Message from the Chair

I am so honored to be amongst such a great group of people in the Department of Medicine. My goal is for us to stay connected and work closely together to achieve excellence in our missions of teaching, clinical care, research and diversity. Hopefully this monthly e-letter will be an additional way for us to share news and announcements. Please contribute and inform us of “matters” going on in your division. Thank each of you for all you do.

Shirley Schlessinger

Faculty Focus

Demondes Haynes, MD
Assistant Professor of Medicine
Fellowship Program Director
Pulmonary and Critical Care Medicine

Q: What is something that people don’t know about you that might surprise or interest them?

Dr. Haynes: I am the 11th of 14 children and I love to travel. My most recent excursion was a trip to Barcelona, Spain last summer.

Q: What do you feel is your greatest accomplishment?

Dr. Haynes: I believe my greatest accomplishment to date has been recently being selected as teacher of the year for the department of medicine and being able to serve as fellowship program director. These are important to me because patient care is my passion and teaching others to provide quality patient care is part of what I believe I am called to do.

Q: What advice do you have for our residents?

Dr. Haynes: I would advise the residents to not only obtain good medical knowledge but to learn how to treat each patient as an individual and with respect. I live by some advice that was given to me by another experienced physician. “Patients don’t care how much you know until they know how much you care.” I have found this to be one of the most truthful things I’ve ever been told.

Division Highlights

The Division of Oncology is proud to announce the establishment of the Conrad C. Horecky, MD, Chair of Oncology. Conrad “Bo” Horecky, after completing his first year of oncology fellowship at UMC, drowned saving two of his children while vacationing with his family in Navarre Beach, FL. This endowed chair will enable the University of Mississippi Medical Center to offer a more diverse curriculum that is not dependent on usual income sources and will provide long term financial stability.

House Officer News

Department of Medicine is honored to welcome our new Chief Residents for 2011-2012

Allyn Bond, MD Daryl Pollard, MD John Saxon, MD

The Patrick Lehman Resident’s Lounge has recently been refurbished. PLEASE do your part to keep it nice.
1. A 26-year-old woman who is 25 weeks pregnant is evaluated in the emergency department for palpitations and episodic light-headedness. She has no history of cardiovascular disease or tachycardia.

On physical examination, her blood pressure is 100/70 mm Hg and her pulse is 175/min. The estimated central venous pressure is normal and there are no carotid bruits. The apical impulse is not displaced. There are no murmurs or abnormal heart sounds detected. The examination is otherwise unremarkable.

A valsala maneuver is performed by the patient and carotid sinus massage is performed by the attending physician, but the tachycardia continues. The electrocardiogram is shown.

Which of the following is the most appropriate intravenous medication to administer at this time?

(A) Adenosine
(B) Amiodarone
(C) Digoxin
(D) Diltiazem
(E) Metoprolol
2. A 23-year-old woman is evaluated for management of pulmonary arterial hypertension. She is minimally symptomatic (New York Heart Association functional class I-II). She was diagnosed with idiopathic pulmonary arterial hypertension several months ago and is on no pulmonary vasodilator therapy at this time. She inquires about pregnancy.

Which of the following options regarding management of pregnancy is most appropriate for this patient?

(A) Addition of bosentan prior to proceeding with pregnancy
(B) Admission to a high-risk pregnancy unit at 30 weeks
(C) Cesarean delivery at 34 weeks
(D) Recommend avoiding pregnancy
(E) Treatment with low-molecular-weight heparin and aspirin beginning at conception

3. A 48-year-old man is evaluated in the emergency department for dyspnea on exertion and paroxysmal nocturnal dyspnea for 3 days. He has a history of type 2 diabetes mellitus and hypertension but no other medical problems. He does not smoke cigarettes. He currently takes metformin, lisinopril, and low-dose aspirin.

On physical examination, he is afebrile. Blood pressure is 130/80 mm Hg, pulse is 100/min, and respiration rate is 20/min; BMI is 40. Jugular veins are distended. Cardiac examination reveals a normal S1 and S2, the presence of an S3, and a regular rate and rhythm with no murmurs. The point of maximal impulse is not displaced, and there are no heaves. Pulmonary auscultation discloses crackles at the bilateral lung bases. There is mild bilateral edema to the shins. Laboratory studies reveal a serum creatinine level of 1.0mg/dL (76.3 umol/L) and a B-type natriuretic peptide level of 100 pg/mL. Electrocardiogram is shown. Chest radiograph is pending.

Which of the following is the most likely diagnosis?

(A) Acute heart failure
(B) Acute pulmonary embolism
(C) Cor pulmonale
(D) Recent myocardial infarction

Representing Research

Check out the Office of Research and Scholarship (ORS) web site (click the link at the left on the Department of Medicine site medicine.umc.edu/).

Find helpful resources, monographs, articles, links and more to help you with your academic projects and development.
University of Mississippi Health Care has been nationally recognized in the specialties of cancer, nephrology and orthopedics in U.S. News & World Report’s 2011-12 Best Hospitals rankings. The latest rankings showcase 720 hospitals out of about 5,000 nationwide. UMHC is the only health system in the state ranked for nephrology and orthopedics and we tied overall for the No. 1 hospital in the Metro Jackson area with St. Dominic Hospital. According to the Public Affairs press release, Dr. Scott Stringer said the rankings are the result of the ongoing investments in quality improvement, facilities, world-class physicians, advanced practitioners, nurses and staff.

We are particularly proud to congratulate our colleagues listed below who are among the 24 physicians at UMHC included on the list of U.S. News Top Doctors. This is based on a peer nomination process and we look forward to achieving the same recognition in the future for many others. Everyone in our department deserves credit for this recognition and I thank each of you for your contributions!

**Congratulations to our U.S. News Top Doctors:**

Dr Tom Abell  
Dr Carolyn Bigelow  
Dr Doug Campbell  
Dr Rene Davila  
Dr Rick deShazo  
Dr Joe Files  
Dr Christian Koch  
Dr Mark Meeks  
Dr Tate Thigpen  
Dr Ralph Vance

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**Admin Update**

The Department of Medicine now has two patient financial navigators. All patient billing questions can be forwarded to them at the employee VIP line at 4-CARE.

Mary McInnis  
Tammy Linburger