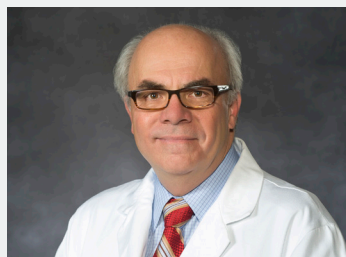


PROGRESS NOTES

Progress Notes is a Quarterly Publication of the Department of Internal Medicine

V i r g i n i a C o m m o n w e a l t h U n i v e r s i t y

Message from the Chair



John E. Nestler, MD
Department Chair

These are exciting times for the Department, and the Department is growing and continuing on an upward trajectory in all its missions.

A new Division Chair brings a fresh and far-reaching vision for the Division of General Internal Medicine. New clinical programs in Adult Cystic Fibrosis and Glomerular Diseases are being implemented. The new position of Associate Administrator for Clinical Operations has been created and filled, and multiple innovations to the clinics and scheduling processes are helping our physicians to practice more efficiently and productively. The Educational program continues to impress with the recruitment of outstanding trainees; the caliber and accomplishments of our housestaff are remarkable; and new educational initiatives instituted here are being emulated nationwide. These are just a few of the numerous initiatives and achievements of which we all can be so proud.

It is important to note that these successes are due to the tireless dedication and industry of the Department's faculty, trainees, staff and colleagues at MCV Hospitals, School of Medicine, and MCV Physicians. As the year draws to a close, we thank each of you. May you enjoy the holidays with family, indulge in a well-deserved respite, and return reinvigorated for a New Year that promises to be as good, if not better, than the one in passing.



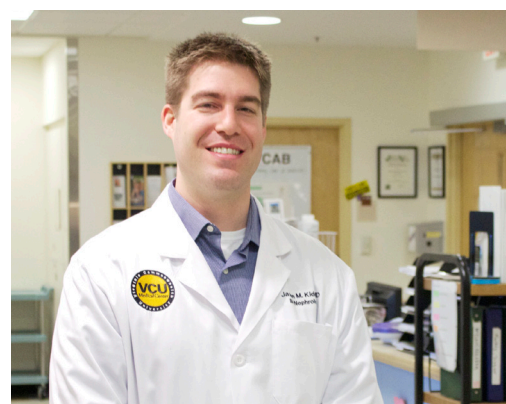
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A Message from the Department Administrator

I will provide an overview of the Department's finances and its clinical and research operations, and relate a little about what it has been like for me over the last year-and-a-half as the Department Administrator. I think I will start with the latter item first, and for me as Department Administrator, it has been in a word, Great! As most of you know, I have served in a number of academic medical centers in my career, both fully integrated and decentralized, and our Department of Internal Medicine and the whole VCUHS is one of the very best I have worked in. There are new and exciting opportunities and challenges every day, and I have totally enjoyed being able to serve as the Department Administrator.

I believe we have made significant improvements since my arrival here and I would like to share some of those accomplishments. We have implemented relatively smoothly a new compensation plan, which is one of the major reasons why, compared to last year through October, we are up in RVU's by approximately 18%. It would be a major accomplishment in a department of our size and scope to be up by 7-8%, but to be up by 18% is truly significant. The number of faculty we have recruited in the past year, in almost all of our divisions, has increased our clinical capacity and

improved access for our patients. Speaking of access we have been one of the lead departments in implementing the system-wide access initiative. There have been challenges in its implementation, but on the whole the initiative has been a success. From a research perspective, we moved forward to put into place infrastructure to assist Principal Investigators in getting grant proposals completed and submitted.

Recently we added **Susan Wenzel, RN, MSHA** (Clinical Operations) to our senior department leadership team of **Lydia Zirkle** (Human Resources), **Liz Fortune** (Research) and **Jim Winfile** (Finance). We strive to support and facilitate the faculty and staff in our tripartite mission of Clinical Care, Research and Education. In closing, this is a great department, we are having a very successful year, and I look forward to the second half of the year being even better than the first.



Alfred A. Dunn
MBA, CMPE

New General Internal Medicine Chair Aims for Excellence and Patient-Centered Care

In November 2013, **Dr. Shin-Ping Tu, MD, MPH, FACP**, stepped in as the new Chair of the Division of General Internal Medicine. Dr. Tu comes to VCU from the University of Washington in Seattle, Washington, where she was also a Joint Associate Member of the Fred Hutchinson Cancer Research Center and conducted research on cancer prevention and control in diverse populations. Dr. Tu is excited to be leading the Division of General Internal Medicine and looks forward to opportunities for VCU to deliver quality patient-centered care, educate the best physicians and leaders in medicine, and contribute to research and innovations that influence the broader healthcare community.

The Division of General Internal Medicine is the largest in the Department of Internal Medicine with over 50 physicians. General Internal Medicine faculty members practice in a variety of clinical settings, lead the education and training of students and residents at VCU, and engage in important research that covers a wide array of clinical interests. The Division works closely with other Divisions and Departments at VCU Medical Center to ensure the delivery of optimal patient care.

As Dr. Tu assumes the role of Chair, her vision is that General Internal Medicine will serve as the foundation of the health care system and grow into a premier division nationally.



Dr. Shin-Ping Tu, the Chair of the Division of General Internal Medicine, looks forward to facilitating the growth of the Division.

During these times of significant health care change, Dr. Tu plans to focus on:

- 1) patient-centered care;
- 2) team-based learning and performance;
- 3) attention to complex systems and processes;
- 4) strategies applicable to the changing health care delivery and fiscal environment; and
- 5) development of effective and visionary leaders.

"While I am still getting to know the faculty, I am impressed with the remarkable

talent and commitment our physicians have for patient care and medical education," shares Dr. Tu. "What inspires and attracts us to academic medicine are the opportunities to teach the future physicians and leaders of medicine as well as to shape and influence the broader medical field," says Dr. Tu. She sees General Internal Medicine faculty leading the transformation of primary care and hospital medicine towards patient-centered services

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that are efficiently coordinated within the healthcare system and communities for optimal patient outcomes.

“In addition to exemplary clinical care,” says Dr. Tu, “I would like the Division to be known nationally for our exceptional educators who instill knowledge, teach skills, and shape the experiences of medical students, residents, fellows, and physician colleagues.”

In addition to her own work as an internist, Dr. Tu also has a strong research portfolio. She served as the Principal or Key Investigator on three grants and Co-Investigator on several additional grants from the National Institutes of Health. Dr. Tu is currently leading the flagship multi-site research project of the Cancer Prevention and Control Research Network, funded by the Centers for Disease Control and Prevention and National Institutes of Health. Additionally, she has served as a member of committees of the National Cancer Institute, Centers for Disease Control, Society for General Internal Medicine, and Susan G. Komen Foundation. She considers scholarship and research of utmost importance to

informing clinical care and will be cultivating that at VCU.

While moving the Division ahead at the national level is important, Dr. Tu points out that other factors have to be considered in leading the division. “As a mixed methods researcher, I see the value of quantitative measures such as national rank. I am also keenly aware of qualitative assessments that are needed to capture the breadth and depth of the impact our faculty have on quality patient care, excellence in medical education, and innovative research.”

Dr. Tu understands the vital role the Division of General Internal Medicine plays at VCU Medical Center. She will continue to foster strong relationships and collaborations with other Divisions, Departments, Schools, institutions, and communities. “With the best clinicians and educators, as well as cutting-edge researchers, our Division will serve as a model pipeline that increases the generalist workforce for a more outcomes-based and financially viable health care system.” **IM**

New Adult Cystic Fibrosis Center and Director Offer Highest Level of CF Care

New developments in the VCU Medical Center Cystic Fibrosis Program promise a new level of excellent care for adults affected by Cystic Fibrosis in central Virginia. While VCU has a long history of providing care to patients with Cystic Fibrosis, the Health System has created a new adult-specific Cystic Fibrosis care center. In summer 2013, **Dr. Nauman Chaudary**, an experienced specialist in Cystic Fibrosis, joined the Department of Internal Medicine's Division of Pulmonary Disease and Critical Care Medicine to be the Director of the VCU Adult Cystic Fibrosis Center. As head of the new Adult Center, Dr. Chaudary has already begun to build a team and establish new protocols for care aimed at making VCU an excellent place for Adult Cystic Fibrosis care.

Cystic Fibrosis, or CF, is a genetic disease that severely affects the patient's lungs and digestive system. A mutation in the CFTR gene causes disrupted hydration and sodium transport in the patient's body, as well as a variety of chronic infections. Fifty years ago, most people born with CF did not survive childhood. Since then, care has advanced, and although CF can still be life-limiting, people with CF can expect to live well into adulthood.

While patients are living more normal lives now, this usually requires adhering to complex and often expensive treatment protocols. General treatment routines involve: breathing treatments with aerosols, clearing up lungs with airway clearance techniques, exercising five times weekly, sinus rinses, chronic inhaled antibiotics, pancreatic enzyme replacement along with vitamins, and extra caloric intake orally. The average annual cost of healthcare for CF patients is over \$100,000 and that number can increase rapidly with infections that require hospitalization.

The Cystic Fibrosis Foundation registry contains over 30,000



Dr. Nauman Chaudary, of the Division of Pulmonary Disease and Critical Care Medicine, is Director of the new VCU Adult Cystic Fibrosis Center. The Center will offer a new level of care for adult CF patients in central Virginia.

patients in the United States; about 700 CF patients live in Virginia. Because the disease is rare and often misunderstood, CF centers are a key source of care for patients. Adult CF centers have become necessary to provide care to adult patients, who have inherently different health needs than pediatric patients. VCU currently serves around 50-60 adult CF patients through its existing pediatric and general CF program. With the new Adult CF Center, VCU will now be able to offer adult specific care such as treatment protocols that allow for more patient autonomy and expertise around reproductive health for patients.

Dr. Chaudary's goal for the VCU Adult CF Center is to provide excellent care to CF patients throughout the region that allows them to have the highest quality of life possible. To meet that goal, Dr. Chaudary is not only focusing on delivering quality care through the Center, but also on building an interdisciplinary team of CF

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specialists, establishing new treatment protocols for CF patients, and improving patient education.

The team at the VCU Adult Cystic Fibrosis Center is already growing: thus far, a respiratory specialist, a CF dietician, and a social worker have been hired. A search is underway for a genetic counselor, nurse, pharmacist and research coordinator as well. The staff of the new center will broaden patients' access to the most advanced therapies and be able to work together in addressing the complex issues.

Dr. Chaudary's goal for the VCU Adult CF Center is to provide excellent care to CF patients throughout the region that allows them to have the highest quality of life possible.

In addition to adding new team members, the Center is establishing new operating procedures. This includes new inpatient programs, equipment, pharmacy protocols, and infection control policies. Dr. Chaudary has also been working with other divisions and departments in the hospital to develop common practices for treating CF patients who require care outside of the Center. "Ultimately, we want the Center to be in the top ten CF centers in the country," says Dr. Chaudary. "In order to achieve that, we must not only demonstrate excellent outcomes and perfect ratings – we have to be able to prove that they are the result of strong internal

protocols and procedures, as well."

In an effort to enhance the care experience for patients of the Center, Dr. Chaudary has included a patient in the process of building protocols. "We want patients and families to be more involved in their care," says Dr. Chaudary. "We want to hear their feedback on how to improve care delivery at the Center." Additionally, the Center has launched a new website which will feature a wide range of information and resources designed to provide patients better understanding of their conditions.

VCU's Adult CF Center is also active in clinical trials for CF treatment options in the research stage. The Center will be enrolling patients in the Gilead CAT clinical trial study, the Vertex 809 combination studies, and the Novartis TOBI Podhaler study, as well as the investigator-initiated ascorbic acid use project. "We would like to come up with a protocol that is simple for patients to follow and also inexpensive," Dr. Chaudary shares. He looks forward to the dynamic environment at VCU fostering research interaction and collaboration with other investigators and experts.

Under Dr. Chaudary's direction, the VCU Adult CF Center has made strong progress with new team members and new protocols. "We have come a long way," says Dr. Chaudary. "We are seeing patients and are very excited with the progress." There is much work to be done in the path towards being a nationally ranked center, and Dr. Chaudary and the Adult CF Center team are ready to provide excellent care to Virginia's CF patients. **IM**

A New Focus on Rare Kidney Diseases for Nephrology

In August 2013, **Dr. Jason Kidd** joined the Division of Nephrology and he is focusing on expanding VCU Medical Center's expertise in glomerular diseases and vasculitis; diseases which can lead to kidney failure. Dr. Kidd will be developing a referral center and partnering with other medical centers focusing on these diseases. He is also working on establishing a registry of patients with these diseases in Virginia. With this new focus, the Division of Nephrology hopes to be able to offer more effective treatments to these patients.

Glomerular diseases affect the "filters" of the kidneys, called glomeruli. Examples of these diseases include focal segmental glomerulosclerosis (FSGS), membranous nephropathy and ANCA glomerulonephritis. These diseases can be treated, but can lead to kidney failure if left untreated. The presence of blood and protein in the urine are markers for the diseases and the patients need nephrology evaluations and kidney biopsy to make the diagnosis.

The general treatment for these diseases includes the use of immunosuppressants. Because glomerular diseases are rare and often difficult to treat, there is still a significant need to identify the most effective treatments. "We are focusing on improved therapies



Dr. Jason Kidd, of the Division of Nephrology, is leading the effort to better understand and treat glomerular diseases at VCU.

for the patients, especially with rapidly progressing forms of the disease," says Dr. Kidd.

Dr. Kidd's first step is building the Division of Nephrology's

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presence as a referral center in the region. As the Division is ranked in the top 50 in the nation, VCU Nephrology already draws many patients requiring kidney expertise. To increase awareness of the Glomerular Diseases Program, Dr. Kidd is meeting with general practitioners to let providers know VCU stands as a resource for these rare diseases. He is also collaborating with private nephrologists in the area to assist them in the management of these patients and to provide education to both the physicians and the patients. "Ultimately," says Dr. Kidd, "we would like to have a specialized clinic for patients with these disorders."

Another key part of Dr. Kidd's work is building a registry of patients affected by these kidney diseases. The registry will collect information on the presentation, diagnosis and response to treatment in patients with these diseases. Retrospective studies can then be performed to identify therapies that may have been

effective and learn more about the disease course. "Once we learn more about these diseases we will be able to help the patients understand what they have, what the treatment is, and what they can expect going forward."

These efforts will be a part of an endeavor led by the NIH to establish a large group of patients with these diseases. "Nephrologists are trying to figure out the best way to treat patients with these diseases," says Dr. Kidd. "This is a great way for us to collaborate and better help people affected by these rare diseases."

Dr. Kidd's efforts in building a referral center and patient registry are a promising step towards improving the care of the patients suffering from both acute and chronic forms of glomerular diseases "This is a great Division and Department to be a part of," says Dr. Kidd. "I am happy to be here and hopefully I can add something to the work we do." **IM**

Update from the Associate Chair for Education

Residency Program

It has been an active summer/fall in the Educational Programs for the Department of Internal Medicine. In July, we started 56 new interns in our four Medicine training programs: Categorical Medicine, Preliminary Medicine, Medicine-Pediatrics, and Medicine-Emergency Medicine. The interns started with a burst of energy and have continued to impress us with their enthusiasm. Their commitment to learning and caring for patients is already making clear contributions to our Department.

The core training program continues to innovate and to explore improved methods and structures for training in Internal Medicine. This year, the program has restructured to a new rotation schedule model that allows trainees to focus their efforts in either the inpatient or the ambulatory arena during a specific rotation. This complicated structure, the Tandem Block Structure, is unique and designed to allow focused experiences in the continuity clinic setting as well as improved continuity in patient care in both settings. The structure also avoids long continuous blocks of inpatient training, helping to reduce fatigue in GME learners. The program is currently studying the impact of the new schedule on clinical activities, continuity, fatigue and other learning variables. The leadership is looking forward to disseminating this unique model for the rest of the country if it is effective. Initial resident and intern feedback is overwhelmingly positive.

The core training program also continues to model milestone-based evaluation and advancement for the nation. The program's leader-manager-teacher model continues to be a model for programs nationwide as all programs must now move to milestone-based systems.

One last note: Our residents matched incredibly successfully on fellowship match day! We had a 100% match rate into fellowships in our graduating third year class - all of them matched into one of their top choices, many of whom plan to stay here with us at VCU. Congratulations to all!

Fellowship Training

In the fellowships, we started over 30 new fellows in our 18 fellowships this summer. Again, our new GME learners have joined us with a strong sense of commitment to and enthusiasm for learning and for patient care both at the VA and at VCUHS. As our new fellows hit the ground (running!), we started into a busy recruiting season which attracted applicants to our fellowship programs from all over the nation. We are thrilled to announce that our fellowships had a terrific match and filled all positions with top recruits from around the nation. This is particularly impressive given that the majority of Departments nationwide did not successfully fill all fellowship positions this year. Congratulations to our fellowship directors on developing and leading such strong programs!

Notably, like our core program, our fellowship directors and administrators are leading the nation in developing innovative structures and educational models for training. We are considered a national model for centralized, coordinated fellowship administration; **Dr. Lisa Brath** (Director, Pulmonary and Critical Care Fellowship) and **Ms. Rachel Ferguson** (Fellowship Program Administrator) recently led a national workshop in this area. Our programs are currently working to move to milestone-based evaluations and advancement.

Undergraduate Education

Our undergraduate medical education programs have been outstandingly busy this fall, kicking off the School of Medicine New Curriculum. This impressive and massive curricular change is keeping us all on our toes with an enhanced focus on active learning methods and a restructure of course content. We look to a new challenge as these "newly" trained students

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Stephanie A. Call, MD, MSPH

enter the clinical arena at an earlier time in their coursework, approximately 18 months into their medical school training.

We are proud to be a leader in Internal Medicine education and proud of a strong 2013!

Stephanie A. Call, MD, MSPH

Associate Chair for Education

Program Director, Internal Medicine Residency Program

Professor of Medicine

Division of General Internal Medicine

Update from the Associate Chair for Clinical Affairs

Department Strategy and Growth

In 2013, the Department made significant but subtle adjustments addressing the changing nature of academic medicine. Necessary and positive emphasis on trainee supervision and patient safety, along with the recognition of physician limitations, prompted the reorganization of inpatient staffing to meet the capacity needs of the Health System. As a result, the Department created a group of nocturnist educators. These educators have developed a rich night-time curriculum illustrating their commitment to both clinical and educational excellence.

This fall, we also welcomed five new faculty members within the Division of General Internal Medicine, hired as traditional academic generalists and dedicated inpatient clinician educators. These new faculty have been critical as practice changes have led to an increasing need for medicine subspecialists to focus on their own practices and consult services. The academic hospitalist program continues its growth in meeting the never-ending need for increased capacity with a fifth team that was recently put into place.

Finally, the inpatient oncology services expanded with the creation of the inpatient oncology team. This expansion has helped better serve the patients of the Massey Cancer Center while simultaneously helping with capacity on the general medicine teams.

Patient Flow

The Department continues to work with the Health System in improving patient flow from the emergency department and clinics. Collaborative efforts continue in making substantive changes to ensure system needs and physician capacity are optimally matched. Guidelines for the safe management and expedient triage

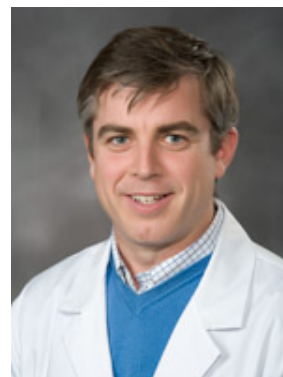
of patients needing advanced levels of care are in development.

Quality Improvement

The Department has appointed a quality representative to each division. The work of these quality representatives and project leaders has illustrated that the quality improvement initiatives of the Department are pivotal to those of the larger health system. As the largest academic department and group of clinical providers in the system, it should not be a surprise that this would be so.

Looking Ahead

While we have made good progress in 2013, many challenges remain. The Department continues to work to address the critical need for geographically confined medicine beds for both physician efficiency and patient safety. We continue to work with care coordination to improve patient transitions between the inpatient and outpatient settings. In 2014 we will see an increasing emphasis on the existing benchmarks, as well as the implementation of new benchmarks. We look forward to working collaboratively as a department toward meeting our mutual goals.



J. Christian Barrett, MD

J. Christian Barrett, MD

Associate Chair for Clinical Affairs

Medical Director, Central Virginia Center for Coagulation Disorders

Fellowship Program Director, Hematology-Oncology Training Program

Associate Professor

Division of Hematology, Oncology, and Palliative Care

New Clinical Operations Administrator Takes On The Ground Approach To Improving Clinics

In the fall of 2013, the Department of Internal Medicine Administration welcomed **Susan Wenzel, RN, MSHA**, as Associate Administrator for Clinical Operations. This is a newly created position on the Department's Administration team, aimed at providing the Department's multiple clinic locations with day to day support and direction to enhance patient flow activities and maintain a favorable work environment for the providers and staff. Ms. Wenzel brings extensive clinical and administrative



Susan Wenzel, RN, MSHA

experience to the role and looks forward to collaborating with providers and staff to further the Department's mission to provide "superior, compassionate and innovative clinical care to our patients."

Ms. Wenzel will be working with the **Ambulatory Care Center**, the **Gateway Building**, **MCV Physicians at Mayland**, the **VCU Medical Center at Stony Point** and the Inpatient service. As the largest clinical provider in the VCU Medical Center, excellent management of clinical operations is integral to the health system. Ms. Wenzel will act as a liaison between Department leadership and clinical faculty with the goal of making clinical services as effective and efficient as possible. She will be working to improve


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clinic operations, reduce bottlenecks that frustrate patients, providers and staff, and support the service delivery goals of the Department and its Divisions.

Ms. Wenzel is currently working with the providers and staff on ACC 2 and ACC 4. She is conducting time studies and observations to evaluate patient flows and work flows. "It is important to be at the ground level and actually observing clinic flow. The observations are essential to mapping out processes and filling in gaps. These experiences have absolutely reconfirmed my belief that we have outstanding clinicians and staff at VCUHS," says Ms. Wenzel.

While the position is new and the only one of its kind at VCUHS, Ms. Wenzel is encouraged by the initial results. "Our providers and staff have been very open and honest about ways we can make improvements in how we deliver clinical care," says Ms. Wenzel.

"As frontline providers, they recognize work and patient flow barriers, but the demands of direct patient care and their other responsibilities do not allow much time for dealing with these issues. It is critically important that I am in the clinics and available to listen, provide assistance, and make sure that their concerns are taken back to the Department or to the appropriate area." In addition to working closely with Department Administration, Ms. Wenzel will also work very closely with the Medical Directors for Clinical Services.

"It is an exciting role," says Ms. Wenzel, "and I am grateful to have the opportunity to be part of the Department and its excellent group of clinicians, staff and administrators. I am available by email at swenzel@mcvh-vcu.edu and welcome any opportunity for an impromptu discussion or a scheduled meeting." 

Welcome to Our New Faculty

Shin-Ping Tu, MD, MPH, FACP, is joining the Division of General Internal Medicine as Division Chair. She comes to VCU from University of Washington in Seattle, WA.

Stephanie Mayer, MD, is joining the Division of Endocrinology. She comes to VCU from Duke University Medical Center in Durham, NC.

Jennifer Jorge, MD, is joining the Division of General Internal Medicine. She comes to VCU from Henry Ford Hospital in Detroit, MI.

Andreea Goldberger, MD, is joining the Division of General Internal Medicine. She comes to VCU from Medicus Healthcare in Windham, NH.

Pablo Bedoya, MD, is joining the Division of General Internal Medicine. He comes to VCU from UCLA Medical Center in Los Angeles, CA.

Nutan, MD, is joining the Division of General Internal Medicine. She comes to VCU from Medstar Good Samaritan in Baltimore, MD.

Fredika Robertson, PhD, is joining the Division of Hematology, Oncology and Palliative Care as the Executive Director of Clinical Research Services. She comes to VCU from the University of Texas MD Anderson Cancer Center in Houston, TX.

