Dr. Joseph Burns is the Vice Chair of Academics and Research and Professor of Clinical Physical Medicine and Rehabilitation for the Department of Physical Medicine at the University of Missouri, Columbia. He is board-certified in Physical Medicine and Rehabilitation and holds a BS in biology from the University of Missouri Kansas City, as well as a graduate degree in exercise physiology from the University of Kansas in Lawrence. An AAPM&R member since 1998, Dr. Burns has served on several Academy committees including the Program Planning Committee (2008-2015), the Vertical Stroke Planning Committee (2014-2016) and chair of the Graduate Medical Education Committee (2017 to present). He is a well-respected lecturer and has authored numerous articles and research abstracts. Dr. Burns received Physician Teacher of the Year, Department of Physical Medicine and Rehabilitation, honors in 2011, 2007-08, 2005-06, 2003-04.

Dr. Andrea Cheville is a Professor of Physical Medicine and Rehabilitation at Mayo Clinic in Rochester, MN. She received her MD degree from Harvard Medical School in 1993 and her Master of Science in Clinical Epidemiology degree from the University of Pennsylvania in 2006. Her areas of clinical and research interest are lymphedema and cancer rehabilitation, palliative medicine, and patient-reported outcomes. She is board-certified in Physical Medicine and Rehabilitation, Pain Medicine, and Palliative Care. Dr. Cheville has received funding from the National Institutes of Health, National Cancer Institute, and the U.S. Department of Defense. She was elected to the National Institute of Medicine in October 2016. Since his appointment as Professor and Chair at Harvard Medical School and Senior Vice President at Spaulding Rehabilitation Hospital, Dr. Zafonte endeavored to provide excellent clinical care, teaching, and administrative leadership while also conducting clinical research in TBI, SCI and rehabilitation outcomes. His department has grown significantly both academically and clinically. Through lecturing at the regional and national level, his scholarly writing of peer-reviewed original research and book chapters in authoritative textbooks, his clinical research (federally and foundation-supported research projects), and his involvement in advocacy organizations and other professional societies, Dr. Zafonte has sought to improve the lives of persons with traumatic brain injury, spinal cord injury and other catastrophic illness.

AWARD WINNERS

Frank H. Krusen, MD, Lifetime Achievement Award

The Academy’s highest honor is the Frank H. Krusen, MD Lifetime Achievement Award. It was established in 1972 in honor of Frank H. Krusen, a founding father and the fourth president of the Academy who was a leader in the development of the specialty of PM&R. Recipients of the Frank H. Krusen Award are selected for their outstanding and unique contributions to the specialty of PM&R in the areas of patient care, research, education, literary contributions, community service, and involvement in Academy activities.

2020 AAPM&R Awards Committee

Joseph E. Burris MD, FAAPMR

2020 AAPM&R Awards Special Issue

OCTOBER/NOVEMBER 2020

RECOGNITION.

AAPM&R has an awards program to recognize members who deserve the applause of their peers. Each year, Academy members are encouraged to submit award nominations to recognize lifetime achievement, distinguished membership, and public service, as well as pioneering physiatrists, clinicians, and researchers who have made significant contributions to both the specialty and to people with disabilities. Please join AAPM&R and its Awards Committee in congratulating this year’s award recipients, who will be honored at the AAPM&R 2020 virtual Annual Assembly.

2020 AAPM&R Awards Committee

Andrea L. Cheville MD, MISC, FAAPMR

Gail M. Mancini MD, FAAPMR

Dr. Steve Gnatz is the Chief Medical Officer for Integrated Rehab Consultants, a nationwide group of physiatrists who specialize in in-patient acute rehabilitation in Skilled Nursing Facilities (SNF) and Inpatient Rehabilitation Facilities (IRFs). He received his medical degree from the University of Illinois, and completed his internship and residency in PM&R at Baylor College of Medicine in Houston, Texas, where he served as Co-Chief Resident. After completing his residency, Dr. Gnatz became an Academy Fellow in 1988 and has remained active in the past 32 years. He has held numerous positions including Past President from 2007-current, President from 2005-2006, President-Elect from 2004-2005, Vice President from 2003-2004, Treasurer from 2000-2003, Member-at-Large from 1999-2000, Awards Committee from 2003-2004 and again from 2009-2010, Finance Committee from 2000-2003 and again from 2009-2012, Investment Committee from 2009-2012, and Program Planning Sub-committee from 1995-2000. For several years, Dr. Gnatz led the Preparing Yourself for Physiatric Practice preconference course at the Annual Assembly.

Dr. Ross Zafonte is an Associate Professor at Northwestern University Feinberg School of Medicine where she serves as the Director of Residency Training for the Department of Physical Medicine and Rehabilitation. She is also the Chief of Musculoskeletal Medicine for the Shirley Ryan AbilityLab (formerly known as the Rehabilitation Institute of Chicago). She is board-certified in Sports Medicine and PM&R. Dr. Zafonte is the head team physician for the U.S. Women’s National Soccer Team and was part of the 2019 Women’s World Cup Championship Team in France. She is the former head team physician for the U.S. Men’s Paralympic Soccer National Team and accompanied them to the Rio 2016 Paralympics. She currently serves on the Medical Advisory Board for U.S. Soccer.

Dr. Monica Rho is an Associate Professor at Northwestern University Feinberg School of Medicine where she serves as the Director of Residency Training for the Department of Physical Medicine and Rehabilitation. She is also the Chief of Musculoskeletal Medicine for the Shirley Ryan AbilityLab (formerly known as the Rehabilitation Institute of Chicago). She is board-certified in Sports Medicine and PM&R. Dr. Rho is the head team physician for the U.S. Women’s National Soccer Team and was part of the 2019 Women’s World Cup Championship Team in France. She is the former head team physician for the U.S. Men’s Paralympic Soccer National Team and accompanied them to the Rio 2016 Paralympics. She currently serves on the Medical Advisory Board for U.S. Soccer.

Dr. Rho received her undergraduate degree from Northwestern University and completed her medical degree and her residency training at Northwestern University Feinberg School of Medicine. She did her Sports Medicine Fellowship within the Department of Orthopedic Surgery at Washington University in St. Louis, MO. Dr. Rho was previously funded by a National Institute of Health K12 grant to study the neuromuscular control of the hip in femoroacetabular impingement. She has presented her research nationally and internationally.

Recipients of the Frank H. Krusen Award are selected for their outstanding and unique contributions to the specialty of PM&R in the areas of patient care, research, education, literary contributions, community service, and involvement in Academy activities.

PASSOR Legacy Award and Lectureship

Established in 2008 to preserve the legacy and nameake of the Physiatric Association of Spine, Sports, and Occupational Rehabilitation (PASSOR), this award is meant to recognize an individual in mid-career who has advanced musculoskeletal physiatry through clinical care, education, service or scholarship (research).

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Julie K. Silver, MD, FAAPMR

July K. Silver was listed by Bloomberg/Businessweek as one of the most promising social enterprise companies.

This award was established to honor individuals who, in the course of public service activities, have significantly contributed to the growth and development of services that directly impact the specialty of PM&R.

Stuart J. Glassman, MD, MBA, FAAPMR

is President of Granite Physiatry, a solo practice in Concord, New Hampshire. He was President of the New Hampshire Medical Society, and served on the New Hampshire Governor’s Commission on Disability. Dr. Glassman has served on numerous Academy advisory committees and councils, including the Health Policy and Legislation Committee, the State Advocacy Committee, the Public and Professional Awareness Committee, and the Board of Governors. He was Chair of the National Physicians Advisory Board for HealthSouth Corporation. Dr. Glassman is an AAPM&R Delegate to the American Medical Association and Vice-Chair of the AMMA’s PM&R Section Council.

Julie K. Silver, MD, FAAPMR

is an Associate Professor and Associate Chair in the Department of Physical Medicine and Rehabilitation at Harvard Medical School. Dr. Silver has held numerous leadership positions and is a start-up company founder. She was named the Top Innovator in Medicine in 2012 by The Boston Globe, the same year her start-up company was listed by Bloomberg/Businessweek as one of the most promising social enterprise companies.

Dr. Silver has been an integral part of developing the new Spaulding Research Institute—from conception to launch. Her own research and clinical work has focused on improving gaps in the delivery of healthcare services, particularly cancer rehabilitation. She has published many scientific reports and is well-known for her ground-breaking work on “impairment-based” assessment and practice.

The possibility of reducing risk by preventing or effectively treating complicating conditions offers an opportunity for the physiatric community. Complex illnesses that have no cure and whose mitigation leaves substantial sequelae is frequently the result of biology (genetics and physiology), environmental exposure, behavioral response and proper and timely treatment. The specialty of PM&R is well equipped to take the lead in managing factors that put patients at greater risk of severe COVID-19 by applying a biopsychosocial approach to the needs of individuals. For example, we have developed several approaches to reducing metabolic abnormalities such as better dietary control of lipids, glucose and inflammation. Some of these interventions require pharmacological treatment which is always enhanced by behavioral changes in diet and activity/exercise. All of these approaches have been proven safe, effective, accessible and low cost.

Severe post-COVID-19 medical problems also pose a rehabilitation challenge as many patients face multiple impairments. Reports from the early wave of infection showed multi-organ failure, significant residual pulmonary and cardiac dysfunction and cerebral nervous system syndromes including post-traumatic stress disorder, cognitive impairment, depression, severe fatigue and neuromuscular weakness. Many patients are discharged on oxygen with low exercise tolerance plus mobility and self-care difficulties. Physiatrists can and should play an important role in the leadership and coordination of multidisciplinary care to address cardiorespiratory function, weakness, cognitive performance, mood/behavior and reumption of life activities and roles.

There is historical precedent for physiatric intervention for victims of a worldwide post-infectious or pandemic related sequelae, both with tuberculosis and polio. Acute poliomyelitis had a significant influence on the development of the field. Even now, after development of a vaccine and near elimination of polio, physiatrists are involved in the management of post-polio syndrome which affects a significant proportion of individuals who survived acute polio and manifests as weakness, fatigue and pain occurring 15-60 years after infection. Rehabilitation of physical impairments due to ossuritis and/or arthritides and significant pulmonary sequelae of tuberculosis makes up a large proportion of physiatric care in the developing world where tuberculosis is still endemic and widely prevalent.

At this point, the only way out is through—but physiatry can lead our patients and health care system to better outcomes for all.

References:
7. https://doi.org/10.7759/cureus.7352

Thank you for nominating thank you to all members who participated in this year’s awards nominations. 2021 nominations will open in November; watch PhyzForum.org for details.

AAPM&R Introduces NATIONAL GRAND ROUNDS

Check out AAPM&R’s new webinar series, National Grand Rounds, which connects physiatrists of all specializations, from across the country, for stimulating discussions on topics that represent the intellectual, practical and/or spiritual aspects of the specialty.

These monthly forums will cover topics including telehealth and the evolution of patient care during the COVID-19 pandemic, the importance of mentorship, how much physiatrists have to offer to cancer patients and survivors, and much more. AAPM&R President Michelle Gitler, kicked off this informational series last month with a presentation entitled, “Getting into Good Trouble—Why Advocacy Should Be a Core Competency.” These sessions are free to everyone, will offer CME and can be accessed via the Academy’s online education portal at onlinelearning.aapmr.org.

We hope you will join us for these thought-provoking sessions, as we advance the specialty together.

Learn more at www.aapmr.org/grandrounds.

COVID-19 has created a unique need for physiatric care. The current coronavirus pandemic is violent, highly-contagious and has already claimed the lives of more than 185,000 Americans of all ethnicities, ages and health profiles. But people with co-morbidities such as diabetes, hypertension, coronary artery disease and people with cancer are at greater risk than most for developing a severe form of the disease.1,2

1. The possibility of reducing risk by preventing or effectively treating complicating conditions offers an opportunity for the physiatric community. Complex illnesses that have no cure and whose mitigation leaves substantial sequelae is frequently the result of biology (genetics and physiology), environmental exposure, behavioral response and proper and timely treatment. The specialty of PM&R is well equipped to take the lead in managing factors that put patients at greater risk of severe COVID-19 by applying a biopsychosocial approach to the needs of individuals. For example, we have developed several approaches to reducing metabolic abnormalities such as better dietary control of lipids, glucose and inflammation. Some of these interventions require pharmacological treatment which is always enhanced by behavioral changes in diet and activity/exercise. All of these approaches have been proven safe, effective, accessible and low cost.

2. Severe post-COVID-19 medical problems also pose a rehabilitation challenge as many patients face multiple impairments. Reports from the early wave of infection showed multi-organ failure, significant residual pulmonary and cardiac dysfunction and cerebral nervous system syndromes including post-traumatic stress disorder, cognitive impairment, depression, severe fatigue and neuromuscular weakness. Many patients are discharged on oxygen with low exercise tolerance plus mobility and self-care difficulties. Physiatrists can and should play an important role in the leadership and coordination of multidisciplinary care to address cardiorespiratory function, weakness, cognitive performance, mood/behavior and reumption of life activities and roles.

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