Monday Memo – April 24, 2017

Professional Service

- Sports Medicine faculty Jay Broadhurst and Jill Tirabassi, working with Fellows Kim Sikule and Elana Bannerman provided coverage for the ACE/EPIC Soccer Tournament held on Saturday, April 22 at the Elm Park Elementary School. The round-robin tournament including teams representing African Community Education, Cultural Exchange Through Soccer, Bhutanese Community of Massachusetts, Worcester Refugee Assistance Project, and Ascentria Care Alliance.

Publications


Chair’s Corner

- **Grand Rounds:** You are probably aware our weekly Grand Rounds came to a halt a few weeks ago because of a series of technical glitches in our videoconference and webinar technologies. I’m pleased to write that effective May 2, we anticipate resumption of the conference, utilizing software that is much simpler to use from any computer attached to the internet. Watch the listserv for further information.

Grand Rounds is a time-honored tradition in medical education. The ritual traces its roots to the late 19th century as a weekly forum led by residents, devoted to a detailed discussion of a clinical topic selected from among the diagnoses being cared for in the
hospital setting. Grand Rounds often included a patient, brought in to demonstrate an unusual physical finding or to answer questions posed by senior members of the faculty, dressed in their white coats, looking down from on high in an amphitheater.

Over more than a century, Grand Rounds has evolved a great deal. Sandal et. al.[1] reference a 2006 New York Times article complaining that “Socratic dialogue (has given way) to PowerPoint Presentation” and “grand rounds are not so grand anymore.” The typical list of complaints includes speakers who are poorly prepared or whose primary motivation is to market themselves as consultants; poor attendance, tardy attendance and late starts; problems with traffic and parking; bad food, lack of food, etc.

Our department has conducted its own Grand Rounds for over three decades, and we’ve seen our own changes over the years. Jeremy Golding works diligently behind the scenes, directing the selection of topics and speakers by members of our community to assure that the content reflects our interests, not those of the speaker. He asks speakers to prepare talks to address the needs of the practicing family physician, and CME credit is offered through the AAFP. The topics aren’t limited to inpatient care, there’s no esoterica. While we still host it in a hospital amphitheater, the attire is much more relaxed, and the room is sparsely populated, as the majority of today’s participants attend remotely. In all, there are more participants than we used to have: a formal meeting over lunch has become a brown bag affair that includes residency graduates tuning in from their practices across the country. While we have contemplated abandoning the amphitheater for a studio, for the moment we are still wedded to the tradition of broadcasting from a hospital setting, where a number of our residents can still be found every Tuesday at noon.

I hope you’ll rejoin us on May 2.

WELLNESS MOMENTS

Want to live longer, better, and have more energy? There is no pill or surgery that produces this as well as eating fruits and vegetables. The best medical data tells us **7 vegetables** (but not starchy ones like potatoes or rice) and **3-4 fruits** per day. Every day.

Think of yesterday; how many servings (a serving is about a handful) of vegetables and fruits did you eat? 5? 3? NONE? Getting to 10 requires making a MINDFUL decision to do so. Try packing carrot chips and mini cucumbers for lunch. Plan a mixed salad and 2 other vegetables with dinner. STOP the rice (even brown rice), potatoes and pasta (even whole wheat pasta) except as a treat (bread too!).

"When you start eating food without labels, you no longer need to count calories" - Amanda Kraft, Food Matters