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UNM medical students put their fingers on the pulse of local health during rotation

By Andrew Oxford

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Spending the summer in Taos was no vacation for five University of New Mexico School of Medicine students.

Zoe Clark, David Fischman, Tomas Valerio, Anna Vestling and Theodore Weatherwax completed clinical rotations in Taos earlier this month and raised big questions about the local impact of diabetes.

"We tried to help understand the disease burden, try to understand the cost of the disease and come up with a system that rewards doctors for reducing that burden," said Tomas Valerio, a Taos-based and UNM School of Medicine student who spent the summer working alongside doctors at Taos Medical Group.

The students asked how many people in Taos are living with diabetes and what has worked for them in controlling the disease. But answering those questions turned out to be more difficult than they anticipated.

"The lynchpin for all that are data systems that are easy to access, that are easy to analyze and that are shared between different practices," he said. But that information is not at doctors' fingertips here.

Dr. Neal Friedman, an endocrinologist at Taos Medical Group this summer, said millions are spent on health care in Taos County every year. "We can't identify where that's spent," he said.

"We should be able to press a button and see all the 40-year-old men with diabetes," he said. "The systems are not designed to do that even though they should be."

Undeterred, the students collected data from laboratory results at Holy Cross Hospital they hoped might help create a profile of diabetics in Taos. They ended up with approximately 36,000 lines of data but little way to use it.

If they could, health care professionals might be able to more easily identify at-risk patients and better determine what's working for local diabetics. It could save money, too, by eliminating the need for duplicative tests that may be on file at one doctor's office but not at another.

"There's a wealth of data in all of these records but you often have to pay for the data to be freed up — a lot of these health records require an extra fee or require the purchase of an extra software system to use the data. That's one of the barriers we're facing," Valerio added.

But without combining data from across the community, it's impossible to develop a true understanding of the risk posed by chronic diseases such as diabetes.

That disconnect in information is a problem particular to health care in rural communities, according to Taos Community Health Plan CEO Jim Peterson.

“You have health systems in Albuquerque and Denver that can spend millions of dollars on a data management system to pull all this together. They can have their own software engineers, their own servers. They can do this all on their own because they have essentially unlimited resources,” Peterson said. “That doesn’t exist in rural medicine, especially not here in Taos.”

At Taos Health Systems, which includes Holy Cross Hospital and Taos Medical Group, health records are already digitized in one single database.

“I can give you the profile of a diabetic who has shown up at the hospital,” chief information officer Spencer Hamons said. But identifying at-risk Taosenos who have never set foot in the hospital, which might be possible with data from providers across the community, would require an “extremely complex and extremely costly system.”

Health-care providers across Colorado are already building such a system, however, and Hamons is helping develop a New Mexico health information exchange that would share more patient data throughout the state.

Liberating health care information from IT vendors and putting it in the hands of doctors may be a long struggle, however.

In the meantime, the UNM medical students who spent their summer here will keep working away on developing a better understanding of diabetes in Taos.

And even if there were no easy answers for the students’ project, working in Taos has been a learning experience of its own.

“We definitely get the feel the doctors in this community really have their fingers on the pulse,” Vestling said.

Showing medical students what working in a rural community can offer was a key part of their six-week stint in Taos. Part of UNM School of Medicine’s Practical Immersion Experience (PIE), the program sent 100 first-year medical students to 20 primary care practices across New Mexico.

“The PIE is a unique component of medical education here at UNM, teaching students about varying cultures, patient empathy and the general health care system, while having a significant impact on where students consider practicing once they’re out of school,” says Daniel L. Stulberg, MD, professor with the Department of Family and Community Medicine and PIE director.

And perhaps, medical school officials hope, the program will entice students to work in New Mexico’s rural communities.

“Going into medicine, I think there is that concern you are going to become a jaded physician because not every physician is optimistic,” Fischman said. “But so many here are [optimistic].”