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

I graduated from the University of Louisville College of Medicine, Louisville, Kentucky, in 1981. I completed my residency in family medicine at St. Elizabeth Medical Center, Dayton, Ohio, in 1984.

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

I see patients at the Clinton Memorial Hospital Family Health Center, Wilmington, Ohio, and at Clinton Memorial Hospital. This rural setting is located in Southwest Ohio. Since my practice is in conjunction with the Clinton Memorial Hospital/University of Cincinnati Family Medicine Residency, I provide patient care side-by-side with residents regularly. In addition to my patient care practice, I am the director of the residency. My main interests in clinical practice are point-of-care evidence, behavioral health and women's healthcare, including colonoscopy.

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

When I was growing up in Covington, Kentucky, our family received healthcare from a "general practitioner." As long as I can remember, I was awed by his immense knowledge, caring attitude and community service. I thought it would be great to follow in his footsteps.

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

The opportunity to impact patients' and resident physicians' lives is an honor. Whenever I am able to help my patients sort through their health problems and take a self-interest in their health, it is a good day. Mentoring and coaching physicians in training is a daily source of satisfaction. I love teaching procedures to residents, so on procedure days "time flies." I never have a boring day.

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

Managing time is always a challenge. You wear many hats in academic medicine. You may see patients, followed by giving a lecture, followed by administrative meetings. Sometimes I just have to take a deep breath!

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

Active listening and giving patients undivided attention is a necessary trait of a family physician. You always learn more by listening than by talking.

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

Patients place a high value on demonstrated concern, active interest in their health and good communication skills. Patients really appreciate physicians who can explain complex health issues in understandable lay terms.

8. What have you learned from your patients?

I have learned that none of us are perfect. We all make bad decisions that may impact our health. When we work as a physician-patient team, we foster better health outcomes.

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

Take advantage of opportunities to volunteer your time. Volunteer experiences can strengthen our knowledge of human suffering and give us more empathy. This understanding equips us to maintain momentum and longevity in our day-to-day work.

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

Learn as much as you can about the wide variety of opportunities in medicine. As you encounter doctors ask them to summarize what is the most exciting and the least exciting about their specialty. Read about healthcare delivery in the United States. Ask, "Where can I make the most impact during my career?" Choose a specialty that will be enjoyable and you will never have a boring day!