In the front yard of a house on a tree-lined street in Eastville, on Virginia’s Eastern Shore, is a small sign that reads “Eastville Medical Center PLC.” It’s so small that it’s easily missed, not at all like the illuminated block-lettered signs that adorn the exterior of medical offices in more metropolitan communities. It’s almost as if the owner of the property weren’t concerned about people finding it.

That’s because, as Dr. Linda Philpot ’07 (Psychology & Counseling) says, “Not many people know about my practice. I don’t advertise. The sign is more a marker to turn into my driveway,” she explains. “Everyone who comes here comes because they heard about me from someone else—it’s all word of mouth.” It’s not that Philpot discourages patients, but rather that she’s always been driven to do medicine a different way.

From the moment she decided to pursue medicine as a career, “her way” has informed everything from her choice of medical school, her specialty and her decision to take graduate training at Regent University’s School of Psychology & Counseling. She describes her two years in the Human Services Counseling (HSC) program as the perfect complement to her unique practice methods, which have embraced and incorporated the listening and counseling techniques of the HSC program.

Those methods include an abbreviated caseload. She doesn’t see more than 10 to 12 patients a day, because she likes to spend time really listening to them. “When new patients come to see me, be they Medicare or otherwise, or someone who wants medical management of diseases, it’s a one-hour appointment;” she says. “So much of medicine has become what I call ‘Jiffy Lube-oriented’—you go in for your 15-minute interview, get your blood drawn, get your medications and you’re out the door. That’s the goal in a lot of medicine today.”

That prescription has never worked for Philpot, whose medical career was born out of personal tragedy. “I graduated with a degree in Spanish and secondary education from Bridgewater,” she remembers. “My husband was a veterinary technician. We had a quarter-acre organic garden and an infant son, and we were living happily in Virginian’s Shenandoah Valley. “Then my sister died. She was only 41 years old. I felt so strongly that no one, not one of her physicians, ever really listened to her complaints. And through that situation, and what my family had been through with my brother, who had been paraplegic since I was 3 years old, I decided I wanted to become a physician,” Philpot says. “Essentially, I was drawn to it. So I decided to go back to school and take the classes I’d need for medical school. And all along, I just trusted in God that I’d get into med school.”

Her trust was well placed. “The first place I applied was Eastern Virginia Medical School in Norfolk,” she says, “and I got in!” She had researched schools and found the EVMS mission statement in keeping with her developing philosophy of medicine. “I knew EVMS was somewhere I’d fit in,” says Philpot. “It was a smaller school—in fact, the first year I went, there were only 45 people in my class. They had just transitioned from a three-year program. I was a member of the first four-year class.”

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Following medical school, Philpot did her residency in the Roanoke area, a place she calls "one of the best small towns in America." Her husband had found an interesting job, and they were both well satisfied with life in the Valley. "We'd have been happy to stay there, but when a position came open on the Eastern Shore, I had to pursue it," she says. "I had visited Chincoteague when I was in medical school, and I still remember the moment I came over the bridge and had my first view of Fisherman's Island. You never forget that."

She did several rotations on the Shore, ultimately working with Bayview Medical Center, a multi-provider practice that was operated by Eastern Shore Rural Health, taking care of the poorest of the poor. "We had people who literally lived in tarpaper shacks," Philpot says. "Even today it's still like a third-world country over here in some respects."

Eastville, where Philpot practices, is the county seat of Northampton County, which has a population of only around 13,000, and is notable for having the oldest continuous county court records in the United States. Its largest towns are Cape Charles with about 1,100 residents and Nassawadox with slightly more than half that number.

After several years, the logistics of a large practice began to weigh on Philpot, and when Bayview Medical Center decided she was to be transferred to a new center 25 miles away in Onley, she decided the time was right to open her own practice. She tendered her resignation, and a few months later, in 2002, she established Eastville Medical Center PLC in the house she shares with husband Allen—complete with the small sign in their front yard. To this day, she has not advertised and has no need to. The patients find her.

It's probably because of the way she approaches medical care. "My thought about medicine is to live a life that role models what patients should do," she says. "Patients see that I grow my own herbs, tomatoes and vegetables. They see that I eat healthy foods. They see that I display pictures of my granddaughter in my waiting room and office, and that makes them feel comfortable."

Making patients comfortable is part of listening to them, and listening is paramount in Philpot's philosophy. That's why, she says, the HSC program at Regent

has been such a boon to her practice. "I was interested in counseling, and the woman who is now my daughter-in-law was in the Community Counseling program at Regent. I called the school and as a result of a conversation with School of Psychology & Counseling (SPC) director of marketing and recruitment Steve Bruce, I realized the HSC program was more what I was looking for. I started two months later."

She describes her two years at Regent as a "wonderful time." When she first began the program, there was no online component, which meant driving the nearly 40 miles to campus—across the Chesapeake Bay Bridge Tunnel—twice a week. Luckily, Philpot says, "the program became a hybrid during the time I was there, so some of the classes I did online. We did a lot of dialoging online, and the last two classes I took were entirely online. "Regent so perfectly fit what I was doing because the better you hear what the patient says, the better you can make a diagnosis," she says. And remembering her sister's death, she adds, "Doctors aren't taught to listen well. I probably listened better than most to begin with, but the Regent HSC program really enhanced that. I'm the best listener now that I've ever been."

Philpot doesn't claim that her sister's doctors missed the diagnosis, but she knows that none of them ever listened to her. "She had something really wrong with her—and the diagnosis was never made," Philpot explains. "So I became a diagnostician. I want to know what people's fears are. I let them talk, and I listen to them—so during that first interview, I find out what really caused them to come see me."

After she listens to her patients, she tries to educate them. "Health literacy is really important to me—helping my patients become literate about their conditions and how they can lead healthier lives to combat disease. I spend an enormous amount of time on it." Case in point, a diabetic collaborative she recently led for Eastern Shore Rural Health that was part of a nationwide community health center addressing the chronic disease model of diabetes. "A lot of the eating habits are poor, so there's probably a greater incidence of diabetes on the Shore," she explains. "Here the average citizen is heavier than in the city."

But rather than dwell on the challenges of practice in a rural community, Philpot is progressive with her patients, referring them for acupuncture and chiropractic when she deems it appropriate. She's very
hands-on with her own patients. “I do all the nursing myself, as part of patient care. I draw blood, give injections and other activities associated with office nursing staff. It gives me the chance to spend more time with patients and adds to their comfort level,” she explains, adding, “I want to help people deal with all of their health issues that are of concern to them.”

Helping people is Philpot’s passion. Having her own practice allows her to pursue one of her other great passions: Global Mosaic, which she describes as “very much associated with the HSC program.”

Global Mosaic International, Inc. (GMI) was founded in 2001 by Regent professor Dr. Evelyn Biles, with whom Philpot studied Counseling Skills, and Modeling and Strategies I and II. A volunteer-supported, nonprofit 501(c)(3) organization, Global Mosaic seeks to meet the growing need for training in the areas of counseling, conflict resolution, mentoring and servant leadership in the global Christian church. It is dedicated primarily to bringing resources and trainers to those communities of believers throughout the world who have limited access to desired educational opportunities.

Venues of formal personal and group sessions are combined with ongoing support, encouragement, consultation and availability. Funding is also provided in many cases as grants for educational programs and degrees that meet the needs of leaders within the local churches and para-church organizations.

“In Global Mosaic,” says Philpot, “we train leaders, teaching them counselor training and listening. Last year, I went to Africa. This year, I was in India and went to the border of Bhutan. We were teaching basic counseling skills with two other people from the HSC program and four Malaysians.”

The whole idea of Global Mosaic is to mix people of different ethnicities and to learn from one another. “It’s all about leadership skills training,” Philpot explains. “When Dr. Biles hears about a need, whatever that need is for training—she goes where the needs are.”

Biles herself describes Philpot’s contributions: “Global Mosaic ventures into uncharted areas of ministry,” she writes in a recent email. “We know where we are going but are never certain of who our target audience will be and where they are in their spiritual journey. Thus I always tell our volunteers that flexibility is the key character quality they must be ready to draw upon.” Philpot traveled to Uganda and India to teach counseling skills, and she will go to Malaysia in February 2009 to supervise counseling students working with Myanmarese refugees.

“I know of no one who can adapt to whatever presents itself as well as Dr. Philpot can,” Biles continues. “She is able to strike up a meaningful conversation with anyone at any time; she is inquisitive and sensitive to all cultures. She loves, cares passionately for and reaches out to people. These people cannot help but respond to her, because they know she comes with no pretense of who she is beyond a servant.”

For Philpot, the leadership and counseling skills she has learned and taught through Global Mosaic and the HSC program are very much woven into her own practice. “Regent widened my horizon and my resource base for directing problems that I see in common clinical practice.” And she likes to quote William Osler, the father of modern medicine: “Osler said you’ll never make the diagnosis unless you listen to the story and process the story. I read that quote long before I went to medical school.” She puts her own spin on Osler’s theory: “If you don’t have any idea what the diagnosis is by the time you’ve talked to the patient, you’ll never make the diagnosis. That’s why you need to know about the possibilities beforehand—you can’t just get on the Internet, feed in a bunch of symptoms and get a diagnosis.”

For the patients who do find her office on that tree-lined street in Eastville, the reward is a long visit with a doctor who is very much interested in listening to their complaints, their fears and their hopes for a cure. Often as not, these patients leave with a loaf of Philpot’s homemade bread, and just as often leave their own fish and homegrown vegetables as an offering to her.

Of her life on the Eastern Shore, she says, “I don’t lack for anything. I practice medicine the way I believe it should be practiced—I’m able to really help my patients. God has given me a totally blessed life.”