Guarantee
- 3 year motor warranty
- OB/GYN option available, making this the only full purpose osteopathic table available!



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Gearing Up

Tess Vasterling—PCSOM: UAAO National Representative

The members of PCSOM's UAAO are gearing up for an enlightening and inspiring convocation in March. Until recently, convocation was not an urged event at PCSOM. With a change in leadership, the students have become aware of all the benefits and possibilities that await us in Little Rock.

We are continuing to hold our monthly tutorial meetings. After convocation we plan to have a meeting to teach others the new techniques we have discovered. In order for as many students as possible to attend, we are heavily fundraising so that it is relatively inexpensive for all who wish to attend. We are accomplishing this great task with the help of the community and the school. Our Spring Break has been conveniently placed to

coincide with convocation. This will be the case for years to come in order to encourage



maximum attendance. In the first year class is particularly past, many students have not excited, and hopes to continue

been able to attend due to the stress of missing class or having to reschedule block exams. Our

the new tradition next year.

We hope that convocation will be a great experience for everyone, and that the annual convocation becomes a prime focus for the club. In the future, PCSOM's UAAO will be able to start fundraising and encouraging attendance earlier in the year. We look forward to meeting and seeing everyone at convocation.

The Undergraduate American Academy of Osteopathy (UAAO) has been organized by students of the accredited U.S. osteopathic medical colleges under the auspices and guidance of the American Academy of Osteopathy (AAO) for the purposes for helping osteopathic medical students to:

1. Acquire a better understanding of Osteopathic principles, theories, and practice to include:

a. helping students attain a maximum proficiency in osteopathic structural diagnosis and treatment

b. fostering a clear concept of clinical application of osteopathy in health and disease.

2. Improve public awareness of osteopathic medicine so that the

community may better take advantage of the benefits provided by the complete health care concept of osteopathic medicine.

We hope that this publication of the Still Point helps to accomplish these ideals, and encourage any thoughts, comments, or questions regarding this or future issues!

-UAAO National Council