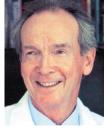


MESSAGE FROM THE PRESIDENT: EXPLAINING THE ROLE OF PHYSIATRIST - THE FOUNDATION CAN HELP!

By Kristjan T. Ragnarsson, MD Let's face it – most of the public does not know what a physiatrist is or what a physiatrist does. Until some 15 years ago, most US newspapers referred to us as "psychiatrists," an error that was only corrected when an



alert colleague of ours realized that this was due to a faulty spell-checker used nationwide. Fortunately, our colleague was able to have this corrected. Our legendary leader, Henry Betts, MD, once told me how he responds when asked what kind of doctor he is. He looks straight at the person and answers in his deep, strong voice: "I am a physiatrist" – only to observe panic or a blank stare on the faces of those who asked and may have felt that they should know what a physiatrist is. Being a kind man, Dr. Betts then explains that he is a physician for persons with disability, an explanation that I tend to use myself.

Continued on page 4

BOARD OF DIRECTORS WELCOMES NEW MEMBERS

In Atlanta, the Foundation for PM&R welcomed our first honorary Life Directors. **Mrs. Rosa Materson** was selected to honor her work with her husband, Dr. Richard Materson, in starting the ERF-PMR (predecessor to the Foundation), as well as her continuing efforts to support us with fundraising efforts and generous personal contributions. **Dr. John Melvin** was chosen for his many years of service on the Foundation Board and various committees, as well as his extraordinary financial commitment. **Mr. Jack Swafford** was honored for his extremely generous contributions in establishing the Gabriella Molnar-Swafford Pediatric PM&R Research Fund.



Left to right: Swafford, Ragnarsson, Melvin and Materson

As Dr. Barry Smith completes his term as a Director-at-Large, the Board welcomes two new members: **Drs. Steve Gnatz and Kevin Murphy.** Dr. Gnatz has assisted the Friends

of the Foundation with their fundraising efforts since 2011, and had previously served as the Treasurer when the Foundation was first incorporated (2002-05). He is currently Professor of Orthopaedic Surgery and Rehabilitation at Loyola University Medical School, as



Gnatz

well as Director of the Division of PM&R and Medical Director of PM&R at Loyola Medicine Health Systems in Chicago.

Dr. Murphy is Medical Director of Gillette Children's Hospital's Northern Minnesota Clinics and of Pediatric Rehabilitation for the Sanford Health System in Bismarck, North Dakota. He has been instrumental in starting the Gabriella Molnar-Swafford Pediatric PM&R Research Fund.



Murphy

A VERY SPECIAL RIDE

The Foundation gratefully acknowledges the extraordinary efforts of our Vice President, Dr. Randy Braddom (with the help of his lovely wife, Diana) in raising over \$2,500 for physiatric research. In celebration of his 70th birthday, Dr. Braddom rode 700 miles on his bicycle - the distance from Foundation offices in Rosemont, IL, to the AAPM&R Annual Assembly site in Atlanta, GA. However, it was a "virtual" ride in that he rode all 700 miles in his Florida neighborhood over the course of four months, and blogged his "virtual" trip at www. randybraddom.com. Contributions in honor of Dr. Braddom's 70th birthday and virtual ride are still being accepted; contact the Foundation office at 847-737-6062 or panderson@foundati onforpmr.org. If you are interested in following



in Dr. Braddom's footsteps (or bike path) and would like to raise money for the Foundation for PM&R, the Braddoms are willing to set up a website for you and get you started. Visit www. randybraddom.com for more information.

CONGRATULATIONS, NEW GRANT WINNERS!

At the recent Board of Directors meeting, Dr. Diana Cardenas (Chair of the Awards and Grants Review Committee) made recommendations on winners of the fall grant cycle which were approved. These grant awards will be presented at the AAP Annual Meeting in New Orleans in March, 2013.

Acorda Neurologic Rehabilitation Award

 Stacy McCarty, MD, Rehabilitation Institute of Chicago, "The Outcomes and Cost of Day Rehabilitation in Malignant Brain Tumor Patients"



Justus Lehmann Research Grant

 Robert Streb, PT, PhD, SUNY-Stony Brook, "Measurement of Medial Collapse During Bilateral and Unilateral Squat"

Össur Prosthetic/Orthotic Research Grant

• Neil Segal, MD, University of Iowa, "Discovering the Effect of a Realigning Brace on Tibiofemoral Contact Stress"



SPRING 2013 RESEARCH GRANT APPICATIONS AVAILABLE DECEMBER 15

Richard Materson ERF New Investigator Research Grants (3 grants) - Each Award provides a \$10,000 seed grant to a physiatrist 5 years or less out of an accredited PM&R residency program for an outstanding physiatric research project.

Mid-Career Investigator Research Grant – This is a \$30,000 award to an established investigator with a track record of success and is to be used as seed money for new research projects that extend the applicant's work in new directions.

Gabriella Molnar-Swafford Pediatric PM&R Research Grant - One \$10,000 award for pediatric PM&R research.

Scott Nadler PASSOR Musculoskeletal Research Grant - A \$30,000 grant to support research on physiatric rehabilitation of musculoskeletal conditions.

The application deadline for these grants is May 1, 2013. Complete information and the application forms can be found at www.foundationforpmr. org. Questions can be directed to panderson@ foundationforpmr.org, or 847-737-6062.

RECENT FOUNDATION EVENTS

The Foundation for PM&R had a substantial presence at the AAPM&R Annual Assembly in Atlanta this November.

Our **Donor Appreciation Reception** was not only graced by our new Life Directors, 2012 American Rehabilitation Champion and research grant award winners (who spoke briefly), but featured a lively **Proof of the Pudding Debate** session. **Dr. George Kevorkian** moderated, while **Drs. Susan Garstang and Benoy Benny** debated the topic "Should Performance of Interventional Spine Procedures Be Part of the Core Training for PM&R Residency Training Programs?"



Left to right: Kevorkian, Garstang and Benny

Over 185 runners and walkers registered for the Rehab 5k Run/Walk & Roll fundraising event on Saturday morning. Gathering at the Olympic Circles Fountain in Centennial Olympic Park, enjoyed participants а brisk morning. Dr. Daniel **Cushman** (right) came in first with a time of 17:56:94, followed closely by Drs. **William Arnold** (18:34:59)





and Zachary McCormick (18:42:63). Dr. Sandy Alexander was the first female finisher with a time of 18:49:39. Dr. Mark Harrast lead the 40-49 year old category at 20:24:16, while Dr. David Crandell took the 50-59 category with a time of 20:03:12. Foundation President Dr. Kristjan Ragnarsson (age 69) came in first in the over 60 group with a time of 29:27:46.

Later Saturday morning, the Foundation for PM&R Awards Presentation Ceremony took place during the AAPM&R Plenary Session. Mrs. Rosa Materson presented the three Richard Materson ERF New Investigator Awards, and Dr. Ragnarsson gave this year's Scott Nadler PASSOR Musculoskeletal Research Grant Award to Dr. Neil Segal.



Mrs. Materson presents the Richard Materson ERF New Investigator Awards to (left to right): Drs. Alfred Gellhorn, Jonathan Kirschner and Monica Rho.

After a stirring introduction by **Dr. Kevin Murphy, Mr. Jack Swafford** received a standing ovation while presenting the first **Gabriella Molnar-Swafford Pediatric PM&R Research Grant** to **Dr. Marcie Ward**.



Murphy, Swafford and Ward

Schuh and Braddom

Dr. Braddom was delighted to introduce **Ms. Natasha Schuh**, our **2012 American Rehabilitation Champion**, who was nominated by Dr. Mark Christopherson and her treatment team at Mayo Clinic.

REGISTER FOR THE UPCOMING REHAB 5K RUN/WALK & ROLL EVENT March 9, 2013, New Orleans (in conjunction with the AAP Annual Meeting)

Join us for a collegial fundraiser to benefit PM&R research! Our course will take us from the Riverfront Hilton Hotel, along the Mississippi River Delta past Jax Brewery up to the French Market, then back again (two loops total.)

Please sign up for the Rehab 5k when you register for the Association of Academic

Physiatrists Annual Meeting (www.physiatry. org), or visit the Foundation website at www. foundationforpmr.org to download a registration form. Registration will also be available onsite in the Foundation exhibit booth, and participants who preregistered can pick up their race packets there as well.

MESSAGE FROM THE PRESIDENT (continued from page 1)

Today, most physiatrists not only treat people with disability but also treat persons in pain, and many physiatrists focus their practice on certain disabilities and procedures, referring to themselves as physicians with special skills and training without first stating that they are physiatrists. So how can we - physiatrists explain to our patients and to others what we do and who we are? We have all read long, often boring and sometimes confusing descriptions of our clinical roles. We frequently use inconsistent terms - rehab docs, PM&R doctors, spinal cord medicine doctors, sports medicine doctors, spinal interventionalists, pediatric rehabilitation doctors, etc. - instead of stating plain and simple that we are physiatrists with expertise in musculoskeletal disorders, sports medicine, disorders affecting the spinal cord, brain, amputations, disabilities of childhood, electrodiagnosis and so on. It is regrettable, but probably less important than the fact that we cannot agree on how to pronounce our name! ("fizz-ē-a'-trist" vs. "fizz-ī'-a-trist".) To make matters even more complicated, we often refer to our field as physiatry, whereas the actual name is physical medicine and rehabilitation (PM&R). No one as of yet has been board certified in physiatry - we are certified in the specialty of PM&R. No wonder there is such a disarray amongst ourselves, and the public and colleagues in other fields are perplexed!

The Foundation for PM&R has done something to help clarify the situation. We published a single-sheet, tri-fold brochure which may be used to explain to the public – including our patients – what a physiatrist is, how physiatrists are educated and trained, who are members of the rehabilitation team, what rehabilitation involves and how long rehabilitation will take. On the back of the brochure is a description of the Foundation for PM&R and a donor form for those who are interested in supporting PM&R research. Physiatrists who have contributed to the Foundation can request 25 copies of the brochure at no charge, and additional copies at the actual cost of production. Our hope is that physiatrists will make these brochures available to their patients at their reception desks, waiting rooms and/or offices so patients may better understand what a physiatrist can do for them. Perhaps physiatrists could also suggest to grateful patients that a taxdeductible donation to the Foundation (which could be given in honor of the doctor) would advance PM&R research and education, and thus help patients with disability and those who are in pain.

In closing, I must once again express my disappointment that fewer than 20% of all physiatrists support the Foundation for PM&R with an annual contribution. I feel reasonably certain that most (if not all) physiatrists donate to some not-for-profit organizations each year. It seems natural and in our own best interest to also donate to our Foundation for PM&R. The amount given matters less than for the Foundation to be able to state with pride that the majority of practicing physiatrists support us each year. That would be a powerful statement to the public, other potential donors and our patients. Needless to say, all contributions are tax deductible and will be used to fund research and education, thus helping all physiatrists meet the challenges of healthcare reform, strengthen the scientific foundation of our specialty, and ultimately allow us to provide better care to our patients.

STILL TIME FOR A TAX-DEDUCTIBLE YEAREND GIFT

As you know, there is a dire need for outcomes and effectiveness evidence in physiatry. The research to provide this data is expensive, but without it we have little hope of convincing CMS and insurance companies of the value of our services and assuring continued access to those services for patients who need us. Funding physiatric research is the heart of the Foundation for PM&R's mission, so we are thrilled to announce that this year we are offering \$120,000 in research support across 7 different grant categories. This includes four new research grants being introduced in 2012/13, in the spring and new fall grant cycles. Nearly all of the support for these grants is derived from individual contributions to the Foundation for PM&R.

The quality of applications for our Research Awards and Grants Program continues to improve, and the numbers grow. We received 25 applications in the spring grants cycle and 18 in the fall – a significant increase over the number of applications received in prior years. However, even with more than double the number of grants being awarded, we are only able to award grants to a small percentage of the outstanding proposals that the Awards and Grants Review Committee believe merit support.

The Foundation for PM&R has put our demonstrated our commitment to support the research that will provide this data, but there is still more to be done – and we can't stretch our resources any further without your help.

If you have already contributed you will receive an e-mail in the next few weeks. We hope you will reach a little deeper this year to give one more gift to the Foundation for PM&R before year-end so we can continue our critical work. If you have not donated, please consider the impact every dollar has on the future of the field. Your support is needed now more than ever.

Yes, I would like to support the Foundation for Physical Medicine and Rehabilitation!

GIVING LEVELS: Leaders (\$5000 or more); Visionaries (\$2,500-\$4999); Patrons (\$1,000-\$2,499); Supporters (\$100-\$999); Donors (\$99 or less) - *All donors will be recognized in the Foundation Annual Report, on the Foundation Web site, and at the Academy of PM&R Annual Assembly. Donations are recognized on a calendar year basis.*

General Operating Fund:	□ \$100	□ \$250	□ \$500	□ \$1,000	□ \$2,500	□ Other \$
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Dr. Braddom's Ride:	□ \$70	□ \$700	Other	\$		

□ Please send me 25 copies of the patient education brochure, "Your Physiatrist"

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