Emergency Medicine Residency
2012 ANNUAL REPORT

From Hierarchies to Networks: Connecting the Dots
MD Class of 2015, PA Class of 2013

PROGRAM HISTORY

Robert Knopp, MD founded the Regions Hospital Emergency Medicine Residency in 1994. Before arriving in St. Paul, he served as the residency director at Valley Medical Center in Fresno, CA for 17 years. The first class of residents at Regions began their training in 1996. Felix Ankel, MD, has been involved with the residency program since its inception and became residency director in July 2000. As of July 2012, the EM residency has graduated 117 residents from 33 medical schools who now practice in 21 states. Regions faculty are graduates of 13 different EM residencies.
Welcome to the 2012 Regions Hospital Emergency Medicine Residency annual report. I’m delighted to highlight some of our residency’s accomplishments from this past year. Our activities center around our mission: to incorporate the Institute of Healthcare Improvement’s Triple Aim (quality, experience, and stewardship) into our daily practice (http://www.ihi.org/offerings/Initiatives/TripleAim/). Our mission is guided by the Baldridge Educational Criteria for Performance Excellence (www.nist.gov/baldrige/enter/education.cfm) and includes best practices in leadership, strategic planning, stakeholder focus, measurement, analysis, process management and results.

We salute our residents who were involved in leadership activities in 2012:

* Peter Baggenstos (’12) and Kelsey Echols (’14) attended ACEP’s Leadership & Advocacy Conference in Washington, DC.
* Amanda Miller (’15) became the AAEM representative for the residency.
* Adetolu Oyewo (’13) participated on the HealthPartners/Regions team for the AIAMC National Initiative Phase III.
* Amy Stoesz (’15) became the EMRA representative for the residency and attended ACEP’s Scientific Assembly in Denver, CO.

We recruit resident applicants who extend their activities beyond clinical shifts and who positively impact their environment. Peter Baggenstos (’12) was an Arnold P. Gold Humanism & Excellence in Teaching award winner at the University of Minnesota. In 2012, our residents were co-investigators on five grants and IRB-approved studies, co-authors of two peer-reviewed articles, and presenters of three regional and national scientific presentations.

Our residency operates as a complex adaptive system (www.plexusinstitute.org). We train our residents to manage the bridge between the rescue care of emergency medicine and the health of populations (www.improvingpopulationhealth.org). We complement the transfer of knowledge with the transfer of meaning in a connected environment through our extended residency community. Our 2012 conference schedule included an advocacy and ethics conference at the State Capitol focusing on population health, an institutional core competency conference focusing on resilience, and an alumni day conference focusing on telemedicine. The 2012 residency retreat centered around maximizing our quality and patient safety curriculum, formalizing portfolios, and integrating innovative educational design into our residency. Our educational design captures the innate energy released by moving from hierarchies to networks and uses this energy to connect with our partners.

Residency graduates can choose from five fellowships offered through our department and HealthPartners Institute for Education and Research (The Institute): medical toxicology, peds-EM, prehospital/EMS, quality and patient safety, and international emergency medicine.

This year, we matched another competitive class of residents featured in this report. Our goal is to incorporate the highest level of professionalism and humanism into our interactions with patients and members of the healthcare team. We are grateful for the support of our many residency partners and look forward to training the emergency medicine providers of the future.
The Regions Hospital Emergency Center plays a critical role in emergency care throughout the Twin Cities east metro and western Wisconsin communities. This significant impact is made possible through the efforts of our dedicated staff and those we teach. Part of our department’s mission is to incorporate quality, experience and stewardship, the IHI’s Triple Aim, into our daily practice and academic focus. 2012 was another productive year for our ED faculty, who obtain internal and external research grants, present nationally and internationally, and publish peer-reviewed manuscripts, electronic publications and book chapters. Our faculty are leaders within the hospital and community. They have major involvement in national and international specialty societies serving as academic peer reviewers, committee members, board members, and ABEM oral board examiners and item writer. We welcomed Drs. Eric Dahl, Kara Kim, Stephen Stanfield, and Casey Woster to our faculty.

Regions Hospital and HealthPartners are leaders in quality medical care. Dr. Kara Kim graduated in 2012 as our first Quality & Patient Safety fellow and now directs the EMD quality team. In addition to directing the Quality & Patient Safety Fellowship, Dr. Drew Zinkel has been promoted to Associate Medical Director for Quality for HealthPartners. Dr. Cullen Hegarty received an academic promotion to Associate Professor of Emergency Medicine at the University of Minnesota Medical School.

Our educational enterprise continues to expand in scope and recognition. In July 2012, Dr. Amy Walsh started as our first international EM fellow, and Abby Willaert and Garrett Brady started as our first PA residents. Dr. Felix Ankel was awarded the 2012 Parker Palmer Courage to Teach Award at the annual ACGME educational conference. Drs. Kelly Barringer, Kara Kim, and Bjorn Westgard were among those awarded the best faculty abstract poster at the University of Minnesota’s Health Equity Conference. Drs. Adetolu Oyewo and Bjorn Westgard participated in community health discussions offered by the Cultural Awareness Center in St. Paul.

The Emergency Center operations, nursing, crisis program, toxicology, EMS, ultrasound, simulation, sexual assault nurse examiner program, and research section continue to be strengths of our educational experience for both residents and medical students.

Our entire department came together with 12,500 colleagues from HealthPartners to introduce an initiative, Connect the Dots: The Art and Science of Partnership, that focuses on how we all work together for the benefit of the people we serve. We believe that engaging educators, students, patients and administrators to capture innovative ideas is key to our future success.

We have much to be proud of in 2012. Together, we make a positive difference to our patients through everything we do.
Here at Regions Hospital, we pride ourselves on our ability to evolve as the world of medicine changes. We continue to focus on quality improvement; starting this year, we have incorporated the Institute for Healthcare Improvement’s Open School coursework into our curriculum. Our resident-led quality projects improve the quality of care delivered in the emergency department; our administrative curriculum allows the ROD (‘Resident of the Day’) to experience the administrative side of emergency medicine and the hospital as a whole, as well as the opportunity to teach medical students in core emergency medicine topics.

Our longitudinal, integrated intern rotation involving anesthesia and ultrasound (affectionately known as “ultrasthesia”) gives our residents dedicated time to work on their airway and ultrasound skills. Our program provides exposure to toxicology, pediatric emergency medicine, quality management, and EMS throughout our three years of training, as our program has dedicated rotations within each of these fellowship training areas. In addition, the Emergency Medicine Department hosts international medicine and quality management & patient safety fellowships.

Critical care experience is a key component of our training, which involves 6 weeks in the SICU each year, 1 month in the MICU in the first two years, and 3 years of caring for critically ill medical and trauma patients in the ED.

We have an abundance of clinical exposure and great faculty teaching in an environment that is challenging yet supportive, helping us grow to provide excellent health care to our patients in the ED and the community.

We love our experience here and are excited to share it, so please get in touch if you want to find out more.
Aaron Ankeny, MD
BS - Chemical Engineering - University of Nebraska
MD - University of South Dakota
Alpha Omega Alpha Honor Society
Personal Interests: outdoor activities, woodworking, Nebraska Cornhusker athletics

Shaun Kennedy, MD
BS - Biomedical Engineering - University of Minnesota
MD - New York Medical College
Gold Humanism Honor Society
Personal Interests: diving, photography, camping, hiking, canoeing/kayaking, skiing, film, foreign languages, travel

Sean Boley, MD
BA - Chemistry - Vassar College
MD - Pennsylvania State University
Medical Interests: global health, idiopathic illnesses, mysterious maladies
Personal Interests: good beer, good soccer, good grammar, and catchy music

Amanda Miller, MD
BS - Neuroscience, Chemistry & Biology - Westmont College
MD - University of Vermont
Personal Interests: theater, visual art, running, food

Joshua Peltier, MD
BS - Cum laude - Biology - University of Minnesota-Duluth
MD - University of Minnesota
Gold Humanism Honor Society
Medical Interests: ultrasound, international medicine
Personal Interests: woodworking; running; broomball

Amy Stoesz, MD
BS - Magna cum laude - Biological Science - Bethel University
MD - University of Minnesota
Medical Interests: international EM, EMS
Personal Interests: singing, painting with acrylics and the occasional Bollywood film

Ashley TeKippe, MD
BA - Biology - Luther College
MD - University of Iowa
Alpha Omega Alpha Honor Society
Personal Interests: canoeing, skiing, golfing, running, basketball, flag football, learning to play new instruments, acoustic guitar
How does one go from being a student of history, Germanic languages and literature, and biopsychology in Michigan to being a doctor of emergency medicine in Minnesota? Just ask Sonali Meyer. In her own words, Sonali “came to medical school by way of arts administration.” She was a cellist and ballroom dancer who eventually became events associate for Bryant Park in New York City.

Once her path led her to medicine, the University of Minnesota medical student and former marketing director for the Michigan Pops Orchestra took on the role of public relations chair for the Phillips Neighborhood Clinic, helping boost the clinic’s accessibility and public image.

Her enthusiasm for improvement didn’t stop there. Since starting her residency in 2010, Sonali has been instrumental in translating residency quality improvement efforts into lasting systems improvement. Her resident quality project in management of patients in diabetic ketoacidosis has resulted in lasting departmental and institutional improvement.

Dr. Meyer’s interests extend beyond the arts and include cooking, reading and travel. She’s considered the local culinary expert by her colleagues, and her recommendations have been spot on! Her travel ambitions include introducing her husband to Germany, experiencing Thailand and its street food culture, and exploring the souks of Morocco. We wish her all the best.
**Eric Dahl, MD**
Undergraduate: University of Minnesota
Med School: MD/MPH University of Minnesota
Residency: Regions Hospital
Hobbies: ceramics, wine/beer brewing

**Kara Sellung Kim, MD**
Undergraduate: University of Minnesota
Med School: University of Minnesota
Residency: Regions Hospital
Fellowship: Medical Quality Management & Patient Safety
Hobbies: rollerblading, cross-country skiing, snowmobiling, rock-climbing and skydiving

**Stephen Stanfield, MD**
Undergraduate: Clemson University
Med School: University of South Carolina
Residency: Palmetto Health Richland Hospital
Interests: resident education, wilderness medicine, ultrasound
Hobbies: ice hockey, snow-skiing, camping, biking

**Casey Woster, MD**
Undergraduate: Creighton University
Med School: Creighton University
Residency: Regions Hospital
Hobbies: Latin American travel, camping
REGIONS-BASED:

**Faculty**
- Felix Ankel, MD
- Kelly Barringer, MD
- Emily Binstadt, MD, MPH
- Mary Carr, MD
- Won Chung, MD, MS
- Rachel Dahms, MD
- RJ Frascone, MD
- Bradley Gordon, MD
- Carson Harris, MD
- Cullen Hegarty, MD
- Keith Henry, MD
- Bradley Hernandez, MD
- Joel Holger, MD
- Kurt Isenberger, MD
- Kevin Kilgore, MD
- Kara Sellung Kim, MD
- Peter Kumasaka, MD
- Robert LeFevere, MD
- Matthew Morgan, MD
- Jessie Nelson, MD
- Karen Quaday, MD
- Samuel Stellpflug, MD
- Stephanie Taft, MD
- Andrew Zinkel, MD
- Michael Zwank, MD

**Medical School**
- University of Wisconsin
- Michigan State University
- Mayo Medical School
- University of Michigan
- Albany Medical College
- University of Minnesota
- University of Minnesota
- Creighton University
- University of Florida
- University of Miami
- Medical College of Wisconsin
- University of South Dakota
- University of North Dakota
- University of Minnesota
- University of Rochester
- Creighton University
- University of Wisconsin
- University of Illinois Urbana-Champaign
- Chicago Medical School
- University of Minnesota
- Wayne State University
- University of Minnesota
- East Carolina University
- University of Wisconsin

**Residency**
- University of Illinois
- Regions Hospital
- Harvard Affiliated
- EM/IM Henry Ford Hospital
- Harvard Affiliated
- Indiana University
- FP - St. Paul-Ramsey Medical Center
- Regions Hospital
- Brooke Army Medical Center
- Regions Hospital
- Regions Hospital
- Regions Hospital
- St. Vincent Medical Center - Toledo
- Ortho - Creighton University
- Regions Hospital
- Christ Hospital
- Regions Hospital
- Regions Hospital
- EM/IM Henry Ford Hospital
- Regions Hospital
- Regions Hospital
- University of Illinois
- Boston Medical Center

COMMUNITY-BASED:

**Faculty**
- Aaron Burnett, MD
- Eric Dahl, MD
- Paul Haller, MD
- Levon O’hAodha, MD
- Brian Peterson, DO
- Martin Richards, Jr, MD
- Stephen Stanfield, MD
- Bjorn Westgard, MD
- Casey Woster, MD

**Medical School**
- SUNY - Syracuse
- University of Minnesota
- University of Minnesota
- University of Minnesota
- University of Minnesota
- Chicago COM
- University of Minnesota
- University of South Carolina
- University of Illinois Urbana-Champaign
- Creighton University

**Residency**
- Regions Hospital
- Regions Hospital
- IM - University of Minnesota
- University of Michigan
- Resurrection Medical Center
- Regions Hospital
- Palmetto Health Richland Hospital
- Hennepin County Medical Center
- Regions Hospital

PEDIATRIC EM:

**Faculty**
- Joseph Arms, MD
- Patrick Carolan, MD
- David Hirschman, MD
- Anupam Kharbanda, MD
- Manu Madhok, MD, MPH
- Henry Ortega, MD
- Samuel Reid, MD
- Robert Sicoli, MD
- Paul Zenker, MD

**Residency**
- University of Minnesota
- Medical College of Wisconsin
- University of Minnesota/HCMC combined EM-Peds
- Morgan Stanley Children’s Hospital
- Alfred I duPont Institute for Children
- University of Wisconsin
- University of Minnesota
- Rainbow Babies Residency Program
- Tulane University/Louisiana State University

**Fellowship**
- Children’s Hospitals and Clinics of MN
- Children’s Hospital of Cincinnati

- Boston Children’s Hospital
- Cardinal Glennon Children’s Hospital
- Columbus Children’s Hospital
- Children’s Hospitals and Clinics of MN
- Medical College of WI
- Children’s Hospitals and Clinics of MN
Staying connected with residents, alumni and colleagues is a pleasant challenge for us. Sometimes our only contact is one of you looking for an email address for a past resident. That’s okay - we’ll take what we can get in order to stay in touch with you. The highlight of our year is the bulletin board between our offices loaded with holiday pictures/cards and birth announcements. Last count was 226 offspring of EM grads! In fact, there’s even a grandchild or two. Time marches on; our third graduating class had to re-certify this year, we’re now in the midst of a new accreditation system with yearly program updates instead of 5-year site visits, and we have PA residents who have fit quite nicely into the mix.

Numerous residency-sponsored events allow alumni the opportunity to meet and network with our current residents. Our website and Facebook fan page continue their popularity in the EM community, according to our usage stats. Our Facebook stats took a huge jump when Cullen Hegarty made a billboard appearance as “Doc Hollywood,” a Regions marketing initiative.

We attended the annual meeting of Emergency Medicine Association of Residency Coordinators (EMARC) in Atlanta as part of the 2012 CORD Academic Assembly. It allowed us the opportunity to network with our coordinator colleagues throughout the country and share best practices. We also spent time in Chicago at SAEM with our intern class and ran into a few of you there. Please look us up if you find yourself at either of those meetings.

It was our pleasure to host 86 medical students from 14 medical schools, 33 rotating residents and fellows from 6 specialties and 5 EM residents from Hennepin County Medical Center who participated in our 2nd year swap. We are now wrapping up the 2012 interview season, and look forward to another great match.

FACULTY SPOTLIGHT: Mary Carr, MD

After completing a combined Internal Medicine/Emergency Medicine residency at Henry Ford Hospital in Detroit, Mary Carr spent one year in the Department of Emergency Medicine at the Medical College of Wisconsin (Affiliate Hospital) prior to joining the senior staff at Regions (then St. Paul-Ramsey Medical Center.) In the 27 years since coming to Regions, Mary has left her mark on resident education.

Dr. Carr has been the EMD trauma director and liaison to the Regions trauma service since 1994. She was instrumental in the development of the Regions trauma team – a joint effort between the departments of emergency medicine and surgery.

Having led the ED’s sexual assault program for many years, as well as practicing at Midwest Children’s Resource Center performing sexual assault/abuse evaluations on children, Mary founded the Regions Hospital Sexual Assault Nurse Examiner (SANE) program in 2002. She now serves as medical director of the program and oversees resident training in sexual assault examination. She has published several articles relative to sexual assault that include establishing a protocol allowing sexual assault examinations to be conducted on incapacitated patients, as well as determining trahydrozoline levels with normal use of Visine in order to determine when the drug may have been used as a date rape drug.

Dr. Carr is considered our local expert in the field of forensics; she completed a year-long Bush Fellowship in forensic medicine at the Hennepin County Medical Examiner’s Office. She has used that fellowship to provide clinical forensic medical consultations and expert testimony to police, prosecution and defense attorneys in criminal law cases, as well as educating police and lawyers throughout the State on strangulation. Having participated in the 2006 Minnesota legislation on domestic violence and strangulation, Dr. Carr now educates residents on criminal and legal testimony and forensic medical evaluations and is a member of the American Academy of Forensic Sciences.
The registered nurses (RNs) in the Emergency Department demonstrate an impressive commitment to education. Of all the RNs in the ED, 55% are baccalaureate prepared, 4% are masters prepared and 40% hold an associate degree in nursing. Many of the Emergency Room Technicians (ERTs) are in school pursuing degrees in nursing or other related health care positions. Thirty four percent of the RN staff have specialty certifications in either emergency nursing (CEN), pediatric emergency nursing (CPEN), critical care nursing (CCCRN), sexual assault nurse examiner (SANE) or medical-surgical nursing (ANCC, AND); of those, 46% hold two or more specialty certifications.

A decentralized nurse educator coordinates orientation and education for the 140 nurses, 18 paramedics, and 63 ERTs. Annually, all staff participate in a multidisciplinary skills day, which is a hands-on session to review and enhance skills and equipment used in the department. Additionally, Regions ED nurses are involved in teaching other professionals in the community, including paramedics, EMT-basic, and nursing students at the college level. We have certified child protection safety nurses who have an active role in the community in the correct placement and use of child safety seats. Our nurses also provide education in the Western Wisconsin area including on-line education, didactic and clinical time.

ED Nurses are active in the Emergency Nurses Association (ENA), with several nurses that currently hold or have held positions at the administration level of the local chapter including president, secretary and state representative. We salute Ellen Johnson, RN, who was given the Critical Care Nurse of the Year Award through the March of Dimes.
In June 2012, the Emergency Medicine PA Residency’s first class of two residents started. They completed resident orientation with the physician PGY-1 Class of 2015. Orientation, teambuilding and computer training were all completed together. They also were certified as providers of ACLS and PALS as a group. Currently, the PA residents work alongside the physician residents during ED and off-service rotations. They attend weekly didactic conferences and study the same core curriculum. The residency includes rotations in SICU, MICU, orthopedics, toxicology, EMS, ultrasthesia, hospital medicine, and ED at Regions, Abbott Northwestern, St. John’s, Hudson, and St. Paul Children’s hospitals.

The 18-month residency is designed to allow PAs to refine their knowledge and skills and to successfully integrate into the specialty of emergency medicine at an accelerated rate. Our hope is that residency-trained PAs will have increased competence, confidence, and job satisfaction, as well as become leaders in their future employment.

We are working hard to promote Emergency Medicine PA residencies at the national level with an educational session during the 2013 CORD Academic Assembly and attendance at semi-annual meetings of the Association of Postgraduate PA Programs. We had a successful information session near the campus of the PA school at Augsburg College, which was attended by PA students from 3 different schools, and are traveling to the University of Wisconsin-Madison to provide information to its leadership and students. Thus far the program has been well received throughout the Hospital and we look forward to sharing any information we can regarding our residency and the residents.

Please feel free to contact us with questions. We are accepting applications for our next class to start in June 2013.

Brad Hernandez, MD, Medical Director  
Ann Verhoeven, PA-C, Program Director  
Christie Eck, Program Coordinator

Brad Hernandez, MD, Garrett Brady, PA-C, Christie Eck, Abby Willaert, PA-C, Ann Verhoeven, PA-C

PA Resident Class of 2013

Garrett Brady
Undergraduate: BA - Western State College of Colorado
Graduate: MMS - Physician Assistant, Mercer University
Personal Interests: running, mountain biking, watching hilarious tv shows

Abby Willaert
Undergraduate: BA - Summa cum Laude, College of St. Benedict
Graduate: MS - Physician Assistant Studies, Augsburg College
Personal Interests: Yoga, reading, travel, spending time with family
Welcome to another year of lifelong learning!

This year, as I reflect on lifelong learning, I realize I want to know more from all of you.

There are so many ways you can obtain good learning materials it is actually very difficult to keep track of. I’m thinking: meetings, blogs, newsletters, podcasts, online video, wikis, online references, journals, and (shudder…) even books!

I’d love to learn how you all are keeping up on your habit of lifelong learning. Is there a great online reference you prefer? What meeting was worth the trip? How do you fit any of it into the day? Do you have any special motivation tricks?

I’ll share this from my own experience: listening to a recorded lecture while out on a run does not help me run, nor does it help me learn.

So, send an email to lifelearn@regionsem.org describing the best advice or resources for keeping up to date. I’ll anonymize, summarize and send back out to EMres. Or, just send it directly to EMRes@regionsem.org to share with all of us.

I’m challenging you to send me something, because I know the likelihood is quite high that you are actively using or could reach some kind of email device without actually moving from your current position!

A few more notes before closing:

Our stats demonstrate the program continues to grow.

   Graduates: 117
   Current residents: 30

Current PA residents: 2
Fellows: 12
Faculty: 44
EMRes: 334 subscribers
Facebook: 586 support our residency with a ‘like’
   (aside: putting Cullen’s mug on a billboard and sharing on Facebook ‘engaged’ >2,100 people.)

Check out http://emres.regionsem.org/ - in addition to frequent updates with content from our conferences, there are connections to blogs from other experts related to our program.

Have a great 2013!

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The Regions Hospital Emergency Medicine Residency supplements clinical learning experience with lectures, workshops and procedural skills labs that are open (space permitting) to all residents, faculty, students, alumni, nurses, physician assistants, consultants and others from our residency community to share and discuss new knowledge.

Number of lectures: 240
Hours of attendance: 5,114 resident hours
Number of workshops: 47 workshops attended by 37 rotating residents, 170 medical students and 20 PA students.
Number of labs: 32 residents participated in 11 procedural skills labs

Tolu Oyewo, MD presenting at Advocacy Day

Residency Presentations 2012
While the conference curriculum of the Regions Hospital Emergency Medicine Residency covers the required topics, each year brings some exciting new topics. For example, this year the HealthPartners Institute for Education and Research sponsored a multidisciplinary conference led by Dr. J. Bryan Sexton, PhD from Duke University focusing on physician well-being. We have had numerous guest speakers from around the area and the country, including Dr. JJ Rasimas from the NIH and Dr. David Seaberg, past president of ACEP. In April, we held an Ethics and Advocacy Day in the Capitol building with the theme “From Rescue Care to Population Health: the Impact of the ED of the Future”, discussing residents’ involvement in advocacy, health care reform, and social determinants of health. In May, we held a joint HCMC and Regions Simulation Day at the Simulation Center at Regions Hospital. At our alumni day conference in September, we hosted more than 20 graduates who shared their wisdom with our residents. In October, we held an Ortho Day taught by orthopedic staff physicians, covering common ED injuries and providing the opportunity to practice procedures. In November, residents participated in our yearly combined EM/Trauma Update co-sponsored by Hennepin County Medical Center, North Memorial Medical Center, Mayo Clinic, St. Mary’s in Duluth and HealthPartners.

The basic conference curriculum covers the full spectrum of topics in emergency medicine, based on The Model of the Clinical Practice of Emergency Medicine. This model is the basis of the content specifications of all examinations by the American Board of Emergency Medicine. The core curriculum is designed to repeat itself in its entirety on an 18-month basis. The curriculum is set up to cover both the depth and breadth of emergency medicine through traditional as well as innovative and interactive means. Curriculum components include:

- **Critical Case**, a favorite of residents and faculty alike, provides an interactive forum for discussion of a case of educational value. The discussion is focused on the decision-making process in evaluating critically-ill patients with limited immediate data as well as the ultimate diagnosis in the case. Cases are actual cases from the ED and are chosen by the chief residents.

- **Core Content Lectures** reinforce knowledge gained on clinical rotations as well as supplement the clinical experience. Lectures are given by faculty members who are experts in a core content area.

- **Journal Club** is held on a regular basis and facilitates discussion of two or three current practice-changing articles in emergency medicine.

- **Joint Conferences** are collaborative conferences held in conjunction with other departments such as radiology, trauma surgery, critical care and internal medicine to discuss related areas of interest.

- **Small Group Sessions** encourage interactive learning. Small group simulation days have been incorporated into the curriculum. Residents are divided into three groups and rotate through stations that may include case discussion, simulation or mini-lectures.

The design of the conference curriculum tries to incorporate the principles of adult learning in teaching the residents basic concepts while broadening their education with professional topics which will be valuable to them in their practice. We seek feedback each conference day from residents and staff so that conferences can improve from year to year.
Educational objectives:
By the end of the third year of training, residents must demonstrate appropriate knowledge and skill in the use of ED ultrasound, including mastery of the trauma (FAST) exam, emergency echocardiography, abdominal aortic aneurism, undifferentiated hypotension, early intrauterine pregnancy and procedural ultrasound including vascular access, thoracentesis, paracentesis, bladder identification, abscess location and others.

Description of clinical experience:
Ultrasound education begins during orientation with a half-day didactic and hands-on instructional session. During the first year, the ultrasound experience is combined in the emergency department integrated (EDI) months. During the ultrasound/anesthesia (ultrasoundia) days of these months, the resident spends the morning intubating in the OR and the afternoon scanning in the ED, completing 10 modules that encompass emergency ultrasound. Residents are encouraged to perform ultrasounds on any patients in the emergency department including those with normal anatomy and no pathology. Resident ultrasounds are supervised variably by the staff emergency attending, ultrasound director or senior residents. EM-2 and EM-3 residents are responsible for ultrasounds during all trauma team activations. An optional elective in the 3rd year is available to further ultrasound skills and knowledge.

Description of didactic experience:
A lecture series covering basic ultrasound physics, focused assessment sonography for trauma (FAST) exam, emergency echocardiography, abdominal aortic aneurism, undifferentiated hypotension and procedural ultrasound is covered over an 18-month core content curriculum. Lectures are supplemented with small group interactive sessions during specific conference days focused on a more interactive learning experience. For those who are interested prior to residency graduation, residents are given advice on setting up an ultrasound program and getting involved in their new position.

Evaluation process/feedback mechanisms:
Residents receive feedback on ultrasound technique, image quality and trouble-shooting techniques by the supervising ED attending or senior resident. Additionally, ultrasound images are reviewed as part of the quality assurance initiative and feedback is given to the resident and faculty by the ultrasound director. Residents are given a semi-annual report of the number and type of ultrasounds they have done in the ED. This is reviewed during the semi-annual resident evaluation meetings with the program director. Residents are provided an ultrasound credentialing letter upon graduation.

Simulation
The Regions Hospital Emergency Medicine Residency has a robust group of faculty with strong interests in simulation-based education. We have worked to integrate simulation and small-group learning as an important part of the residency curriculum. Simulation is also used to augment medical student and faculty education, to address systems-based barriers to quality care and to analyze communication issues.

Several residents are pursuing simulation-based projects for their scholarly activity requirements this year, and we look forward to mentoring more residents in this area in the future. Dr. Nelson continues to work with HealthPartners Clinical Simulation, and Drs. Hegarty and Binstadt continue as co-directors of emergency medicine and trauma for the University of Minnesota SimPORTAL.
L134 - Emergency Medicine Residency Education
Donations to the Emergency Medicine Residency fund (L134) play a critical role in program and resident development. In 2012 these funds allowed us to purchase a SMART podium for use in conference, eliminating the wait time for the screen to lower and the projector to warm up during presentations. We also purchased a task trainer for ultrasound-guided IJ insertion. Our department now offers IJ workshops twice a month to a variety of learners.

We were able to send residents to regional and national meetings in 2012:
Ryan Bourdon (’14) and Marc Ellingson (’14) - Council of EM Residency Directors (CORD) Academic Assembly - Atlanta, GA
Peter Baggenstos (’12) - American College of Emergency Physicians (ACEP) Leadership & Advocacy Conference - Washington, DC
Adetolu Oyewo (’13) - Alliance of Academic Medical Centers (AIAMC) National Initiative Phase III - Chicago, IL
Amanda Carlson (’13) - Society for Academic Emergency Medicine (SAEM) Great Plains Regional Conference - St. Louis, MO

Regions Circle ($10,000+)
Bradley (’02) & Laura Gordon
Regions Hospital Emergency Medicine Physicians

Advocate ($1,000+)
Felix Ankel & Lisa Holter
Sandy Buckman (’07)
Scott Donner (’06)
Jon Fuerstenburg (’04)
Nicholas Johnson (’05)
Cynthia Kelmenson (’03)
Robert (’04) & Jenny LeFevere
Karen Lushine (’01)
Matthew Morgan (’05)
Martin Richards, Jr. (’06)
Peter Tanghe (’03) & Michele Harris
Kevin (’07) & Abbie Smith
Paul Travnicek (’08)
Jeffrey (’99) & Sarah Young

Builder ($500+)
Cheri Audrain-Schroeder (’01)
Cullen Hegarty (’01)
Bradley (’01) & Karine Hernandez

Sponsor ($100+)
Susan (’01) & David Cullinan
Nathaniel (’10) & Deanna Curl
Katharine Davidson (’11)
Aaron Feist (’10)
Jeffrey (’06) & Laurie Geddes
Patrick Holland (’02)
Phelps Johnson (’02)
Robert Knopp
Martin Klinkhammer (’07)
Jessie (’04) & Micah Nelson
James Parker (’99)
Kelly (’04) & Jeff Rhone
Natasha Srb (’08)
Scott Thielen (’09)
John Travnicek (’06)
Robert Zeleznikar (’99)

“ I appreciate the focus on delivering quality emergency care that is respectful to the whole person that Regions’ residents bring to our group. They recognize the privilege of being able to provide emergency care and the pride of being able to do what we do.”

- P. Tanghe (’03)
E009 - Mark Bernas Endowment
The Mark Bernas Endowment was established in 1998 after the death of EM resident, Mark Bernas. Its purpose is to provide long term financial resources for the Mark Bernas Emergency Medicine Resident Learning Center/Library and educational projects. Mark's mother, Dorothy, is an integral part of our residency family, participating in our Advocacy & Ethics conference, as well as our graduation, where she presents the Mark Bernas Advocacy & Ethics award to the resident who has demonstrated dedication and leadership in advocating for the health of our community.

Advocate ($1000+)
Dorothy Bernas

Builder ($500+)
Felix Ankel
Gary Collins

Sponsor ($100+)
Chanah DeLisle ('99)
Karen Lushine ('01)
James Parker ('99)

ACEP Leadership & Advocacy Conference - Washington, DC

“Had a patient present in full cardiac arrest. I was really purposeful in applying many of the principles that Cullen emphasized … things like prepping the team prior to the patient arriving, using closed loop communication, using names, updating the team on the plan, giving clear concise instructions, etc. Afterwards I had a nurse with 30 years of experience come up to me and say that was the best run and smoothest code situation she had ever been involved in. Just wanted to pass on the compliment and say I am very grateful for the superb training I received.”

- C. Hawthorne ('12)
Regions EMS is proud of our affiliation with Regions Hospital Emergency Medicine Residency and our residents are active contributors to the field of pre-hospital medicine.

**Resident Rotation:**
Emergency Medicine residents complete a 15 day longitudinal rotation in EMS during their intern year. Our residents provide patient care in the streets with urban fire based services, volunteer/paid on-call services, police/medic services and hospital based units. Emergency Medical Dispatch fundamentals are stressed during shifts at the Ramsey County public safety answering point. Residents also spend time in the East Metro Medical Resource Control Center (MRCC) which serves as the nerve center for MCI management and on-line medical control in the east metropolitan area of the Twin Cities. Unique opportunities include air medical transport with Lifelink III and shifts with the National Ski Patrol at Afton Alps Ski Resort. In the classroom, residents are integrated as active educators during critical case reviews and cadaver labs at the University of Minnesota. EM residents regularly have the opportunity to participate in mass gathering medicine under the medical direction of Regions EMS. In 2012 Drs. Kelsey Echols and Bjorn Peterson provided medical coverage with St. Paul Fire at MN Crashed Ice. Drs. Jason VanValkenburg, Josh Peltier and Ashley TeKippe staffed the finish line medical tent at the Twin Cities Marathon.

**Associate Medical Directorship:**
Residents with a particular interest in EMS may elect the EMS Associate Medical Director (AMD) program for their scholarly project. In addition to receiving increased exposure to prehospital patient care, residents are tasked with learning the administrative and legislative foundations of EMS. Residents completing the AMD program are well positioned for application to EMS fellowships.

**2012 Associate EMS Medical Directors**
Zabrina Evens, MD ('13)
Darcy Rumberger, MD ('13)
Jodi Deleski, MD ('13)
Jason VanValkenburg ('14)
Kelsey Echols ('14)

**EMS Fellowship:**
Beginning in August 2010, Regions EMS began offering a 1 year Prehospital Medicine/EMS fellowship. In August 2012, Dr. Bjorn Peterson became the second prehospital medicine fellow. A board certification examination for Prehospital Medicine/EMS is expected in 2014.

**Research:**
2012 was a strong year for EMS research at Regions. In collaboration with the Critical Care Research Center we published articles in JAMA, Prehospital Emergency Care and Resuscitation. Dr. Casey Woster served as co-author on a paper published in the American Journal of Emergency Medicine. Drs. Zabrina Evens and Samantha Kealey participated in a prospective field trial of two videolaryngoscope devices. Ongoing projects include an assessment of the impact of a nationwide shortage of Etomidate by Dr. Kyle Holloway and an assessment of the effectiveness of supraglottic airways to prevent aspiration by Dr. Kelsey Echols.
The pediatric emergency department at Children’s Hospitals and Clinics of Minnesota saw 90,973 patients in 2012. With outreach services in Woodbury and Chaska, Children’s ED is among the top 5 busiest pediatric EDs in the country. The PEM fellowship program at Children’s currently has seven PEM fellows supported by 38 PEM physicians and 16 ED based pediatric nurse practitioners. This comprises the largest pediatric-emergency trained staff in the region. The Children’s Hospital of Minnesota-Minneapolis campus is applying for certification by the American College of Surgeons as a Level 1 pediatric trauma center. This has allowed for a pediatric surgeon to be in-house 24/7, trauma team resources and full range of surgical sub-specialty coverage in the hospital. In July 2012, Anupam Kharbanda, MD, MS started as Associate Program Director and Research Director for the emergency department. (www.regionsem.org/fellowships)

Scholarly Projects by PEM Fellows

Funmi Salami: Demographics and Outcome of Physical Assault Presenting to the Pediatric Emergency Department

Funmi Salami: Animated Picture to Improve Provider Adherence to CT Scan for Head injury Rule

Annalisa Rudser: Ovarian Torsion in Pediatric Patients: A Review of Eleven Years’ Experience and development of a decision rule

Leena Sastry: Health Literacy and its Relationship to Primary Caregiver Perception of Illness and Pain in Pediatric Patients

Beth Placzek: Piloting a Novel use of Bedside Ultrasound for Noninvasive Risk Stratification during Resuscitation in a Pediatric Emergency Department

Kara Seaton and Anna DePompolo: Sellick maneuver - a historical perspective, submitted to Pediatric Academic Society

Lori Bryant: Glasgow Coma Scale - a historical perspective, submitted to Pediatric Academic Society

Amy Walsh, the first international fellow, is nearly halfway through her first year of the fellowship and has completed nearly one quarter of her coursework in the Masters of Development Practice degree program at the University of Minnesota. Two meetings of the International Fellowship reading Group, a community-wide effort, have met where we discussed The Road to Hell and The Bottom Billion. Plans are being finalized for an international conference in Bolivia this March, at which Drs. Walsh, Morgan and Harris will be speaking. We continue to accept applications for the upcoming year’s fellowship spot.

Pediatric Emergency Medicine Fellowship

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Pediatric Emergency Medicine Fellowship Presentations in 2012

Alliance of Independent Academic Medical Centers, Tuscon, March 29-31
Demographics and Outcome of Physical Assault Presenting to the Pediatric Emergency Department. Poster presentation by Funmi Salami, MD
Time to Pain Medication In children with Long Bone Fractures presenting to Pediatric Emergency Department. Platform presentation by Manu Madhok, MD, MPH

Pediatric Academic Society, Boston, April 27- May 1
Time to Pain Medication In children with Long Bone Fractures presenting to Pediatric Emergency Department. Platform presentation by Manu Madhok, MD, MPH

Simulation in Pediatric Emergency Medicine Workshops, Bangalore, July 22; New Delhi, July 25. Leena Sastry, MD and Manu Madhok, MD, MPH

3rd Annual Pediatric Emergency and Trauma Conference, October 5. Cases from PEM by Leena Sastry, MD, Funmi Salami, MD, Beth Placzek, DO

SUN Simulation Conference, Regions Hospital, November 9
Debriefing in Simulation Workshop, Manu Madhok, MD

Emergency Medicine and Trauma Update, November 15
Evaluations and management of acute pediatric abdominal pain - Anupam Kharbanda, MD, MS

Manu Madhok, MD, MPH, Fellowship Director
The Toxicology Service at Regions Hospital, an integral section of the Emergency Medicine Department, focuses on education, research and clinical evaluations of toxicology patients. The toxicology educational service provides quarterly interdisciplinary conferences (critical care, pediatrics, nephrology), a weekly toxicology journal club, adverse drug reaction, and herbal and toxicology chapter reviews. Other educational events during the year include forensic toxicology case review, the annual toxicology “field trip” to the University of Minnesota Landscape Arboretum identifying and discussing toxic plants, an “Herbal Outing” to the cultural markets in the Twin Cities, and an annual toxic mushroom hunting trip at a rural park.

The Toxicology Service is the home base for the Medical Toxicology Fellowship sponsored by the HealthPartners Institute of Medical Education and Research and the Hennepin Regional Poison Center. We serve as a major training station for the fellows and play an active role in their education. To supplement the education of fellows, residents and students, the toxicology service uses a computer-controlled mannequin for case simulations. New cases are revised and developed throughout the year. The close relationship with the Hennepin Regional Poison Center allows us to share in the educational roles of the Poison Center, participating in their weekly and monthly case conferences and toxicology didactic sessions. During 2012 the clinical toxicology service rotation included 2 pediatric emergency medicine fellows, 15 emergency medicine residents from Regions and 1 from Mayo, 2 IM-EM residents from HCMC, 5 medical students from Minnesota, Kentucky, and Iowa, 2 psychiatry PA residents, 1 psychiatry resident, 1 EM PA resident, 1 PharmD resident from Mayo, and more than 20 University of Minnesota PharmD candidates.

In 2012 the toxicology faculty and fellows were involved in more than 12 formal presentations at local, regional and national conferences, and at community hospital grand rounds in Minnesota and Wisconsin. Our faculty has participated regularly in the toxicology training of University of Minnesota critical care fellows, internal medicine residents, and physician assistants. During 2012, toxicology faculty gave international presentations at the Fifth International Congress on Acute Care in Cochabamba, Bolivia.

The toxicology consultation service is relatively active and provides 30 or more formal consultations per month at Regions. In addition, we continue to provide informal educational consults, telephone consults, and consults on pediatric patients at the Minnesota Children’s Hospitals and Clinics in Minneapolis and St. Paul. Our service also evaluates inpatients at Regions for herbal-drug and herbal-disease state interactions and provide recommendations to primary providers. Our toxicology clinic received multiple referrals to evaluate new patients with acute, subacute and chronic toxicologic exposures.

Members of the toxicology service participate in toxicology-related clinical and benchtop research. Our research focuses on the treatment of toxin-induced shock with high-dose insulin as an inotropic treatment, and induced hypothermia for the treatment of severe carbon monoxide poisoning. During 2012, the toxicology team presented at meetings of the Society for Academic Emergency Medicine and North American Congress of Clinical Toxicology.

Overall, we are a very active service with energetic and dedicated professionals with a passion for teaching and providing quality care, as well as expanding and contributing to toxicology knowledge through research.
Medical Quality Management and Patient Safety
In June our first fellow, Kara Kim, MD (’11), graduated from our Medical Quality Management and Patient Safety Fellowship. During her fellowship, she practiced as an emergency physician and was actively involved in several quality projects at Regions Hospital as well as within the community, most notably, “Pain Control in the Emergency Department: HealthPartners Regions Hospital and Community Involvement.” She also helped develop an automated hospital-wide electronic alert that fires when a patient’s vital signs are entered if they meet at least two Systemic Inflammatory Response Syndrome (SIRS) criteria, thus increasing the diagnostic accuracy and awareness of patients who may have sepsis or progress to septic shock.

Dr. Kim represented Regions Hospital and emergency medicine on the Institute for Clinical Systems Improvement (ICSI) Acute Coronary Syndrome (ACS) Guideline Review Group which created an evidence-based guideline for the diagnosis and treatment of patients with ACS. She was a key member of a Regions Hospital team for the Alliance of Independent Academic Medical Centers (AIAMC) National Initiative III - Focus on Leadership Development and the AIAMC’s Project Initiative to Improve Content & Structure of Quality Fellow Programs. Kara’s committee participation includes: Regions Hospital’s Patient Care Committee, Best Care Collaborative, EMD Quality and MN-ACEP’s Advocacy Committee.

She is currently working towards completion of a Masters in Business Administration at the University of Minnesota Carlson School of Management. Following completion of her fellowship, she was hired as faculty at Regions and as the new Director of EMD Quality. She continues to be an asset to our department and a champion for improving the quality of care we provide to our patients. If you would like more information or have interest in applying to the fellowship, please contact Dr. Andrew Zinkel, fellowship director, at andrew.r.zinkel@healthpartners.com.

Crisis Program
The Crisis Program, a psychiatric crisis intervention and assessment service at Regions Hospital Emergency Center, represents a successful collaboration between the Emergency Department and Regions Mental Health Department.

An experienced, committed group of licensed independent clinical social workers (LICSW) staff the program 24/7. This innovative and cost-effective program has been an integral part of the ED for more than 35 years and serves more than 6,000 patients annually. We provide a patient centered and trauma-informed model of care.

Patients are seen for a variety of mental health issues including depression, psychosis, anxiety, post traumatic stress and substance abuse. The crisis staff work closely with ED physicians, residents, physician assistants, nurses, ERTs and case managers to provide comprehensive psychiatric and psychosocial assessments and to create discharge plans that maximize safety and stabilization in the community or in the hospital. Approximately 60 percent of all patients evaluated return to the community with referrals for outpatient services.

Maddy Cohen, MSW, LICSW, Manager, ED Crisis Program
The Regions Hospital Emergency Medicine Department is committed to medical student education. Rotations hosted at Regions include our core required EM clerkship through the University of Minnesota Medical School, our advanced EM clerkship, our toxicology course, and a new elective bedside ultrasound experience.

Our **core rotation** consistently gets top reviews from University of Minnesota students. The highlights of the rotation include the outstanding supervision, education, and feedback to the students from our senior residents, their experience in our weekly resident conferences, and the weekly student-focused educational workshops, including a simulation resuscitation workshop. This rotation allows our senior residents to experience teaching and supervision on a daily basis, and allows students a chance to have a close working relationship with our EM residents.

The **advanced rotation**, led by Dr. Kevin Kilgore, is our sub-internship experience for students from the University of Minnesota as well as other US medical schools. Highlights of the advanced rotation include direct supervision by EM faculty, EMS, ultrasound, EKG education and experiences, and an informal session with Dr. Ankel focused on the emergency medicine residency application process.

Students taking the **toxicology rotation** here receive a well rounded tox experience with our clinical toxicology service. During this four week rotation, students experience ED consults, inpatient consults and rounds on the toxicology in-patient consultation service, time at the Poison Control Center, and outstanding small group educational sessions.

During the **bedside ultrasound for the clinician**, a rotation hosted by Dr. Mike Zwank from Regions and Dr. Rob Reardon from HCMC, students taking this elective spend time with an ultrasound technician learning the ins and outs of the ultrasound machine, have focused reading on ultrasound and its EM application, and experience plenty of hands-on, supervised ultrasound in the ED.

Thanks to the efforts of Dr. Keith Henry, we now integrate clinical instruction into the first and second year medical school curriculum at the University of Minnesota School of Medicine. The **Essentials of Clinical Medicine** course introduces early medical students to acute care medicine and to its essential role and function within the modern health care system.

In 2012, Regions Hospital hosted a total of 86 students from 14 medical schools, with 24 of them taking the advanced course, 13 learning bedside ultrasound, 5 on toxicology, and 44 taking the core rotation. Dr. Hegarty continues in his role as clerkship director for all EM courses through the department of EM at the University of Minnesota in addition to his roles as co-chair of the University of Minnesota Medical School Twin Cities campus curriculum committee, and chair of the clinical education committee at the Medical School.

If interested in learning more about our student rotation opportunities, check the ‘student program’ link on our website (http://www.regionsem.org/student-program) or call Lori Barrett at 651-254-3666 or Kristi Lamb at 651-254-5298. Applications are being accepted for the 2013-2014 academic year through the Visiting Student Application Service (https://services.aamc.org/20/vsas/).
Procedural Training and Competency
Procedural education is an integral part of residency. Graduates from our program need to enter their future practice comfortable and competent in performing a broad variety of invasive and noninvasive procedures in order to care for their patients. Performing the right procedure in the right way on the right patient at the right time requires that dedicated knowledge and an array of skills come together in perfect union.

Procedural competency matters the most in procedures that are complex, that are high risk, and that must be performed immediately to reduce the risk to life or limb.

Competencies and accreditation
The “core content” as defined within the Model of the Clinical Practice of Emergency Medicine delineates which procedures a practitioner should be able to perform. These include high stakes procedures such as airway management, cricothyrotomy and complex delivery, as well as common ones such as fracture reduction and splinting. The American Board of Emergency Medicine dictates that those procedures are within the realm of emergency medicine, and that board certified practitioners should be facile in executing them.

Residency serves to prepare physicians to enter their eventual practice, and must expose them to a wide array of procedures. The Accreditation Counsel for Graduate Medical Education requires demonstration of global procedural competency prior to graduation from a residency program. Graduate medical education is transitioning to the use of milestones to give additional concrete criteria in order to evaluate resident performance. Currently, procedure-centered milestones include the general approach to procedures, airway management, anesthesia and acute pain management, diagnostic and procedural ultrasound, wound management, and vascular access.

Overall Approach to Procedural Education
Reading, lectures, bedside teaching, workshops and case simulations all contribute to the knowledge base and clinical acumen needed to approach and complete procedures. Additionally, dedicated simulation labs each year allow focused time to perform procedures in a safe environment, while receiving real-time feedback on techniques.

Clinical Procedural Experience
Historically, most procedural exposure happened at the patient’s bedside under faculty supervision. The emergency department, intensive care units, and off-service rotations provide an opportunity for residents to become competent in performing procedures in a clinical setting. Working with different faculty in different specialties, residents are exposed to varied techniques and approaches to patient care. Bedside teaching also allows for direct and immediate feedback on performance at the bedside under the watchful eyes of faculty.

Invasive Procedure Lab
Many invasive techniques are still quite effectively taught in a simulated session, as this allows a safe environment in which to perform the procedure in a deliberate manner. The classic “see one, do one, teach one” model for clinical teaching used in the past is no longer adequate. For safety, quality, and patient care reasons, residents are expected to have exposure to invasive procedures before they perform the procedure on a patient.

Each year, every resident completes a structured full-day procedure lab. This lab provides a chance for the resident to get hands-on experience with invasive procedures. Common procedures, such as central line placement or epistaxis management, are refined; residents also perform rare and high-stakes procedures such as thoracotomy cricothyroidotomy, pericardiocentesis, and shoulder dystocia delivery. Faculty instructors lead and facilitate the lab, guiding the discussion and performance of the procedures.

As residents transition from novice to expert, they progress from following rules to comprehensively applying their knowledge based on the specifics of an individual patient. Our residency’s approach to procedural training guides them along this path.
RESIDENCY AWARDS, RECOGNITION, HONORS

Star Award - resident teacher selected by medical students
2012 Peter Baggenstos, MD
2011 Kara Kim, MD
2010 Aaron Feist, MD, Gregory Vigesaa, DO
2009 Adina Connelly, MD, Danielle Jackson, MD
2008 Samuel Stellpflug, MD
2007 Sandy Fritzlar, MD
2006 Nathan Anderson, MD, Martin Richards, Jr., MD, John Travnicke, MD, Melissa Tschohl, MD
2005 Keith Henry, MD
2004 Robert LeFevere, MD
2003 Lynn Howard, MD
2002 John Bonta, MD
2001 Cullen Hegarty, MD

Apple Award - faculty teacher selected by medical students
2012 Cullen Hegarty, MD
2011 Samuel Stellpflug, MD
2010 Rachel Dahms, MD
2009 Keith Henry, MD
2008 Cullen Hegarty, MD, Kevin Kilgore, MD
2007 Joel Holger, MD, Peter Kumasaka, MD, Michael Zwank, MD
2006 Jeahan Hanna, MD
2005 Rachel Dahms, MD, Robert LeFevere, MD
2004 Cullen Hegarty, MD
2003 Kevin Kilgore, MD
2002 Felix Ankel, MD
2001 Paul Haller, MD

Faculty Teaching Award - EM faculty teacher selected by residents
2012 Samuel Stellpflug, MD
2011 Michael Zwank, MD
2010 Bradley Hernandez, MD
2009 Keith Henry, MD
2008 Cullen Hegarty, MD
2007 Rachel Dahms, MD, Jeahan Hanna, MD
2006 Robert Knopp, MD
2005 Felix Ankel, MD
2004 Karen Quaday, MD
2003 Carson Harris, MD
2002 Scott Cameron, MD
2001 Robert Knopp, MD
2000 Joel Holger, MD

Nurse Educator Award - EM nurse teacher selected by residents
2012 Donald Brock, RN
2011 Kevin Guenard, RN
2010 Clarice Marsh, RN
2009 Angela Hoeppner, RN
2008 Andrew Hebdon, RN
2007 Lawrence Cochran, RN
2006 Tom Peterson, RN, Karen Poor, RN
2005 Donovan Taylor, RN
2004 Mary Healy, RN

Excellence in EMD Research
2012 Eric Dahl, MD, Casey Woster, MD
2011 N Kolja Paech, MD
2010 Nathaniel Curl, MD
2008 Tara O’Connell, MD
2007 Emily Mason, MD, Ben Peake, MD
2006 Scott Donner, MD
2005 Sandy Fritzlar, MD
2004 Kurt Isenberger, MD
2003 S. Wade Barnhart, MD, Christopher Obetz, MD
2002 Randall Hofbauer, MD
2001 Frank Coughlin, MD
2000 Paul Satterlee, MD, Paul Jewett, MD
1999 Kevin Sipprell, MD, James Parker, MD

Ian Swatez Teaching Award - faculty teacher from outside EM selected by residents
2012 Bret Haake, MD
2011 Eric Korbach, MD
2010 Julie Switzer, MD
2009 Azhar Ali, MD
2008 David Dries, MD
2007 Eric Korbach, MD, Henry Ortega, MD
2006 David Lee, MD
2005 Bruce Bennett, MD
2004 Raj Sarpal, MD
2003 William Mohr, MD
2002 Mari Goldner, MD
2001 David Dries, MD
2000 Ian Swatez, MD

Robert Knopp Humanism Award
2012 Eric Dahl, MD
2011 Katharine Davidson, MD
2010 Heather Ellsworth, MD
2009 Tara O’Connell, MD
2008 Mark Connelly, MD
2007 Emily Mason, MD
2006 Martin Richards, Jr., MD
2005 Keith Henry, MD, Jon Hokanson, MD

Excellence in EMS Award
2012 Bjorn Peterson, MD, Benjamin Watters, MD
2011 Katharine Davidson, MD
2010 Aaron Burnett, MD
2009 Owen Anderson, MD
2008 Joey Peterson, MD, Jonathan Shultz, MD
2007 Heidi Lako, MD

Toxicology Award
2012 Zabrina Evens, MD, Rebecca Gardner, MD
2011 Katherine Katzung, MD
2010 Heather Ellsworth, MD

Mark Bernas Advocacy Award
2012 Adetolu Oyewo, MD
2011 Autumn Erwin, MD
2010 Autumn Erwin, MD


Engebretsen KM. Clinical Presentation and Medical Complications of Patients after Exposure to Substances Labeled “Bath Salts.” (2012-2013)

Frascone RJ, Wewerka SS, Salzman J. International Association of Fire Fighters Burn Foundation. The Effect of Fire Fighter SCBA Use on Carboxyhemoglobin Values During the Overhaul Phase of Fire Fighting. (2009-2012)


Hernandez BS. Impact of Targeted Rapid HIV Testing upon Emergency Department Length of Stay. (2012-2013)

Morgan MW. Factors Influencing Satisfaction in Emergency Department Patients. (2012-2013)

Stellpflug SJ, Bond ME, Henry KD, Engebretsen KM. Dabigatran-induced coagulopathy treated with intravenous fat emulsion. (2012-2013)


Quaday KA, Gordon BD, Salzman J. A Retrospective Descriptive Study of MRI Use in an Academic Emergency Department. (2011-2012)

Westgard BC, Dahl EJ. Associations Between Healthy Food Availability and Emergency Department Presentations for Diet-Related Illness. (2012-2013)

Zwank MD. Agreement Between Physician and CT Scan in High Energy Mechanism Stable Trauma Patients - A Pilot Study. (2011-2012)

Zwank MD, Mayeux GP, McDonald J, Anderson CP. Effect of Repeat Abdominal CT in Emergency Department Patient on Diagnosis and Disposition. (2012-2013)

Zwank MD, Woster WR. Impact of CT on Diagnosis of Kidney Stones. (2011-2012)

Zwank MD. Evaluation of Patients with Dyspnea Using Internal Jugular Vein Ultrasound in the Emergency Department.
1993 - Bob Knopp, MD was hired to start the EM residency. Ready to return to Minnesota, Dr. Knopp left the residency he directed in Fresno for 17 years to work in the development of the Regions Hospital Emergency Medicine Residency. Lori Barrett is selected for coordinator. Lori had previously worked as the department head admin and EM office supervisor.

1995 - Residency receives a 3-year provisional accreditation by the ACGME-RRC for Emergency Medicine and recruitment begins for the first class of eight residents. Approximately 200 applications were reviewed and 126 interviews were conducted.

1996 - First class of 8 residents starts. The Class of 1999 included students from Creighton University, University of Colorado, Mayo Medical School, University of Minnesota, and University of North Dakota.

1999 - Residency receives full 3-year ACGME accreditation and graduates its first class. Of that first class of eight residents, seven continue to work and live in Minnesota. Pat Anderson joins the program as a program assistant.

2000 - Dr. Felix Ankel is named program director. Dr. Ankel, a graduate of the University of Wisconsin Medical School, completed his residency at the University of Illinois-Chicago and joined the faculty at St. Paul-Ramsey Medical Center in 1994.

2003 - Residency receives a 5-year full ACGME accreditation.

2004 - Jessie Nelson, MD is selected for an Educational Fellowship and becomes the first faculty member for clinical simulation.

2005 - Medical Toxicology Fellowship is launched. EM grad, Matt Morgan, MD, is selected as the first fellow.

2008 - Dr. Bob Knopp retires from clinical work. He continues to play in important role in resident education with his EKG and ethics lectures.

2009 - Residency receives a continued 5-year full ACGME accreditation.

2010 - EMS Fellowship starts, under the direction of RJ Frascone, MD, with selection of EM grad, Aaron Burnett, MD, as the first fellow.

2011 - Quality & Patient Safety Fellowship begins, under the direction of Drew Zinkel, MD; EM grad, Kara Kim, MD, is its first fellow. Toxicology fellowship expands to two fellows/year. HealthPartners takes over sponsorship of Pediatric-EM fellowship based at Minneapolis Children’s; fellows are now part of the Regions EM family.

2012 - International EM Fellowship, directed by Matt Morgan, MD accepts its first fellow, Amy Walsh, MD. Emergency Medicine PA fellowship starts under the direction of Brad Hernandez, MD and Ann Verhoeven PA-C.
Peer Reviewed Articles:


Non-Peer Reviewed Articles

Taft SA. Lithium Toxicity. Core Tox for EM Docs. *ACEP Toxicology Section Newsletter*. September 2012

Book Chapters


Scholarly Presentations:

Burnett AM. Potential Negative Effects of Epinephrine on Carotid Blood Flow and ETCo2 during Active Compression-Decompression CPR utilizing an Impedance Threshold Device. Poster presentation, HealthPartners Celebration of Education & Research, Bloomington, MN, September 2012.


Hegarty CB, Barrett LJ. Integration of a SMART Podium Into an Emergency Medicine Residency Conference. Poster presentation, CORD Academic Assembly, Atlanta, GA, April 2012 and HealthPartners Celebration of Education & Research, Bloomington, MN, September 2012.


Isenberger KM, Salzman JG. Day Shift is Predictive of Higher Patient Satisfaction in an Urban Community Emergency Department. Poster presentation, SAEM Regional meeting, St Louis, MO, September 2012.

Salzman JG, Isenberger KM. Patient Satisfaction Variability by Chief Complaint in an Urban Community Emergency Department. Poster presentation, SAEM Regional meeting, St Louis, MO, September 2012.


Quaday KA, Gordon BD, Salzman JG. A Retrospective Descriptive Study of MRI Use in an Academic Emergency Department. Lightning oral presentation, SAEM Regional meeting, St Louis, MO, September 2012.

Zwank MD, Moyeux GP. Effect of Repeat Abdominal CT on Diagnosis and Disposition in Emergency Department Patients. Poster presentation, HealthPartners Celebration of Education & Research, Bloomington, MN, and oral presentation, SAEM Regional meeting, St Louis, MO, September 2012.


Zwank MD, Walker JR. Improving Patient Comfort in the Emergency Department. Poster presentation, SAEM Regional meeting, St Louis, MO, September 2012.


Selected Presentations


Ankel F. Resident Milestones: Historical context, competency based medical education, and outcomes; Program Milestones: Managing autonomy, context, and complexity to build expert programs. Grand Rounds, University of Texas-Houston Emergency Medicine Residency. Houston, TX, October 2012.


Kim KS. Quality Improvement in Residency Education. Grand Rounds, North Shore University Hospital, Manhasset NY, April 2012.


Stellpflug SJ. 26y of Pseudoseizure: case presentation and review of psychogenic nonepileptic seizures, AAEM, Coronado, CA, February 2012.

Stellpflug SJ. NSF and CIN: evidence-based review of nephrogenic systemic fibrosis and contrast-induced nephropathy. AAEM Scientific Assembly, Coronado, CA, February 2012.

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<tr>
<th>Name</th>
<th>Medical School</th>
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<td>Paul Jewett, MD '00</td>
<td>Paul Jewett, MD '00</td>
<td>St. Louis University</td>
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<td>Danielle Jackson, MD '09</td>
<td>Danielle Jackson, MD '09</td>
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<td>Kurt Isenberger, MD '04</td>
<td>Kurt Isenberger, MD '04</td>
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<td>Lynn Howard, MD '03</td>
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<td>Patrick Holland, MD '02</td>
<td>Patrick Holland, MD '02</td>
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<td>Randall Hofbauer, MD '02</td>
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<td>Autumn (Erwin) Brogan, MD '11</td>
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<td>Sandy (Fritzlar) Buckman, MD '07</td>
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<td>Mark Connelly, MD '08</td>
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<td>Susan (Zola) Cullinan, MD '01</td>
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<td>Nathaniel Curl, MD '10</td>
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<td>Eric Dahl, MD '12</td>
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<td>Mayo Medical School</td>
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<td>Katharine Davidson, MD '11</td>
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<td>SUNY at Syracuse</td>
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<td>Paul Jewett, MD '00</td>
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<td>Nicholas Johnson, MD '05</td>
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EMERGENCY MEDICINE GRADS
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<td>Phelps Johnson, MD PhD '02</td>
<td>Medical College of Wisconsin</td>
<td>St. Mary's Hospital - Duluth, MN</td>
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<tr>
<td>Todd Joing, MD '05</td>
<td>University of Minnesota</td>
<td>Fairview-Southdale Hospital - Edina, MN</td>
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<td>Katherine Katzung, MD '12</td>
<td>University of Minnesota</td>
<td>Medical Toxicology Fellowship - Regions Hospital - St. Paul, MN</td>
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<td>Cynthia Kelmenson, MD '03</td>
<td>University of Pennsylvania</td>
<td>Medical Center of Aurora - Denver, CO</td>
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<td>Kara Sellung Kim, MD '11</td>
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<td>Martin Klinkhammer, MD '07</td>
<td>University of Minnesota</td>
<td>Emergency Physicians of Tidewater - Virginia Beach, VA</td>
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<td>Amy Kolar, MD '99</td>
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<td>Emily Mason, MD '07</td>
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<td>Sacred Heart Hospital - Eau Claire, WI</td>
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<td>Hal Winnigan, MD PhD '00</td>
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A private, nonprofit, teaching hospital, Regions (www.regionshospital.com) provides outstanding care in women’s health, heart, cancer, surgery, orthopaedics, neuroscience, burn, emergency care and more. Regions is part of the HealthPartners (www.healthpartners.com) family of health care companies that serves 1.25 million medical and dental health plan members nationwide.