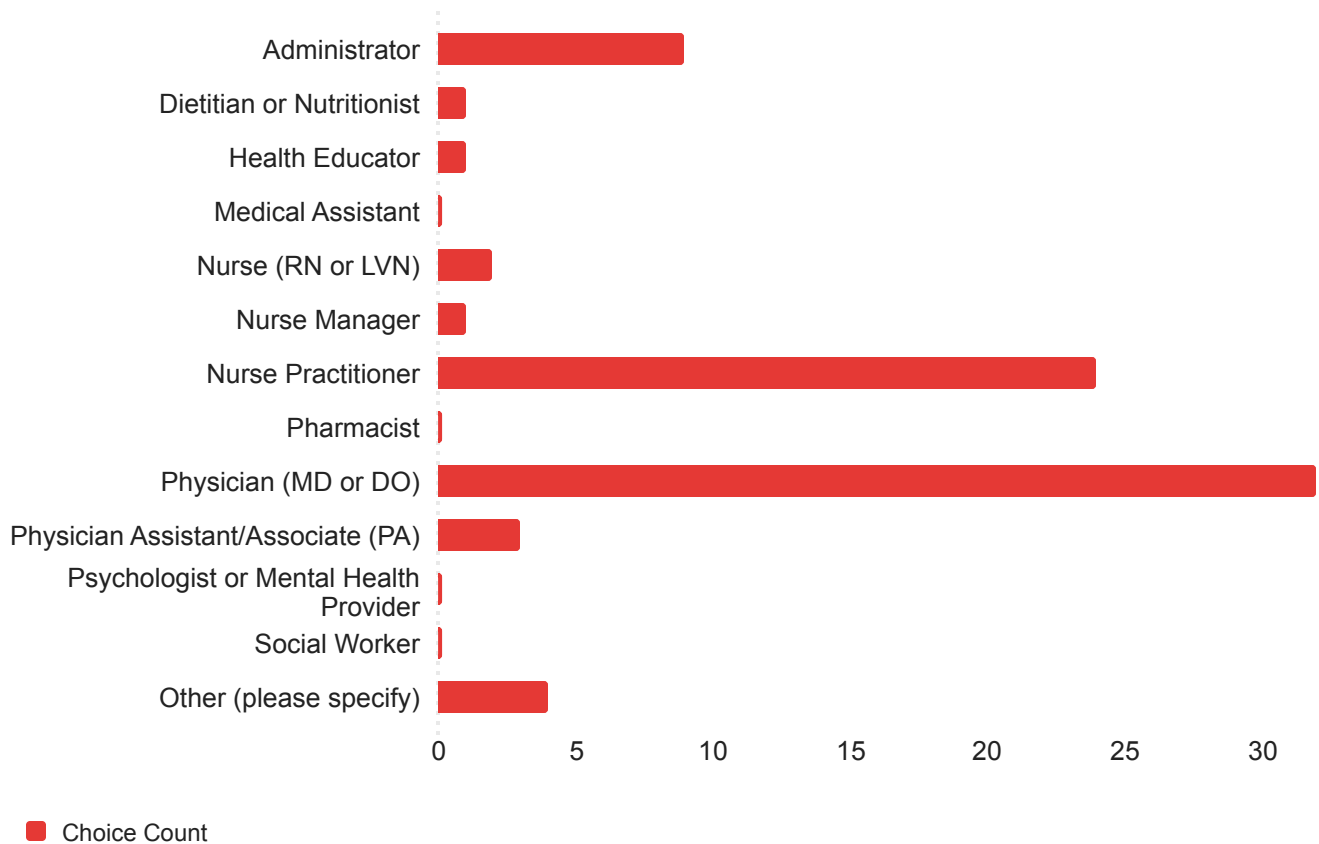


Q1 - Which best describes your primary role in college health/mental health? - Selected Choice



Q1 - Which best describes your primary role in college health/mental health? - Selected Choice

Field	Choice Count
Administrator	9
Dietitian or Nutritionist	1
Health Educator	1
Medical Assistant	0
Nurse (RN or LVN)	2
Nurse Manager	1
Nurse Practitioner	24

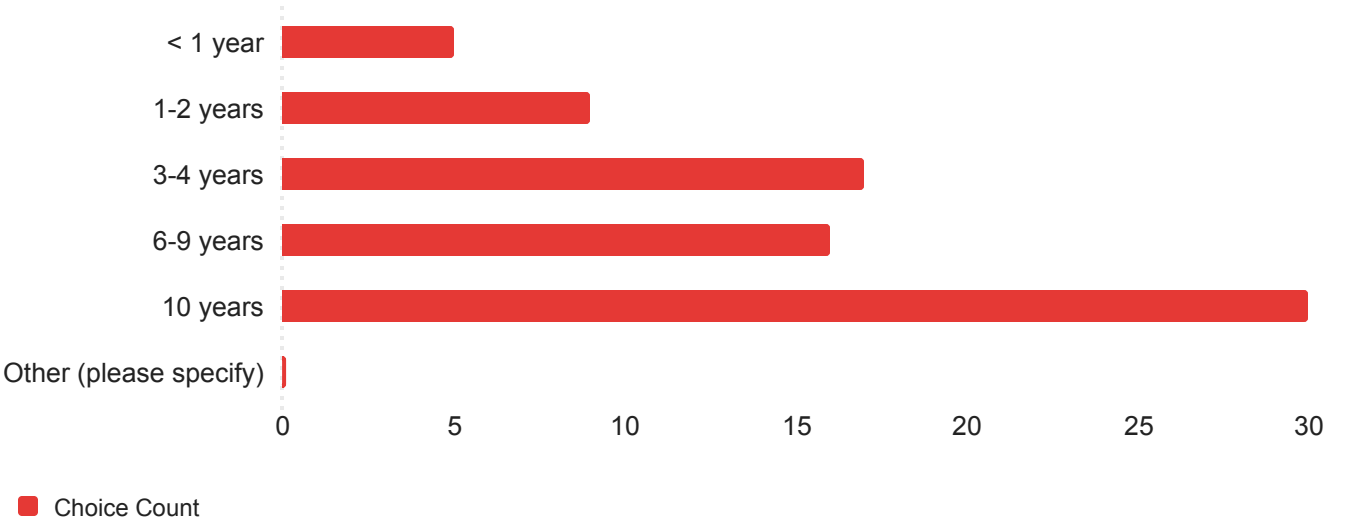
Pharmacist	0
Physician (MD or DO)	32
Physician Assistant/Associate (PA)	3
Psychologist or Mental Health Provider	0
Social Worker	0
Other (please specify)	4

Q1_13_TEXT - Other (please specify) - Text

Other (please specify) - Text

Laboratory Director
physician & administrator
Medical Director (Admin/Physician)
PA, mainly administration

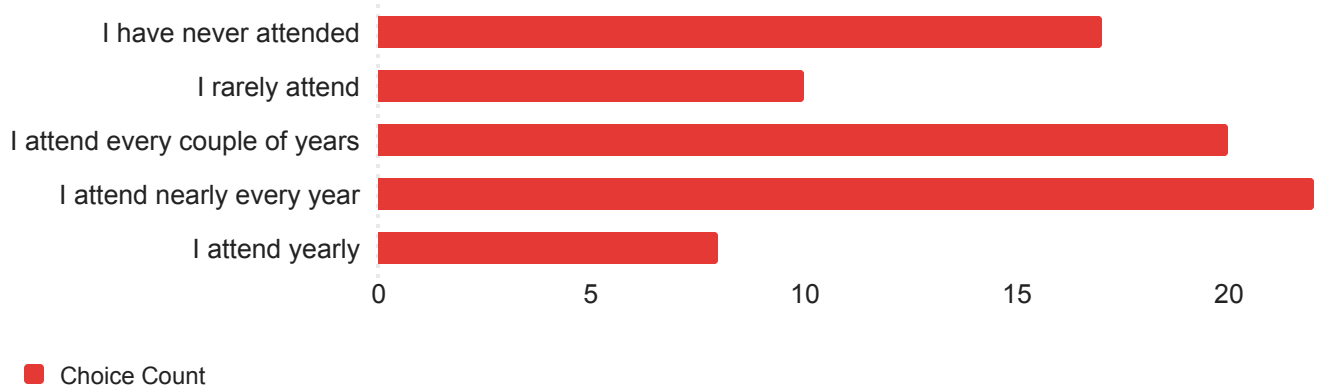
Q2 - How many years have you been professionally involved in college health? - Selected Choice



Q2 - How many years have you been professionally involved in college health? - Selected Choice

Field	Choice Count
< 1 year	5
1-2 years	9
3-4 years	17
6-9 years	16
10 years	30
Other (please specify)	0

Q3 - Which best describes your frequency of attendance at the ACHA Annual Meeting?



Q3 - Which best describes your frequency of attendance at the ACHA Annual Meeting?

Field	Choice Count
I have never attended	17
I rarely attend	10
I attend every couple of years	20
I attend nearly every year	22

I attend yearly

8

Q5 - If you never attend, please share your reason(s).

If you never attend, please share your reason(s).

I have small amount of compensation and I prefer to put my money on more concentrated meetings like AANP's Annual meeting

New to the role and university budget. Plan to attend next year.

Staffing coverage.

Just have not had the opportunity yet. Most of my years worked in college health have been during the pandemic which had been the main focus at our student health.

cost

other CME opportunities more pertinent to my role

New to college health and the organization

I plan to attend this year

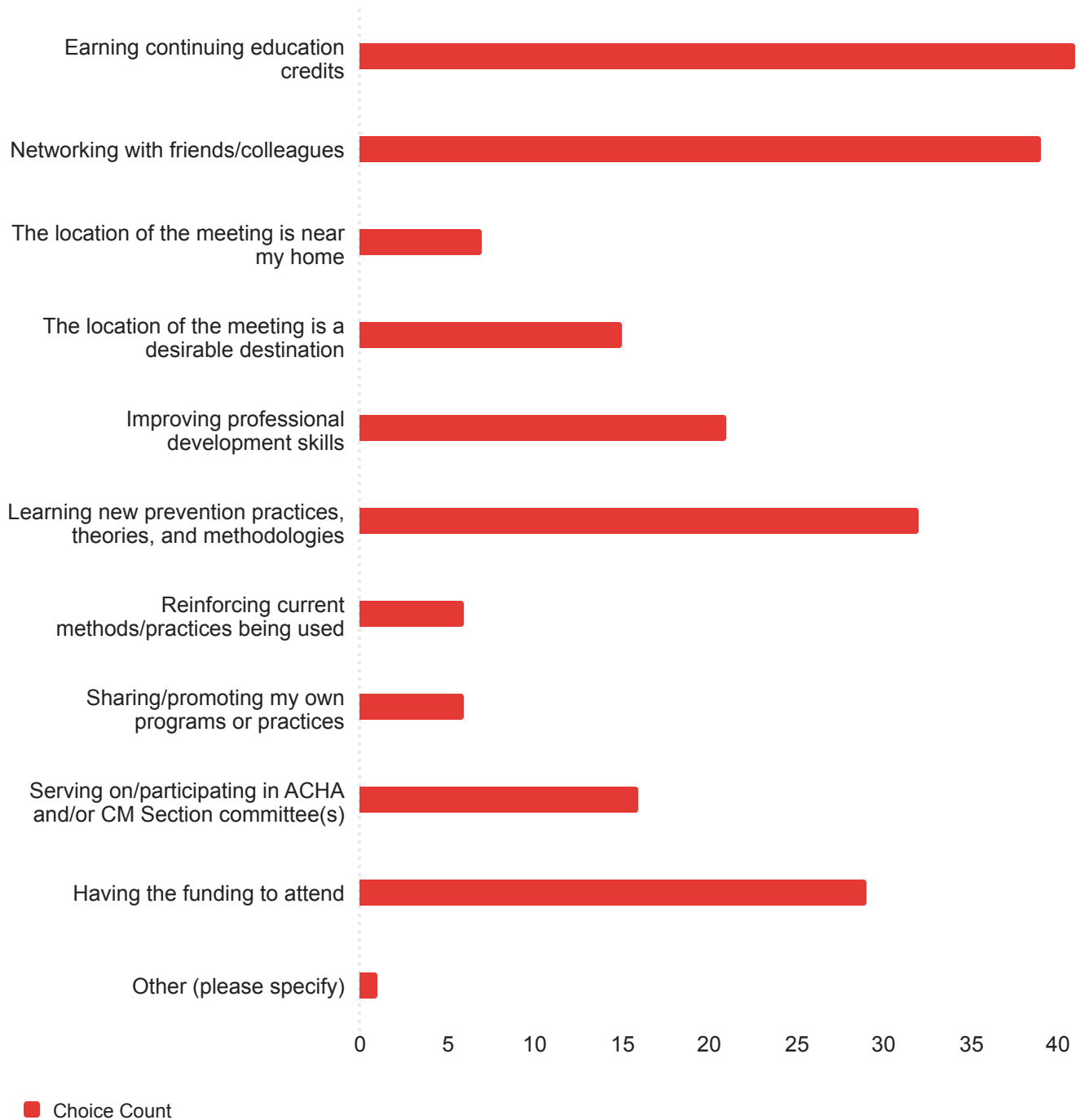
I did not think it would be helpful

I was recently made aware of my institution membership.

New to college health after 25 years in general pediatrics

when you have so many disciplines included in the program (nursing, admin, health promotion), you dilute the amount and content of the clinical medicine topics offered. My preference is to attend the national ACP meeting over ACHA meeting.

Q5 - Please select the three factors that door would most influence your decision to attend the ACHA - Selected Choice



Q5 - Please select the three factors that door would most influence your decision to attend the ACHA - Selected Choice

Field

Choice Count

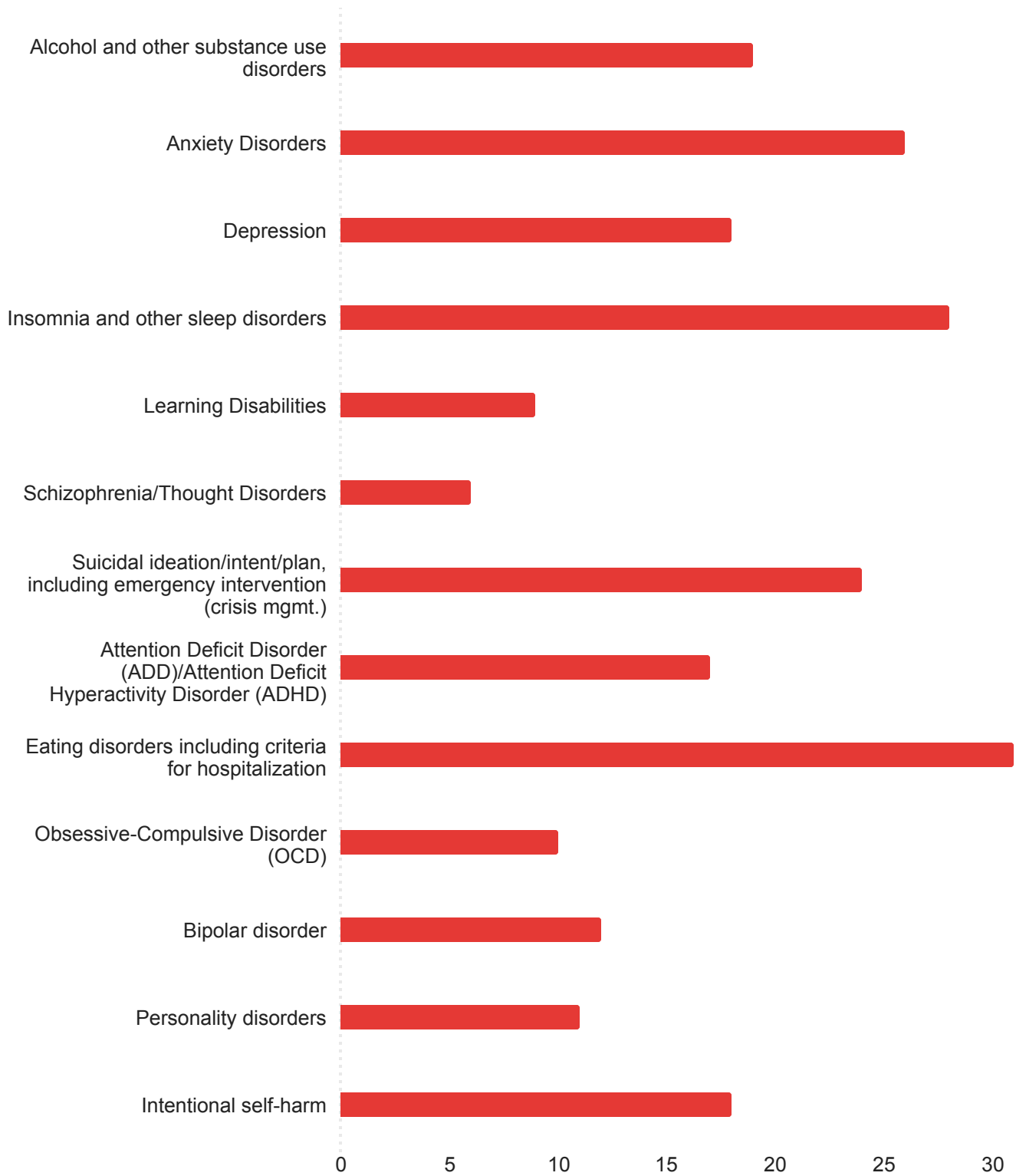
Earning continuing education credits	41
Networking with friends/colleagues	39
The location of the meeting is near my home	7
The location of the meeting is a desirable destination	15
Improving professional development skills	21
Learning new prevention practices, theories, and methodologies	32
Reinforcing current methods/practices being used	6
Sharing/promoting my own programs or practices	6
Serving on/participating in ACHA and/or CM Section committee(s)	16
Having the funding to attend	29
Other (please specify)	1

Q5_20_TEXT - Other (please specify) - Text

Other (please specify) - Text

More Laboratory related CEU, networking, sessions

Q7A - Behavioral Health

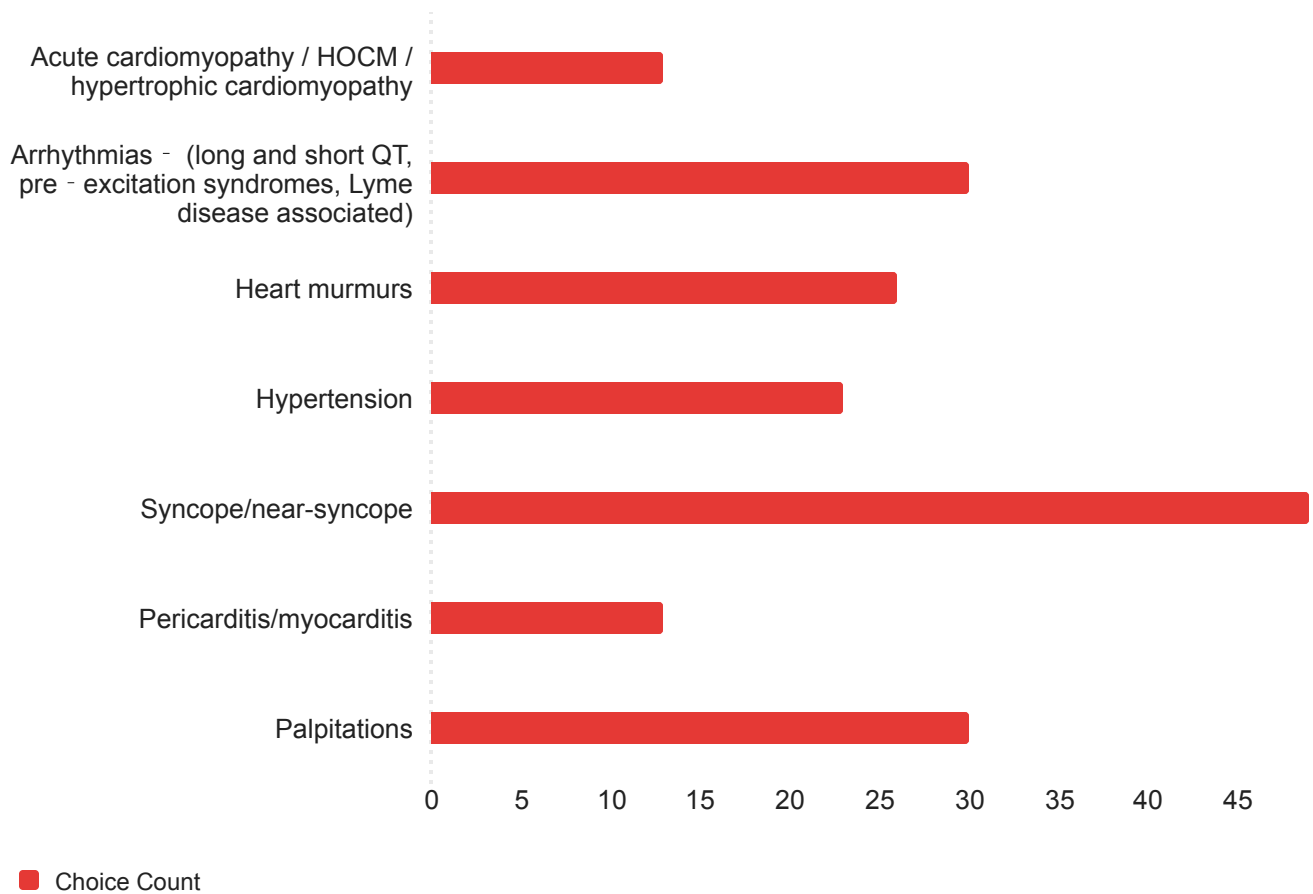


■ Choice Count

Q7A - Behavioral Health

Field	Choice Count
Alcohol and other substance use disorders	19
Anxiety Disorders	26
Depression	18
Insomnia and other sleep disorders	28
Learning Disabilities	9
Schizophrenia/Thought Disorders	6
Suicidal ideation/intent/plan, including emergency intervention (crisis mgmt.)	24
Attention Deficit Disorder (ADD)/Attention Deficit Hyperactivity Disorder (ADHD)	17
Eating disorders including criteria for hospitalization	31
Obsessive-Compulsive Disorder (OCD)	10
Bipolar disorder	12
Personality disorders	11
Intentional self-harm	18

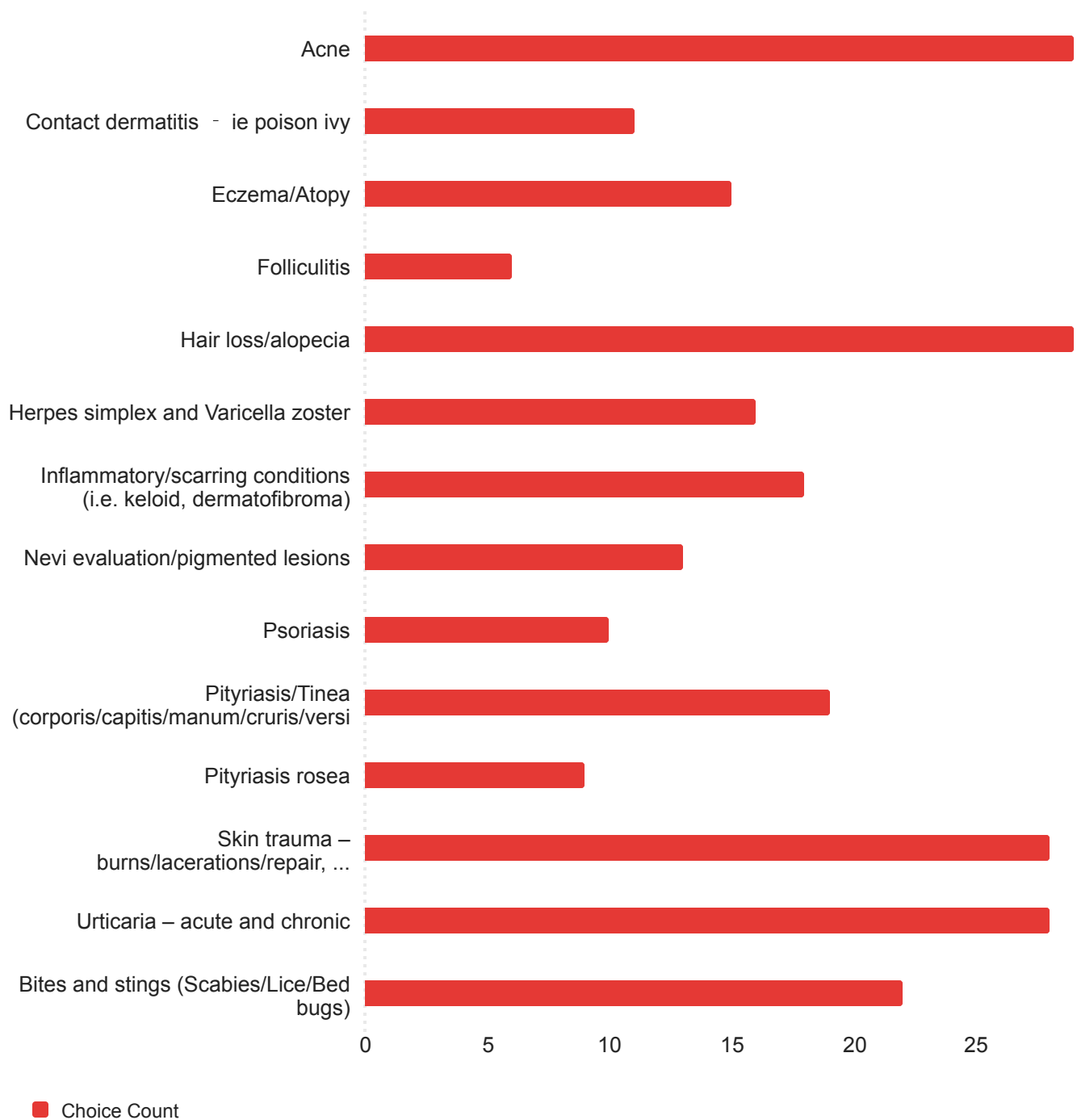
Q7B - Cardiovascula



Q7B - Cardiovascula

Field	Choice Count
Acute cardiomyopathy / HOCM / hypertrophic cardiomyopathy	13
Arrhythmias - (long and short QT, pre - excitation syndromes, Lyme disease associated)	30
Heart murmurs	26
Hypertension	23
Syncope/near-syncope	49
Pericarditis/myocarditis	13
Palpitations	30

Q7C - Dermatology(common skin complaints

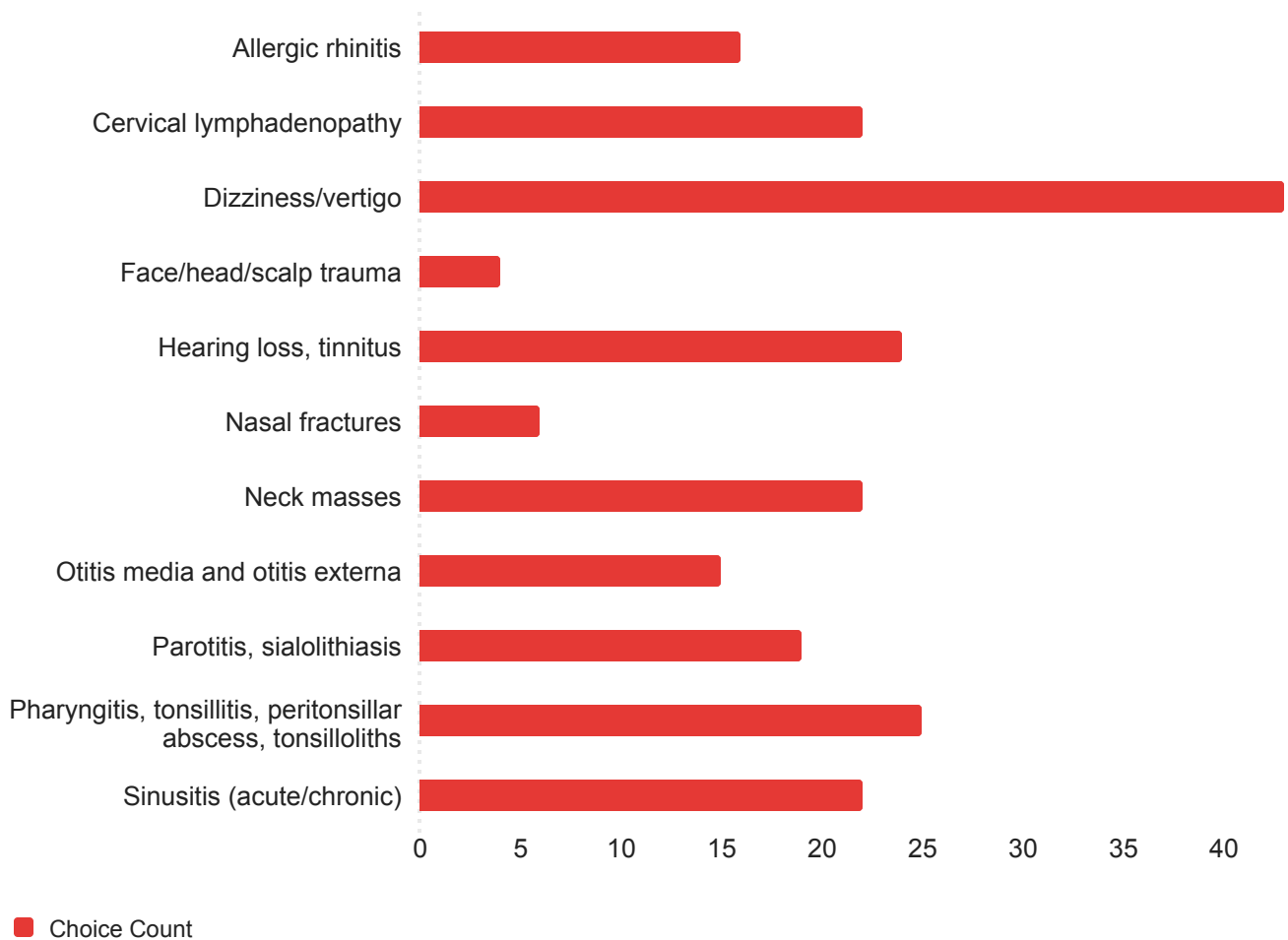


Q7C - Dermatology(common skin complaints

Field	Choice Count
Acne	29

Contact dermatitis - ie poison ivy	11
Eczema/Atopy	15
Folliculitis	6
Hair loss/alopecia	29
Herpes simplex and Varicella zoster	16
Inflammatory/scarring conditions (i.e. keloid, dermatofibroma)	18
Nevi evaluation/pigmented lesions	13
Psoriasis	10
Pityriasis/Tinea (corporis/capitis/manum/cruris/versicolor)	19
Pityriasis rosea	9
Skin trauma – burns/lacerations/repair, abrasions, wound management	28
Urticaria – acute and chronic	28
Bites and stings (Scabies/Lice/Bed bugs)	22

Q7D - EN

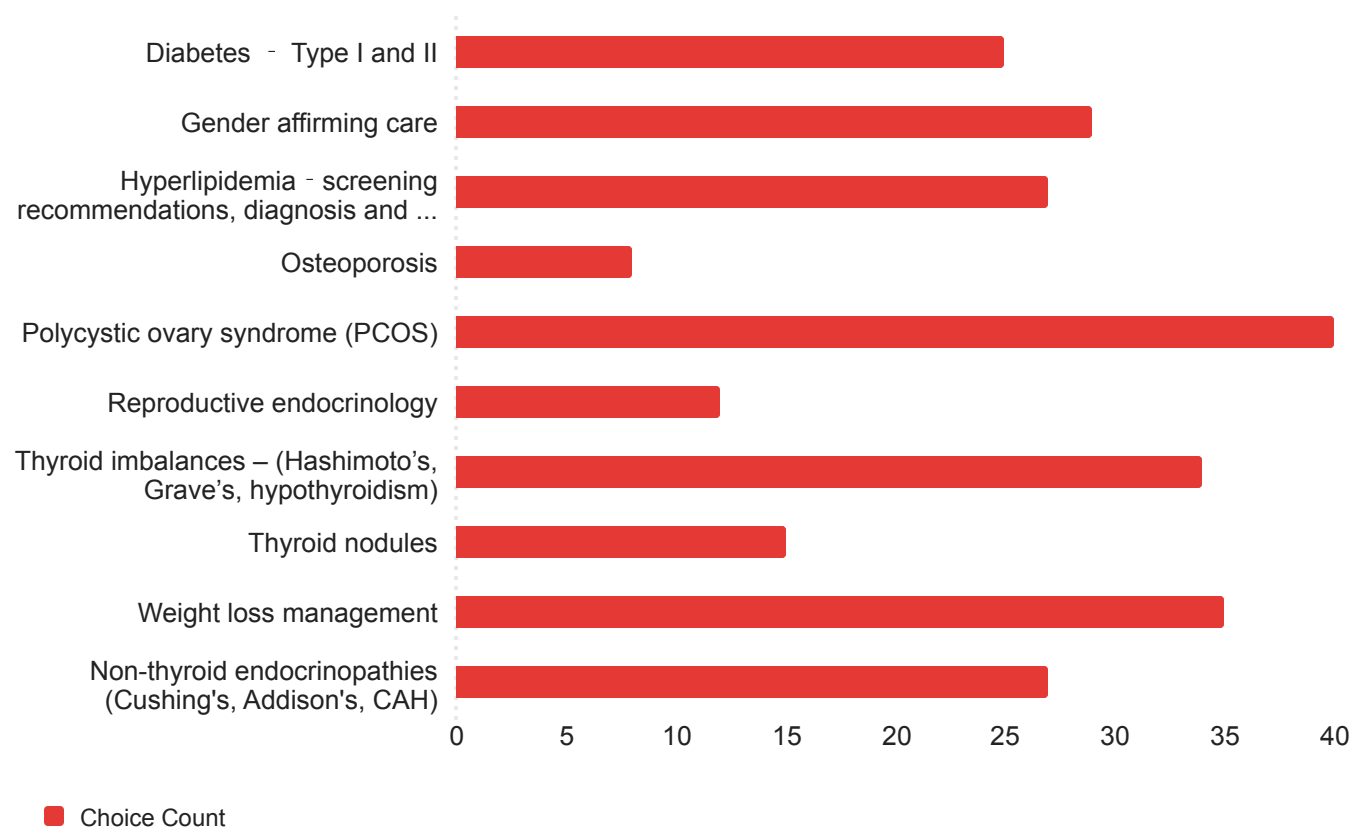


Q7D - EN

Field	Choice Count
Allergic rhinitis	16
Cervical lymphadenopathy	22
Dizziness/vertigo	43
Face/head/scalp trauma	4
Hearing loss, tinnitus	24
Nasal fractures	6
Neck masses	22

Otitis media and otitis externa	15
Parotitis, sialolithiasis	19
Pharyngitis, tonsillitis, peritonsillar abscess, tonsilloliths	25
Sinusitis (acute/chronic)	22

Q7E - Endocrinolog



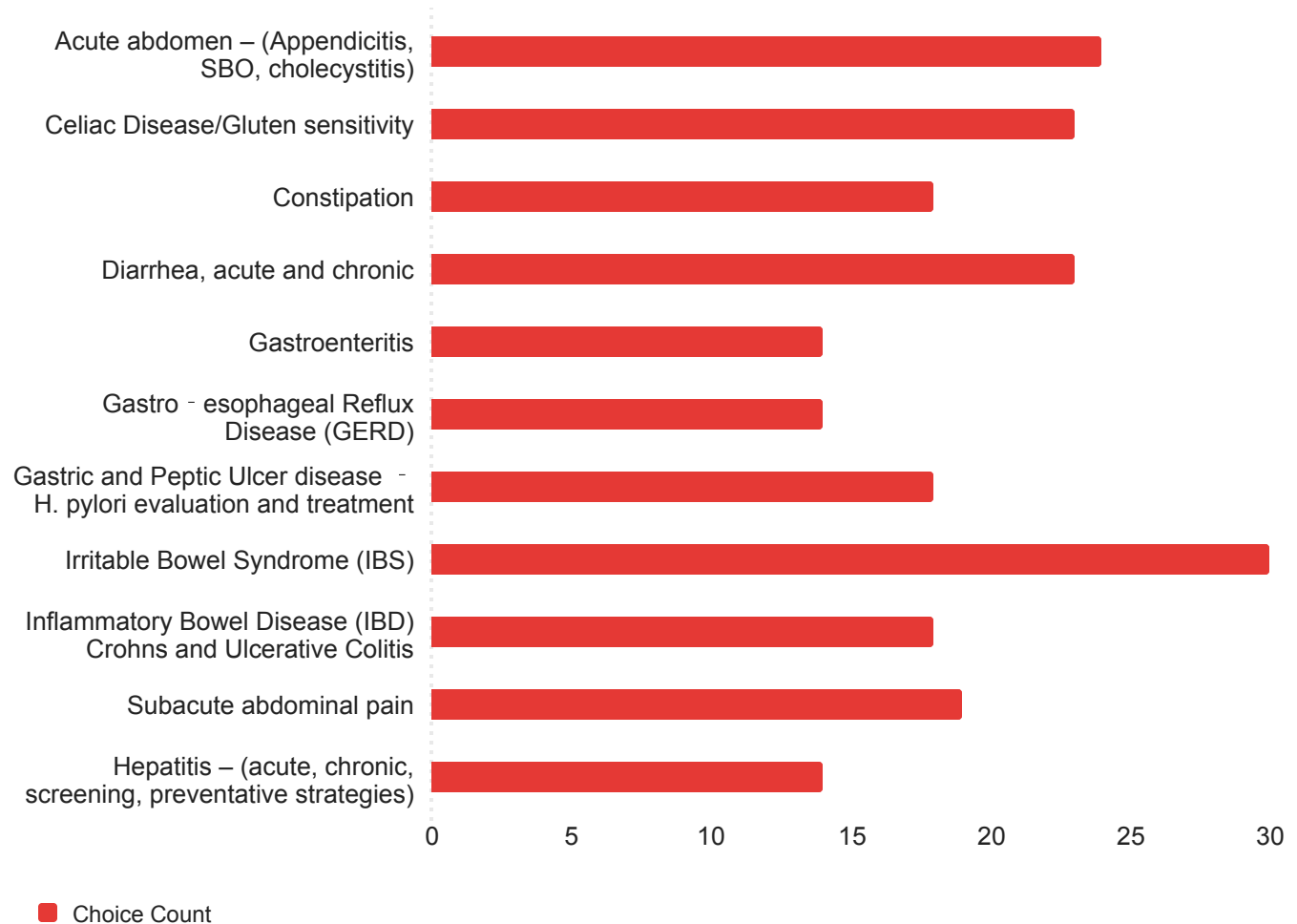
Q7E - Endocrinolog

Field	Choice Count
Diabetes - Type I and II	25
Gender affirming care	29
Hyperlipidemia - screening recommendations, diagnosis and treatment	27
Osteoporosis	8
Polycystic ovary syndrome (PCOS)	40
Reproductive endocrinology	12
Thyroid imbalances – (Hashimoto's, Grave's, hypothyroidism)	34
Thyroid nodules	15
Weight loss management	35

Non-thyroid endocrinopathies (Cushing's, Addison's, CAH)

27

Q7F - Gastroenterolog

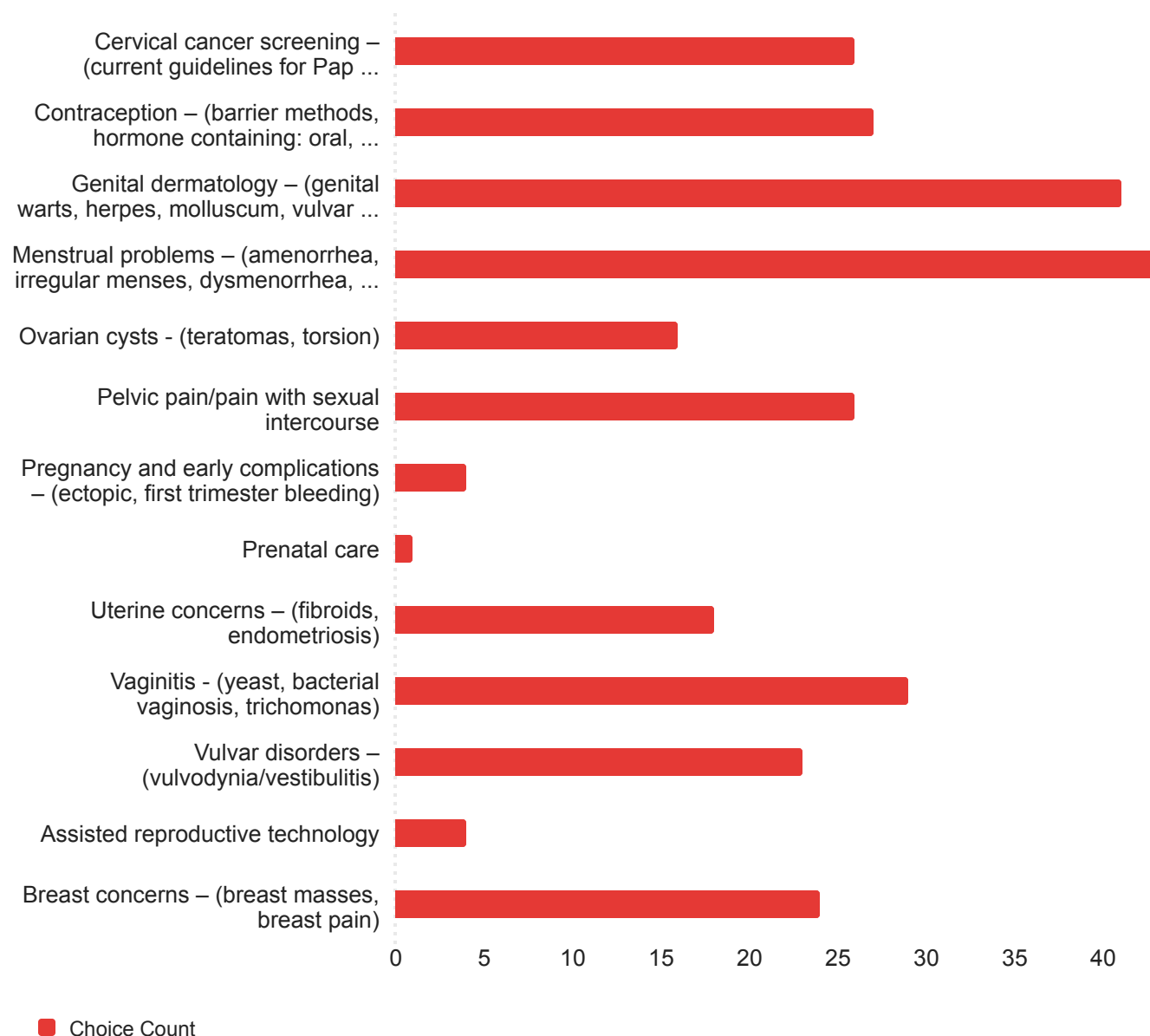


Q7F - Gastroenterolog

Field	Choice Count
Acute abdomen – (Appendicitis, SBO, cholecystitis)	24
Celiac Disease/Gluten sensitivity	23
Constipation	18
Diarrhea, acute and chronic	23
Gastroenteritis	14

Gastro - esophageal Reflux Disease (GERD)	14
Gastric and Peptic Ulcer disease - H. pylori evaluation and treatment	18
Irritable Bowel Syndrome (IBS)	30
Inflammatory Bowel Disease (IBD) Crohns and Ulcerative Colitis	18
Subacute abdominal pain	19
Hepatitis – (acute, chronic, screening, preventative strategies)	14

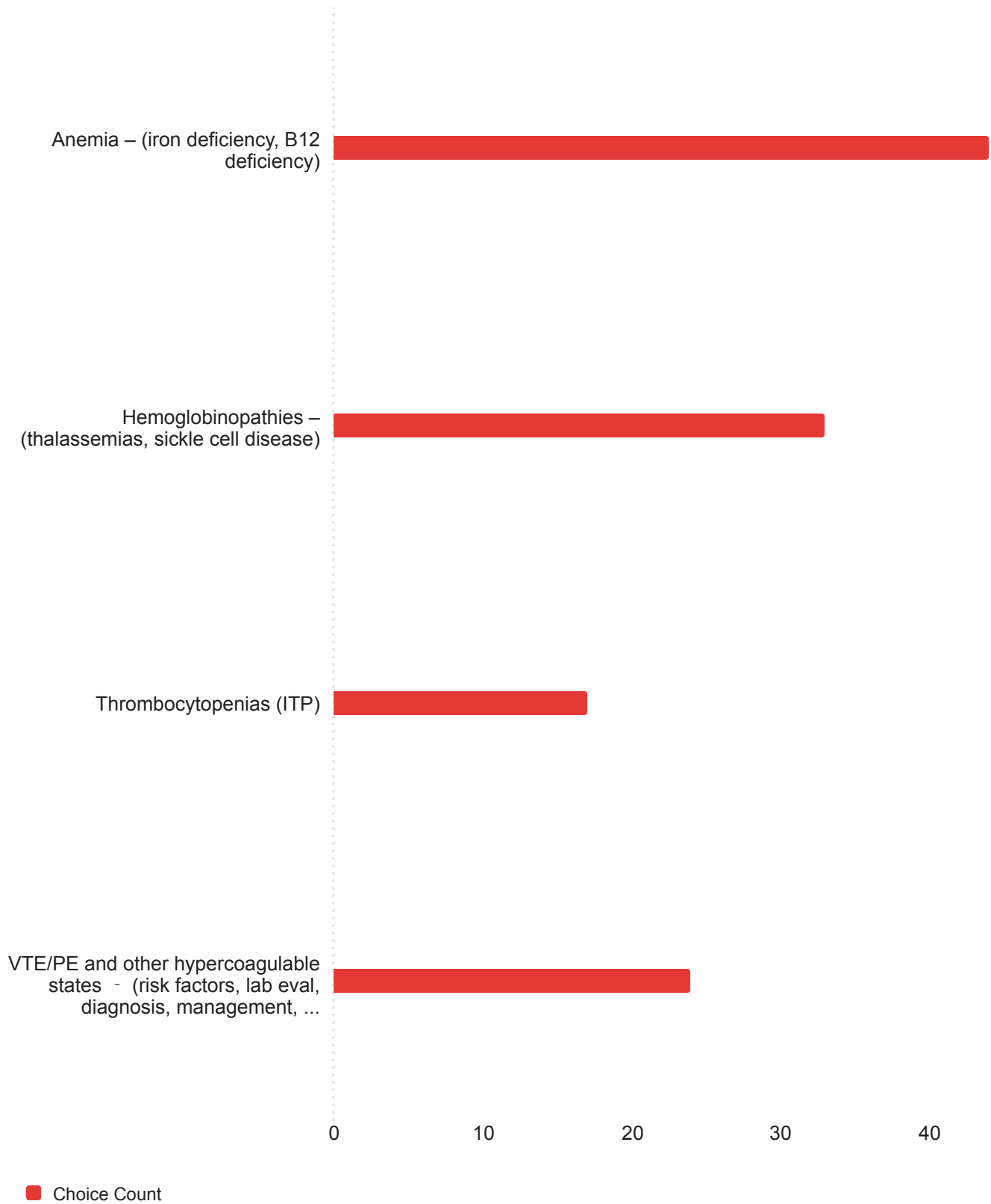
Q7H - Ob/GY



Q7H - Ob/GY

Field	Choice Count
Cervical cancer screening – (current guidelines for Pap screening)	26
Contraception – (barrier methods, hormone containing: oral, injected, implant, devices)	27
Genital dermatology – (genital warts, herpes, molluscum, vulvar papillomatosis, lichen simplex chronicus, vulvar dermatitis, folliculitis, lichen sclerosis, vulvar aphthous ulcers)	41
Menstrual problems – (amenorrhea, irregular menses, dysmenorrhea, menorrhagia)	43
Ovarian cysts - (teratomas, torsion)	16
Pelvic pain/pain with sexual intercourse	26
Pregnancy and early complications – (ectopic, first trimester bleeding)	4
Prenatal care	1
Uterine concerns – (fibroids, endometriosis)	18
Vaginitis - (yeast, bacterial vaginosis, trichomonas)	29
Vulvar disorders – (vulvodynia/vestibulitis)	23
Assisted reproductive technology	4
Breast concerns – (breast masses, breast pain)	24

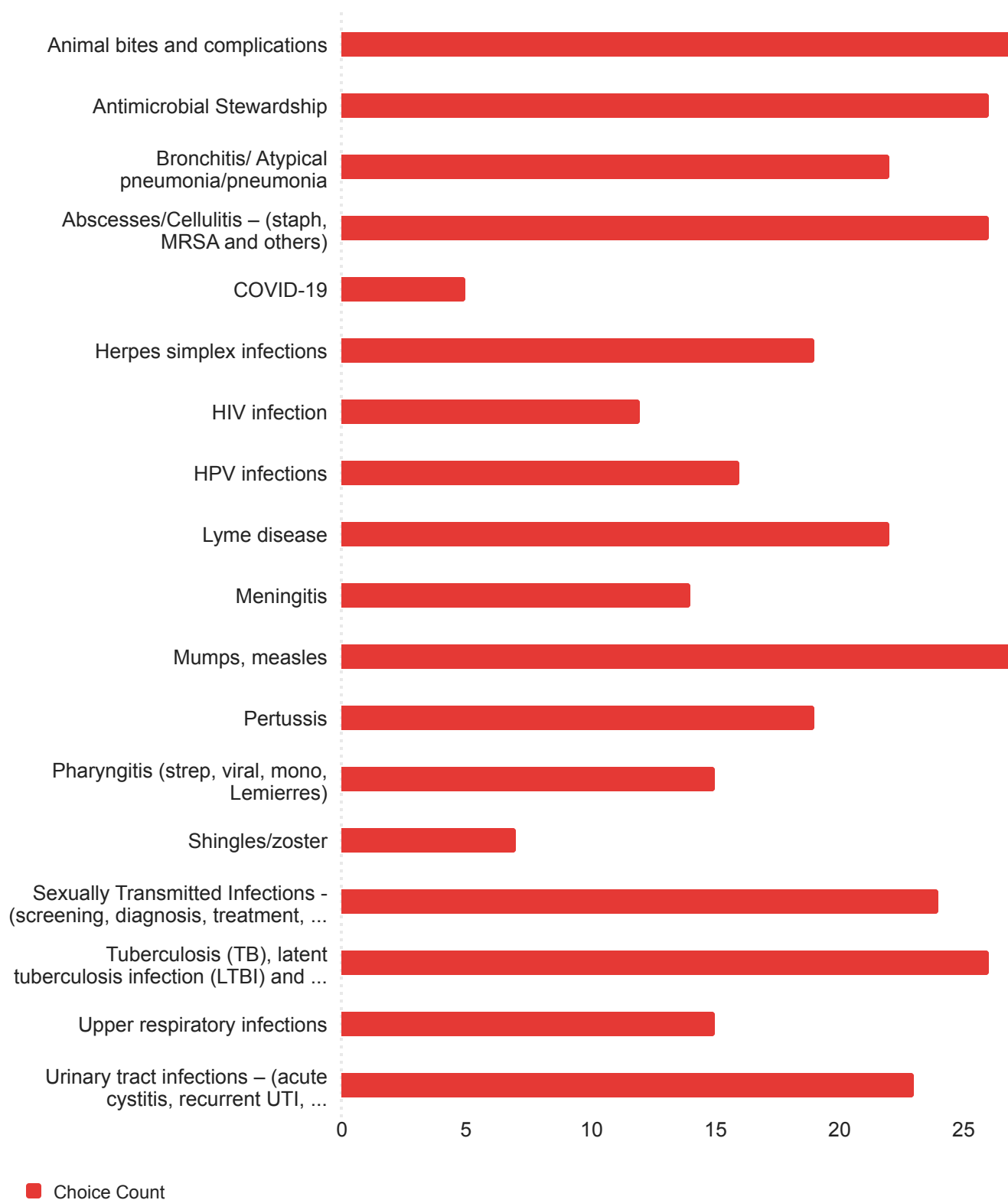
Q7I - Hematolog



Q7I - Hematolog

Field	Choice Count
Anemia – (iron deficiency, B12 deficiency)	44
Hemoglobinopathies – (thalassemias, sickle cell disease)	33
Thrombocytopenias (ITP)	17
VTE/PE and other hypercoagulable states - (risk factors, lab eval, diagnosis, management, anti-coagulation)	24

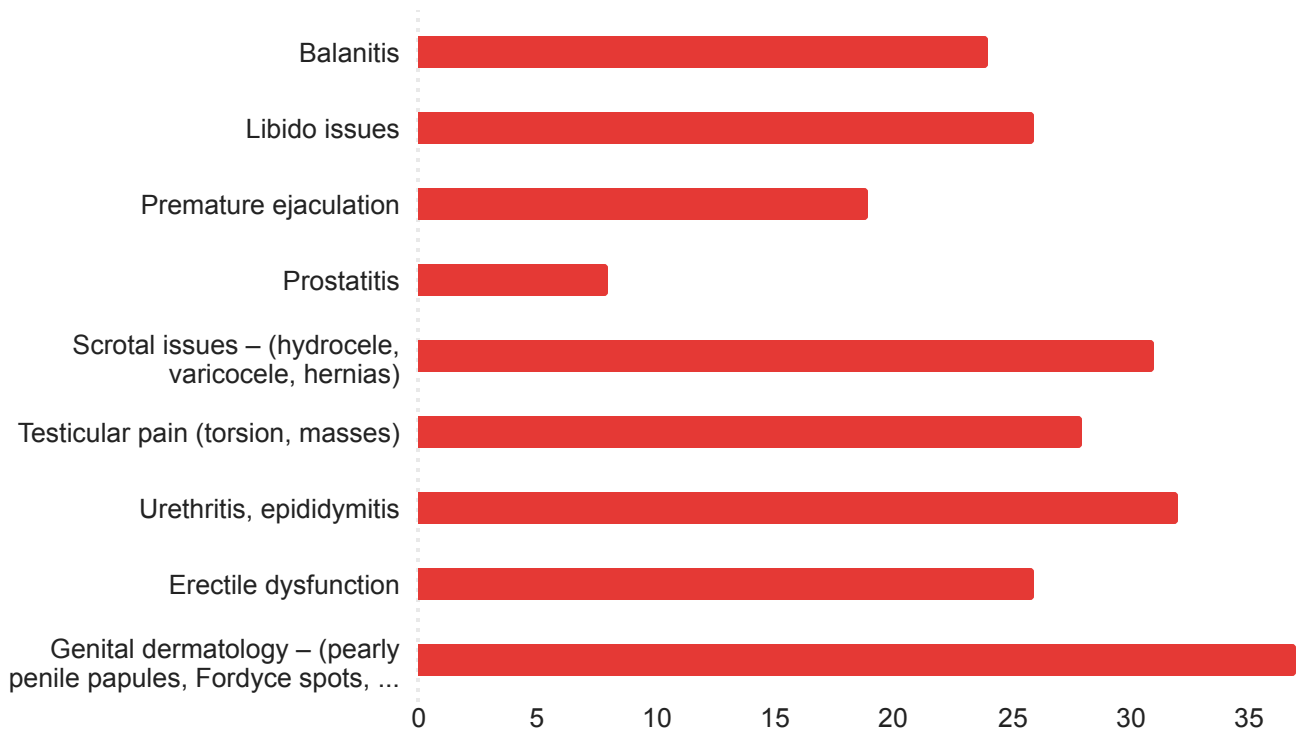
Q7J - Infectious Diseases



Q7J - Infectious Diseases

Field	Choice Count
Animal bites and complications	27
Antimicrobial Stewardship	26
Bronchitis/ Atypical pneumonia/pneumonia	22
Abscesses/Cellulitis – (staph, MRSA and others)	26
COVID-19	5
Herpes simplex infections	19
HIV infection	12
HPV infections	16
Lyme disease	22
Meningitis	14
Mumps, measles	27
Pertussis	19
Pharyngitis (strep, viral, mono, Lemierres)	15
Shingles/zoster	7
Sexually Transmitted Infections - (screening, diagnosis, treatment, prevention)	24
Tuberculosis (TB), latent tuberculosis infection (LTBI) and TTBI (PPD, QFT)	26
Upper respiratory infections	15
Urinary tract infections – (acute cystitis, recurrent UTI, pyelonephritis)	23

Q7K - Men's Healt

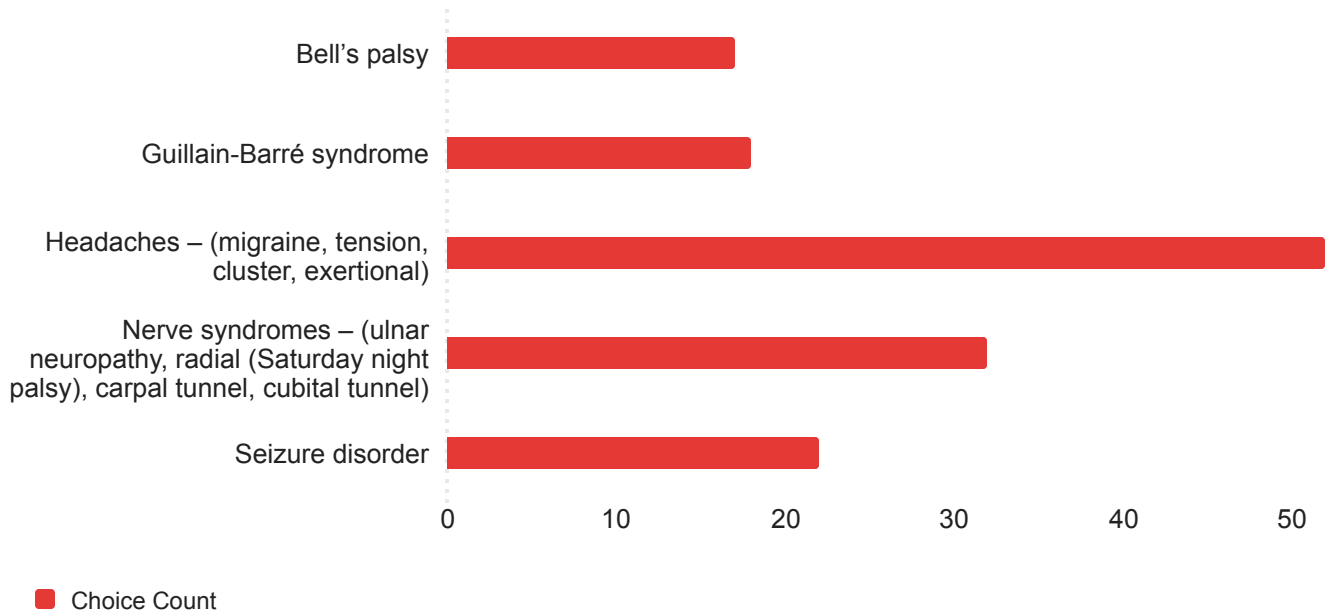


Choice Count

Q7K - Men's Healt

Field	Choice Count
Balanitis	24
Libido issues	26
Premature ejaculation	19
Prostatitis	8
Scrotal issues – (hydrocele, varicocele, hernias)	31
Testicular pain (torsion, masses)	28
Urethritis, epididymitis	32
Erectile dysfunction	26
Genital dermatology – (pearly penile papules, Fordyce spots, genital warts, herpes, molluscum)	37

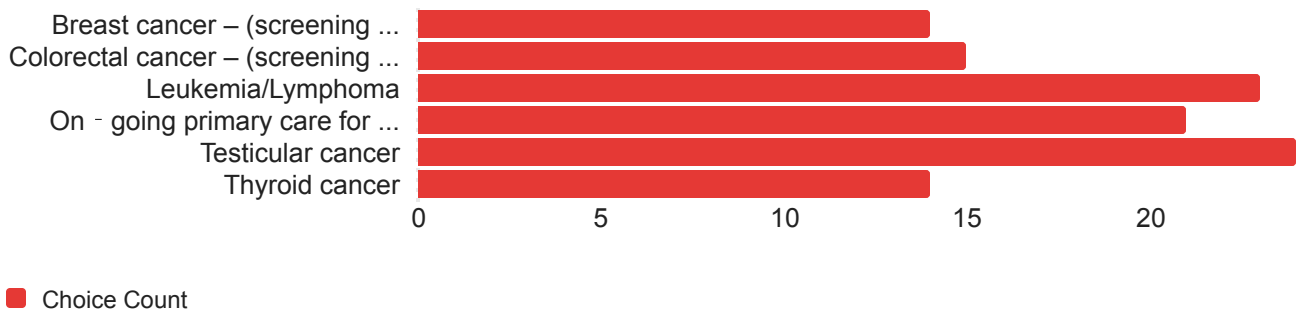
Q7L - Neurolog



Q7L - Neurolog

Field	Choice Count
Bell's palsy	17
Guillain-Barré syndrome	18
Headaches – (migraine, tension, cluster, exertional)	52
Nerve syndromes – (ulnar neuropathy, radial (Saturday night palsy), carpal tunnel, cubital tunnel)	32
Seizure disorder	22

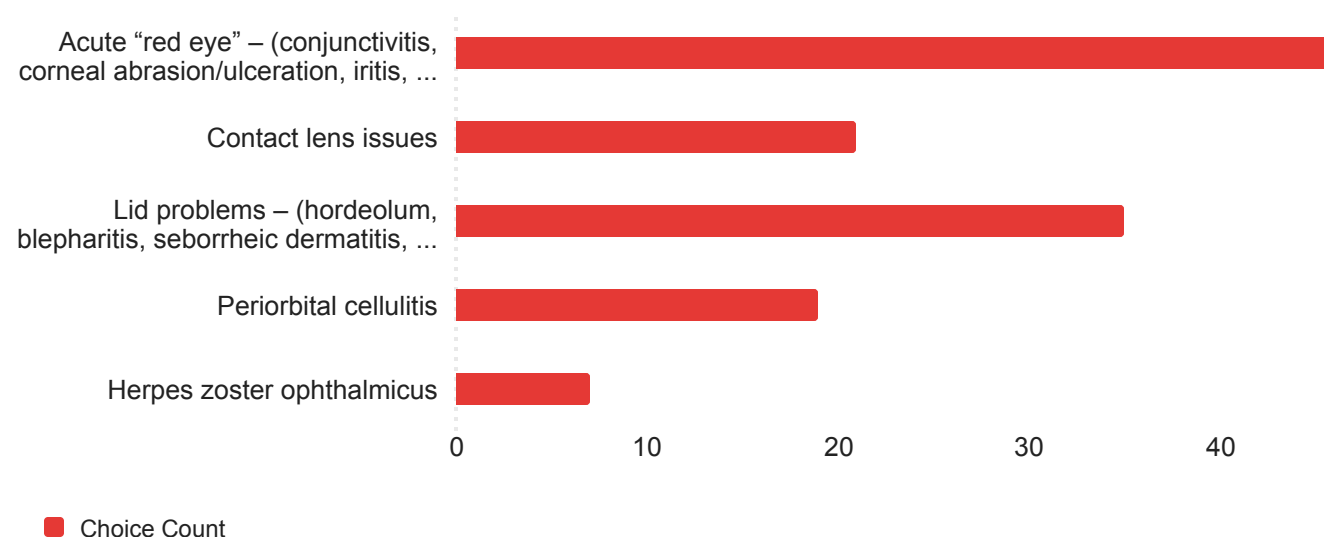
Q7M - Oncolog



Q7M - Oncolog

Field	Choice Count
Breast cancer – (screening guidelines)	14
Colorectal cancer – (screening guidelines)	15
Leukemia/Lymphoma	23
On - going primary care for cancer survivors	21
Testicular cancer	24
Thyroid cancer	14

Q7N - Ophthalmolog



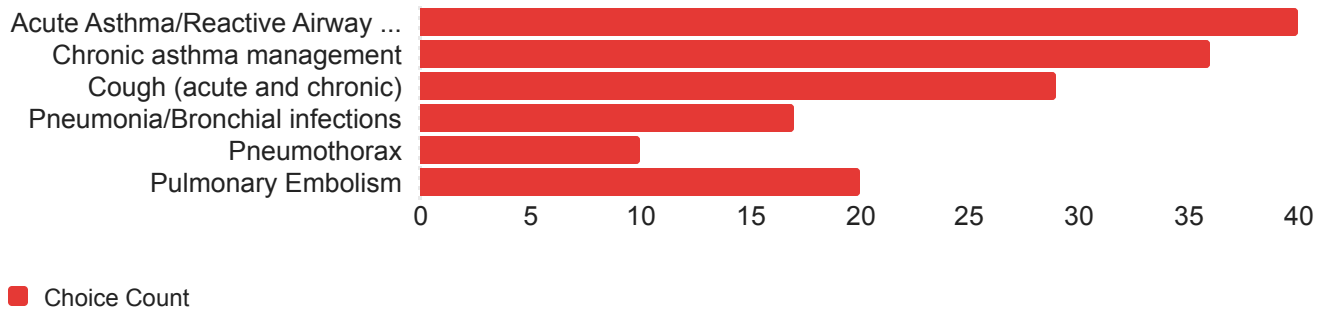
Q7N - Ophthalmolog

Field	Choice Count
Acute “red eye” – (conjunctivitis, corneal abrasion/ulceration, iritis, uveitis, etc)	46
Contact lens issues	21
Lid problems – (hordeolum, blepharitis, seborrheic dermatitis, etc)	35
Periorbital cellulitis	19

Herpes zoster ophthalmicus

7

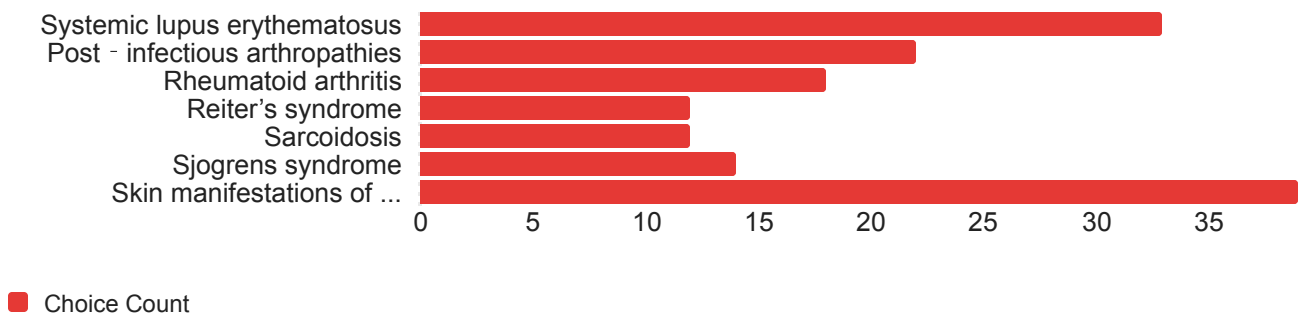
Q7O - Pulmonar



Q7O - Pulmonar

Field	Choice Count
Acute Asthma/Reactive Airway management	40
Chronic asthma management	36
Cough (acute and chronic)	29
Pneumonia/Bronchial infections	17
Pneumothorax	10
Pulmonary Embolism	20

Q7P - Rheumatolog



Q7P - Rheumatolog

Field	Choice Count
Systemic lupus erythematosus	33
Post - infectious arthropathies	22
Rheumatoid arthritis	18
Reiter's syndrome	12
Sarcoidosis	12
Sjogrens syndrome	14
Skin manifestations of rheumatologic problems	39

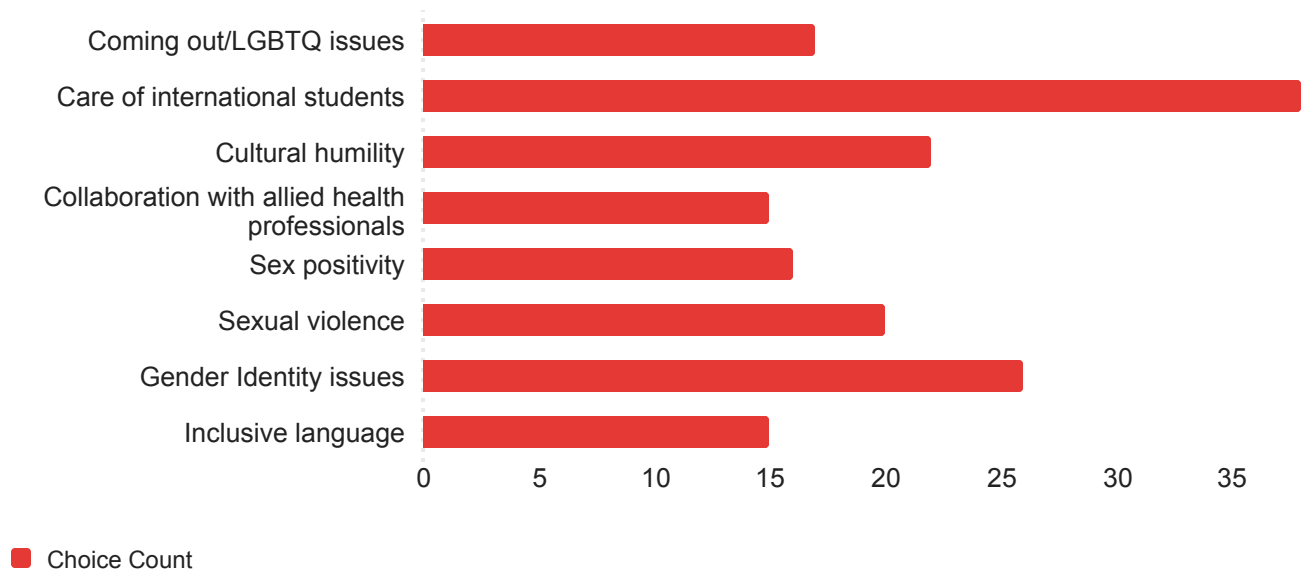
Q7Q - Risk Managemen



Q7Q - Risk Managemen

Field	Choice Count
Administrative Issues	34
Malpractice Issues	26
Mentorship	25
Team-building and Leadership	37

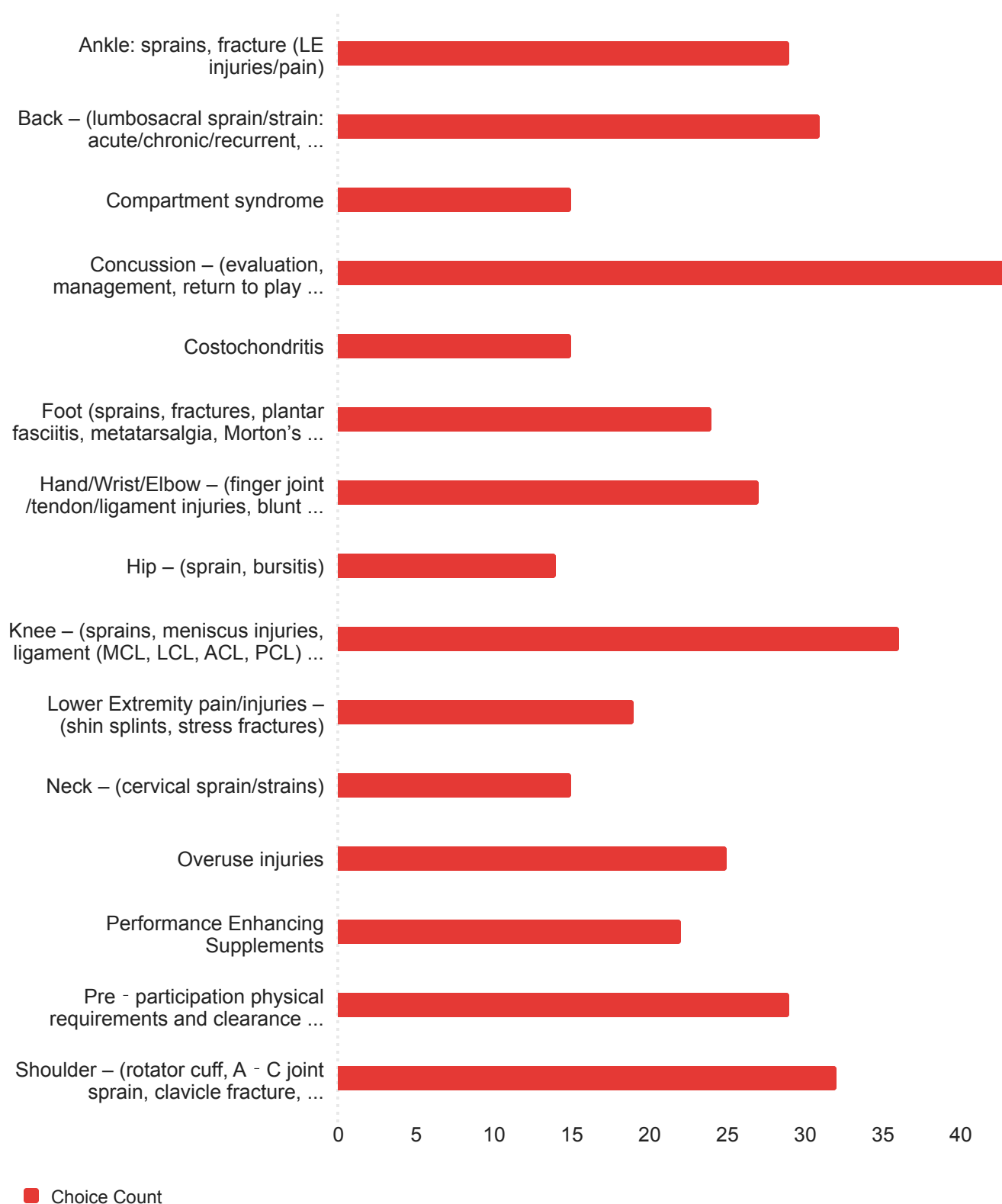
Q7R - Social Issue



Q7R - Social Issue

Field	Choice Count
Coming out/LGBTQ issues	17
Care of international students	38
Cultural humility	22
Collaboration with allied health professionals	15
Sex positivity	16
Sexual violence	20
Gender Identity issues	26
Inclusive language	15

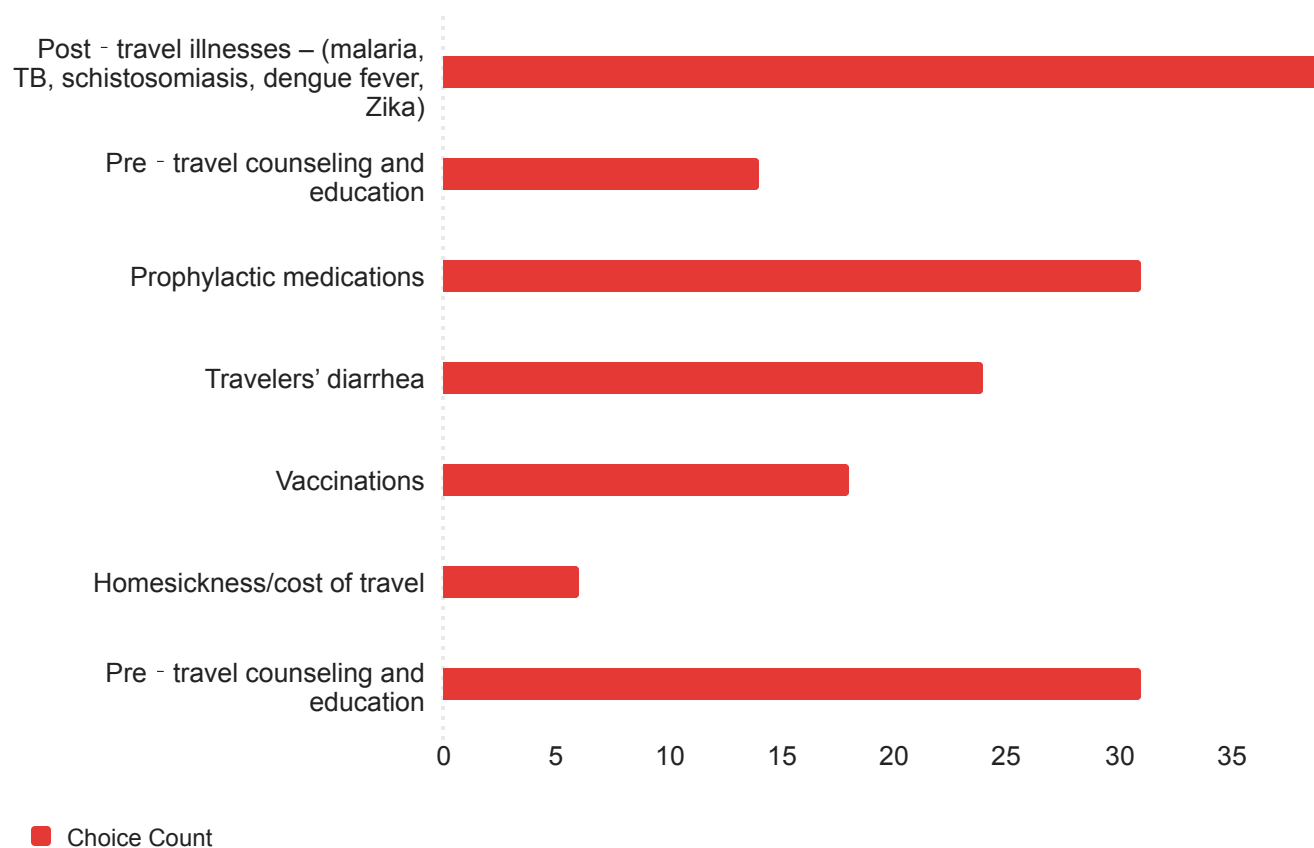
Q7S - SportsMedicine/Orthopedic



Q7S - SportsMedicine/Orthopedic

Field	Choice Count
Ankle: sprains, fracture (LE injuries/pain)	29
Back – (lumbosacral sprain/strain: acute/chronic/recurrent, spondylolisthesis, spondylolysis, coccyx injury/fracture, acute arthritis, disc problems)	31
Compartment syndrome	15
Concussion – (evaluation, management, return to play guidelines; Post-concussion syndrome)	43
Costochondritis	15
Foot (sprains, fractures, plantar fasciitis, metatarsalgia, Morton's neuroma, etc)	24
Hand/Wrist/Elbow – (finger joint /tendon/ligament injuries, blunt trauma/subungual hematoma; wrist sprains carpal tunnel)	27
Hip – (sprain, bursitis)	14
Knee – (sprains, meniscus injuries, ligament (MCL, LCL, ACL, PCL) injuries, patellofemoral syndrome, Baker's cyst, bursitis, patella dislocation/tendonitis)	36
Lower Extremity pain/injuries – (shin splints, stress fractures)	19
Neck – (cervical sprain/strains)	15
Overuse injuries	25
Performance Enhancing Supplements	22
Pre - participation physical requirements and clearance guidelines – (NCAA guidelines, sickle cell testing/education and drug/medication use restrictions)	29
Shoulder – (rotator cuff, A - C joint sprain, clavicle fracture, dislocation, bursitis, biceps tendonitis/tendon tear, Bankart lesion, impingement syndrome, etc)	32

Q7T - Travel Medicin



Q7T - Travel Medicin

Field	Choice Count
Post - travel illnesses – (malaria, TB, schistosomiasis, dengue fever, Zika)	39
Pre - travel counseling and education	14
Prophylactic medications	31
Travelers' diarrhea	24
Vaccinations	18
Homesickness/cost of travel	6
Pre - travel counseling and education	31

Q7U - Other (please specify)

Other (please specify)

Hands on work shops for physical assessment especially for sports med topics

Other location's lab process, reference lab utilization, STI testing, costs...

PREP and Gender Affirming Care while studying abroad

I would love a session for prescribers of GAHT (Gender Affirming Hormone Treatment) that is beyond the basics & more of troubleshooting some of the issues that arise - secondary polycythemia, alopecia, breakthrough bleeding, etc.

Q8 - Overthe past several years more skills based presentations have been offered duringthe An

Overthe past several years more skills based presentations have been offered duringthe An

starting an eating disorder program in a health center (integrated?)
MSK tests (knee, shoulder)

Hands-on concussion evaluation.
Incision and drainage.

I would love if the skills/hands on workshops were offered during the regular conference. I think sports physical and musculoskeletal injury assessments would be helpful. I think emergency management cases/training would be helpful.

POCUS

Evaluation of
Joint pain
lower back pain

N/A

NA

any

Leadership and management training

I am interested in the workshop on achieving accreditation, maybe that could be repeated?
Some additional topics: networking skills, how to manage people, reporting to non-clinical supervisors, team building.

Laceration repair (of all types)

Musculoskeletal Ultrasound or POCUS.

Focus on international student health concerns-- mental and physical health. Particularly interested in topic: what addition diseases might I need to think about in a student from Africa or elsewhere? (For example, I had to ask local immigrant medicine specialists about how to interpret an abnormal CBC from Tanzania. They recommended I test for schistosomiasis and other labs I can't recall. I'd also like more information about what health systems are like in various countries. What are dental and mental health systems like as well?

ultrasound

Office treatment (ie, specific maneuvers) for BPPV

splinting for MSK initial fracture management;
wound care for outpatient practice

Healthy nutrition on college campus

MSK Refresher
Current COVID management
Emerging diseases
Communication skills

maybe a mentorship program or pose a hot topic for folks to discuss "Trends in ADHD diagnosis/mgmt"
"Supporting students through political stressors" "Access to abortion on your campus"

primary care procedures- laceration repair, I&D, joint injection, nerve blocks, etc.

Musculoskeletal ultrasound.

all of these, along with leadership and KPIs

1. Book camp for new directors 2. Creating a provider handbook 3. Approach to mandated reporting and Title IX
4. Medical Leave of Absence and Return to Campus Clearance (Policy examples)

ophthalmology exam -

Not sure at this time.

Addressing health equity in the current climate

ENT and Ophthalmology including slit lamp and hearing screening

suturing refresher course, IUD insertion practice, Nexplanon certification, Nexplanon removal, diaphragm fitting

I would like to attend the achieving accreditation workshop. Is that this year? I am not able to attend this year due to funding. Maybe offer these on a rotational basis or make available virtually?

MSK exam refresher is always a good one.

Coding/Billing is also a good refresher to ensure we are coding/billing appropriately and get the reimbursement for the work provided

Neuro exam refresher, ophthalmological exam refresher

Hand on workshops in orthopedics would be good. Seems like there have been too much emphasis on IUDs and implants. While these are important that have not always been at the physician level in terms of content.

Trans care

bedside ultrasound

acupuncture

osteopathic

Q9 - What is the one thing that the Program Planning Committee could do to improve future ACHA A

What is the one thing that the Program Planning Committee could do to improve future ACHA A

more clinical sessions!

I also liked the sessions there were a grouping of 3-4 different clinical things

More Medical education and less campus focused study results or programming that is not relevant to all campuses.

Make sure the pharm credits are obvious on the agenda. Also increase the number of hands on and pharm sessions.

Earlier announcement of sessions (if possible)

I think the Program Planning Committee continues to do an excellent job at ACHA Annual Meetings.

spread out the clinical medicine offerings over more session times.

N/A

Location, location, location

N/A

unknown

Having popular programs be offered more than once during the conference.

cost & less expensive location for the annual meeting

Continue to advocate for more clinical topics and presentations.

I don't travel long distances for environmental reasons. Also our director balks at the cost when it includes expensive airfare, hotel, food. Would be great to select a few topics to record and make available to those who cannot attend the conference.

Earliest possible release of conference schedule and content for those who have to plan early for travel and attendance (and CMEs)

pick desirable locations

Devote more time to networking

I would love to see a subsection for clinicians (medical and psych) working at an academic medical institution. We've sent an inquiry through the general section and have some interest. If we get this off the ground, can we get support from ACHA to have it connected to the rest of the association? (Jodi DeMunter)

More Laboratory related sessions for Lab student health professionals

The conference this year was phenomenal. I don't have recommendations to change content. My only challenge was there was so much to do and it didn't feel like enough time to do all the sessions I wanted, visit section, specialty, or affiliate meetings, visit all exhibitors, etc. while also having some time to explore the area and connect with colleagues more informally. A GOOD problem to have! The conference has been fantastic.

Have virtual options now that some universities, including my own, are cutting funding for professional development and travel.

More Health/medical sessions

More pharmacology CE for NPs!

I am attending for the first time, so not sure if I have anything to contribute here. Thank you for putting all of this together! I am sure it has taken a lot of work!

keep doing the same.

They have been doing a great job of planning!

more clinical medicine options for doctors

Funding is the main reason that I am unable to attend yearly, so any decrease in costs would be helpful & not just the cost of the meeting but also the hotel & location (travel).

More medically pertinent seminars.

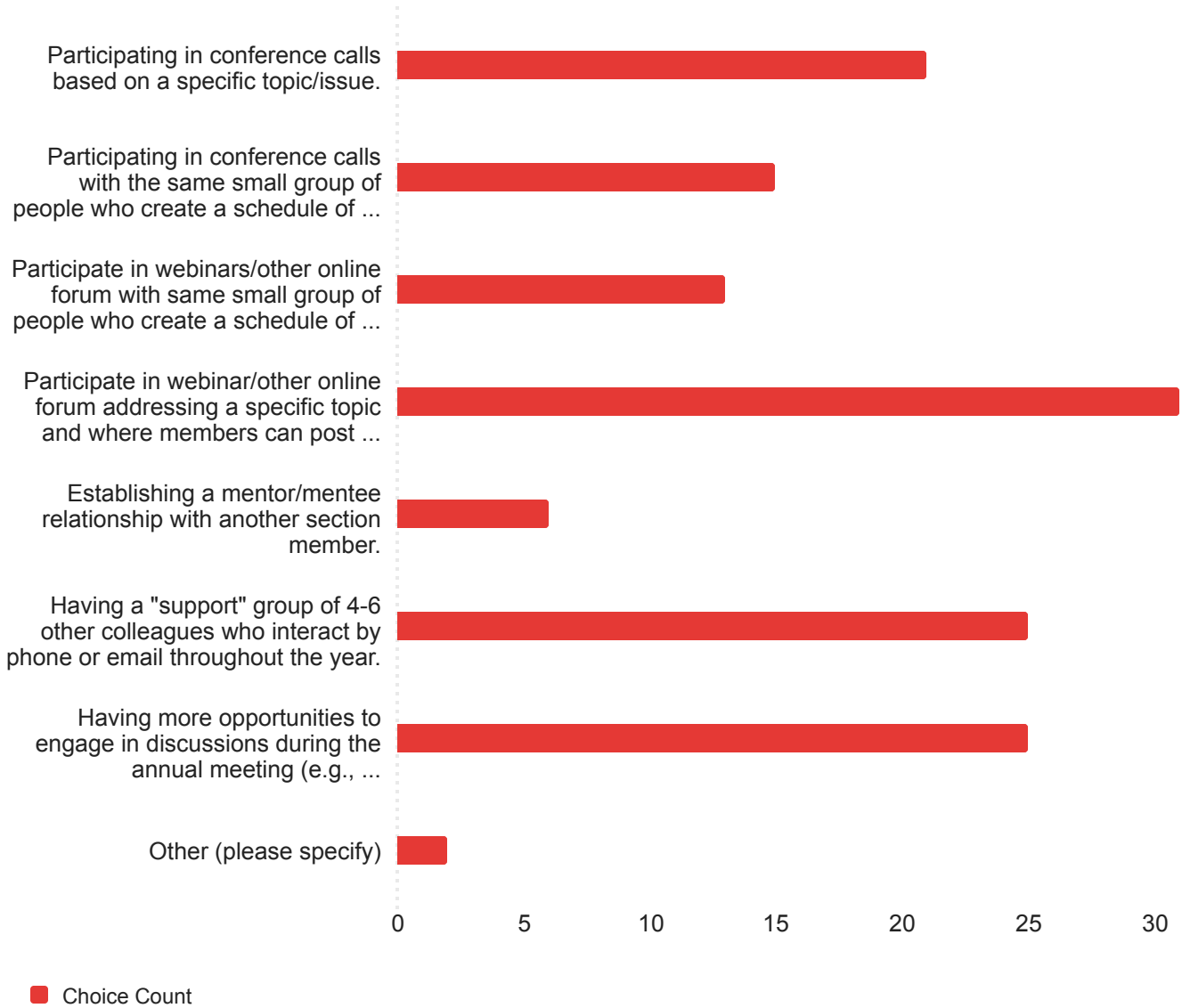
more clinically relevant talks at the conference. Last conference I attended was in 2022, so take this recommendation in this context!

change up the topics of conversation from year to year to keep things fresh

Ensure that CME and CNE is offered extensively to encourage clinicians to attend so that there's a mix of providers.

You must go out and solicit physician speakers for topics. Relying only on submissions for the sessions lowers the quality and CME level of the topics.

Q10 - Whichways of networking with clinical medicine colleagues would most interest you?(Selec - Selected Choice



Q10_11_TEXT - Other (please specify) - Text

Select a Metric

Q10 - Whichways of networking with clinical medicine colleagues would most interest you?(Selec - Selected Choice

Whichways of networking with clinical medicine colleagues would most interest you?(Selec - Selected Choice

Participating in conference calls with the same small group of people who create a schedule of pertinent issues/topics for the calls throughout the year., Participate in webinars/other online forum with same small group of people who create a schedule of topics of mutual interest., Participate in webinar/other online forum addressing a specific topic and where members can post questions/answers.

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Participate in webinars/other online forum with same small group of people who create a schedule of topics of mutual interest., Establishing a mentor/mentee relationship with another section member., Having a "support" group of 4-6 other colleagues who interact by phone or email throughout the year.

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Q11 - What are some new or "hot" health topics, situations, or trends on your campus?

What are some new or "hot" health topics, situations, or trends on your campus?

difficult to treat vaginitis; eating disorders; nutrition in general; anxiety

Caring for patients who are taking GLP-1 medications acquired outside of the medical system.
Patients with concerns that their testosterone is low.

Gender Affirming Care, Desire for non-hormonal contraception.

Nitrous Oxide abuse

Cannabis use, sleep management

political landscape and decreased funding

Matriculation vaccines/tb testing- should we require them?

Should we prescribe and manage GLP1s for weight loss? (Or refer out)

Providing best access for students to utilize services- format?hours?location?etc

Care mangement in partnership with Dean of Students/other SA divisions- FERPA vs HIPAA, etc

Measles and written plans for clinics to mitigate on campus cases/outbreaks

PCOS, cost of health care, cost of rx

use of GLP-1s

risky behaviors

Restrictions and reproductive health.

not new or "hot" but pertinent: preparing for measles (or other outbreaks), STIs - would like to start a nurse/lab-driven screening clinic, vaping nicotine & THC

Moving to a an insurance billing model.

Differences in international students expectations of care in American health care

young men worried about low testosterone

anxiety

Travel medicine: trying to help students studying away navigate healthcare abroad. Which countries allow stimulants? If so, in what quantities? What about gender affirming care medications abroad. This has become very time consuming, helping students find all the relevant links.

Reemerging diseases-pertussis, measles for example

Cost-effective management of biologics

Weight management including GLP-1s

POTS; Ehlers-Danlos (I fear it's 'the new Lyme'); patients self-diagnosing autism spectrum disorders (often based on seeing a video on TikTok)

pregnancy options- medical abortion

Immunization requirements/management

Mycoplasma genitalum, expedited partner therapy for BV

increased anxiety in the setting of the current political stressors

Anxiety, low libido, erectile dysfunction and concerns of low testosterone levels for college age men;

Weight management

narcan integration, professional development, eight dimensions of wellness

Hiring Psych Mental Health NP and obtaining alternative avenues for supervision. Hiring non-physician Medical Director

eating disorders. cooking classes

"New weight loss medications - are they good for me?"

Increase in pertussis; substance use disorders.

Doxy PEP, in ease of syphilis infection

Rise in syphilis diagnoses.

weight loss medications; newer migraine medications

use of AI in medicine, medication abortion for primary care providers, GLP-1s and other weight loss medications

preparing for possible measles cases; LGBTQ+ issues in light of the sociopolitical environment; reproductive rights; STI prevention, screening, testing, treatment

cocaine use uptick on campus

gambling issues (thank you, e-betting)

cannabis harm reduction strategies

Vaccines and proactive planning for possible illness outbreaks due to increased population non-vaccination.

Current virus and medical illness emergence.

Measles, Budgets

medical vending machine

Q12 - What is the one thing that the Clinical Medicine Section leadership can do for you in the

What is the one thing that the Clinical Medicine Section leadership can do for you in the

help with how to manage eating disorders patients on campus

I think offering quarterly webinars of timely clinical topics in coordination with the APC section.

More sessions that allow for West Coast participation in CME.

I have really enjoyed the lectures from Duke Student Health so I would like a continuation of similar lectures.

N/A

continue regular meetings/CME talks

webinars on topics for CME throughout the year

I love the ongoing CME

Solicit ongoing feedback re: ACHA meeting planning

It would be great to connect with other clinical dept directors to discuss and provide support around administrative challenges

Continue to bring CME topics for student health specific. Also help advocate for better professional development for clinicians

How to better define clinical scope of practice for health centers

consistency with meetings and offerings, ensuring visibility on meetings

Connect me with a "Medical Director" group

same - keep pertinent subjects going

Navigating health equity issues

unsure

unsure - monthly virtual meetings/webinars, maybe with more opportunity to interact with each other

I really appreciate the monthly Duke talks. Please continue this!

maybe consider monthly clinical check in meeting to hear what is on folks minds

Enhance presentations at annual meeting

Q13 - Are there any other topics of interest you'd like Clinical Medicine Section leadership to focus

Are there any other topics of interest you'd like Clinical Medicine Section leadership to focus

red herrings?

You have included all topics of interest as selected previously

N/A

GLP-1s

Anxiety, Bipolar

Common skin complaints

care of international students

How to assess clinical competencies within a group of clinicians

leadership

How to create advances and innovation to promote change from within

no

no

not that I can think of currently

see response to question 11

Q14 - Other comments

Other comments

After and interesting and engaging start, this survey seems to have been a bit long at the end.

thank you for your ongoing advocacy and hard work

Appreciate the CME session from Duke.