

department of Medicine Newsletter

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THE WARREN ALPERT SCHOOL OF MEDICINE OF BROWN UNIVERSITY

SPOTLIGHT



BROWN
Alpert Medical School

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New Accreditation Council for Graduate Medical Education Duty Hour and Supervision Rules

Dominick Tammaro, MD

Graduate Medical Education programs are regulated by the Accreditation Council on Graduate Medical Education (ACGME), which accredits the majority of allopathic training programs in the USA. Since 2003, the ACGME has developed rules limiting Duty Hours for residents in all disciplines of medicine according to four principle duty hour rules. These restrictions were developed to provide for safe patient care by alert trainees, while providing safeguards for resident well-being and education. These rules are:

- Maximum 80 hours worked per week averaged over 4 weeks
- Maximum 30 hours on duty in a continuous manner
- Minimum of 1 day completely free of duty responsibility in 7, averaged over 4 weeks
- Minimum of 10 hours free of all duties between assignments.

On July 1, 2011, these duty hour rules were updated and new rules governing resident and fellow supervision were added. The new rules added limits to continuous on-duty periods, such that PGY-1 residents are now limited to 16 continuous hours on duty, effectively ending the tradition of the long overnight hours "on-call" for interns. More senior residents are limited to 28 hours continuous duty as well. The current class of interns will no longer encounter the long sleepless hours on duty known by prior interns but will still be required to remain attentive to patient details despite more interrupted schedules of bedside availability.

In order to comply with the above new rules, as well as the overall limits on critical care rotations for medicine residents, this academic year saw several major changes in critical care staffing and the hiring of over 10 FTE's, funded by both RIH and TMH, to cover services previously staffed solely by medical residents. The changes for the Department of Medicine at RIH and TMH include:



- Day & Night team shifts in the MICU at RIH & TMH (CCU beginning in October 2011)
- Additional Physician Assistant staffing in the Intermediate Coronary Care Unit
- Full 24/7 staffing by hospitalists in Respiratory Intermediate Care Unit
- Additional staffing in Miriam MICU to supplement resident coverage

In addition to Duty Hour rules, the ACGME has required programs to formalize supervision of trainees according to a 4-tier hierarchy of supervisor availability outlined below:

- Direct Supervision (oversight by senior physician who is physically present with the trainee)
- Indirect Supervision with Immediate Availability
 - supervising physician is physically within the hospital or other site of patient care, and is immediately available to provide Direct Supervision

Chairman's Message

The word "quality" is used frequently these days in reference to a growing movement to improve the delivery of health care to our patients, usually with associated improvements in cost-effectiveness and efficiency. As is often the case when a word is used so frequently, however, its true meaning may become obscured by its many applications. Individual health care providers, for example, seek to develop a quality differential diagnosis or therapeutic plan. We want our interactions and information exchange with our colleagues to be of high quality. We would like to be able to enjoy a good quality of life when we are with family and friends. On the institutional level, the health system would like to be known for its high quality of care. In order to boast about quality of care, hospitals must enlist the collaboration of a high quality group of physicians and other health care providers, have high quality physical facilities, have high quality standards of practice and to be able to demonstrate all of this by high scores on broadly accepted quality metrics. Neither the government nor the insurance companies want to pay good money for bad quality service, and are thus increasingly tying their payments to demonstrations of the high quality of care which we all seek to provide. This focus makes sense, though there is ample room for debate as to whether the measures used for evaluation are valid, whether the measurements are accurate, or even whether narrowly focusing on achieving a good score is better or worse for the patients who come to our hospitals, offices and clinics.

The average physician could be excused for expressing dismay about these different levels of emphasis, as well as for being skeptical about the relative importance of specific initiatives pursued in the name of quality. Some quality dictates may seem beneath us in their simplicity. For example, should we not be trusted to know when our hands are clean or dirty? We are physicians, after all! Sadly, our track record in hand washing has been historically poor and rates of nosocomial infection remain unacceptably high, despite the availability of proven interventions to improve such rates. If we want to deliver quality care, we need to reach the point where we cannot begin to think about touching a patient if we have not washed our hands immediately before (and after). Similarly, it may seem beneath us to go through the required step of performing a "time-out" before an invasive procedure. Yet wrong site

procedures are committed by talented, well-trained physicians and can be effectively prevented by careful time-outs. The morbidity and cost associated with nosocomial infections and wrong site procedures should make touching patients with unwashed hands and failing to perform time-outs "never events". To accomplish this goal, we must take these procedures out of the realm of thinking and into the realm of habit. Their locus must move from cortex to brainstem.

Despite the frequent comparisons made between health care delivery and the airline industry, patients are not airplanes, and an assembly line approach cannot be taken with all aspects of health care. Our approach to a mother of a child with diabetes will not be the same as our approach to an elderly patient with diabetes. Our behavior towards a patient with essential hypertension in the office will not be the same as that toward a patient with crushing chest pain, shortness of breath and a blood pressure of 60 mm systolic. We are trained as physicians to recognize small differences, broad similarities, unique observations and to blend these variables into an estimation of probabilities that is directly applicable to the individual patient sitting before us. Thus, our ability to assess each patient's individuality also represents the quality of the health care we provide.

Finally, each sick patient we encounter is not only a patient, but an individual with distinct preferences and emotional needs. In most cases our patients are connected to families and friends that also have their individual personalities. Our ability to sense these differences and approach patients and their families in ways that are sensitive to their needs and that further the therapeutic relationships helps define our quality as a physician and, in important ways, the quality of care we provide.

At its core, quality health care is quite simple – it is doing what is best for the patient. It is making sure they have adequate access to services, that they are safe when they enter into our care, that they feel welcome and heard by their providers, that recommended procedures and treatments have a basis in evidence without undue variability from practice standards, that the research we perform adequately protects their personal information and their health and that we are judicious with the increasingly precious dollars our society devotes to health care. Quality is doing what is best for the patient.



Louis Rice, MD

Quality efforts are occurring at all levels throughout our hospitals and practices. In the Department of Medicine, we have started a new program where every Division creates its own quality improvement initiative, and we gather regularly to review progress and offer suggestions. It is my hope that through these efforts we will engender and promote a culture characterized by a continuous desire to improve the quality of our care in all its definitions. It's the right thing to do and I welcome everyone's participation.

GME Curriculum Innovations Targeting the ACGME Competencies of Professionalism and Communication

Addressing Advance Directives: An Innovative Curriculum to Enhance Communication in an Internal Medicine Residents' Continuity Clinic

This project is inspired by General Internal Medicine resident Kathy Fox, MD, and her Senior Research Project from May 2011. In her study, she found that internal medicine residents lacked comfort with addressing advance directives in the Medical Primary Care Unit (MPCU). This new curriculum will aim to give residents the tools they need to improve their

skills with addressing advance directives. It will include small group lectures, home visits to patients receiving the hospice benefit, and group discussions, utilizing the narrative medicine approach. Dr. Carol Landau, Director of Behavioral Sciences for General Medicine, will be an integral role model for these discussions. Subsequently, residents will teach their colleagues about advance directives in the pre-clinic conference in the MPCU.

*Donna Mathews, MD,
General Internal Medicine*



Drs. Karen Tashima, Susan Cu-Uvin and Rami Kantor arrive in Chennai, India and receive a traditional greeting.

Drs. Karen Tashima, Susan Cu-Uvin and Rami Kantor arrive in Chennai, India in January of this year and receive a traditional greeting. They were invited speakers at the Chennai ART Symposium 2011 organized by Y.R.G. CARE (a comprehensive clinical and research program for HIV in Chennai) and in collaboration with Alpert Medical School of Brown University, Lifespan/Tufts/Brown Center for AIDS Research, UC San Diego,

NIH, Karolinska Institute, and the HIV Medicine Association of India.

Dr. Kantor spoke about the "Pattern and evolution of resistance to first line antiretrovirals", Dr. Tashima spoke on "Renal and bone toxicities of antiretrovirals" and Dr. Cu-Uvin spoke about "Antiretroviral therapy in pregnant women and prevention." They were joined by Dr. Kenneth Mayer whose talk was on "Antiretrovirals for prevention."

New Accreditation *continued*

- Indirect Supervision with Availability
 - supervising physician is not physically present within the hospital or other site of patient care, but is immediately available by means of telephonic and/or electronic modalities, and is available to provide Direct Supervision
- Oversight (discussion of care with senior physician after care is rendered)

Residency education continues to face an evolving set of rules in a changing medical education environment. The major challenge for graduate medical education is to continue to provide high quality clinical experiences for a growing number of medical school graduates in an environment that is safe for patients, highly efficient and educationally effective despite the increased number of transitions of care and handoffs between providers. Program Directors, faculty and residents in the Department of Medicine are working diligently towards this goal with support from hospital administration and the Graduate Medical Education office.

Geriatrics



Please join the Division of Geriatrics in welcoming Nadia Mujahid, MD, to our faculty as Assistant Professor of Medicine and to our medical staff, effective August 1, 2011. Dr. Mujahid graduated from Sindh

Medical College in Pakistan. She completed her Family Medicine residency in the Brown Program at Memorial Hospital of RI and a Geriatrics fellowship in our Brown program, based at RIH.

Dr. Mujahid is taking on an exciting new role as the geriatrician working in collaboration with Orthopedics in a co-management program to improve the care of elderly orthopedic inpatients. She will also see patients in the Geriatrics Ambulatory Practice at 407 East Avenue, Pawtucket, RI and will be accepting new patients. Her office is on the RIH campus, 442 Physicians Office Building (110 Lockwood Street).

The Education Committee chair for ASNC is one of the major leadership positions in this society. Brown cardiology now has 3 nationally recognized leaders in the field (B. Abbott, P. Tilkemeier, and J. Arrighi). This is a major accomplishment for Brian, who will be responsible for all educational activities of the society.

Fred J. Schiffman, M.D., receives lifetime achievement award from American College of Physicians

Recognized for “long-standing commitment to compassionate care”

Drs. Milton Hamolsky and Fred J. Schiffman

PROVIDENCE, R.I. – The Rhode Island chapter of the American College of Physicians recently presented Fred J. Schiffman, M.D., FACP, associate physician-in-chief and director of medical education at The Miriam Hospital, with one of the organization’s highest honors. The 2011 Milton Hamolsky Lifetime Achievement Award recognizes excellence in the specialty of internal medicine and service to both the community and the state chapter of the American College of Physicians.

“Dr. Schiffman is a gifted physician who continuously and tirelessly devotes his time to his fellow physicians, medical students, staff and – most of all – his patients and their families,” said William Corwin, M.D., senior vice president and chief medical officer, The Miriam Hospital. “The entire Miriam Hospital community congratulates him on this well-deserved honor.”

A hematologist and oncologist by training, Schiffman is also medical director of **The Leonard and Adele R. Decof Family Comprehensive Cancer Center at The Miriam Hospital**. He has been praised for his compassion and commitment to his patients as well as medical residents, and peers have regularly cited him as “world class in his treatment of patients” and an “impeccable physician who promotes excellence in patient care.”

“The selection committee commends Dr. Schiffman for his long-standing commitment to compassionate care,” said Thomas A. Bledsoe, M.D., FACP, governor of the R.I. Chapter of the American College of Physicians. “The committee noted Dr. Schiffman’s unparalleled dedication and praised his sensitivity to the lives of his patients and their families that is second-to-none.”

In addition, Schiffman is vice chairman of medicine at The Warren Alpert Medical School of Brown University and the inaugural Sigal Family Professor of Humanistic Medicine. The professorship, based at both The Miriam Hospital and Brown, supports a distinguished and compassionate physician



Fred J. Schiffman, M.D., FACP, associate physician-in-chief and director of medical education at The Miriam Hospital, accepts the 2011 Milton Hamolsky Lifetime Achievement Award from the Rhode Island chapter of the American College of Physicians.

providing medical treatment, with a special emphasis on teaching, research and training in humanistic medicine.

A New York native, Schiffman received his doctorate from New York University School of Medicine and performed his internship, residency, chief residency, and fellowship in hematology at Yale-New Haven Hospital. Schiffman also spent two years as a research associate at the National Cancer Institute in the Laboratory of Medicinal Chemistry and Biology. He served as an instructor and assistant professor at Yale University School of Medicine before coming to Rhode Island and The Miriam Hospital in 1983. He also is a physician with University Medicine.

The Milton Hamolsky Lifetime Achievement Award is given in recognition of academic, clinical, research and administrative excellence to an internal medicine physician who epitomizes the attributes of the award’s namesake, Milton Hamolsky, M.D., a now-retired endocrinologist who served as the first full-time physician-in-chief at Rhode Island Hospital. He is also the former chief administrative officer of the Rhode Island Board of Medical Licensure and Discipline and a pioneer of medical education in Rhode Island.

Schiffman is the third Miriam Hospital physician to be recognized with the Milton Hamolsky Lifetime Achievement Award since its inception in 1999. He joins Charles Carpenter, M.D., MACP, who was honored in 2001, and Kenneth Mayer, M.D., FACP, who was honored in 2008.

The Miriam Hospital (www.miriamhospital.org) is a 247-bed, not-for-profit teaching hospital affiliated with The Warren Alpert Medical School of Brown University. It offers expertise in cardiology, oncology, orthopedics, men’s health, and minimally invasive surgery and is home to the state’s first Joint Commission-certified Stroke Center and robotic surgery program. The hospital is nationally known for its HIV/AIDS and behavioral and preventive medicine research, including weight control, physical activity and smoking cessation. The Miriam Hospital has been awarded Magnet Recognition for Excellence in Nursing Services four times and is a founding member of the Lifespan health system.

University Medicine (www.umfmed.org) is a non-profit, multi-specialty medical group practice employing many of the full-time faculty of the department of medicine of the Alpert Medical School.

Brian G. Abbott, M.D., appointed Chair of the Education Committee for the American Society of Nuclear Cardiology (ASNC)

Brian G. Abbott, M.D., was appointed Chair of the Education Committee of the American Society of Nuclear Cardiology (ASNC), effective January 1, 2011. ASNC is a greater than 5,000 member professional medical society, which provides a variety of continuing medical education programs related to nuclear cardiology and cardiovascular computed tomography, develops standards and guidelines for training and practice, promotes accreditation and certification within the nuclear cardiology field, and is a major advocate for furthering research and excellence in nuclear cardiology and cardiovascular computed tomography. The Education Committee is responsible for the oversight of ASNC's educational activities. These activities include CME, ACE, and other credit and non-credit educational activities.

Endocrinology

Drs. Vicky Cheng and Harikrashna Bhatt joined the Division of Endocrinology, Diabetes and Metabolism at the Warren Alpert Medical School of Brown University on August 1, 2011.



Vicky O. Cheng, MD received her medical degree in 2003 from the University of Santo Tomas in Manila, Philippines. After completing her Postgraduate Internship Training at Cardinal Santos Medical Center in San Juan,

Philippines, Dr. Cheng served as a volunteer physician in several medical and surgical missions. In 2006, she started her Internship in Internal Medicine at Western Reserve Care System affiliated with Northeastern Ohio Universities Colleges of Medicine and Pharmacy and completed her residency training in Internal Medicine at the Bridgeport Program affiliated with Yale University in 2009 and fellowship training in Endocrinology, Diabetes and Metabolism at the Cleveland Clinic in 2011. Her clinical and academic focus will be in the area of adrenal and pituitary disorders.



Harikrashna B. Bhatt, MD graduated with a Bachelor of Science in Biology in 2001 and Doctorate of Medicine in 2006 from the University of South Carolina. He continued at the University of South Carolina and com-

pleted his residency training in Internal Medicine in 2009 and fellowship training in Endocrinology, Diabetes and Metabolism in June 2011. Dr. Bhatt's research has focused on the relationship between glycemic control and outcomes of ischemic stroke. He will lead the Diabetes Program at the Hallett Center.

Both Drs. Cheng and Bhatt will be based at Rhode Island Hospital and the Hallett Center for Diabetes and Endocrinology. They can be reached at 444-8344.



Geetha Gopalakrishnan, M.D., has been appointed the Interim Director for the Division of Endocrinology and the Medical Director of the Hallett Center for Diabetes and Endocrinology effective July 1, 2011. Dr. Gopalakrishnan is an Associate Professor of Medicine at the Alpert Medical School of Brown University and the Director of Clinical Education for the Division of Endocrinology. In this capacity, Dr. Gopalakrishnan coordinates the educational programs for the Division of Endocrinology including the Fellowship Program in Endocrinology, Diabetes and Metabolism. Her clinical and research activities focus on women's health topics like osteoporosis and

pregnancy. She will continue to be the Director of the Bone Health program at Women and Infant's Hospital and will be starting a new bone density program at the Women's Medicine Collaborative affiliated with the Miriam Hospital.

Graduate Medical Education

Memorial Hospital of Rhode Island Internal Medicine Residency Program

The 2011 Internal Medicine Residency Match

Kawther Alquadan:

Jordan University of Science & Technology, Jordan

Asha Bansari:

Aga Khan Medical College, Pakistan

Amrita Desai:

Dr. Vaishampayan Memorial Medical College, India

Amrita John:

Christian Medical College, India

Abdallah Kharnaf:

University of Al Fateh, Libya

Abdullah Quddus:

Allama Iqbal Medical College, Pakistan

Eman Shaban:

Jordan University of Science & Technology, Jordan

Purva Sharma:

Ross University, Dominica

Ali Shueib:

University of Jordan, Jordan

Michele Yamamoto:

University of Santo Tomas, Philippines

Chief Resident: Mazen Alqadi:

Mazen will be a graduating from the Internal Medicine Residency Program at Memorial Hospital of Rhode Island/ Alpert Medical School in June 2011.

He completed his medical education at Jordan University of Science & Technology, Jordan in 2003. After graduation, he trained in Internal Medicine at The Islamic Hospital (2005-2008) and then completed a Chief Resident Year. His primary area of interest is Pulmonary and Critical Care Medicine. Mazen is very active in medical education and basic & clinical research. He has presented several posters in national and international scientific meetings and published several abstracts. Most recently, he received the award for best poster presentation and second place award for best oral presentation at the MHRI annual Kenney Research Day in 2011.

2011-2012 Chief Medical Residents Rhode Island Hospital - The Miriam Hospital -VAMC



Brian Barr, MD

Brian Barr grew up in Philadelphia, PA and later attended Yeshiva University, graduating with a B.A. in Biology. During college, Brian used to spend his week-

ends working at the Women's League Community Residence, a home for the mentally disabled. After graduating from college, Brian spent a year living in New York City and working at Weill Cornell Medical College doing bench research on Alzheimer's disease in the lab of Drs. Mark Wexler and Paul Szabo.

After living in New York City for five years, Brian and his wife, Dassie, moved out to Long Island to attend medical school at Stony Brook University. Between the first and second year of medical school, Brian worked in the lab of Dr. Marian Evinger, focusing on the intracellular signals that upregulate the expression of the PNMT gene. After graduation in 2008, Brian continued to move up Interstate 95 and he and his family moved to Providence.

Brian is a graduate of the Categorical Internal Medicine Residency Program. After his chief residency he plans to pursue fellowship training in Cardiology at the University of Maryland. During his spare time, Brian can usually be seen spending time with his wife and three daughters.



Ken Bishop, MD

Ken Bishop was born near Boston, MA and graduated from Gordon College in 1998 with a BS in biology. After college he moved to St Louis, MO to work for an agricultural

genomics start-up, and then returned to MA to attend the University of Massachusetts Medical School in 2000. Eight years and countless western blots later he moved to Providence with wife and one-year-old son to join the Brown Internal Medicine program as a categorical resident. In between calls from the admitting attending he has managed to research the impact of *C. difficile* infection in febrile neutropenia and the effects of novel chemotherapeutic agents in HCC cell lines.

In his non-hospital time Ken likes to run, play his guitar, and document his son's hilarity with photography. He and his wife also managed to add a daughter to their study section in February 2011, whose sense of humor so far seems a little more understated.

Ken will begin his fellowship next year in hematology/oncology at Brown where he hopes all those western blotting skills will finally come in handy.



Brian Hollenbeck, MD

Brian Hollenbeck grew up in Kansas City. He attended the University of Kansas, graduating with a B.A. in Biochemistry in 2004. During this time he also studied medical

anthropology in Costa Rica and spent a fifth year as a laboratory instructor in the department of organic chemistry.

During his time at the University of Kansas School of Medicine, he came to appreciate the importance of primary care. He worked as a student physician for 4 years in the student-run Jaydoc Free Health Clinic, where he helped to establish a universal HIV-testing program. He also served as co-President of the student recycling group, where he managed the recycling efforts for the medical school campus and the neighboring 500-bed hospital. In his last year of medical school he traveled to Swaziland, where he worked at Good Shepherd Hospital.

Brian moved to Providence in 2008, and is happy to call Rhode Island home. He can be found on the weekends biking in the country or exploring local beaches. Brian has long-loved the sound of acoustic music. He currently plays guitar, mandolin and banjo in The Fox Point Rounders, a Providence-based bluegrass band.

As a General Internal Medicine resident, Brian has pursued research in HIV-2 infection, Legionnaires' disease and Staphylococcus-related blood stream infections, among other topics. Following chief residency, Brian will begin an infectious disease fellowship at Beth Israel Deaconess/Harvard Medical, Boston, MA.



Kate Robertson, MD

Kate Robertson grew up in Philadelphia but spent her summer months here in southern Rhode Island where her family now resides. She attended Middlebury College in

Vermont, receiving a BA in economics and also spending a good deal of her time on the sports field and in the mountains.

After college she received an MPH from George Washington University with a focus on international health policy. Research took

her abroad to Cape Town, South Africa where she worked to establish surveillance and treatment programs for rheumatic heart disease in school children. Despite the allure of Cape Town's landscape, she was drawn back to the U.S. to pursue her M.D. at New York Medical College. Fortunately, during medical school Kate had the opportunity to return to South Africa on several occasions to continue work on rheumatic fever and rheumatic heart disease. It was this work that ultimately sparked her interest in cardiology – a specialty that she plans to pursue in the coming years.

As an internal medicine resident at Brown, Kate has enjoyed being back home in Rhode Island. She continues to spend her free time on the beaches and in the waters of Narragansett near her family home with her husband Ethan and son William.



Lauren M. Welicky MD

Lauren M. Welicky MD is originally from Long Island, NY where she was born and raised. She was a part of the combined BA/MD program at the

State University of New York at Stony Brook and ultimately graduated with undergraduate degrees in Biology and Spanish Language and Literature. She received her MD from SUNY Stony Brook School of Medicine.

Lauren's research interests were initially in the basic neurosciences in high school and undergraduate school. She published articles regarding the Notch-3 gene expression pathway and the alpha lipoic-acid compound PolyMVA. During medical school her interests changed gears when she experienced the pulmonary / critical care rotation as a third year clerk. It was her training in the ICU that propelled her to pursue a career in internal medicine. Lauren's training in the Brown University Department of Medicine has led to numerous research endeavors. Her focus is now on outcomes research with an emphasis on the Overlap Syndrome (COPD and OSA) and its affect on mortality, as well as improving the recognition and treatment of patients with sepsis on the medical wards.

In her free time Lauren enjoys spending time with her fiancée and dog. She loves to cook and host friends and family at their home. She is an avid baseball and hockey fan. Lauren also loves to travel and hopes to make a few trips this year before entering Pulmonary / Critical Care fellowship at Brown University with the class of 2012. She intends to pursue a T32 research fellowship at Brown in 2015.

University Medicine Commits To Patient-Centered Medical Home

Francis X. Basile, MD

Standing:

Gail Martin, Kathy Landry, Dr. David Herec, Maureen Claflin, Louise Morin, Dr. Antonia Ross, Dr. Mary Hohenhaus, Dr. Michael Felder

Seated:

Susan Rea, Allie Leclerc, Dr. Steven Mallozzi, Dr. Warren Licht, Dr. Michelle Anvar.

Absent:

Dr. Francis Basile, Dr. Aman Nanda, Dr. Laura Ofstead, Dr. Ed Stulik, Kristen Bennett, and Elizabeth Nichols.

Responding to a national trend toward investment in primary care practices as the best means to coordinate the increasingly fragmented care of patients with multiple chronic conditions, University Medicine has assembled a team of practice leaders to prepare to assume that burgeoning role.

Four practices from the UM Division of Primary Care, two from General Internal Medicine and one from Geriatrics have begun the process of transforming themselves into “patient-centered medical homes” and achieving official designation as such from the National Center for Quality Assurance (NCQA.)

Physician champions will lead the effort at each of the practices: Steven Mallozzi and Warren Licht at 909 North Main Street in Providence, Michael Felder at the Warwick practice, Ed Stulik in Barrington, David Herec in Rehoboth, Michelle Anvar at Women's Health, Laura Ofstead at Plain Street and Aman Nanda at the East Avenue Geriatrics practice. Their efforts will be guided by Primary Care Division Chief Frank Basile and nurse care manager and project administrator Maureen Claflin.

Ms. Claflin came to UM in August 2010 from Quality Partners of Rhode Island where she honed her skills in practice transformation and the management of populations of patients with chronic diseases. She has played an important role in helping UM's Governor Street primary care practice achieve NCQA accreditation as a level 3 PCMH, the highest level. The task at hand is to leverage that experience into success at the other practices.

The PCMH is fundamentally a practice that assumes responsibility for the care of all of its patients, both collectively and as individuals. It emphasizes timely access to appropriate care (preventative and acute), medical decision-making driven by scientific evidence, continuous measurement of quality indicators and frequent feedback of that data to



both physicians and support staff. “It’s a process that never ends,” Claflin says. “You’re always trying to get better — to improve quality of care, patient satisfaction and clinical outcomes.”

Accurate clinical data is the holy grail of practice improvement. To get it, practices need an electronic medical record with powerful reporting functions. Physicians and support staff also need to agree to enter information into the system consistently so that it can be rolled up and turned into useful reports on physician and practice performance.

UM is almost two years into its implementation of eClinicalWorks, the organization's chosen EMR. Physicians and software continue to adapt to one another. eClinicalWorks's long-anticipated Version 9, which fulfills national criteria for “meaningful use” of electronic medical records, was successfully installed in mid August. That said, the success of the PCMH initiative will still require that both physicians and support staff use the new tool consistently. “There are lots of places in eCW where one could reasonably enter information on whether a patient smokes and has been advised to quit,” says Mallozzi. “But if we want the system to give back that information in the aggregate, each of us has to enter it in the same structured field.”

Commercial payers as well as Medicare have begun to fund some of the infrastructure that primary care practices need to meet PCMH criteria. The current effort sprang from a new contract with Blue Cross/Blue Shield of

Rhode Island. Meanwhile, insurers are looking to see whether that investment will in fact improve quality and begin to slow the rising cost of medical care. Most believe that the greatest potential for improvement rests in the care of highly vulnerable patients with multiple medical problems. Even a small relative decrease in avoidable and unnecessary hospitalizations and trips to the emergency department could yield disproportionately large cost savings.

That’s where care management comes in. Specially trained nurses with broad knowledge of chronic diseases such as congestive heart failure, coronary artery disease, emphysema, diabetes and depression will work on-site at one or two primary care practices. They will be assigned a case load of vulnerable patients and charged with helping them make their way through the system that spans hospital, nursing home, visiting nurse services, specialty and primary care.

“The most important role for the nurse care manager is to lay out the red carpet of enhanced access for our sickest patients,” explains Primary Care Division Director Frank Basile. “That may be access to an urgent visit with the physician, to expedited visiting nurse services, to nursing home admission, to education and information about their illness; the list goes on. The integration of nurse care management into a streamlined team approach to care is absolutely necessary for us to succeed. Finding the right people to do the job must be a top priority for our organization.”

New Research Awards

Gaurav Choudhary, MD, Assistant Professor of Medicine in the Cardiology Section, PVAMC, has been awarded a VA Merit Review grant entitled “Endothelial BKCa Channels and Hypoxic Pulmonary Endothelial Dysfunction” for 2011-2015 with total direct costs of \$650,000. The objective of the grant is to understand the effect and underlying mechanism of altered expression and activity of endothelial BKCa channels in settings of pulmonary hypertension.

Timothy Flanigan, MD Chief of the Division of Infectious Diseases has received funding in the amount of \$118,505 (direct costs) from the Rhode Island Department of Health for continued support of the Ryan White Part B Program - Project Bridge. Project Bridge provides prison outreach and intensive case management to HIV-positive persons being released from the Rhode Island Adult Correctional Institute into the community.

Timothy Flanigan, Chief of the Division of Infectious Diseases has been awarded \$2,528,690 in total costs from the National Institutes of Health to fund Years 11-15 of his T32 program entitled “HIV and Other Infectious Consequences of Substance Abuse”. The continued aim of this training program is to prepare pre and post doctoral fellows (physicians and behavioral scientists) for research careers in the cross-disciplinary field of HIV and other infections associated with substance abuse.

Rami Kantor, MD, from the Division of Infectious Diseases, has received supplemental funding from the National Institutes of Health via the Lifespan/Tufts/ Brown Center for AIDS Research. This one year supplement will provide \$358,827 in total costs for the project entitled “Antiretroviral Treatment Failure and Drug Resistance in HIV Infected Patients on Second Line Regimens in Western Kenya”. The specific aims of this project are 1) to determine prevalence and correlates of second line virological failures; 2) to research patterns and implications of drug resistance in patients failing second line ARVs; and 3) to examine predictors of drug resistance evolution in patients failing second line ARVs.

E. Milu Kojic, MD from the Division of Infectious Diseases has received funding in the amount of \$94,500 (direct costs) from the Rhode Island Department of Health for continued support of the Ryan White Part B Program. The Immunology Center will use this funding to continue to improve access to and retention in quality comprehensive primary HIV medical care.

Awewura Kwara, MD from the Division of Infectious Diseases has received funding from the National Institutes of Health in the amount of \$487,804 in total costs for his project entitled “Pharmacogenetics and Drug-Drug Interactions during HIV/TB Therapy”. Inter-individual differences in drug-drug interactions is a major challenge during concomitant treatment of HIV/TB coinfection and this project aims to foster a better understanding of how individual patient factors influence drug-drug interactions could ultimately improve prediction and management of such interactions. In the long-term, the hope is that this research accelerates translation of pharmacogenomics to HIV clinical care.

Thomas O'Toole, MD, Associate Professor of Medicine and Chief of Primary Care at the Providence VAMC, has been awarded two VA research grants to study how best to deliver medical care to the homeless. Dr. O'Toole is PI on both grants.

“Engaging Homeless Veterans in Care” is a VA Merit Review grant that runs from 10/2010-9/2014 with total direct costs of \$800,000.

“ARCH (Aligning Resources for Care of Homeless)” is a multicenter study for which the Providence VAMC is the Core Site. This grant runs from 8/2011-7/2015 with total direct costs of \$1,100,000.

Peter Quesenberry, MD from the Division of Hematology/Oncology has received and new R01 grant funded by the NIH for a project entitled, “Genetic Information Transfer to Hematopoietic Cells: Role of Microvesicles.” The award is \$1,545,000 for four years during which Dr. Quesenberry and his group will elucidate the specific target cells in marrow for microvesicle genetic changes and will also study individual lung cells for their specific capacity to induce genetic change in marrow. They plan to evaluate the stability of the observed genetic changes in marrow both *in vitro* and *in vivo* and will extend characterization of the potential for reprogramming and attempt to identify specific transcriptional proteins or microRNA which may mediate the observed phenotype changes. These studies should establish a more precise platform for studies of microvesicles, establish the stability of microvesicle induced genetic changes and begin to unravel the mechanisms behind such changes. This work could alter our thinking toward cell biology in general and open new strategies for approaching a number of diseases characterized by tissue degeneration or damage.

Josiah Rich, MD, from the Division of Infectious Diseases, has received an R21 from the National Institutes of Health entitled “Prisoner Overdose Training and Naloxone Upon Release”. It is a two year award for total costs of \$354,076. This project will aim to evaluate a naloxone education intervention among prison inmates at the Rhode Island Department of Corrections (RIDOC). Data generated through this pilot study will be instrumental for developing larger scale intervention trials which will assess effectiveness of a naloxone intervention upon release from incarceration.

Satish Sharma, MD, Chief of Cardiology at Providence VA and Medicine Service Line Director for VA New England HealthCare System has received a \$1.5 million grant for two years from the VHA on “Innovations in Specialty Consultation Management.” The initiative will focus on innovative ways of providing specialty consultations such as virtual consultations (eConsults) and telephone consultations, especially to the patients in community based outpatient clinics and medical centers located in rural areas of New England.

Karen Tashima, MD is The Miriam Hospital investigator for the following new clinical trials being conducted in HIV infected or HCV infected individuals:

Tibotec Pharmaceuticals:

A Randomized, Open-Label, Phase 3 Study of Telaprevir Administered Twice Daily or Every 8 Hours in Combination with Pegylated Interferon Alfa-2a and Ribavirin in Treatment-Naïve Subjects with Genotype 1 Chronic Hepatitis C Virus Infection. This study evaluates a recently approved medication for Hepatitis C infection in a more convenient dosing regimen.

GlaxoSmithKline: A Phase III, Randomized Study of the Safety and Efficacy of GSK1349572 plus Abacavir-Lamivudine fixed dose combination therapy administered once daily compared to Atripla over 96 weeks in HIV-1 infected antiretroviral therapy naïve adult subjects. This study evaluates a new treatment for HIV infection in individuals who have never taken antiretrovirals.

New Awards *continued*

GlaxoSmithKline: A Phase III Randomized, Double-Blind Study of the Safety and Efficacy of GSK 1349572 50mg Once Daily Versus Raltegravir 400mg Twice Daily, Both Administered with an Investigator-Selected Background Regimen over 48 Weeks in HIV-1 Infected, Integrase Inhibitor-Naïve, Antiretroviral Therapy-Experienced Adults. This study evaluates a new treatment for HIV infection in individuals who have already taken antiretroviral medications and have developed resistance.

Elizabeth Toll, MD was awarded a \$35,000 grant from the Rhode Island Foundation entitled "Enhancing Mental Health Care in the Primary Care Setting." Working with colleagues Michelle Rickerby, MD and Jody Underwood, MD from the Department of Psychiatry and Bonnie O'Connor, PhD from the Department of Pediatrics, she will use the grant to create a manual for teaching basic mental and emotional health care to primary care physicians.

Medicine/Pediatrics

Dr. Erin Vanscoyoc received her BA in History magna cum laude from Brown University. She received her MD from Duke University and was inducted into the AOA Honor Society. She received her MPH with honors from University of North Carolina and is completing a National Research Service Award Primary Care Research Fellowship in Health Services Research, at the UNC Chapel Hill's Cecil G. Sheps Center for Health Services Research. She has published on quality improvement initiatives for diabetes in primary care settings and has received grant support for community health initiatives promoting physical activity. She is a member of the American College of Physicians and the American Academy of Pediatrics.

Dr. Vanscoyoc will be a core faculty member in the Med/Peds residency program and see patients and precept at the Medicine Pediatrics Primary Care Center as well as serving as a teaching attending on the inpatient pediatric and medicine wards.

Dr. Mary Hohenhaus Receives the 5th Annual Riesman Family Excellence in Teaching Award

The Annual Riesman Family Excellence in Teaching Award at the Miriam Hospital Medical Staff Association annual meeting yesterday, Wednesday, June 21st. This honor is awarded to one member of the Miriam medical staff each year.

Pulmonary/Critical Care



Dr. Linda Nici will be taking over as Chief of Pulmonary/Critical Care at the Providence VA Medical Center, effective July 3, 2011. Dr. Nici is Clinical Professor of Medicine at Brown and has been Associate Chief of Pulmonary/Critical Care at the VA since 2006. An outstanding clinician and educator, Linda is an international expert in pulmonary rehabilitation, and she has played a major role in development of guidelines for pulmonary rehab. In her role as Chief, she will be responsible for maintaining clinical excellence in inpatient and outpatient care and for management of the PFT laboratory, bronchoscopy suite, respiratory therapy, sleep program, and clinics. In addition, Linda will be responsible for oversight of medical student,

resident, and fellow education in Pulmonary/Critical Care at the VA.

Sharon Rounds will continue as Chief of the Medical Service at the PVAMC and will continue to attend on VA Pulmonary/Critical Care inpatient and outpatient services.

Join us in welcoming Linda Nici to this new leadership role.

Mitchell Levy, M.D, Named Chief Division of Critical Care, Pulmonary, and Sleep Medicine, Department of Medicine.

Dr. Louis Rice recently announced the appointment of Mitchell Levy, M.D. as Chief, Division of Critical Care, Pulmonary, and Sleep Medicine, Department of Medicine, The Warren Alpert Medical School of Brown University. Dr. Levy is a Professor of Medicine at The Warren Alpert Medical School of Brown University. He has served as the Director of Critical Care at Rhode Island Hospital since 2002 and as the Interim Chief of the Division of Critical Care, Pulmonary and Sleep Medicine since October, 2009. Dr. Levy is a founding member (2002) and a member of the Executive Committee of the Surviving Sepsis Campaign, a global initiative to improve the care of patients with severe sepsis and is Past-President of the Society of Critical Care Medicine (2009). He is an internationally recognized expert in the management of sepsis in critical care.

Dr. Levy is also very active in the field of quality and safety. He continues to serve as the representative to the National Quality Forum for Society of Critical Care Medi-

cine and also serves on the advisory committees on Quality for the Blue Distinction program of Blue Cross Blue Shield of America. Dr. Levy has worked on several state-wide initiatives on quality, including Rhode Island and New Jersey, and has served on the steering committee for their efforts in sepsis and palliative care. He led a similar initiative for the New York City Health and Hospital Corporation in their quality initiative in catheter-related bloodstream infection and sepsis. He was recently appointed a content expert and voting member of the hospital workgroup for the Hospital Workgroup of the Measure Applications Partnership (MAP) of the National Quality Forum and serves as a technical expert for the project Closing the Quality Gap: Prevention of Healthcare-associated Infections, which is part of the Evidence-Based Practice Center (EPC) program of the Agency for Healthcare Research and Quality (AHRQ).

Please join me in congratulating Dr. Levy and welcoming him to this new permanent role.

The Tenth Annual Alpert Medical School, Department of Medicine Beckwith Family Award for Outstanding Teaching



Ariel Birnbaum, MD
Assistant Professor of Medicine

Sybil Cineas, MD
Assistant Professor of Medicine (Clinical)

Reid Coleman, MD
Clinical Associate Professor of Medicine

Bethany Gentilese, MD
Assistant Professor Medicine (Clinical)

Edward Martin, MD
Clinical Associate Professor of Medicine

Sharon Rounds, MD
*Professor of Medicine
Professor of Pathology and
Laboratory Medicine*

Mark Schleinitz, MD
Associate Professor of Medicine

Eleanor Summerhill, MD
Associate Professor of Medicine

The Beckwith Family Research and Education Fund has been established at the Alpert Medical School of Brown University through generous gifts to endowment from the Beckwith Family Foundation.

The endowment fund is used to support the education and research mission of the Department of Medicine, with an emphasis on the education and training of medical residents.

Each year the fund supports the presentation of the **Beckwith Family Award for Outstanding Teaching**. This award is to recognize superb teaching by its faculty. The recipients are nominated and chosen by students, residents, physicians, program and course directors in the Alpert Medical School of Brown University, Department of Medicine. Each winner is presented with a plaque and a cash prize.

Graduate Medical Education 2011 Internal Medicine Residency Match

Rhode Island Hospital-The Miriam Hospital - VAMC

PGY-1 General Internal Medicine Primary Care 2011-2014

Rachel Casas, MD
University of Pittsburgh

Sarah Fulham, MD
Columbia University

Megha Garg, MD
University of Miami

Ross Hilliard, MD
University of S. Carolina

Elizabeth Horn, MD
George Washington University

Andrea Hsue, MD
SUNY Upstate

Elizabeth Ko, MD
University of Miami

Zoe Tseng, MD
Boston University

Elizabeth Tung, MD
New York Medical College

PGY-1 Categorical Internal Medicine 2011-2014

Akinniran Abisogun, MD
UMDNJ – RW Johnson

Jorge Alvarez, MD
University of Miami

Emmanuel Apor, MD
Drexel University

Ardalan Bazargan-Lari, MD
Columbia University

Robert Black, MD
University of Toledo

Aalap Chokshi, MD
Albany Medical College

David Chu, MD
University of Pittsburgh

David DeWolfe, MD
St Louis University

Caitlin Dugdale, MD
Indiana University

Antonella Fine, MD
George Washington University

Sean Fine, MD
George Washington University

Andrew Foderaro, MD
Temple University

Sarah Freeman, MD
Weill Cornell Medical College

Joshua Giaccotto, MD
University of Connecticut

Ashil Gosalia, MD
University of Massachusetts

Helena Grabo, MD
University of Connecticut

Arslan Johnghar, MD
UMDNJ – RW Johnson, Camden

Michael Kelso, MD
University of N. Carolina, Chapel Hill

Naushaba Khan, MD
UMDNJ – RW Johnson, Piscataway

Albert Lin, MD
Alpert Medical School

Matthew Lynch, MD
University of Vermont

Eric Mao, MD
Alpert Medical School

Erin McKnight, MD
UMDNJ – RW Johnson, Camden

Jennifer O'Brien, MD
Alpert Medical School

Parag Parikh, MD
SUNY Upstate

Michael Prodromou, MD
SUNY Stony Brook

Leslie Russell, MD
SUNY Upstate

Melissa Scull, MD
Dartmouth Medical School

Abby Tubman, MD
UMDNJ – RW Johnson, Camden

Edmund Wu, MD
Albany Medical College

PGY-1 Preliminary Internal Medicine 2011-2012

David Bates, MD
New York Medical College

Danielle Cabral, MD
University of Arizona

Neal Desai, MD
Alpert Medical School

Christopher DiMarco, MD
Drexel University

Andrew Garcia, MD
New York Medical College

Christopher James, MD
Indiana University

George Kannankeril, MD
Rush Medical College

Olubusayo Obayan, MD
Boston University

Colin Segovis, MD
Mayo Medical School

Caroline Sizer, MD
UMDNJ – RW Johnson

Jae Young You, MD
Alpert Medical School

PGY 1 Medicine/Pediatrics 2011-2015

Nicole Gergen, MD
University of Minnesota

Eyal Maidan, MD
University of Miami

Joshua Orabone, MD
Tulane University

David Washington, MD
Alpert Medical School

Office of the Chairman of Medicine
Rhode Island Hospital
593 Eddy Street
Providence, RI 02903

Department of Medicine Full Time and (Research) Appointments

Full Time Appointments

Memorial Hospital

Pulmonary & Critical Care
Eric Gartman, MD
Assistant Professor

Miriam Hospital

Cardiology
Peter Soukas, M.D
Assistant Professor, TST

Infectious Diseases
Austin Huang, PhD
Assistant Professor (Research)

Rhode Island Hospital

Gastroenterology
Adam Harris, MD
Assistant Professor

Hematology/Oncology
Shi-Bin Cheng, MD, PhD
Assistant Professor (Research)

Laura Goldberg, MD
Assistant Professor

Pulmonary & Critical Care
Corey Ventetuolo, MD
Instructor

Veterans Affairs Medical Center

Cardiology
Anlong Li, PhD
Instructor (Research)

Full Time Faculty Promotions

The Miriam Hospital

Obstetric Medicine
Margaret Miller, MD
Associate Professor, TST

Rhode Island Hospital

Cardiology
Karim Roder, PhD
Assistant Professor (Research)

Infectious Diseases
Curt Beckwith, MD
Associate Professor, RST

Rami Kantor, M.D
Associate Professor, RST

Veterans Affairs Medical Center

Geriatrics
David Dosa, MD
Associate Professor, TST

Visit our website at www.brownmedicine.org

The Department of Medicine Newsletter is published quarterly. To submit an article or provide information contact Denise Lavelly-O'Hara at 444-5127, e-mail to dlavelly-ohara@Lifespan.org or contact Dan Bryant at 444-6893, e-mail to dbryant@Lifespan.org.