

+



+



+

+



+



+

+



+



+

+



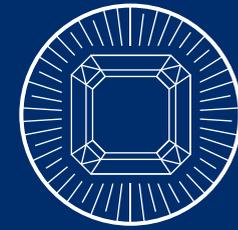
+

Looking In

DREXEL UNIVERSITY
COLLEGE of MEDICINE

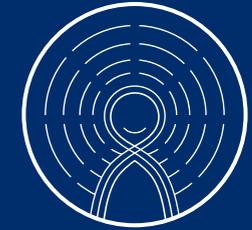
+

+



A HIDDEN GEM

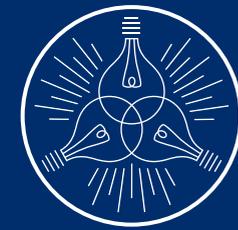
+



STUDENT CENTERED

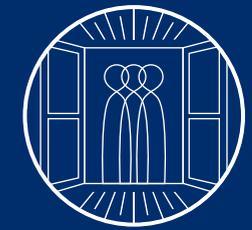
+

+



COLLABORATIVE

+



DIVERSE BY INTENTION

+

+



ENGAGED IN COMMUNITY

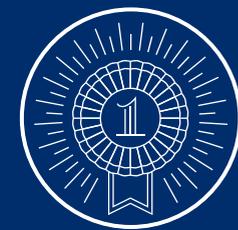
+



COMMITTED TO MENTORING

+

+



INSPIRING THE BEST

+

*A WINDOW
INTO OUR
CULTURE*

+



A HIDDEN GEM + + + + +



“People think of medical school as being competitive, but here we work together.”



Anthony Khong, Class of 2020, wasn't thinking about medical school as an undergraduate and he'd never heard of Drexel University College of Medicine. In fact, it wasn't until he went on volunteer missions in Ghana and Honduras that he started to consider a future in health care. That's when a friend told him about the Interdepartmental Medical Science program at Drexel. He was drawn to the idea that this pre-med program offered courses at the medical school level.



+ + + + +

DEFYING EXPECTATIONS

Drexel wasn't on my radar at all, so I didn't have any preconceived notions about it. I'm from the West Coast, and I never gave much thought to schools in the East. To be honest, I imagined big East Coast cities as crowded and uptight and unfriendly. When I started at Drexel, I realized I was totally wrong. The campus is friendly and comfortable, and the faculty is accessible and down to earth. The professors listen to what we have to say and they want our feedback. You can't walk a few steps without people waving to you and telling you to have a good day.

HOME AWAY FROM HOME

I immediately felt at home at Drexel. I grew up among a tightknit community of Vietnamese refugees in California. I was surprised to find the same sense of community here. Everyone was sharing notes, sharing ideas. There are no walls. This held true after I chose Drexel for my MD program. People think of medical school as being competitive, but here we work together. It's hard work, no doubt, but the emphasis on group learning and collaboration makes it a wonderful learning experience.

OPPOSITE

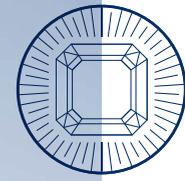
Anthony Khong first came East for one of Drexel's pre-med programs.

TOP

In simulation labs, students learn by doing, while practicing professional teamwork.

BOTTOM

Becoming part of a diverse community adds new perspective.



A HIDDEN GEM

“You can study medical science anywhere, but Drexel is a place where you learn how to care for people.”

ANTHONY KHONG, CLASS OF 2020

+ + + + +
+ + + + +
+ + + + +

THE WORLD ON CAMPUS

I didn't know just how diverse these programs would be. I love that I'm part of a group of people with roots from around the globe and all kinds of experiences. There's always an interesting conversation to have. That gives us an advantage as medical students — we can explore other cultures, learn how to relate to patients from different backgrounds and gain much more perspective about our role in health care. We may come from one sort of mold, but we leave here and enter the medical field with a much broader mindset. I'm still hoping to do more international volunteer work, and Drexel is preparing me for that.

LEARNING THE MEANING OF CARE

Another thing that some people don't realize is that this College of Medicine truly emphasizes patient interaction and bedside manner. We learn how to listen. You can study medical science anywhere, but Drexel is a place where you learn how to care for people. I've seen it in myself, how I've changed since starting the program. I'm more empathetic and compassionate. I have more awareness about what patients go through because we talk about loss, we think about human experiences and how we should treat people. I'm the first person in my family to go to college, and there was a time when I was just happy to get into medical school. I didn't realize what was in store for me, but now when I go out and talk to people, they're impressed. I'm learning what it means to have a Drexel medical education.



STUDENT CENTERED + + + +

"I've found that my fellow students are always eager to get involved and help in whatever way they can."

Allison Gutierrez, Class of 2018, knew she would be exploring a future career in women's health at Drexel University College of Medicine. Once enrolled, however, she discovered her second passion — working with underserved patients. She combined both interests in the program she launched her first year: Mothers and Baby Dragons. The program pairs medical students with low-income moms to help them prepare for birth and parenthood. Gutierrez found that the College of Medicine encourages student innovation and leadership — so much so that she started a second initiative.



FINDING A NEED

As I worked with patients at a student-run clinic, I was really struck by the poverty and its impact on their health, particularly during the stressful months of pregnancy. I was inspired to find more ways to help this vulnerable population. I came up with the idea for the program, and before I knew it, it just took off. We ended up matching 250 pairs of mothers and students over the past three years.

SELF-STARTER

Creating the program required getting support from the school and faculty, and the response was immediately positive. I went to the director of the Women's Health Pathway (the women's health concentration), and she helped me find a location where we could base our program. I got funding from the student government and started creating ads to attract participants. Eventually, I set up a leadership team so we could keep the program going year after year. I've found that my fellow students are always eager to get involved and help in whatever way they can.

REAL IMPACT

We saw right away that we could really help people with this program. Some of the work is simply getting women ready for labor and delivery and breastfeeding. But some of it is helping moms who are struggling with depression or abusive relationships. We might assist them in finding needed resources, like cribs, car seats, and transportation to prenatal appointments, or work with them to navigate the social services system. I came to Drexel with the goal of doing something I enjoyed and hopefully — as I learned from the Girl Scouts — to leave something good behind. I had an idea and I ran with it, and it's been wonderful to watch it grow.

NEW VENTURES

These days, I'm working on something called the Baby Box Project. We are creating boxes with a fitted mattress to act as a functioning bassinet for the baby, to discourage co-sleeping with the parents in hopes of reducing infant mortality rates. We fill the boxes with information and essential baby supplies and distribute them to women in need who deliver at Hahnemann University Hospital. We are creating 500 boxes this year, with the support of the chair of Drexel Obstetrics & Gynecology and donations from the community.

OPPOSITE

Allison Gutierrez found school and faculty support to launch a community program her first year.

LEFT

A new effort will provide 500 women in need with essential infant supplies.

RIGHT

Connecting underserved pregnant women and medical students helps future mothers and future doctors.



COLLABORATIVE



"It's an amazing resource for patients because they receive family-centered care in a one-stop shop."

A researcher and clinician, Florence Momplaisir, MD, MSHP, joined the faculty in the Division of Infectious Diseases & HIV Medicine three years ago. She works at the Drexel Partnership Comprehensive Care Practice, the largest HIV/AIDS practice in the Philadelphia region, and at the Dorothy Mann Center at St. Christopher's Hospital for Children, to help improve outcomes for pregnant women with HIV and their infants. Momplaisir is a research mentor to medical students and students in Drexel's School of Public Health. In her own research, she has collaborated with the Philadelphia Department of Public Health and academic medical centers throughout the area, as well as across Drexel.



AN INTEGRATED MODEL OF CARE

I see women who are patients of the Partnership Practice during their pregnancy. Our HIV-prenatal program offers an integrated model of care that incorporates obstetric, HIV and psychiatric care, and case management. After delivery, I see women who get HIV care for themselves and pediatric care for their infants at the Dorothy Mann Center. Both clinics are a collaboration between the Division of Infectious Diseases & HIV Medicine, Drexel OB/GYN, and the Department of Pediatrics, which is based at St. Christopher's. It's an amazing resource for patients because they receive family-centered care in a one-stop shop.

In most health services, there may be a strong clinical system to take care of women with HIV during the pregnancy, but they tend to fall through the cracks in the postpartum period. We have a mental health counselor and a perinatal case manager on staff, too, which are both important for good outcomes. That coordination, and the fact that patients can stay in one place for their care, is unique.

SEEKING SOLUTIONS

I have a four-year grant from the Robert Wood Johnson Foundation to find out more about women with HIV in Philadelphia and their barriers to care. Many women are motivated during pregnancy to protect their infant from HIV, and the majority of deliveries result in babies who are HIV negative. At the same time, we see that there are still many personal and structural barriers to treatment, including a lack of resources. I'm trying to determine what these are and help figure out better interventions for these patients.



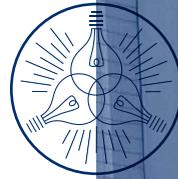
LEFT

Florence Momplaisir sees pregnant patients with HIV and also researches ways to improve their care.

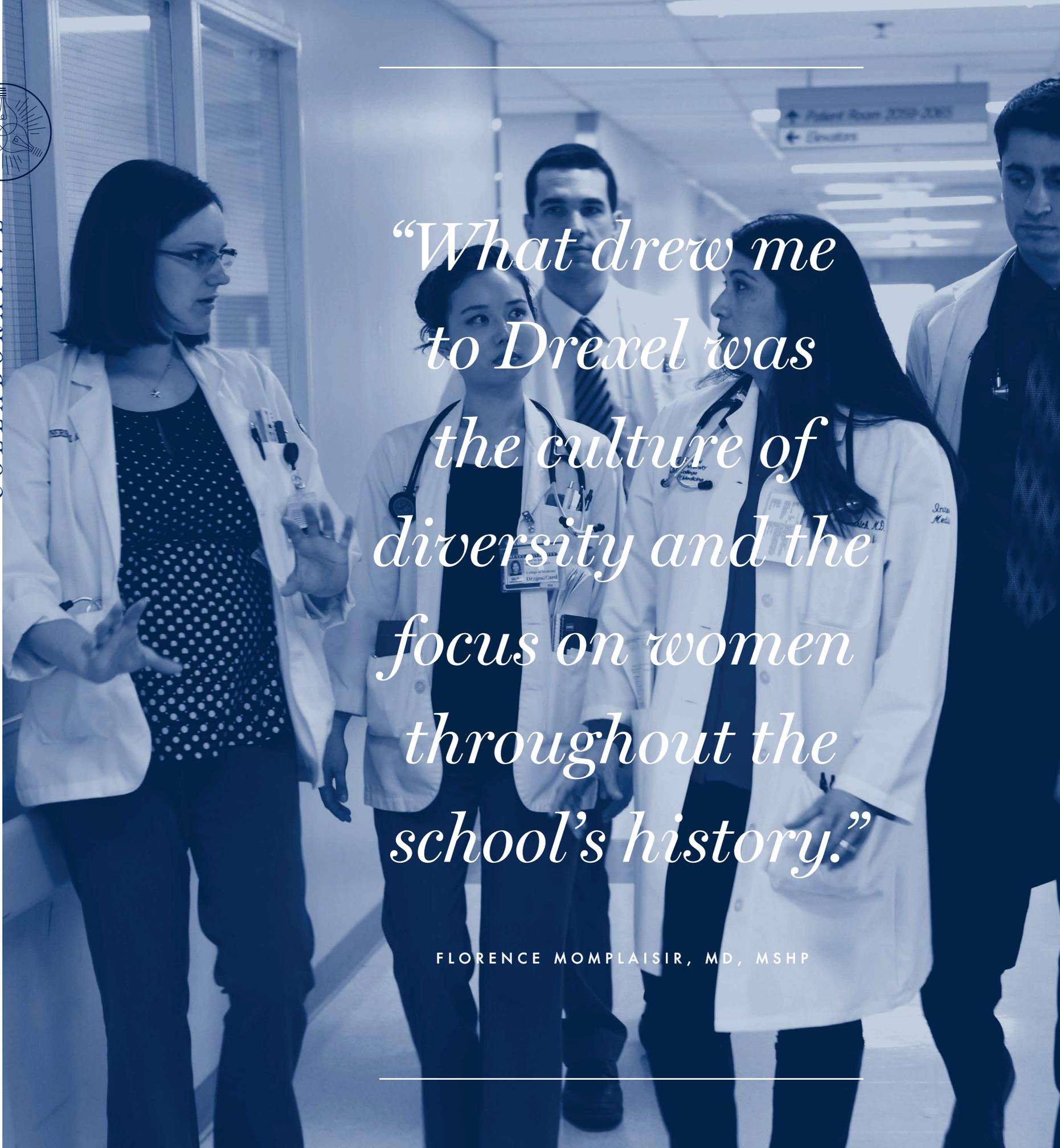
ABOVE

Basic scientists in the College of Medicine's Graduate School of Biomedical Sciences and Professional Studies collaborate with clinicians.



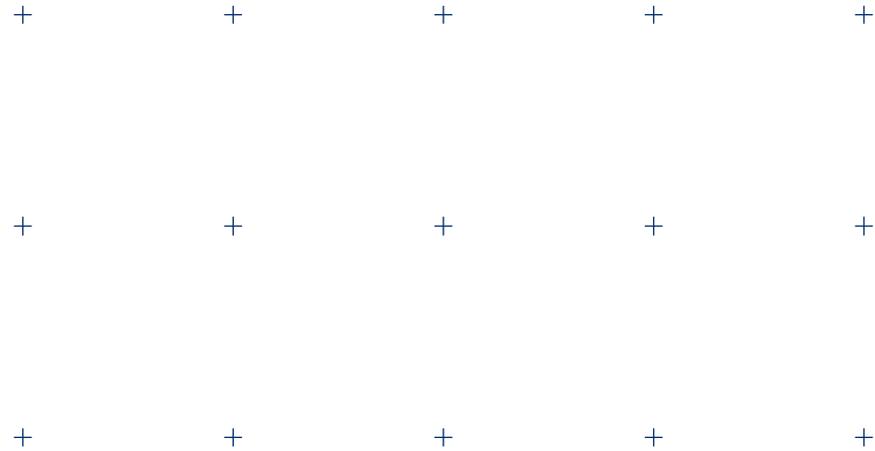


COLLABORATIVE



“What drew me to Drexel was the culture of diversity and the focus on women throughout the school’s history.”

FLORENCE MOMPLAISIR, MD, MSHP



WORK ACROSS DISCIPLINES

Within Drexel I am also working on other, smaller research projects. I love that there is this collaborative atmosphere for research here. An example within the Infectious Diseases Division is that we have PhD faculty on staff. In addition to providing clinical care, we engage in basic science, translational and clinical research. The emphasis on basic science sets us apart. Ideally this kind of integration would happen everywhere, but it often doesn't.

THE IDEAL SETTING

What drew me to Drexel was the culture of diversity and the focus on women throughout the school's history. These were both important factors for me as an African-American woman, as is the fact that Drexel has invested a lot in gender-based and women-based research, which directly impacts the work I do. The fact that the Partnership Practice was already in place and the fact that it had this wonderful cooperation across departments made it the right place to be.



DIVERSE BY INTENTION + + +



Dexter Graves, Class of 2018, knew he wanted to be a doctor from childhood. A high school sports injury brought him under the care of Darryl Peterson, MD, an orthopedist, who helped him hone that vision. Peterson was an alumnus of Hahnemann University School of Medicine and advised Graves to apply to its successor school, Drexel University College of Medicine. By the spring of his first year, Graves had founded the Drexel Black Doctors Network to build relationships between African-American students and physicians.

+ + + + +

THE ROAD TO DREXEL

My mom is a PhD chemist and I was interested in science from a young age. When Dr. Peterson asked me what I wanted to be when I grew up, I told him I wanted to be a doctor. He offered me the chance to come and work for him, which began a long mentoring relationship that continues to this day. After college, I applied for Drexel's Pathway to Medical School program because I knew it was an opportunity for minorities and would help me get into medical school.

BUILDING ON AN IMPORTANT LEGACY

Drexel has a history of inclusion. Back in 1980, Dr. Maurice Clifford was named president of another of Drexel's predecessor schools, Medical College of Pennsylvania. He was the first African-American president of a medical school that wasn't historically black. I recently went to a ceremony where his portrait was mounted outside of our lecture hall. I would like to see that tradition continue. There is still a shortage of black doctors in this country, and I want to make sure that black students have the resources and skills they need to pursue that dream.

"I want to make sure black students have the resources and skills they need."

CONNECTION AND SUPPORT

As a minority in medical school, the biggest challenge is that you feel like an outsider — it's not that students or faculty make you feel unwelcome; it's just that you come in with your own experiences that other students don't always share. I got involved early on with the Office of Diversity, Equity and Inclusion, which has always been a place to exchange ideas and attend events. Both that office and the Office of Student Affairs have been incredibly supportive of me, especially when I wanted to start my own group. The Drexel Black Doctors Network is a mentoring program that pairs black medical students with black doctors in the Philadelphia area. We're trying to give students a one-on-one connection with a professional in the field, along with research opportunities and other guidance or advice they might need.

OPPORTUNITIES FOR THE NEXT GENERATION

It's been important to me to be involved in the Student National Medical Association, working to help underrepresented students in medicine. I also mentored Philadelphia high school students through the Drexel Mentoring and Pipeline Program, which helps students who might want to pursue college, exposing them to the health professions and helping them develop career skills like resume writing and interviewing. I was lucky enough to have a mentor along the way, and this is how I can pay it forward.

OPPOSITE

At the White Coat Ceremony, medical students join together as a class to recite the Hippocratic Oath for the first time.

BELOW

Dexter Graves founded the Drexel Black Doctors Network to link students and physicians.





ENGAGED IN COMMUNITY + + +

“Drexel gives us so many ways to get involved in the community outside of the school.”



Maëlys Amat, Class of 2018, has been involved in community service since high school. After college, she volunteered for AmeriCorps. During that year, she worked in a homeless shelter, where she learned the importance of foot care and its role in managing chronic disease. When she arrived at Drexel University College of Medicine, the French-born MD/MBA student was eager to apply that experience, and she signed up for the student-run Health Outreach Project clinics that serve lower-income populations in Philadelphia.

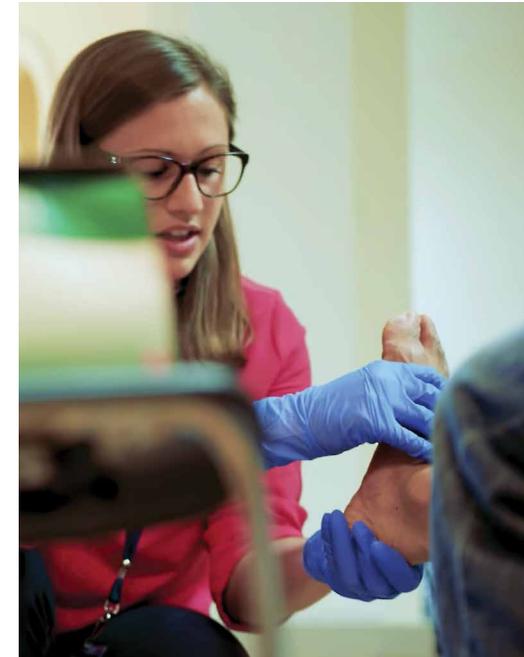
+ + + + +

REACHING OUT

I knew I was interested in working with the Health Outreach Project clinics back when I first applied. During my MBA year, I remained involved, and I saw an opportunity to create a foot care clinic at a new Health Outreach Project site, St. Raymond’s House, a supportive housing program for homeless men and women. Foot care is important to people’s general health, particularly those patients with diabetes, and it really was an unmet need for this patient population. It turned out that the individuals we were serving were very receptive to it. We have since expanded our services to include a second location, and I hope we can take it to other sites.

LEAVING CAMPUS TO GAIN PERSPECTIVE

Drexel gives us so many ways to get involved in the community outside of the school. The number of student-run community initiatives is always growing. At Drexel, we have patient contact from early on, and volunteering at the Health Outreach Project clinics gives us even more exposure. At some other schools, the “student-run” clinics are often mainly run by physicians, but here we’re given the chance to run the organization ourselves. I held a number of different administrative roles in the clinic program, working to implement services on the clinic level, and I eventually served as board chair, overseeing all the sites. Both were rewarding ways to be involved.



OPPOSITE

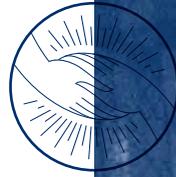
Maëlys Amat has been involved in the student-run outreach clinics since she arrived.

TOP

Students organize and entertain at the annual Pediatric AIDS Benefit Concert.

BOTTOM

Maëlys started a foot care clinic in response to a need she saw among homeless men and women.



ENGAGED IN COMMUNITY

+ + + + +
+ + + + +
+ + + + +

INSIGHT AND EXPERIENCE

Running the foot care clinic has given me skills both in health care and in business that I know I will use in my career. Often in health care, there's a disconnect between the administrators and the clinicians, which is something I hope to be able to address with my dual degree. At the clinic, I've learned some of the leadership and management skills needed to run a provider organization, giving me a hands-on way to apply what I was learning in my MBA classes. On the medical side, it gives medical students the chance to actually help patients in a safe and non-intimidating setting with the supervision of faculty.

THE VALUE OF LISTENING

Another skillset I've gained is the ability to bridge cultural gaps, to deal with language barriers and to connect with patients from different socioeconomic backgrounds. This is something you can only learn on the ground, working directly with people. But the best lesson in starting the foot care clinic is the value of really listening to patients. Our work has been effective because we made sure to start by listening to patients and addressing their specific needs. I'm focusing on internal medicine, and I hope to someday start a free clinic from the ground up and continue to serve patients with limited resources — my work at Drexel has only strengthened that vision.

“We have patient contact from early on...we learn to start by listening.”

MAËLYS AMAT, CLASS OF 2018



COMMITTED TO MENTORING + +



Unbeknownst to her, neuroscience student Hemalatha Muralidharan was listening to her future mentor when she heard Peter Baas, PhD, speak at a conference she attended as an undergraduate in Mumbai, India. The topic, and his way of talking about it, piqued her interest. Years later, when Hema came to the College of Medicine to pursue her PhD in the Graduate School of Biomedical Sciences and Professional Studies, she visited the Baas Lab and found both a home for her research and a mentor who inspired her.



+ + + + +

DISCOVERY AND GROWTH: HEMALATHA MURALIDHARAN

Early on, I went to other laboratories to learn some techniques and explore other available opportunities, but I was fascinated by Dr. Baas’s focus on microtubule-based motor proteins (tubular structures that give shape to cells and power their movements), exploring their mechanisms and what makes these neurons special. This research can have implications for disease as we see how the proteins might be expressed in different ways. The work itself involves a lot of cell culture and microscopy, skills I’ve developed in the years I’ve been here.

GUIDANCE VS. DIRECTION

Working with Dr. Baas has been great — even though this is his laboratory, he’s very hands-off in many ways and allows us to pursue our own interests. He will never shut down an idea, but he will give you helpful feedback to further focus the scope of the project. That independence has been ideal for my learning, and I don’t think you get that in a lot of laboratory settings. When I first arrived, I had little background in this subject matter, and I’ll admit that I had a little bit of stage fright, but the experience of working in the Baas Lab has truly built my confidence, and I’m at a point where I can now mentor junior students.

“He will never shut down an idea, but he will give you helpful feedback to further focus the scope of the project.”

VISION FOR THE FUTURE: PETER BAAS

As program director, I mentor all of the graduate neuroscience students and many faculty members as well. It’s important to me to set an example of what good mentoring is, so that others can continue to carry it onward. Not every mentoring style works for every mentee, so it’s really about finding a way to give people what they need. My colleagues and I believe it takes a village to raise a graduate student, so that students can have many influences and models to help shape them.

FOSTERING INDEPENDENCE

I make myself available to students as much as possible, and I try to be a calming, encouraging voice. I want them to take ownership of their work and think for themselves, which is why the students in my lab always have a project that’s their own. I also help them with the other aspects of academic life — speaking, publishing, networking and finding a career that is best suited to their skills and interests. In Hema’s case, it has been very rewarding to see her wonderful work unfold — she has a natural talent, she’s a superb scientist, and I’m looking forward to talking with her more about what will come next and how I can help her get to where she wants to go.

OPPOSITE TOP

Now in her third year, Hema Muralidharan can mentor junior students.

OPPOSITE BOTTOM

The Graduate School at the College of Medicine has labs at the Queen Lane Campus (shown) and in Center City.

BELOW

Mentee and mentor: Hema says the independence Peter Baas allows has been ideal for her learning.





INSPIRING THE BEST + + + +

“Medical excellence is about perpetually learning and improving what you do.”



Rita Guevara, MD, Class of 2012, entered Drexel through the Pathway to Medical School program. She already knew she wanted to work with children and that she wanted to practice in an urban hospital setting with an underserved patient population. During her pediatrics rotation at St. Christopher’s Hospital for Children, she found the niche she was looking for. Today, as one of two Latina providers in her general pediatrics practice, Dr. Guevara helps to break down language barriers for her patients while providing them with the highest level of care, and she trains Drexel medical students to do the same.

+ + + + +

FINDING A NEED

I came to the United States from Peru as a child, and my family was undocumented for many years. There were often situations where I found myself helping my mother or aunt translate letters, or I had to make a call on their behalf because of their limited English. Fortunately, I never had to translate for my family during medical appointments, but I understood that at that time it was a common occurrence for many families, and that language was a fundamental barrier to patient health. I knew this was something I wanted to address.

THE FOUNDATION FOR EXCELLENCE

After college, I worked at a nonprofit in Baltimore and did a one-year program at Johns Hopkins Bloomberg School of Public Health, which gave me more perspective on health challenges in the Latino community in Baltimore and a better sense of how I might shape my career. The Drexel Pathway to Medical School program was a great opportunity for me because I was not a traditional applicant to medical school, and it gives students like me a chance to find equal footing. During that year, I honed my study techniques, learned to manage time and stress, and gained other critical skills that helped me excel academically. It also underscored the idea that Drexel values its students — not just as the embodiment of achievements or scores but as multifaceted individuals in a diverse community. I developed lifelong relationships with colleagues who are now making amazing contributions all around the country.



OPPOSITE

Rita Guevara stresses effective communication with families and patients.

TOP

Drexel medical students rotate through the Center for the Urban Child at St. Christopher’s and other pediatric sites.

BOTTOM

Outside of work and community activities, many students are skilled in music and the arts.



INSPIRING THE BEST

+ + + + +

THE BEST CARE FOR THE LITTLEST PATIENTS

I have always loved working with children, and I see pediatrics as the way to care for people during a time in their lives when I can have a greater impact. During my third year at Drexel, I did a rotation at St. Christopher's Hospital for Children and had the chance to work with a diverse patient population, most of whom were facing socioeconomic stressors and psychosocial risk factors that affect their health. It only solidified my interest in pediatrics and my drive to help bridge gaps in health care for patients.

SEEING THE BIGGER PICTURE

At Drexel, I was also lucky to work with the Women's Health Education Program, where I saw firsthand how women's and children's health overlap. It's a great example of what Drexel does best: ensuring that patients are treated equally and given access to the best care. You see this quality in the medical students, too. They have contributed so much to the school, either through leadership councils or student activities — many of them are also skilled in music or the arts, or pursue a public health interest, or are focused on addressing health care disparities in the LGBTQ community and other underserved groups. I continue to be impressed as I work with Drexel students who rotate through my clinic. What stands out is the fact that they understand that health care is not just about the disease or the pathophysiology — it's about who your patients are as people and the challenges they face every day. Drexel teaches us to be culturally humble in our approach, and that makes a difference.

A CONTINUING JOURNEY

Medical excellence is about perpetually learning and improving what you do. There is always a way to better yourself as a clinician and strive for the best-quality treatment for patients. In my current job that means addressing their circumstances, minimizing stress and promoting resiliency. To me, it's very important that I never sit back and think I'm done or that I've learned everything I need to know. One of the best parts of medicine is the lifelong learning.

“The Pathway program underscored the idea that Drexel values its students, not just as the embodiment of achievements or scores but as multifaceted individuals.”

RITA GUEVARA, MD, CLASS OF 2012

+

+

+

+

+

+

These, and a thousand other individual voices, both reflect and shape our culture. Students come to us with exceptional talents, but just as important are the values and commitment they bring to their education, to each other and to the wider community. The principles on which our College was founded continue to inspire our missions: the provision of opportunity, respect for all our ways of life and all our personal differences, advancing ourselves, not for the sake of our own advancement, but as part of something larger. We operate with our hearts and minds, not with our elbows. We can see these attributes in our students, when they come to us and when they leave as new physicians and scientists. Our hope for them is to serve with dedication and humility as they continue to grow and learn, one discovery at a time, one patient at a time, one act of kindness at a time.

+

+

+

+

+

+

+

+

+

+

+

+



DREXEL UNIVERSITY
College of
Medicine

drexel.edu/medicine

Design: skdesignworks.com
Copyright 2018 Drexel University