

Curriculum Vitae
David H. Gremillion, M.D., FACP
Professor in Residence, Kameda Medical Center

Home: Raleigh, NC, USA

Japan Address: c-23 Higashi cho 668-1, Kamogawa,
Chiba Ken, Japan 296-0041; gremillion@kameda.jp

Home Phone: (919) 790-1227USA, Work Phone: 0470-99-1166

Birth: Los Angeles, CA

Married: Charlotte Matthews Gremillion, of Durham, NC (38 yrs), 4 children, 1 Hatsu mago, 2 atarashi mago

Education and Training

Undergraduate: Louisiana State University, Baton Rouge, LA, 1968

Professional: (MD) Louisiana State University School of Medicine, New Orleans 1972

Internship and Residency: David Grant Medical Center, Fairfield, CA, July 1972- 1975

Fellowship: Infectious Diseases Wilford Hall Medical Center TX, July 1975- 1977

Professional Activities

- * Professor in Residence, Kameda Medical Center.
- * Tokyo Medical and Dental University, Visiting Professor of Medicine.
- * WakeMed Faculty Physicians, 1988-2003.
- * Clinical Professor of Medicine, UNC School of Med, Chapel Hill, NC, USA
- * Director, AHEC Internal Medicine, Associate Medical Director, Clinical Research Inst.
- * Chair, Residency Director, Dept of Medicine, David Grant USAF Medical 1984-88
- * Chief, Infectious Diseases and ID fellowship director, Wilford Hall, 1978-1984
- * Board Certifications: ABIM IM and ABIM ID (51877) June 1975; Re-certified March 1996

Professional Societies, positions etc:

- * American Medical Association – Vice Counselor, Region 6
 - * Wake County Medical Society - President 2002
 - * Alpha Omega Alpha - American College of Physicians, Fellow, March 1979
 - * Infectious Diseases Society of America, Fellow 1990
 - * Society of Air Force Physicians, 1972-1988. President
 - * Board of Directors, Men's Health Network, Washington DC, www.menshealthnetwork.org
- NOTE: *Approximately 62 peer reviewed publications, multiple research projects, multiple teaching awards (available on request).*

Recent: Gremillion DH, Nishino HS: Medical Education Reform in Japan, impact on Primary Care. Primary Care Japan, December 2005.

Instructive Cases from the Wards of Kameda Medical Center

David H. Gremillion, MD, FACP

Dr Gremillion will discuss recent cases presented by the General Medicine and Infectious Diseases teams on ward rounds at Kameda Medical Center in Kamogawa, Japan. Each case offers insights into the clinical and cultural differences between Japan and America. Cases will be presented briefly with key diagnostic audio/visuals and diagnostic possibilities will be requested from audience participants ("ichimoku

ryozen”). A brief discussion of each case will center on clinical or cultural insights offered by these cases.

About *ichimoku ryozen*: It has often been said that “a picture is worth a thousand words.” In Japanese we say “hyaku bun wa ikken ni shikazu.” Many clinical situations in medicine allow (and often require) immediate visual recognition. Visual recognition is essential and its value goes beyond any verbal description. Visual recognition is one of the “fun” aspects of medical education because it encourages participation in learning by all present and helps to overcome the modesty of Japanese “chin moku wa kin.” This visual recognition dimension of clinical medicine is universal in all medical cultures. In America we refer to “visual cues”, in German the term “augen blick” (flash of an eye) applies and in Japan, “ichimoku ryozen” has become a popular teaching tool. As a practical matter, teaching in a foreign language is greatly aided by images since the appearance of a rash (etc.) speaks for itself and no interpretation is needed.

