REPORT OF THE RESIDENT AND FELLOW PHYSICIAN SECTION

Subject: Annual Report

Presented by: Chris Sudduth, MD, MPH (Tulsa) Resident and Fellow Section Chair
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INTRODUCTION:

The Resident and Fellow Section (RFS) of the Oklahoma State Medical Association (OSMA) became an official section of the OSMA in 1996. According to the American Medical Association (AMA), there were 627 resident members from Oklahoma at the end of 2015. The majority of these residents are located at the OU Health Sciences Center in Oklahoma City. Chris Sudduth, MD, MPH, currently serves as the Chair of the OSMA-RFS. Dr. Sudduth is a PGY-4 resident in combined Internal Medicine-Pediatrics at the OU School of Community Medicine in Tulsa.

REVIEW OF ACTIVITIES:

AMA Institutional Membership – Again for 2015, the Oklahoma City Campus of the University of Oklahoma participated in the “Introduction to the Practice of Medicine” (IPM) program which was developed by the AMA in 2007 to help graduate medical education training programs meet five of the six ACGME core competencies. The program was developed as an online education series with lectures and exams directed to both educate residents in the core competencies and assist programs in documenting this competency. The cost to participate of approximately $25 per resident is paid directly to the AMA by the University and includes membership for the AMA, the OSMA and the affiliated county medical society. The University of Oklahoma, Oklahoma City Campus has continued with their participation in the IPM Program since 2007; however, the Tulsa Campus has chosen not to participate since 2010.

Other Resident/Fellow Members – The OSMA does not charge resident dues; therefore, in order to retain OSMA resident membership, residents must submit the AMA Resident membership dues of $45. The Oklahoma County Medical Society (OCMS), Tulsa County Medical Society (TCMS) and Pittsburgh-Latimer County Medical Society (McAlester area) collected 2015 AMA Resident membership dues for residents who are not affiliated with the University of Oklahoma. A small number of residents have joined the AMA directly and are not considered members of the OSMA-RFS unless they submit a resident application to the OSMA.

Recruitment Efforts:

In May 2015, the OSMA held a welcome reception to congratulate fourth year medical students who matched for a residency program in Oklahoma. The reception gave the new residents an opportunity to meet OSMA physician leaders and to learn more about staying involved in OSMA and the AMA during their residency years. The benefits of being members of the Resident and Fellow Section were highlighted including the opportunity to attend national meetings, access career resource and networking and leadership opportunities. Although the
resident turnout for the event was small, the reception was successful in networking with the OSMA physician leadership and efforts to inform residents about the activities of the OSMA and the Resident and Fellow Section.

The OSMA, along with Oklahoma County Medical Society staff, manned a recruitment booth at the University of Oklahoma Resident Orientation Day in Oklahoma City in June 2015 to increase awareness of organized medicine. OSMA and OCMS plan to participate in this resident orientation again in 2016.

OSMA leadership also joined TCMS leadership and Dr. Sudduth to welcome the inaugural class of first year medical students at the OU School of Community Medicine in August 2015. This event served as a valuable educational and recruitment tool at the earliest point of the physician pipeline; 27 of 28 medical students present became members of the OSMA that day.

The OSMA and TCMS membership recruitment taskforces have both placed a particular emphasis on resident and fellow physician engagement. Meetings are underway in establishing a comprehensive and evidence-based approach to recruiting as well as mentoring resident and fellow physicians. An important component in this endeavor is the inclusion of residents and medical students from OU and OSU in the planning process and as targets of the initiative.

2015 AMA-RFS Annual Meeting:

The 2015 AMA-RFS Annual Meeting took place June 4-6, 2015 in Chicago, IL. Dr. Sudduth attended the meeting as a delegate of the OSMA-RFS to the AMA-RFS Assembly. During the meeting, the AMA-RFS Assembly re-elected Dr. Sudduth to a second term as Governing Council Vice Chair of the Resident and Fellow Section. He also joined the Oklahoma Delegation as a sectional delegate of the Resident and Fellow Section to the AMA House of Delegates (HOD).

The RFS Governing Council chose the theme “Resident Health and Wellness” for the 2015 Annual Meeting. This theme earned great recognition by many individuals within the AMA, including AMA President Robert Wah, MD, who stated, “The most important patient we take care of is the one we see in the mirror every day.” There were also multiple educational sessions, including “Taking the Pulse of Trainees: results from the Accreditation Council for Graduate Medical Education (ACGME) studies on resident wellness” presented by Nicholas Yaghmour, MPP, Research Associate, ACGME.

Dr. Sudduth also served as the RFS Governing Council liaison to the RFS Public Health Committee and provided oversight of a Committee report on Resident and Fellow Physician Health and Wellness. This report was adopted by the RFS Assembly and was forwarded to the HOD with multiple new directives for action and new HOD policy. Recommendations of the report included:

- The AMA support educational initiatives to raise awareness about burnout, including but not limited to depression and suicide prevalence, among resident and fellow physicians.
• The AMA, in collaboration with the ACGME, Commission on Osteopathic College Accreditation (COCA), and other interested parties, promote training for residency and fellowship programs on recognizing, screening, and intervening in cases of resident and fellow physician burnout.

• The AMA collaborate with the ACGME, COCA, and other interested parties to assist residency and fellowship programs in developing resident and fellow physician wellness initiatives.

• The AMA promote a culture of resident physician wellness within physician training programs.

• The AMA promote confidential and accessible mental health services for resident and fellow physicians.

• The AMA encourage further research on the causal factors of resident and fellow physician burnout and its sequela, including but not limited to its affect on quality of healthcare delivery and patient health outcomes.

Lastly, Dr. Sudduth authored a resolution calling for the AMA to oppose any legislation that penalizes physicians for not using a prescription drug monitoring program (PDMP). His resolution was adopted by the RFS Assembly at the 2014 Annual Meeting in Chicago, IL and was referred for study by the HOD. The resolution was reaffirmed in an AMA Board of Trustees Report at the 2015 Annual Meeting.

2015 AMA-RFS Interim Meeting:

The 2015 AMA-RFS Interim Meeting took place November 12-14, 2015 in Atlanta, GA. Dr. Sudduth was unable to physically attend the Interim Meeting; however, he remained intimately involved in the planning and execution of the RFS Meeting remotely via teleconferencing and various social media platforms. As sectional delegate of the RFS to the HOD, he also served as Chair of Reference Committee B: Legislative Advocacy within the RFS Sectional Delegation. The annual Research Symposium, organized by the AMA-RFS, also took place with a record number of poster and oral presentations.

AMPAC Campaign School

The 2016 AMPAC Campaign School will occur April 13-17, simultaneous to the 2016 OSMA Annual Meeting. Dr. Sudduth, a graduate of the 2015 AMPAC Candidate Workshop, will be attending the Campaign School this year. The Campaign School is renowned for its use of a simulated campaign for the U.S. House of Representatives, complete with demographics, voting statistics and candidate biographies. Participants are broken into campaign “staff” teams, and augment the instruction they receive during the day with nightly exercises in strategy, vote targeting, social media, paid advertising and public speaking. Insider tactics are taught by experts from both sides of the political spectrum. These professionals are the experts currently advising campaigns at every level around the country.
GOALS FOR 2016

Membership remains the Section’s top goal. With the participation in the AMA’s IPM program, a large number of allopathic residents at the OU Health Sciences Center University are members of the OSMA. This has allowed Oklahoma to be a top-ranked state for the percentage of residents who are AMA members. The continued recruitment of residents outside of the IPM program will be a primary goal for 2016, particularly at the OU School of Community Medicine in Tulsa and at OSU. Furthermore, with the imminent unification of the allopathic and osteopathic graduate medical education accreditation systems (ACGME and COCA), there is an even greater aspiration for thoughtful and well-coordinated recruitment and engagement of OSU resident and fellow physicians.

The RFS goals remain to:

1. Identify a core group of resident and fellow leadership that are further representative of multiple training programs and sites statewide.
2. Maintain involvement at the AMA national level, both in the Oklahoma Caucus and in leadership positions.
3. Educate current and future section members of services that their OSMA membership currently provides.
4. Initiate collegial contact between the OSMA-RFS, the OSMA Medical Student Section and the OSMA Young Physicians Section in an effort to identify common goals and increase membership participation.
5. Mobilize resident and fellow physicians in a variety of legislative advocacy initiatives.

Dr. Sudduth is completing residency training in June 2016, making the 2016 Annual Meeting his last to attend as a resident physician. Dr. Sudduth will continue to represent Oklahoma as a member of the AMA Young Physician Section at the 2016 Interim Meeting in Orlando, FL.

CONCLUSION:

The ongoing rapid evolution of the American healthcare system as well as the dwindling membership of the young physician segment places an even greater sense of urgency to establish a robust recruitment and engagement system at the medical student and resident and fellow physician points in the physician pipeline. Direct support from the general membership and OSMA leadership are vital to developing a section of physicians-in-training that will ultimately transition to effective, active, lifelong members of the county medical societies and the OSMA.

Respectfully submitted,

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