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Our classes focus on a variety of topics, with select classes being specifically created for UMMC students. We offer specialized training on all Microsoft Office apps (Word, Excel, and more), as well as BlackBerry Work, Entrust, and Canvas.

How it works:
While many classes are conducted in a more traditional classroom format, our Open Labs are on a “come and go” basis. Open Labs allow you to attend when it is convenient for you within the specified time frame. The TLC instructors will also work with you one-on-one if that better fits your schedule and learning style.

How do I sign up for a class?
It’s simple. Just log onto the UMMC intranet, view our schedule, and click “Register” to reserve your seat for the class you want. The schedule is updated monthly, so there is always something new at the TLC.

Find out more by visiting our intranet webpage today!
The Misnomer Behind Being a “Normal” Muslim

There is a common refrain heard by us Muslim-American students, especially here at UMMC. We meet a new group of people and spend time with them, work among them, study with them, eat with them, live with them—together experiencing this journey in our medical training. We spend hours of delirium in the library and sit around the windows of atrium for lunch. While collectively experiencing the strenuous course load, the sacrifices, tantalizingly-wet issues when we’re around patients, we hear the question: “Oh you’re Muslim? But you’re so normal! You’re not like the others.”

We laugh and continue to work with a sad smile. The resounding reality is that there is nothing uniquely individual about our experience and yet, we are “normal” Muslims. What does that mean? Most Muslim-Americans at UMMC grew up in Mississippi in a predominately Christian environment, conflicting to any other faith, including Islam, was to proclaim yourself as a minority, yet we have assimilated into this rich and vibrant culture. To be Muslim and to be a Mississippian—or an American for that matter—is not mutually exclusive. This is not worthy of CNN’s flashing news tag; however, this reality of “normalness” continues to astonish, which is itself astonishing in the year 2017, and yet understandable due to the lack of exposure to “normal” Muslims in media and in real-life. If the first Muslim that you encounter beyond a Facebook article or TV segment is “normal” – who religiously follows Game of Thrones, idolizes Drake (the beautiful poet of our era), binges regularly at Sushi Villa, frequently follows McDonald’s sandwich-making envoys, and Dairy Queen’s Midnight Truffle blizzards—and contradicts the ambiguous figure existing in your id, how does that make you feel? How does it make you feel to correlate the breathing and living individual before you to the preconceived notion in your head?

We Muslims notice the subtle slights that are often unintentional. It’s a sense of awkwardness that emerges during every conversation. Your group discusses politics near the circumferential windows at the Methodist cafeteria; and your friend announces that he or she supports a political ideology that is deeply anti-Muslim. How should I, as a Muslim, respond? How do I feel? Or a friend states that he or she “just can NOT” live with some dietary restrictions or dress in a certain manner or fast for a certain number of days, but this is the foundation of your religious practice. Should I defend it or let it go? Or you can be at a party celebrating the end of a school term, feeling isolated and overhear someone saying that “Dude, I totally could have beat them up, but I’m not a Muslim or anything.” I know this person meant no harm yet you still catch your breath and feel as though someone is clinging your lungs; tears appear out of nowhere and you forget what you were just saying. You feel embarrassed and ashamed for your reaction, but how can you blame this individual? Most of us Mississippian Muslims grew up in small towns and schools not renowned for wealth of diversity where we (including me) interacted predominately within our comfortable group of shared identity. If you never met a Muslim except for the display on TV and movies in the aftermath of 9/11, then that Muslim is your frame of reference. You compare every subsequent Muslim that you meet to that Muslim. There is nothing inherently wrong here or nothing to be ashamed about. It’s a mere artifact of this culture that we live in.

As a practicing Muslim, I believe that to be a Muslim at UMMC is to be a Muslim anywhere. Locating a space or time to pray in between lectures or surgeries can be challenging. Finding halal meat in the cafeteria is a futile task. Abstaining from food and water during Ramadan while studying for USMLE exams is a challenge. These obstacles exist beyond the boundaries of UMMC as we all know. Many religious groups encounter similar difficulties; these are not unique problems: People of the Jewish faith struggle to find kosher meat similar to how vegans find it difficult to find their food. We all recognize the difficulties of catering to the needs and requirements of every religious group. We also recognize the individual preferences within the religious group; not all Muslims observe the fast, eat halal meat, dress conservatively, or pray Friday prayers. Likewise, not all Christians attend church on Sundays or attend Bible study. Our individuality develops most in our clinical years when the groups of shared identity unravel as we individually confront life, death, and the spiritual implications of these decisions. Do we look to God or a higher power during this ambiguous time? Do we look inward to reflect for guidance? To what degree does religion influence the decisions that you make? The degree of our religiosity and spirituality fluctuates throughout the year and yet we collectively appreciate these changes as a part of our religious journey. A spectrum of choices determining worship and faith spans all religions, including Islam. Islam embraces and accepts this spectrum of individuality as “normal.”

Is there a way to combine the breathing and living “normal” Muslim with that Muslim compartmentalized in an obscure mental box? Perhaps the solution involves immersing ourselves in that uncomfortable discussion—both Muslim and non-Muslim—and continue to push through the awkwardness instead of evading the problem. If we reach that cliched “ayy ayay” moment, then hallelujah, mazel tov, and ahundulillah.

- Resham Rahat, M3
AMA-MSS Annual Meeting
American Medical Association - Medical Student Section
Hyatt Regency Chicago: June 8-10, 2017

From June 8-10, 2017, seven students from the UMMC School of Medicine—Mary Elizabeth Butts, Vy Mai, Avni Patel, Denise Powell, and Logan Ramsey of the Class of 2019 and Drew Desrosiers and Jordan Rimes of the Class of 2020—attended the American Medical Association-Medical Student Section (AMA-MSS) Annual Meeting held at the Hyatt Regency Chicago. In total, more than 750 medical students from across the country attended the event, participated in programming and networking events, and heard or voted on resolutions on various health care issues. Avni Patel and Logan Ramsey were voted Membership Chair and Vice-Chair, respectively, for Region 3 of the AMA-MSS. Region 3 is composed of medical schools from Mississippi as well as Arkansas, Kansas, Louisiana, Oklahoma, and Texas. Mary Elizabeth Butts represented UMMC by serving as its voting delegate at the meeting. The next AMA-MSS Meeting will take place from November 9-11, 2017 in Honolulu, Hawaii.

Founded in 1847 and headquartered in Chicago, Illinois, the AMA is the largest physician association of physicians—both MDs and DOs—and medical students in the United States. Its mission is “to promote the art and science of medicine and the betterment of public health.”

-Avni Patel, M3

5 ways to support the Jackson Free Clinic

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   Be on the lookout for our weekly e-mail with a link to the sign up sheet. Contact Jessica Arnold, Hannah Miller, or Ford Franklin for more information! (jrarnold@umc.edu, hmmiller@umc.edu, jfordfranklin@umc.edu)

2. **Purchase a JFC t-shirt or pair of scrubs**
   Visit the JFC store at jacksonfreeclinic.org. We’re currently taking pre-orders for scrubs. Don’t miss out! Contact Patrick Wood or John Bobo for more info (rwood@umc.edu, jfbobo@umc.edu)

3. **Amazon Smile**
   Visit smile.amazon.com and search for Jackson Free Clinic for the Homeless. 1% of each purchase you make on Amazon will be donated to JFC.

4. **Add your Kroger Plus Card**
   Google “Kroger Community Rewards,” and click the first result. Select “Create an Account,” and add your info. Click on the link within the confirmation e-mail you receive, visit your “Account Summary” page, and add your Kroger plus card number in the “Plus Card” section. Scroll down to the “Community Rewards” section at the bottom. Our organization number is 32010 and our name is Jackson Free Clinic for the Homeless

5. **Add your mom and dad’s Kroger Plus Card!**
   It’s not #savage if it’s for a good cause. Ok… a little #savage
The New School of Medicine

Rising and Shining
Window wonderland illuminates state-of-the-art features
And the creators said, “Let there be light.”
Of course, members of the building’s steering committee said it first. That fiat was one of the architects’ marching orders as they designed the new School of Medicine building, a notion to which they took a shine.
“We’re humans,” said Dr. Loretta Jackson-Williams, professor of emergency medicine, vice dean for medical education, and a key member of the steering committee. “We like to see natural light.”
So, when the building opens, it will really seem open – a window wonderland with welcoming, sunlit spaces – just one feature of the sprightly new school that sets it apart from the brawny, gray ancestor unveiled 62 years ago.
In fact, it stands apart from many buildings, said Jim Eley, of Eley Guild Hardy (EGH) Architects, one of the Jackson firms that conceived the design.
“It was a rare opportunity to work on a building where the clients really wanted it to be special,” Eley said.
“When an architect comes upon such a client, that’s a lucky architect.”
Lucky, and challenged: “It had to have a ‘wow factor,’” Eley said. “Dr. Woodward wanted that,” he said, referring to Dr. LouAnn Woodward, vice chancellor for health affairs and dean of the School of Medicine.
“We all wanted it, and we believe we have it.”

Features of the new SOM:
Ground Floor: Offices, student lounge, café.
First floor: Classrooms, group studies and lecture halls
Second floor: Classrooms and group studies
Third floor: Wet and dry labs, training and group study rooms
Fourth floor: Exam and simulation rooms
Square footage: approximately 151,000
Total cost: $73-$74 million (includes state funds and a $10 million Community Development Block Grant awarded through the Mississippi Development Authority and administered through the Central Mississippi Planning & Development District for site and infrastructure work)

About Face
The “wow” radiates from this: a central atrium.
“Clargorizes the spaces, creating a dramatic, common circulation section for movement in the building,” said Rob Farr, corporate president of Cooke Douglass Farr Lemons Architects (CDFL), the other principal designer.
Also lurking in “wow” territory is the fact that the facility “has no back side,” Farr said. That is not a mistake, but an effort to meet this design challenge: make sure the school offers more than one face to the campus, that it turns its back on no one.
Which explains the site selection. The location allows the building to present one of its faces to the educational core of the Medical Center: Its close neighbors include the schools of dentistry, pharmacy and the health related professions, along with the emerging School of Population Health housed in the new Translational Research Center.
“It defines the north side of the campus, where it is the key component for the academic zone,” said Dr. Jonathan Wilson, chief administrative officer.
It presents another face to the healthcare hub: hospitals.
Finally, a connecting bridge joins the new school to the Learning Resource Center – home to the vice chancellor’s office and the Rowland Medical Library. Here, then, is a physical connection to two institutions serving all students.
“The building responds with grace and purpose to each area,” Farr said. “It accomplishes this while establishing its own presence as the center of education at the University.”
That presence is “huge,” said Jackson-Williams, referring less to its dimensions and more to its potential.
“Having more space is important, but what you do with it is even more critical,” she said. “This is about delivery of education programs – for other trainees, and not just for medical students.
“We want to be seen as an optimal space for learning; that’s what this new building is all about.”

It's Not Business; It's Personal
Those who will spend the most time exploring the building’s blond-and-white interiors – particularly M1s and M2s – can thank, in big part, their white-coated brothers and sisters who came before them; they were part of focus groups made up of faculty and students.
“Students had what has been called ‘unprecedented involvement’ in the design,” said Dr. Jerry Clark, chief student affairs officer, associate dean for student affairs in the School of Medicine.
“There is a terrific student lounge. Places for students to store their things that are safe and secure. Lots of places to study and meet. A lot of technology.”
Because planning for the new school began about a dozen years ago, Wilson said, the technological features weren’t finalized until lately. “That was a very smart approach by the planning committee.”
That approach had long-term relevancy in mind.
“Twenty-five years from now, I want this building to be very functional,” Woodward said.
The place teems with power outlets to charge cell phones and laptops, he said. The lecture halls, modeled after Emory University’s, bristle with advanced AV equipment, offering integrated sound systems and sound-dampening features.
“New Stage Theatre would be proud to perform here,” Clark said. “And, even though these lecture halls are larger than those in the old school, they seem more personal.”
They may even be easier to find: everything might be easier to find. “There’s a major hallway on every floor which was designed to encourage social interaction between students and faculty and from which all building functions are reached,” Eley said.
“You will always know where you are in the building. In the hospital, you can get lost. But you can’t here.”

Down to the Ground
From the first floor up, views from the side of the school facing the Learning Resource Center will eventually overlook a tree-planted plaza.
The goal, Eley said, was “to create a place where students would want to be – in class and out of class. This building should project an image that is important to the occupants, the medical students.”
Planners focused on a “timeless design that also blended into the campus fabric,” Farr said. That
The University’s goal was to create a center of education that would last for the next 50 years or longer,” Farr said. “For me, the opportunity to help define and support the educational process is an honor and a privilege.”

Interesting fact about the timeless design: The building has five stories but no fifth floor. It starts with the ground floor, not the first. And that’s where this breakthrough of the building begins:

- **Ground**: Student lounge with, as Clark put it, retro, “Mad Men” style furniture; the Copper Spoon Coffee Company; storage lockers; administrative offices divided into sections, for 1. current students and 2. prospective students; admissions office; Health Careers Opportunity office, etc.

- **First**: Twin amphitheaters used for lecture halls, seating 200 each and rising two stories; “room to room” teaching via web cams; 18 classrooms for small group learning, on the west side; six study rooms; “touchdown” lounge space; “un-programmed” space that is suitable for lunch or other breaks; the Legacy Wall, which honors donors of estate gifts and other charitable plans

- **Second**: Repeats the first-floor layout, with the addition of a work room.

- **Third**: Includes the Basic and Advanced Cardiopulmonary Resuscitation Training Center, a facility for certification in Basic Life Support, such as CPR, and Advanced Life Support, such as opening up patient airways (all of this training had been held in the Jackson Medical Mall – see accompanying story); study space and window functions

- **Fourth (top)**: West side – clinical skills space, including Standardized Patient training (moving here from the Medical Mall); east side – what has been known as the Simulation and Interprofessional Education Center, or SIEC (moving here from the Classroom Wing), and now, under the banner of academic affairs, is the Office of Interprofessional Simulation Training Assessment Research and Safety (see accompanying story)

Education showcase, Jackson-Williams said. “I believe it looks the way it does because it truly reflects all of that discussion. We have talked about it for so long, so, for it to be as we envisioned it, is fantastic.” That vision was multi-directional – forward and backward. “In my own design mind, we drew the inspiration from the 1955 building,” Eley said.

“You might say, ‘I don’t get it.’ But, for one thing, the original building had that big, solid brick wall, which is a strong piece of architecture; we repeated that feature in new school’s design.”

This old-school-new-school sensibility is striking, especially for anyone who has studied and worked at the Medical Center for some time. Among those is Woodward, who arrived on campus as a researcher in 1986, a year before entering medical school. As she looks over the new school, as portrayed in an architect’s rendering, it’s clear that it means more to her than building with five stories; it’s a 62-year-old story entwined with her own. Pointing to the drawing, to the “solid brick wall” of history Eley described, she said, “This look here just touches my heart.”

- Gary Pettus, Public Affairs

- **Notes**

  - Wall décor suggestive of medical terms on Sticky Notes
  - A stylized homage to the all-seeing “eye” motif that distinguishes the entrance to the original School of Medicine, which faces the School of Nursing. Clearly, the structure’s most arresting details reside inside its bones, rather than on its outer skin. “But a building does not need to scream for attention,” Eley said, paraphrasing an architectural precept.

  “It needs to yield to the context that it’s in. The most beautiful campuses are where that happens, I think.”

  One of those campuses, he said, is in Oxford, where Eley’s firm designed the Robert C. Khayat Law Center at Ole Miss. “That building and this one represent two of the finest institutions in our state: law and medicine. And we were proud to be a part of their design,” Eley said.

  As for medicine, a lot of thought went into its new function areas, which mimic those on lower floors; dry labs, featuring portable tables; a testing area equipped for video conferencing; 48 microscopes – for histology, board exams or other possible functions

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The Sorting Ceremony

Scared, lost, and hounded with horror stories of Gross Anatomy dissections, that is how previous classes of medical students would recall their own M1 Orientation. The ecstasy of receiving that first white coat is constantly at odds with the feeling of terror and uncertainty that surround the upcoming year. Now imagine amidst those feelings of self-doubt, walking into a room with Hedwig’s Theme booming through your new medical school’s state of sound system with the smiling faces of your prefects in their house shirts. Dr. Clark is dressed as Professor Dumbledore with Mrs. Virginia and Mrs. Jan cast as Professor McGonagall and Professor Trelawney. Your decision to sign your life over to a career in medicine might seem a little more in reach as well as fun.

For the fourth year, incoming medical students were sorted into one of the eight UMMC houses, based off the school house program from JK Rowling’s best selling series Harry Potter. The program was implemented as a part of a nationwide wellness initiative for medical students. Like in Harry Potter, each of the eight houses has a House Head and prefects which are UMMC attending physician and chosen upperclassmen, respectively. The first years compete at Field Day for the house cup each year, and the houses hold events throughout the year ranging from trips to the bowling alley to Christmas parties. Photos, courtesy of UMMC Public Affairs, were taken from this year’s M1 Sorting Day.

-Mary Moses Hitt, M2

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Right Next Door to UMMC

-in the heart of fondren-

New Orleans Style

Perfect for UMMC Students & Professionals
Hello from the Evers Society! As you all know, the Evers Society was created to strengthen medical education through the evaluation of coursework in the preclinical and clinical years of medical school. We also have the privilege of acknowledging faculty who have been selected by medical students for their outstanding teaching and dedication to students. Faculty members who have won an award for three or more years are inducted into the Evers “Hall of Fame”. We wanted to give you a chance to get to know your Hall of Fame members better with a short interview. Recently, we were able to interview Dr. Jeffrey Crout. Dr. Crout works with medical students during their clinical years on the Pediatrics rotation. He also serves as the Division Chief of General Pediatrics, the Pediatric Residency Program Director, and the faculty advisor for the Pediatric Interest Group. Dr. Crout is a graduate of UMMC School of Medicine and continued at UMMC to complete his residency. We hope you enjoy learning more about him!

Tell us a little bit about yourself. How did you end up in pediatrics at UMMC?
“I ended up at UMMC because I’m from Mississippi and this is my home. I had an idea that I would stay in Mississippi and practice here, so it was a logical progression. When I was a younger person I had significant problems with asthma, and I saw my pediatricians on a regular basis. These were folks that became sort of heroic in my 4, 5 or 6-year-old standpoint—but as I grew older I saw them as role models and paragons of virtue—and maybe that was the bridges to get from one point to another. So for those two reasons I wound up doing what I did. I went to Millsaps College and majored in chemistry and history. They both made sense to me, and unfortunately for the residents that round with me, they sometimes get a historical perspective of almost everything—the stories of why people do what they did, the historical figures of medicine. So it kind of came together for me in that regard.”

What do you enjoy about teaching medical students?
“Well I think teachers probably don’t need to display information; they need to find a way to convey a process to people. A lot of times students don’t know how much they know; they just might lack the skills to know how much they know; they just might lack the bridges to get from one point to another. So for instance, you know what ‘A’ is, you know what ‘G’ is, and you know what ‘M’ is, so you just need to be reminded sometimes of where ‘C’, ‘D’, and ‘E’ are. It occurred to me watching role models of mine who were great teachers—Joe Donaldson, Ross Smith, and Richard Miller. They could ask a question and it would be, why do you think it does that? And the response would be, I don’t know, and they’d say, well you probably know more than you think you do. A lot of people know the ‘if,’ but maybe not the ‘then what,’ and facilitating that next step was always kind of fun for me.”

If you could give a piece of advice to your students, what would it be?
“A couple things come to mind. One is that the person who is most responsible for the outcome of your education and career is you, so you should take it pretty seriously if you want to improve. The second one is something the people who trained with Dr. Peter Blake, who was the head of ICM, can remember him saying, ‘Just do the right thing with your patients. You might not always know what it is, but just do it anyway.’ And if you think about what the right thing is, you normally know. If you run into a problem, don’t be afraid to change what you’re doing. There’s a golf instructor who likes to say, ‘If you keep doing what you’re doing, you’re going to keep getting what you’re getting.’ If you’re going to learn something more, you need to do something differently. You can’t be scared to make a change. Don’t be afraid to ask someone a question.”

What do you like to do outside of work?
“I like to spend time with my family. Our church is something that’s important to us, and as hobbies the two things I wish I had more time to do would be playing golf and quail hunting. I like to read a lot of history, and Sherlock Holmes has always been a favorite of mine.”

What is your favorite:
- Vacation spot? “The beach. Gulf Shores, Orange Beach, somewhere relatively benign and quiet.”
- Season? “Fall”
- Food? “Gonna go simple here: a good hamburger.”
- Movie? “Shane”
- Sports team? “The American Ryder Cup team, if that counts. Or the Cincinnati Reds”

What’s an interesting fact about yourself that medical students might not know?
“I trained a Brittany Spaniel to be a quail hunting dog. Everybody that I grew up with liked to go quail hunting, and I thought it would be great if you could get a dog to point and retrieve a bird. It took a great deal of patience, but ultimately I got to where my dog would point and stay on point until I got to where the bird was and retrieve it, even in the water. So it was pretty much one of those passions that you take on and say, I’m gonna do this. He’s eleven and a half years old now, so we don’t go hunting anymore. I don’t talk much about that one, I guess.”

Dr. Crout on the floor at Batson with Teddy Roosevelt!
You were inducted into the Evers Society Hall of Fame because you have received several Evers teaching awards during your career. What do you think is the most important quality of being a good teacher?

“Being clear on what your goals are and what you want the students to do. Sometimes it’s very basic, just not overthinking the process. You want students to be able to take a good history, do a good physical exam, put together the information they get, and come up with a plan and operationalize the plan. Keeping it very simple and being interested in the outcome for the learner. I learned a lot from the surgeons when I was on surgery rotation. I learned a lot about things outside pediatrics, and they came in handy. Making most of the brief time they have and keeping them interested.”

What is the best experience you’ve ever had in your teaching career?

“Having several students who initially were not particularly successful find a way to become successful, become board certified, and become practicing pediatricians. There were several students who have come through at various levels who had challenges with test taking or personal issues that they had to work through, and it’s fun being able to see them in that situation become practicing physicians making an impact in their environment and in the lives of other folks. So having somebody who looked like they weren’t going to succeed, be able to work with them some, and get them to ultimate success is probably the best. It’s fun when somebody calls you from the airport on the other side of the world and says, ‘I passed my board, I just wanted to let you know.’ That’s for me.”

Tell me about why infectious disease interests you.

“Being clear on what your goals are and what you’re probably going to be okay. Some people may not always be happy that you gave them advice they don’t like or a diagnosis they don’t want, but if you work hard, have confidence in yourself, ask questions when you don’t know the answers, and stay polite and professional, you’ll be fine. Physician work is difficult no matter what timeframe you get me there with antibiotics.” Of course there’s just cures something.’ And I said, ‘is this a trick question, or does penicillin count?’ He said, ‘Okay, you got me there with antibiotics.’ Of course there’s more to it than that, but I always thought that the idea that you could just cure something was a good idea—that you made something pre-disease state. It’s a lot like chemical warfare, and it all made sense to me. So infectious disease was always a big interest of mine, and it still is.”

Anything else you would like to tell the students?

“Have confidence in yourself and work hard. Dr. Evans, our chairman for a long time, always said, ‘work hard and be polite.’ If you do these two things, you’re probably going to be okay. Some people may not always be happy that you gave them advice they don’t like or a diagnosis they don’t want, but if you work hard, have confidence in yourself, ask questions when you don’t know the answers, and stay polite and professional, you’ll be fine. Physician work is difficult no matter what timeframe the physicians have worked in. Dr. Batson told me stories of doing house calls where he had to stop on the road because it didn’t actually lead to the house where people lived, go over the hills and through the creek to get to the house. But as long as you work hard and say polite and professional, you’ll be fine.”

-Parker Giroux, M3

Embracing CommUNITY

On August 17, I was given the privilege of attending the meeting of the Mississippi Board of Trustees of State Institutions of Higher Learning in Jackson. Not only was I able to hear the accomplishments of the eight state institutions in terms of its new construction projects, its star students, and its decorated athletes, but I was also able to listen to the service ideas of several of the student government representatives from other state institutions at the Presidents’ Council meeting following the board meeting. I found myself most intrigued by a project that Ashley Griffin, the Student Body President of Delta State University, and her cabinet had planned for Tuesday, August 29, on DSU’s campus which happens to be located in my hometown, Cleveland, MS. The event entailed a two-hour period in the green space affectionately known as the Quad in front of the Student Union during which time food would be provided and live music played. In addition, a panel of speakers discussed the issues surrounding the heated events that occurred in Charlottesville, Virginia.

As a result of this meeting, I was prompted to reach out to the Diversity Co-Chairs Kandice Bailey, Yassmin Hegazy, William Lindsey, and Zach Long, my fellow Philanthropy Co-Chair Emily Theriot, and our ASB President William Thomas. Initially, I merely pitched an idea to the group uncertain of whether we all could organize something in such a short period of time. Thanks to William Thomas’s leadership and the unbridled support of the Diversity Co-Chairs, we were able to book a lunch-hour venue that would allow a panel of speakers, food, and a logo which was printed on three foam boards and signed by the events’ attendees and other members of the Student Body. In collaboration, our team coined the name of this inaugural event as UMMC CommUNITY Day with the slogan “UMMC for the CommUNITY” captured in the logo so as to capture UMMC’s advocacy for familial bonds between all of the many different people who call UMMC home.

Our panel for the event included Vice Chancellor Emeritus Dr. James “Jimmy” Keeton, Director of the Office of Diversity and Inclusion Dr. Juaneyce Taylor, and UMMC Chaplain Doris Whitaker. Each of the members on the panel discussed their own experiences with racism or prejudice in the past and/or present, and the panelists collectively shared their own passionate views on the need for a more inclusive community on our campus, in our state, in our nation, and in our world.

During Dr. Taylor’s first remarks, she commented, “We are all here to restore health. No matter where you are in the institution, you are involved in patient care. Whether you are the learner, frontline staff, the electrician, faculty, or clinical staff—we have a shared purpose. There is no time for divisiveness.” Dr. Taylor’s words rang true as student and employee attendees asked questions that elicited the sharing of perspectives and made comments that fostered a sense of healing and unity that permeated the room. Their voices were filled with authenticity and emotion, and I remember my heart being so filled with love. I am sure all other attendees present in the room felt the same way. Chaplain Whitaker challenged each of us to find people different from us— to look them in the eyes and connect. How often do we ever really
connected with people on a personal level? We are often so busy that we hardly seem to find the time to make that human to human connection. Perhaps, this moment will herald a fresh drive to instill in everyone around us the sense of “belongingness” which Chaplin Whitaker referenced.

Dr. Keeton noted, in regards to the state of Mississippi as a whole, “We have come a long way, but we still have a lot of work to do.” Dr. Keeton later in the discussion humorously added, “If we can fix Mississippi, we can fix the whole […] country.” Dr. Keeton’s words ring boldly true in regards to racial tensions but also in regards to the fact that our state abounds with some of the highest disparities in health care in the country, and if such tensions and disparities can be eliminated or even improved in our state, then certainly there is great hope not only for Mississippi but also for our nation as a whole.

The results of sharing with others the idea from DSU’s Student Body President are proof of what a team can accomplish, even in a limited period of time. Yet, what I find most humbling in this experience is that this event has become not just a single positive reaction to isolated acts of hatred and prejudice but also a recurring annual celebration of the beauty and cultural richness of our community here at the University of Mississippi Medical Center. I am honored to provide in this article the mission statement that our team under President Thomas’s leadership has drafted. I have hopes that a resolution concerning this annual event will be approved unanimously at our first ASB meeting on September 11—a day that could not be any more appropriate.

MISSION STATEMENT: “The University of Mississippi Medical Center CommUNITY Day is established as an annual event offering students, faculty, and staff an occasion to celebrate our diverse academic health sciences. Over the course of history, human prejudice has given rise to acts of violence and displays of bigotry and hate, often fueled by human fear and cultural ignorance. Recent events in Charlottesville, Virginia, affirm this sad reality exists.

UMMC CommUNITY Day is established by the Associated Student Body (ASB) as our constructive response. This celebration of our diverse CommUNITY recognizes and affirms our belief in the dignity of all persons regardless of their creed, ethnicity, spiritual beliefs, nationality, economic status, gender, sexual orientation, and political ideologies.

Through this annual event, the ASB calls all members of our UMMC CommUNITY to join in condemning words or actions of hate that infringe on the dignity and inherent freedoms which we hold as the basic rights of every person.

CommUNITY Day is an outward sign of our firm belief that the very differences that distinguish us from one another unify us into a diversified whole. Only by peacefully loving the parts that comprise the whole can we truly, authentically love South Africa, Reverend Olivier was very familiar with the apartheid system of racial segregation and discrimination which began with the rise to power of the National Party as early as 1948. This movement sadly did not end until 1991. During the late 80’s, while in South Africa, Reverend Olivier witnessed a member of the National Party gun down a young man in front of his mother. In response, the woman approached the armed man, and without missing a beat, said to him, “You have killed my son. You have killed my son, and now I have no son to love. So, now, I will love you.” In that very instance, the armed man who had been unmoved by the volleys of projected ammunition or the sounds of artillery was instantly moved by an act of love—so moved in fact was he that he fainted there before the mother of the murdered son.

Now, you might be wondering why I am recounting this story. While this true story is moving in and of itself, the act of loving forgiveness expressed by the mother for the armed man is a foundational act rooted in the concept of ubuntu which is an ideal that became popular in South Africa during the presidency of Nelson Mandela. Ubuntu is an ancient African term meaning “humanity unto others,” or “a person is a person through other persons.” In 2009, during her inaugural remarks, U.S. Department of State Special Representative Elizabeth Frawley Bagley, quoted Archbishop Desmond Tutu regarding his understanding of ubuntu which “is not, ‘I think therefore I am,’ [but] rather, ‘I am a human because I belong. I participate. I share.’ In essence, I am because you are.” Earlier in a 1999 book titled No Future Without Forgiveness, Archbishop Tutu writes, “A person with Ubuntu is open and available to others, affirming others, does not feel threatened that others are able and good, based from a proper self-assurance that comes from knowing that he or she belongs in a greater whole and is diminished when others are humiliated or diminished, when others are tortured or oppressed.”

By recognizing ourselves in one another and by embracing the “greater whole” of our campus, local, national, and global community, we are more empowered to serve one another as we would prefer to be served and to forgive one another as we would ask others to forgive our own transgressions against them. Therefore, in this celebration of unity in community, let us remember never to meet hate with hate, but rather with unconditional love. After all, love, not hate, will always win.

I am honored to acknowledge formally the members of the Associated Student Body, the panelists, and our sponsors: the UMMC Associated Student Body, the UMMC Office of Diversity and Inclusion, and the UMMC Office of Alumni Affairs—all of whom helped make this event a possibility.

Sincerely,
Edgar R. Meyer
ASB Philanthropy Co-Chair
Graduate Student Body President

Panelists with the ASB President in order from left to right: Dr. James “Jimmy” Keeton, Dr. Juanycye Taylor, William Thomas, and Reverend Doris Whitaker

Dr. Keeton pictured with second year medical student Yassim Hegazy

Dr. Keeton and Dr. Taylor sharing a sentimental conversation

Office of Diversity and Inclusion

Office of Alumni Affairs
Hello, y’al,

I hope everyone has had a great start to the new school year. We in the Graduate School just want to fill everyone in on what has been happening during the month of August.

Cheers,
Edgar R. Meyer
GSB President

The Start of a Busy Year

New Student Welcome Supper
Fellowship | New Grad Students | August 15, 2017
The New Graduate Students gathered for a warm Southern welcome with warm Southern food. Dig in!

ASB Be the Match Drive
Service | Grad Students | August 21-25, 2017
The Graduate Students participated in the Be the Match Bone Marrow Registry Drive sponsored by the Associated Student Body. We hope to Be the Match!

Interprofessional Welcome Luncheon

Fellowship | Grad Students | August 25, 2017
The Graduate Students gathered together to celebrate the start of a new school year with Cosmic Bowling and food. The party was out of this world!

Mingling with Colleagues

FOLLOW US | LIKE US

CONTACT US

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2017 White Coat Ceremony

This year’s annual White Coat Ceremony was held Thursday August 10, 2017 at the Belhaven Performing Arts Center. This class is the largest medical school class in UMMC’s history at 155 students. The class of 2021 is also the first to inhabit UMMC’s new, state of the art $74 million School of Medicine building.

Hero in Disguise

With 65 units of blood collected in a span of only six hours, The Hero in Disguise ASB Blood Drive on Friday, August 18th was deemed a success! Kristen Harvey, School of Graduate Studies, was the winner of a front-row parking spot for the month of September.

Madeleine Maund (L) and Julianne Ranis (R), two School of Nursing seniors, depicted showing off a fashionable T-shirt, courtesy of Mississippi Blood Services.

Veterans Drive

What?: Veterans Drive

When?: Monday, September 18 - Friday, September 29

Where?: 7 locations on campus

* Deposit supplies for your respective school in the designated bin within the matching school.

Bin Locations by School

- SCID - 4th floor near student lounge
- SGSM - graduate school office
- SHKP - Front desk in SHKP building
- SOM - Student Break Room in new SOM (ground floor)
- SON - Area near offices on north end
- SONH - Small area on north end of School of Pharmacy
- SOPH - Referrals Dr. Natalie Gauthier

Supplies Requested

- Dental Supplies (e.g., toothbrushes, toothpaste, mouthwash, dental floss)
- Hygiene Products (e.g., soap, shampoo, deodorant, shaving cream, disposable razors, etc.)
- Clothing (e.g., underwear, socks, T-shirts, ponchos, flip-flops, etc.)
- Miscellaneous (e.g., backpacks or duffle bags, blankets, thermoses, non-perishable snack foods, etc.)

For more information, please contact ASB Philanthropy Co-Chairs:

Edgar R. Meyer at emeyer@umc.edu or Emily K. Theriot at etheriot@umc.edu

Madeleine Maund (L) and Julianne Ranis (R), two School of Nursing seniors, depicted showing off a fashionable T-shirt, courtesy of Mississippi Blood Services.
Methodist Pain & Spine Center welcomes Raechel L. Percy, D.O. to its staff. Dr. Percy specializes in sports medicine, musculoskeletal medicine, amputee rehabilitation and care and musculoskeletal ultrasound. She completed her residency at the University of Kentucky’s Physical Medicine and Rehabilitation Department in June 2017, and earned her Doctorate in Osteopathic Medicine from the University of Michigan in 2013.