

# The “Year 2000 ‘Bug’”

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*A Newsletter from the  
 Department of Family Medicine*



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The “Year 2000” (Y2K) problem refers to the inability of some computers to process date information later than Dec. 31, 1999. Date codes in some programs are abbreviated to allow only two digits for the year, e.g. “98.” Unless the programs are converted to handle the century date change, the year “00” (2000) may be interpreted as 1900. If that happens, some computers will not work at all while others will suffer critical calculation and/or processing errors. An example of a Y2K problem is the calculation of a person’s age. A person born in 1935 will turn 65 in 2000, but computers that incorrectly process 21st century dates would subtract 1935 from 1900 and calculate the individual’s age to be -35 (or possibly 35). Left uncorrected, many basic computer functions could fail. For example:

- ❖ Age calculations for routine tasks (e.g., payment of benefits) could be incorrect.
- ❖ Sorting routines may not work correctly (e.g., year 2000 could be sorted as earlier data – 00, 97, 98, 99).
- ❖ Automatically generated date-based information (e.g., time stamps, reference numbers, receipt dates) could fail or reset to a past date (e.g., 1900).

### WHAT ABOUT HOME COMPUTERS?

One must be concerned about the Y2K compliance of the computer hardware and software in homes. Problems may occur if a file dated in or beyond the year 2000 or which contains data with dates in or beyond the year 2000 is edited with non-compliant hardware or software. This may result in an inappropriate change in the file’s date, a corruption of date-related data within the file, or possibly the crashing of the application using the file or the operating system. If a computer was purchased in the last one to two years and contains a Pentium-class processor, the computer is probably Y2K compliant. This is not certain unless it is tested for compliance or researched for compliance by its manufacturer. If old software applications are used, problems could occur even with a compliant computer and operating system. To be safe, determine the compliance of the computer, its operating system and all application software. If database or spreadsheet files are used, insure that the date data stored within these files is also compliant (i.e., uses four-digit dates to allow unambiguous representation of date information).

### WHAT NEEDS TO BE DONE? VERIFY THAT ...

- ❖ information stored on the computer is Year 2000 compliant, including macros, spreadsheets, research data, survey data, etc.
- ❖ database date information is in the MM/DD/YYYY format. Change YY formatted information to YYYY.
- ❖ current software is Year 2000 compliant by contacting vendors. If not:
  - ◆ delete software from your workstation.
  - ◆ ask the vendor if there is a patch or upgrade that will make the version Y2K-ready.
  - ◆ migrate files to a Y2K-ready software of similar functionality.

*(Continued on page 6)*



## Department News

### Another new DOFM face...

We are happy to announce that Carol McQuown, R.N., M.Ed., was hired as instructional development specialist in the department on Jan. 14. With degrees in nursing, health education and education, McQuown is well qualified to work in predoctoral education. She and her husband, Jeff, live in Bath and have three children: Keith, Mary Colleen and Kerrienne.



### Presentations and Publications

#### Recent presentations:

**“Evaluating M2 Clinical Skills.”** (LuAnne Stockton, B.A., B.S.; Ellen Wagner, M.S. [The Society of Teachers of Family Medicine (STFM) 25<sup>th</sup> Anniversary Predoctoral Education Conference] Savannah, Ga., Feb.)

**“Facing the Crossroads: Assessing Students’ Attitudes Toward Family Practice.”** (Laurie Zupp, B.A.; Gary McCord, M.A. [STFM 25<sup>th</sup> Anniversary Predoctoral Education Conference] Savannah, Ga., Feb.)

#### Publications:

Belfer MH, Stevens RW. “Sarcoidosis: A Primary Care Review.” *American Family Physician* 1998; 58(9):2042-50.

Monika Ineman, department assistant (above), provided the winning chili recipe to help Family Medicine receive the “overall winner” category at the 1999 Chili Cook-off on Feb. 26. A continental breakfast, sponsored by the NEOUCOM Health Promotions Committee, was served to members of the department on March 17.

### We Want to Hear From You

*Family Ties* is published three times a year by the NEOUCOM Department of Family Medicine to provide a communication vehicle for affiliates of the department.

The *Family Ties*’ staff welcomes articles, anecdotes, poems, editorials and photography from our readers. This is your opportunity to share items of interest. Please send articles to Laurie Zupp, NEOUCOM, Department of Family Medicine, 4209 State Route 44, PO Box 95, Rootstown, OH 44272-0095 (by U.S. mail, NEOUCOM courier, or e-mail lz@neoucom.edu).

#### Newsletter Staff

Laurie Zupp, Editor  
Joanne Fabick, Layout and Design  
Robert Gillette, M.D., Consulting Editor

### Calendar

April 22	Assessing Clinical Skills: A Faculty Development
May 4, 6, 11	Workshop and Rating Sessions
April 28- May 2	32 <sup>nd</sup> Annual STFM Spring Conference, Seattle
May 14	21st Century Thinking: Working with Difficult Learners
May 21	NEOUCOM Senior Class Day (Class of 1999)
May 22	Commencement, Class of 1999, E.J. Thomas Hall
May 26	10th Annual NEOUCOM Family Practice Resident Scholarship Day
May 26	Establishing a Collaborative Evidence-Based Medicine Curriculum for Family Practice Residents
May 27	CLASS Session #4 - “Evidence-Based Medicine/ Information Mastery: What Is It?” (faculty development)
June 21-22	DOFM Strategic Planning Retreat
July 21	Neonatal Resuscitation Course (PGY1’s)



## For Your Professional Development

### Dr. Jeannette South-Paul Visits NEOUCOM

Awareness + adaptation + collaboration. According to Dr. Jeannette E. South-Paul, chair of the Department of Family Medicine, Uniformed Services University of the Health Sciences, Bethesda, Md., this is the formula for counteracting the shortage of under-represented minority physicians -- an unrecognized crisis in this country. South-Paul spoke with knowledge and passion during the session, "Improving the Nation's Health Through Cultural Diversity," on Feb. 24. This was the second annual workshop on cultural diversity sponsored by the Department of Family Medicine, Office of Faculty Development, to provide primary care physicians and NEOUCOM faculty/staff with current strategies for recruiting minority medical students and residents who are vitally needed to care for the growing numbers of under-represented patients in the United States. South-Paul also met with NEOUCOM students, faculty and staff during the FMIG Brown Bag Luncheon discussion.



*Jeannette South-Paul, M.D., was introduced as a scholar, researcher, administrator and a "doctor's doctor."*

#### **April 16-17 ALSO® (Advanced Life Support in Obstetrics)**

Directed by David Wakulchik, M.D., this annual session (accredited by the AAFP) prepared physicians to handle obstetrical urgencies and emergencies and to successfully complete the course written test and megadelivery testing station.

#### **May 27 EBM/Information Mastery: What Is It?**

In conjunction with the Office of Research, David C. Slawson, M.D., and Allen F. Shaughnessy, Pharm.D., will present a hands-on session to faculty who will be teaching residents how to use evidence-based medicine to enhance patient care outcomes.

#### **July 21 Neonatal Resuscitation Course**

This day-long, hands-on training will be held at NEOUCOM to provide residents with Provider Certification in Neonatal Resuscitation. It is a nationally taught program managed by the American Academy of Pediatrics.

## Research Review

The 10<sup>th</sup> Annual Resident Scholarship Day, sponsored by the Office of Research (OOR), is May 26 at 8:00 a.m. Guest speakers David Slawson, M.D., and Allen Shaughnessy, Pharm.D., nationally recognized for efforts in teaching principles of evidence-based medicine (EBM), will present the keynote address, "Feeling Good About Not Knowing Everything: Becoming an Information Master." The address will serve as introduction of the new EBM curriculum for consortium PGY2 residents slated to begin July 1, 1999. Both poster and oral presentations will be offered this year. Contact Gary McCord, M.A., 325-6766, or Sherry Harrison, 325-6774, for questions regarding Resident Scholarship Day.

In addition to the residents' presentations, Slawson and Shaughnessy will conduct two sessions concerning implementation of the EBM curriculum. The first session is titled "Establishing a Collaborative EBM Curriculum for Family Practice Residents." The EBM curriculum currently under design will be reviewed, and recommendations for design change and implementation strategies will be discussed with members of the OOR. CME credit (2.5 hours) will be available to OOR members.

On May 27, Slawson and Shaughnessy will conduct morning (8:00 a.m.–12:00 p.m.) and afternoon (1:30–5:30 p.m.) faculty development sessions titled "Evidence-Based Medicine/Information Mastery: What is It?" and will teach family practice clinicians how to teach EBM to residents. Reservations are on a first-come, first-served basis (approximately 20 clinicians per session can attend). CME credit (3.0 hours) will be available.

Summer research fellowships will be available this year to assess baseline competencies of family practice center faculty and residents prior to the introduction of the EBM curriculum, which is necessary to evaluate changes that occur in the first year of the curriculum. Interested students can contact the Office of Academic Services when fellowships are advertised.

The OOR is assisting Laurie Zupp, DOFM Pathway coordinator, to design a survey to measure student interest toward primary care medicine and evaluate Pathway programs. The start date of this study has not yet been determined.

*Help on research questions and/or projects at the family practice centers should be directed to the faculty research representative at each center: Bill Smucker, M.D., Summa; Bridget King, M.D., AGMC; Allison Oprandi, M.D., AULT; Ken McCormick, M.D., BARB; Roy Morcos, M.D., STE; and David Nickerson, D.O., Forum. OOR issues can be directed to Gary McCord, M.A., or Valerie Gilchrist, M.D., Family Medicine.*



# What's Up Predoc?

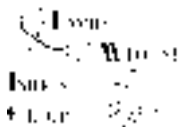
## Pathway Update

The Family Practice Advising Program (FPAP) was piloted on Feb. 3. Bonnie C. Fox, Ph.D., of Fox Associates, presented "Mentoring and Advising Medical Students: Issues and Strategies" for PGY2 resident advisors, which was followed by a reception for the FPAP teams. The day concluded with a dinner and inspirational keynote speaker Ross R. Black II, M.D. Laurie Zupp, program coordinator, will track the activities of mentoring teams, and independent end-of-year focus groups for residents and students will be facilitated by Delese Wear, Ph.D., associate director of Human Values in Medicine. The FPAP resident/student teams are:

- ❖ Cindi Croft, D.O. (BARB)/Carrie Cannato (M1)
- ❖ Feresthe Khavari, M.D. (BARB)/Jaime Hartung (M1)
- ❖ Jessica Falvo-Lang, M.D. (AULT)/Darlene Eckert (M2)
- ❖ David Mallamaci, M.D. (AULT)/Nadia Bajwa (M2)
- ❖ Medford Mashburn, M.D. (Forum)/Pete Varlas (M2)
- ❖ Glenn Ray, M.D. (Forum)/James Kravec (M1)
- ❖ Asheesh Pai-Dhungat, M.D. (STE)/Thomas Macabobby (M1)
- ❖ Shari Kramer-Klein, M.D. (STE)/Janine Zinz (M2)

Recent FMIG events:

- ❖ On April 14, the Aultman Hospital Family Practice Residency Program sponsored a first-time obstetrics workshop and dinner for M1 and M2 students. Family physicians managed five stations that provided obstetric training with the aid of mannequins, visual instruction and pregnant women. Prior to the workshop, the FMIG elected class representatives and officers for the coming year. The 1999-00 officers are:



Lisa Schroeder, president  
Janine Zinz, vice-president  
Sherri Suchora, secretary  
Jaime Hartung, treasurer  
Adam Wendling, historian

- ❖ Students presented the American Academy of Family Physicians' (AAFP) "Tar Wars" pro-health tobacco free education program on April 13-14 at Ravenna and Kent middle schools (in partnership with the Pediatrics Action Club).
- ❖ The FMIG Brown Bag Discussion, "Spirituality in Medicine," was facilitated by Lura Pethel, associate director, Center for Studies of Clinical Performance, on April 21.

The last FMIG event of the 1998-99 year is the end-of-year "Take-a-Break Barbecue," May 12, 4:30-6:00 p.m.



## M2 Clinical Skills Assessment

On May 4, 6 and 11, M2 students will participate in a clinical skills assessment. Students must pass the assessment in order to pass Term 3 of the Introduction to Clinical Medicine course. Students will have one hour to conduct a history and physical exam on a standardized patient, 30 minutes to problem-solve and prepare a case presentation, and 15 minutes to deliver a case presentation. Each student will be observed and evaluated by a faculty rater, who will provide performance feedback. In addition, on April 22, May 4 and May 6, faculty development sessions will be offered to train raters to evaluate the M2 students (CME credit will be offered). **If you would like to participate as an assessment rater, contact LuAnne Stockton (325-6776, e-mail lstockto@neoucom.edu) or Ellen Wagner (325-6777, e-mail ewagner@neoucom.edu).**

## STFM Annual Predoctoral Education Conference

DOFM staff members Steve Grossman, M.D., Gary McCord, LuAnne Stockton, Ellen Wagner and Laurie Zupp traveled to Savannah, Ga., in February to attend and share curricular presentations at the STFM 25<sup>th</sup> Anniversary Predoctoral Education Conference (see "*Presentations and Publications*" page 2). Although the presenters were awakened by fire alarms at 4:30 a.m. on presentation day, the project results were well received by the audiences. Another highlight of the trip occurred when former DOFM'er Amy Ward, now affiliated with the University of North Carolina, traveled from Chapel Hill to Savannah to reunite with her former colleagues.



*Enjoying delicious seafood dinners became an evening treat for, from left, Laurie Zupp, LuAnne Stockton, Ellen Wagner and Bonnie and Steve Grossman, M.D.*

## Chair's Corner

I was recently asked to write about my philosophy of family medicine, and this gave me a wonderful opportunity to reflect. I've included a few paragraphs and hope that readers might respond with their own reflections.

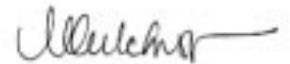
It is easy to get caught up in the everyday care of patients, teaching, or attending to organizational demands, and I often forget *why* I do these things. However, the core value of medicine and family practice is patient care. It is the basis for the rest of what I do: teaching, research and administration.

My definition of family practice is continuous, comprehensive and personal care. I believe in the biopsychosocial model of health care – no other model makes sense. Comprehensive care requires an awareness and integration of the context of care. A person's illness will be influenced by everything from genetic heritage to living situations; from relationships with families and doctors, to the biology of their disease. Sub-specialists may treat certain diseases in various patients, but family physicians treat various illnesses in *particular* patients. Ian McWhinney says it is the particularities to which family practitioners attend. The relationship with my patient is open ended – any time, whatever. Consideration of the community of the patient follows a commitment to the patient. While it does not precede it, it may for an epidemiologist because considerations of community risk will influence the well-being of a patient.

I believe that the doctor is like a drug. Gayle Stevens, who along with Ian McWhinney have influenced me more than any other writers in family practice, described the doctor-patient relationship as something apart from either the doctor or the patient. It is in that moment of encounter that care for the patient conversely cares for me. It is that relationship that sustains both me and my patient.

As I think about necessary skills in family practice, I realize that the key is the need to be a life-long learner. What we can teach students most is *how* to learn, not *what* to learn. While I certainly think relational and patient-centered care is the key to family medicine, the patient also expects the physician to be competent in bio-medicine. I want physicians to know not only the current recommendations for treatment, but I want them to recognize what they don't know and then how to consult colleagues and literature. I want them to know how to interpret information, how to be a patient educator and advocate, how to listen and how to negotiate with patients.

Students and residents also must find a balance between their professional and personal lives. I have seen too many impaired physicians, suicides, broken marriages and perhaps most tragically, bitter and cynical physicians. I tell students if you like the patient better than the disease – think primary care. If you like the disease best – think specialty care. If you want to be the best primary care physician – think family practice. Find the match that's best for you. I am certainly glad I found family medicine for me.



Valerie J. Gilchrist, M.D.  
Chair, Department of Family Medicine

### From Around the Consortium

#### Barberton Citizens Hospital Family Practice Residency Program

Cindi Croft, D.O. (PGY2), completed a one-month rural health elective with Dr. Mark Bjorklund in an underserved clinic in New Mexico. Croft, who is expecting her second child, is interested in underserved care and is a frequent volunteer at the Barberton Free Clinic and the Migrant Worker Clinic in Willard.

Linda K. Knedler, M.D., graduate of the residency program (1998), has joined Barberton's faculty on a full-time basis. Knedler has experience with the Indian Health Service, private practice in the Barberton area and managed care in the Akron area. She will coordinate expanded involvement with the Barberton Free Clinic using grant funds from the Barberton Community Foundation.

Anthony J. Costa, M.D., program director, was appointed to a three-year term on the Committee on the Scientific Program for the AAFP. In that capacity, he will help plan the next three AAFP Annual Scientific Assemblies which will be held in Orlando (1999), Dallas (2000) and Atlanta (2001).



(Continued from page 1)

#### WHAT IF NOTHING IS DONE? THE ...

- ❖ workstation **may** crash.
- ❖ non-ready software **might not** work properly, corrupting files, etc.
- ❖ non-ready software **might not** work at all.
- ❖ non-ready software **could** affect compliant software and work files if the non-ready software interacts dynamically with the compliant software. For example, if the date calculations from non-ready software are linked into Microsoft Excel, the format of the date calculation **could** cause this program to misinterpret the date information. (There is an 80 percent probability that non-ready software **will not** harm the hard drive or operating system.)

Useful information about the Y2K problem can be found on the World Wide Web. Check out the web site, <http://www.year2000.com/>, and look at web pages for the manufacturer of the computer for Y2K compliance. Most vendors have posted the information on the World Wide Web, although it can be difficult to find. Y2K compliance information also can be found in the web pages of your software publisher. Consult the software/computer vendors about Y2K compliance—they are quite knowledgeable.

Y2K is coming...be prepared!



*With the “shadow” of Hippocrates in the background, Valerie Gilchrist, M.D., chair of the Department of Family Medicine, provided inspiration during the White Coat Ceremony for the Class of 2002 on Feb. 23.*

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