

NEXUS

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High-Fidelity Learning

INSIDE: Master's in Nutrition | CCM & Hands-On Training | Holistic Urgent Care

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HIGH-FIDELITY LEARNING

The patient is a 50-year-old male named Edward. His chief complaint upon entering the clinic is a feeling of pressure in his chest. As the secondary student takes his blood pressure and checks his vitals, the primary student takes a medical history of Edward's presenting illness. Edward suddenly announces that he is having difficulty breathing. He is also having pain in his chest. The pace quickens in the examining room.

“Give me something for this pain,”

he demands, “Make it *snappy!* The pain is getting *worse!*” The primary gives him nitroglycerine and then aspirin.

Minutes later, Edward's heart begins to fail. The secondary, Brielle Dickey, delivers oxygen as Danielle Currey, the primary, applies CPR. Currey is visibly sweating as a call is made for an ambulance. Edward ultimately pulls through. Currey and Dickey—two naturopathic medicine students—just saved his life.

A voice is heard on an intercom overhead. “Nice work. OK, let's head back into the classroom.”

“Edward” is a high-fidelity mannequin. The “clinic” is a teaching lab at Legacy Emanuel Hospital in northeast Portland. “That was *CRAZY!*” Currey says,

laughing as she leaves the Sim Lab and heads back to her desk to watch a video of herself “treating” her first acute care case.

Currey and Dickey, then in their final year of medical school, were the very first NCNM students to experience NCNM's new elective, Simulation Lab. Sim Lab is a pilot program designed by NCNM Professor Rich Barrett, ND, who teaches the course with Nellie Crawford, RN, BSN, and Sue Martino, RN, CCRN, simulation specialists and patient care services specialists at Legacy Emanuel.

THE MISSING LINK

When NCNM awarded him a sabbatical in 2012, Dr. Barrett was accepted into a program for educators in health

professions held at the Harvard Macy Institute in Cambridge, Mass. It was there that he experienced firsthand the power of experiential learning through a case-based simulated healthcare setting. “Simulated learning is one of the most compelling innovations of medical education,” Barrett explains.

“Medical schools like Harvard and Stanford are the leaders in simulated medical education. Their students can read about a heart attack, and instead of heading to the library to learn more, they'll say, ‘Let's do a Sim,’ and contact an on-call Sim Lab faculty member who will run the case that they want to study.”

Barrett adds that NCNM naturopathic administrators and faculty were discussing a curriculum re-design prior to his sabbatical. When he returned from his stint at Harvard, Barrett discovered that Dr. Melanie Henriksen (now the dean of the School of Naturopathic Medicine) and Dr. Margot Longenecker (former dean of the School of Naturopathic Medicine) were independently also looking into simulated learning, and had established a connection with the Clinical Education Center at Legacy Emanuel. Adult learning theory suggests that learning occurs in sequential steps of cognitive analysis and integration, Barrett explains. “The highest level of learning happens when students are given the opportunity to synthesize the information they've received—for

example, comparing and contrasting different patient presentations while they perform at an almost professional level.” He adds, “Studies show that hands-on learning helps bridge the gap between cognitive understanding and putting that knowledge into action.”

Simulation is not new for NCNM. Dummies are used in CPR classes, and NCNM faculty members sometimes use mannequins to teach intubation. However, simulation hasn't been a consistent part of the ND program. Barrett notes that there are missing links in the naturopathic students' learning cycle. Students need a leg-up to smoothly make the transition from classroom to clinic.

“Students experience didactic learning and case-based learning involving diagnosis and treatment in their first two

“Studies show that hands-on learning helps bridge the gap between cognitive understanding and putting that knowledge into action.”

—Rich Barrett, ND

years, but the learning doesn't always translate into application as the students get into the clinic in their third and fourth year,” he says, adding that he's seen outstanding naturopathic scholars stumble when it comes time to apply

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CHINESE MEDICINE STUDENTS TEST HANDS-ON TRAINING

When it comes to confidence building, you can't beat experience.

That's the aim of a new type of Clinical Observation rotation created for students preparing to transition into their clinical internship year in the School of Classical Chinese Medicine (CCM). In the standard Observation rotation, five students develop clinical acumen by watching their seasoned faculty supervisors diagnose and treat patients. The newly implemented Hands-On Training (HOT) technique combines observation, step-by-step explanations of techniques, clinical reasoning by faculty members, and finally, direct student involvement in all aspects of the patient visit. To ensure adequate time for each student to receive individual attention from the faculty supervisor, the HOT rotations are limited to three students.

The result has been powerful in building clinical skill and confidence, said Dr.

Laurie Regan, dean of CCM. "Students and faculty alike find the HOT approach to be a highly successful system," said Regan. "Students feel more prepared to take on the responsibilities assigned to the intern role." Before, she said, students heading into their final internship rotations had lots of classroom work, extensive observation and interaction with faculty, but little time actually treating patients.

First used in business and popularized by author Gary Sisson, CCM's version of Hands-On Training was developed by NCNM Board Member Dr. Steve Marsden, who holds licenses as a DVM, ND and LAc. Marsden adapted the technique to train new practitioners in his veterinary and medical clinics. He found that using the systematic HOT approach led to a much more consistent level of competence and confidence in his trainees, Regan said.

"So far, that's been CCM's experience, too," said Regan, adding that one reason it works is that it expands the types of learning styles addressed in the clinical education environment. "Normal observation involves auditory and visual learning. This approach adds a kinesthetic component."

HOT also harkens back to the traditional Chinese master/student approach, though for modern practical purposes it occurs in a vastly compressed timeframe of months instead of years.

"Students feel more prepared to take on the responsibilities assigned to the intern role."

—Laurie Regan, PhD, ND

Assistant Professor Brandt Stickley, LAc, led a group through the program. Stickley said HOT "takes that traditional approach and adds on a more explicit articulation of the teaching process. It fulfills the (traditional) model, but makes it accessible." The hands-on technique further connects to tradition by following the philosophy that mastery is about removing impediments to learning. "Complete immersion in the work with supervision accomplishes that," he said.

Stickley, who added that he had an exceptional trio of students, saw the approach as an opportunity to improve his teaching. "I was challenged to articulate the decision-making process at

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NEW MASTER'S PROGRAM SEEKS TO EXPAND NUTRITION EXPERTISE



The new Master of Science in Nutrition (MScN) degree debuts this fall at NCNM as a second degree choice for current naturopathic, Chinese medicine and research students. It will be available in fall 2014 as a stand-alone degree.

The new program is unique to Portland and taps into a growing national interest in nutrition, as well as Portland's food culture, said Dr. Heather Zwickey, dean of research and graduate studies, and director of NCNM's Helfgott Research Institute.

The program combines biochemistry and pathophysiology, and will focus on studies of whole, unprocessed foods, traditional diets and their application. The program will also train students in cooking and preparing foods for maximum benefit. The latter will take place in Charlee's Kitchen, the college teaching kitchen, emphasizing hands-on application of nutrition learning. The idea is to train students who will become nutrition counselors, coaches or chefs with a more scientific basis for their practice, said Zwickey. The program will also help students bound for traditional medical schools get advanced nutrition training not offered in med school.

A key element of the new master's program will be understanding food's role in disease and prevention, with a strong dose of social medicine and study of healthcare disparities, Zwickey said. In fact, she said, it was recognition of gaps in the current healthcare landscape, plus strong interest from prospective students in nutritional studies that fueled the development of the new degree offering.

"The idea is to train students who will become nutrition counselors, coaches or chefs with a more scientific basis for their practice," said Zwickey.

"Many people think they know what nutrition is," said Zwickey, but most programs emphasize diets and calorie counting rather than a holistic knowledge of food, cultural approaches and farm-to-plate system understanding. Over the past three years, she said, as NCNM students and faculty operated

nearly 20 community clinics in the Portland area, which generated 20,000 patient visits, it became clear that many people don't know how to obtain affordable fresh fruits and vegetables, or how to get the most out of preparing them.

For instance, she said, many people living in "food deserts"—places where only small convenience stores or fast food is available—don't know about church or other nonprofit programs that help establish community or home gardens. People also don't know that fresh produce is often available and can be affordable by forming small co-ops of families that work directly with nearby farms. Graduates of NCNM's program will help spread that knowledge, Zwickey said.

Degree planning also revealed another key gap in the system: Practicing naturopathic doctors have a solid grounding in nutrition, but many don't have the time to coach patients into changing

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NCNM PAYS TRIBUTE TO DR. JOHN CAMPBELL



National College of Natural Medicine awarded an honorary Doctor of Letters degree to Emeritus Board Director, John R. Campbell, PhD, DSc, at the college's annual Commencement Ceremony held June 29, 2013.

Dr. Campbell, president emeritus of Oklahoma State University and former dean of the college of agriculture at the University of Illinois, is a celebrated educator. He taught more than 12,000 students throughout his career. A leading expert on land-grant universities, he has written numerous books on higher education and teaching.

Campbell has received many honors for his contributions to American higher education, including listings in several editions of *Marquis Who's Who*. He was awarded a Distinguished Lifetime Service Award by his alma mater, the University of Missouri, and appointed by the Abraham Lincoln Presidential Library Foundation to join its honorary Lincoln Cabinet, a distinction awarded to very few Americans each generation.

NCNM President David J. Schleich noted, "This man is a legend in higher education. We are fortunate to have had his counsel and support all these years." For 15 years, Campbell provided loyal, outstanding service to the naturopathic and classical Chinese medicine professions, and to the field of integrative medicine research.

Nexus salutes Dr. Campbell for exemplary contributions to NCNM throughout his years of service. We also acknowledge Eunice J. Vieten Campbell, an educator in her own right, for her service to NCNM—and thank her for sharing her husband with us these many years. ■

PROFESSION NEEDS TO DEVELOP LEADERS, SAYS VETERAN ND

When NCNM alumna Dr. Pamela Jeanne ('90) heard about the student group called Leaders By Choice, she was thrilled. At last, she thought, soon-to-be natural medicine practitioners were seeing the power in leadership and community building.

“I was totally excited and enamored with the idea that we were developing leaders in natural medicine,” she said, “I am a big supporter of the idea—it has great merit.”

Jeanne, an adjunct instructor at NCNM, was so enthused that she offered to speak at LBC's first retreat two years ago. There, she shared her journey from an emergency room and critical care nurse in hospitals to a naturopathic doctor. She is also donating to the group a portion of the proceeds from her book, *Healing Matters: Celebrating Women's Innate Healing Nature*.

In her 25 years of experience as an ND with a focus in women's medicine, Jeanne has seen the idea of ND as a sort of healthcare Lone Ranger draw many to naturopathic medicine—an ideal, that she believes, works against building community and organizing on behalf of the profession.

“We have produced numerous great doctors,” she said, referring to her NCNM colleagues in years past, “but we have not been a force in leadership. In order to grow and stand strong, we need greater leadership.”

Jeanne said she understands why some practitioners have been reluctant to band together. After all, she said, graduates have had to focus more on financial survival and professional acceptance than community building.

However, she said, “As professionals and colleagues, we need to stand together to expand the profession. We don't



need to feel 'less than.' We are growing up now from a stepchild mentality.” She believes it's time for the profession to develop more leaders and “promote our own model of medicine—one we know works very well.”

Despite common perceptions, Jeanne thinks that leaders are not born, but need to be taught and then supported in that experience. “Leadership can be a lonely thing. But doing it as a group—there's something about group support that's powerful.”

Jeanne, who is active in a number of associations and groups promoting wellness, spirituality and good nutrition, believes NCNM alumni should get behind and support what the students are doing with LBC. “It's a great investment and will make a huge difference that will benefit everyone. We don't have to be the lone rangers anymore. We need to be collaborative and hold strong to our philosophy.” ■



LEADING—BY CHOICE

Three years ago, Chinese and naturopathic medicine student Dani Anderson had an idea. The then-student body president, not known for her shyness, was soon talking with NCNM President David Schleich about her inspiration: a student created and run organization that would promote leadership, self-development and build bonds among students that would support them throughout their careers. The goal: more confident, community-oriented doctors to lead a new generation of NDs who can unite and promote the profession.

Lofty goals, to be sure, but eminently doable, said Anderson and naturopathic student David Geller, who signed on as soon as he heard about the effort. The students realized that while they were getting exceptional medical and science training, they could use a bit more of a boost with interpersonal development and “people power.” Specifically, they saw a need for tapping into inspirational mentors, developing public speaking skills and, especially, building community with their peers. They also realized that their busy, stressed, and competitive fellow students could use a little extra camaraderie and support—a chance to safely bond with one another instead of competing.

“We needed a middle space where we could go to that wasn't anything about administration and wasn't anything about classes. It was purely about remembering why you came here in the first place,” Anderson said.

Schleich was enthusiastic and told Anderson and Geller to come up with a presentation. Many hours of coffee shop discussion followed. The pair presented their idea to Schleich and Susan Hunter (vice president of advancement) for a group to be called Leaders by Choice (LBC). Both Schleich and Hunter were impressed and gave the students a big thumbs-up.

Hunter remembers that presentation. “Dani and David were passionate and inspiring. They described how they wanted to develop a support organization that would extend well beyond medical school,” said Hunter. The students wanted to find a way to build a community to be founded on trust, friendship and accountability, one that would help its members weather the difficult early years of launching their professional careers.

“They described an organization that would help develop a strategic concept of inspirational leadership. The idea was to build teams of peers that would support leadership wherever they might find it,” Hunter explained. “The greatest leaders are the greatest followers.”

Not long afterward, Hunter found a donor to provide initial funding, and the students were off and running. In roughly three weeks, they found about 25 like-minded students and recruited natural medicine doctors and an MD as mentors. The group, with Anderson as president and Geller as vice president, organized itself into three-to-six member “pods” consisting of a mix of class years, with a mentor-doctor assigned to each. The idea is to foster multi-level mentoring, with the younger students receiving advice and support from the upperclassmen, who in turn are supported by veteran practitioners.

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OPENING DOORS FOR NATURAL MEDICINE PRACTITIONERS

In her office in the depths of the Administration Building at National College of Natural Medicine, Dr. Marnie Loomis ('00) only has a small window on the changes in the Oregon weather. However, the self-described "policy wonk" has a sizable window on healthcare news, studies and trends. She's also a key point of contact for students and graduates seeking post-graduation employment.

Loomis, director of Professional Formation and Career Services, likes what she's seeing—and hearing—about the natural medicine marketplace from graduates and a wide network of natural medicine and healthcare advocates.

"The last few months have been a different experience," she said. "Ever since the Supreme Court decision came through that, 'yes,' federal healthcare reform is going to happen, I have noticed a change in the number of opportunities available for our students."

Though the decision threw the healthcare industry "into a tizzy," she said, its provision for more primary care physicians and cost savings is helping naturopathic doctors find opportunities in mainstream health care. She says job

listings are up and she's hearing from graduates that they are finding more acceptance of holistic medicine in all its forms. "There are more and more opportunities when people (graduates) ask employers, 'Hey, can you use me?'"

A case in point is 2011 NCNM graduate Sara Gillham, ND. (See "Plan B" on page 9.) With Loomis' help, Gillham approached Northwest-based urgent care provider ZoomCare with a proposal to integrate natural medicine into its everyday illness, injury and check-up business. ZoomCare, which also has clinics in Seattle and is considering expanding to California, was already thinking about adding natural medicine and hired Gillham to craft and implement a pilot program in Portland. If successful, the pilot could lead to more jobs for acupuncturists, massage

therapists and natural medicine practitioners at ZoomCare. It could also be a bellwether of changes to come industry-wide.

That's already happening, said Loomis. "We're doing a lot less explaining and a lot more strategizing on how we can fit in."

"Ever since the Supreme Court decision came through that federal healthcare reform is going to happen, I have noticed a change in the number of opportunities available for our students."

—Marnie Loomis, ND

The changes are largely being fueled by consumer demand, said Loomis, a statement which is reinforced by a 2010 report conducted by the Samueli Institute, and the Health Forum, a subsidiary of the American Hospital Association. The report, titled "Complementary and Alternative Medicine Survey of Hospitals," polled 5,858 AHA hospitals. Citing earlier studies and the results of the survey, the report shows broad and growing acceptance of natural and alternative medicines. Asked why hospitals are integrating at least some form of alternative therapy, 78 percent said "patient demand," and 74 percent said "evidence." The latter finding is likely music to naturopathic ears as NDs and other alternative practitioners have worked hard and long for funding for evidence-based research into botanicals, acupuncture and alternative therapies.

Much more work needs to be done on such areas as insurance parity and the state-by-state battle for licensure said Loomis, but growing pressure from consumers for more choice, whether allopathic, naturopathic or both, is rapidly opening doors for natural medicine practitioners.

"The need for primary care providers is going to be tremendous, and it's a need that NDs can easily fill," she said, "We are already facing a shortage of PCPs." ■

PLAN B OPENS THE DOOR TO HOLISTIC URGENT CARE

Talk about best laid plans. Dr. Sara Gillham ('11) did all the right things to secure employment as she finished her naturopathic medicine degree. She visited Dr. Marnie Loomis ('00), director of NCNM's Professional Formation and Career Services, a year before graduation to formulate a plan to get hired, following her residency at Center for Natural Medicine. She landed a position, but then a scant two weeks before she was to begin, the job went up in smoke.

So Gillham beat a quick path back to Loomis, who went into high gear to help the new doctor sharpen up her CV, her query letters, and to brainstorm other employment matches. One strategy was to do everything short of sky writing to let people know what she was qualified to do and that she was on the market again. Gillham posted on Facebook, told all her friends and relatives, did a flurry of informational interviews and sent out a blizzard of letters.

The pair also cooked up an audacious strategy to go where few NDs have gone before: into urgent care medicine. Loomis helped Gillham craft a proposal to ZoomCare, the Northwest-based urgent care company with a growing presence in Portland and Seattle. As it turns out, the ZoomCare founders, both MDs, had become increasingly interested in natural medicine for themselves and their patients. In December 2012, with an offer from another company also on the table, Gillham was hired as Clinical Manager–Wellness to help lead



the company into a new era of integrated medicine.

After she accepted the offer, Gillham posted triumphantly, "Papers signed, dream job secured!"

Importantly, the company wasn't looking just to add an ND or two as a sideline to tap into the natural foods/natural medicine movement. Instead Gillham is charged with implementing a pilot project she designed to fully integrate natural medicine techniques into all ZoomCare patient care, starting in Portland.

"They (ZoomCare) are creating the world's first neighborhood and smartphone-based healthcare system," said Gillham—complete with specialists and integration of holistic services throughout the system. If successful, it could open the door for acupuncturists, Chinese medicine specialists and other natural medicine doctors to work with ZoomCare.

Gillham, who grew up in Sandpoint, Idaho, has long had a passion for science, puzzles and mysteries. Her mother is a physical therapist who employed botanical medicines and homeopathy at home. So, it was probably no surprise to those who know her, when Gillham declared in middle school that she was

going to be a doctor. After earning a bachelor's degree in biology magna cum laude from Willamette University, she searched unsuccessfully for a conventional medical school that also included instruction in natural medicine. About that same time, her parents introduced her to a couple who had a strong interest in natural medicine. The husband was an ND and the wife was an MD, but was considering earning a naturopathic doctorate.

Gillham is charged with implementing a pilot project she designed to fully integrate natural medicine techniques into all ZoomCare patient care, starting in Portland.

"They showed me that naturopathic medical school *is* medical school, that I would get all the science background, but also get the things I was interested in," recalled Gillham. "So I switched gears and went down the path of naturopathy."

Did she ever. She first enrolled at Bastyr University, where she did alternative medicine research related to diabetes and earned a T-32 predoctoral grant from National Institutes of Health. Discovering that she had a growing interest

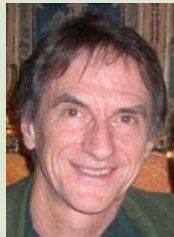
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CONTINUING EDUCATION AT NCM



**OCT. 12-13
OPTIMIZING
BILLING AND
CODING FOR CAM
PROVIDERS**
with Ilana Gurevich,
ND, LAc, and
Lottie Mackey



**OCT. 18-20
PRACTICUM IN
MIND-BODY
HEALING**
John Dye, ND



**OCT. 19-20
FIVE ELEMENT TWO:
BLOCKS TO
PRACTICE**
David Ford, LAc



**OCT. 21
BOTANICAL
RESEARCH
UPDATE IN
WOMEN'S HEALTH**
Tori Hudson, ND



**OCT. 26
PULSED ELECTRO-
MAGNETIC FIELD
THERAPY: WITHOUT
ENERGY, THERE IS
NO CHEMISTRY**
Travis Elliott, ND



**NOV. 2-3
DIABETES
SYMPOSIUM**
featuring Ryan
Bradley, ND, MPH;
Dennis Godby, ND;
Patrick Chapman, ND;
Gonzalo Flores, LAc;
and James Kundart, OD, MEd

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what they've learned in the classroom with a clinical patient. "Not everyone can make that transition."

For those who are successful in clinic, Barrett notes that only a few have the opportunity to experience treating patients with acute medical conditions. "They may never have a chance to see a patient with a collapsed lung or an asthma attack. They may miss appendicitis if they haven't seen it in their clinical training."

Exposure to acute cases isn't unique to NCM. According to Barrett, "This happens in conventional medical schools, as well. Medical students may never have a chance to see myocardial infarction in their clinical training." It's common enough though, that they'll see it at some point in their careers if they're practicing as primary care providers.

"Doesn't it make sense," Barrett asks, "that we would at least give them simulated training in acute illnesses, where they'll learn when to give patients oxygen, remember to give aspirin or nitroglycerin, know when to apply CPR? It's like flight simulator school. Student pilots learn to fly without fear of crashing. No one dies in Sim Lab. It's very real, it's very engaging, and it's *safe*."

From Theory to Practice

Legacy Emanuel's Clinical Education Center is located in the lower-level

of the hospital's administrative and medical office building. As you enter the wing, you might do a double-take as you pass a room stuffed with people on gurneys, sitting in wheelchairs, and babies in medical beds. Then you realize that the "people" are lifelike, but not real.

They're high-fidelity mannequins, computerized and programmed to provide a case-based clinical training experience that is amazingly realistic. They breathe, their abdomens rise and fall, you can feel their pulses, their carotid arteries, they can blink—and they talk. Sometimes insistently, like Sharon, a 60-year-old Type 2 diabetic, who presented with stomach pain—and was clearly impatient for help from a small group of NCM students, including Renae Rogers, the primary assigned to Sharon's "case."

In another room, observing the students as they treated Sharon, were Barrett and nurses Martino and Crawford. They sit at the computer that operates the mannequin. But the computer controls much more than that. It shows the instructors which medications the patient receives and how much. The computer can tell them if CPR is being performed too slowly or too fast. It controls Sharon's breathing, her heart rate. Together, they were the silent force behind Sharon's ailing heart. "It's really fun," says Barrett, laughing. "You feel like you're the Wizard of Oz behind the curtain! Except you get to push the ventricular

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fibrillation up a bit so the BP starts to decrease and the pulse is scrambled—all of a sudden the students are hustling."

Martino, perhaps a performer at heart, was Sharon's mouthpiece, using an intercom to speak to the group as Sharon—by turns whiney and petulant, then anxious and frightened. Within minutes, Sharon's condition worsened and her mounting fear and anxiety quickly moved the medical team from awkward self-consciousness to action.

As the adrenaline pumped, the group became fully engaged and present. "When we started, we were so nervous! At first, all I could think was, 'I better be at the top of my game,'" Rogers admits. "As Sharon's pain worsened, we quickly began thinking through what wasn't working and what we needed to do. It helped to watch Currey and Dickey and their group go first!"

Earlier, Rogers joined a small group of NCM students in a room adjacent to the Sim Lab, riveted to what they saw onscreen—streaming video installed in the Lab captured all the action as Currey, Dickey and two other students worked to save a life.

The video was taped and played back for each set of students, enabling them to observe and self-evaluate their performance while receiving supportive feedback from their instructors. "I felt like my clinical thinking was a little slow as we narrowed down where we were with the patient and where we needed to go," Rogers says of the experience. "But looking at the video, we could understand what we missed, where we had openings we could have taken to help the patient sooner."

Rogers adds that their medical instructors were helpful with their observations and suggestions during the playback of the videos. "They were so encouraging and supportive. Getting that kind of direct, focused feedback is such a great opportunity—oftentimes on a shift,

the doctors are overseeing six or more students at a time. So this was really useful."

All three students, Rogers, Currey and Dickey, agreed that moving from a theoretical, cognitive understanding to active learning in the Sim Lab accelerated their understanding and built up their confidence. Currey points out, "You can read indefinitely about how to do something, but nothing is like having hands-on experience, with your adrenaline rushing—along with the memory of how you handled it."

Currey, who was the first NCM primary to experience simulated learning by practicing with Edward, remembers that, "We were all a little flustered. I wasn't expecting to get hit with cardiac arrest right out of the gate! I thought about how I could have done things differently and kind of beat myself up. But then as I watched (the video) I realized I was OK, I was actually on the right track" She adds, "I'd love to have more time to progress through different cases in Sim Lab. Rogers agrees: "I have more comfort now about slowing down with a patient, of being in the moment. It was invaluable!"

NCNM Then & Now

Barrett, a 1986 NCM graduate, notes that many of his fellow alums from the '80s and '90s can't imagine how the NCM naturopathic education has changed—and progressed—compared to when they were in school. "It's just *unrecognizable*," Barrett says, "in terms of the level of development, the knowledge and professionalism our faculty bring to students today—NCNM has a campus now—not to mention a campus clinic! We've made great strides."

Barrett has dreams of more. "I can definitely see a time when NCM has its own Sim Lab," he says. "I'd love to see us with the capability of offering this to all our ND students—as a required course. I definitely see this in our future!" ■

CONTINUING EDUCATION AT NCM



**NOV. 16-17
HANP CASE
CONFERENCE:
NOURISHING THE
ROOTS: PRESERVING
VITALISM**
featuring Will Taylor,
MD; Joe Kellerstein,
ND, DHANP; Brad Lichtenstein, ND;
Les Moore, ND, DHANP; Lisa Amerine, ND,
DHANP; and Doug Brown CCH, FNP



**NOV. 23-26
MANUAL
LYMPHATIC
DRAINAGE**
Anne Bramham,
Founder, Advanced
Spa Therapy Educa-
tion Certification
Council (ASTECC)



**DEC. 7-8
OANP PHARMACY /
ETHICS SEMINAR**

COMING IN 2014

**JAN. 18-19
NATIONAL SIBO CONFERENCE**
featuring Mark Pimentel, MD, FRCP; Steven Sandberg-Lewis, ND, DHANP; Leonard Weinstock, MD; and Allison Siebecker, ND, LAc

**FEB. 22-23
FIRST ANNUAL FOOD AS MEDICINE
CONFERENCE**

**MARCH 15-16
NATUROPATHIC GASTROENTEROLOGY
CONFERENCE**

**MAY 18-19
TRADITIONAL ROOTS BOTANICAL
MEDICINE CONFERENCE**

**JUNE 7-8
SECOND ANNUAL WOMEN'S
HEALTH SYMPOSIUM**

Registration and CEU information can be found online:
www.ncnm.edu/alumni-ce/continuing-education.php

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every stage of the game.” Acupuncture involves so much subtlety, he said—the angle and depth of a needle, the right point of entry, recognizing the clues the patient is giving—that real, guided clinical experience is critical.

Students in Stickley’s HOT group responded with amazing focus and synergy. He said that they palpated patients for illness cues, took pulses, observed the terrain of the body, temperature and tissue state, and developed a course of treatment. They then applied the needles and gauged the result, which was almost universally positive. “Some of the patients had very serious problems,” said Stickley, “I was extremely pleased with the results.”

One of Stickley’s fourth-year students, Claire Matturro, said the HOT experience was an essential component for her success as an intern at Portland’s Outside In and other busy public clinics.

“It was hands down the most valuable experience I had at the school,” she said, “making the transition to internships, it was so critical to be confident in what I was doing.” Matturro added that the first internship experience treating real patients with real needs can be nerve-racking. However, she said, the HOT experience made for a “super-easy transition. I was just confident I could do it.”

One thing that really helped, she thought, was Stickley’s trust. The group also had great chemistry throughout the 12-week rotation, so much so, that they were often on the same page during treatments. The treatment results demonstrated how well the process worked. More than anything, she said, that’s what really stood out as perhaps the most inspiring and confidence-building. The students were able to provide help for some chronic ailments, including one patient who saw relief for the first

time in years for his persistent migraine headaches.

Although HOT costs more than previous rotations due to its small student-to-faculty ratio, Regan and the CCM faculty decided not to tinker with increasing the number of students per shift. She sees HOT not only continuing, but contributing to a planned proposal for the college’s first professional doctorate program.

Virtually all clinical faculty participated in the program this past spring. Regan said the college is excited to see another round this winter. “It’s training that really raises confidence,” she said.

The results: that ever-valuable “I can do it.” ■

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“The only way we can become the doctors we want to be is through self-exploration,” said Anderson, citing some of the Chinese medicine training she is combining with naturopathic studies. Geller agrees: “The linchpin of LBC is honesty—sharing our authentic selves with people we trust, to whom we’ll be accountable, people who will share their real selves with us.” Building emotional bonds of trust helped the students to get close to each other in ways that are normally unavailable to them in the context of classes.

At the group’s first annual retreat, a weekend intensive in rural Columbia County, LBC students brought in professional coach Carolyn Campbell of Core Source Coaching, who led the students through techniques in speaking from a passionate place. At their second retreat near Mount Hood, they heard from 1990 NCNM alumna Dr. Pamela Jeanne, who inspired them with the story of her journey from critical

care nurse to natural medicine/women’s health specialist. Dr. Jeanne was similarly inspired by the students. She signed on as a mentor and more. (See “Profession Needs to Develop Leaders” on page 6.)

Now, in its second full year of operation, LBC pods meet year-round to share life’s ups and downs, and work on topics like overcoming negative thinking. The larger group also meets once a month and works on public speaking, exploring the nature of leadership, and effective communication. They challenge themselves to speak to outside groups, partner with like-minded organizations, and attend conferences of allopathic and naturopathic students.

With that kind of training and experience, the students are not only transforming and empowering themselves, but feel they can “shoot for the stars” to tell the world about the benefits of natural medicine. Along those lines, LBC is considering its biggest platform

yet, a conference to be called “AllMed talks.” Anderson says the conference is still in the planning stages, and is tentatively scheduled for late 2013. She says they want it to feature people who have influenced the development of natural medicine by “thinking outside of the box.”

Anderson believes that the profession of natural medicine could become mainstream if more natural medicine practitioners banded together to create a united community and find ways to bring the profession from the background into the forefront. For Anderson and Geller, that goal—uniting to make an impact—is what drives them: “That lack of cohesion that we see stops with our generation. Foot down, that’s changing.” ■

LBC students want to connect with more alumni, either as mentors, donors or other supporters, and welcome contact at lbcleaders@gmail.com.

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in research, she enrolled at NCNM, where she felt there was much stronger support for student research. Along the way, she has also done research on endocrinology of reproductive systems at University of California, San Francisco. At NCNM, she researched meditation and neurofeedback. In addition, she’s developed a strong interest in wellness and nutrition. All of which will be very handy as she pursues her ZoomCare career.

Gillham calls Loomis’ help “absolutely foundational to the entire process...I didn’t have a clear idea of how people could use my skills. I was interested in wellness and developing programs, but I was not sure where I fit in.”

She also credits staff and faculty at Helfgott Research Institute and faculty members Drs. Martin Milner, Melanie Henriksen, Deborah Frances and Pamela Jeanne for assistance with her ZoomCare proposal and being available for ongoing advice.

“This is a massive opportunity,” said Gillham. “ZoomCare is really aggressively interested in looking to integrate the holistic approach...they are really behind responsible, true naturopathic medicine. It’s pretty ridiculous how perfectly it fits my goals.” ■

NUTRITION continued from page 5

their approach to food. “There is a real missing piece between what an ND sees and what a patient needs to do,” noted Zwickey. Nutritional counselors, coaches or other professionals armed with the new MScN would be great partners for NDs, integrative medical teams or non-profits seeking to educate clients on the true benefits food provides.

Students in the program can select either a 12-month or nine-month course of study and will be placed in a cohort of not more than 10 students each for cooking classes. Zwickey reports that there

has been so much interest in the program by NCNM’s current enrollment that the school doubled the first-year class from 10 to 20. It may need to add more if the demand continues.

In a curriculum that includes coursework from cooking to counseling to micronutrients and macronutrients, Zwickey already has her favorite: “Farm to Table.” Students will visit farms, harvest crops and prepare meals on site, while learning how the whole system works. “They will be involved in every part of the process,” she said. ■



BACK TO SCHOOL!



NCNM IN THE COMMUNITY

OPEN HOUSE: WOMEN'S HEALTH, NATURALLY NCNM Clinic	OCT. 5
HEALTH & WELLNESS RESOURCE FAIR Elsie Stuhr Center, Beaverton	OCT. 5
AFRICAN AMERICAN HEALTH COALITION HEALTH FAIR Emmanuel Temple Church	OCT. 12
FOOD DAY Charlee's Kitchen	OCT. 24
SCHOLAR'S HOUR NCNM's School of Classical Chinese Medicine	OCT. 25
SCHOLAR'S HOUR NCNM's School of Classical Chinese Medicine	NOV. 22
FIX-IT-FAIR Parkrose High School	NOV. 23
FIX-IT-FAIR Rosa Parks Elementary School	JAN. 25, 2014
SCHOLAR'S HOUR/CHINESE NEW YEAR NCNM's School of Classical Chinese Medicine	JAN. 31, 2014
CHINESE NEW YEAR CULTURAL FAIR Oregon Convention Center	FEB. 1, 2014
FIX-IT-FAIR David Douglas High School	FEB. 22, 2014
SCHOLAR'S HOUR NCNM's School of Classical Chinese Medicine	FEB. 28, 2014
OPEN HOUSE: DIABETES AND NUTRITION NCNM Clinic	MAR. 8, 2014
SCHOLAR'S HOUR NCNM's School of Classical Chinese Medicine	MAR. 28, 2014

ALUMNI UPDATES



Class of 2005
Hilary Costello, ND, formed Culture Medicine in 2009 with a mission of serving impoverished international communities through the intersection of art

and wellness. The Portland-based nonprofit group provides free healthcare services and education about health and wellness using local art and music as a means of communication. Culture Medicine is focusing its initial efforts on education of adolescent girls about wellness, proper nutrition, teen pregnancy, anatomy, physiology, midwifery and other important aspects of health. Doctors are joined by a teacher, journalist and photographer. The group hopes to expand its efforts with the support of the Portland community.



Class of 1983
The Oregon Health Authority credentialed the Center for Natural Medicine as a Tier 2 Patient-Centered Primary Care Home (PCPCH). CNM, an NCNM teaching

clinic, was founded in 1991 by **Martin Milner, ND** (who's also an NCNM professor). This designation makes CNM the first naturopathic clinic in America to be recognized with this designation. According to Oregon Health Authority, "Patient-Centered Primary Care Homes are clinics that have been recognized for their commitment to quality, coordinated care."

Oregon is pioneering this new PCPCH model, which will be implemented as the replacement for the Medicaid Oregon Health Plan in 2014. Oregon plans to eventually expand the PCPCH model to its healthcare benefits plans for state employees and teachers. It will ultimately expand into the private insurance market via the Office of Private Health Partnerships. This healthcare delivery structure is being watched carefully at the federal level as a model for other state and federal plans.



Class of 1986
Scott Tyler, ND, opened a free clinic in offices provided by The Salvation Army Gateway of Hope in Langley, B.C. With limited equipment and supplies, he

and his colleagues are being creative in their support of the health of transients in the community and shelter guests. *"The government sometimes covers their care (very little), but that doesn't stop us from giving our all to help the less fortunate. Nature Cure to the rescue! I've never been paid this well before, with many heartfelt thank yous, and sincere words of appreciation. What a joy and blessing it is to give the gift of health and encouragement. I hope my fellow alumni will consider doing the same in their communities."*



Class of 2008
In a recent article in *Palm Springs Life*, **Nicole Ortiz, ND**, was featured as a winner of the Entrepreneur Award among the "Top Women in Business 2013" in Coachella Valley (in Southern Calif.). She and **Sonja Fung, ND**, were also recognized as distinguished women of the year by their local assembly office.



April Abernethy, ND, was recently promoted to associate director of medical programs at the National Psoriasis Foundation (NPF), headquartered in Portland, Ore. She

works with leading dermatologists and rheumatologists to bring the latest in psoriasis research to clinical physicians and patients. A member of NPF's board of directors, she is a co-founder of International Dermatology Outcomes Measures, a nonprofit focused on improving dermatological research and clinical outcomes through the involvement of patients, payers, regulators, researchers and physicians. Since joining NPF, Dr. Abernethy has been interviewed by *Everyday Health* and *Psoriasis Advance* frequently on natural

remedies, nutrition and psoriasis, and was recently published in *Psoriasis Forum*.



Class of 2012
Brooke Bodeen, ND, and her husband Dusty have returned from a year in Nepal, where they volunteered at the Thrangu Tashi Choeling Free Clinic. *"As a new*

practitioner, it was such a wonderful experience to offer my skills and expertise in naturopathic medicine while working in a collaborative team environment...[we] worked with a translator to see upwards of 30 patients each day, and found that an integrative approach (including naturopathy, acupuncture, Tibetan and Western medicine) helped our patients improve their health the most."

In Memoriam



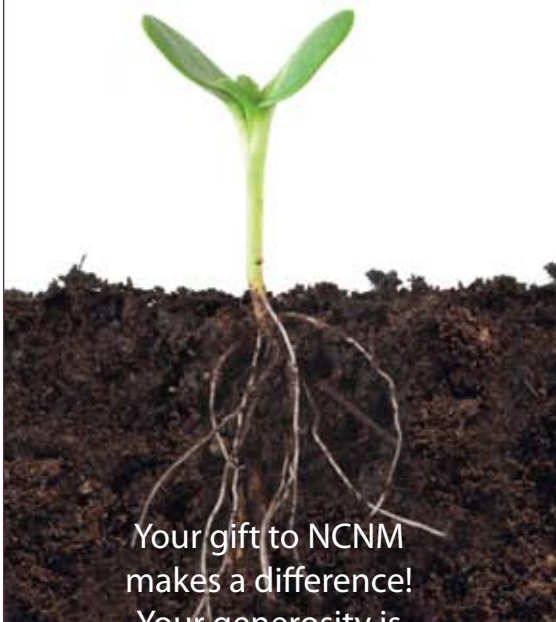
NCNM mourns the loss of **Beverly Madison, ND, LAc ('93)**, of Portland, Ore. Dr. Madison was the Chinese medicine half at Natural Healing Arts, the clinic she shared with husband **Carlos Rosas, ND ('88)**. She graduated from Guilford College, located in Greensboro, N.C., in 1983. She then came to Portland to attend Oregon College of Oriental Medicine, where she graduated in 1987. She received her ND degree from NCNM. Post-doctorate, Beverly deepened her Chinese medicine studies of men's and women's health with special emphasis on infertility and pregnancy-related conditions under world-renowned scholar and Chinese medical clinician, Giovanni Maciocia.



NCNM also sadly announces the death of **Eileen Walsh, PT, ND ('00)**, on May 28, 2013. She received her degree in physical therapy from St. Mary's University in Winona, Minn., and

established a thriving pediatric physical therapy practice in the Midwest prior to moving to the Portland area. Dr. Walsh set up a PT practice in Tigard, Ore., before pursuing her ND degree at NCNM. She had a great affection for dogs, many of whom benefited from her gentle care. She was predeceased by her husband Jay Ojeda.

HELP NCNM GROW!



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