Our Cardinal Station practice moved to Central Avenue in 2005 and is staffed by experienced and board-certified University of Louisville physicians offering a full range of healthcare services for you and your family.

Our physicians are at the forefront of the latest healthcare trends, practice evidence-based medicine, and focus on patient-centered care delivered through a collaboration with providers in various subspecialties such as allergy, podiatry, sports and physical medicine and rehab. At Cardinal Station Family Medicine, patients have access to a multidisciplinary care team including their physician or nurse practitioner, a social worker, mental behavioral health specialist, chronic care coordinator, nutritionist and certified diabetic educator. We emphasize quality health outcomes and customer service, and welcome new patients to join our growing practice.

We are conveniently located on Belknap Campus behind Papa John’s Cardinal Stadium and next to James Patterson baseball stadium. Appointments can be made and more information is available by calling (502) 852-2822 Monday through Friday from 8:00a.m. to 5:00p.m. We accept most insurance plans and have flexible programs for individuals who are without insurance. Let our office be your primary care provider and gateway into the University of Louisville healthcare system.
Farewell

“Despite decreasing interest in family medicine and other generalists’ specialties, I believe the future is bright.” ~ Dr. James G. O’Brien, Chairman
University of Louisville Department of Family & Geriatric Medicine

We would like to wish our graduating residents well, as they brightly chart their futures in family medicine. Shine on, Graduates of 2012.

Joshua Blair, MD: Joining a practice in Hopkinsville, KY.
Danielle Hill, MD: Joining a practice in Atlanta, GA.
Alison Tucker, MD: Joining a practice in Louisville, KY.
Ann Walker, MD: Joining a practice in Louisville, KY.

Daniel Hartman, DO: Joining a practice in Nashville, TN.
David Treese, MD: Joining a practice in Louisville, KY.
Ivan Calderon, MD: Joining a practice in Louisville, KY.
Kristopher Fannin, MD: Joining a practice in Louisville, KY.

Awards

Daniel Hartman, DO
Third Year Resident
Kenneth Holtzapple, M.D.
Excellence in Humanistic Medicine Award

Alison Tucker, MD
Third Year Resident
Quality Scholar Award
Geriatrics Award

Neetu Jose, MD
Second Year Resident
Paul C. Grider, M.D.
Outstanding Resident Award

Amy Kim, MD
First Year Resident
Stephen F. Wheeler, M.D.
Intern of the Year Award

Angela Wetherton, MD
Faculty
James F. Kurfees, M.D.
Excellence in Teaching Award

Michael Ostapchuk, MD
Faculty
Outstanding Faculty Award

“My philosophy of life is that if we make up our mind what we are going to make of our lives, then work hard toward that goal, we never lose — somehow we win out.” ~ Ronald Reagan
This term doesn’t just apply to the upcoming Olympic Games. In this summer season, millions of people flock to the beach and other sunny places to enjoy the warm weather. Intentional and unintentional exposure to the sun is increasing the risk for skin cancer and other adverse health effects.

For centuries, tanned skin was considered unattractive. Women went to great lengths to make their skin paler, even using such things as arsenic and lead as whiteners to achieve this goal. Tanned skin was a symbol of a lower social class that labored outdoors. Legend has it that in 1923, Coco Chanel sported a golden tan upon return from a trip to France and is credited, in part, with launching the multimillion dollar sun tanning industry we have today. Sunbathing became a new, fashionable pastime and a suntan became the symbol of “the good life”.

In the 1970’s, the dangers of sun exposure started to be understood and suntan lotions were invented and recommended. Tanning beds came into existence at this time with the belief that this would be a safer alternative to the real thing. In fact, indoor tanning may be more dangerous since the radiation emitted is more intense and the exposure to the harmful rays can be more prolonged. The International Agency for Research on Cancer has recommended a ban on indoor tanning for those younger than 18 and has strongly discouraged the use of tanning equipment by anyone.

Ultraviolet A and B rays from the sun (UVA and UVB) both cause skin damage. UVB rays cause sunburns and increase the risk for squamous cell and basal cell cancers. UVA rays penetrate the skin more deeply, increasing the risk for melanoma (the most serious form of skin cancer) and possibly damaging the body’s ability to fight other diseases as well. Besides skin cancer and effects on the immune system, exposure to harmful UV rays can lead to premature aging of the skin, cataracts and other eye damage. Unprotected exposure to UV radiation is the most preventable risk factor for skin cancer. Other factors may make certain individuals more at risk including fair hair and skin, light-colored eyes, having many moles and freckles, having a family member with skin cancer and having serious sunburns as a child.

Skin cancer is the most common form of cancer in the United States. One in five Americans will develop skin cancer in their lifetime. One American dies of skin cancer every hour!

Don’t panic! Understanding these risks and taking a few sensible precautions will help you enjoy the sun while lowering your chances of sun-related health problems.

1. AVOID THE SUN- don’t go out in the sun between 10 am and 4 pm when the rays are strongest and most damaging. Sunburn and suntan are signs of skin damage.
2. USE SUNSCREEN- use SPF factor of 15 or greater even on cloudy days. Replace your sunscreen every season since the ingredients may break down. Apply it before you go out and reapply it every hour if you are swimming or sweating.
3. WEAR A WIDE-BRIMMED HAT, PROTECTIVE CLOTHING AND SUNGLASSES- a 6 inch brim all the way around is best. Sunglasses should block both UVA and UVB rays. Glasses that wrap to cover the sides of your eyes are best to prevent eye-related problems. Cover as much of your body as possible with sun-protected clothing.
4. DON’T TRY TO GET A TAN- don’t use tanning beds or sunlamps. Don’t use tanning oils. There are many safe spray tanning options if you crave the “glow”.

Since skin cancer is very curable especially if caught early, you should check your moles and see your doctor if you find any signs of cancer. These signs can be remembered with the following ABCDE rule.

A. Assymetry - both halves of the mole look different.
B. Border- the edges are jagged or blurry.
C. Color- the color is changing, very dark, or has multiple colors.
D. Diameter- the size is greater than ¼ inch (the size of a pencil eraser).
E. Elevation- it is raised and has an uneven surface.

Remember to report any mole that is growing, bleeding, crustsing, or itching and any sore that will not heal. Let’s let the athletes “Go for the Gold” while we play it safe in the sun!

References:
http://www.epa.gov/sunwise/doc/healtheffects.pdf

Welcome to Ronna Compton, DO
Dr. Ronna Compton has returned to our department as a new faculty member. She obtained her D.O. degree from the Edward Via Virginia College of Osteopathic Medicine in 2007. Also, she completed both her residency in Family Medicine in 2010 and a Geriatric Fellowship in 2011 at UofL, Department of Family & Geriatric Medicine. Dr. Compton will be seeing patients in both the Geriatrics office in the HCOC and at Cardinal Station Family Medicine office.
A concussion is a brain injury and should be taken seriously. In an effort to promote concussion awareness and protect athletes, a concussion law was passed in Kentucky on April 11, 2012.

**The law has the following provisions:**
- Interscholastic athletes, parents, and coaches receive education regarding concussions.
- If an athlete is suspected of having a concussion, he or she must be removed from play immediately.
- To return to play following a concussion, athletes must be cleared by a physician.

This law has broad implications. Coaches will be required to take a more active role in the safety of the athletes. Parents will be more equipped to recognize when their child may have suffered a concussion and have the confidence to ask that he or she be removed from play. Athletes will be expected to monitor themselves and teammates to keep everyone safe even if it means missing a game, a practice, or even the season. For physicians, it means staying current on concussion management in order to guide a safe return to play.

A concussion does not have to include a loss of consciousness. The signs and symptoms of a concussion can be broken down into four categories:
- **Cognitive** (issues with thinking and memory): trouble concentrating, feeling slowed down, feeling in a “fog,” forgetfulness and memory loss
- **Emotional** (irritability, sadness, feeling anxious or overly emotional)
- **Physical** (headache, dizziness, blurred vision, nausea, vomiting, loss of balance, sensitivity to bright light and loud noises)
- **Sleep disturbances** (sleeping too much, trouble falling asleep)

Concussion management requires an individualized plan as each person recovers at a different speed. Initially, the athlete will be advised to undergo both physical and cognitive rest so the brain can recover. Once the athlete is totally without symptoms, he or she will slowly be returned to sports in a stepwise approach.

To make a referral to Dr. Stumbo or Dr. Jonathan Becker in the Owsley Brown Frazier Sports Medicine Clinic, please call 502-637-9313.

**WARNING SIGNS**
- Slurred speech
- Seizures
- Persistent nausea and vomiting
- Worsening headache
- Difficulty awakening from sleep
- Weakness, numbness or decreased coordination
- Getting more and more confused, restless or agitated
- Any worsening or progression of symptoms

**Get prompt immediate medical attention!**

Resources: www.cdc.gov/concussion and www.ncaa.org