

The BMC Brief

News for the BMC Community

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What do you do, Sarah Kimball?



Name: Sarah Kimball, MD

Title: Primary care physician and director of resident education, Immigrant and Refugee Health Program

Time at BMC: Two years

Q: What do you do at BMC?

A: Half the time, I'm a clinical primary care physician, for both addiction and refugee clinical care. The other half of the time, I work on two projects – the Immigrant and Refugee Health Program and BeingWell, the internal complex care management program within General Internal Medicine.

For the Immigrant and Refugee Health Program, I do a lot of the administrative work to keep the refugee clinic running and to help facilitate getting potentially complex patients engaged in the US health care system. On Thursday afternoons, we have our main teaching clinic, where we do medical and psychological evaluations of refugees who have arrived in the United States less than 90 days before – we welcome them into the US health system. We do basic medical, public health, and mental health screenings, then get them engaged in primary care, either at BMC or somewhere close to where they live. We see about 250 new refugees in the clinic per year, plus 60 new consultations. For patients who decide to stay in our practice, I often become the long-term care primary care provider, along with our other attending physicians.

We also have a robust teaching program in the Immigrant and Refugee Health Program. This year, we have seven residents and three internal medicine fellows during each teaching cycle. We teach a combination of clinically relevant topics, such as tuberculosis and hepatitis B, and advocacy topics, such as how to use forensic skills rights to promote human rights.

Q: What brought you to BMC?

A: My husband works here, so I felt like I knew the BMC culture and mission. I always wanted to work in a place that actually lives the mission of caring for the underserved. In Boston, that place is very clearly BMC. I also wanted to be doing refugee health work and was an incredibly excited to learn an opportunity was available at BMC.

Q: What do you want people to know about the Immigrant and Refugee Health Program?

A: We're available as a resource and take consults. We love to take care of these patients and are happy to work with anyone who has refugee or asylum seeking patients and needs extra support to take care of them. I think these patients are best taken care of by a multidisciplinary team, and I'm so grateful that we have such great collaborators. We have an integrated behavioral health team and we work closely with our colleagues at the Boston Center for Refugee Health and Human Rights, so we have the ability to provide wraparound services for patients whose trauma and past experiences may be influencing their ability to seek care. To send us consults, place an order in Epic for "Refugee Health in GIM."

One way that other providers can determine if their foreign-born patients need more help is to ask them about how they got to the US and why they left their country of origin. We don't often take the time to hear people's migration histories, but within that story is their pre-migration story, their migration story, and their acculturation story. Understanding that trajectory helps me understand how vulnerable someone is, from both a health literacy and a trauma perspective. You can also find out from that story, someone's current immigration status and how that affects their ability to access care.

People should also know that we can really help our patients by upholding the message that BMC is a safe place for people to come get their medical care and we will accompany them through whatever comes next.

Q: What do you like most about working at BMC?

A: I love working in a place where I can say that I want to do internal medicine from a human rights perspective and people know exactly what that means. The people I work with are people who love it here and love working in this environment.

But more than anything, it has to be the patients. They bring incredible diversity and richness. Even when the days are challenging, I'm here because I believe in the mission of what we do and why it's important.

Q: Can you give me an example of a current case and how Immigrant and Refugee Health Program helped?

A: We're currently seeing with a Somali refugee family, with a husband, wife, and seven children. The husband, who's in a wheelchair from a gunshot injury to his spine many years ago in Somalia, actually came to the US before the rest of the family, the rest of whom arrived about nine months ago. We've been caring for the whole family as a team and helping them deal with issues such as housing instability, school readiness, and English literacy. We also did their green card paperwork through our Civil Surgeon program, and last week they came in and the dad announced to me that he was incredibly happy because we've made them an American family.

Moving along the pathway towards citizenship gives people many more rights and opportunities, so now they can get on public housing lists and apply for different services for their children, including one with cerebral palsy. One of the things I love about the Immigrant and Refugee Health program is that we are able to help patients not just with their medical care but also with some of the other socioeconomic supports that help them succeed, like citizenship.

Q: What do you do for fun outside of work?

A: I'm a Buddhist and have an active meditation practice. I'm also a big biker, and use that as my main mode of transportation and stress relief.

My husband and I have also been going to circus school to try to learn aerial silks. And I'm the mother of two cats.