



#### EDITOR-IN-CHIEF

JEFFREY L. SUSMAN, MD Northeast Ohio Medical University, Rootstown

### ASSOCIATE EDITORS

BERNARD EWIGMAN, MD, MSPH

University of Chicago Pritzker School of Medicine

JOHN HICKNER, MD, MSc

Cleveland Clinic Medicine Institute

JOHN SAULTZ, MD

Oregon Health and Science University, Portland (Clinical Inquiries)

RICHARD P. USATINE, MD

University of Texas Health Sciences Center at San Antonio (*Photo Rounds*)

#### ASSISTANT EDITORS

DOUG CAMPOS-OUTCALT, MD, MPA University of Arizona, Phoenix

GARY N. FOX, MD

St. Vincent Mercy Medical Center, Toledo, Ohio

RICK GUTHMANN, MD, MPH

University of Illinois, Chicago

KEITH B. HOLTEN, MD

Berger Health System, Circleville, Ohio

GARY KELSBERG, MD, FAAFP

University of Washington, Renton

AUDREY PAULMAN, MD, MMM University of Nebraska College of Medicine, Omaha

PAUL M. PAULMAN, MD

University of Nebraska College of Medicine, Omaha

RICK RICER MD

University of Cincinnati

E. CHRIS VINCENT, MD

University of Washington, Seattle

## EDITORIAL BOARD

FREDERICK CHEN, MD, MPH

University of Washington, Seattle

LARRY CULPEPPER. MD. MPH

Boston University Medical Center, Boston, Mass

LINDA FRENCH, MD

University of Toledo, Toledo, Ohio

THEODORE G. GANIATS, MD

University of California–San Diego, La Jolla, Calif

JEFFREY T. KIRCHNER, DO, FAAFP, AAHIVS

Lancaster General Hospital, Lancaster, Pa

FRED MISER, MD, MA

The Ohio State University, Columbus

JANE L. MURRAY, MD

Sastun Center of Integrative Health Care, Overland Park, Kan

KEVIN PETERSON, MD, MPH University of Minnesota, St. Paul

offiversity of Militiesota, 3t. r

GOUTHAM RAO, MD, MPA University of Chicago

DOUGLAS R. SMUCKER, MD, MPH

University of Cincinnati

JEFFREY R. UNGER, MD

Catalina Research Institute, Chino, Calif

BARBARA P. YAWN, MD, MSC Olmsted Medical Center, Rochester, Minn

## DIRECT EDITORIAL INFORMATION

AND INQUIRIES TO: EDITORIAL OFFICE

Northeast Ohio Medical University 4209 State Route 44; PO Box 95 Rootstown, OH 44272

Telephone: (330) 325-6254

PUBLISHING OFFICES

Quadrant HealthCom, Inc.

7 Century Drive, Suite 302 Parsippany, NJ 07054

Telephone: (973) 206-3434; Fax: (973) 206-9378



**Jeff Susman, MD** Editor-in-Chief

# It takes a village

am L was a roofer with an unfortunate penchant for alcohol. The combination turned tragic when he fell off a roof and incurred a traumatic brain injury. From Sam's initial emergency management to the longer term rehabilitation, his care involved multiple providers: physicians, nurses, and pharmacists; occupational, speech, and physical therapists; psychologists, social workers, and substance abuse counselors, all coordinated by a family physician in our patient-centered

medical home. Thanks to the collaborative care he received, Sam is sober and back up on roofs, looking healthier than ever before.

But we all know far too many patients who are not as lucky as Sam. Patients whose health care team did not collaborate, and whose outcomes were not maximized, as a result. It is these patients who remind me that it's not just our health care system, but also the way health care professionals are educated, that requires radical retooling.

If we expect health professionals to have shared goals, we need to ensure that they are

that they are taught to collaborate and communicate effectively.

If we expect health

professionals to

have shared goals,

we need to ensure

taught to collaborate and communicate effectively. Despite the challenges of differing accreditation and licensing standards, countless logistic details, and professional pride, we need to reengineer health education—starting now.

Here's what I propose:

- Develop a common *pre*-professional pathway, starting in undergraduate school, to better prepare future health care providers to work collaboratively
- Provide training that emphasizes patient-oriented outcomes and wellness, rather than a sickness model of care
- Require future health care providers to take common courses in subjects that
  apply across disciplines, such as evidence-based medicine, patient-oriented
  communication, basic science, and physical assessment skills; integrate public
  health, population health, and preventive care into the curriculum.

I'm not suggesting that we eliminate professional disciplines, each of which has a rich history and a vital contribution to make. But I do think that physicians need to better understand the conceptual models underlying nursing and social work, say, and the special skills that pharmacists and dentists, among other health professionals, bring to the table.

I imagine a future in which all members of the health care team are prepared to collaborate and communicate for the good of our patients. I imagine a world in which teams like the one that Sam benefitted from are the norm—rather than the exception.

jfp@neomed.edu