



## **Catherine A. Bishop, D.O., F.A.A.F.P.**

### **1. Where did you go to medical school? Where was your residency?**

I attended medical school at West Virginia Osteopathic Medical School, Lewisburg, W. Va., in 1994. I had an internship at Ohio Valley General, Wheeling, W. Va., in 1995. I then, completed my residency at Geisinger Medical Center, Danville, Pa., in 1997.

### **2. Please describe your current (and past) practice setting/patient population - (i.e. rural, urban office setting; geriatrics, sports medicine, academic medicine, etc.)**

I currently practice in Chillicothe, Ohio, at Senior Health Center. I work with geriatric patients age 60 and above. I previously practiced at Chillicothe Family Physicians doing family medicine from 1997-2006. There was a population of about 25,000 in the city and 75,000 in the surrounding counties; so, total we served a population in five counties of about 150,000.

### **3. Why did you choose family medicine? Was there a particular event/person that helped you decide to enter family medicine?**

I choose family medicine because of the diversity of scope of practice and the ability to develop relationships with my patients that last a lifetime. I originally went to medical school to become a surgeon but immediately knew that I wanted to be able to develop a partnership with my patients to provide total healthcare.

### **4. While working, what is the best part of your day? Why?**

The best part of my day is when a treatment plan comes together and a patient comes back feeling better about themselves and is an active participant in the care.

### **5. What is the most difficult part of your day? Why? How do you deal with it?**

The worst part of my day is completing the paperwork that has become a necessity in our managed care and Medicare-driven system.

The most difficult part of any day is telling a patient that they have a life-threatening illness or a grave prognosis. I pray with my patients during these most difficult times and make sure they have all the information they need.

### **6. What do you think is the most important personality trait that a family physician can possess? Why?**

The most important personality trait that a family physician can possess is compassion and understanding for the patients. If we cannot feel the needs of our patients, we cannot effectively treat them nor can we develop the relationships with them that are necessary to care for them.

**7. What do you think patients value the most in their physician? Why?**

Patients value having accessibility to their physician and having trust in their physician. They want someone who will listen to them and comfort them but also direct them to appropriate care.

**8. What have you learned from your patients?**

I have learned a great deal from my patients: the importance of patience, compassion, spirituality and dignity in difficult times.

**9. What can medical students do right now (other than study) to make themselves become more ready to become family physicians in the future?**

Medical students can at any point in their education visit with family physicians who are passionate about their vocation and they can also volunteer in nursing homes or hospitals to get a real feel for the patient other than just through a medical history.

**10. What other advice do you have for students who are interested in family medicine? And, for those who are not sure yet?**

The same as above; for any medical student is it important to visit those physicians passionate about what they do and see if you can get involved to see if you will have the same passion.