

Dr. Andersen:

I actually started first as a home health aide and then became a CNA and then became an LPN, an RN, bridged into a Bachelor's program. I did a Master's degree in Family Nurse Practitioner. I have a Master's degree in Acute Care Nurse Practitioner. Then I did my MBA in Healthcare Administration and then went back to the University of South Alabama for a dual specialty Doctorate with them.

My primary specialty still is Family Practice and Acute Care, and this is kind of a nice world in-between.

Everyone goes into medicine for different reasons. For me, it was definitely a couple of factors. One, it's a family job: lots of folks in medicine in my family. Two, of course, it's a great line of work. Helping people is one of the more personally rewarding.

I work in several really tough areas for treating pain. One area has been the emergency room. The difficulty with the emergency room is that we have such a small window and really the job of the emergency room is to exclude life-threatening emergencies. So you really can't get to the bottom of people's pain.

Then the flip side is in primary care you just get these little short appointments, so STEM to me was a new way to treat pain and a host of chronic conditions even immune conditions and other elements like that. The reason is, is that it's not just band-aid treatment, it's not just giving another pill, we're actually treating the underlying cause, which is exciting. You see people need fewer pills over time not more, and you see them feel better and more energy and get back to living the lifestyle that they were previously accustomed to and that is huge.

Giving somebody back something that's so core to their lifestyle is really rewarding to see.