Dear reader,

Thank you for picking up the newest edition of the BULLetin. As you may already know, USF HEALTH is turning another page in its history. On December 8th, we crossed into a new era with the renaming of our medical school: USF HEALTH Morsani College of Medicine. With this bold move, USF HEALTH is poised to redefine healthcare, again!

You are holding a powerful tool in this new era. This edition encompasses what we are doing as students to embo$$ our legacy on the new Morsani College of Medicine. It is geared toward students, for the wellness of students, one edition at a time.

As we gear up for this new year, we have gathered an array of articles that will surely enrich your mind, keep you busy, and help you make the best wellness decisions, whether physical or nutritional. Dive in this edition for a not-so traditional look at massage therapy, helpful hints on meditation, yummy recipes, and more. It is also worth mentioning that we have received an article so controversial that its author has chosen to remain anonymous. So, take a look inside!

Happy New Year and stay well!

Wesly Menard
Editor-in-Chief

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Each year, more than 16,000 students graduate with an M.D. degree from AAMC-member medical schools and begin residency programs and fellowships where, as new physicians, they continue their education and prepare for diverse careers in patient care, teaching and research. The AAMC works to ensure that medical education—across each physician’s professional lifetime—meets the highest standards and keeps pace with the changing needs of patients and the nation's health care system.

The AAMC has many branches, one of which is the OSR, formed in 1971. The OSR fulfills a unique role among medical student organizations: It provides medical students with representation in the AAMC, the nation’s largest association dedicated solely to the advancement of academic medicine. It also ensures that medical students actively participate in directing their educations, preserving their rights, and delineating their professional responsibilities. Finally, the OSR provides medical students with a voice in academic medicine at the national level and fosters student involvement and awareness at the local level.

So, what are the national priorities of the OSR?
- ACGME U.S. residency program match data
- Assuring the continued strength of the academic environment under health care reform and managed care
- Career planning
- Communication with other medical student groups
- Curriculum changes & innovations
- Diversity in medical education
- GLBTI issues
- Guidelines for use of medical interpreter services
- Humanism in medicine
- Holistic admissions
- Institutional mental health services and resources
- National Board of Medical Examiners' issues
- National Resident Matching Program issues
- Student debt and the cost of medical education
- Student healthcare and insurance
- ACGME U.S. residency program match data
- Assuring the continued strength of the academic environment under health care reform and managed care
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- National Resident Matching Program issues
- Student debt and the cost of medical education
- Student healthcare and insurance

Each of the 134 U.S. AAMC member medical schools has from two (2) to four (4) OSR Representatives. The REPs are elected (or selected) by their medical schools to monitor activities at their institutions, represent student opinions to the OSR Administrative Board (Ad Board), and relay national OSR and AAMC priorities to the students and staff of their institutions.

On a more local basis, OSR REPs
- Are aware of student concerns at (their respective school)
- Share these concerns with the OSR / OSR Ad Board
- Learn about the OSR/AAMC and the resources available to them and the student population
- Promote the initiatives of the OSR: Humanism in Medicine, diversity, Careers in Medicine, student debt, health insurance, etc.
- Disseminate information from the OSR to their school’s students and administration.
- Elect officers of the OSR who will represent all students to the AAMC.

Your AAMC OSR Delegates:
- Tawanna King | tking1@health.usf.edu | MSIV
- Thomas Starnes | tstarnes@health.usf.edu | MSIII
- Wesly Menard | wmenard@health.usf.edu | MSII
Dear Student and Resident,
The College of Medicine has established the Office of Student and Resident Professional Development as an impartial and independent service that promotes culture which values well-being and a learning environment that fosters professional attributes and ideals.
The attached handout is a brief overview of the program being offered. It distinguishes how these preventive functions are separate, yet complementary to existing service and management resources.
I welcome the opportunity to meet with you, to further discuss how this Office may support you to achieve your professional pursuits. You may contact me at 813-974-8045, or by cell 813-920-4811.

Sincerely,
Olga Skalkos, PhD
Licensed Psychologist
Office of Student and Resident Professional Development
USF Health College of Medicine

MISSION: The Office for Student and Resident Professional Development (O-SRPD) is one component of a comprehensive initiative established by the leadership of USF Health and the College of Medicine in further developing learning environments which promote professionalism in students and residents.

OBJECTIVE: To provide COM students, residents and the institution with impartial and independent preventive assistance in identifying and facilitating interpersonal processes that affect academic achievement and institutional effectiveness. Services include:

PROFESSIONAL ADVOCACY assists the individual student/resident to clarify perceptions, examine expectations, generate options, and facilitate decision-making and to coach self-advocacy in addressing a concern or conflict. This service is voluntary, confidential and can be initiated by any COM student/resident. *
Examples of behaviors that could prompt self-referral:
change in academic/clinical performance,
perceived loss of professional motivation,
decrease in focus to assigned responsibilities and duties,
observable change in physical appearance or professional demeanor.

PROCESS CONSULTATION engages dialogue and facilitates communication between voluntary participants motivated to informally resolve a concern impacting the student/resident learning environment. This service may be initiated through the Offices of the Vice Dean or the designated institutional officer (DIO) and may include any student, resident, faculty, staff and administrator within the academic or medical community. *
Examples of behaviors or actions that could prompt leadership referral:
situation-specific interpersonal conflicts,
dual-role relationship or conflicts of interest concerns,
persistent non-adherence to system procedures and protocol,
21st Century M.D.

By Anonymous, MSII

This Century is probably the best, smartest, most advanced time for any physician to be practicing medicine in. The technological innovations of the operating room, the wonders of paperless patient records, and the prowess of the diagnostic tools we use today keep awing me. It’s great from the physician’s perspective, but that’s where everything comes to a screeching halt.

There’s a reason I call this article the physician of the 21st Century, or 21st Century M.D.. We know what goes on in the patient room: you go in; the tech sees you; the nurse sees you; the resident sees you; then maybe, just maybe, the attending sees you. Why so many people? Of course, there’s academic reasons, but what about in a non-academia hospital/clinic?

Now, that’s all good and well if the patient doesn’t mind. However, the problem comes when M.D. could have as well stood for “Modest and Disdainful”

Now, pardon my oxymoron but that was the best description I could come up with. Allow me to explain.

To some degree, there’s a clear demarcation between the nurse’s duties and the physician’s. However, when one allows pomposity to define that line, there is a problem. Yes, we go to school for longer. Yes, we make more money than some nurses. Yes, arguably, we have more advanced training on the human body than they do. Does that mean we sometimes have to treat them like they are our maids? Does that mean we can’t wipe a baby’s butt even when the exam room in which we’re doing our exam is filled with more methane than nitrogen and oxygen combined? Does that mean we can’t replace the paper sheet on the exam table upon exiting? “Don’t worry about it, the nurse will get it”, I was told when I made the unbelievably unforgivable, unprofessional, and unethical mistake of trying to fold the soiled one and replace it. I never felt like I was failing at medical school any more than at that time. It actually felt like I was breaking some egocentric rule, some old and ancient medical theory passed down from generations to generations. As a medical student, I had to know my boundaries.

Obviously, there were certain things I was able to do, things that I had to do, and certain things only nurses do like throwing away the otoscope’s tip after using it to examine the patient’s ears and nostrils. My attending left the otoscope’s tip over the counter which was literally a finger length from the Biohazard bin. “The nurse will take care of it”, he said once again. By the second time, I got it: I’m not supposed to do the “dirty” work. After all, I have to get into the mindset if I want to be a good physician, right? He was my attending for the afternoon, so I had to follow instructions if I didn’t want to get written up. So I did.

I’m still learning. I’m sure there are quite a few things in the “things physicians don’t do” list that I still have to familiarize myself with. In the meantime, I’ll call the nurse.

(Continued from page 4)

incidents of behavioral disruptons to learning environment.

CRITICAL INCIDENT REFERRAL AND DEBRIEFING ASSISTANCE provides direct and referral assistance to any COM community member concerned for the well-being of students and residents. Any community member may request immediate assistance. Examples of concerns that could prompt requests for consultation:

- verbal or electronic communication of personal distress,
- system response to a critical event,
- resource and referral assistance,
- community debriefing and stabilization assistance.

* Any personal disclosures are considered confidential and privileged. Exceptions include circumstances posing risk of harm to self. others, the environment or the institutional mission as defined by legal, professional and institutional standards.
Healthy Eating Around Town
Danielle Kurant, MSII

It’s lunch time and you’re feeling brave. You know there may not be a parking spot waiting for you when you get back to campus, but today you are going to face your fears and eat at a nearby restaurant anyway. Where do you go? You want somewhere healthy, but you’re on a budget. What do you do? Allow me to recommend two fantastic nearby options. They are both delicious, with many meals under $10.

Trang Viet Cuisine
Location:
N 15th Street and E Fowler Ave
Pros:
+ lots of fresh herbs and vegetables
+ lowfat
+ vegetarian/vegan friendly
+ weekday lunch special (11am-3pm): $6.50 for appetizer, soup of the day, and choice of entree

Cons:
- some dishes have high sodium
- a bit farther from campus
Danielle’s recommendation: Chicken pho soup

Evo’s
Location:
Bruce B. Downs and E Fowler Ave
Pros:
+ organic
+ they bake their fries instead of deep frying them
+ near campus
+ 12% off value meals with USF ID
Cons:
- pricey without student deal
- I can’t go in there without buying a milkshake
Danielle’s recommendation: chocolate milkshake (not exactly healthy, but very tasty!)

My Experimental Recipe for the Busy (and poor) Student
Aleksandra Yakhkind, MSI

Moving away from home left me without a consistently and almost magically full fridge. However, it was a great opportunity to experiment with foods that I didn’t have growing up.

I was raised on the bland colors of grains, meat, mushrooms and potatoes, (the type of stuff that’s around in the dead of the Russian winter). The only color that stands out in my memory is the domineering red of cooked beets. Despite its conditional deliciousness, its ability to turn anything that it touches, (including fingers and cloths), into a heavy and semi-permanent shade of purple left it undesirable to work with in my kitchen. I prefer bright, crunchy, and juicy greens, reds, and yellows. While a salad is my usual go-to, it isn’t always the most filling option.

As a student, I wanted a fast, nutritious, inexpensive (and colorful) way to sustain myself. My favorite recipe so far brought together Kale, beans, diced tomatoes, cheese, and “insert vegetables of choice.” Please enjoy and let me know of what variations you discover!

Vegetable Kale & Beans

- 2 tablespoons of butter (Vegan Alternative: use 3 tablespoons of olive oil/coconut butter)
- 1 can of black beans, drained
- 1 package of Kale
- 1 can diced tomatoes (or 1 cup freshly diced tomatoes)
- Cube of Swiss cheese (and/or sautéed tofu) the size of your four fingers
- ½-⅓ cup of your favorite veggies chopped. Options include:
  - red pepper, sliced
  - zucchini, halved and sliced
  - carrots, sliced
  - Peas
  - Green beans
  - Canned corn
  - ½-1 tsp salt
  - 1 tsp pepper
  - ½ tsp cayenne pepper
  - ½ tsp oregano

1) Place butter/oil into a pot large enough to hold kale. (If you don’t have one, half the recipe and make in two installments).
2) On medium heat, add kale, stir.
3) When Kale begins to turn bright green, add beans.
4) Add tomatoes and other vegetables.
5) Cook 10 minutes.
6) Add cheese/tofu, stir.
7) Allow to cool and enjoy!
MOVIE REVIEWS

ATTACK THE BLOCK

Teenage thugs meet werewolf-looking aliens? Nick Frost? Nonstop trip hop? Yes, please! “Attack the Block” is not only the most fun movie of the year thus far; it might also be the most intelligent. Searing with poignant criticism of the ongoing class warfare which- to this day still- plagues the southern districts of London, this film’s critical analysis is all at once brutal and brilliant. Yet amidst such biting social commentary, first time director Joe Cornish manages to create an absolutely visceral, fast-paced Sci-fi action flick which is just as exciting as it is hilarious. Focusing on a gang of thirteen to fifteen year old “chavs” residing in a rundown project known simply as “the Block”, this movie is every adrenaline-fueled teenage boy’s dream: to meet up with your best friends, pick out the coolest weapons possible and defend your home from a group of blood-thirsty monsters. The main characters may be young, but they are certainly not childish; the opening scene depicts them mugging an innocent woman at knife-point. Our first impressions of the ragtag group are that they are ruthless, fearless and hostile. Upon encountering a vicious alien-species, I’d imagine that most people would run away as quickly as possible and call for help. These kids decide to chase it down and beat it to death. There has been a truckload of criticism toward the film for precisely this matter: a lot of people simply cannot stand the main characters and find them unredeemable and unlikable. To those that feel this way, I simply think that they’re looking at the film through a much-biased lens. These protagonists are not so estranged from any of us as to warrant outright hatred or disgust; in fact, most of the time they sound just like any of us if we were out with our friends. That is not to say that many of their actions throughout the film aren’t shocking and unacceptable, but to label these characters are simple thugs is to miss the point entirely. They are a gyroscope of a caste-system which, like it or not, is a reality. The key lies in how they develop throughout the course of the movie; how they react to forces that are bigger and scarier than they are. That development is profound, real, enthralling and very often hysterical. At the end of the day, regardless of whether or not you agree or disagree about the choices these teens make, they are undeniably funny, unique and entertaining. It is extremely rare to find a movie which is simultaneously action-packed, comedic and carries such a strong, controversial message (especially a message which is so often ignored).

There’s a scene in the film where a character remarks that her boyfriend is off volunteering for the Red Cross helping kids in Africa, to which one of the characters known as “Pest” replies, “What about the kids in Britain?” What about the kids in Britain, indeed. 9/10 stars.

THE DESCENDANTS

“The Descendants” is supposed to be heartfelt and risqué but instead feels plain obnoxious. This is a story which hinges on the audience’s ability to connect with its leading characters but fails to anoint them with any likeable characteristics. The lead protagonist is a clueless prat. One of his daughters is a foul-mouthed, alcoholic seventeen year old. The other is just, well, there for the hell of it I guess. Oh yea, and then there’s the seventeen year old brat’s random train-wreck-of-a-boyfriend who decides to tag along for the ride. Cue the Oscar music; we have ourselves another awkward indie dramedy!

Though I suppose I shouldn’t have expected anything remarkably different from director Alexander Payne (“Sideways”, “About Schmidt”), “The Descendants” is just too smarmy for its own good and as if a two hour diatribe on modern, liberal family values and the responsibilities of inheritance wasn’t heavy-handed enough, even the narration- which is overused and largely irrelevant- drags on and feels mystifyingly tedious in its own right. I’m not sure who the target audience for this film is, nor how anyone could honestly sit through all of it and come out on the other end thinking to themselves that they really spent their time wisely. There is nothing new or exciting in the script. The direction is ordinary and bland. The Hawaiian ukulele soundtrack is pretentious and quickly becomes nauseatingly repetitive. And then there’s George Clooney; the always subversive George Clooney. Sometimes his inconspicuous acting can be considered subtle or refined as in this year’s political thriller “The Ides of March” or Jason Reitman’s “Up in the Air” from a few years back; but then again sometimes I am almost surely convinced that for all of his attentuations only about half of them are intentional and depending on the movie at hand they either fit neatly into his role or they serve to undercut his presence and prove him a much more one-dimensional persona than we should be accustomed too. He does not carry this film well and he could have easily been replaced by any other leading man without much of a difference. When on-screen subtlety works it can be tremendously powerful, but when it fails it just ends up feeling lazy and forced and I can’t think of two better words to describe “The Descendants” than lazy and forced. 3.5/10 stars.
MELANCHOLIA

Lars von Trier has been undergoing a very public battle with depression for quite some time now and this has not only influenced his work but been at its very artistic epicenter. Tackling this cinematically neglected and all-too-personal theme has sometimes led the visionary director astray, particularly his last film “Antichrist” which wound up being consumed by its own despair and ugliness rather than giving a coherent or focused voice to the issue. With “Melancholia” however, I believe von Trier has once again found his voice and produced quite possibly one of the most devastating expositions on depression in modern cinematic history. But while it is impossible not to prize the visionary themes and direction that is not to say that his latest project is necessarily entertaining or appealing to a general (or even limited) audience. Like most of his previous filmography, “Melancholia” is still very much an art-house affair and a rather bleak one at that. For those with a taste for this sort of cinema, much of the still imagery is at once both beautiful and haunting. For casual movie-goers, however, I fear this would quickly become a profoundly boring and tedious experience. There almost needs to be a spoiler prior to entering the theater that you’re in store for quite a lot of slow-motion sequences and close-up camera angles- and probably a bit too many at that- so if this isn’t your sort of thing please save your money. For those still interested though, a Kirsten Dunst I hardly recognized and the von Trier veteran Charlotte Gainsbourg lead an all-star cast in this apocalyptic drama that seems to never miss a beat in terms of acting or cinematography. Heavily metaphor-laden and subjectively interpretive, it would be a moot point to try and describe the storyline in any detailed manner. Suffice it to say that “Melancholia” is truly melancholy incarnate. I have rarely felt so intimately consumed by a specific raw emotion while viewing a film as I did with this one and dread has never looked so delicate. This is a very worthy award-season entry and one that I highly recommend for anyone with the stomach for this sort of filmmaking. As one final important aside however, this film also stars Kiefer Sutherland and as such the director has made one profoundly stupid and unrealistic story-telling error: Jack Bauer would never let any of this happen. 8.5/10 stars

TUCKER AND DALE VS. EVIL

One of the most original horror-comedy ideas in quite some time, “Tucker and Dale vs. Evil” is often hilarious, heartfelt and- perhaps most importantly- satisfyingly gory. Set around two lovable, southern good ol’ boys that save up enough money to finally purchase a vacation home in the woods, their dream getaway quickly turns into a nightmare when they’re mistake n as psychopathic hillbilly serial killers by a group of stereotypical, drug-loving, sex-starved college kids. Yes, you read that plot correctly and may I add that it is brilliant. It’s inerrible just how fresh such a simple concept can really turn out to be. I can’t even recount how many dozens of backwoods, deranged redneck slasher films I have seen in my life and it is beyond comprehension just how satisfying it was to see all the cliches ripped apart and the tables turned on the wholly unlikeable, dim-witted frat kids for a change. I mean let’s be honest here, who actually watches a mindless slasher flick and roots for the immature jackasses that decided to go camping for a weekend of debauchery and self-indulgence? Do you really want to see them escape? Of course not; you want to see a Jason Voorhees type ruin their day and at least now we can watch with a semi-clear conscience! The series of events that lead up to these privileged brats waging an all-out war on our two unwitting protagonists are so utterly believable that I would be shocked if something like this had never actually happened in real life before. Miscommunication serves as the root of nearly every conflict and “Tucker and Dale vs. Evil” may be one of the best exposes on misunderstanding (and preconceptions) I’ve seen in quite some time. The duo themselves are just as memorable and engaging as any of the other more famous on-screen companions you can think of. To be fair however, the film slips considerably in its third act when it attempts to tie all of the mayhem together in a coherent fashion, but the movie is so surprising and funny throughout that the setbacks are mostly excusable. This is a must for horror movie fans and I highly recommend it for anyone else who has ever gawked at the fundamental stupidity of the hillbilly slasher sub-genre…or for anyone who just wants to see a bunch of popped-collar frat boys fail gloriously. That too. 7.5/10 stars
THE RUM DIARY

I remember a time long, long ago when Johnny Depp chose edgy independent roles and made off-beat films which usually became cult classics. Nowadays he mostly sticks to Disney fluff (with the notable exception of this year’s fantastic animated film “Rango”) but I thought “The Rum Diary” might have been his triumphant and nostalgic return to a time when he found himself rambling about Las Vegas tripping on Quaaludes and drinking with giant lizard people. Alas, due to very misleading advertising and naïve preconceptions I was totally let down. Contrary to what you may have thought going in, “The Rum Diary” is only 1 part off-kilter comedy, 2 parts intoxication and 12 parts political and social reflection. Mark edly anti-establishment, this is a tale about corporate fat cats in the early 1960’s squandering the true beauty and value of nature in favor of greed and tourist-driven urban development. Not what you would have expected from the trailers, huh? Based on an abandoned manuscript written by Hunter S. Thompson (creator of the drugged-out classic I alluded to earlier, “Fear and Loathing in Las Vegas”) and, ironically, rediscovered and spearheaded by close friend and associate Johnny Depp, “The Rum Diary” means well but ultimately doesn’t know how to stand on its own two feet. There are some very hilarious scenes but they are almost completely spoiled by the advertisements and what we are left with is a quite slow and slightly unfocused narrative which suffers innumerable whenever co-star Michael Rispoli is off-screen. Not even the veteran supporting cast of Aaron Eckhart, Giovanni Ribisi and Richard Jenkins is able to light up the atmosphere and bring substance to a story which, by all accounts, should have been markedly substantive. It’s impossible to dislike Johnny Depp in any role. He has always been one of the most likable and entertaining leading men in Hollywood, but star power alone is simply not enough to make an entire film no matter how brightly that star may shine (and what better example of that do we have than nearly the entire “Pirates of the Caribbean” franchise?) “The Rum Diary” is by no means horrible but it is not the hectic dark comedy we deserved and it feels agonizingly long and shockingly irrelevant. 4/10 stars

IN TIME

“In Time” is a sloppy mess from beginning to end and it is quite difficult to figure out where the multi-million dollar budget went because this movie simply looks hideous. There’s one car crash scene in particular that was so poorly digitalized that it makes the Sega Dreamcast look novel in comparison. I want to know what special effects technician looked at the final product of that scene and went, “Nailed it!” Not only that, the producers didn’t even attempt to bring any futuristic or surrealistic looks to the environments portrayed in the film since, apparently, dreary and dull was their new black. The only semi-reasonable conclusion is that 95% of the budget went directly into Justin Timberlake’s pocket, which is truly sad considering how atrocious his acting was. In fact, every single actor in this movie is atrocious. Maybe it was because of the overtly melodramatic dialogue, but nearly every single discourse in the film was laughably bad and B-movie quality (and I’m talking Ed Wood quality here). I will admit that the overall concept is a pretty neat one and exciting in and of itself; it’s just a shame that such original ideas were wasted on such a second-rate film. Director Andrew Niccol is no stranger to unconventional plots- having directed “Gattaca”, “Lord of War” and “S1mone”- and he usually pulls them through without a hitch. It’s actually shocking that he let this one slip so far away, though I suspect a heavy Hollywood influence may have been partly to blame, if not entirely. Not even the always reliable Cillian Murphy (who plays the leading “time-keeper” opposite Timberlake’s modern Robin Hood) could bring much spark to this stale outing. Without even mentioning the numerous glaring plot-holes, this is just an all around sub-par movie and highly disappointing. I had actually been a fan of Justin’s previous few films and found him a compelling and entertaining supporting actor to watch on-screen. Presumably, this was his big time to shine and burst into the leading man spotlight ala Will Smith or Tom Cruise. Well...so much for that. 3/10 stars
Student Wellness Survey Results

Aleksandra Yakhkind, MSI

The Wellness Council sent out a survey mid-November, and we thought that you, the USF Health Community, might like to see the results.

In sum, first and second year students completed the survey. The distribution between classes is unknown. Eight students did not wish for their results to be published, so for these results, n = 111. Below are a summary of the results and some quotations from students. Please contact the Wellness Council with questions, comments, or if you’d like further information.

How much time do you allow for yourself each day?

<table>
<thead>
<tr>
<th>Time</th>
<th>Results</th>
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<tbody>
<tr>
<td>&lt; 1/2 hour</td>
<td>20</td>
</tr>
<tr>
<td>1 hour</td>
<td>30</td>
</tr>
<tr>
<td>2 hours</td>
<td>20</td>
</tr>
<tr>
<td>3-4 hours</td>
<td>10</td>
</tr>
<tr>
<td>&gt;4 hours</td>
<td>5</td>
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</tbody>
</table>

<table>
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<tr>
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<th>Results</th>
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<td>1 hour</td>
<td>20</td>
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<tr>
<td>2 hours</td>
<td>10</td>
</tr>
<tr>
<td>3-4 hours</td>
<td>10</td>
</tr>
<tr>
<td>&gt;4 hours</td>
<td>5</td>
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How much sleep do you get on a regular basis?

<table>
<thead>
<tr>
<th>Sleep Level</th>
<th>Results</th>
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</thead>
<tbody>
<tr>
<td>Too much</td>
<td>6</td>
</tr>
<tr>
<td>Not enough</td>
<td>46</td>
</tr>
<tr>
<td>Just right</td>
<td>67</td>
</tr>
</tbody>
</table>

Does the amount/quality of sleep you get change when you are preparing for a test?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>75</td>
<td>34</td>
</tr>
<tr>
<td>62%</td>
<td>31%</td>
</tr>
</tbody>
</table>

What do you do in that time off?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>TV</td>
<td>63</td>
</tr>
<tr>
<td>Fitness/sports</td>
<td>20</td>
</tr>
<tr>
<td>Hanging out with friends</td>
<td>10</td>
</tr>
<tr>
<td>Talking to family</td>
<td>5</td>
</tr>
<tr>
<td>Prayer</td>
<td>7</td>
</tr>
<tr>
<td>Reading</td>
<td>10</td>
</tr>
</tbody>
</table>

Common choices in “other” category included:
- Cooking
- Going out to dinner/events
- Sleep

How would you describe your eating habits?

<table>
<thead>
<tr>
<th>Eating Habit</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inadequate</td>
<td>6</td>
</tr>
<tr>
<td>I eat more than I should</td>
<td>25</td>
</tr>
<tr>
<td>Adequate</td>
<td>71</td>
</tr>
<tr>
<td>Irregular</td>
<td>25</td>
</tr>
</tbody>
</table>

Do your eating habits change when you are preparing for a test?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>67</td>
<td>44</td>
</tr>
<tr>
<td>60%</td>
<td>40%</td>
</tr>
</tbody>
</table>

Please describe any changes to your routine that occur when you are preparing for a test:
- Often don’t allow myself as much time as I should to cut back on fun activities in place of studying. It’s not good, but I often feel better just sitting like a zombie in front of my computer screen rereading my notes than taking a break to clear my mind. I’m currently coping with these changes by trying to portion my time more evenly so I do not feel as behind as I normally do.
- Study more!
- More fast food eating, dangerous amounts of caffeine
- Sleep less, cook less, and exercise less
- My room gets very disorganized

(Continued on page 16)
Barbara’s Nutrition Corner
By: Barbara E. Roberts, MS, RD, LD/N

Healthy Eating for You and Your Patients

Obesity is an epidemic in this country. Along with obesity come many other chronic diseases such as diabetes, hypertension, heart disease, sleep apnea, arthritis, psychological issues and cancer.
Healthy eating for individuals should include the following:
- Eat regularly, every 6-8 hrs include protein for satiety, carbohydrates for energy
- Planning for food is best. Relying on fast food/convenience food will likely make you less healthy & lethargic.
- Quick grocery store pick-ups in time you’d spend in drive-thru
- Cut-up fruit
- 2 slices deli meat with whole wheat roll from deli
- Yogurt and granola bar
- Cheese stick with nuts
- Trail mix
- Hummus with crackers
- Tuna fish with crackers
- Canned fruit with vegetables from deli
- Limit high saturated/trans fat foods such as fried foods, heavily processed, etc.
- Saturated and trans are directly correlated to high cholesterol, heart disease; loosely correlated to cancer.
- Adequate fluids while limiting caffeine
- Exercise- go for a walk to get some energy and relaxation

For yourself and your patients dealing with conditions below are encouraged:
- At least 5 fruits/vegetables daily- the brighter the better. However, cauliflower, baked potatoes and bananas are still healthy foods so please don’t get into the “White=bad” trap.
- This is in bold because this is the MOST IMPORTANT thing you can do for yourself & tell your patients this too. Fruits are FINE even if you have diabetes. If your patient has diabetes they should attend a class to learn about carb counting- many options out there so please refer them.
- Lean meats 6 to 8 ounces per day. Seafood 2 x week or more
- Lean beef/pork < 1 x a week (more leads to colon cancer)
- Whole grains- “whole” should be 1st ingredient on all rice, cereal, pasta, bread you eat
- Popcorn is a whole grain, yellow rice is not
- Most of what we eat should be whole grains
- Carbs are not the enemy- too much of everything else is
- Dairy for bones- if you are lactose intolerant choose soy, rice, almond milk
- 3 to 4 servings per day. Optimal bone mineralization is achieved up to age 30
- Fats- choose healthy fats in moderation- olive/canola oil, nuts, avocado, nut butters
- Junk foods, sweets, alcohol in moderation
- Healthy & quick meal/snack ideas:
- Fresh fruit and low fat cheese stick
- Peanut butter and jelly on whole wheat bread
- Hummus and Triscuits
- High fiber granola bar- Fiber One, etc.
- Healthy TV dinner (Healthy Choice, Weight Watchers, Lean Cuisine)
- Trail mix
- Whole grain cereal and milk
- Raw vegetables with dip
- Tuna fish with crackers

Healthy Eating on a Budget
By: Jessica Deslauriers, MSII - From EatingWell.com

Inside-Out Lasagna
Makes 4 servings

Ingredients
8 ounces whole-wheat rotini or fusilli
1 tablespoon extra-virgin olive oil
1 onion, chopped
3 cloves cloves garlic, sliced
8 ounces sliced white mushrooms (about 3 1/2 cups)
1/2 teaspoon salt
1/4 teaspoon freshly ground pepper
1 14-ounce can diced tomatoes with Italian herbs
8 cups baby spinach
1/2 teaspoon crushed red pepper (optional)
3/4 cup part-skim ricotta cheese

Preparation
Bring a large pot of water to a boil. Add pasta; cook until just tender, 8 to 10 minutes or according to package directions. Drain and transfer to a large bowl. Meanwhile, heat oil in a large nonstick skillet over medium heat. Add onion and garlic and cook, stirring, until soft and beginning to brown, about 3 minutes. Add mushrooms, salt and pepper and cook, stirring, until the mushrooms release their liquid, 4 to 6 minutes.

(Continued on page 13)
Vedic Thai-Yoga What?  
An Interview with a Unique Massage Therapist  
By Aleksandra Yakhkind, MSI

Ever since I was little and my mom used to put Chinese oils on my chest when I had a cold, I have been interesting in understanding how unconventional forms of healing can and inevitably do fit into our medical system. Whether it is traditional healing from another culture or a popular wellness fad, it is in our and our patient’s best interest to learn how that modality can affect our care and the patient’s health. This article aims at shedding light on one of those modalities, which is massage. For a lot of us, we know it feels good, but what is it? Where does it come from? And how does it affect health?

Johnny Erb is a Tampa-based licensed massage therapist. He agreed to do an interview with me to tell me more about his practice of Thai-Yoga Massage.

How would you define yourself and what you do?

I am a healer and an artist. I use Vedic Thai-Yoga, a unique style of bodywork which integrates Ayurvedic and oriental medicines, deep tissue massage, coordinated breath work, and assisted yoga stretching. This form of bodywork is practiced on a mat, allowing for full range of movement. Deep tissue manipulation dissolves physical tension while the assisted stretch and breath exercises realign the body to enhance the natural flow of energy. These techniques facilitate the elimination of toxins, improve respiratory patterns and promote ideal posture, leaving the client with a deep sense of well-being.

Tell me a little about how you got into massage?

I think we all desire to serve our fellow humans. The Vedic conservatory showed me how to use dance, martial arts, and mediation—all things that I was passionate about—to offer someone a wellness experience that is second to none. I have fundamental training in more common modalities and my clients sometimes enjoy a deep tissue/neuromuscular massage. However, I mostly work on the floor. It is more organic and liberating for me.

What is the best part about being a massage therapist?

Seeing sparkly-eyed clients radiate a sense of well-being at the end of a session, and when they return. It is gratifying to know that they are benefiting from my offerings.

What are the hardest parts about the job?

I don’t give power to negative feelings in my work.

How would you define massage?

(Continued on page 13)
Each person has their own idea of what massage is. I work with each client to embody their own sense of how massage improves their lives.

**How does massage complement other healing modalities**

I’ve worked with people post-surgery and after restorative treatments. It seems to greatly assist them in the healing process. I’ve had success working hand in hand with mental health professionals as well.

**How is massage unique?**

My use of intuition and creativity in the therapeutic environment is paramount to providing a meaningful session.

**What types of people are your main clients? (Athletes, students, business-people) Why do they come see you?**

My clients come from all walks of life. Their reasons can be a complicated mix of physical and emotional restrictions.

**What do you think are the most common misperceptions about massage and how would you address them?**

I’d like people to know that this type of physical medicine can enhance all aspects of their lives, and that the work is beyond being pampered by luxury.

**For someone like a student at USF Health who is into “the facts,” what is a fact about massage that you think is important for them to know?**

For thousands of years, it has been known that subtle energies of the body have a profound effect on our physical and emotional health. A skilled practitioner can enhance the flow of things like synovial and lymphatic fluid to detoxify and nourish the body.

**How much is a massage?**

I perform 90 minute sessions for a hundred bucks. If this article resonates with anyone, they can hit me up and I’ll give them a discount.

How does one find you and make an appointment?

Johnny Erb LMT MA58736  
(813) 293-0203  
Yogani.com

(Continued from page 11)

Add tomatoes, spinach and crushed red pepper (if using). Increase heat to medium-high; cook, stirring once halfway through, until the spinach is wilted, about 4 minutes. Toss the sauce with the pasta and divide among 4 bowls. Dollop each serving with 3 tablespoons of ricotta.

**Nutrition**  
**Per serving:** 364 calories; 9 g fat (3 g sat, 4 g mono); 14 mg cholesterol; 55 g carbohydrates; 0 g added sugars; 16 g protein; 7 g fiber; 588 mg sodium; 786 mg potassium. According to EatingWell.com, this recipe costs less than $3 per serving and is fairly simple to make. For more information, check out EatingWell.com or Eating Well magazine today!
A Cooking Demo and A Recipe
Danielle Kurant, MSII

Earlier this month, the newly-instituted Wellness Council had its first Nutritional Wellness cooking demonstration. Eight exciting and easy healthy recipes were demonstrated to an audience of MD and DPT students at the Diabetes Center, located on the 5th floor of the Morsani Center. The evening included homemade hummus, roast chicken, tasty soups and sandwiches made from leftover roast chicken, and more. Recipes from the demonstration have been placed on the Nutritional Wellness page of the Wellness Council website. Several other quick and healthy recipes are also available on the site. Explore all that the Wellness Council has to offer at http://usfcomwellness.webs.com/

The following recipe, created and demonstrated by first-year student Michelle Rosario, was a crowd favorite. She has kindly shared the recipe with the BULLetin so you can enjoy this tantalizing Italian treat at home.

**Greek Yogurt Panna Cotta**

**Ingredients:**
- 1 envelope unflavored gelatin (2 ¼ tsp)
- 2 tablespoons cold water
- 1 cup lowfat milk (1% or 2%)
- 1/3 cup sugar
- 2 tsp vanilla extract (alternatively, you can use 2 tsp or more of vanilla bean paste)
- 1 tub (17.6 oz) Greek yogurt (about 2 cups)
- honey, fruit topping, or fresh berries for topping

**Method:**
- Pour 2 tbsp cold water into a small bowl. Sprinkle the gelatin on top and let it stand for about 5 minutes.
- In a small saucepan, bring the milk, sugar, and vanilla to a simmer. Take off of the heat and stir in the gelatin until dissolved.
- In another bowl, whisk yogurt until smooth. Slowly add the vanilla/milk mixture. Pour mixture into single serving containers or into a dish of your preference.
- Refrigerate at least 3 hours. Serve with fresh berries, your favorite fruit topping, or drizzle with honey.

*Photo by Christina Nguyen, MSII*
Donald Wheeler, MD is an associate professor of pathology and cell biology and internal medicine at the College of Medicine. He is also the year 2 faculty administrator and course director for medical sciences course 3. Dr. Wheeler leads a sitting meditation group every Monday at noon in MDC 305. If you’d like to learn more about meditation, please read on to an interview with Dr. Wheeler about his experiences with the practice and suggestions for students and health care professionals.

What brought you to meditation?
I first became interested in meditation in 1999 back when I lived in New Mexico and began to attend a local Zen Buddhist Sangha or community. The practice of meditation was very attractive to me back then and has continued to the present day.

Could you tell me about the type of meditation that you practice? What are the goals of this type of meditation?
One could argue that there is no “goal” when doing Zen meditation, but I think you mean that one of the major reasons for meditating is to quiet the mind and learn to bring focus and awareness to the present moment. Setting up “goals” that carry a judgment (“I’m doing it right” or “wrong”) can just get in the way of a meditation practice. Secondary benefits like a decrease in stress hormones, pulse and BP may also result from meditation practice.

How does it compare to other types of meditation?
Some kinds of meditation are more guided; that is, there is a purpose “up front” to the particular practice, like a guided meditation about compassion or loving-kindness, or focus on a particular saying or “mantra”. This is very variable based on the tradition of the meditation practice. Other types of meditation may be more body oriented; the so-called “body scan” type of meditation. Some include Tai Chi and Yoga as forms of meditative practice as they encourage being in the present moment.

Please describe your meditation practice. How often do you practice? For how long?
I try to sit most days of the week for about 30 minutes.

What have been the major challenges in your meditation practice and how have you worked to overcome them?
The resistance to practice is pretty much the same for most folks – first, there are the physical challenges of sitting in a particular posture for an extended period without moving. All the aches and pains associated with being still for awhile can be daunting sometimes. Then the mental issues of being preoccupied with “stuff” when I sit, or just being bored with doing something I’ve done so many times. However, these are just thoughts that need to be let go of – which is something meditation helps with – letting go of thoughts without reacting to them.

What would be the particular benefits of meditation for someone in science and/or the health care field?
Stress is a major component of someone in the health care field, and so having a meditation practice might be of significant benefit. Mindfulness meditation is actively taught in many settings, including at medical schools as a way of living with or coping with stress.

If someone is interested in trying meditation, what first steps would you recommend he or she should take?
Make a commitment to practice for a finite period, say two weeks, at a certain time each day for a certain amount of time (maybe 10 minutes or so). Meditation practice is like physical exercise – you have to make a commitment and practice it for a certain amount of time to derive any benefit.

What resources, (books, websites, films, etc.), would you recommend to someone interested in meditation?
There is a plethora of material on the web, and books galore at Amazon.com, that should peak anyone’s enthusiasm if they have some in meditation. From a Zen Buddhist perspective, the book “Zen Mind, Beginner’s Mind” by Suzuki Roshi is a good one. For a more secular look at mindfulness meditation, the book by Jon Kabat-Zinn that is weirdly titled: “Full Catastrophe Living: Using the Wisdom of Your Body and Mind to Face Stress, Pain, and Illness” is an excellent source.

If you have one piece of advice for someone starting up a meditation practice, what would it be?
You need to bring patience and commitment to the practice of meditation. You can read all you want, but you need to sit down on the cushion regularly for a while to get the full experience of this practice.
What kinds of wellness activities would you like to have available to USF Health?

- Mind-body classes
- Cooking classes
- Speaker-series
- Wellness discussions...
- Physical fitness...
- Other

What types of physical wellness classes would you like to have available to USF Health?

- Yoga
- Pilates
- Spinning
- Dance
- Other

What else would help you stay healthy and excel in your studies?

- Healthier food options on campus that is not so expensive.
- More cooking demos.
- On call massage therapist that works for tips.
- Fountain drinks: when I went to a doctor’s lounge at TGH, they had fountain juice or tea. I don’t drink coffee, so free coffee at the lounge does not do for me.
- Squat rack and bench with a barbell in the health fitness center.
- Closer group fitness classes in the Health complex would give me so much more incentive to get myself to workout -- maybe even some quick 15-30 min routines during a lunch break each week.

“Resources with tips on how to focus, study, career counseling even in first and second year, because we worry about this stuff now.”

- More silliness and happiness to break up long bouts of studying and classes. It was really awesome to see our professors’ fun-loving sides. Dr. Saporta as Snape or Dr. Arslan with pink hair!

- If we had a dedicated nap break during lectures. I’m serious. I can usually stay awake for the first 20 min or so, but then I’m out. Usually wake up for the last 10 min after my nap though. I’m alert and feel like I learn a lot better.

Other comments:

- I think it is very important, especially as a medical student, to stay healthy and take care of yourself, because this affects your mental capability and your ability to stay focused.

- I think student wellness is extremely important. I often find that if I’m not in balance, it affects my work and performance. It’s comforting when I talk to others and realize I’m not alone. I encourage more group discussion/interaction in this manner.

“Thanks!”