For the past 12 years, Caring for the Ages readers have looked forward to the “Dear Dr. Jeff” columns. In his dozens of articles, Jeffrey Nichols, MD, CMD, addressed issues both common and controversial, public and personal, clinical and operational. “I loved what he had to say — always practical wisdom with a bit of an edge at times. He is a good communicator and listener, which is important for a writer and a clinician. It’s no wonder that his column has been so consistently popular,” said Karl Steinberg, MD, CMD, HDMC, president of AMDA – The Society for Post-Acute and Long-Term Care Medicine and former editor in chief of Caring.

Dr. Nichols said, “It was always my intention for the column to be useful and practical, not academic. I wanted to provide useful information that people in the field could turn into good practice.”

Before Dr. Jeff

The “Dear Dr. Jeff” column was actually started years before with Dr. Dave — David Brechtelsbauer, MD, CMD, who was editor in chief of Caring from 2006 to 2009. “When I started, I had in mind to do something practical and useful that addressed real issues our readers were facing,” recalls Dr. Brechtelsbauer. He admits that readers didn’t submit as many ideas for topics as he had hoped. However, he said, “I would go to AMDA meetings, and people would say ‘You’re Dr. Dave!’ That was a pleasant surprise.”

Although writing the column was satisfying, Dr. Brechtelsbauer said, it also was challenging. “It was like having a mortgage payment. The deadline came sooner than I was ready for every month.”

Assisted Living Group Tackles Challenges, Embraces Opportunities

There are many challenges for the Assisted Living Subcommittee of AMDA – The Society for Post-Acute and Long-Term Care Medicine. Among them, said Chair Sarah Howd, MD, CMD, assistant professor of medicine and geriatrics at the University of Rochester Medicine Center, is “if you’ve seen one assisted living community, you’ve seen one.” There is so much variation from state to state and even from community to community: “You can go to one assisted living facility, then go down the road to another one and it’s totally different,” she observed.

From Challenges to Opportunities

With challenges come opportunities, and Dr. Howd and her subcommittee have plans and optimism in abundance. She said, “The first big issue we’ll focus on is promoting the idea of on-site medical care, where practitioners come in and work with residents where they live.” She noted that they would like to encourage assisted living communities across the country to seek partnerships with other entities to provide medical care on site.
Dr. Jeff
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When he turned the column over to Dr. Nichols, he said that he cautioned him not to feel bad if readers didn’t submit a lot of questions to address in his articles. Today, he noted, “His column is the first thing I read when I get my copy of Caring. I think he’s a much better writer than me.”

Dr. Nichols said, “I really liked Dr. Dave’s column. He had a practical, in-the-trenches, personal approach. That was partly the model I followed.” Clearly, it’s been one that worked. As Daniel Haimowitz, MD, CMD, who served on Caring’s editorial advisory board with Dr. Nichols, said, “For a lot of people, the identity of Dr. Nichols was partly the model I followed.” Clearly, he had a practical, in-the-trenches, personal approach. That was partly the model I followed.”

He added, “It’s news you can use; and Dr. Nichols added, “It’s news you can use; and Dr. Nichols did that every single month for a year. Dr. Nichols said, “I’ve received a tremendous effort he put into his topic. I loved that.”

However, not everyone loves every column. As Paige Hector, LMSW, another Caring columnist who served on the publication’s editorial advisory board with Dr. Nichols, said, “I always marveled at the depth of the research he did. He advocated for everyone. He brought his own experiences to bear as well as other peoples’ perspectives and values. This approach made for a very unique and valuable column.”

Hard Work, Real Rewards
Dr. Nichols’s take on a wide array of issues from survey challenges, falls, care transitions, diet and appetite, trauma-informed care, communication, vaccines, and much more has won him many fans. In a 2017 Caring readership survey, Dr. Jeff was identified as the second most-read section of the publication. “I’m just shocked at how many people read the column. It’s really flattering when people tell me they read and like it,” he observed.

However, not everyone loves every column. Dr. Nichols said, “I’ve received a few angry responses to columns, where people have said I was wrong about something; and I’ve had to come back with the sources.” He added, “I make a serious effort to ensure every piece of information in the articles is correct and can be validated.”

Dr. Steinberg said, “He didn’t shy away from controversial issues. He treated them gently but assertively. He wasn’t afraid to draw a line in the sand. That’s what you want in an opinion column, and that’s what people loved.”

His Inner History Buff
Dr. Nichols studied history in graduate school, and he still loves studying the past. Sometimes history comes into his column. For example, he said, “I found all of this incredible information about the evolution of the railroad system in America. While trains may all look the same, they are different from each other. There is no generic ‘gauge,’ and they don’t necessarily connect or enable interoperability.”

And that, he said, became a column. “I don’t know if that’s my best or favorite column, but it’s interesting,” he noted.

Dr. Steinberg said, “I enjoyed his historical perspectives. He would put in [unusual] facts, but they somehow fit into his topic. I loved that.”

To Dr. Jeff With Love: Influence on Young Practitioners
“I think this column was so popular because of the authenticity, humor, and wisdom,” Dr. Steinberg said. At the same time, he noted, “If young practitioners read it every month, it was like having a kindly, experienced, and wise mentor.” Dr. Nichols said, “It’s been intensely satisfying to help educate younger practitioners. Teaching has always been an important part of my life.”

Rajeev Kumar, MD, CMD, FACP, chief medical officer at Symbria in Illinois and current secretary of the Society, has been reading the “Dear Dr. Jeff” column since the beginning of his career and his involvement with the Society. He said, “The topics and questions he addressed really struck a chord. They were so well thought out and researched, and he addressed issues in a comprehensive, easy-to-understand fashion. The columns always felt very conversational.”

Quite a few of Dr. Nichols’s columns resonated with Dr. Kumar. “One column was about falls and subdural hematomas. It was similar to a recent case we had in a facility, and so much of what he addressed in the article was relevant to what we experienced.” He added, “Everything we thought and talked about was in that article. It reaffirmed what we did. It was really wonderful to see his column on something that was so personally relevant.”

Dr. Kumar said, “Dr. Nichols is a practical geriatrician, and I have followed in his footsteps. We have to think about the small things and little details that are so important for our patients. I see that in the ‘Dear Dr. Jeff’ column, and I try to emulate that in my practice.”

Passing the Torch
Long-time Society member and past-president Steven Levenson, MD, CMD, will take over Dr. Nichols’s column in the fall. He said, “The problem-solving aspects of medical direction overlap the role of the clinician. Many residents’ problems aren’t just medical, psychosocial, behavioral, or financial. Instead, they are a combination of things. Dr. Nichols pulled all that together in his column. I want to continue the good work he’s done.”

Dr. Levenson said, “I plan to continue the approach of laying out questions and scenarios like Dr. Nichols has done.” However, he also will bring his own experience and views into his column. For instance, he said, “I know the entire history of surveys, and we can’t rely on the survey process to tell us what the right thing to do is. The regulations sometimes make it harder to do the right thing, but not impossible. The clinical teams and others need to get past overreliance on OBRA as a guide to competent clinical practice. We need to reevaluate the meaning and impact of regulations.”

He’ll address these issues and much more in his column. Instead of trying to reinvent the wheel, Dr. Levenson wants to go back to the basics and the foundations for quality patient care. He noted, “In my column, I hope to emphasize history and continuity. I will talk about the fundamentals and how they still apply.”

Don’t Say Goodbye
“We are going to miss his wit, his commonsense geriatrics, and wonderful solutions to challenges we all face. We’ll miss his presence in Caring,” said Dr. Kumar. However, Dr. Nichols isn’t going away; “I continue to work as a geriatrician, and I don’t see myself retiring any time soon,” he said. Additionally, he’s taken over as treasurer of the New York Medical Directors Association, a position he held for several years in the Society. He also is working on creating a caregiver support program for individuals caring for people with dementia. That people are paying tribute to him as he ends his column is somewhat embarrassing for Dr. Nichols, but he is pleased that he’s been able to make a difference. “I like to think I’ve been part of the overall work AMDA has done to improve care in American nursing homes. I like to think the column was a piece of that,” he said. Ms. Hector said, “I won’t say goodbye. Instead, I would like to express gratitude for what he has shared all these years and how he has impacted our world of long-term care.”

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