



The Medical Messenger™

Welcome Class of 2023!

The Chicago Medical Student Council would like to give you a warm welcome to UIC COM! This is our first issue of The Medical Messenger this year; inside you will find articles about a few of our student orgs and our administration. Below are a few highlights from the past year!

Inside this issue

- HuMed Art Exhibit.....2
- Advocacy in Action: SNaHP3
- Welcome Dean Heiman4
- Message from Dean Thompson ..5



Humanities in Medicine (HuMed)

HuMed was established in February 2019 to increase medical student exposure to the arts and humanities and set the foundation for a Humanities in Medicine track at UICOM.

As part of the current “beta” track, students are required to attend 10 events during Phase 1, and complete an elective/capstone project during Phases 2 and 3. HuMed hosts events and workshops on campus and around Chicago, such as art exhibit openings and theater performances, as well as works with the existing UIC medical school curriculum. You just need to complete a short reflection after each experience. Everyone who successfully completes the beta track will also receive a formal recognition by OSA for their accomplishments!



The Chromotomes performing at the HuMed Art Exhibit

Featured Event: HuMed Art Exhibit

While Humanities in Medicine (HuMed) is one of the newest student groups on campus, the ambitious student group featuring a hefty 12 student executive board hosted one of the most successful student-run, student-featured events of the year: the first ever HuMed Art Exhibit.

Michelle Sheena, HuMed founder and president, says she started HuMed to “create an outlet...to express ourselves and eventually be recognized for our achievements through a formal track. However, I did not think we would grow so much so quickly! I was amazed to see how involved UICOM students are in these fields (visual and performing arts, literature, history and ethics); HuMed has become so successful because of the passionate and talented students committed to our mission - as well as support from UIC faculty and staff.”

The Faculty Alumni Lounge was transformed into a gallery on the last Wednesday of the school year. The exhibit featured 30 different

not get to spend as much time with my class as I would have liked this year, so the art exhibition was a great way for me to make up for that.”

For Divya Singh ('22) the art exhibit provided an opportunity to connect more deeply with peers: “To support one another not just with school, but also with other passions is truly what bonds us.” For David Lim ('22) the end-of-the year exhibit provided a sense of closure to the academic year: “There was something very cathartic about ending the school year with such a strong display of creative individuality and artistic inspiration after months of cookie cutter fact learning. I was reminded that medical school itself can be thought of as an artistic endeavor in that the final product of all the learning and observing that we do is not always clear, but that motivation and diligence combined with creativity and good intent will go a long way towards the making of a masterpiece.” For attendee Chioma Ndukwe ('22) the art exhibit served as an



artists from every year of their medical training, as well as colleagues from the Biomedical Visualization Masters Program.

The event also featured a silent auction of art pieces, a raffle of prizes, performances by the student *a capella* group the Chromotomes, spoken word pieces by participants of Dr. Gramelspacher’s humanities-based elective rotation, and floral arrangements, food, and an open bar created by talented students. Megan Helms ('22), the creator of a stained glass Chicagoan skyline, remarked that the exhibit was the “first time displaying any of my art in a more public setting--let alone attempting to sell it--and the amount of support and encouragement I received left me speechless.” Helms spoke to the importance of the exhibit by “fostering the growth of whole people and not just future white-coated encyclopedias.”

Abdul Zakkar ('22) spoke about his “most ambitious piece ever,” which was featured on the cover of the COM Artists’ Body Electric and sold at the exhibit: “As a commuter I did

inspiration to prioritize art: “It inspired me to get back into playing music--I gave up playing the trumpet years ago.”

What each artist and participant took away from the experience is just as varied as the art itself. HuMed looks forward to continuing to encourage our fellow students to rely on art and the humanities to help navigate their path to physicianship. As attendee Sophie Gough ('22) noted, “It’s really hard being in medicine and art helps teach us how to get through it.”



Medical students canvassing outside the AMA

Advocacy in Action: SNaHP

The AMA tries to recruit new members with promises of free scrubs and copies of First Aid. However, they have a dwindling enrollment of younger doctors because their views are increasingly anachronistic and problematic. They do not listen to the new generation of doctors. The medical students' section of the AMA has made clear their view of Single Payer system- that it is the ideal system for putting patients first. But the leaders of the AMA continue to support a factually incorrect negative stance on Single Payer healthcare. That is why Students for a National Health Program (SNaHP), Physicians for a National Health Program (PNHP), National Nurses United, and many patients' rights groups protested their annual meeting in Chicago this June.

The AMA leadership is complicit with an unjust status quo. As medical students, we see the huge inequality and inefficiency of our current healthcare system and reject it. In class, we learn about maneuvering around our current healthcare system. We learn multiple medications for treating a disease, yet many of these drugs UIC patients cannot afford. We learn about the difficulty of treating people with long standing chronic illnesses like diabetes and hypertension when they do not have stable access to care. When shadowing clinicians, we learn that insurance coverage concerns are common, even to patients with "good" insurance. We hear about the wasted hours spent haggling with insurance companies who insist on determining treatment coverage, thus overriding our painstakingly honed clinical judgment.

So why don't we fix it? That's what PNHP and SNaHP are advocating for. We are trying to take the profit away from insurance companies and put it back into patient care. Currently, we have a multi-payer system, with numerous unregulated insurance companies spending 342.6 million on CEO salaries in 2017 and 350 billion annually on billing and administration costs. On top of these inefficient costs, the companies make billions in profit off of illness every year. This money then gets funneled into the political system as lobbying expenditures, rather than patient care. A Single Payer system means that the government acts as one large insurer. Everyone is insured and the system is paid for through a combination of a progressive income tax, wealth tax, and

Upcoming Events

In order to get the latest updates about events occurring on campus, subscribe to the CMSC google calendar at cmsc.org.uic.edu/events/.

Below are some of upcoming CMSC events:

- CMSC GBM on 10/28 from 5:00pm-7:00pm
- Dialogue with the Deans on 10/30 from 5:30pm-7:30pm

Specialty Webinars!

Do you want to learn about the different specialties in medicine, but don't know where to start? Well look no further, the COM Career Advising and Planning team has launched its official specialty webinar series. The series includes various webinars focused on specialties in medicine which are lead by physicians in their respective fields who provide insight into these specialties. These are open to students from all COM campuses, and students are able to join online through WebEx or in-person. Students are encouraged to attend and ask questions!

For students interested, but unable to attend, these webinars will be recorded and posted on Blackboard under **COM resources**.

Below are two webinars from the series that have already been launched:

Orthopaedic Surgery with Dr. Mark Gonzalez



ENT with Dr. Tatiana Dixon



a decrease in administrative costs. Pharmaceutical prices would fall because of the bargaining power of a single insurer. Physicians would reclaim autonomy in treating their patients, billing would become seamless, and there would no longer be frustration with various prior authorizations and insurance denials. Personal bankruptcy due to medical debt would be eliminated. The system becomes much simpler and benefits patients and physicians when we eliminate extractive middlemen. This is a common sense solution.

Why is the AMA against it? This is in line with the AMA's history of putting corporate interests and profit over patients in its policy advocacy. It spent millions in 1947 to lobby against President Truman's original vision for a Single Payer system. In 1961 it hired Ronald Reagan to spread fear and misinformation about Medicare. In 1966 Martin Luther King Jr. spoke against the AMA's "conspiracy of inaction" in supporting the status quo of racial

segregation in medical care. We feel that the AMA on too many occasions has been on the opposite side of patient wellbeing and health justice. Earlier this year, the AMA joined the profit driven Partnership for America's Healthcare Future, which adamantly opposes a Single Payer System. We protested their unscrupulous agenda in June because their voice is not ours, it is not the future of medicine. Their voice is infected by money, yet they wonder why they don't attract young doctors. Now, within months of our action, the AMA decided on August 15, 2019, to pull out of the partnership, amidst growing support for Single Payer healthcare. This is an encouraging development, demonstrating that together we can stand up for justice, that we can make change happen. In the midst of a tumultuous debate about healthcare, we intend for medical students to be at the center of the discussion of what the future will look like for our patients and our careers.

Students for National Health System

Welcome Dean Heiman

Introducing to you all the one and only, Dr. Heather Heiman. Coming from Feinberg School of Medicine as a clinical skills instructor and internist, Dr Heiman has accepted the role of Associate Dean of Medical Education. After medical school at Harvard, Dean Heiman began a residency in psychiatry. However, as an intern, she realized the amount of care some can provide as an internist and how much she enjoyed generalized medicine. Because of this, she transferred to an internal medicine residency at Brigham and Women's Hospital and stayed after the completion of her residency for two years. Her family then moved to Chicago where both her husband and herself started jobs at Northwestern.



Here is where she discovered her love for mentoring students and medical education. As the child of two educators, teaching is in her blood and she views it as a "huge privilege to work with students at such a formative time of their personal and professional lives". After 16 years at Northwestern, she decided to leave and join us here at UICOM as the Associate Dean of Medical education, a logical next step for someone so interested in supporting and mentoring students. She wants the student body to know that the staff at OCA and OSA are here because they care about you and your future patients. Their goal is to support all of us in becoming happy, healthy physicians and move through our own struggles and doubts. In the few weeks she has been here, she already found herself in awe of how open, honest and professional UICOM students are and cannot wait to continue to get to know the student body.

Fun facts: One of her favorite moments in medical school was being on call during Thanksgiving at Beth Israel Deaconess. There was so much camaraderie while working on a holiday, even though it was not everyone's first choice to be there. She remembers a moment when her senior got a page for a hospital admission. There was a patient being admitted for hypoglycemia. "Who gets hypoglycemia on Thanksgiving?" my senior resident asked. "Maybe they took a triple dose of insulin, opened up the oven, and the turkey was incinerated." We laughed; it was just such an unexpected Thanksgiving admission. Dean Heiman has a set of identical twin 13 year old boys and a 16 year old daughter and all four of them share the same piano teacher.

A Message from Dean Thompson

I would like to thank the Chicago Medical Student Council for allowing me the opportunity to introduce myself to the University of Illinois College of Medicine student body. While I am not new to the College of Medicine community, I am new to the role of Associate Dean of Admissions. I welcome this opportunity to introduce myself and share with you my vision for the Office of Medical College Admissions.

I am an emergency physician and medical toxicologist. My clinical work centers around caring for patients in the Emergency Department and performing medical toxicology consultations throughout UI Health. Medical Toxicology is a small field, and many may not know much about the discipline. Medical Toxicology is a sub-specialty of Emergency Medicine that centers on the diagnosis, management, and prevention of all manners of poisoning—therapeutic medications, illicit drugs, envenomations, plant poisons, industrial toxins, etc. I lead the Division of Medical Toxicology within the Department of Emergency Medicine. I am core faculty within the UIC Emergency Medicine residency program, and I am the fellowship director for the UIC site of the Toxikon Consortium Medical Toxicology fellowship program. My research efforts have previously centered around antidotal therapies for poisonings. As I am nearing the completion of our Department of Medical



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Education's world-renown Master of Health Professions Education program, I am now entering the fascinating realm of medical education research. Prior to my appointment as the Associate Dean of Admissions, I served as the Assistant Dean of Residency Preparedness—a role I truly enjoyed that focused on medical student career development.

My background has uniquely prepared me for the role of Associate Dean of Admissions. I have worked with all levels of medical trainees—medical students, residents, fellows—and am keenly aware of what is needed to be successful in becoming an excellent physician. I now have the opportunity to take my previous experiences and apply them to the admissions process here at the University of Illinois College of Medicine. My vision is to admit and train the next generation of physicians who will demonstrate excellence in clinical care while enhancing our commitment to training a socially-conscious and diverse physician workforce. We remain dedicated to building a physician workforce that provides exceptional, inclusive, and culturally-competent care to all.

Of all the roles I have had during my career, one remains paramount to me—being a clinician providing direct patient care. This is one of the most sacred practices in society. Patients share details of their lives with their physicians in ways they share with no one else. Patients trust their physicians in ways they trust no one else. As an emergency physician, this relationship is heightened in many of my patient encounters because of the acuity and severity of illness during an emergency department visit. My clinical work reminds me of the heavy responsibility physicians bear. I am humbled daily that patients allow me to care for them, and I strive to provide each patient the best of me during each encounter with them. My hope is that every student who graduates from the University of Illinois College of Medicine departs here assuming the mantle of that sacred bond between patient and physician.

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