Within Radar Range

This is Not a Role-Playing Game

By Jessica Mesman

Eighteen health sciences graduate students sit in a meeting room in the Western Pennsylvania Hospital, plastic nametags hanging from strings around their necks. A woman in a red jacket calls out their schedule for the day like an auctioneer.

“Three to three fifteen prepare for interview three fifteen to three forty-five interview Jim Osborn of MERITS three forty-five to four fifteen tour facilities in the Institute for Computer Assisted Orthopaedic Surgery four fifteen to five watch ARTVILLE..."
The first 15 minutes of the session to decide what to reach them. At West Penn, they are allotted to choose common goals and design plans of action programs—are expected to work together to University, and others from various health-care College, pharmacy students from Duquesne occupational therapy students from Chatham include medical and law students from Pitt, created by Osborn and his MERITS team.

DiGioia (Res ’91) performs hi-tech total hip surgery. ... Surgery, where surgeon and alum Anthony Institute for Computer Assisted Orthopaedic Surgery, where surgeon and alum Anthony DiGioia (Res ’91) performs hi-tech total hip and knee replacements with robotic technology created by Osborn and his MERITS team.

Throughout the program, the fellows—who include medical and law students from Pitt, occupational therapy students from Chatham College, pharmacy students from Duquesne University, and others from various health-care programs—are expected to work together to choose common goals and design plans of action to reach them. At West Penn, they are allotted the first 15 minutes of the session to decide what information they want from Osborn.

Sara Silvestri, embarking on her second year at the School of Medicine, does most of the talking. She’s small and soft-spoken, but as the facilitator, she’s today’s leader. When the program directors leave the room, she turns in her chair to face the other students, notebook and pen in hand. In the next 15 minutes, she must delegate responsibility among the group—decide how many and what questions will be asked of the expert, and by whom. She’s also expected to keep the session on schedule. Some students volunteer to ask questions they have in mind. Others Silvestri assigns duties from the list in her hand. All the while, the time-keeper shouts, “Five minutes! Two minutes! Thirty seconds!”

Next, the students pack into a tiny conference room, where a bearded, bright-eyed Osborn (eschewing formality, he tells them to call him “Oz”) quickly launches a whirlwind PowerPoint presentation on robotics technology.

He’s barely halfway through when Silvestri’s small voice interrupts from the back of the darkened room. Adhering to protocol, she introduces herself before gently asking Osborn if he wouldn’t mind stopping his talk so they can ask some questions.

MERITS’ advancements in robot-assisted health care are exciting but mostly experimental. The students wonder about practical application: Which patients will have access to the technology? It’ll be expensive, Osborn responds with regret. How will doctors and hospitals implement the programs? He barely has a chance to answer two of the students’ carefully planned questions before they’re hustled to the labs for demonstrations.

“Interrupting Oz was one of the most difficult things I’ve had to do during this internship,” says Silvestri later. “I am a relatively quiet person and interrupting the executive director of MERITS of Pittsburgh was not something I wanted to do.” But she knew it was up to the students to keep the program on schedule.

“It’s about deeply personal interactions.”

Many of these innovations are normally beyond the radar of the medical student, he says.

The most valuable aspect of the fellowship for Silverman is the opportunity to work with people with different skills and backgrounds. (For the most part, the fellows are indistinguishable in their expertise. If you pay attention however, you can pick out the nursing and med students. They’re the ones able to eat chips and pretzels while watching a video of DiGioia pounding a metal knee replacement into a leg that’s unfurled like a Slim Jim wrapper.)

Odd as it seems, many new medical students are disappointed to find that they spend most of their school training time with doctors. They rarely have a chance to interact with the public or health-care professionals who aren’t M.D.s.

According to Silverman and Silvestri, two of five Pitt med student fellows in the summer program, working with and learning from those in other disciplines will change health care. They would like to see a shift from a rigid hierarchy of M.D.s and administrators to a state of equity among all health-care professionals and the patients they serve.

“Exceptional patient care is not achieved by a single individual,” says Silvestri. “It’s a collaboration between many people in many disciplines. This fellowship is teaching us early on in our training how to work in such a group.”

She admits, a week before her JHF/Coro graduation day, that she was surprised by how well an interdisciplinary group can work together to achieve common goals.

By the end of the program, the students know firsthand the groundbreaking health-care initiatives under way in Pittsburgh, and they can speak fluent businessese with the best corporate recruiters.

More important, they say the fellowship reinforced why they wanted to work in health care in the first place.

“It’s not just about curing a person of what’s wrong with him,” says Silverman. “It’s about deeply personal interactions.”