



Historical Happenings

Newsletter of the Physician Assistant History Society

Message from the President



*Maryann F. Ramos, MPH,
PA-C Emeritus*

It was with awe and wonder that I looked upon the many accomplished and energetic PA leaders who had applied for the one PAHx Board of Trustees position that begins January 1, 2019. How great that there is such interest in documenting our professional history. The PAHx Nominating Committee has reviewed the many outstanding applications. The committee will send their recommendation for the new trustee to the NCCPA Board of Directors for final approval at their November meeting.

We thank Karen Mulitalo, PA-C, the outgoing PAHx trustee and immediate past president, who has contributed so much to our Society's mission over the past six years.

A PAHx milestone occurred Sept. 27-28, 2018 with the inaugural PA Historian Boot Camp. We welcomed 12 engaged participants who came to the PAHx headquarters with a zest for PA history and an interest in becoming future historians! They learned

- valid historical data collection methods
- archivist duties and best practices
- how to write biographies and conduct oral histories

The Boot Camp also was an AAPA-approved CME lecture course.

Thanks to Maha Lund, Hank Heard, Reg Carter, Ruth Ballweg, Michelle Schabowski, Dawn Morton-Rias, Lori Konopka-Sauer and Connie Mara for working diligently on this activity. Read more about the Boot Camp on page 10.

(President's Message, continued on page 2)

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We look forward to seeing you in Anaheim at the PAEA Forum!

It's the happiest place on Earth: **the PA History Society Booth!!** So stop by the **Society's Booth** for a fabulous, fun, free fan! This small fan will fit in your pocket and keep you cool after you attend the PAEA sessions and head off to visit Minnie and Mickey Mouse! Show you're a fan of PA history by taking a photo of yourself with your favorite Disney character and tag PAHx when you post it (Twitter: @pa_hx FB: Physician Assistant History Center)!

(PAEA Forum, continued on page 2)

(President's Message, continued from page 1)

Having celebrated PA Week (Oct. 6 – 12, 2018), we PAs are seen as solid and needed medical providers today. In the early days that wasn't always so. It has been more than 50 years since the iconic physician, Eugene Stead, explained how trained Army Medics and Navy Corpsmen could become physicians' colleagues amid a shortage of medical providers. He argued that we were needed then; most administrators and patients say we are very much needed now.

I stumbled onto the PA concept just four years after the profession's beginnings. It was suggested as a path for me to provide medical care. Like many other PAs who believe in the importance of PA history, it was a joy to work with others in the 70s, 80s, and 90s in New Jersey and in Connecticut. We helped establish legislation (including prescriptive practice) and are continuing the fight for Puerto Rico.

Challenges continue with documenting the PA concept now and into the future. The newest generation of PAs must build on our unique PA history. They must join forces with senior PAs to guide us on an upward, worldwide track that warrants even broader knowledge of that history.

(PAEA Forum, continued from page 1)

The **PAHx Booth** will be located in the **PAEA "Solutions Pavilion"** (formerly Exhibit Hall) inside the Disneyland Hotel Conference Center. Learn

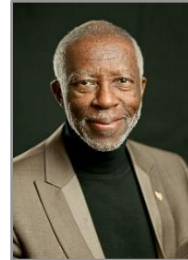


more about the Society's popular **Toolkits**, and other educational resources created by your friends at the PA History Society. And for those conference ribbon collectors, we'll also have our flashy badge ribbons!

Visit the PAHx team at **Booth #30** in the **PAEA "Solutions Pavilion"** on Oct. 25 and 26 from 7 a.m. – 4 p.m., and Oct. 27 from 7 a.m. – 12 noon. We look forward to speaking with you then!

The AAPA Minority Affairs Committee: Decade of the '90s

John J. Davis, PA-C, DFAAPA



"This is how we do it!" This was the mantra that reflected the ideals and attitude among Minority Affairs Committee (MAC)/African American Special Interest Group(AASIG)/African Heritage Caucus (AHC) members during the decade of the '90s. We had gone from our first MAC meeting in a space previously used as a conference hotel broom closet in the decade of the '70s to gaining national and international respect in the decade of the '80s. MAC's name changes were based on the desires of the American Academy of Physician Assistants (AAPA) and the MAC members. In the '90s we were able to tell America and the world that, *"This is how we do it."*

In the '90s, PAs of color made tremendous strides in advancing the PA profession to become the worldwide, international quality health care providers that we are today. We were known from Africa, to the Caribbean, to Canada, to Asia. PAs traveled, provided health care education, and guided the people of the world. African Heritage Caucus members were serving in many professional leadership positions.



Photo Credit: John Davis,
PAs for the Future
"Meeting Is Over"

American Academy of Physician Assistants House of Delegates:

- Wendell Wharton, Secretary, First Vice Speaker, AAPA House of Delegates
- Rebecca Pinto, Delegate representing the constituent organizations of Massachusetts, Ohio and California, AAPA House of Delegates
- Murl Dotson, Delegate representing Mississippi Academy of Physician Assistants
- John Davis, Delegate representing Tennessee Academy of Physician Assistants

(MAC: Decades of the '90s, continued on page 3)

(MAC: Decades of the '90s, continued from page 2)

Board of Directors:

- Robert Howell, Director-at-large, AAPA Board of Directors
- Carl Toney, Director-at-large, AAPA Board of Directors

Committees:

- Peggy Valentine, Chair, AAPA MAC
- Sara Chan Davidson, Chair, AAPA MAC
- Susan Jackson, MAC, Project Access
- Les Howard, Nominating Committee

Special Interest Groups/Caucuses:

- Robin Hunter-Buskey, Moderator, African American Special Interest Group
- Bill Dillard, Moderator, African Heritage Caucus (AHC)
- Stephanie Haiba-Collier, Moderator, AHC
- Delores Middleton, Moderator, AHC
- Theresa King, Editor, The Drum

Constituent Chapters:

- Stephanie Haiba-Collier, Chair, MAC, California Academy of Physician Assistants
- Terry Scott, President, Washington Academy of Physician Assistants
- Joe Tate, Board of Directors, California Academy of Physician Assistants
- Ed Williams, DC Chapter American Academy of Physician Assistants

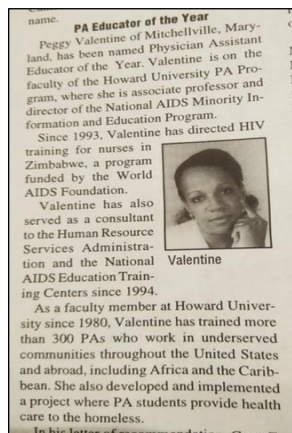
Liaisons:

- Sharon R. Roland, AAPA Liaison, National Medical Association (NMA)
- Dorothy Singleton, AAPA Liaison, NMA

Award Recipients:

- Nate Alston, AAPA Outstanding PA of the Year
- Murl Dotson, AAPA Public Education Achievement Award
- Peggy A. Valentine, PA Educator of the Year, 1997

Photo credit:
AAPA Conference Daily,
May 27, 1997



Student Academy Assembly of Representatives (AOR):

- Jose Rodriguez, Vice President, AAPA Student Academy; Assembly of Representatives (AOR)
- Charlezetta Roberson, MAC Director, AAPA Student Academy

Physician Assistant Education:

- Ron Garcia, President, APAP Board of Directors
- Dawn Morton-Rias, Vice President, APAP Board of Directors
- Peggy Valentine, Chair, PA Department, Howard University
- Brenda Jasper, Director, PA Program, Howard University
- Stephanie Haywood-Bowlin, Site Visitor, Accreditation Review Commission on Education for the Physician Assistant (ARC-PA)
- John Davis, Duke University PAP Alumnus of the Year

Other:

- Dortehea Green, Health Service and Education Mission to Haiti

The Decade of the 90s was a time of the ever-growing menace of the unchecked spread of HIV/AIDS, the continuing health care crisis in America and the major injuries of soldiers returning home from the 1st Persian Gulf War. PAs of color saw a continuing increase in involvement in the PA profession. They served as providers, educators, administrators and strong activists in the politics of the profession. AHC PAs held major leadership positions and are credited with helping to enhance the awareness of the capabilities of PAs in the US and around the globe. AHC PAs could proudly say that, "This Is How We Do It."

Thanks to AAPA Conference Daily and the authors, editors and contributors of "The Drum" Newsletters for their assistance with the information above. If we have omitted your leadership service from the decade of the '90s, please notify the author so we may modify the records.

Photo Credit: AAPA
Conference Daily, 1994



The Past is Prelude – Opioid Crisis

Courtney Corboy, PA-C

In the spring issue of Historical Happenings, I wrote an article about the American Academy of PAs' support of Impaired Practitioners, as no one is spared by the opioid crisis. In a surgical PA-C position, I, along with other PAs on the front lines of pain management, prescribe opioids daily. It's time to reflect on our practice of opioid prescription and how it may be contributing to the opioid epidemic.

We've seen the progression of AAPA policy recognizing the need to identify, treat, and prevent substance abuse and addiction as follows:

- HP-3300.1.12.0 "PAs should attempt to identify patients with addictive disorders and appropriately refer them for treatment." [Adopted 2002, reaffirmed 2007, 2012, 2017]
- HX 4200.1.6 AAPA recognizes the significant public health implications of substance abuse, to include both nonmedical use of prescription drugs and illicit substance use and encourages PAs to take an active role in eliminating substance abuse. AAPA supports the education of all PAs in the early identification, treatment and prevention of substance abuse. [Adopted 2005, reaffirmed 2010, amended 2015]
- HX-4200.1.6.1 The AAPA encourages student and graduate PAs to recognize the crises of pain management and opioid abuse. The AAPA encourages student and graduate PAs to work towards a solution to these crises at the local, state, and national levels through advocacy, collaboration and education for students and practicing PAs about responsible opioid prescribing. [Adopted 2016]
- HX-4200.1.6.2 AAPA supports increased access to opioid treatment programs for patients with opioid use disorder, and therefore recommends identification and removal of obstacles to full PA utilization in such programs. [Adopted 2016]
- Hx-4200.1.6.3 AAPA supports PAs as vital members of the healthcare team in the treatment of opioid use disorder. AAPA further supports PAs having the same buprenorphine specific educational requirements and patient capitation limits as physicians when treating opioid use disorder. [Adopted 2018]
- Hx-4200.2.1.1 AAPA endorses establishment of supervised injection facilities in order to decrease the adverse health, social and economic consequences of the ingestion of illicit drugs, and supports the amendment of all pertinent federal, state and local laws necessary to allow the establishment of supervised injection facilities. AAPA also encourages state constituent organizations to advocate for the establishment of supervised injection facilities. [Adopted 2018]
- HX-4600.5.5 AAPA endorses increasing public access to naloxone for secondary administration for the reversal of opioid overdoses and supports the establishment and expansion of naloxone prescribing distribution programs. [Adopted 2012, amended 2017]
- HX-4600.5.6 AAPA advocates for legislative and/or regulatory changes to remove legal and regulatory barriers to prescribing, dispensing, or distributing naloxone for secondary administration for the reversal of opioid overdoses. [Adopted 2012, amended 2017]
- HX-4600.5.7 State chapters are encouraged to collaborate with public health agencies, addiction treatment organizations, local and state medical societies, patient advocacy organizations, and other entities to seek legislative and/or regulatory changes to remove barriers to the prescribing, dispensing, or distribution of naloxone for secondary administration for the reversal of opioid overdoses. [Adopted 2012, amended 2017]

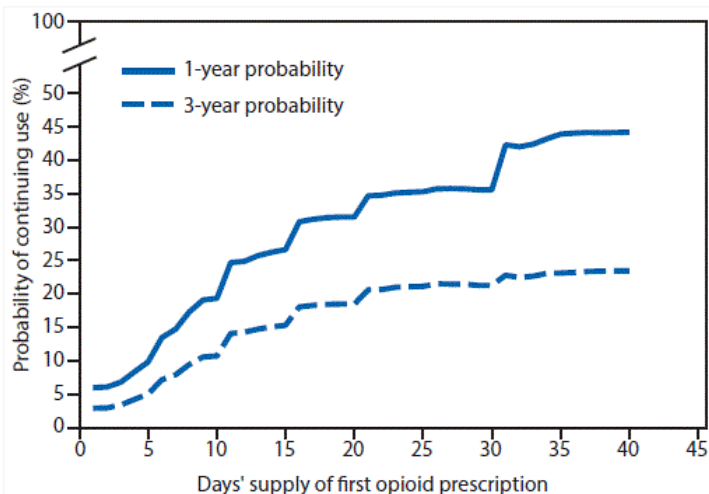
(The Past is Prelude, continued on page 5)

(The Past is Prelude, continued from page 4)

More recently we have seen a huge effort to increase PA scope of practice for treatment of opioid addiction. Such efforts helped achieve the 2016 Comprehensive Addiction and Recovery Act (CARA) signed by President Barack Obama. Under CARA (that intends to prevent and increase treatment for opioid addiction), PAs are now allowed to prescribe buprenorphine in the treatment of opioid use disorder after applying for a waiver to do so. In order to obtain a waiver, a fixed amount of CME hours can be obtained via a Waiver Training Program created in collaboration by the AAPA, American Association of Nurse Practitioners, and American Society of Addiction Medicine.

Outside of this work, AAPA is one of 10 organizations that partnered to create the [Collaborative of REMS](#) (Risk Evaluation and Mitigation Strategy) Education. CO*RE works to promote education and safety of pain management and addiction. CO*RE provides a wealth of information such as state specific information, field notes highlighting Opioid Use Disorder, and live educational programs. PAs can access the same program on Safe Opioid Prescribing via the [AAPA LMS](#). The attached graph shows probability of continuing opioid use correlating with the number of days' supply of first opioid prescription from the CDC.

PAs are on the front lines of pain management, in surgery, acute, and chronic pain. We are helping our patients cope with pain. At the same time, we must reflect on each decision to prescribe an



opioid. There are times when opioids are necessary for pain control, but we must consider non-narcotic pain medications, referencing our state's Prescription Drug Monitoring Program, consulting an expert to help taper, and identifying and counseling Opioid Use Disorder patients to get further help.

Thank you to Marie-Michele Leger, MPH, PA-C, AAPA Director of Clinical Education, for helping me find these excellent resources on this topic.

- CO*RE <http://core-rems.org/>
- CME on opioid prescribing <https://cme.aapa.org/opioidrems.aspx>
- Learn more about your state's Prescription Drug Management Program <https://www.cdc.gov/drugoverdose/pdmp/states.html>
- AAPA Policy Manual 2017-2018 <https://www.aapa.org/wp-content/uploads/2018/01/PM-17-18-WEB.pdf>

Recognizing the 50th Anniversary of the American Academy of Physician Assistants

Leslie A. Kole, PA-C and Marilyn H. Fitzgerald, Honorary PA

The American Academy of Physician Assistants is observing its 50th anniversary this year. Led by a staff of 93 dedicated individuals, the AAPA works to ensure the professional growth, personal excellence and recognition of PAs to enhance their ability to improve the quality, accessibility and cost effectiveness of patient centered healthcare. AAPA's services for its 57,000+ members cover advocacy and government relations, professional practice, education, public awareness, publications and leadership.

Early history that included obstacles and challenges faced by the organization's leaders and how they were slowly overcome is documented in "The Roots of the AAPA," which was published in JAAPA 1992;5:671-678. Access the article here: <https://pahx.org/wp-content/uploads/2018/10/Article-The-Roots-of-the-AAPA.pdf>

(AAPA 50th Anniversary, continued on page 6)

(AAPA 50th Anniversary, continued from page 5)

Founding president (1968-1970), William D. Stanhope, says, “Most have no idea just how foundational the first few years were, nor appreciate the work that was accomplished by the AAPA’s early leadership and members for whom failure was simply not an option.”



Details on AAPA’s progress, achievements and leadership in its 50-year history may be found at this link. <https://www.aapa.org/about/history/>
https://www.aapa.org/wp-content/uploads/2018/03/History_Milestones_3.13.pdf

When asked what he was most proud of as the AAPA concludes its 50th year of existence, Jonathan Sobel, PA-C, MBA, DMSc, President of the AAPA said, “In 50 years, we have proven that the experiment has worked and has been a huge success. PAs have solidified their position in the health care delivery system and are highly regarded in all practice specialties and settings.” The AAPA has contributed greatly to this success. “Moving into the profession’s next phase means looking at our brand and supporting our state chapters’ efforts to modernize PA legislation. The AAPA is on the forefront of these actions.”

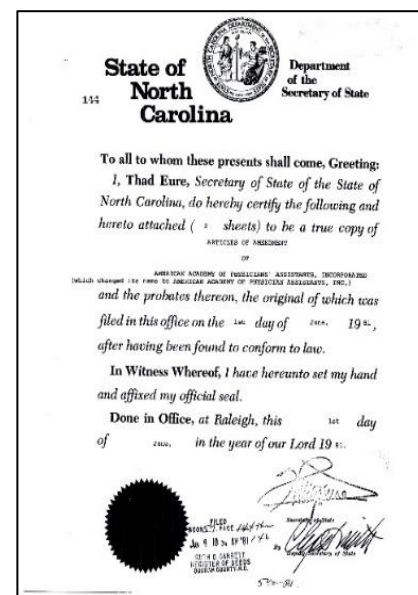
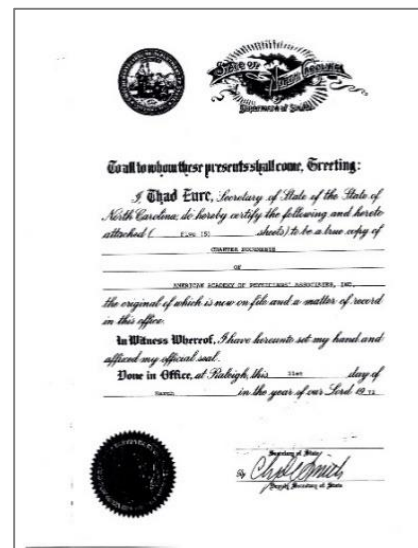
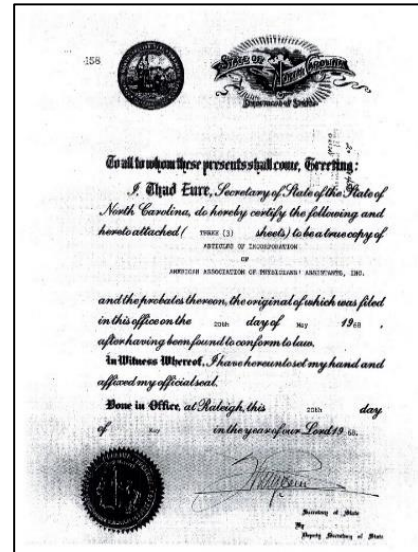
Please join the PAHx in congratulating AAPA on their 50th anniversary and success since its founding in 1968.

AAPA Articles featured in right column:

May 20, 1968: The Articles of Incorporation of the **American Association of Physicians’ Assistants, Inc.** were filed with the North Carolina Secretary of State.

March 31, 1972: The Articles were amended to change the name to the **American Academy of Physicians’ Associates.**

June 1, 1981: The Articles were amended again to change the organization’s name to its current **American Academy of Physician Assistants.**



IN HIS OWN WORDS – *William D. Stanhope, PA*

What is your fondest memory of being the first president of the AAPA?

At the end of my two-term tenure, the realization that we had created a fundamentally viable organization. The newly organized “student chapters,” such as those at Bowman Gray (Wake Forest University) and Alderson-Broadus College, assured me that we would be able to sustain our growth beyond Durham and the Duke program.



What was your biggest challenge as the founding president of the AAPA?

There were several interconnected challenges, each of which had the potential to enhance or severely limit the nascent growth of the organization. The first hurdle came from within my peer group many of whom were skeptical of the value of such an organization.

Then we had to overcome the parochialism of many of the original AAPA members and the Duke program leadership who wanted to restrict membership to students/graduates of what had become known as “Type A” programs. That would have precluded membership from the MEDEX community and the Child Health Associates. Once that was settled, then came the challenge of establishing student chapters/graduate membership from the MEDEX and the CHA programs, whose program leadership was not at all supportive of the Academy’s effort to develop a unified voice of an organization led by and capable of speaking for the PA community. Concurrently we began the struggle to gain recognition from organized medicine (AMA) and the existing programs as the unified voice of the profession.

What was the first AAPA conference like?

The first true AAPA meeting occurred at Duke in 1970 and was consumed by the very contentious discussion about who should be “allowed” to become a member of the organization. There was, however, a

significant portion of the meeting given to our first efforts in providing CME.

How did your past military experience prepare you for being a PA?

I have given this a lot of thought as I have listened to the debates about the value/importance of experience as a prerequisite for admission to PA programs. Personally, my military experience introduced me to the “culture” of medicine, which placed the patient above all else and to a vocabulary which made the material presented in the classroom understandable. My service experience as an OR technician and ER corpsman gave me a realization that medicine was for me a vocational calling. Finally, as a very young E-5, I learned valuable lessons about leadership, which have stood me in good stead throughout my career.

What clinical specialty was your favorite? Why?

Although I have worked in both orthopedic and neurosurgical spine care, I ultimately was drawn to the challenges of both acute and chronic pain management because of the interplay between the social, behavioral, emotional and physical aspects of complex pain problems. I intuitively recognized that aggressive acute pain management could in some large measure attenuate the potential of chronic pain states developing. Ultimately, I came to relish both the diagnostic and therapeutic challenges posed by “chronic pain patients” who had “failed the cure.”



Can you share a particular lesson that your involvement in PA education taught you?

First, there is nothing a smart person can’t learn and students will always rise to the expectations of the program/instructor. Second, involvement with and a commitment to our profession

begins on the first day of class and must be reinforced throughout the educational process.

If you could select one word to describe your career, what would it be?

Humbling

(IN HIS OWN WORDS, continued on page 8)

(IN HIS OWN WORDS, continued from page 7)

How can the PA profession increase minority representation?

A substantive increase in minority representation in our profession requires a different level of commitment than is apparent across today's landscape. It will require a commitment that must start with an in-depth understanding of the complex reasons for the underrepresentation which at the root start with the educational disparities pervasive through-out public education. Then the profession will need to mount a concerted campaign of recruitment, acknowledging that many potential students will be "non-traditional" students who arrive in professional schools with economic, educational, cultural and economic burdens far in excess of those faced by traditional students. Programs have to be prepared to commit to developing and implementing a set of resources that are labor intensive and designed to anticipate and address the challenges mentioned above. And I strongly believe that all programs must do a better job in socializing all students to a mission of redressing the shameful issues associated with existing health disparities.

What is your current passion or interest?

For the past six years I have been a docent at the Martin Luther King National Historical Park in Atlanta. I have become consumed by the complexities of our nation's inability to address and redress our sordid history of social injustice and the seeming acceptance of daily acts of racial prejudice and profiling. As a former medical practitioner, I am particularly incensed by the complacency of the health community about the shameful data surrounding health and educational disparities which result in a wanton waste of human capital.

All things PA History can be found on our website at www.pahx.org!

The First PAs in The Republic of Ireland

Ruth Ballweg, MPA, PA-C Emeritus

The new PA Program at the Royal College of Surgeons of Ireland (RCSI) graduated its first students in May of this year and will accept its fourth cohort of students early in 2019.



Separately, a new PA program has also opened in Northern Ireland at the University of Ulster and admitted its first cohort in the Spring of 2017, with a second cohort beginning their training one year later.

This article focuses on the RCSI program in Dublin with a second article on the Ulster program to follow early next year. Prior to these two programs, there have been no PAs practicing in either jurisdiction despite the rapidly growing numbers of PA Programs in the United Kingdom.

The RCSI program was initiated with the highest level of administrative support from the Dean of the Faculty of Medicine and Health Sciences, Professor Hannah McGee, PhD, DSc, FEHPS, and under the direction of the Head of the Medical School, Professor Arnold Hill, MCh, FRCSI. Medical Educator, Pauline Joyce, EdD, RN, was named Academic Director of the fledgling program. Professor James O'Neill was named Medical Director. RCSI Administrator, Emeke Okereke was also key to the development of the new program.

Having been involved in the earliest RCSI discussions about a new PA program for Ireland, David Kuhns, PA-C, was named the Founding Program Director at RCSI. Kuhns had previously taught at the UK's University of Birmingham's PA program under the leadership of Dr. James Parle. Prior to that, Kuhns had extensive clinical experience in emergency medicine, public health, and international medicine and was the first PA hired by Doctors without Borders.

(First PAs in Ireland, continued on page 9)

(First PAs in Ireland, continued from page 8)

Upon David Kuhns's return to the U.S. in 2016, I served as an advisor to RCSI Program until US PA Denni Woodmansee joined RCSI as the Program Director in 2018. Woodmansee recently retired from the U.S. Department of Veterans Affairs after 19 years as the first Director of VA Physician Assistant Services. Woodmansee also served as a Commissioner and later as Chair of the Board of the NCCPA. Under Woodmansee's direction, Pauline Joyce has continued work on the evolving curriculum and the hiring of new faculty members. The RCSI PA Program continues to adapt itself to be responsive to the health care access needs of the Republic of Ireland.

With clinical placements centered at Dublin's Beaumont Hospital—the RCSI clinical affiliate and teaching hospital—the program initially focused on hospital-based practice with plans for the additional expansion of the role with future classes of students. There is also the hope that other medical schools in the Republic of Ireland will soon develop additional PA programs.

One of the greatest needs in the Republic of Ireland's Health Care System is the reorganization of emergency/urgent care. General practices are not open in the evenings or on weekends, causing a deluge of patients in urban hospital emergency rooms. PAs can clearly be one of the solutions to this widely recognized problem.

As in all new countries, the development of the PA career in Ireland is more complex than it initially seemed. The need for recognition/regulation, the development of a program accreditation process, and the creation of an independent certifying exam are still to be done.

Eyes are also on the UK PA development process as they finally move toward regulation in either a medical or an allied health accreditation body. In both countries there is also the need for prescriptive practice and formal reimbursement policies.

Pop Quiz: Do You Know Your PA History?

Test your knowledge of PA history by answering this question:

When and where did the first organization form that today represents physician assistant graduates and students?

- A. 1965, University of Colorado, Denver, CO
- B. 1968, Duke University, Durham, NC
- C. 1969, Yale University, New Haven, CT
- D. 1970, University of Washington, Seattle, WA

Note: This question is from **Module Two: Creating a Unified Profession**. It relates to *Goal 1. Consider the purpose of professional organizations and regulatory bodies and discuss the reasons for membership and participation*. It is one of many found in the **Educational Toolkit** modules that the PA History Society has produced to assist PA educational programs in fulfilling their obligation (as detailed in the ARC-PA Standards of Accreditation) "...to instruct their students in the PA profession, its historical development, and current trends..." The Toolkit is available to PAHx Associates. Learn more about the [Associate benefits here](#).

QUIZ ANSWER: Please see page 11 of newsletter

PA History's PA Week Cyber Hunt!

Michelle Schabowski, MSIS

The PA History Society celebrated PA Week with a PA History Cyber Hunt! Each day of PA Week the Society posted on their social media sites (Facebook and Twitter) a question that could be answered by a search through the PA History Society Website (www.pahx.org) and online card catalog.



(Cyber Hunt, continued on page 10)

(Cyber Hunt, continued from page 9)

PA Week participants would send in the correct answer for that day to be entered in a daily drawing. The winners received a variety of fun products from the Society.

Do you want to test your own sleuthing skills?

Here are the questions that were asked of our PA Week cyber detectives:

1. Which PA was the first Army PA to serve in the White House Medical Unit?
2. How many states passed their first PA practicing legislation in 1971?
3. How many presidents/chairs of the NCCPA were women?
4. How many articles in our Library Collection were authored (or co-authored) by Reginald Carter?
5. How many photographs in our Photograph Collections involve Project Access?
6. In whose archival collection(s) do we have materials dealing with the New York Society of PAs (NYSSPA)?
7. Whose oral history interview is a firsthand account of the founding and early years of the Army PA program?

If you need tips to help search for the answers, each section of our website has a “How to Search” guide. You can also read our recent blog entry on how to look for information on our website and online card catalog:

<https://pahistorysociety.wordpress.com/2018/09/17/searching-the-pahx-website-online-catalog/>

Cyber Hunt ANSWERS: Page 12 of newsletter

***Many Thanks to our 2018
“Friends of the Society”***

| | |
|----------------------------|-----------------------|
| Nedley Archellus | Ruth Ballweg |
| Reginald & Sherry Carter | Harvey and Jean Estes |
| Marilyn & Mike Fitzgerald | Dan Fox |
| Deborah Gerbert | Patrick Killeen |
| Bill Kohlhepp | Cynthia Lord |
| Maha Lund | Dawn Morton-Rias |
| Orie Robert Potter | Maryann Ramos |
| John Stuemky & James Brand | Tamara Thorn |
| Wendell S. Wharton | Steve Wilson |

**PAHx Presents First
PA Historian Boot Camp**

“This is a great course/workshop”

“Awesome experience!”

“I would recommend this class to all colleagues interested in becoming a PA historian.”

At the end of September, the PA History Society welcomed 12 enthusiastic **“future PA Historians.”** Boot Camp attendees participated in two days of hands-on learning to develop their skills to *Save, Study, and Share* the history and legacy of the PA profession. Activities and mini-lectures were facilitated by the PAHx historians, volunteer Board of Trustee members, and staff. They focused on providing the Boot Camp participants with the abilities to identify materials and information most in need of preservation at their own institutions; to recognize gaps in the historical record and strategies to help fill them; to properly use archives, websites, and literature to help in their research; to creatively write and speak on PA history and the history of their own institutions; and, most importantly, to become an advocate for PA history. They all received 12 AAPA Category 1 CME credits to boot!



Each of the 12 one-hour sessions incorporated small group activities and discussions; the practical implementation of skills they had just learned; and suggestions of how these new skills will be applicable to their specific situation/institution.

Facilitators and participants alike left the Boot Camp feeling as if they had formed strong bonds with fellow PA history buffs and the motivation to preserve, advocate, and make their own marks on PA history.



*(Historian
Boot Camp
continued
on page 11)*

(Historian Boot Camp continued from page 10)

With such a successful inaugural “first class,” the PA History Society plans on holding another Boot Camp next year (TBD). We hope you will join us! In the meantime, please enjoy a few snapshots from the Boot Camp...



*Facilitator
Reginald Carter,
PhD, PA PAHx
Historian Emeritus*



*Small group
activity developing
a list of items to
collect and
preserve at their
institution*



*Facilitator
Ruth Ballweg,
PA-C Emeritus,
PAHx Historian*



*Facilitator
Maha Lund,
DHSc, PA-C,
DFAAPA
PAHx Trustee*



*Facilitator
Hank Heard,
DHSc, PA-C,
PAHx Trustee*



*Facilitator
Michelle
Schabowski,
MSIS,
PAHx Archivist*



*Small group
activity
processing a
donation and
developing
Finding Aids*

Two \$500 scholarships were awarded to Boot Camp participants, Eva Santos and Dwight Royston, to help them attend the workshop. The scholarships were generously provided by Paul Lombardo, MPS, PA-C Emeritus and James McGraw, PA.



Pop Quiz: Answer The Correct Answer is: B

Feedback: The American Academy of Physician Assistants (AAPA, formerly known as the American Association of Physicians' Assistants and the American Academy of Physicians' Associates) was established by Duke University graduates and students and was incorporated in the state of North Carolina in 1968.

PA Week Cyber Hunt ANSWERS:

1. Jimmie Keller
2. 6
3. 7
4. 10
5. 25
6. The Clara Vanderbilt Papers and David Mittman Papers
7. Ray Reed Oral History

and years of service. For more information please visit the PAHx [website](#).

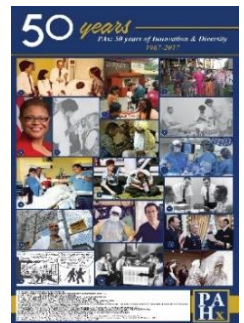


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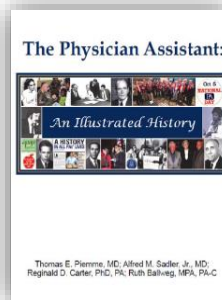
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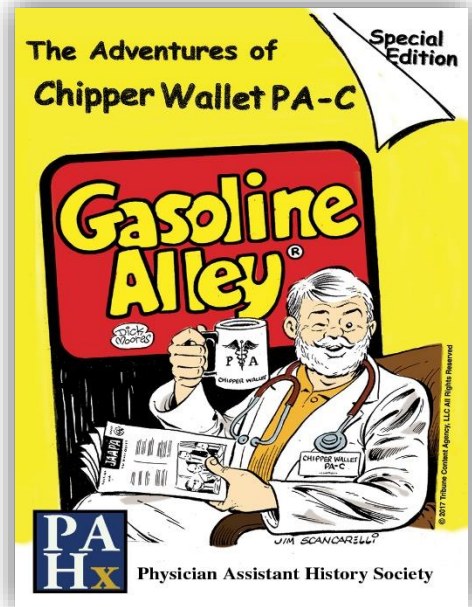
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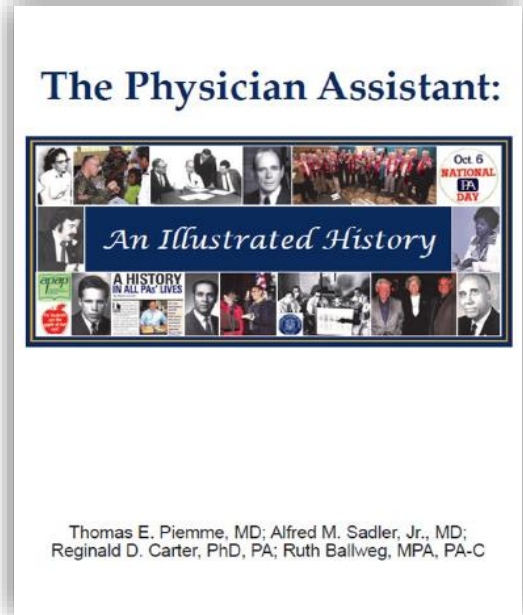
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