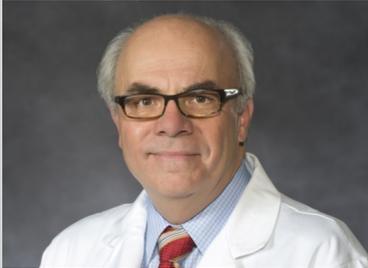


Progress Notes

A Quarterly Publication of the Department of Internal Medicine

Message from the Chair



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

During the holidays, I reflected on what led me to pursue a career in academic medicine. After all, when I entered medical school I had intended to become a family practitioner in the country. Here I am years later, ensconced in academia after a long tenure conducting research and teaching. And, by the way, loving it all.

The answer was the role models I encountered along the way – the superb educators who stimulated my curiosity, expert clinicians with virtually magical diagnostic skills and researchers who provided insights into the complexities of human biology. Decades later, I still remember these icons with great clarity and fondness. I wanted to be like them, and becoming an academic physician became a foregone conclusion for me.

I mention this to highlight the importance of mentorship. As faculty, we all bear the grave responsibility of being inspiring role models for our trainees. Our interactions with them help shape their futures and ultimately affect the healthcare system as much as our didactic lectures or clinical teaching. Our trainees will not all want to become academicians, but, no matter what their ultimate career paths, our guidance and examples should exhort them to be compassionate and expert physicians dedicated to outstanding patient care and the advancement of medical knowledge. We should prompt them to be the best that they can be.

As a department, we are fortunate to have as our faculty some of the best physician role models and mentors I have ever encountered. These are individuals who hold themselves to the highest standards and are fully dedicated to both the art and science of medicine.

In this new year, let us all rededicate ourselves to being exemplary role models and mentors whom our trainees will remember decades from now with admiration and gratitude. **IM**



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2015 Practical Frontiers in Primary Care conference receives its biggest turn out to date *Page 3*



Twenty-three year VCU veteran administrator, Jerry Riggins, welcomes new adventures to come in 2016 *Page 6*



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Dr. Luis Guzman joins VCU Health as the new director of the Adult Cardiac Catheterization Laboratory

Dr. Luis Guzman joined the VCU Health team as director of the adult cardiac catheterization laboratory in August 2015. Originally from Argentina, Dr. Guzman trained at the Cleveland Clinic and was director of the cardiac catheterization laboratory at the University of Florida in Jacksonville for 12 years before coming to Richmond. Dr. Guzman began his career in cardiology 25 years ago in the area of interventional cardiology.

At the time, options for cardiac patients were limited to a handful of medications that provided limited results or bypass surgery. Dr. Guzman wanted to develop ways to care for patients with much less invasive alternatives to bypass surgery. He believed the percutaneous approach, which was significantly less invasive, was the way of the future. Percutaneous Coronary Intervention (PCI, formerly known as angioplasty with stent) is a non-surgical procedure that uses a catheter to place a small structure called a stent to open up blood vessels in the heart that have been narrowed by plaque buildup, a condition known as atherosclerosis. Dr. Guzman persisted with this method through different advances in techniques and technologies.

Dr. Guzman was excited to join the VCU Health team because its heart program is well-recognized, and, as a large institution, VCU offers the entire spectrum of care for cardiovascular disease. Dr. Guzman was also drawn by the state-of-the-art technology and new cath labs within the VCU Pauley Heart Center as well as the opportunity to share his experiences and expertise with a large group of fellows. After meeting with Drs. Antonio Abbate, Mike Cowley and George Vetrovec, Dr. Guzman welcomed the opportunity to build up an aggressive interventional group with new doctors and with the possibility to expand in other areas of expertise. He was excited to bring his 20 years of experience with peripheral vascular disease interventions to develop that aspect of the cardiac cath lab. Developing and expanding the areas of high-risk intervention and very complex intervention also appealed to Dr. Guzman.

Within interventional cardiovascular medicine, imaging plays a major role. The VCU Pauley Heart Center is in the process of updating all of the labs with the latest technology. This enables physicians to have the best possible imaging capabilities and incorporates safety features such as a decreased amount of radiation received by the patient as well as the entire healthcare team. Guzman



Dr. Guzman was drawn to the VCU Pauley Heart Center by the state-of-the-art technology and new cath labs which provide an opportunity for him to build up an aggressive interventional group

Coronary artery disease is by far the number one disease treated in the cardiac cath lab. Younger patients and female patients are being treated now more than ever before.

shared that what makes up the “cardiac cath lab” is in fact a comprehensive group of laboratories. The cardiac cath lab includes dedicated rooms for vascular disease intervention and pediatric intervention. Some of these labs are dedicated to coronary procedures, but there is also a hybrid lab within the “cardiac cath lab” where procedures that are more complex are performed. This hybrid lab can be used for immediate surgery if the need arises. However, both emergency and elective surgeries can be done in the hybrid cath lab. The cath lab also has robotic equipment that allows doctors to perform interventions with tremendous precision. The cardiac cath lab is equipped with a wide spectrum of imaging capabilities from a traditional single plane machine for coronary interventions to a biplane machine, which creates two rooms in one, allowing physicians to see the patient in two different projections at one time without moving the patient.

The cardiac cath lab is actively recruiting new faculty. Dr. Guzman is looking to incorporate two new physicians to further develop the high-risk and complex

intervention program and the use of left ventricular support devices. He said, “We would like to incorporate cardiac interventionalists who bring new techniques and technologies and vibrant personalities.” He is also looking for a research-oriented person to develop some areas of clinical investigation in the near future.

As the new director of the cardiac cath lab, Dr. Guzman would like to make the lab as functional and effective as possible. He said:

“We have a great staff and great doctors in place. We need to utilize resources efficiently and fortunately we have a modern cardiac cath lab, which has the latest technology and lets us incorporate new techniques to take care of every type of disease in the cardiovascular system.”

He also spoke about the important role research plays and how he would like to incorporate research within the cath lab more. In addition, he would like to focus on treating critical limb ischemia, a severe obstruction of the arteries that reduces

blood flow to the extremities and has progressed to the point of severe pain and even skin ulcers, sores or gangrene. Dr. Guzman has worked extensively with peripheral vascular disease interventions, which focus on critical ischemia. He has used advanced techniques in below the knee intervention with great success. Dr. Guzman would also like to make high-risk interventions and interventions in chronic

total occlusions a priority in the cardiac cath lab. He has traveled to Japan and Korea to learn more advanced techniques in these areas. He strives to help high-risk patients who would otherwise not have any alternatives. He said the cardiac cath lab at VCU has specific devices that allow physicians to do much higher risk and complex intervention that was not possible in the past.

Dr. Guzman recognizes the importance of a teamwork approach to treating a patient with collaboration from all of the physicians and care providers treating the patient for various issues. He said:

“[Doctors] in the cardiac cath lab don’t just do cardiac procedures or coronary interventions in a vacuum. We work with cardiac surgeons, pediatric cardiologists and vascular surgeons. We interact with diabetic

(Continued on page 3)

doctors and podiatrists to help in the care of patients with advanced ischemic limbs. We interact with echocardiographers, radiologists, anesthesiologists and others to treat patients with complex cardiac and vascular conditions. The cardiac cath lab is a physical place that helps in the global treatment of the patient by having a team approach.”

He said, “I foresee us being the main institution in the area for everything related to high risk and complex cardiovascular interventions as well as the management of structural heart disease. To be the best, we must all understand our unique roles and how we each contribute something to the total picture of patient care.”

Coronary artery disease is by far the number one disease treated in the cardiac cath lab. Younger patients and female patients are being treated now more than ever before. Because of advances in cardiovascular care, people are surviving for

decades with conditions that become more complicated through the years. Because of improved survival rates, the cardiac cath lab sees a significantly high number of very elderly patients with different and more complex coronary problems and other diseases, like peripheral vascular disease and advanced valvular heart disease, which make them challenging to treat. They do not just have one issue they have several complex issues that must all be considered when being treated.

The cardiac cath lab is a wonderful resource for cardiac patients with limited options. However, even though improved technology and technique allow doctors to perform difficult procedures, heart diseases remain high risk to treat or cure. It is important to remember that if a person goes to the cardiac cath lab to have an issue “solved,” it does not mean that they are “cured.” Patients must follow appropriate diet, exercise, medication and lifestyle guidance to prevent the issue from recurring.

IM

4th Annual Practical Frontiers in Primary Care Conference is Well Received

On October 24, 2015, the VCU Department of Internal Medicine and VCU Continuing Medical Education presented the fourth annual Practical Frontiers in Primary Care conference. The conference included a broad range of contemporary clinical topics in primary care with the latest practical information designed to enhance attendees’ practice. The program was designed for physicians, nurse practitioners and other primary care providers.

Held at the Hilton Short Pump, this year’s conference had more than 200 registrants, the largest group to date; attendance has been growing annually since the conference’s first iteration in 2012. Many attendees have returned year after year and now bring friends and colleagues as well. One group shared that its entire practice was closed for the day so that everyone could attend the conference. Attendees of the conference represent a wide range of care providers from traditional physicians who see patients in their offices, to people employed by a health system, people employed by correctional facilities or long term care facilities, and others who work for VCU or other universities. There are a large number of nurse practitioners, physicians’ assistants and other care providers who attend to learn about the general medical topics presented.

The Practical Frontiers in Primary Care conference began from the vision of Dr. John Nestler and Dr. Lisa Ellis who recognized the need to improve the working relationship between VCU and the community. Dr. Ellis explained:

“Most academic centers throughout the country have an internal medicine meeting of some sort. Some do a conference for their own CME education in the department, and some do a meeting to highlight their speakers from internal medicine to provide education for others in the community. We decided to provide education for primary care within this region using the incredible speakers/educators from our academic medical center and this proved to be very successful from the beginning.”



Dr. Lisa Ellis and Dr. Alan Dow are passionate about sharing new findings in primary care medicine with partners in the Richmond community

The goal was to share some of the expertise at VCU Health and help to educate community healthcare practitioners about key topics they encounter as primary care providers. Dr. Ellis said, “This conference is a fantastic one-day primary care event with great speakers available for help with patients and referrals right here in Richmond.” For example, one disease primary care providers see frequently in the Richmond community is Hepatitis C. The treatment for Hepatitis C has changed dramatically over the past two years, and VCU Health has been a leader in conducting research and developing innovative treatments for the disease. The challenge VCU Health practitioners faced was disseminating that information to primary care doctors so they could better understand counseling, referrals and treatments for patients with Hepatitis C. The Practical Frontiers in Primary Care conference became a vehicle to transport this information and reiterate that VCU Health is a tertiary referral center for the central Virginia community.

The planning committee for the conference included Co-Chairs Dr. Alan Dow and Dr. Lisa Ellis, Dr. Melissa Bradner, Dr. Jeffrey Kushinka, Dr. Beth Rubinstein and Program Coordinator Toni Burrell. Toni spearheaded the marketing, collateral materials production and organization for the conference and kept everything running smoothly. The committee worked hard to identify topics and speakers who would provide a high-quality experience to attendees so that every session was useful and there was no part of the conference where people felt they did not learn from a session. Dr. Dow called the faculty presenters the key to the conference’s success. He said:

“We have such wonderful presenters and clinicians from across our divisions and they are able to provide such wonderful, impactful content. Dr. Ellis, Toni Burrell, [the planning committee] and I try to provide them a place to share their insights and passions for their topics

(Continued on page 4)

that really connect with the audience and help them think differently about how to care for their patients.”

The conference began with a welcome and opening remarks from Dr. Dow and was followed by 13 sessions throughout the day. The sessions were: “Update on New Anticoagulants and Stroke Prevention” by Dr. Kenneth Ellenbogen; “Controversies in Mammography and Breast Screening” by Dr. Gilda Cardenosa; “Assessment, Management and Follow of Concussions” by Dr. Michael Pitzer; “Tips for Pharmacological Management of Dementia” by Dr. Peter Boling; “Clinical Pearls for the Electronic Medical Record” by Dr. Susan Wolver; “Lung Cancer Screening: ‘Pros and Cons’” by Dr. Mark Parker; “News You Can Use: ‘Recent Journal Articles That Changed My Practice’” by Dr. Dow; “Do Weight Loss Diets Really Work?” by Dr. Puneet Puri; “Onychomycosis: ‘Nailing the Diagnosis and Management’” by Dr. Julia Nunley; “Hepatitis C” by Dr. Richard Sterling; “Pre-Travel Prep: ‘Tips and Key Updates’” by Dr. Michael Stevens; “More Than Just Tired: ‘The Patient with Chronic Fatigue’” by Dr. Huzaifah Syed; and “What’s New in Hypertension” by Dr. Dominic Sica. Dr. Dow remarked on his reaction after attending all of the sessions. He said:

“As someone who has been here for 15 years, it was really great to sit in the audience and listen to my colleagues, whom I see on a weekly or monthly basis, and hear them speak about their field for 30 or 40 minutes. . . . [We were able to] learn what they are working on and how their field is evolving. We get some of that in grand rounds, but to have a whole day where you are getting to appreciate everyone’s expertise and how medicine is evolving is a different experience. It isn’t just faculty presenting, but also faculty attending, [which] is a real value to people.”

At the conclusion of the conference, attendees left having learned a variety of new

information from how to identify the role of novel oral anticoagulants in stroke prevention, to understanding the pathophysiology of concussions and how to evaluate and treat concussions, to being able to apply new evidence to the treatment of hypertensive patients.

Dr. Dow shared his enthusiasm in being able to work with and learn from Dr. Ellis with regard to envisioning, organizing and bringing a conference to fruition. He said of Dr. Ellis, “[She] knows how to develop an idea and get things done. . . . She has organized national conferences with thousands of attendees. The opportunity to work with her and be mentored by her has been exceptional.”

Dr. Ellis said of working with Dr. Dow:

“Now that the conference is moving forward and successful, we [are following] the ‘see one, do one, teach one’ method. Dr. Dow is a fantastic choice to chair this meeting with his expertise and collaborative nature with multidisciplinary work. He worked with me to learn the ropes of chairing this conference and will then work towards mentoring our next chair so we keep the ideas fresh and inspiring each year.”

An additional benefit of the Practical Frontiers in Primary Care conference was that physicians, nurses and nurse practitioners were able to receive up to 7.75 AMA PRA Category 1 Credits for attending. The conference also met criteria for attendees to receive continuing education credit. The planning process for next fall will officially start in early spring of 2016, although many attendees have already expressed interest in signing up to attend again. If you would like information about attending or presenting at the 2016 Practical Frontiers in Primary Care conference please contact Toni Burrell, the conference’s program coordinator, at 628-9666 or toni.burrell@vcuhealth.org. **IM**

Division of General Internal Medicine Holds First Scholarship Symposium

Over the past academic year, the Division of General Internal Medicine (DGIM) faculty and nurse practitioners have produced an impressive array of scholarship, research, innovations and projects. In order to showcase these efforts and provide a venue for mutual learning and networking with potential collaborators, the division created the first DGIM Scholarship Symposium, with the intent to continue with the symposium on an annual basis.

The first DGIM Scholarship Symposium was held October 29, 2015, in the lobby and gallery of the James W. and Frances G. McGlothlin Medical Education Center. The symposium demonstrated individual and collaborative efforts put forth by members of the DGIM, other divisions across the Department of Internal Medicine and residents and faculty within the School of Medicine’s Office of Educational Affairs. Dr. John Nestler, Chair of the Department of Internal Medicine (DOIM), delivered opening remarks commending faculty for its achievements and increased scholarship over the past year. Dr. Stephen Bishop, who has launched a CME podcast series covering faculty and general internal medicine topics, live-podcasts from the event. Attendees were able to listen to an archive of podcasts by linking into www.rampages.us/dgimpodcast from an onsite display center.

Dr. Bishop, the associate clerkship director for the DOIM and clinical educator for the DGIM, said of the symposium, “The DGIM scholarship symposium was a great opportunity for our division to showcase all of the amazing contributions our faculty makes across the health system. From education to administration to clinical care, DGIM members really form a core group of faculty for the institution, and it was a humbling experience to see all the great work my colleagues are doing.”

The symposium featured academic endeavors that had been previously presented at premier national academic, policy and research meetings,

including those held by the Society for General Internal Medicine (SGIM), the Society of Hospital Medicine (SHM) and AcademyHealth. SGIM, SHM and AcademyHealth together reach tens of thousands of physicians and researchers from medical schools, private health systems and major universities within the United States. The DGIM’s faculty and staff conferred 38 presentations in total reaching that wide audience.



(Continued on page 5)

At the symposium, DGIM faculty members with a range of interests and specializations presented their posters featuring scientific abstracts, educational and faculty innovations and clinical vignettes. Two video display stations digitally featured workshop presentations and publications, and a third screen digitally displayed the DGIM video, available for viewing on YouTube at <https://youtu.be/FUK-eNmlP0k>. Some of the topics presenters featured focused on education of residents and students, clinical cases and quality and systems improvement. Some featured scholarly products included:

- *It's Not a Tumor, Redux. An Unexpected Cause of Mesenteric Mass: AL Amyloidosis*
- *You Can't Improve What You Don't Measure: A Systems Engineering Approach to Developing Geographically-Matched Patient Provider Teams*
- *Getting to Know Your Patients: Strategies for Teaching Social and Community Medicine*
- *Design and Implementation of a Transition-to-Practice Hospitalist Rotation*
- *The Death of a Patient: The Intern Experience*
- *Guideline Driven Computerized Order Set to Improve Restraint Ordering and Decrease Length of Use*

The symposium was open to all DGIM faculty and staff, associated divisions within VCU Health, as well as residents and medical students considering a career in general internal medicine. Because of its open-air location, the symposium attracted a diverse cross-section of people from the greater VCU Health community. The symposium was an excellent opportunity for the VCU Health community to learn more about the DGIM, whether attendees were at the start of their medical career or seasoned health care providers.

Dr. Shin-Ping Tu, chair of the DGIM, said of the inaugural symposium:

“In addition to providing the highest quality of care as medical quarterbacks for VCU Health patients, Division of General Internal Medicine faculty is engaged in a variety of academic and innovative endeavors. The Scholarship Symposium provided an opportunity to highlight our faculty’s clinical expertise in addition to the breadth of our teaching and research scholarship. It was remarkable to see all the presentations faculty had delivered at regional and national conferences this past year! Checking out the GenMed podcasts was a lot of fun, too! In fact, I find myself looking forward to new episodes so I can learn about exciting general medicine issues our faculty and national experts are addressing.”

The Division of General Internal Medicine is already in the planning stages for another DGIM Scholarship Symposium to be held next fall **IM**

VCU Division of Endocrinology and Metabolism Raises Funds to End Diabetes

Nearly 50 members of the VCU Division of Endocrinology and Metabolism’s team once again participated in the America Diabetes Association’s (ADA) annual *Step Out: Walk to STOP Diabetes* on Saturday, October 17. This year Amber Spain, a clinical social worker and diabetes educator for the VCU Health Diabetes Education Program, served as the walk’s chair. VCU Health was a bronze sponsor of the event. Over 1,000 people participated in the 5K walk held at the Bon Secours Washington Redskins Training Center. The VCU Division of Endocrinology and Metabolism’s team raised nearly \$3,600 and the event overall raised more than \$220,000 to support research for a cure, advocacy on behalf of people with diabetes, and education for everyone in the greater Richmond area. Walks like these are the American Diabetes Association’s biggest fundraisers. Dr. Francesco S. Celi, chair of the Division of Endocrinology and Metabolism said, “Participating in the ADA community initiatives is a wonderful opportunity to mobilize our Division and to engage outside the walls of our Institution with people whose lives are touched by diabetes.” For more information on participating in events supporting the ADA including walks and Tour de Cure bike rides please contact Amber Spain at amber.spain@vcuhealth.org.



Jason O. Blake has joined the Department of Internal Medicine as webmaster and web content manager. In this role he will be responsible for designing, developing, and updating the Department of Internal Medicine’s website. Please contact him with information that you would like to have updated on the website at jason.blake@vcuhealth.org or 804-828-6065.

Jason has long been a part of the VCU community having worked in the Department of Mathematics as an adjunct instructor and webmaster for the department’s Community Outreach and Grants Office for 10 years. Jason has also spent many years teaching at Clover Hill High School in Chesterfield, VA.

We are excited to welcome him to the Department of Internal Medicine.

Jerry Riggins Goes the Distance for the DOIM

Jerry Riggins has worked for VCU Health since 1992 when he graduated from VCU with a degree in accounting. His first position was with the Department of Anatomy, and he later joined the Division of Hematology, Oncology & Palliative Care as a fiscal technician and grants specialist in 1994. Currently, Jerry is the administrator for the Division of Hematology, Oncology & Palliative Care. He has also been acting as the interim administrator for the Division of General Internal Medicine since this past June. In this dual role, Jerry reports to Dr. Steven Grossman, chair of the Division of Hematology, Oncology & Palliative Care, and Al Dunn, administrator for the Department of Internal Medicine.

In his primary role, Jerry works closely with Dr. Grossman. He provides strategic planning support, clinical and research operations support, accounting and finance services, and human resources support. He gathers information, analyzes data, writes business proposals and ensures that the division meets its full potential in advancing research, teaching and clinical missions. For the Division of General Internal Medicine, Jerry provides similar support for Dr. Shin-Ping Tu.

Jerry was initially drawn to the VCU Department of Internal Medicine because of the opportunity to gain exposure to clinical service. During his 23 years in the Division of Hematology, Oncology & Palliative Care, Jerry has worked with numerous distinguished physicians. He recalls learning something unique from many of them. In particular, Jerry observed how to be a good citizen of the university, health system and community from his interactions with Dr. Tom Smith during Dr. Smith's decade-long tenure as chair of the division. Jerry said of Dr. Smith:

"He is friendly, approachable and a good listener. ... Tom demonstrates daily how a small gesture can make a big impact in people's lives and how you can accomplish a lot through hard, efficient work with a mindset of serving others. After he transitioned from chair to faculty, we started training for marathons together. Tom is now the Director of Palliative Care at Johns Hopkins, but we stay in touch."

Jerry also shared that he enjoys working with Dr. Steven Grant. He said, "I remember my first meeting with Dr. Grant when I was in my early twenties. I related to his thought processes and his strategies for project and program planning. ... I got an early chance to use my accounting background and IT skills ... to help him identify funds and develop a plan to expand staffing. [Observing his writing] has helped me develop my own writing style."

Jerry also said he enjoyed his time working with Dr. Grossman. He said, "His first five years have flown by quickly, and the division has almost doubled the number



Jerry Riggins has seen many changes on the MCV Campus during his tenure with the Department of Internal Medicine

of its faculty since [Dr. Grossman] started as the division chair. Although I have not worked with Dr. Grossman as long as some of our other faculty, I am learning a lot from him. I enjoy working and brainstorming with the next generation of thought leaders who bring different backgrounds, experiences and ideas to VCU."

Al Dunn said of working with Jerry, "[He] is a long-term dedicated employee and a great asset to the department and to me personally." He continued, "... I no longer consider myself new, but in the beginning Jerry was always there to answer my many questions. Jerry has always done a great job in managing hematology, oncology and palliative care, but recently he has willingly taken on the added responsibilities of managing general internal medicine during our transition to a new division administrator. [This] has been very helpful to department operations."

Over the course of more than two decades, Jerry has witnessed many changes on the MCV Campus. He shared that there have been notable, positive changes in the cultural diversity of the workforce, the increasing ratio of women to men completing medical school and VCU's footprint in the city and throughout Virginia. He believes Dr. John Nestler and Dr. Gordon Ginder have significantly shaped VCU's growth and development through their support and leadership.

Originally from Richmond, Jerry enjoys staying active and is an avid runner. When he turned 30, he began running by himself around the MCV Campus. Dr. Smith saw him running and encouraged him to do a 5K, 10K, half-marathon, marathon and, eventually, an ultramarathon. Now, Jerry leads several small running groups, and he would like to start a running group for cancer patients and cancer survivors.

Jerry enjoys meeting new people, socializing with friends and learning new skills like how to play guitar or speak foreign languages. He stays active by running, hiking, biking, playing a variety of sports and volunteering at his church. He hopes others will view him as a good example of how to exercise, reduce stress and serve others.

One of the most important people in Jerry's life is his significant other, Chum. The two enjoy competing against and working with each other, whether playing badminton, tennis, or golf, learning to play the guitar or speaking Vietnamese. Jerry recently achieved a personal goal and reached a new milestone in his life with Chum when he proposed!

Be sure to ask Jerry about the proposal the next time you see him! **IM**

Welcome to Our Faculty

Charmaine Elliott, M.D. will join the Division of General Internal Medicine this January as an assistant professor and general internist. Dr. Elliott comes to the DOIM from the Montefiore Medical Group, Albert Einstein College of Medicine where she was an attending physician and associate professor.

Buttermilk Trail Loop Outing Promotes Wellness for Faculty and Residents

This past summer, when Dr. Rebecca Miller began her year as chief medical resident of the Department of Internal Medicine's residency program, she shared with Department Chair, Dr. John Nestler, that she planned to start a wellness committee for the residents and was planning a variety of educational and social activities with a wellness theme.

Knowing that Dr. Nestler and his wife, Michelle, enjoy walking the 7-mile Buttermilk Trail Loop on a regular basis, Dr. Miller invited him to lead a walk for all residents and faculty. The Buttermilk Trail is one of the oldest sections of the James River Park System trail and runs along the contours of the hill below Riverside Drive from just west of the 22nd Street tower at Belle Isle to the Boulevard Bridge on the south bank of the James River.

A group of about 15 that included a mix of residents, faculty, family members and three dogs set out on Saturday,

October 31, from Belle Isle. The party continued along the south bank of the James River until it came to the Nickel Bridge, crossed to the north bank and continued back to its starting point. On the north bank, the group walked on the outskirts of Maymont Park and spotted one of the notoriously people-shy bears. Dr. Nestler led the walk and told everyone about the history of the trail along the way.

It was a beautiful morning and a refreshing outing; many residents had just finished working on busy inpatient services the day before and felt that this was a terrific way to unwind. Because of the overwhelmingly positive response to the first Buttermilk Trail walk, Dr. Miller is hoping to offer another similar walk in the spring of 2016.



The group led by Dr. Nestler, including residents, faculty, family members and three dogs, enjoyed a 7-mile walk on a beautiful October morning

Update from the Associate Chair for Research

Securing funding for research continues to be a challenge nationwide but recent legislative actions at the U.S. Capitol include \$2 billion (Senate Appropriation Committee) or \$1.1 billion (House Appropriation Committee) increases in the NIH budget. NHLBI Director Gary Gibbons has announced an increase in pay line for RO1 to 12% with the Early Stage Investigator (ESI) pay line at 21%. This is a great opportunity for the DOIM junior faculty. Early stage investigators with promising research projects are also encouraged to apply for seed money through the DOIM academic incentive funds to obtain the required preliminary data to be competitive for subsequent R- or K-awards. I am available to provide guidance to whomever is interested.

Submission of all grants has completely transitioned to VCU RAMS-SPOT and I am working with the DOIM's associate administrator for research administration, Rashmi Pershad, to develop simple systematic guidelines to simplify the navigation process. I would appreciate any feedback from the faculty so that we have a better understanding of the issues that need to be addressed.

The second issue of the DOIM Research Newsletter is in the works and to align it better with fiscal reporting at VCU, it will now include information spanning the Fiscal Year 2015-2016, rather than calendar year 2015. I urge all faculty members to work with their division chairs and administrators to ensure the inclusion of all achievements in this next issue. To highlight the research achievements of the

DOIM's faculty and fellows, I am also working towards a new initiative, namely a DOIM Research Day.

Bringing together investigators from different research areas and increasing the exposure of new and junior faculty to ongoing research in the DOIM and VCU has been the focus of the Bi-annual DOIM Research Forums. The last research forum, held on October 8, focused on the research continuum from "Bench to Bedside" with emphasis on challenges and strategies to work around such challenges. This theme will be continued in the next research forum planned for Spring 2016.

As always, I welcome any suggestions or ideas from all faculty members to facilitate the research efforts and research education in the DOIM.

Shobha Ghosh, Ph.D., FAHA
Associate Chair for Research
Professor of Medicine and Physiology
Department of Internal Medicine



Shobha Ghosh, Ph.D.
Associate Chair for
Research

Faculty Excellence Awards Program Honors DOIM Faculty

The 17th Annual Faculty Excellence Awards Program was held on Wednesday, October 21. The Department of Internal Medicine would like to congratulate the following faculty members who received awards:

Leonard Tow Humanism in Medicine Award

Dr. Mary Helen Hackney

Educational Innovation Research Award

Dr. Peter Boling and Dr. Alan Dow

Enrique Gerszten, M.D. Faculty Teaching Excellence Award

Dr. Diane Biskobing

Women in Science, Dentistry, and Medicine Professional Achievement "WISDM" Award

Dr. Elizabeth "Betsy" Ripley

Best Teacher in the Course and Clerkship Awards:

Dr. J. Christian Barrett	Dr. Scott Matherly
Dr. Diane Biskobing	Dr. Beth Rubinstein
Dr. Dan Carl	Dr. Kevin Sumption
Dr. Susan DiGiovanni	Dr. Huzaefah Syed
Dr. Megan Madaras	Dr. Marjolein de Wit

TIME Faculty Fellows

Dr. Stephanie Call	Dr. Bennett Lee
Dr. Susan DiGiovanni	Dr. Marjolein de Wit
Dr. Frank Fulco	



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Thank you for reading.

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