For more than a quarter-century, a cooperative relationship in medical education has brought UVM medical students to Maine Medical Center.

## IVI alle Ingredient



EDWARD NEUERT

photographs by BRIDGET BESAW GORMAN



(Clockwise from far left) UVM medical students in a discussion group with Virginia Eddy, M.D.; Dr. Eddy and Renee Rickard '07 in surgery; Greg Connolly '07 and Allison Collen '07 at the Portland waterfront; Ben Huerth '07 on a "rural rotation" at Stephens Memorial Hospital in Norway, Maine.

FOR ANY COMMITTED MEDICAL STUDENT, the boundary between home and school can be a bit blurry at times. For Renee Rickard '07 and other third- and fourth-year students receiving part of their clinical education at Portland's Maine Medical Center (MMC), there's almost no boundary—and as far as the students are concerned, that's a very good thing. Every morning, Rickard can get out of bed in the house she shares with several other students in the west side of Portland, fix a quick breakfast, and walk out her front door, which lies almost in the shadow of MMC's imposing Victorian Gothic tower. Rickard and her classmates are part of a three-decade tradition that has seen more than a thousand College of Medicine students receive part of their clinical education 200 miles and two states away from the Burlington campus.

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Third-year student
Renee Rickard in the
midst of a busy day
during a surgery
rotation at Maine
Medical Center.

"This is a relationship in which both parties give something and get something," notes Robert Bing-You, M.D., MMC's associate vice-president for medical education and an assistant professor of medicine at UVM. "MMC provides excellent clinical training for the students, and they in turn add great value to our campus; they help create an even more stimulating environment for our doctors and residents."

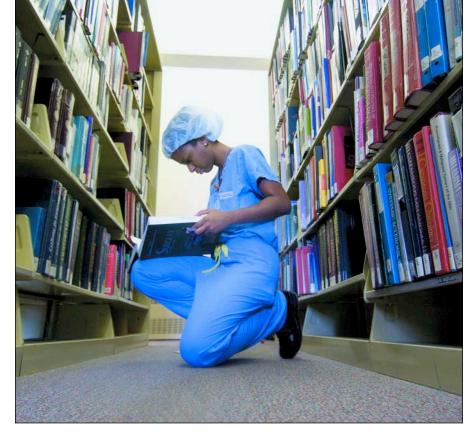
Two programs are the main components of this relationship, says Lewis First, M.D., chair of pediatrics and senior associate dean for medical education at the College. One is the third-year Clinical Clerkship, which all medical students participate in. Students can sign up to perform four-month long blocks of their clerkship in Maine, and are assigned slots in the program by lottery. As a part of their clerkship education, students may be placed by the Maine Practice Network in clinical settings far beyond Portland, First explains. A smaller number of fourth-year students from the College also choose to do acting internships at MMC. "Interaction between Maine faculty and UVM fac-



ulty and administration is constant," says First. "Maine faculty were active participants in the design of the Vermont Integrated Curriculum; and clerkship directors from both MMC and the College meet twice a year as a group, at MMC in the fall, and at UVM in the spring."

For MMC, the educational relationship with the College of Medicine is vital. "With education one of our three mission cornerstones, the connection MMC enjoys with UVM is critically important," says MMC President and Chief Executive Officer Vincent S. Conti. "Students who interact with our residents and faculty bring with them the latest the academic world has to offer, complementing the knowledge, expertise, and guidance our house and medical staff provide. In turn, the richness of the MMC clinical and academic environment is equally important to the preparation of exceptional medical students."

MMC traces its beginnings to the 1870s, when there were only two other hospitals in the state. Its classic Victorian main wing opened on Portland's Bramhall Street in 1874. The Maine Eye and Ear



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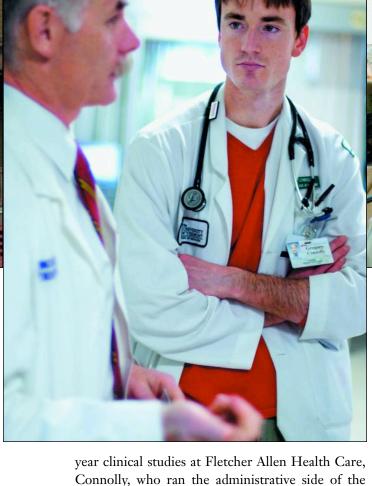
Infirmary and Portland's Children's Hospital opened their doors in 1890 and 1908, respectively. The three institutions merged in 1951 to form Maine Medical Center. Today, MMC, including its Barbara Bush Children's Hospital, has 606 licensed beds and is the premier tertiary care center for its area of New England.

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ON AN AFTERNOON IN MARCH, just after returning to Burlington from nearly a year in Portland, third-year medical student Greg Connolly reminisces fondly about his clinical clerkship at MMC. "I signed up for one four-month block of clerkship in Maine, and the lottery gave me two blocks," he says. "I was glad to be able to be there for that amount of time. You get a great feeling from staff at every level at MMC. Every single doctor I interacted with in my time there seemed excited to teach. Portland is very similar to Burlington. It's a very nice place to live and raise a family. So, like Burlington, it seems to attract physicians who could just as easily be at institutions in bigger cities, but who chose to work and teach here." At MMC, Connolly's clinical studies included clerkship rotations in general internal medicine, surgery, obstetrics and gynecology, pediatrics, family medicine, neurology, and psychiatry.

Throughout his time at MMC, Connolly lived in one of the houses provided by the program for UVM students, located just across the street from MMC on Portland's Western Promenade, a bluff overlooking a picturesque view of the highlands of western Maine. The "Western Prom," as it's known locally, was one of the city's most exclusive neighborhoods in the late 19th Century, and the area is still filled with beautiful, stately homes, four of which now house College of Medicine students.

"I didn't miss my classmates while I was in Maine because, basically, I was never apart from them," says Connolly. "Since we live together here, I actually felt like I was seeing more of my classmates in Portland than I had in Burlington. That was a nice, unforeseen benefit." Now embarking on his fourth



year clinical studies at Fletcher Allen Health Care, Connolly, who ran the administrative side of the Himalayan Cataract Project before medical school, hopes to one day practice ophthalmology.

Renee Rickard has, like Connolly, had an extended stay in Portland. The third-year student, originally from Milford, Conn., began her clinical clerkship at MMC, and so enjoyed her experiences at the medical center and that she managed to finish her clerkship there. She plans to spend much of her fourth year on rotation in Portland.

One reason Rickard cites for her good experience at MMC is Clinical Professor of Surgery Virginia Eddy, M.D. Eddy has been practicing and teaching at the hospital for five years, but spent more than two decades before that at the University of South Carolina, and at Vanderbilt University, where she ran the surgery clinical clerkship for many years. "For me, as for so many other doctors here, the connection with UVM medical students is very important," Eddy says. "Every day I see students play important roles here. They present cases and they bring some-



thing more to them, different ways of looking at them, that makes the experience a rich one. When we're seeing patients in the Emergency Department, we structure it so the students follow patients through the

whole process—resuscitation of critical cases, scrubbing-in to the operating room. We're not making cars here, we're making physicians, so we want them to see everything in the process."

Assistant Professor of Pediatrics Lorraine McElwain, M.D., is another MMC doctor with a deep interest in medical education, and a connection to the program that stretches back to her own days as a medical student. A graduate of the College of Medicine Class of 1989, McElwain came to Maine for five months in her third year of medical school for separate OB/GYN and medicine rotations. "I loved it here," she says. "And I had no idea what to expect. I'd grown up near Newport, Vt., and had never been to Portland. But the program's comfortable housing made it very easy to make the transition. I was interested in pediatrics, and I'd heard raves about the department here."

McElwain came back to do a pediatric acting internship in her fourth year of school, then did her residency at MMC. She is now assistant professor of pediatrics at the College and is director of inpatient

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pediatrics and clerkship director at MMC. She interacts daily with medical students as they cycle through their rotations. "I usually have three new students each month in inpatient pediatrics, and usually two fourth-years doing acting internships. I love the connection with students—you're constantly learning along with them!"

THE UVM-MMC CONNECTION came about in the late 1970s as a result of a unique personal connection between the two institutions. "Maine's last medical school, at Bowdoin College, had closed in the 1920s," says David Tormey, M.D., former associate dean at the College of Medicine. Edward Andrews, M.D., the College's dean in the late 1960s, who, during his tenure, had spearheaded the curriculum reform that vastly increased the amount of clinical education medical students received, became UVM's president in 1970, and then president and chief executive officer of MMC in 1975. "It was Ed Andrews who saw that both institutions could cooperate and benefit from working together," says Tormey. "We'd get increased clinical education opportunities for our students, and Maine would get a cadre of top-quality students."

Now retired in Yarmouth, Maine, Andrews agrees with Tormey. "Students just have a way of stimulating the place," he says. "I was in a position to know everybody, and they all seemed willing to explore the idea. All our chairs at MMC realized the value of having those students here, and they really got behind the idea. Around 1979 it was formal-

Ben Huerth '07 examines a patient at Stephens Memorial Hospital in Norway, Maine. ized." By 1980, the program was in full swing.

The value of the program continues to be recognized today. "There's no question that medical education is

essential to the vibrant life of a medical center," says George Higgins, M.D., chief medical officer and vice president for medical affairs at MMC and associate dean for Maine affairs at the College. "I recently heard one of our OB residents speak about how important it was for her to know she would be working with students. It was a very positive factor in her deciding to do her residency here. Our commitment is to always explore ways to make this relationship even better, to meet the medical needs of both our states. I'm impressed that the College of Medicine is clearly committed to that, too."

IN THE MIDST OF HIS clinical clerkship, thirdyear med student Ben Huerth took part in a threeweek session through the Maine Practice Network. The network provides clinical education and training to students and residents at nearly two dozen sites across the state. Huerth worked with doctors at Stephens Memorial Hospital in Norway, a town with a population of about 4,600 located about 50 miles northwest of Portland.

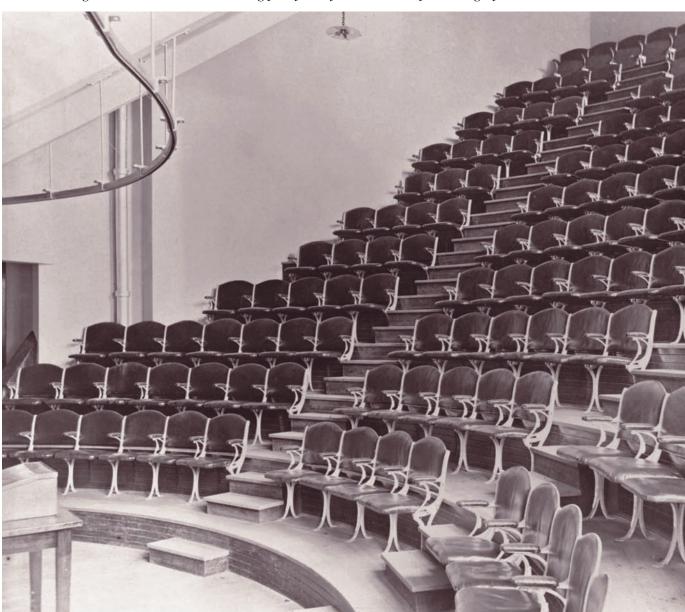
"At Stephens, I'd link up with my "hospitalist-of-the-day" and follow that person," say Huerth. "I received great hands-on training. And being here in Norway for a chunk of time gave me a good feeling for the community, and an opportunity to absorb the social part of being a doctor."

Huerth, a Native American, looks forward to that community connection in his future practice. Married and the father of two children, he hopes to ultimately practice at Maine's Penobscot Indian Island Reservation, where his wife grew up. In doing so, he'll become one of the hundreds of new physicians over the years who have had their practice influenced by their time on the College's "other campus."

"I must admit, I'm awfully proud of it," says Edward Andrews, as he thinks of that long line of past students. "This program is one of those things that has paid off for both institutions. It's been good for the students, good for the faculty and, most importantly, it's been good for the patients."

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In 1905, when the College of Medicine completed its third home at the corner of Prospect and Pearl streets in Burlington, the main lecture room, where students spent so much of their time, was named Hall A. The Hall A magazine section seeks to be a meeting place for all former students of the College of Medicine.



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