Message from the Chair

John E. Nestler, M.D., Department Chair

“The times they are a-changin” – so the old Bob Dylan song goes. Indeed, the face of health care in America is changing rapidly, from the adoption of the Affordable Care Act just six years ago, to the emergence of bundled payments, pay for performance, incentives for meeting quality metrics (or penalties for lack thereof), and accountable care organizations, to who knows what next?

Now, how should these multitude of changes influence an academic department of Internal Medicine? Although many may argue that accommodating these changes is necessary to maintain financial solvency, I believe the larger issue is what are the moral dictates to which we, as physicians, are bound?

Reimbursement schemes should not influence how we conduct ourselves. Rather, we should be led to deliver the highest quality, the safest and the most efficient patient-oriented care because that is the right thing to do. Doing so fulfills our obligation (our social contract) with our patients and society-at-large.

Yes, we may indeed wish to explore population management, but not because it benefits us monetarily, but because it may result in optimal health care delivery for our patients. The fee-for-service versus pay-for-performance dialectic is a false dilemma, because no matter what the reimbursement scheme is, as physicians we should always strive to do what is in the best interest of our patients and their health.

So, blow the winds as they may (pardon the Dylan-esque pun), our department and its faculty and staff should keep our focus on always providing patient-centered clinical care guided by the principles of highest quality, safety and efficiency. Let’s always strive to improve patient care. If we do so, everything else will fall in line, and we will do right by our patients and honor our profession.

Additional Features:
- VCU Health in Colonial Square.................................4
- Shaia Lecture.........................................................7
- Welcome New Faculty..............................................7
- Update from Associate Chair for Quality and Safety.............8
- Update from Associate Chair for Research........................8
- Faculty Achievements............................................9
Dr. Antonio Abbate the DOIM’s New Associate Chair for Research Discusses His Passions for Cardiology and Research

Over the summer, Dr. Antonio Abbate became the Department of Internal Medicine’s associate chair for research. Dr. Abbate is excited about this new role because of his passion for research. Dr. Abbate joined VCU as a faculty member back in 2007. He is the James C. Roberts, Esquire professor of cardiology, vice chair of the division of cardiology and also serves as medical director of the Clinical Research Service Unit in the Center for Clinical and Translational Research.

Born and raised in a small town between Rome and Naples in Italy, Dr. Abbate attended medical school and did his internship and cardiology training at Catholic University in Rome. He came to Richmond in 2004 to train as an internal medicine resident at VCU. In 2007, Dr. George Vetrovec, Dr. Abbate’s mentor, recruited him as a faculty member in the Division of Cardiology, in which he became an assistant professor with a focus on expanding the clinical and translational research in the division. Dr. Abbate began conducting his own research projects at VCU that year.

Dr. Vetrovec, whom Dr. Abbate met when Dr. Vetrovec was visiting the university in Italy, truly supported Dr. Abbate’s research. He encouraged Dr. Abbate to do his research as well as his clinical work.

As a medical student, Dr. Abbate studied inflammatory biomarkers to determine the prognosis and outcomes of patients with heart disease. He found that patients who had high levels of inflammation consistently fared worse. Over the years, Dr. Abbate translated these findings to animal models that were given anti-inflammatory treatments to improve acute myocardial infarction outcomes. He later moved to clinical trials where anti-inflammatory drugs are administered to patients who have suffered a heart attack or have heart failure, in order to improve their function and outcomes. The drugs in these clinical trials block inflammatory cytokine interleukin-1. Dr. Abbate and his team measure how the inflammatory response is quenched and how the heart function and exercise capacity improves in these patients.

In his clinical work, Dr. Abbate works in the Coronary ICU, treating patients who have had a heart attack, a cardiac arrest or are very ill, suffering from heart failure. He works to adjust medications, determine whether patients need to be sent to the cardiac catheterization laboratory to have a stent put in, or if they need surgery or a pacemaker put in place by an electrophysiologist.

Dr. Abbate says of his chosen field, “Cardiology is a tough career, those who choose it must really love it.” And he does. He enjoys spending time with his fellows and residents in order to guide them through their career choices and development. He cherishes his relationship with the nurses and nurse managers in the Coronary Care Unit, and he finds it gratifying to know that every day his colleagues in the Cardiac ICU do something tangibly significant for the life of their patients and their patients’ families.

Dr. Abbate also enjoys the interactions he has with Dr. Ellenbogen in his role as the vice chair of the division of cardiology. For the past few years, he has tried to follow Dr. Ellenbogen’s lead and spend one-on-one time with the faculty and expose them to additional ways to think about career development or research opportunities. He shares how fulfilling he finds the multidisciplinary aspect of his clinical and research work and encourages others to explore similar avenues for themselves.

Dr. Abbate particularly enjoys being able to collaborate with colleagues from different schools and professions, rather than interacting strictly with cardiologists to find solutions to cardiac problems. He tries to encourage his colleagues to do the same, to find other collaborators and learn from each other and share expertise and perspective. This approach has served him well in his role as director of the Clinical Research Service Unit. That unit’s focus is to house and facilitate research. Dr. Abbate works to help his colleagues find ways to accomplish what they want to rather than say no to an idea that won’t work in its current form. He said, “We don’t bend the rules, but we work to understand why there may be a barrier, and what we can do about it to get what we need within the parameters.”

Dr. Abbate’s passion for research comes from his drive to understand the “why” behind doing things. He believes that the choices physicians make when practicing medicine should be based on evidence, not just common practice. He said, “We need to continue testing what is better, validating and evaluating our effectiveness. We need that scientific mentality in there. It was clear to me that just practicing the status quo would not be sufficient.” When he started doing research as a student, he felt the high of discovery and wanted to recapture that again and again throughout his career.

Dr. Abbate is quick to point out that research is called research because it means to search again. He explained:

“The first thing you need to do is to understand fully what has been done, what is known. The meta-analysis approach is the standard approach to understanding what is known, what is not known, what is the confidence of the interval, how to define terms, what are the gaps, and what needs to be done next.”

When Dr. Abbate was writing his first grants as a junior faculty member, he felt discouraged when he encountered setbacks. His mentor, Dr. Vetrovec, would reassure and encourage him to continue his efforts. When Dr. Abbate was offered the position of associate chair for Research in the Department of Internal Medicine he believed it would enable him to have access to junior and other faculty members who would need some extra encouragement, and perhaps some extra advice and support. He wants to be able to provide reassurance and encouragement but also to encourage others to explore similar avenues for themselves.

(Continued on page 3)
Dr. Andrew Poklepovic Shares His Experience
Translating Research to Clinical Trials

Dr. Andrew Poklepovic is an assistant professor in the Division of Hematology, Oncology and Palliative Care. He is also an associate member of the developmental therapeutics program and a Harrison Scholar. Dr. Poklepovic came to VCU for his internal medicine residency in 2004 after graduating from medical school at the University of South Florida, Tampa. He completed a chief medical resident year and then a hematology, oncology fellowship before joining the VCU faculty in 2011. Dr. Poklepovic has been a part of 11 clinical trials at VCU since 2009. Nine of these projects involve translated research that are open to accrual, and two are pending.

Dr. Poklepovic was attracted to VCU because he was advised by senior researchers here that VCU is a place where people with a drive for research are able to grow into their full potential. With Massey Cancer Center being a medium-sized cancer center there is more opportunity to build new programs and less competition for these opportunities than at larger institutions. Furthermore, the developmental therapeutics program in the solid tumor research was just being developed, and he was excited to be a part of that area’s expansion. Dr. Poklepovic said:

“There is a revolution occurring in the way cancer is treated. We have a deeper understanding of the roles genetics and the immune system play in cancer. Clinical trials help progress the revolution. Many new drugs are being approved, the lifespans for cancer patients are increasing, and the tolerance of treatments are improving. We can learn from each patient we help and do even better for the next patient.”

Dr. Poklepovic predominantly conducts phase 1 and phase 2 clinical trials that have been developed internally at Massey Cancer Center. Many of the laboratory trials he’s been involved in are solid phase 1 trials, which involve patients with any type of solid tumor that is not a lymphoma or leukemia. He has developed specific trials for breast cancer, liver cancer, pancreas cancer, sarcoma, kidney cancer and brain tumors. Dr. Poklepovic works with multiple laboratory scientists, including Dr. Paul Dent, Dr. Harry Bear and Dr. Ross Mikkelsen. He most frequently collaborates with Dr. Dent.

Dr. Poklepovic is also a member of the Massey Solid Investigator Initiated Trials (SIIT) Team. The team is composed of multiple oncologists, clinicians, research nurses, clinical research analysts, statisticians, science writers, members of the Massey IRB and translational research lab members who all help to conduct correlative research experiments for the clinical trials.

Massey Cancer Center has a monthly developmental therapeutics meeting in which topics are vetted by a variety of Massey scientists. If the topics are found to be scientifically sound by the committee, they go through Massey’s request for proposals process where a trial’s intent, background, plan and population are proposed. Once that is accepted, Massey is able to commit resources, such as statistical support or budget developing assistance, to the trial. One of the things that makes Massey so unique is its ability to internally fund its science. After the trial is internally approved, the next step is to find a willing pharmaceutical partner for the trial. Pharmaceutical partners may provide funding, access to their agents or both.

One clinical trial Dr. Poklepovic is currently involved with is MCC1410774, the study of AR42 and pazopanib in advanced sarcoma kidney cancer. The study was developed by Dr. Poklepovic and Dr. Dent when they were trying to identify disease gaps where advances have been limited—sarcoma met their criteria.

Dr. Dent frequently works with multikinase inhibitors, oral drugs that target many different sites. Dr. Dent’s work focuses on those drugs combined with gene expression modifying drugs called HDAC inhibitors. Dr. Poklepovic suggested they look at the multikinase inhibitor Pazopanib, which was already approved for the treatment of sarcoma.

(Continued on page 4)
As a sarcoma clinician, he could easily find patients for the trial. Dr. Dent had already done similar work in kidney cancer so he recreated similar experiments with Pazopanib and the HDAC inhibitor, AR-42. The combination of Pazopanib and AR-42 has turned out to be the best combination of those classes of drugs that Dr. Dent identified, which led to the development of the trial that is now open. They are exploring the possibility of expanding the trial to also include melanoma.

The first conversation about the proposed trial with Arno Therapeutics, Inc., the company that produces AR-42, was in June 2014. Over the following two years many steps were undertaken: Populations to treat were selected, the clinical trial was written, and it went before contract and budgeting committees, the scientific review committee and Massey’s IRB. Then, because AR-42 was a brand new drug, the team had to complete an investigational new drug application. That application was sent to the FDA. After all of this was completed, the trial was able to open in July 2016.

Dr. Poklepovic explained how clinical trials have evolved in the past few years. Advances in cancer genetics have enabled disease specific phase 1 trials in which molecularly targeted drugs specifically attack a mutation found in a certain type of cancer. He said that in another vein, pharmaceutical companies are now doing large basket phase 1 trials with 1,000 people in them. They take immune therapies and test 20 to 40 patients with each type of cancer the trial has included. The large basket phase 1 trials with 1,000 people in them. They take immune therapies and test 20 to 40 patients with each type of cancer the trial has included. The structure is like a phase 2 trial and phase 1 trial combined. The benefit is that this structure shortens the time to regulatory approval because of the sheer number of participants in the trial. Dr. Poklepovic explained that even in clinical trials utilizing new information on cancer genetics, the accepted format of 20 to 40 patients in a phase 1 trial is still used on a routine basis.

Part of what helps keep Dr. Poklepovic motivated when he encounters set-backs are the breakthroughs clinical trials are leading to every day. He said:

“it is inspiring to see Massey Cancer Center on a really positive trajectory in a time when so many discoveries are happening in the fight against cancer. The revolution of understanding is happening now.”

He went on to explain that this “revolution of understanding” is two pronged. The first is that there is better understanding of the genetics of tumors, where now doctors can target certain tumors with specific drugs that dramatically change the course of the disease. The second is that there is better understanding of how the immune system works and how it can be harnessed to fight the cancer for the patient. This is incredibly impactful as science can now put people into remission from stage four cancer. These patients are not dying from their disease, whereas six years ago they were. This binary split in fighting and winning against cancer is happening now. The better the understanding of what works in fighting cancer, the more progress against the disease is made.

When he is not working directly with a clinical trial, Dr. Poklepovic is treating patients. He participates in a research clinic, has his own private clinic and has a teaching clinical with fellows. He attributes the success he has had with clinical trials to initiative and follow through. He is not deterred when a drug company decides not to participate and reaches out to the next possible partner. He has learned the value in not being deterred by rejection and works harder when he faces adverse responses.

Dr. Dent identified, which led to the development of the trial that is now open. He said:

"Joining the VCU family gives us a unique opportunity to blend private practice cardiology with academic cardiology without moving our office location. We are most excited and enthusiastic about the future of our practice."

Dr. Spencer also serves as the facility’s director of nuclear cardiology and has been practicing with the Virginia Medical Group out of the Colonial Square location since 1998.

---

**New Cardiology and Neurology Facility in Colonial Heights Opens as VCU Health at Colonial Square**

VCU Health is excited to announce the opening of a new cardiology and neurology clinic, MCV Physicians at Colonial Square, at 2905 Boulevard, Colonial Heights. The new clinic, which opened in June, serves the residents of Colonial Heights, Petersburg, Hopewell and Emporia offering outpatient services, including diagnostic testing, evaluation and treatment of cardiac and neurological disorders.

Drs. George Eapen, Mathew Joseph, Beverly Spencer, Satish Pathak, Deepak Thomas and Ashok Kumar will provide cardiology services for adult patients with conditions such as arrhythmia, atrial fibrillation, cardiomyopathy, coronary artery disease, congestive heart failure (CHF), heart valve disease, hypertension and sick sinus syndrome.

Dr. Philip O’Donnell, adult neurologist, will offer outpatient services for patients facing neurological conditions such as carotid stenosis, carpal tunnel, cerebral vascular accidents and trans-ischemic attacks, epilepsy, hemiated discs, multiple sclerosis, neuropathy and seizure disorders.

The facility’s medical director, Dr. Beverly Spencer praised the new relationship with VCU Health saying:

"Joining the VCU family gives us a unique opportunity to blend private practice cardiology with academic cardiology without moving our office location. We are most excited and enthusiastic about the future of our practice."

Dr. Spencer also serves as the facility’s director of nuclear cardiology and has been practicing with the Virginia Medical Group out of the Colonial Square location since 1998.
Dr. Kuemmerle Provides Transparency and Support for the Promotion and Tenure Process

Dr. John F. Kuemmerle, the Charles M. Caravati professor of medicine and chair for the Division of Gastroenterology, Hepatology and Nutrition, also serves as the chair of the Department of Internal Medicine’s Promotion and Tenure committee. The committee consists of six other associate and full professors who rotate on staggered three-year terms and work with Dr. Kuemmerle to review the department’s faculty members for their eligibility for promotion and tenure. The current committee members are Dr. Jasomahan Bajaj, Dr. Diane Biskobing, Dr. Dan Carl, Dr. Rakesh Kukreja, Dr. Bennett Lee and Dr. Amir Toor. Prior to becoming the committee’s chair in 2011, Dr. Kuemmerle served on the committee for many years under its former chair, Dr. David Gardner.

Dr. Kuemmerle was eager to take on the position of chair for this committee and its additional responsibilities because he believes that preparing faculty members for the process of promotion and tenure is one of the most important things he can do for them. Dr. Kuemmerle also believes that achieving promotions and tenure is possible for everyone—the requirements are transparent and readily available on the VCU School of Medicine’s website. By working with individuals to plan out the necessary steps to achieve their goals several years in advance, Dr. Kuemmerle is happy to help the department’s faculty members ensure that they are doing what is needed to achieve their promotion and tenure goals. He said:

“I find it gratifying to be able to help our faculty advance their careers. I find it personally fulfilling getting to know a larger number of my colleagues than I would ever likely get to know in a purely clinical arena because we practice in such different and sub-specialized disciplines. To me it is both personally and professionally fulfilling.”

Dr. Kuemmerle makes himself available to meet on a regular basis with any faculty members who would like him to review their progress, take a look at their curriculum vitae or make suggestions as to how they can proceed. Dr. Elizabeth Ripley is the department’s associate chair for faculty development and is also a resource to faculty members along this path.

These guidelines are modified by the School of Medicine to be relevant to its faculty while still adhering to the university’s broader guidelines. School of Medicine faculty, and faculty within the Department of Internal Medicine, are evaluated across several domains: academic preparation, scholarship, teaching and service. Everyone within the Department of Internal Medicine is evaluated by the individual expectations set for them. Dr. Kuemmerle and his committee understand that each person is a unique faculty member and serves a unique role within the department, school and university. A faculty member’s focus, whether it is on patient care, teaching, education or scholarship, is considered when he or she is evaluated for promotion and tenure.

By 2018 all faculty regardless of hire date will have to follow the new 2014 promotion and tenure guidelines. Within the new guidelines faculty members must also demonstrate their individual community engagement as well as their proficiency in the other existing domains.

The Department of Internal Medicine’s promotion and tenure process takes approximately 15 to 18 months and begins in the spring prior to the year a faculty member is officially evaluated. During the spring, the faculty member’s division chief writes a letter to Dr. Nestler supporting his or her consideration for promotion or tenure, or both. Dr. Nestler and Dr. Kuemmerle review these individuals to decide whether they are ready to move forward as candidates. Those individuals then work with Dr. Kuemmerle’s committee and the School of Medicine’s dean’s office to set a committee of their peers from both within and outside of the Department of Internal Medicine. During this stage of the process, the faculty members submit their curricula vitae and teaching portfolios if applicable. The individual committees meet to determine whether or not they support a faculty member’s promotion and tenure, and if so, make a recommendation to Dr. Nestler. Dr. Nestler then makes a recommendation to the School of Medicine’s committee and Dean Strauss during October. From November through January, the School of Medicine does its independent deliberation and evaluation of candidates. The candidates move through several levels of evaluation within the university, eventually ending with the VCU Board of Visitors. It is the VCU President and Board of Visitors that grant promotion and tenure in May of the year of a candidate’s evaluation. If either or both are granted, that new position begins on July 1.

Dr. Kuemmerle emphasizes to all candidates that although the official process occurs over 15 to 18 months, promotion and tenure goals are something that faculty members need to think about and begin preparing for as early as they can in their careers.

VCU has university-wide guidelines for the promotion and tenure of its faculty.

Continued on page 6
Typically, an assistant professor should be a good candidate for promotion to associate professor after six years. After an additional three years as an associate professor that faculty member can be ready to become a full professor. While term faculty have flexibility in this timeline, tenure-eligible and tenured faculty do not, unless extenuating circumstances exist, in which case these timelines can be extended.

Meet the DOIM’s Human Resources Team

Raymond Foster, who goes by Ray, is the Department of Internal Medicine’s senior administrative assistant and has held this position for 15 years. In this role he provides full administrative support for Al Dunn, the department’s administrator, as well as support for Lydia Lloyd, the department’s human resources administrator. Ray also provides periodic administrative support for both Rashmi Pershad, the department’s research administrator, and James Winfeile, the department’s finance administrator. Ray additionally provides backup support for Dr. Nestler, the chair of the Department of Internal Medicine. Ray has served as the assistant to the human resources administrator, Lydia Lloyd, for five years, and before that he was the assistant to the department administrator. He has worked in the Department of Internal Medicine’s administrative office since he came to VCU in 1998. Prior to joining VCU he worked as an executive assistant to a corporate vice president in a privately owned company.

Ray is the go-to person in the department for troubleshooting technology issues and telecommunications, among other things. Ray’s positive perspective is that nothing is out of his domain, and he encourages everyone to ask him questions. If he does not know the answer to something, he will find the answer or connect the person asking the question to the correct people to solve the problem. Ray has a reputation for being the person to whom all questions are directed when people don’t know who to ask. He enjoys working in an environment where things move at a fast pace and where something new is always occurring.

Ray can be reached by phone at (804) 828-5385 or by email at Raymond.Foster@vcuhealth.org.

Marcus Johnson is a 2005 graduate of VCU and joined the department that year as the HR team’s program coordinator. In this role he assists with faculty recruitment and onboarding, maintaining the VCU Faculty ejobs Resource, and generating and processing human resources forms and documents. Marcus frequently interacts with division administrators within the divisions of Cardiology, Endocrinology and Metabolism, General Internal Medicine, Nephrology and Rheumatology, Allergy and Immunology.

Marcus enjoys the diverse people he interacts with through his position, as well as the constantly changing environment that is never dull. He appreciates the effective communication, understanding and desire to provide excellent customer service that his team works hard to provide.

Marcus can be contacted by phone at (804) 828-8218 or by email at Marcus.Johnson@vcuhealth.org.

Dr. Kuemmerle hopes that his colleagues see him as a facilitator and guide on the promotion and tenure path. He strives to help faculty members identify the individual steps they need to take to achieve their promotion and tenure goals. By starting early and formulating a strategy, promotion is achievable for all of the department’s faculty. The process has become more transparent than ever, but Dr. Kuemmerle still encourages his colleagues to ask any questions they may have.

Lydia Lloyd has served as the associate administrator for Human Resources for more than five years. Prior to joining the Department of Internal Medicine’s Human Resources team, Lydia was the director of Human Resources for the VCU School of the Arts for over seven years. In her present position, Lydia interacts with members of the Department of Internal Medicine’s 11 divisions as well as the leadership team, division chairs and administrators. She serves as their human resources consultant on matters relating to organizational structure, physician contracts and negotiations, compliance issues, compensation, employee benefits, recruitment strategies and retention. She directs and implements human resource initiatives, keeping them consistent with the department’s strategic business plan and goals to further the education, clinical care and research programs for the department’s members. Lydia works with senior leadership regarding daily employment issues and provides employee coaching, disciplinary direction, employee relations direction, and performance appraisal guidance. She provides oversight and direction for provider credentialing, MCVH privileges and risk management for over 400 providers within the Department of Internal Medicine.

Lydia also designs and conducts training programs for faculty and staff regarding university, hospital, state, federal and other laws, policies and procedures. She frequently interacts with many of the department’s employees in various roles as she manages and supervises the Human Resources, Credentialing, Website, Communications, and Administrative Support Operations teams. She also works with the department administrator to develop, and maintain annual budgets for the department. Lydia serves on various university and VCU Health System committees for recruitment, process improvement, and program development.

Lydia enjoys the academic setting in which she works and is currently continuing her own education by pursuing an Executive MBA degree at VCU. She attends classes for the program on weekends.

Lydia can be reached by phone at (804) 828-9691 or by email at Lydia.Lloyd@vcuhealth.org.

Jane Markow has been the Department of Internal Medicine’s faculty recruitment coordinator since 2006. Prior to joining the department’s HR team, Jane has been a part of VCU since 1989. In her current position, Jane plays a pivotal role in supporting the department’s senior leadership in recruiting faculty. In addition to working with senior leadership, Jane works closely with the department’s research and financial teams.

Continued on page 7
division chairs, physicians, research scientists, program directors, administrators, clinical coordinators and assistants. She also facilitates onboarding and orientation for faculty members, as well as other services that aid faculty members in becoming acclimated to the department. While Jane specializes in issues relating to recruitment and onboarding, she stresses that if people need assistance with anything, she will do whatever it takes to have their needs met.

Jane can be contacted by phone at (804) 828-3984 or by email at Jane.Markow@vcuhealth.org.

Karen Scott serves as the Department of Internal Medicine’s Human Resources personnel administrator, a position she has held for the past six years. Karen is responsible for classified and hourly employee recruitment for VCU and MCV Physicians. She also processes all Family and Medical Leave Act (FMLA) paperwork for the department and assists with the promotion and tenure process. Karen enjoys being able to bounce ideas off of other team members and appreciates the “pitch in to help” mentality the HR team shares.

Prior to joining the department’s HR team, Karen was the executive assistant to the chair of the Division of Hematology, Oncology and Palliative Care. She has worked in the Department of Internal Medicine for more than 37 years.

Karen can be contacted by phone at (804) 628-0898 or by email at Karen.Scott@vcuhealth.org.

Sharon Seward has held the position of human resources coordinator and credentialing liaison for the Department of Internal Medicine for 13 years. She serves as the credentialing liaison between the department and divisions, as well as medical staff services.

It is Sharon’s responsibility to credential and reappoint all of the Department of Internal Medicine’s physicians, nurse practitioners, licensed clinical social workers and physician assistants. Sharon is also responsible for adding and maintaining affiliates to the department’s affiliate database in the VCU Banner system. She also maintains a credentialing database and maintains paper files for all newly credentialed providers. In addition, Sharon serves as a Notary Public for the department.

Sharon has over 30 years of experience in her field and enjoys investigating new applicants requesting clinical membership within the department.

Sharon can be reached by phone at (804) 828-9690 or by email at Sharon.Seward@vcuhealth.org.

The Department of Internal Medicine’s Human Resources team members have offices located on the first floor of Sanger Hall, in Suite 1-030.

Harry and Zackia Shaia Memorial Lecture

The 2016-2017 Harry and Zackia Shaia Memorial Lecture took place on September 8. The lecture, “Clinical Reasoning: Good to Great,” was part of Grand Rounds and was given by Dr. Gupreet Dhaliwal. In his lecture, Dr. Dhaliwal shared four expert learning strategies and explained how to develop an action plan for optimizing instruction in clinical reasoning. Dr. Dhaliwal is a professor in the Department of Medicine at the University of California, San Francisco, at the San Francisco VA Medical Center.

A luncheon with Dr. Dhaliwal followed the lecture at the MCV Alumni House.

Ed Shaia and his brother, Richard, established a fund in 1965 in honor of their parents, Harry and Zackia Shaia. In 1976 they designated the Shaia fund to be used to provide an annual lecture in the School of Medicine. In 1924 Harry Shaia opened what would become the Skull and Bones restaurant, an iconic landmark on the MCV Campus.

Welcome New Faculty

On September 26, Silvia Degli Esposti, M.D., joined the Division of Gastroenterology, Hepatology and Nutrition as a gastroenterologist and has been tasked with starting the new women’s digestive health program. Dr. Degli Esposti joined the department from the Women’s Medical Collaborative, a Lifespan Rhode Island Hospital Partner, in Providence, Rhode Island. There she served as director of the Center for Women’s Gastrointestinal Medicine. Dr. Degli Esposti was also an associate physician in the Department of Internal Medicine at the Women & Infants Hospital in Providence, Rhode Island, among other positions. Dr. Degli Esposti attended medical school at the University of Bologna in Italy.

On October 1, Naveed Naz, M.D., joined the Division of Cardiology as a non-invasive cardiologist and assistant professor. Dr. Naz was most recently affiliated with the Womack Army Medical Center in Fort Bragg, North Carolina, where he was chief of cardiology. Dr. Naz did a fellowship in cardiovascular disease at Walter Reed National Military Medical Center in Bethesda, Maryland, and completed his residency in internal medicine at Tripler Army Medical Center in Honolulu, Hawaii. Dr. Naz attended medical school at the Uniformed Services University of Health Sciences (USUHS) in Bethesda, Maryland.
Update from the Associate Chair for Faculty Quality and Safety

This fall has been a busy and exciting time for the quality and safety program of the Department of Internal Medicine! We have welcomed a new member to our team: Michelle Hoot, Ph.D., has joined us as the program manager for quality improvement. Michelle completed her doctoral training in Neuroscience under Dr. William Dewey in the Department of Pharmacology and Toxicology at Virginia Commonwealth University. She has over 15 years of experience in biomedical research and has managed and executed NIH and industry-sponsored clinical trials and research projects. In her new role, Michelle will help us promote innovation in the science of health care delivery and advance the scholarship of quality improvement. We are grateful to Dr. Nestler for supporting this position and for his ongoing commitment to faculty engaged in health care improvement activities.

To further promote scholarly activities within the quality and safety program, we have launched a new faculty development series. The Quality Improvement Scholarship Program is similar to an introduction to clinical research but with a focus on issues relevant to health care improvement. Participants will be given the tools to design, conduct and report their quality improvement interventions in a scholarly fashion. They will also be paired with a senior faculty mentor, who will help them develop an individual research proposal throughout the course. This program will also help faculty identify the many resources available in our department and throughout VCU, in order to support these efforts.

We are continuing our efforts to engage physician champions in the organizational safety mission. Our dedicated physician quality representatives have been trained in the organizational voluntary error reporting system called Safety Intelligence (SI). This system supports a proactive approach to preventing patient harm by allowing frontline staff to identify opportunities for improvement in the clinical environment. By embedding our physician reviewers in the SI system, we can ensure that the Department of Medicine and its trainees have a voice in shaping the quality, safety and service priorities of the organization. This also allows us to stay informed of patient safety trends and events in our department. In an effort to increase transparency and communication about these issues, we have introduced a DOIM Safety Report, which will be emailed to the department each month.

I am truly excited to serve as the Associate Chair for Research and wish to serve as an advocate for all researchers in the department and promoter of all research initiatives.

During the past three months, my focus has been on learning what the needs of the department are. Rashmi Pershad and Meagan Sok from the research administration have prepared a comprehensive survey that was completed by approximately 50 faculty members. The survey asked questions regarding the practical aspects of research, including regulatory and financial administration, as well as regarding the need for additional training and “preferred ways to learn.” Although we are still in the process of decoding the results of the survey, we can immediately grasp that there is enthusiasm in the department and a desire to learn more about research and research conduct. Therefore, stay tuned as we plan a series of educational events for the winter and spring.

A critical need for a common research conference within the department has also become apparent. There is a lot of great research going on in the various divisions with large overlap of interests, and many interdivisional collaborations are already occurring. We believe, however, that there are many more opportunities for future collaborative studies and opportunities to establish mentor-mentee relationships across divisions and departments.

Starting in 2017, we will therefore have a new “DOIM Research Conference” that will be held weekly on Tuesday from 5-6 p.m. in Sanger Hall. In the one-hour conference, one or more speakers will present on a research topic, either showing original research data or a review of the literature. The theme of the conference will vary each week. The division chiefs or their representatives will choose presenters and topics on an alternating basis. As such, over an 11-week period, all of the divisions in the DOIM will have led the research conference, and each division will lead four or five times yearly.

I look forward to this new conference series, learning about the great research going on in the DOIM and taking every opportunity to promote more studies and greater collaboration. We will also plan to use this conference series for teaching sessions on specific topics of research conduct. I hope to see you all there!

As a final, but most important message, I wish to remind everyone that the successes of modern medicine are built on the hard work of the clinicians and the researchers who came before them, and that conducting safe and scientifically sound research remains an essential part of our mission in the DOIM.
Faculty Achievements

Sarah Hartigan, M.D. has been elected as a fellow in the Virginia Chapter of the American College of Physicians (ACP). Fellowship is an honor achieved by those recognized by their peers for personal integrity, superior competence in internal medicine, professional accomplishment, and demonstrated scholarship.

Michael Stevens, M.D., M.P.H. received the Paul Florentino Volunteerism Award of the Virginia chapter of the American College of Physicians at the chapter’s annual meeting in April 2016. This award honors members who have distinguished themselves in voluntary service in the area of medicine. The award is named in memory of Paul Florentino, MD, FACP who was a governor of the Virginia chapter.

Marjolein de Wit, M.D., M.S. and Mahmood Rasheed, M.D. were recently elected to the national medical honor society, Alpha Omega Alpha. Election to Alpha Omega Alpha is an honor signifying a lasting commitment to scholarship, leadership, professionalism, and service. A lifelong honor, membership in the society confers recognition for a physician’s dedication to the profession and art of healing.

Thank you for reading.

For more information about the Department of Internal Medicine, please visit us online at:

www.intmed.vcu.edu