Inside PA

FEATURES

Celebrating good works
20th anniversary of the South Georgia Farmworker Project

She found a need and filled it
Marquitha Mayfield retires from an inspirational career

When two is better than one
Dual PA/MPH degree opens doors for students

Serving across the globe
International experiences of three PA alums

PA of the Year
7

Program News
16

Honors & Awards
17

Director’s Update

Greetings from the Emory PA Program. We are excited about our second annual Emory PA alumni magazine and the wonderful things happening here. Since our last edition, a new class of PAs has graduated and a new class has joined us, including our largest number of dual-degree students to date. We have also expanded our leadership team and faculty to meet the ever-growing needs of our program, which continues to be among the top in the country.

One of the cornerstones of our program, the South Georgia Farmworker Health Project, celebrated a significant milestone, our 20th anniversary. We marked the occasion with special guests, including our good friend and founder of the project, Tom Himelick, and the U.S. Poet Laureate, Juan Felipe Herrera. What an honor it was to spend an evening listening to Herrera’s engaging poetry and his unique perspective as the child of farmworkers. It was a pleasure to visit with so many who have given countless hours of service over the years to deliver health care to the farmworkers of South Georgia.

In this edition of the magazine, we pay tribute to Marquitha Mayfield who has retired after 40 years as a PA, including 25 years of dedicated service to the Emory PA program. She has left a positive impact on hundreds of our PA students. We also focus on alumni who are making significant contributions to international health care and feature our growing dual-degree program that combines a public health degree with a PA education at Emory.

It is a pleasure to keep you updated on the many happenings in our program. Emory is proud to continue to serve the PA profession, graduating outstanding practitioners whom we welcome as peers. We encourage you to stay in contact with the Emory PA Program and share your updates as you accomplish great things and provide competent and compassionate care.

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On the cover:
A picker working in the beating sun of the tomato fields.
PHOTO BY JODIE L. GUEST, PHD, MPH

Save the Date
October 1-4, 2019

28th Annual Emory PA Program Board Recertification / Certification Review Conference for Physician Assistants
Atlanta Marriott Century Center
2000 Century Blvd NE,
Atlanta, GA 30345

For more information and online registration go to emry.link/PAreview

“ar i cience, I have found that two of the most important qualities (in addition to medical qualification) for medical disaster relief work include flexibility and humility, or a servant’s attitude.”
– Lynn McBride (left)
Emory’s Physician Assistant Program celebrated the 20th anniversary of the South Georgia Farmworker Health Project, SGFHP, on September 23, 2016. The SGFHP, which provides free health care to migrant farmworkers, began in 1996 from the trunk of the car of its founder, Tom Himelick, then a faculty member in the Emory PA Program. At that time, Himelick and four of his students set off for South Georgia to work with the migrant farmworker community. Today the SGFHP is a multidisciplinary team of nearly 200 students, clinicians, interpreters, and logistics volunteers who come together each summer to continue what Himelick began. Since its inception, volunteers have provided free basic health care to more than 26,000 patients. The project has received local, regional, and national recognition for its innovative, culturally appropriate delivery of health care. This Emory endeavor helps address the health care needs of an often overlooked population—farmworkers. While fruit and vegetable cultivation in Georgia brings more than a billion dollars a year into the state, pickers receive low pay, live largely in makeshift camps or seasonal housing, and have limited access to general health care, prenatal care, or medication.

To celebrate the anniversary, students, faculty, alumni, and friends shared an elegant evening of fine hors d’oeuvres chosen to highlight the vegetables picked by those the project serves, along with the music of Karen Newell and Friends, Les Prestines, and a student ensemble, Musical Murmurs. A silent auction benefitting SGFHP featured a collection of photographs taken by Jodie Guest over the years from her post as the director of Teen Corp, a youth nonprofit she started, and research director of the SGFHP. Maha Lund, program director, presented Himelick with the Founders Award, recognizing his passion and devotion to this project. She thanked him for his vision, compassion, and teaching, saying, “The drop of inspiration you shared in 1996 has had a ripple effect beyond what anyone would have imagined. Your legacy continues to serve many and inspire us all.”

The evening program featured the 21st U.S. Poet Laureate, Juan Felipe Herrera, who described the SGFHP as “humbling and important.” Herrera is a Mexican American and the U.S.’s first Latino poet laureate. He is the son of migrant farmworkers and worked the fields in California alongside his parents in the 1950s. Herrera spoke of his time growing up in California as the son of migrant farmworkers, an experience that strongly

Left to right: Student ensemble Musical Murmurs (Kevin Gleim, Joe Borillo, Carla Anderson, April Bieber, and Adam Racovovsky, members of the class of 2017) performs for guests; U.S. Poet Laureate Juan Felipe Herrera recites poetry; Program Director Maha Lund presents the Founders Award to Tom Himelick, founder of the South Georgia Farmworker Health Project.
On Holy Ground

Briefly we stood on holy ground
At the intersection of ways of justice and medicine
Georgians black loam was green
shrouded to the horizon

We listened
Briefly we heard the soft voices
of children in the field
Picking replacing their childhood hours
Fatigue in their eyes
We heard the horrors of the desert crossing
Of friends gone
No más muertas no más muertitos
No more deaths

Briefly we saw men and women
did beyond time
Hopeless years away from their families
Briefly we felt the merciless
sun and later retreated to our air conditioning
And our insulated lives
Briefly we were called angels
The worker looking down at his ragged shoes

Thanking us for being there
between fields
For caring for his hermanos y hermanas
But we knew who the real angels were
Who’s sacrifices fed us without our gratitude

Briefly we stood between cars and wept in darkness
Wept for the lack of answers
For the injustice
For the little we could do
For the understanding of our complicity
For memories that will continue to haunt us

Briefly tonight we gather to remember
To celebrate
And to affirm
That justice and equity will not be brief
That with these hands
That with these hearts
Estos corazones
We can change

For the 20th anniversary of the South Georgia Farmworker Health Project
© Tom Himelick, 2016

She found a need and filled it

Mayfield retires from an inspirational career

BY BETSY ROTHSCHILD, PA-C
ILLUSTRATION BY ALEX NABAUM

Marquitha Mayfield lives her life guided by many mottos. Two that she learned from her parents have particular importance: Never start a job that you don’t intend to complete and share your knowledge with others to help them reach their goals.

During her 40-year career as a PA, she has had plenty of opportunities to embody these values. As her skills and knowledge grew, she found new opportunities to care for patients and share her knowledge with others.

Following is a snapshot of this pioneer and mentor in PA clinical practice, research, and education. She became an example to many and an inspiration to her students and family, including her nephew, who also became a PA.

Mayfield, as she is lovingly called, grew up in Savannah, Ga., the oldest sibling to four younger brothers. Her parents instilled a thirst for knowledge and a desire to work toward perfection. Upon graduation from high school, she earned a National Merit Scholarship. Her initial college plans were to complete general education classes at Emory University and then transfer to Georgia Institute of Technology to major in architecture. However, when Georgia Tech extended its architecture program by an additional year and then required three years’ work experience before allowing candidates to sit for the licensure examination, she changed her plans and decided to stay at Emory. She

Marquitha Mayfield leaves a legacy at the Emory Physician Assistant Program.
was considering either majoring in nursing or joining the new PA program. In the early 1970s, there wasn’t much information about this new profession, but she met PA students who spoke highly of their experiences in their program. She was intrigued that PAs had the ability to make decisions, make diagnoses, and be involved in the management and treatment of patients. In 1973, Mayfield was one of 32 students accepted into the fourth class of the Emory PA Program. On the first day of orientation, she realized that, at the age of 22, she was both the youngest and the least experienced person in her class. She had worked one year as a nursing assistant at Grady Memorial Hospital who needed help with his research on a new antihypertensive drug class, beta blockers. Her responsibilities included recruiting research participants at Grady, screening them based on the research protocol, completing histories and physical examinations, starting them on the drug protocol, monitoring their progress, and documenting the results. During a second research project, she explored the relationship between oral contraceptives and hypertension and the increased incidence of deep vein thrombosis and pulmonary embolism in patients on oral contraceptives. The experience opened doors for her to run a family planning clinic in southwest Atlanta. She managed the clinic and provided gynecological services, primarily to teenage girls. Mayfield then returned to Emory, working in ophthalmology as a surgical assistant in the new field of eye microsurgery. When Mayfield heard that Morehouse School of Medicine was looking for a nurse practitioner to help one of their physicians with a research project, she convinced them a PA could fulfill the job.

Mayfield has always practiced community service, particularly reaching out to the underserved. She spent many hours training laypeople in underserved communities in medical self-help. She was hired by Dr. David Satcher, who later became director of the Centers of Disease Control and Prevention and the 16th U.S. Surgeon General. The position included curriculum development for the then new medical school at Morehouse and a clinical position in the family medicine clinic for residents. Mayfield recalled a lesson she learned from Satcher when he invited her to prepare a lecture for second-year medical students. After two weeks of research, she shared her presentation with Satcher, who introduced her to the KISS (Keep it Simple, Stupid) principle, that a good teacher tailors her content and teaching style to match the audience, rather than to highlight her own expertise and familiarity with the subject. In other words, use your intricate knowledge of a subject to break it down to the clearest and most concise terms. This method became the foundation for Mayfield’s teaching style and a key to her success with students. When mentoring junior faculty, she always recommended the KISS principle.

Mayfield spent five years in the Department of Family Medicine with Satcher and then transferred to the Department of Medicine, where she taught medical students their history and physical exam skills from Mayfield. She loved teaching and relates that her proudest moments include twice being voted Doedicar Teacher of the Year by students. Mayfield retired from the Emory PA program in 2016. In retirement, she continues to be inspiring. Always goal-oriented, she never lost her interest in architecture. While a PA, she continued to explore it as a hobby, acquiring skills in home remodeling and construction as well as a license as a general residential contractor.

Marquitha Mayfield was honored with the 2017 Physician Assistant of the Year Award, voted on by the PA faculty annually to recognize outstanding service to the Emory PA Program and the PA profession. The 2016 award was given posthumously to Bob Pyle who served as a Learning Society leader at Emory’s PA program for two years. Mayfield is pictured here presenting the award to Pyle’s son, Dr. Robert C. Pyle, at the 2016 Graduation Award Breakfast.

In retirement, her next goal is to blend these skills with her medical background so that she can retrofit housing for the elderly and handicapped. By making their homes more functional and livable, she hopes to enhance their lives and allow them to “age in place,” resulting in better quality of life. It is this legacy of service that she would like her family and friends to remember. With typical humility, she says, “I just did my job.” This aligns well with the advice she has for new PAs, “Find a need and just fill it.”

In her career as a PA, Mayfield had a broad range of opportunities, including working in research, running a clinic, and teaching medical students. After graduation, she worked part-time for Dr. Dallas Hall, an internist at DeKalb Medical Center in emergency medicine and cardiology. By contrast, her classmates were medics with combat experience in Vietnam and nurses changing careers after many years. In her usual fashion, she didn’t let this intimidate her. Mayfield had many memorable patients and experiences as she rotated through various specialties. She learned her strengths, shored up her weaknesses, and became increasingly confident that she had made the right choice.

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When two is better than one

BY JODIE L. GUEST, PHD, MPH

Emory is one of a few universities offering a dual MMSc-PA and MPH option for interested applicants. The dual-degree program offers students the opportunity to earn an MPH degree in conjunction with their PA training. Students may apply their combined PA/MPH skills in such areas as population health, clinical research, health administration leadership, global health care, and community health promotion.

Accepted dual-degree students enroll in the Rollins School of Public Health for one year and complete 32 semester hours of courses including the required MPH core courses, required departmental courses, and a thesis. Students must also complete a structured field experience practicum of relevance to public health. After completion of the fall and spring semesters of the MPH curriculum, dual-degree students enter the PA program the following fall semester. The program began in 2007 and graduated the first two dual-degree students in 2010. To date, 24 students have graduated from the program, and an additional 16 students are currently enrolled.

The dual-degree program began under the leadership of Virginia A. Joslin, PA-C, MPH, a former program director. Joslin worked with Rollins to add the PA program as a dual-degree offering for the Emory School of Medicine. Joslin saw that many schools of medicine, nursing, and health sciences were incorporating public health practices and theory into their curriculum and that institutions were incorporating public health into their practice and mission. She sought a way to condense the time of a traditional MPH degree and a PA degree, two top-ranked masters programs. Today, students at Emory can combine an MPH degree with MD, PA, MBA, JD, nursing and theology degrees. Since 2010, Dr. Jodie L. Guest has been involved in guiding the dual-degree students through their combined thesis work and practicums. Starting in 2012, Guest took on the role of liaison between the two programs and currently serves as the advisor for these students.

Most students seek out the PA/MPH dual-degrees to learn more about population health, work with underserved communities nationally or internationally, or to enhance their research skills. Former graduates have also found their MPH degree opens up more management options and potential leadership roles in healthcare. An MPH degree can expand the opportunities, responsibilities and experiences in a PA’s career. Our graduates and current dual-degree students are passionate public health advocates, often pursuing positions in community health education, participating in research, participating in epidemiological disease monitoring, and working in public health and medicine abroad. Below, eight of our graduates and current students describe their careers and ambitions that are making the world a better place.

Janet Lui-Tankersley, PA student, Class of 2019

**Epidemiology**

I chose to pursue the MPH in epi along with my PA degree to develop data analysis skills, understand study design, and learn how to evaluate the medical literature. My goal after graduation is to split my time between clinical practice and research, and I felt the dual-degree program was the best way to prepare for both endeavors.

Stephanie Hackett, PA-C, MMSc, MPH, Class of 2012

**Global Health Epidemiologist, Pediatric HIV Team, Maternal and Child Health Branch, Division of Global HIV/TB, CDC**

Currently I work as a physician assistant at the Grady Infectious Disease Program, but I will soon be moving to the CDC to work as an epidemiologist within the Pediatric HIV Team in the Maternal and Child Health Branch of the Division of Global HIV/TB. I am also the vice president of Safe Mothers Safe Babies in Uganda (SMSB). SMSB uses innovative, community-based models to ensure that mothers and children in the first 1,000 days of life lead healthy and empowered lives.

Rita Moses, PA student, Class of 2019

**Health Policy and Management**

I am planning on opening a clinic for children in foster care with a history of abuse with a small attached group home for hard-to-place foster care children. I focused on management in the MPH program, and I couldn’t have dreamed how much practical knowledge I gained that will be directly applicable in my practice as a leader and member of the team, as well as in the day-to-day management of a clinic. All of my professors were up to date and practical in their knowledge, and they provided me with valuable connections to different health care agencies and firms. I believe my MPH combined with my PA degree will give me a greater understanding of the health care field as a whole and a more well-rounded and thorough approach to my care as a practitioner. I wanted to become a primary care provider because I wanted to be able to make a real difference in people’s lives. Public health studies how to make that happen.

Matthew Revilla, PA student, Class of 2019

**Behavioral Sciences and Health Education**

A PA is at the front line of health care. A PA who is skilled and versed in public health...
Serving across the globe

Three PAs tell of international experiences

“Whether the borders that divide us are picket fences or national boundaries, we are all neighbors in a global community.”
—Jimmy Carter, 39th President of the United States, Emory University Distinguished Professor

ONE OF THE CORE VALUES OF THE EMMORY UNIVERSITY PHYSICIAN ASSISTANT PROGRAM is to support community health care by providing and promoting sustainable health care within the global neighborhood. Three PA alumni, Diana Culbertson, MMsc, MS, PA-C, (Class of 2014), Jeri Sumatani, MMsc, PA-C, AAHIVS, (Class of 2008), and Lynn (Lipp) McBride, MMsc, PA-C, (Class of 1999) are exemplifying that mission by creating global connections between the Emory PA Program and the individual lives of those they serve.

Culbertson is currently working with Partners in Health (PIH) in Liberia. McBride volunteers with Samaritan’s Purse Medical Disaster Assistance Response Team (DART) and has been deployed to Haiti, Ecuador, and most recently Iraq. Sumatani worked in HIV medicine in South Africa and spent six weeks with the UK-based King’s Sierra Leone Partnership (KSLP) in Sierra Leone during the peak of the Ebola outbreak. They all work alongside local health care practitioners to provide quality health care and deliver medical education and training.

Their stories share common themes of humility, compassion, self-sacrifice, and a dedication to help reduce global health disparities at a personal level. They have found avenues to blend Western medicine with local health care systems and beliefs, exemplifying the delicate union of global communities. The Emory PA Program gave all three of these alumni the training and confidence to be successful and meet the challenges of producing quality care in challenging circumstances.

practices that benefit not only the patient in front of them but also the community at large is more prepared to see the big picture of medicine and health. I chose to get my MPH in behavioral sciences and health education, because I wanted the skills and knowledge that would allow me to perform better patient education, understand why and how patients’ habits and socioeconomic determinants of health impact their outcomes, and to improve patient education and prevention for patients with limited access to care. ▫

Corbi Sandoe, PA-C, MMsc, MPH, Class of 2016
Global Health
Physician Assistant in the Pediatric Intensive Care Unit at Children’s Healthcare of Atlanta

I received an MPH in the global health department with a focus on community development. I currently use my public health background by serving on the board of a nonprofit called People Reaching People. The organization focuses on community development, education, and economic development in rural Madagascar and Kenya. ▫

Meredith Ingram, PA-C, MMsc, MPH
Class of 2012
Health Policy and Management
Otolaryngology and Facial Plastics PA, Ear, Nose and Throat Institute

During my MPH program, I was part of a multidisciplinary team of public health students that lead a social entrepreneurship venture chosen to represent Emory for the International Hult Prize. The 2017 Hult Challenge was “Reawakening human potential: Building sustainable, scalable start-up enterprises that will restore the rights and dignity of 10 million people by 2022.” We traveled to Shanghai, where we pitched our business plan to connect refugees and displaced people with critical resources such as housing, job opportunities, and community networks in a variety of settings. This experience taught me a lot about the legal and ethical implications of working with refugees at the community level. ▫

Brittany Hill Carter, PA-C, MMsc, MPH, Class of 2010
Epidemiology
Department of Hematology and Medical Oncology, Winship Cancer Institute

During my MPH, I obtained a degree in public health management to better understand the business environment of medicine. I wanted to gain the perspective of public health policies and general public health issues. I work in Otolaryngology and Facial Plastics, where we have to be aware of the public health concerns regarding infections like MRSA or influenza or the breeding of antibiotic resistance. My public health degree makes me a better provider, and it certainly opened more job opportunities for me as organizations were intrigued by the additional qualifications. ▫

Conor Cahalan, PA student, Class of 2019
Global Health

Brittany Hill Carter, PA-C, MMsc, MPH, Class of 2016
Georgia Farmworker Health Project; Conor Cahalan and his team at the 2017 Hult Prize competition in Shanghai; Corbi Sandoe, Class of 2016 in Madagascar

“Whether the borders that divide us are picket fences or national boundaries, we are all neighbors in a global community.”
—Jimmy Carter, 39th President of the United States, Emory University Distinguished Professor

Price competition in Shanghai; Corbi Sandoe, Class of 2016 in Madagascar

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Epidemiology
Department of Hematology and Medical Oncology, Winship Cancer Institute

Having my MPH has allowed me to co-author many papers since I work in an academic setting. I am able to attend professional meetings and truly understand the research. I think PAs with an MPH have a much broader perspective on all of medicine. He or she can see an encounter with a patient on multiple levels, taking into account the social, economic, environmental, and population issues while still addressing the medical issue at hand. ▫
When your work is your passion | PA/MPh student Conor Cahalan (Class of 2019) interviewed Diana Culbertson for this piece:

What do you think PAs can bring to international work? Their flexibility. PAs are taught the nuts and bolts of medicine—the history, the physical exam, and a crash course in nearly every specialty. PAs are trained to be versatile, and versatility is critical to success in international work. I came here with a background in nutrition and pediatric endocrinology. When I first arrived, I observed a team completing rounds in the pediatric ward and thought that I would never be able to do that. Now, that’s a huge part of my day, along with diabetes consultations, family medicine, preventive medicine, and supply chain logistics. I have even been able to get involved with policy-level work. If you keep an open mind and don’t confine yourself to one area of medicine, you’ll have a lot to offer as a PA working internationally.

Compare being a PA in Liberia vs. the U.S. In the U.S., we rely on technology to make accurate diagnoses. My examination skills have improved while working in Liberia because we can’t rely on technology here. An exhaustive search for a diagnosis is often futile and sad, even with the best diagnostics, many treatment options don’t exist here.

What inspired you to work internationally? Doing some work abroad and seeing such abject poverty, especially working with children who were dying of acute malnutrition often complicated by HIV. You see that kind of poverty and the lack of access to basic things, and you feel compelled to try to help. You don’t feel like you’re working, you are just living your passion.

What continues to inspire me to work in global health are my local colleagues. The Liberian community health workers and clinicians whom I practice alongside have faced the brutality of civil war in which many have lost their entire family. They come to work with their own burdens, often going unpaid for months at a time. Many of them use their own resources to support our patients. They practice medicine with huge patient loads, complex diseases with late presentations, insufficient training and continued lack of supplies and medicines, and yet they show up every day. It’s easy to come here for some finite time and work hard, knowing you can leave and practice anywhere you want, knowing that you can take time off and go on vacation.

What was it like being part of a temporary response team vs. having this long-term foreign placement as your life? In terms of my day-to-day activities, my role is different now. When I was working with the response team, we planned and implemented community outreach programs that focused on Ebola prevention. We worked a lot in schools, developing rules about handwashing and hygiene. We would take motorbikes into the bush, sometimes for hours, and seek out villages that were disconnected from the outside world except via radio. Those were very happy to receive the education and resources we provided.

Working with Partners in Health, I am more stationary and my responsibilities vary. My job title includes the noncommunicable disease lead and the malnutrition lead. My responsibilities include or have included making pediatric ward rounds, developing a chronic disease management clinic that provides mentors for local PAs and nurses, managing the outpatient and inpatient malnutrition programs, and working with children with type 1 diabetes and insulin-dependent adults.

When I came here, I was a little overwhelmed by the amount of need. Now I meet people here a while, I am learning to prioritize and realize that change doesn’t happen overnight. Capacity building takes patience, faith, and grit on both the ministry side and the side of the NGO. Western medicine customs and local customs are sometimes similar, but often vary dramatically. Our patients have strong beliefs that witchcraft and curses cause disease, often going to church yards for healing. Learning to embrace my patients’ own ideas of their disease while treating them with evidence-based Western medicine is a skill I’m still perfecting, but I love the challenge. It is poetry when the two can be woven together for the good of the patient.

What continues to inspire me to work in global health are my local colleagues. The Liberian community health workers and clinicians whom I practice alongside have faced the brutality of civil war in which many have lost their entire family. They come to work with their own burdens, often going unpaid for months at a time. Many of them use their own resources to support our patients. They practice medicine with huge patient loads, complex diseases with late presentations, insufficient training and continued lack of supplies and medicines, and yet they show up every day. It’s easy to come here for some finite time and work hard, knowing you can leave and practice anywhere you want, knowing that you can take time off and go on vacation.

How is your life different from when you worked in the United States? The food! Since I’m living and working among a mostly Liberian team, we are eating rice nearly every meal. After a while you start to miss food from back home, especially chocolate and good wine. We live in communal housing, which has its perks, but as an introvert I find it can be draining sometimes.

There is really no such thing here as work-life balance. It’s funny though because it doesn’t feel like work, it feels like your work seamlessly blends into the rest of your life. It’s just what you do. My mornings start around 6 or 7 a.m., answering e-mails and phone calls and other administrative duties. Then I will start rounds with the hospital staff, see patients, and discuss cases with my coworkers. We are usually going home around or after dark. Some nights, you get calls from the hospital or patients and are pulled back into the hospital. There really isn’t much downtime, but I can’t complain. I live on the beach with an amazing view and great people. We do find some time for weekend hikes and I even learned to surf!

Tell me about a favorite moment at work. The other day I was working with an adolescent girl whom I feel like I’ve known forever. She is a type-1 diabetes pediatric and reminds me of my patients in St. Louis. I was asking her about her blood sugars because she had recorded all normal results in her log book. When I reviewed her insulin meter, many of the numbers were quite high. I knew she was not being truthful, but I understood this as I had seen this with my teen patients in St. Louis. I laughed to myself, teenagers the world over trying to negotiate the line between autonomy and dependence. The teen, her parent, and I came to an arrangement that allowed the teen to feel “normal” and the parent to feel “in the know.” The similarities of these kids to the ones I worked with back in St. Louis just brought me home for a moment. They’re just kids dealing with a chronic disease.

How did you get approval to work as a PA internationally? The first time I worked internationally as a PA, I enrolled with the U.S. Agency for International Development registration list for health care workers to assist with the Ebola outbreak. After that, I was hired by the American Refugee Committee. I simply faxed them my license and resume, and they handled everything else. I was placed in a village that was on the verge of being declared Ebola-free, so my role was to provide community education and outreach. The same process took place when I joined Partners in Health.
Responding to earthquakes, epidemics, and conflict | The following photo journal and personal reflections were provided by Lynn (Lipp) McBride.

Last year, Lynn McBride spent the month of March serving as part of Samaritan’s Purse Medical Disaster Assistance Response Team, volunteering at their trauma emergency field hospital (EFH) just outside of Mosul, Iraq. The EFH compound consisted of a tent hospital with two operating theaters, an emergency room, a trauma ward, an ICU, three inpatient wards (totaling about 50 beds), a pharmacy, and a laboratory. The hospital compound was surrounded by a 16-foot-high blast wall perimeter and other multiple layers of security protection because of its location in an active war zone. McBride worked as a surgical physician assistant alongside trauma, orthopedic, and general surgeons.

The Iraq stint was McBride’s fourth deployment with Samaritan’s Purse. Her first was in 2010 following the 7.0 magnitude earthquake in Haiti. McBride was deployed with four physicians, four PAs/NPs, four nurses, and a pharmacist to different areas around Port-au-Prince to set up mobile medical clinics. The team averaged about 300 patients per day. An estimated 10,000 NGOs responded to Haiti after the earthquake that killed approximately 600 people, injured approximately 6,000, and decimated medical treatment facilities. McBride served as the night shift inpatient ward provider in Haiti’s sole facility in Freetown to keep its doors open to Ebola and non-Ebola patients. Here are some of my experiences.

Day 1 | Although any job begins with an orientation process, this one carried with it an acute sense of gravity. Not paying attention could literally mean life or death. Nevertheless, I felt surprisingly calm and safe in my Personal Protection Equipment (PPE).

Day 3 | We lost a 5-year-old child today. There was a moment when the thought of CPR crossed my mind, but logic quickly took over. The strangest thing for a Western-trained health care professional is to stand by and do nothing while a patient dies in front of your eyes. At the same time, it allowed us to spend the last few minutes of the little girl’s life with her and truly be present throughout her death.

Day 6 | One of my tasks today was to select patients from the screening tent to admit to the isolation unit. This is the ultimate triage job—you have to choose which patients get to come inside and lie in a bed, receive food, water, and possibly some symptom relief. The others wait in the “tent of horror” until someone is discharged, transferred to a treatment center, or dies.

Day 7 | Triaging suspected Ebola is an imperfect science. The goal is to identify those who are clinically unstable or who are experiencing profuse vomiting and/or diarrhea and may put others at risk. We try to prioritize children since many of the holding units in the area do not have pediatricians, so children often receive suboptimal care. The dead are quickly removed from the tent into the isolation unit morgue, as corpses are particularly infectious. In many cases, we have no choice but to send the Ebola-positive patients on a five-hour journey to Kenema where they have more Ebola treatment units.

Day 18 | A young girl about 16 years old came up to me this morning asking about her mother who had been brought in two days ago. I had to tell her, “Your mother is going to Kerry Town now in that ambulance.” As soon as her mother was carried out of the isolation unit, the girl started crying. But then she stopped. With eyes fixed on her mother, she started singing. It was more of a chant than a song—a haunting hymn that hypnotized me.

Day 25 | I woke to the sound of ambulance sirens. I know that this signifies more cases of Ebola or related deaths. Sierra Leone has never had a functional, 911-type centralized emergency response service. A command center was established as a result of the Ebola outbreak. Sierra Leoneans are encouraged to call “117” if they experience any signs or symptoms of Ebola. An ambulance and trained health care workers respond to the caller with the goal of rapid isolation and transfer to the holding unit. It is true that there remains a mountain of work to do to control this epidemic, and with it comes a feeling of helplessness. But amid all the death and suffering, I witnessed collaboration between organizations, local and international, and good work being done by many hard-working people. Whatever your acronym—WHO, CDC, UN, MSF—in Sierra Leone right now, everybody is fighting the same enemy. Although it is not perfect by any means, it is what international aid was intended to be.

Day 45 | It’s New Year’s Eve. I sit at Sierra Leone’s airport waiting for my plane. Looking back on my six weeks here, I struggle to find words to describe my experience.

Day 21 Post Re-Entry | I learned the power of human connection. Ebola is a disease that steals every shred of humanity and dignity from those affected. It even steals physical touch. But then I realized human connection encompasses much more than physical contact. Patients shed tears of relief when I acknowledged their pain. Just making eye contact with patients too weak to talk gave us a semblance of connection. And when patients died in the isolation unit, we would talk to the family members for as long as they needed and often cry with them. I am not saying any of this was enough. But these little moments of human connection restored some humanity and dignity in a situation that is so devoid of both.

Battling Ebola: A View from the Front Line | The following personal blog excerpts were written by Jeri Sumitani in 2014 and were previously published in WebMD Health News.

When the Ebola outbreak reached a critical point in the summer of 2014, I asked to volunteer in West Africa. I ended up working at Connaught Hospital, the sole facility in Freetown to keep its doors open to Ebola and non-Ebola patients. Here are some of my experiences.

Day 1 | I felt surprisingly calm and safe in my Personal Protection Equipment (PPE).

Day 3 | There was a moment when the thought of CPR crossed my mind, but logic quickly took over. The strangest thing for a Western-trained health care professional is to stand by and do nothing while a patient dies in front of your eyes. Instead, it allowed us to spend the last few minutes of the little girl’s life with her.

Day 6 | One of my tasks today was to select patients from the screening tent to admit to the isolation unit. This is the ultimate triage job—you have to choose which patients get to come inside and lie in a bed, receive food, water, and possibly some symptom relief. The others wait in the “tent of horror” until someone is discharged, transferred to a treatment center, or dies.

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Guest Named Associate Program Director

JODIE L. GUEST, PHD, MPH was named associate program director in January 2017. She brings many years of teaching and administrative experience to the leadership team.

Guest, a professor in both the School of Medicine and Rollins School of Public Health, has taught in the Emory PA Program since 1999 and leads the dual-degree program and research for the South Georgia Farmworker Health Project. She teaches three courses in the program (epidemiology/biostatistics, evidence-based medicine, and the three-semester thesis course) and has won multiple teaching awards at Emory, including the Dean’s Teaching Golden Apple, the Student Government Crystal Apple for Emory graduate teaching, and Outstanding Educator for the School of Medicine. Guest brings a wealth of experience to the PA Program in the area of grant development and policies.

New Faculty

The program has three new faculty members, JONIE FAWLEY, MPAS, PA-C, assistant professor; JEREMY AMAYO, MMSc, PA-C, assistant professor; and MARTHA SIKES, MS, RPH, PA-C, assistant professor. Fawley joined the program in 2016 fulltime as a society leader, course director for Geriatrics, Neurology, and Fundamentals of Medical Science, and preceptor for South Georgia Farmworker Health Project. Prior to her faculty appointment, Fawley was a full-time PA at the Emory Family Medicine Clinic in Dunwoody. Amayo, a 2015 Emory graduate, joins the program part-time as a physiology lecturer and module director for HEENT/Pulmonary. Amayo works clinically as a pulmonary and critical care PA. Sikes joins the program part-time to provide instruction in pharmacology and dermatology. Additionally, she works with the clerical year team.

New Staff

WILLIAM LEMON joins the program as part of the clerical year team. He is the contract coordinator making sure all rotations are in place. Prior to joining Emory in 2017, Lemon was a legal administrative clerk at Piedmont Healthcare.

Recent Honors

JEREMY AMAYO: Outstanding Achievement Award: Embracing the Future, Georgia Lung, January 2018

STEPHEN BENTON, student: PAEA Future Educator Fellow

STEPHEN BENTON, student: PAEA Student Health Policy Fellow

CONOR CAHALAN, student: 2017 Hult Prize Finalist, Shanghai

JONIE FAWLEY: Fellow, Woodruff Health Educator Academy

Jodie Guest: 2017 Excellence in Teaching for Emory University School of Medicine

Jodie Guest: Woodruff Health Educator Academy steering committee

Jodie Guest: Moderator for the 22nd International Workshop on HIV and Hepatitis Observational Databases

MAHA LUND: Mid-career Women Faculty Professional Development, Association of American Medical Colleges

MAHA LUND: Physician Assistant History Society, Board of Trustees

MAHA LUND: Woodruff Health Educator Academy steering committee

MAHA LUND: Woodruff Leadership Academy Fellow

KAREN NEWSLL: GAPA Board Member

LIZ VALDES: 2017 Emory GAPA Teacher of the Year

Honors & Awards

Congratulations Class of 2017!

Pi Alpha Honor Society

JAMAR REVELLE BROWN

NICOLE MARIE FAVA

ANN MICHELLE GASTON

EVA GOUGIAN

ABigail ELANE Smith

BRITTANY SZABO

RACHEL ELIZABETH VAN DYKEN

SARAI LIsSetTE vargAS-veRaa

Faculty

LEANNE MARTINELLI, MPH, MMSc, PA-C

High Honors

CARLA JEAN ANDERSON

NICOLE MARIE FAVA

NICOLE LEANNE LINDSAY

SARRAH MELISSA PITMAN

DANIEL JACOB REICHMAN

ELIZABETH LANE RINGER

Professional Achievement

NICOLE MARIE FAVA

Academic Achievement

RACHEL ELIZABETH VAN DYKEN

Highest Honors

ANN MICHELLE GASTON

LESLE ROSE RomEYn

RACHEL ELIZABETH VAN DYKEN

Humanitarian

SARAI LIsSetTE vargAS-veRaa

Medical Writing

JESSICA LISA GIUDAGNO

Service

ABigail ELANE Smith

Who’s Who Among Students in American Colleges and Universities

BRITTANY SZABO

Georgia Association of Physician Assistants

JOSEPH JOHN BORRILLO III

Teaching Awards Given by the Class of 2017

Physician Assistant of the Year

MARQUITHA MAYFIELD, MMSc, PA-C

Preceptor of the Year

BRIAN ORGAN, MD

Clinical Teacher of the Year

WILLIAM MCGRATH, MD

Didactic Teacher of the Year

JANICE HERBERT-CARTER, MD, MGA, FACP

Program News

New Program Directors Join the PA Program

SUSANA ALFONSO, ND, MHCM, assistant professor, joined the PA program as medical director in September 2017. Alfonso is the interim medical director for Emory Family Medicine and the director of clinical and academic integration for the Department of Family and Preventive Medicine as well as a long-time preceptor for the South Georgia Farmworker Health Project.

ANTONIO GRAHAM, DO, assistant professor, also joined the program in 2018 as the assistant medical director. Graham is a geriatrician at the Atlanta VA Medical Center.
Eclipse
On August 21, 2017, the Emory PA classes of 2018 and 2019 came together with faculty, staff, and program therapy dog to watch the 97% eclipse in front of the School of Medicine.