



The JOURNAL of Phi Rho Sigma

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57th Grand Chapter Convention Highlights

Phi Rho Sigma celebrated its 125th anniversary at the Grand Chapter meeting held in Tampa June 12th and 13th. President Elisabeth Righter, M.D. reported that our society is continuing to meet the needs of today's medical students and that this past academic year we initiated more new members than in the past ten years.

Highlights of the meeting included:

The Irving S. Cutter Medal for outstanding contribution to medicine was presented to Dr. Stanley M. Goldberg of Minneapolis, MN, an initiate of Theta-Tau chapter at the University of Minnesota. Known throughout the world for his work in Colon and Rectal Surgery, he is currently a Clinical Professor of Surgery at the University of Minnesota Medical School.



Dr. Stanley M. Goldberg receiving the medal from Dr. Elisabeth Righter

James L. Jackson, M.D. was awarded the Jesse Ansley Griffin Medal for his outstanding contribution to Phi Rho Sigma. An initiate of Alpha Chapter at Northwestern University, Dr. Jackson has been involved with our society since attending his first Grand Chapter meeting as a medical student. He has served in many positions and was elected National President in 2007. Dr. Jackson is an ophthalmologist and lives in Midland, MI.



Dr. Elisabeth Righter presenting Research award to Kale Bongers

The Paul L. McLain Research award recognizes research done by a member during his/her medical education. This year the award went to Kale Bongers of Mu chapter at the University of Iowa. He is currently a MD/PhD student and will graduate in 2016 with his graduate studies in Molecular Physiology and Biophysics.

Educational programs included presentations by alumni members covering topics such as Hospital Experiences in China by Dr. Joseph Wheeler, From Medical School to Residency by Dr. Christy Benson, New Physician Pearls by Dr. Sheryl Mascarenhas and Medical Innovations : From Concept to Bedside by Dr. Michael Jung.

The following National Officers were elected for 2015-2017:

President - Dr. Elisabeth Righter, Alpha Upsilon
Vice- Presidents - Dr. Gary LeRoy, Alpha Upsilon and Dr. Julie Best, Pi
Secretary/Treasurer - Dr. Gabriel Cuka, Iota
Historian - Dr. Casey Drake, Iota
Editor - Dr. Sheryl Mascarenhas, Alpha Upsilon

Undergraduate Delegates - Neil Knight - Alpha Upsilon, Anna Wethington - Eta, Michelle Polich - Iota, and Crystal Donelan - Theta-Tau.

Undergraduate Alternate Delegates - Suvai Gunasekaran - Alpha, Nicole Hogan - Alpha Upsilon, Hsin (Cindy) Lee-Zeta, Sarah Stucker - Mu and Zhaohui Hu - Mu.



Executive Council 2015-2017

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Reflections from Project CURA

Project CURA is a student run program at Creighton University School of Medicine which sends students abroad to experience various cultures, understand global health disparities, and inspire personal growth through service. Through partial grants from the Phi Rho Sigma Foundation, sixteen members from Eta Chapter were able to participate in this program. Our students traveled to Romania, India, Guatemala, Cambodia, and Thailand.

Lauren Sevcik was one of the three students who went to Romania. The following is a summary of her trip:



Lauren Sevcik volunteering for the Special Olympics

"We traveled across the entire country, starting with Targu Mures, where we volunteered for the Special Olympics. We worked with orthopedic surgeons and physical therapists on screening the athletes before the games began. Then we helped pass out medals at the awards ceremony, which was one of the most heartwarming and meaningful experiences I have ever had. Our group then worked with

Alpha Transylvania, which is an organization that caters to the needs of those with mental disabilities of all ages. The most influential part of the trip to me took place in a town called Sighisoara. Here we worked with an organization called Veritas, where we educated and played with young children and adolescents. We taught them about exercise, healthy foods, hygiene, healthy relationships, sexual health, smoking, drugs, alcohol, and much more. We also set up elderly clinics in Sighisoara, where we had three stations (triage, consultation, and pharmacy) and saw elderly patients. Many of them had problems with hypertension, pain, and headaches, and we did our best to consult them and provide them with proper medications. We also set up clinics in Roma villages. One day, as a group of only six, we saw over one hundred patients in less than six hours! It was beyond rewarding and I learned so much in those six hours. Another week of the trip was spent with ten orphans who lived at a home called Deb's House. During this week we also educated them about the same things stated before. While this week was less clinically based, we formed strong relationships with the kids, which I learned is as important as treating people for diseases. We spent our last few days working with Down Association Oradea, where we spent time with a group of mentally disabled adults. This trip brought me new relationships and taught me how to respect patients and those who live in a different culture. I will never forget this trip and its contributions that will make me a better doctor."

Mollie Walton was one of the four Phi Rho who traveled to India this past summer. Here is her report of her trip:

"Through the Project CURA organization (a student-run, student-led organization within CUSOM), I traveled to India with six of my classmates immediately following our final exam of M1 year. Our first stop in India was Pune, Maharashtra, India where we conducted pediatric examinations for the children of migrant workers with the Tara Mobile Creches Pune organization. With the assistance of Dr. Jayashree Paknikar, a Creighton-affiliated Family Medicine practitioner; we saw over 600 children during

the week. Working through several language and cultural barriers, we diagnosed, treated, and referred various respiratory, skin, ear infections, nutrient deficiencies, heart murmurs, asthma, seizure disorders, goiters, hydrocephalus, precocious puberty, and rubella. It is said that one must listen to 100 hearts in order to catch a murmur, and within the first few days, we had certainly achieved this charge! The clinical experience I gained during this week was invaluable, and these lessons learned have certainly influenced the sort of physician that I will become.

Next, we spent a few days in Mumbai visiting an Indian medical school and public hospital, where we were able to witness and contrast vast differences between Indian and American health-care.

For the next 10 days, we traveled to the rural Northeast region of India where we worked in the Holy Cross Hospital in Tura, Meghalaya, India. This hospital is run by Sisters of the Holy Cross congregation, and is known throughout the region as supreme for its medical services and the care with which the Doctor-Sisters provide them. While their focus is OB/GYN services, patients come from all over the state for various ailments.

We saw numerous vaginal births, C-sections, and a non-laparoscopic hysterectomy, and assisted by taking vitals and administering IV medications. This hospital is remarkable in that while the only imaging available is plain film x-rays and ultrasound, we spent hours watching the Sisters diagnose gallstones, kidney stones, and stage IV cervical cancer. I certainly gained an appreciation for the precision and accessibility of resources in the United States compared to those in this rural Indian community. One thing that struck me was the understanding and appreciation for the plight of their community members, and using this wisdom in caring for their patients. For example, the Sisters were very realistic in their decision-making for tests to order, as well as treatment plans.



Allison Lai with students in India

During our last week of this service trip, we spent the week in Phesama, Nagaland assisting in numerous Jesuit ministries including an orphanage, schools and community centers, the focus of which was to further our understanding of these rural, almost hidden, rural cultures. We used our medical education to teach sexual health education to groups of middle school children, which I felt was so important because it is such an unspoken, and so misunderstood and confusing, topic there. I felt that it was truly empowering for both us and our students.

While these were the integral activities of our trip to India, we had countless other amazing experiences that resulted simply from being immersed in the communities, which have provided me with different insights. My biggest learning from my time in India was the acknowledgement of the importance of, at times, simply being, rather than doing. That is to say being truly present with patients. Thank you again for affording me the opportunity to partake in this trip. It was an amazing, formative experience that will profoundly influence my practice of the art of medicine."

Southeast Asia was the destination for other members of Phi Rho Sigma. Margaret Tierney sent in this report based on her experience:

“My project started in Cambodia, where my classmates and I worked with the organization Solaid International. Solaid is a non-profit NGO that focuses on health and education in rural Cambodia. We spent two weeks with Solaid, working on a variety of projects. One of our primary activities was height, weight, and vision screenings at local schools. Solaid tracks the height and



Margaret Tierney assisting in a vision screening in Cambodia

weight of local children on an annual in order to identify children who are outside the normal range. Solaid then reaches out to the families of those children and provides them with nutrition education and supplementation. We screened 200-300 children per day and provided glasses to anyone those who needed them. Another main project we worked on was setting up community health clinics. We ran several clinics per week, where we performed basic physical exams and saw patients with a physician. We treated patients when we could, and helped patients with more serious conditions get to local health-care facilities. In our spare time between these projects, we taught language and computer classes at local schools run by Solaid.

After our time with Solaid, we traveled to Thailand to spend the next two weeks of our project working with the organization Where There Is No Doctor. This organization provides medical care to rural hill tribe communities in northern Thailand, where there is a severe lack of healthcare available. We set up daily clinics where villagers could come to receive care.



Clinic in Northern Thailand

We spent two days in each village we visited before moving to a new location, and saw between 30-40 patients per day. We also offered vision screenings to all patients and, again, provided glasses to those who needed them.

After the two weeks in Thailand, the project came to a close. It was an amazing experience, and I was sad when it came to an end. I learned a great deal about practicing medicine in developing areas and about the differences in medical and public health needs in these areas compared to the U.S. I also developed my interviewing skills, communication skills, and medical knowledge. It was exciting to finally put some of my medical knowledge and skills to use in a real-world setting, and doing so reignited my passion for this profession. Beyond the medically-related knowledge I gained on this trip, I also had the opportunity to learn about the local cultures. It was fascinating and eye-opening to experience such a different way of life, and I hope this experience will make me a more culturally-aware physician in the future. I never thought I could learn so much in four weeks, and I am extremely grateful to have had this opportunity. Thank you again for helping make this experience possible.”

Seven members of the society spent their time in Guatemala. Karen Lehan sent in this report on her experiences:

“When we arrived in Guatemala, we first visited Huehuetenango, where we were able to adjust to high elevations and the sights and sounds of Guatemala. From there, my group traveled to a small village outside San Juan Ixcay known as Río Quisil. The village itself had only about 250 families, and we stayed with one of them in their home. While there, we distributed glasses we had received from the Lions Club and First Sight. We fitted over 50 children and 100 adults for prescription



Fluoride clinic with the second grade class in Río Quisil

glasses and saw patients in their women’s clinic, distributing prenatal vitamins and other over-the-counters to people who needed them. Additionally, we made health and wellness presentations at the school there and handed out hygiene products such as tooth brushes, tooth paste, dental floss, and soap. It was a wonderful experience serving the community there while living with a family, being truly immersed in the local culture and experiencing local customs. Next we traveled to Santa Eulalia, which was even higher in the mountains, where we learned about the public health of Guatemala as well as the culture and political struggle of the Mayan people who make up about 65% of the population there. After our time in the Northwest mountainous areas of Guatemala, we headed toward the eastern, Caribbean edge of the country. We stayed in a parish in Semaje and met up with American doctors and nurses to put on a clinic for the people of the area. As medical students, we saw patients, took their history and did a physical exam, then consulted with the physicians to make a diagnosis and write a prescription, if need be. Our group of about 20 people saw almost 900 patients in four days. The experience was incredibly rewarding, and I hope that I can carry it with me as I continue my journey to become a practicing physician.”

All of the students who went on the service trips wrote about how their experiences would affect both their personal and professional life in the future. Aaron Fried summed up the feeling of all the students in his report:

“This trip was an eye-opening experience. It is one thing to learn about health disparities globally, to know facts and figures, and it is another to experience it firsthand. Not only were we serving these communities, but we were living among them and experiencing a taste of the challenging conditions and barriers to a healthy lifestyle. I gained a deep appreciation for the disparity in health resources, healthcare access, lifestyle, and living conditions that profoundly impacts the health of a community. Despite the challenge these people face in life each day, they demonstrated a remarkable sense of optimism, peace, acceptance, compassion, and generosity with the little that they had. Although I learned a lot about medicine and health during these various activities, the most impactful experience was from listening and observation. This experience changed my view of the human experience and that will stay with me forever. I know that this trip will influence my development as a compassionate and mindful physician as I move forward with my career. Again, I say thank you as none of this would have been possible without your generous support.”

James L. Jackson Griffin Medalist Address



James L. Jackson with the Griffin Medal presented by Dr. Elisabeth Righter

organization at the Grand Chapter level, people who are my long-term friends, many of whom are in this room.

Phi Rho Sigma is fundamentally all about medical students. There used to be a great many medical fraternities, and their heyday was the first two thirds of the twentieth century. Now, there are very few — only 3 national medical fraternities, including Phi Rho. I believe that Phi Rho Sigma is still around because we have remained focused on the needs of students. Those needs have evolved over time, and it has been interesting to see how the experience of being a medical student has changed over my tenure in the organization. We may know more about medical students from this vantage point than the medical education people do.

Phi Rho Sigma was 91 years old when I joined as an M1 in 1981. Now, we're celebrating 125 years. I've been a member of Phi Rho for over a quarter of its existence.

Phi Rho Sigma was very popular at Northwestern when I joined. Perhaps that was because the alumni had sold the chapter house back in 1949 and invested the proceeds. (The house was adjacent to the present John Hancock Building, on very valuable property.) The alumni used the funds to subsidize activities for Alpha Chapter members, so we could do lots of things we couldn't otherwise afford living in downtown Chicago. In fact, Phi Rho was so popular that the chapter chose its members by lottery. (Apparently, they had decided that this was more fair than actually voting on new members.) So ultimately I am here today because someone at Alpha Chapter pulled my name out of a hat in 1981. I'm very glad they did.

Being a member of Alpha Chapter for four years was great, and our frequent chapter activities helped us get through the stress of medical school. It also provided interaction with members of other classes at Northwestern, which didn't typically happen otherwise. However — and this will seem very odd to current medical students — the idea of community service never crossed our minds. The Grand Chapter spoke of fellowship, professionalism and service. We weren't sure what to make of the third one, and we certainly didn't have time for it, whatever it was.

After I had served as chapter president, we needed to send some delegates to the 1984 Biennial Convention of the Grand Chapter in Galveston, Texas. Now, it didn't hurt that it was going to be held at a beach hotel on the Gulf of Mexico in the fall, when Chicago would be getting colder, so I volunteered to go. I had much the same experience as a lot of you are having this weekend,

Phi Rho Sigma has been an important part of my life for 35 years, and receiving the Jesse Ansley Griffin Medal is one of the greatest honors of that life. Lately I've been reflecting on my experiences in Phi Rho, and I thought I'd share some with you. Anyone who knows me well realizes that I am drawn to history, and our place within it, so I'll weave some of that in, too. However, history is made by people, and it has been my great pleasure to know the wonderful group of people who have chosen to serve this

and I thought it was great. I remember at some point riding in a car with Rick Labasky, of Alpha Nu Chapter at the University of Texas Medical Branch in Galveston, and Carol Drake, of Iota Chapter at the University of Nebraska in Omaha, who were in residency training at the time, and they did some evangelizing to me about the Grand Chapter. (Rick was later Grand Chapter President, and Carol has been Counselor of Iota Chapter for . . . a few years. Both have preceded me as Griffin Medalists.) We all spent plenty of time on the beach and ate lots of crawfish. I recall all the delegates going out to a Texas dance hall one evening and doing Texas line dancing with the locals. Alpha Nu Chapter performed the initiation ritual during the convention, inviting those of us who had not been formally initiated at our own chapters to undergo the ritual along with their new members. Now I really felt like a Phi Rho.

Anyway, I got elected as an Undergraduate Member of the Executive Council, which meant that I was expected to return for an interim meeting in a year, as well as the next Biennial Convention. (Back then, the Grand Chapter met every year.) As I later learned, many of the Undergraduate Members and Alternates did not actually find the time during their internships and residencies to attend subsequent Grand Chapter meetings. However, in 1985, during my internship, I CAME BACK.

When my term on the Executive Council ended in 1986, Grand Chapter President Don Morehead, of Alpha Chapter, took me aside and asked if I would serve as a Grand Chapter committee chair, which is our mechanism for keeping young physicians involved. Two years later, the Grand Chapter met in Halifax, Nova Scotia, where we had a chapter at Dalhousie Medical School, our last remaining Canadian chapter at the time. We were all impressed with the Alpha Eta Chapter house, which had a bar in the living room with beer on-tap. (This was Canada, after all.) That was a fun convention. The Premier of Nova Scotia opened the meeting, accompanied by a bagpiper. (We all need a personal bagpiper!) And I would strongly suggest that we feature all-you-can-eat lobster dinners at all of our conventions.

In those days, Phi Rho Sigma was run by a bunch of old guys. (I see the students thinking, "this hasn't changed.") But the Greek organizations had been through a rough time due to the societal changes of the 1960s and 70s. Phi Rho nearly went out of existence, and most of the other medical fraternities actually did. The number of our chapters had dropped precipitously from a high of thirty-some in the 1950s, and we didn't have a lot of students, let alone students interested in serving at the Grand Chapter level. So, Phi Rho Sigma really was run by the "old guard" in the 1970s and 80s, and even into the mid-1990s. But interest had

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✓ US OUT!

**New Website at
www.phirhosigma.org**

picked-up a little before my time, and by then we had a strong core of young physicians interested in serving the Grand Chapter.

We gradually discovered that many of the leaders of medicine happened to be Phi Rhos, and over the years we got to meet many of them at Grand Chapter meetings. Some also served in the leadership of Phi Rho Sigma. We heard stories from Tom Petty, of Psi Chapter at the University of Colorado, one of the all-time greats of pulmonology, who had first described Adult Respiratory Distress Syndrome and invented PEEP ventilation. He liked to tell of being briefly fired from his internship for drawing an arterial blood sample from a patient and analyzing the blood gas content, at a time when that was an obscure research technique not to be used on actual patients. We got to know Steve Beering of Chi Chapter at the University of Pittsburgh, who was Dean of the Indiana University Medical School, then President of Purdue University, and later the Chair of the National Science Board which runs the National Science Foundation, and which made him the scientific advisor to the President. Both were Grand Chapter Presidents before I was a member.

In my early years, Phi Rho Sigma was run by C.H. William Ruhe, of Chi Chapter; and Don Morehead of Alpha Chapter, with the assistance of a younger Secretary-Treasurer named Marty Wice, of Alpha Chapter, who succeeded Don Morehead in that position. Bill Ruhe was a vice-president of the American Medical Association, which back then was a monolithic and powerful organization speaking authoritatively for all of medicine. He developed the system of Continuing Medical Education that we have now. Bill had been a Phi Rho since seemingly before its founding, although he was actually initiated in 1936.

I remember Bill Ruhe's Griffin Medalist address at that first Biennial Convention I attended in 1984 in Galveston. He reviewed the history of Phi Rho Sigma and its shrinking size, and it sounded as though he and the other senior leaders were at least considering whether it was time to shut down Phi Rho. I recall subsequently hearing from Don Morehead, who was elected Grand Chapter President at that meeting, that there had been some discussion of having a big celebration, maybe at the 1990 Centennial, then closing Phi Rho Sigma.

I realize now that our leaders were thinking analytically, and responsibly considering all the possibilities. If Phi Rho had kept shrinking at the same rate it did in the 60s and 70s, we would shortly have had no more chapters. We were very fortunate to have Bill Ruhe and Don Morehead guiding Phi Rho Sigma during this period. However, I think my peers and I were alarmed to hear our leaders speak of ending Phi Rho. (In retrospect, they were probably just challenging us to lead the organization into the future, if we were willing.) In 1994, a young Rick Labasky became Grand Chapter President, and from then on the "youth movement" was in charge. We haven't looked back.

I personally got fired up about Phi Rho Sigma and worked with the Alpha Chapter to re-found two chapters in Chicago, Beta at the University of Illinois and Gamma at Rush Medical College. Unfortunately, those chapters are no longer with us. (I recall Bill Ruhe humorously referring to me as "Jesse Ansley Jackson," a compliment I certainly did not deserve.) I can tell you from experience that it is not hard to start a chapter, but it takes a lot of effort and attention to keep a new one going.

Phi Rho did hold a big Centennial celebration in 1990 in Chicago, having been founded at Northwestern in 1890. Whew, we made it that far, at least! (As a historical side light, the first medical fraternity to be founded was Alpha Omega Delta in 1879. Its last

remaining chapter, at the University of Buffalo, amalgamated with Phi Rho Sigma in 1911. So we could have celebrated our centennial in 1979, and we can make a case for being the oldest medical fraternity.)

Since I am delivering the Jesse Ansley Griffin Medal address, I should also mention Phi Rho Sigma's amalgamation with another medical fraternity. Griffin founded Chi Zeta Chi in 1903, with chapters mostly in the south. However, Chi Zeta Chi faded, and its remaining 12 chapters amalgamated with Phi Rho Sigma in 1929. It was said that Jesse Ansley Griffin could walk down a hallway speaking with a medical student and have him pledged to form a new Chi Zeta Chi chapter by the end of their walk.

In 1990, I was persuaded to become Editor of The Journal of Phi Rho Sigma, succeeding Bill Ruhe who had served the preceding fifteen years. I converted The Journal to a desktop publication, and eventually published a digital version on our new website. (Bill and his wife had been preparing each issue by pasteup, so we went from paper and glue to the world wide web in less than a decade.) I served ten years as Editor, ending with the Centennial Issue of The Journal in 2000.

Over the years, I have had the privilege of visiting every chapter, often for assigned chapter visits. Don Morehead asked me to visit Alpha Nu in Galveston in the late 1980s. Coincidentally, they were having a big spaghetti dinner fundraiser, and they taught me how to make marinara sauce. To this day, I serve my family homemade Alpha Nu Chapter pasta sauce. I attended football games with students at Mu in Iowa City and Zeta in Ann Arbor. I even got to join Iota Chapter on a riverboat cruise in Omaha.

In 2007, I was elected to the first of two terms as Grand Chapter President. Worthe Holt, of Pi Chapter at Indiana University, during his presidential term had come up with the idea of having Grand Chapter conventions in more entertaining locations than used to be the case. I liked his idea, so during my presidency we went to Cave Creek, Arizona and Orlando. I'm glad to see that you have continued that trend. One of the rewarding things the President gets to do is present the medals at the convention. Those are enjoyable phone calls to make.

One of the best parts of Phi Rho Sigma has been the friendships I have made with people I see again and again when we come together for these meetings. I have enjoyed getting to know people like Gary LeRoy, Gabe Cuka, Julie Best, Sheryl Mascarenhas, Casey Drake, Christy Benson, and Wade Swenson. I have learned a lot from my elders in Phi Rho, including: Bill Ruhe, Don Morehead, Alan Adler, and Dave Schmidt. And I treasure the friendships of those who came up in Phi Rho with me, some of whom we no longer see regularly: Worthe Holt, John Ayres, Lisa Righter, Carol Drake, Marty Wice, and Rick Labasky. Thanks for being my friends.

But Phi Rho is all about the medical students, and that's what keeps us coming back. It has been interesting to me to see the evolution of what medical students want and get from membership in Phi Rho Sigma. For a long time, while we spoke at the Grand Chapter about service as one of our areas of emphasis, not a lot of service actually happened at the local chapter level. Chapters mostly focused on fellowship. For awhile, we tried having a national service project, and some of the chapters organized blood drives. However, at some point not too long ago, the interests of medical students seemed to change. We started to hear about service projects they were doing spontaneously at the chapter level,

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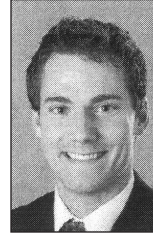
and in recent years the service that chapters and their members are doing has become increasingly ambitious and impressive.

It does appear that Phi Rho Sigma still meets the needs of medical students in 2015. We have changed over time to adapt to those changing needs, and we should continue to do so. I see that our national membership numbers have increased in recent years, so perhaps we are actually becoming more relevant. I am impressed by our roster of excellent young officers . . . our future leaders — if we were a sports team, they would say that we have a lot of depth on our bench. This bodes well for the future. As long as we are meeting the needs of medical students, Phi Rho Sigma will have a continuing reason to exist.

Given the advances in health care and longevity, perhaps some of the students attending this meeting will see our bicentennial. If Bill Ruhe were looking down on us now, I think he would proud of where we are and optimistic about our future. I know I am.

2015 AAFP Excellence Award

Family practice resident Dr. Matt Downen is the recipient of the 2015 American Academy of Family Physicians' Excellence in Graduate Medical Education award. He officially received his award in September in Denver at the AAFP Family Medicine Experience conference.



Dr. Downen is in his third year of *Dr. Matt Downen* residency at Wesley Medical Center in Wichita, KS. He is a graduate of the University of Iowa Medical School where he was a member of Mu Chapter. Matt has continued to be active in Phi Rho Sigma's national organization where he served as an undergraduate delegate to the Executive Council and as a national committee chairman.

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