

# My Tenure as Department Chair, 1990–2006

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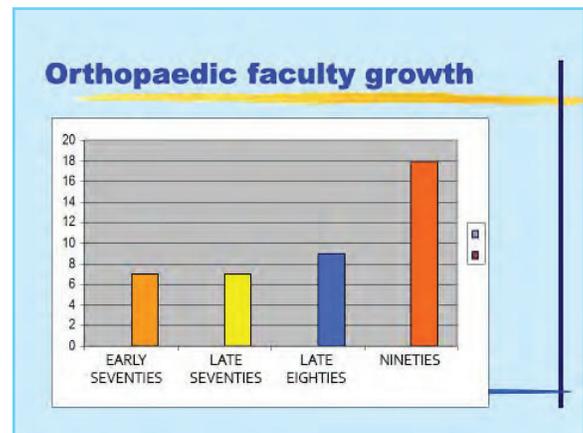
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George E. Omer, MD, the founder of the University of New Mexico (UNM) Department of Orthopaedics & Rehabilitation, stepped down in July 1990, after serving for 20 years. Dr. Leonard M. Napolitano (Dean, UNM School of Medicine) appointed me as interim chair for 6 months and, after a national search, as professor and chair in January 1991. I had the fortune of working with Dr. Omer since my arrival to UNM in 1976. At this time, many of the orthopaedic services in the country were placed in divisions of general surgery. That was not the case at UNM because Dr. Omer was successful in getting approval from the faculty senate to establish an orthopaedic department, including separate budget, faculty, residents, and administration.

The productivity of the UNM Health Sciences Center had tremendous growth in the 1990s, with the addition of the Ambulatory Care Center that housed faculty offices and added much-needed space for clinics. Furthermore, a new parking structure was built to improve patient access to the UNM Hospital. During this time, the mission and visions of the department were articulated.

In brief, the mission was to provide compassionate, comprehensive, and quality musculoskeletal care for the people of New Mexico and Four Corners region. The vision was to offer our patients advanced treatment by the alliance of patient-centered care, research incentives, resident education, and the expertise of faculty members in subspecialties of orthopaedic surgery. To help achieve these goals, I focused heavily on expanding full-time faculty positions (Figure 1).

With the aid of UNM Hospital and School of Medicine practice-plan organizations, funds were available to hire doctors with subspecialty qualifications. A structural chart helped establish divisions, sections, programs, and an administrative infrastructure. At this time, both physical and occupational therapy programs were housed in the department. In 2001, we consisted of 32 full-time faculty members (including physical and occupational therapists) and 83 volunteer faculty members from the providers in the community. Furthermore, when Carrie Tingley Hospital was moved to Albuquerque, a division of pediatric orthopaedics was organized.



**Figure 1.** Expansion of faculty in the Department Orthopaedics & Rehabilitation, which increased from 7 members in the 1970s to 18 in the 1990s.

Research efforts were enhanced by establishing a biomechanics research laboratory and adding a full-time, PhD research faculty position. This was the beginning of collaboration with the UNM School of Engineering on north campus and encouraging a graduate program in biomechanics, which resulted in 20 peer-reviewed publications. Faculty members were encouraged to publish and present their scholarly work at regional and national meetings. Furthermore, a clinical track was established for faculty at the school of medicine to recognize high activity in clinical work and education. The microsurgery teaching laboratory (established in 1977), the offering of replantation procedures for treating severed extremities, and the successful surgical re-attachment of a completely severed hand continued to attract applicants to the Hand Fellowship Program. The inclusion of microsurgery continues to be a valuable clinical and educational aspect of the program.

Clearly, there was a need to expand clinic space and hospital access to better care for our patients. In recognition of the added value to both the patients and hospital, the Outpatient Surgery and Imaging Services (commonly known as OSIS) was opened in September 2003 (Figure 2). Finally, through the collaboration of the school of medicine, hospital, and department, an offsite specialty clinic located on Medical Arts Avenue was incorporated in 2004.

The challenges met, during these 17 years, were the recruitment of outstanding faculty members (Figure 3);

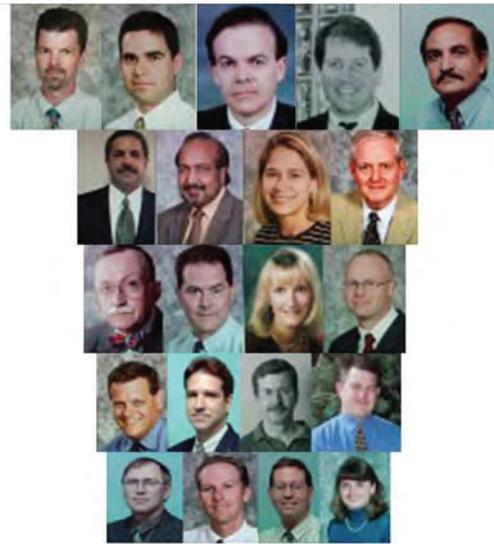
improved hospital market share by adding clinics and operating rooms; the addition of fellowships in trauma and sports medicine; and furthering research efforts by hiring a full-time PhD and encouraging a graduate program in biomechanics.



**Figure 2.** The opening of the Outpatient Surgery and Imaging Services (known as OSIS) in 2003.

As I reflect on my tenure as department chair, I feel fortunate that I spent 17 years in that position. It has been said that being a department chair in an academic medical school is the best leadership position there is. A chair is free to allocate time between clinical care, research, administrative responsibilities, and UNM Health Sciences Center outside departmental boundaries. My additional positions as chief of the medical staff, president of the UNM Medical Group, and member of the UNM Hospital Board enabled me to help the medical school community in many areas, advocating for the entire faculty and community at large.

Faculty recruitment and retention have been some of my primary goals, as faculty members are the foundation of a successful enterprise. They can create a productive and healthy environment to serve the community and train future orthopaedic surgeons. Although one can often feel lonely at the top—especially when fundamental decisions need to be made—I greatly appreciate this opportunity given to me.



**Figure 3.** Faces of the outstanding, full-time faculty members in 2005. Left to right, listed by orthopaedic subspecialties (unless otherwise noted): top row includes oncology, spine, adult reconstruction, foot and ankle, and research; second-to-top row, hand; middle row, pediatrics; second-to-bottom row, sports medicine; bottom row, first two faculty members in trauma, last two worked at the Veterans Affairs Hospital.