Division of General Internal Medicine

State of the Division
September 2014

Wishwa N. Kapoor, MD, MPH
Chief, Division of General Internal Medicine
Overview

• A busy year; very active in innovations, education and research—a lot has happened
• A difficult year; I promised to do 3 things: preserve jobs, maintain compensation, advance careers
  – We have accomplished all three

The Division is outstanding in everything it does—there is no other Division like it in the country!!!
Highlights

• Clinical
  – Innovations: Population management implemented
  – Enhanced Care Program developed
  – Shared shavings plan implemented and a success
  – Shadyside section integrated with GIM

• Education
  – Outstanding residency recruitment year
  – Chancellor's Affirmative Action Award: CEED
  – New CER/PCOR programs: ENACT, Methodology, PCOR K12

• Research
  – New centers and programs
  – Faculty Recruitment
  – New grants funded: CDRN, K12, ENACT, R01’s, R21’s, others
Division Leadership

- Wishwa N. Kapoor, MD  Chief, Division of General Internal Medicine
  Director, Center for Research on Health Care
  Director, Institute for Clinical Research Education

- Melissa McNeil, MD  Associate Division Chief, General Internal Medicine
  Director, Section of Women’s Health

- Michael Elnicki, MD  Director, Section of GIM, UPMC Shadyside

- Robert Arnold, MD  Director, Section of Palliative Care and Medical Ethics

- Franziska Jovin, MD  Director, Section of Hospital Medicine

- Shanta Zimmer, MD  Director, Internal Medicine Residency Training

- Kevin Kraemer, MD  Director, GIM Fellowship

- Gary Fischer, MD  Medical Director, GIM Practice–Oakland, Vice Chair, Quality

- Alda Maria Gonzaga, MD  Director, Med-Peds Residency Training

- Thomas Painter, MD  Director, Medical Student Clerkships

- Thuy Bui, MD  Medical Director, Health Care to the Underserved Population

- Michael Fine, MD  Director, VA Center for Health Equity Research and Promotion

- Doris Rubio, PhD  Director, CRHC Data Center; Co-Director, ICRE

- Joanne Riley, RN, MPM  Senior Division Administrator

- Deborah Simak, RN, Mned  Director, Quality Improvement

- Lynn Rago  Administrator, CRHC

- Patrick Reitz  Administrator, ICRE
Center for Medical Education Research

• Director: Michael Elnicki

• Goals and Strategic Vision
  – Stimulate Scholarship in Medical Education
  – Provide mentoring
  – Create educational research infrastructure

• Support Educational Programs within ICRE
  – Develop a medical education program using online and distance learning technology
Director, Section of Decision Sciences

- Amber Barnato, Director
- Ken Smith, Co-Director
- Joyce Chang and Janel Hanmer lead methods innovation
- SDS plans to grow and strengthen city-wide collaborations

**Descriptive decision science** (what people do)
- Patient and provider decision making

**Normative decision science** (what people should do)
- Cost-effectiveness analysis

**Decision science methods**
- Causal inference
- HrQOL and utility assessment
• Officially launched September, 2014 jointly with GSPH Health Policy Institute (crmth.pitt.edu)

• Mission: investigate associations between media, technology, and health outcomes and to develop, implement, and evaluate related interventions

• Featured on Essential Pittsburgh (WESA) September 15, 2014

• Director: Brian Primack gave TEDMED talk September 11, 2014 as part of center launch

• Will be recruiting 2 junior faculty members
• With their combination of boldness, insight, and bright lights, TED talks have long set the stage as the perfect outlet for speakers and performers to deliver memorable and meaningful messages. As an offshoot of this popular conference series, TEDMED convenes thinkers and doers who are at the forefront of medical and health innovation. Among the diverse collection of speakers at TEDMED 2014 are two Pitt faculty members whose talks can be viewed via select livestream showings. Dr. Eleanor Bimla Schwarz will speak as part of the “Turn It Upside Down” session scheduled for 9 a.m. EST on Wednesday, September 10, and Dr. Brian Primack will present as part of the “Stealing Smart” session scheduled for 8:30 a.m. EST on Thursday, September 11.

• **Eleanor Bimla Schwarz**, MD, associate professor of medicine, of epidemiology, and of obstetrics, gynecology, and reproductive sciences, has long been committed to women’s health and well-being. Her research has focused on women’s reproductive health and access to contraception and preconception counseling, with a concentration on women internationally. She currently serves as senior medical expert in reproductive health for the U.S. Department of Veterans Affairs, as associate editor of Journal Watch Women’s Health, and as a member of the FDA’s Advisory Committee for Reproductive Health Drugs. At TEDMED 2014, Dr. Schwarz will present on a natural, universally available, and free preventative for heart disease and other maladies that’s been surprisingly overlooked by Western medicine.

• **Brian Primack**, MD, PhD, assistant vice chancellor for health and society, health sciences, and associate professor of medicine, of pediatrics, and of clinical and translational science, has explored how mass media and technology impact behavior and health, including both positive and negative effects. He has also examined how media literacy education can improve adolescent lifestyle behaviors and how it, and other influences, can reduce practices such as tobacco use, alcohol abuse, and risky sexual activity, among other behaviors. His research also looks at the growing popularity of water-pipe, or “hookah,” tobacco smoking. At TEDMED 2014, Dr. Primack will present on the existing and potential future relationships between popular media products and human behavior and their effect on health.

• For more information on TEDMED 2014, visit the [website](#).
• Co-Directors: Walid Gellad (DGIM) and Julie Donohue (GSPH)

• Goals: To improve the quality, safety, and efficiency of medication use and increase the University’s visibility in the area of pharmaceutical policy.

• Accomplishments (Year 1):
  – CP3 Post-Doctoral Fellow Jenny Lo-Ciganic, PhD to join University of Arizona School of Pharmacy as Tenure-Track Faculty
  – Two high-profile events: William Shrank from CMMI (Oct 2013) and Wendy Nilsen from NIH (April 2014)
  – Catalyst for funding, including from CDC/NIDA
  – Website development: www.cp3.pitt.edu
Center for Women’s Health Research and Innovation (CWHRI)

- Mission: to advance women’s health services research and mentorship

- Current activities:
  - Director: Sonya Borrero, MD, MS
  - Currently comprises 14 faculty and 6 fellows/post-docs across numerous department and schools including nursing, public health, psychiatry, ob/gyne, and pediatrics
  - Monthly research-in-progress sessions
  - Biannual presentations at the CRHC/RAND/VA seminars and the Monday women’s health seminars
Clinical Programs

- Hospital Medicine
- Ambulatory Care
- Innovations
- Shared Savings
- Quality
Hospitalist service

• Full or part time hospitalists: 34 (29.4 FTEs)
  – 4.5 FTEs are academic hospitalists
  – 10.38 FTEs Nocturnists (PUH and PCI)
  – 14.5 FTEs Daylight Hospitalists
  – Almost all of the hospitalists are involved in teaching

• Teaching services
  – Junior Hospitalist Rotation (12 months)
  – Traditional Teaching (31 months)
  – Consult service (12 months)
  – Dedicated Night Teaching Attending (12 months)
  – Procedure Service 24/7 coverage
We love our hospitalists
Inpatient Admissions

<table>
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<tr>
<th>Year</th>
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<tr>
<td>2014</td>
<td>7001</td>
<td>923</td>
</tr>
</tbody>
</table>
Hospitalist Service – New Programs

- Post discharge follow up program
- Care coordination model: Franziska Jovin, Kristian Feterik
- Observation unit - 7G Melissa Wotring
- GIANT Service: Mahesh Gajendran, Chandra Umapathy, Kishore Vipperla
- OMT Ortho-Medicine Co-management Service
- Resident Lead Program: Franziska Jovin, William Levin
Hospitalist Service – Academic achievements

Scholarly Activities

Publications:
• 12 publications by the members of the group
• 2 National Meeting participations

Additional Degrees:
• Kristian Feterik – MBA, Amherst University
• Mahesh Gajendran – MPH, University of Pittsburgh
• Anwar Dudekula- Masters in Clinical Research, University of Pittsburgh
Hospitalist Service – Hospital Committees

• **Kristian Feterik**
  eRecord
  Medical Records Committee

• **Franziska Jovin**
  Medical Executive Committee (President, Medical Staff)
  Risk Management Committee

• **William Levin**
  Patient safety collaborative

• **Wesley Thacker**
  Hospital Ethics Committee,
  Anticoagulation Task Force
Patient Experiences Program

- Multidisciplinary: faculty, residents, nursing, hospital leadership, patient relations rep

- Program Highlights:
  - “Sacred 60” unit director rounds to include new question:
    - “Is there anything that could have been done differently?”
  - *Patients First* standing column in housestaff newsletter
    - Informs housestaff about various initiatives and provides tips on how to improve patient experiences
    - Recognizes housestaff and others who have gone “above and beyond” for patients
  - **End of the Day Check-In**
    - Team-led rounds at the end of the day focuses on patients’ satisfaction with care received and understanding of care plan
  - **Team Photo Cards**
    - Patient knows who their primary doctors are at every level of the team
Patients First

The Patients First Initiative is an exciting new project in which many of our internal medicine faculty and residents are becoming actively involved in helping to improve the patient experience. Dr. Spagnoli is the chair of the Patient Experience committee for the IM division whose members also include Dr. McNeil, Dr. Zimmar, Dr. Feterik, Dr. Buranosky, Dr. Bulova, Dr. Jovin, Laura Rack (director of nursing) and Mark Bodrog (Gen Med’s own patient relations liaison). TJ Valk (PGY3) and Dane Lundgren (PGY3) are the resident members of the committee which meets twice monthly. Many other residents are also doing their part in enhancing the patient experience. Check out the pop-ups below to see what they’re up to!

Above and Beyond

John Evankovich (ex-PGY3, now pulmonary fellow) was recognized by a member of the IV team for his great work in caring for a patient. The writer notes that a new patient came from an outside hospital and needed a PICC line but was frightened and unwilling to have it done. John took the extra time to research back through psych notes to discover that the only thing that calmed the patient down was a headset with Beatles music. So he got the music and headset and gave it to the patient which allowed the procedure to be done. “It’s this type of ‘above and beyond’ caring for patients and people that really make a difference.”

Meet

Mark Bodrog

Mark is Gen Med’s very own patient care liaison at Montefiore. His role is to facilitate communication between patients, staff, and each department.

Important Dates

0/24: Block 1 start, Interns
7/1: Block 1 start, Residents
7/4: HOLIDAY-4th of July!
7/11: MHH Housestaff Lunch
7/13: SHV Housestaff Lunch
7/28: Block 2 start, Residents
7/29: Block 2 start, Interns
8/1: 20 GME Orientation Module due for new PGY1’s
8/15 MHH Housestaff Lunch
8/19: SHV Housestaff Lunch
8/25: Block 3 start, Residents
8/20: Block 3 start, Interns
8/1: HOLIDAY- Labor Day

Birthdays

6/5: Gaurav Shukla (PGY2)
6/9-Becky Lantz (PGY2)
6/9-Christina Glauber (PGY3)
6/15-Kathan Mehta (PGY2)
6/22-Molly Fisher (PGY2)
6/22-Daniela Hurtado (PGY2)
6/23-Hira Ali (PGY2)
6/27-Jill Allenbaugh (PGY2)
7/2-Benjamin Sprague (PGY2)
7/3-Eluwha Ufuma (PGY3)
7/5-Aditi Nayak (PGY2)
7/16-Stephanie Barnett (PGY2)
7/16- Leigh Klaus (PGY2)
8/2-De Jin (PGY3)
8/4-Rachel Vanderberg (PGY3)
8/5-Todd Balochua (PGY2)
8/5-Andrae Lavin (PGY2)
8/11-Jonathan Lee (CMR)
8/13-Tim Anderson (PGY2)
8/14-Vikram Balakumar (PGY2)
8/14- Sheel Patel (PGY3)
8/15-Natesha Palkhi (CMR)
8/20-Chadwick Richard (PGY2)
9/4 Daniel Nguyen (PGY2)
9/18-Anita Lyon (PGY2)
9/19-Nicholas Duce (PGY2)
9/23-Elena Jimenez-Gutierrez (PGY2)

***This list includes the PGY2’s and PGY3’s; if you are not on the list (including the new interns) and don’t mind your birthday being published, please let the editors know!***
Your Medicine Team

**Attending Physicians:**

Dr. Harish Jasti

Dr. Jodie Bryk

**Resident:**

Dr. Laura Quilter

**Intern:**

Dr. Gaurav Shukla

Dr. Neal Spada

**Acting Intern:**

Christian Agudelo

Medical Student(s): __________________________
Ambulatory Care Visits

![Ambulatory Care Visits chart showing total ambulatory visits from 2008 to 2014, with categories including UPMC Montefiore, UPMC Shadyside, Turtle Creek PC (Med-Peds), Palliative Care, Other, and Total Ambulatory Visits.](chart.png)
Stability in Visits, Panel Size, HT messages, New Patients

- MD Visits
- HT Messages
- Panel

New Patients Per Quarter
Access To Care - Oakland

• MyUPMC
  – 10,619 with active accounts
  – 24,789 distinct message threads
  – 36,973 individual messages
  – 6,399 patients sending at least one message
  – Most messages are Requests for Medical Advice
Access to Care -- Shea

- My UPMC
  - 1,619 patients with active accounts
  - 2,549 message threads
  - 3,423 individual messages
  - 833 patients with at least one message
  - Sharp increase in MyUPMC messaging at end of FY 14
Challenging Environment

- Meaningful Use
- Beer’s List
- CHCAPS
- Press-Ganey
- HEDIS
- Value-Based Purchasing
- HCC/Notable Codes
Innovations for FY 14

• Firm Patient Conference Huddles
• Increased Nursing support for MD in Firms
• Diabetes QI Program
• Enhanced Care Program
• Clinical Psychologist
  – Dr. Lisa Galie Healy
• Shared Savings Program
• Telederm (will implement at SHEA)
• Shea – Submitting for Medical Home Certification

On Going Initiatives

• Care Team
  – Pharmacist MUH & SHEA
  – Diabetes Educator MUH & SHEA
  – Health Educator (now full time)
  – Social Worker MUH & SHEA
  – UPMC Practice Based Case Manager 1.5 MUH .5 SHEA

• Hypertension Program
• Quality focus MUH & SHEA
  – Prevention
  – Chronic Disease Management
  – Implementation of Firms at SHEA

Our Response – Continue to Support High Quality, High Value Care
Innovations: New Firm Structure/Care Management Huddles

- 4 Firms – 2 nurses, 1 secretary, 1 Float secretary
- More nurse support for patient outreach, follow-up from office visits, pre-visit planning
- Effort to close care gaps on every phone call
- Monthly firm huddle with UPMC PBCM, pharmacist, social work to discuss difficult patient situations
• Pre-Visit Planning For Patients A1c >9
  – Reminder of visit
  – Encouraged to test prior to visit and bring in
  – Discuss gaps in care
  – Advice and counselling on self-management
• Meter Download Process Beginning Now
• Plans for Resident QI Project to (MUH and SHEA)
  – Improve eye exams
  – Improve foot exams
Enhanced Care Program – Dr. Jodi Bryk

- Patterned after “Ambulatory ICU” model
- Patient with Cave Score =>3, multiple ED or hospital visits, multiple specialists, chaotic care
- Team
  - MD (Drs. Jodi Bryk, Thuy Bui, Anna Marie Lewarchik)
  - Psychologist (Dr. Lisa Galie Healey)
  - Psychiatrist – Mark Miller
  - Care Manager – Jackie Cunnard, RN
  - Medical Assistant /SW
  - UPMC-HP community Based Mobile Teams
- Evaluation – Swati Schroff; Pamela Peele, Wishwa Kapoor
- Enrollment started July, 2014
- Patients enrolled: 45
• If Medical Expense Ratio (MER) < 0.91, percentage of net gain goes to UPP-GIM

• Percentage depends on MER.
  – MER 86-91% -- 40% to GIM
  – MER 85-85.99% -- 50% to GIM
  – MER < 85% -- 60% to GIM

• Must have 4 STARS on HEDIS measures or more

• Medicare, Medicaid, and Commercial assessed separately

• Acuity adjustments (HCC) (Increase Revenue)
Processes In Place for Shared Savings

• Decrease ED visits
  – Changes in nurse triage practices
  – Focus on same day visits
  – “Call Us First” Campaign

• Outreach to high cost, high risk patients
  – UPMC HP Practice based care manager
  – Informal huddles with care team
  – Coordination of care

• Decrease redundant/unnecessary specialty consultation

• Improved HCC coding
  – HCC Sheets from PSD
  – Educational presentations at faculty meetings
  – Reports from PSD

• Outreach to close HEDIS gaps
## Shared Savings Results Oakland/Shea (July – Dec 2013)

### Final Distribution 2013 (6 mos)

<table>
<thead>
<tr>
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<th>2013 July-Dec</th>
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<tbody>
<tr>
<td>Medicare</td>
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<tr>
<td>Medicaid</td>
<td>$457,876</td>
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<tr>
<td>Total</td>
<td>$564,087</td>
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### UPMC for You

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<tr>
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<th>2013 July-Dec</th>
<th>2012 July-Dec*</th>
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<tbody>
<tr>
<td>100% Gain</td>
<td>$763,127</td>
<td>$147,542</td>
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<td>Shared Savings %</td>
<td>60%</td>
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<tr>
<td>GIMO Portion</td>
<td>$457,876</td>
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### UPMC for Life

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<tr>
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<th>2013 July-Dec</th>
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<tr>
<td>100% Gain</td>
<td>$265,528</td>
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<td>Shared Savings %</td>
<td>40%</td>
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<tr>
<td>GIMO Portion</td>
<td>$106,211</td>
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### Commercial Fully Insured

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<th>2013 July-Dec</th>
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<tbody>
<tr>
<td>Loss</td>
<td>-$7755</td>
<td>-$337,548</td>
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</table>
Overall STAR Rating 4.8 (out of 5)
UPMC-HP Medicare Population

- Osteoporosis Mgmt
- DM: ACE/ARB
- Breast Cancer Screening
- CVD: Lipid Screening
- DM Med Adherence
- HTN Med Adherence
- Lipid Med Adherence
- High Risk Meds
- Rheum Arthritis Mgmt
- DM: Kidney Monitoring
- DM: Eye Exam
- Glaucoma Testing
- DM: Lipid Screening
- CVD: Lipid Screening
- Colon Cancer Screening
- DM: ACE/ARB
- Osteoporosis Mgmt
GIMO Recognition

• GIM excels in CMS STAR ratings:
  – Score 4 or 5, in 13 out of 14 Criteria
  – Overall score of 4.8 out of 5 maximum

• Recognitions:
  – GIMO sustains recognition as Level 3 PCMH
  – 13 MDs maintain national recognition for excellence in diabetes care
GIMO Compliance with Diabetes Standards
Faculty

GIM Oakland Faculty  DM Pts w/ Office Visits

<table>
<thead>
<tr>
<th>ADA Standards</th>
<th>Ending Sept' 13</th>
<th>Ending Dec' 13</th>
<th>Ending Mar' 14</th>
<th>Ending Jun' 14</th>
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<tbody>
<tr>
<td>A1C</td>
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<td>96</td>
<td>98</td>
<td>98</td>
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<tr>
<td>LDL</td>
<td>92</td>
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<tr>
<td>Nephropathy</td>
<td>93</td>
<td>93</td>
<td>92</td>
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<tr>
<td>Eye Exam</td>
<td>71</td>
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<tr>
<td>Foot Exam</td>
<td>81</td>
<td>81</td>
<td>84</td>
<td>83</td>
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<tr>
<td>BP&lt;140/90</td>
<td>76</td>
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<td>75</td>
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GIMO Compliance with Diabetes Standards Residents

GIM Oakland Resident DM Pts w/ Office Visits

- Ending Sept' 13
- Ending Dec' 13
- Ending Mar' 14
- Ending Jun' 14

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<th>ADA Standards</th>
<th>Ending Sept' 13</th>
<th>Ending Dec' 13</th>
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<td>LDL</td>
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<td>Nephropathy</td>
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<td>BP&lt;140/90</td>
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Division of General Internal Medicine
CRHC, ICRE, CHERP, VAPHC

UPMC LIFE CHANGING MEDICINE
GIMO Compliance with Diabetes Standards: A1C <8

Comparison of Faculty and Resident Patient A1c<8

- Ending Sept’ 13
- Ending Dec’ 13
- Ending Mar’ 14
- Ending Jun’ 14

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<thead>
<tr>
<th></th>
<th>Faculty</th>
<th>Residents</th>
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<td>Ending Mar’ 14</td>
<td>72</td>
<td>60</td>
</tr>
<tr>
<td>Ending Jun’ 14</td>
<td>72</td>
<td>58</td>
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Percentage
GIMO: Prevention Faculty

Percentage of Applicable Faculty Patients for Whom Service Complete (Documented)

**Prevention Standards**
- **Flu 50-64**
- **Flu 65+**
- **Pnu**
- **Mammo**
- **Pap**
- **Cholesterol**
- **Colorectal**

**Ending Sept ’13**
- Flu 50-64: 49%
- Flu 65+: 56%
- Pnu: 58%
- Mammo: 79%
- Pap: 83%
- Cholesterol: 96%
- Colorectal: 80%

**Ending Dec ’13**
- Flu 50-64: 63%
- Flu 65+: 66%
- Pnu: 74%
- Mammo: 81%
- Pap: 84%
- Cholesterol: 97%
- Colorectal: 80%

**Ending Mar ’14**
- Flu 50-64: 82%
- Flu 65+: 82%
- Pnu: 92%
- Mammo: 81%
- Pap: 83%
- Cholesterol: 97%
- Colorectal: 80%

**Ending Jun ’14**
- Flu 50-64: 92%
- Flu 65+: 92%
- Pnu: 92%
- Mammo: 80%
- Pap: 82%
- Cholesterol: 97%
- Colorectal: 80%
GIMO: Prevention Residents

Percentage of Applicable Resident Patients for Whom Service Complete (Documented)

- **Flu 50-64**
  - Ending Sept' 13: 39%
  - Ending Dec' 13: 46%
  - Ending Mar' 14: 64%
  - Ending Jun' 14: 67%

- **Flu 65+**
  - Ending Sept' 13: 46%
  - Ending Dec' 13: 46%
  - Ending Mar' 14: 64%
  - Ending Jun' 14: 67%

- **Pnu**
  - Ending Sept' 13: 78%
  - Ending Dec' 13: 83%
  - Ending Mar' 14: 84%
  - Ending Jun' 14: 85%

- **Mammo**
  - Ending Sept' 13: 55%
  - Ending Dec' 13: 55%
  - Ending Mar' 14: 53%
  - Ending Jun' 14: 67%

- **Pap**
  - Ending Sept' 13: 70%
  - Ending Dec' 13: 70%
  - Ending Mar' 14: 71%
  - Ending Jun' 14: 89%

- **Cholesterol**
  - Ending Sept' 13: 91%
  - Ending Dec' 13: 91%
  - Ending Mar' 14: 93%
  - Ending Jun' 14: 54%

- **Colorectal**
  - Ending Sept' 13: 56%
  - Ending Dec' 13: 59%
  - Ending Mar' 14: 58%
  - Ending Jun' 14: 58%

Prevention Standards
# GIM Patient Satisfaction

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<tr>
<th>Care Provider (CP) Measure</th>
<th>GIMO April-June 2014</th>
<th>Shea April-June 2014</th>
<th>National 75&lt;sup&gt;th&lt;/sup&gt; Percentile</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care Provider Overall</td>
<td>96.2</td>
<td>95.0</td>
<td>95.5</td>
</tr>
<tr>
<td>Friendliness/courtesy of CP</td>
<td>97.6</td>
<td>97.0</td>
<td>96.9</td>
</tr>
<tr>
<td>Explanations of problem/condition</td>
<td>96.3</td>
<td>94.4</td>
<td>95.7</td>
</tr>
<tr>
<td>Concern for questions/worries</td>
<td>96.5</td>
<td>95.2</td>
<td>95.6</td>
</tr>
<tr>
<td>Efforts to include in decisions</td>
<td>96.3</td>
<td>94.8</td>
<td>95.4</td>
</tr>
<tr>
<td>Information about medications</td>
<td>95.8</td>
<td>93.8</td>
<td>95.0</td>
</tr>
<tr>
<td>Instructions for follow-up care</td>
<td>95.4</td>
<td>94.1</td>
<td>95.1</td>
</tr>
<tr>
<td>Spoke using clear language</td>
<td>97.5</td>
<td>96.6</td>
<td>96.6</td>
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<tr>
<td>Time CP spent with patient</td>
<td>95.4</td>
<td>94.9</td>
<td>94.8</td>
</tr>
<tr>
<td>Patients' confidence in CP</td>
<td>96.2</td>
<td>94.5</td>
<td>96.1</td>
</tr>
<tr>
<td>Likelihood of recommending CP</td>
<td>95.7</td>
<td>94.1</td>
<td>95.8</td>
</tr>
</tbody>
</table>
QI for Residents in Ambulatory Care

• **Systems based practice**
  – DM – focus on eye and foot exam
  – Divide into teams
    • Each month group decides on intervention for one of the focus areas
    • Both groups carry out both interventions
    • Clinic staff involved in project teams

• **Practice-based learning**
  – Use of dashboards and reports
    • Recognize systematic deficiencies
    • Identify patients for outreach

• **QI scholarly projects**
Opportunities in quality metrics

• Eye Exams
• Foot exams

Interventions

• Implementing of camera from eye exams
• Resident QI projects
• Preventative planning
• Increased conversation in huddles
• Increased outreach on phones
Shadyside

• Quality improvement activities have accelerated
• In the process of applying for NCQA PCMH recognition
• Part of shared savings
• The section became integrated with GIMO
  – More faculty from GIMO seeing patients at Shea
  – Hospitalists providing inpatient teaching at Shea
  – Joint meeting at Montefiore
  – Standardization of teaching and residency program
Shea Redesign as PCMH: System changes

• Standards and processes:
  – Care management, self-management and medication management

• Datasets and registries

• Improving response times
  – Same day appointment slots
  – Physician response to e-messages, nurse calls and answering service calls

• QI projects:
  – Diabetes guidelines, immunizations, care of vulnerable pts

• Policies/procedures/protocols, community resource lists
Shea QI Improvements
Initial results following process redesign as PCMH

• **Turn around time results**
  – 98% after-hours, answering service calls connected MD to pt < 30 minutes
  – 100% patient calls to nurse answered same day
  – 99% patient calls needing MD intervention, answered by next business day
  – 96% patient requests completed within 48 hours

• **QI Results**
  – Improved in Flu shot and Pnemovax rates, exceeding 90th percentile
  – Improved HbA1c rates and % HbA1c < 9, LDL rates, and foot exam rates

• **NCQA PCMH recognition/final score pending:**
  – Began passing 1 of 6 Must Pass Elements; baseline score 38 out of 100
  – Currently passing all 6 Must Pass elements with score of ~80+ points
Shea Compliance with Diabetes Standards
Faculty

Shea DM Faculty Pts w/Office Visits

<table>
<thead>
<tr>
<th></th>
<th>Ending Sept' 13</th>
<th>Ending Dec’ 13</th>
<th>Ending Mar’ 14</th>
<th>Ending Jun’ 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1C</td>
<td>94</td>
<td>96</td>
<td>97</td>
<td>99</td>
</tr>
<tr>
<td>LDL</td>
<td>92</td>
<td>91</td>
<td>91</td>
<td>91</td>
</tr>
<tr>
<td>Nephropathy</td>
<td>95</td>
<td>95</td>
<td>92</td>
<td>93</td>
</tr>
<tr>
<td>Eye Exam</td>
<td>64</td>
<td>69</td>
<td>68</td>
<td>64</td>
</tr>
<tr>
<td>Foot Exam</td>
<td>79</td>
<td>83</td>
<td>84</td>
<td>83</td>
</tr>
<tr>
<td>BP&lt;140/90</td>
<td>77</td>
<td>66</td>
<td>77</td>
<td>70</td>
</tr>
</tbody>
</table>

ADA Standards

Percentages
Shea Compliance with Diabetes Standards Residents

Shea DM Resident Pts w/Office Visits

- Ending Sept' 13
- Ending Dec' 13
- Ending Mar' 14
- Ending Jun' 14

<table>
<thead>
<tr>
<th>ADA Standards</th>
<th>Ending Sept' 13</th>
<th>Ending Dec' 13</th>
<th>Ending Mar' 14</th>
<th>Ending Jun' 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1C</td>
<td>93</td>
<td>94</td>
<td>95</td>
<td>95</td>
</tr>
<tr>
<td>LDL</td>
<td>74</td>
<td>72</td>
<td>68</td>
<td>68</td>
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<tr>
<td>Nephropathy</td>
<td>82</td>
<td>64</td>
<td>82</td>
<td>81</td>
</tr>
<tr>
<td>Eye Exam</td>
<td>42</td>
<td>46</td>
<td>45</td>
<td>47</td>
</tr>
<tr>
<td>Foot Exam</td>
<td>49</td>
<td>60</td>
<td>63</td>
<td>66</td>
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<tr>
<td>BP&lt;140/90</td>
<td>30</td>
<td>54</td>
<td>52</td>
<td>56</td>
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</tbody>
</table>

Division of General Internal Medicine
CRHC, ICRE, CHERP, VAPHC
Shea QI: Prevention Faculty

Faculty Patients w/Office Visits

Prevention Standards

Percentage

Ending Sept’ 13  Ending Dec’ 13  Ending Mar’ 14  Ending Jun’ 14

Flu 50-64  53  64  67  78
Flu 65+  60  78  86  91
Pnu  85  91  92  94
Mammo  83  83  83  83
Pap  81  81  83  83
Cholesterol  96  96  96  98
Colorectal  78  78  77  79

Division of General Internal Medicine
CRHC, ICRE, CHERP, VAPHC
### Shea QI: Prevention Resident

**Resident Patients w/Office Visits**

<table>
<thead>
<tr>
<th>Prevention Standards</th>
<th>Ending Sept' 13</th>
<th>Ending Dec' 13</th>
<th>Ending Mar' 14</th>
<th>Ending Jun' 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flu 50-64</td>
<td>38%</td>
<td>41%</td>
<td>51%</td>
<td>51%</td>
</tr>
<tr>
<td>Flu 65+</td>
<td>46%</td>
<td>62%</td>
<td>64%</td>
<td>66%</td>
</tr>
<tr>
<td>Pnu</td>
<td>70%</td>
<td>80%</td>
<td>78%</td>
<td>82%</td>
</tr>
<tr>
<td>Mammo</td>
<td>58%</td>
<td>58%</td>
<td>59%</td>
<td>58%</td>
</tr>
<tr>
<td>Pap</td>
<td>63%</td>
<td>69%</td>
<td>65%</td>
<td>66%</td>
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<tr>
<td>Cholesterol</td>
<td>91%</td>
<td>92%</td>
<td>93%</td>
<td>92%</td>
</tr>
<tr>
<td>Colorectal</td>
<td>55%</td>
<td>54%</td>
<td>54%</td>
<td>56%</td>
</tr>
</tbody>
</table>

**Percentage**
Access

- We meet access audits of less than 72 hours appointment 100% of the time!
- Telephone access: has been has been excellent
- Surveys show very high satisfaction with access
## VA Pittsburgh General Medicine Leadership

<table>
<thead>
<tr>
<th>Name</th>
<th>Position and Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dave MacPherson</td>
<td>Acting Director, VAPHS; Chief Medical Officer, VISN4</td>
</tr>
<tr>
<td>Bernie Good</td>
<td>Co-Director, VA Center for Medication Safety; Chair, Medical Advisory Panel for Pharmacy Benefits Management, Dept of VA.</td>
</tr>
<tr>
<td>Jo-Anne Suffoletto</td>
<td>Associate Chief of Staff for Education, VAPHS</td>
</tr>
<tr>
<td>Rob Brooks</td>
<td>Assistant VP for General Medicine and Medical Education, Residency Program.</td>
</tr>
<tr>
<td>Larry Gerber</td>
<td>Section Chief, Hospital Medicine VAPHS</td>
</tr>
<tr>
<td>Erika Hoffman</td>
<td>Section Chief, Outpatient General Medicine VAPHS; VA Site Director, Medicine Clerkship, UPSOM.</td>
</tr>
<tr>
<td>Missy McNeil</td>
<td>Director, Women’s Health Program and VA Advanced Fellowship in Women’s Health, VAPHS</td>
</tr>
<tr>
<td>Adam Gordon</td>
<td>Advisory Dean, UPSOM; Director, Advancing VA Interdisciplinary Addiction Training, Research, and Scholarship Center, VAPHS.</td>
</tr>
<tr>
<td>Scott Herrle</td>
<td>Course Director, Advanced Physical Examination, UPSOM</td>
</tr>
<tr>
<td>Ruth Preisner</td>
<td>Director, Primary Care Procedure Clinic VAPHS</td>
</tr>
<tr>
<td>Visala Muluk</td>
<td>Medical Director, IMPACT Clinic, VAPHS</td>
</tr>
<tr>
<td>Ajay Khurana</td>
<td>Director, VA Urgent Care Rotation</td>
</tr>
<tr>
<td>Gaetan Sgro</td>
<td>Faculty Mentor, Chief Resident in Quality and Patient Safety</td>
</tr>
<tr>
<td>Elif Sonel</td>
<td>Director, Primary Care Clinics, Aspinwall Division, VAPHS</td>
</tr>
<tr>
<td>Dave Zielinski</td>
<td>Chair, Pharmacy and Therapeutics Committee, VAPHS</td>
</tr>
</tbody>
</table>
VA Section Leadership
Teaching

• Medical Student Teaching
• Residency
  – Leadership
  – Residency Match
  – Curricular changes and impact of EIP
• Fellowships
• Research Education—ICRE
Medical School Course Leaders: Preclinical years

- Intro to Being a Physician
  - Shanta Zimmer
- Intro to Interviewing
  - Reed Van Deusen
- Intro to Physical Exam
  - Missy McNeil
- Ethics, Law, Professionalism
  - Missy McNeil
- Clinical Experience
  - Asher Tulsky
- Advanced Physical Exam
  - Scott Herrle
- Advanced Interviewing
  - Carla Spagnoletti
- Population Health
  - Greg Bump
- Mini Elective: Master Diagnostician
  - Twee Bui
  - Missy McNeil
Medical Student Course Leadership: Clinical Years

Third Year

- Adult Inpatient Medicine
  - Tom Painter, Missy McNeil, Erika Hoffman, Anu Munshi (Brian Heist for FY15)
- Combined Ambulatory Med/Peds Clerkship
  - Mike Elnicki
Medical School Course Leadership: Clinical Years

• **Fourth Year**
  - Internal Medicine Al
    – Tom Painter
  - Women’s Health Elective
    – Missy McNeil
  - Underserved Care
    – Twee Bui
  - Substance Abuse
    – Adam Gordon
  - Palliative Care
    – Rene Claxton
  - Teaching to Teach
    – Missy McNeil
  - Transitions Course
    – Rosanne Granieri
Medical Students Committees

• Chair - Curriculum Committee
  – Rosanne Granieri
• Chair and Vice Chair – Student Promotions
  – Tom Painter and Missy McNeil
• Chair – Student Honors Committee
  – Tom Painter
• Member-Third and Fourth Year Retention Committee
  – Tom Painter, Missy McNeil, Mike Elnicki
• Advisor - Student Honor Council, Student Wellness Committee
  – Missy McNeil
• Advisor-Humanism Honor Society
  – Missy McNeil, Raquel Buranosky, Twee Bui
• Advisor-Alpha Omega Alpha Honor Society
  – Frank Kroboth, Missy McNeil
Other Leadership

- **Director, Standardized Patient Program**
  - Hollis Day
- **Areas of Concentration**
  - Underserved Care: Twee Bui
  - Women’s Health: Missy McNeil
- **Director, Student Teaching Palliative Care**
  - Rene Claxton
- **Office of Medical Education**
  - Third/Fourth Year Curriculum: Rosanne Granieri
- **Clinical Scientist Training Program**: Amber Barnato

Division of General Internal Medicine
CRHC, ICRE, CHERP, VAPHC

UPMC Life Changing Medicine
Academy of Master Educators

- Executive Committee: Missy McNeil, Rosanne Granieri
- AME Membership Committee: Missy McNeil
- Faculty Development: Missy McNeil, Rosanne Granieri

- Robert Arnold, MD
- Thuy Bui, MD
- Peter Bulova, MD
- Raquel Buranosky, MD
- Hollis Day, MD
- Michael Elnicki, MD
- Eric Anish, MD
- Greg Bump, MD
- Alda Gonzaga, MD, MS
- Frank Kroboth, MD
- Missy McNeil, MD
- Thomas Painter, MD
- Gary Tabas, MD
- Asher Tulsky, MD
- Roseanne Granieri, MD
- Harish Jasti, MD, MS
- Carla Spagnoletti, MD, MS
- Peggy Hasley, MD, MHSc
Medical Student Teaching

• **Preclinical Years**

  **Course Precepting/Facilitation**
  • Intro to Being a Physician
  • Intro to Interviewing
  • Advanced Physical Exam
  • Advanced Interviewing
  • Ethics, Law and Professionalism
  • Medical Decision Making
  • Reproductive Medicine
  • Health, Illness and Behavior
  • Preclinical Clerkship

• **Clinical Years**

  • **AIMC/AI**
    – 156 months Hospitalist Attending
    – 48 Months Student Teaching Attending

  • **CAMC**
    – 60 Months Precepting
Medical Student Mentoring

- Assistant Dean For Medical Student Research: Molly Conroy
- Advisory Deans
  - Hollis Day
  - Adam Gordon
- Fast advisors
- Pre-residency advisors
- Scholarly Project advisors
## Leadership of Residency Training Programs

<table>
<thead>
<tr>
<th>Director</th>
<th>Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shanta Zimmer, MD</td>
<td>Program Director, IM Residency Training</td>
</tr>
<tr>
<td>Alda Maria Gonzaga, MD, MS</td>
<td>Program Director, Medicine-Pediatrics Program</td>
</tr>
<tr>
<td>Melissa McNeil, MD, MPH</td>
<td>Program Director, Women’s Health Track</td>
</tr>
<tr>
<td>Raquel Buranosky, MD, MPH</td>
<td>Director, Education Innovations Project (EIP)</td>
</tr>
<tr>
<td>Thomas Grau, MD</td>
<td>Program Director, Categorical IM at UPMC Shadyside</td>
</tr>
<tr>
<td>Gary Tabas, MD</td>
<td>Program Director, Transitional Year</td>
</tr>
<tr>
<td>Asher Tulsky, MD</td>
<td>Assistant Program Director and Advising</td>
</tr>
<tr>
<td>Kathleen McTigue, MD, MPH</td>
<td>Program Director, Clinical Scientist Track</td>
</tr>
<tr>
<td>Thuy Bui, MD</td>
<td>Track Director, Global Health</td>
</tr>
<tr>
<td>Peggy Hasley, MD, MS</td>
<td>Dean, Education Pathways, Track Director, Generalist Pathway</td>
</tr>
<tr>
<td>Franziska Jovin, MD</td>
<td>Track Director, Hospitalist Pathway</td>
</tr>
<tr>
<td>Peter Bulova, MD</td>
<td>Track Director, International Scholars Track</td>
</tr>
<tr>
<td>Rollin Wright, MD, MPH</td>
<td>Track Director, Geriatrics</td>
</tr>
<tr>
<td>Robert Brooks, MD, PhD</td>
<td>APD, VAMC</td>
</tr>
<tr>
<td>Haylee Shacklock, MHA</td>
<td>Administrative Director</td>
</tr>
</tbody>
</table>
It Takes a Village: Residency Core Faculty

- Anish, Eric, MD  SHY Core Faculty, Sports Medicine Elective
- Arnold, Robert, MD  MUH, Communication, Palliative Care
- Brooks, Robert, MD, PhD  VAMC APD, Ambulatory Curriculum
- Bui, Thuy, MD  MUH, Global Health Track Director
- Bulova, Peter, MD  MUH, IS Track Director, Procedures, Disabilities
- Buranosky, Raquel, MD, MPH  APD, Curriculum, Education Innovation Project
- Bump, Gregory, MD  MUH, Patient Safety, M&M, Transitions
- Corbelli, Jennifer, MD, MS  MUH, Women’s Health, Metaanalysis
- Reitschuler-Cross, Eva, MD  MUH, SEC Palliative Care, Fast Facts
- Childers, Julie, MD, MS  MUH, LEAD-Humanities, Pain Management
- Day, Hollis, MD, MS  MUH, Direct Observation, Physical Diagnosis
- Demoise, David, MD  SHY, Shadyside Clinic Director
- Elnicki, Michael, MD  SHY Core Faculty, Med Ed Research
- Fine, Michael, MD, MSc  Director, LEAD Program
- Fischer, Gary, MD  MUH, LEAD-QI/Patient Safety
- Friedman, Hilary, MD  VAMC, Academic Hospitalist
It Takes a Village: Residency Core Faculty

- Gerber, Lawrence, MD VAMC, Inpatient Medicine Service
- Gonzaga, Alda, MD, MS Program Director, Med-Peds
- Gordon, Adam, MD, MPH VAMC, Substance Abuse Curriculum
- Granieri, Rosanne, MD MUH, Resid Structured Educational Exp., CETP
- Grau, Thomas, MD SHY, APD, Track Director Shadyside
- Jasti, Harish, MD, MS MUH, Intern Ambulatory Block, Patient Safety
- Hariharan, Jaishree, MD MUH, Resident Clinic Director, QI
- Hasley, Peggy, MD, MS MUH, Ambulatory APD, Generalist Track Dir
- Herrle, Scott, MD, MS VAMC, Physical Diagnosis, Communication
- Heist, Brian, MD, MS SHY, Japan Exchange Program Director
- Hoffman, Erika, MD VAMC, Director Outpt Primary Care Clinics
- Jovin, Franziska, MD Hospital Medicine Curriculum
- Levin, William, MD Medicine Consults, Procedures
- Malek, Siamak, MD VAMC, Global Health Lecture Series
- McNeil, Melissa, MD, MPH MUH, Women’s Health Track Director
It Takes a Village: Residency Core Faculty

- McTigue, Kathleen, MD, MPH  CST Track Director, IST Research Director
- Munshi, Anu, MD, MS  SHY, Inpatient Medicine, Discharge Curriculum
- Painter, Thomas, MD  MUH, Inpatient Medicine
- Preisner, Ruth, MD  VAMC, Procedures
- Sgro, Gaetan, MD  VAMC, Academic Hospitalist, QI
- Simak, Deborah, RN, MNEd  Resident QI
- Smith, Kenneth, MD  MUH, LEAD-intern curriculum, EBM
- Spagnoletti, Carla, MD, MS  MUH, Medical Interviewing, LEAD-MedEd
- Stern, Jamie, MD, MPH  MUH, Women’s Health
- Tabas, Gary, MD  SHY Transitional PD
- Sarah A. Tilstra, MD, MS  Director, Women’s Health Curriculum
- Tulsky, Asher, MD  MUH, APD Evaluation and Advising
- Van Deusen, Reed, MD, MS  Med Peds APD, Transitional Care
- Zalenski, Dianne, MD  SHY, Women’s Health

Chief Medical Residents 2013-2014

Andrea Elliott, MD  Mina Owlia, MD  Eric Morrell, MD  Thomas Radomski, MD
Mayank Lahoti, DO
Recruitment 2013-2014

- All Applications 3839
- Total Invited 457
- Total Interviewed 356
- 40 MUH Categorical positions
- 12 SHY Categorical positions
# Interviewed and Matched Stats

<table>
<thead>
<tr>
<th></th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
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<tr>
<td>Applicants Ranked</td>
<td>302</td>
<td>335</td>
<td>367</td>
<td>429</td>
<td>407</td>
<td>402</td>
<td>344</td>
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<tr>
<td>Lowest Ranked</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Applicant Matched</td>
<td>230</td>
<td>208</td>
<td>269</td>
<td>189</td>
<td>239</td>
<td>253</td>
<td>211</td>
</tr>
<tr>
<td>Peer Schools Matched/Interviewed</td>
<td>10/103</td>
<td>12/103</td>
<td>6/92</td>
<td>13/146</td>
<td>18/178</td>
<td>18/201</td>
<td>23/165</td>
</tr>
</tbody>
</table>

Applicants from all 23 peers represented in 2014.
2014 Intern Class Characteristics

- 9 AOA
- Average Step 1 238; Step II 250
- 22 from our top 150
- 3 PhDs
- 6 URMs

**TRACKS**
- 3 Research Pathway
- 4 Global Health
- 4 Women’s Health
- 1 Clinical Scientist
- 6 Generalist
- 5 International Scholars
  (Brazil, Nigeria, China, India,)

- 23 representatives from peers
  - 6 Pitt
  - Columbia
  - Northwestern
  - U of Virginia
  - UTSW
  - Vanderbilt
  - UCLA
  - U Washington
  - U Chicago
  - Case
  - NWU
  - Rochester
  - Stanford
Residency Curricular Highlights 2013-14

- Substance Abuse Curriculum
- High Value Cost Conscious Care
- Patient Experiences Initiatives
- Block Scheduling to Improve Continuity
- Multidisciplinary Team Rounds
- Health Policy Elective
- LEAD Program Continues
- Reflection in Residency
Internal Medicine-Pediatrics

- Alda Maria Gonzaga, MD, MS, Program Director
- Reed Van Deusen, MD, MS, APD
- Matched our 16th class in March
- Turtle Creek Clinic—near equal number of medicine and pediatrics patients

Recruitment
- Of 280 applicants, 54 interviewed
  - 54 ranked
- Current Interns
  - 2 AOA; 2 Peer
  - All had USMLE scores > 230
- 100% board pass; diverse careers
Leadership and Discovery (LEAD) Program

• **Overview:** This is year 3 of this ICRE program to develop critical appraisal skills, enhance career development, and support scholarship for internal medicine residents

• **Components:**
  – Scholarly project
  – Curriculum, mentoring, and career development
  – Presentation and publication of findings

• **Direction of the Program:**
  – Michael Fine, Director
  – Alison Morris, Associate Director
  – Gary Fischer, Co-Director
  – Carla Spagnoletti, Co-Director
  – Bob Arnold, Co-Director
  – Julie Childers, Co-Director
LEAD Updates

• Of 32 PGY3 survey respondents (class 1), 30 (94%) have identified mentors and projects

• Of 23 PGY2 survey respondents (class 2), 16 (70%) have identified mentors and projects

• LEAD and DGIM will play a central role in organizing the plenary speaker and a new resident component of the Department of Medicine’s annual research day (May 4, 2015)
Recruitment 2013-2014

- ERAS opened Sept. 15th
- Emphasis on LEAD program and research focus
- Continue efforts to recruit under-represented minorities
- Continued research pathway recruitment (MD/PhD)
- Decrease in overall number of interviews by 100
  - More intensive prescreening of candidates
  - Matching with faculty interviewers
  - Follow up post interview
Annals Virtual Patients

Education that responds to your care.

No paths are alike

See where your choices take you with Annals of Internal Medicine’s interactive patient care simulator! As you evaluate and treat each Annals Virtual Patient, you’ll travel down a unique path based solely on your clinical decisions. See how each online case mirrors real patient care decisions and their consequences.

Current Authors

Mamta Bhatnagar
Rene Claxton
Anna Donovan
Kristian Feterik
Alda Gonzaga
*Rosanne Granieri
Jamie Stern
Adam Sawatsky
Scott Herrle
Harish Jasti
Dianne Zalenski
Jennifer Corbelli
Dave Demoise
Brian Heist
*Melissa McNeil
Anu Munshi
Gaetan Sgro
Ruth Preissner
*Jo-Anne Suffoletto
*Gary Tabas
Sarah Tilstra

On Deck:
Ken Ho
Debbie Dinardo
Michelle Freeman
Ken smith
Tom Radomski
Rollin Wright
Alex Meiczkowski
Andrea Elliott
Magie Benson
Amar Kohli

Published Cases

Series 1 Set: All Six Virtual Patients in Series 1
- Breast Cancer Screening and Prevention
- Herpes Zoster
- Contraception
- A Patient with Joint Pain
- Vaginitis and Cervicitis
- Sickle Cell Disease

Series 2 Set: All Six Virtual Patients in Series 2
- Preoperative Evaluation
- Celiac Disease
- Hypothyroidism
- Polycystic Ovary Syndrome
- Urinary Tract Infection
- Palliative Care

Series 3: All Six Virtual Patients in Series 3
- Gastrointestinal Bleeding
- Chlamydia and Gonorrhea
- Delirium
- Painful Hip
- Lyme Disease
- Common Skin Disorders

*Advisory Committee  Editor
DGIM Fellowships 2013-2014

• Strong, vibrant fellowships—total of 13 fellows (MD, PhD)
• GIM—Investigator, educator, women’s health: 5 fellows
• AHRQ T32: 2 post-doctoral fellows
• Palliative Care: 6 fellows (4 first and 2 second year)
• Research and education training for fellows through ICRE
GIM Fellowship Program

- **Director:** Kevin Kraemer
- **Tracks**
  - Clinician-Educator; Clinician-Researcher; Women’s Health
- **Funding:** VA Women’s Health, HRSA, AHRQ, Shadyside Foundation
- **Track Record**
  - 71 graduates since 1983; 80% remain in academics
  - Tiny snapshot of alumni accomplishments:
    - **Jed Gonzalo**, Class of ‘12, Assistant Dean for Health Systems Education at Penn State College of Medicine
    - **Abby Spencer**, Class of ‘07, Director of IM Residency Program and Vice Chair of Education (Medicine Institute) at Cleveland Clinic
    - **Rachel Hess**, Class of ‘04, Director of Health System Innovation and Research at the University of Utah
GIM Fellowship Program

- **June 2014 Graduates**
  - Anna Donovan, MD, MS
    - *Interests*: Women’s Health, medical education
    - Assistant Professor of Medicine, Pitt
  - Holly Thomas, MD, MS
    - *Interests*: sexual function and quality of life in aging women
    - Assistant Professor of Medicine, Pitt
    - K12 Scholar, Patient-Centered Outcomes Research Program

- **Current 2nd Year Fellows**
  - Maggie Benson, MD; *Interests*: high-value healthcare
  - Amar Kohli, MD; *Interests*: interprofessional communication
  - Alex Mieczkowski, MD; *Interests*: professional autonomy in trainees
1) Elena Lebduska, MD  
BS, Cornell University  
MD, RWJ Medical School  
IM Residency, Montefiore, Bronx, NY  
Ambulatory Chief Medical Resident, Montefiore, Bronx, NY

2) Deepa Rani Nandiwada, MD  
BS, NYU Stern School of Business  
MD, George Washington University  
IM Residency – Primary Care, NYU  
Chief Medical Resident, NYU

3) Tom Radomski, MD  
BS, University of Pittsburgh  
MD, Penn State University  
IM Residency, UPMC  
Chief Medical Resident, UPMC

4) Jennifer Rusiecki, MD  
BS, Emory University  
MD Medical College of Georgia  
IM Residency, UPMC

5) Brielle Spataro, MD  
BS, Rensselaer Polytechnic Inst.  
MD, Drexel University  
IM Residency, UPMC

6) Swati Shroff, MD  
BS, George Washington Univ.  
MD, University of Pittsburgh  
IM Residency, BMC/BU  
Assistant in Medicine, MGH
Reorganization of GIM Fellowship Program

- Academic Clinician-Educator Scholars (ACES) Program
  - Focused on training innovative clinician-educators
- Director: Carla Spagnoletti, MD, MS
  - Graduated 2006 from the GIM/WH fellowship
  - Distinguished Alumnus Award, MS Program in Medical Education
RAND-University of Pittsburgh Scholars Program

- **Director**: Kevin Kraemer
- **Purpose**: train future independent investigators in health services, comparative effectiveness, and health policy research
- **Funding**: T32 award from Agency for Healthcare Research and Quality
- **Accomplishments**:
  - 12 graduates (4 MDs, 7 PhDs, 1 PharmD) since 2008
  - Faculty/Research positions at Pitt (3), Penn, Univ. of Washington, U. of Texas, LSU, Duquense (2), MWH Research Inst., RAND, Highmark
  - 4 K awards thus far
- **Graduates in 2014**
  - **Dio Kavalieratos**, PhD (Health Policy, University of North Carolina)
    - *Interests*: palliative care access and quality in serious illness
    - Assistant Professor of Medicine, Univ. of Pittsburgh
    - K12 Scholar, Patient-Centered Outcomes Research Program
  - **John Rief**, PhD (Communication, University of Pittsburgh)
    - *Interests*: communication and lifestyle management
    - Assistant Professor of Communication, Duquesne University
Palliative Care and Hospice Fellowship

Director: René Claxton, MD

Tracks:
• One year ACGME-accredited fellowship
• Two years: one year clinical; second year MS (research or education)

Funding: GME, UPMC Palliative and Supportive Institute

Program size: 7 fellows: 3 first year and 4 second year

June 2014 Graduates:
• Michelle Freeman, MD
  – MS Medical Education from ICRE June 2014
  – Position with Penn State Hershey Medical Center in central Pennsylvania.
• Lisa Podgurski, MD –
  – MS Medical Education from ICRE in June 2014
  – Supportive and Palliative Care Program as a Clinical Assistant Professor of Medicine in July 2014.
Palliative Fellows – 2nd year

- Helen Dorra, MD
  - MD, University of Pittsburgh School of Medicine
  - MPH, University of Pittsburgh, GSPH
  - Internal Medicine Residency, UPMC 2007

- Monika Holbein, MD
  - MD, Ruprecht-Karls-University Heidelberg, 2009
  - Internal Medicine Residency, UMDNJ- Newark, 2013

- Allison Jordan, MD
  - MD, Univ of Texas Southwestern Medical Center at Dallas, 2008
  - Residency IM and Psychiatry, Medical Univ of South Carolina, 2013

- Sonia Malhotra, MD
  - MD, Ross University, Dominica West Indies, 2007
  - Residency Internal Medicine & Pediatrics, Tulane 2012
  - Chief Residency, Pediatrics, Tulane University, 2013
Current Palliative Care Fellows 1st yr

- Shannon Haliko, MD
  - MD, University of Miami Leonard MIIlcer School of Medicine – 2008
  - Residency, Internal Medicine, University of Miami – 2011
  - Fellowship, Pulmonary/Critical Care, University of Miami – 2013

- Jordan Keen, MD
  - MD, University of Minnesota Medical School –2011
  - Residency, Internal Medicine, Tufts Medical Center –2014

- Ritu Soni, MD
  - MD, MBBS, Baroda Medical College, Maharaja Sayajirao University, Vadodara, Gujarat, Indian –2005
  - Residency, Internal Medicine, University of Pittsburgh Medical Center – 2011
  - Fellowship, Nephrology, UPMC  2014
Institute for Clinical Research Education

• Has become the hub for clinical research training at Pitt.
  – MS, Certificates in Clinical Research
  – MS, Certificate in Medical Education
  – PhD in Clinical and Translational Science

• Career Development Programs for various levels of the investigative pipeline (e.g., CSTP, CST, IST, TL1, KL2, TEAM)

• Research Support: mentoring, design and analysis support and evaluation
Total Trainee by Training Program
ICRE Funding 2000-2014
Education & Training Grants – Total Costs

- AHRQ Postdoctoral Program in Comparative Effectiveness Research (T32)
- AHRQ Comparative Effectiveness Research Scholars Program (K12)
- CTSI Comparative Effectiveness Research Education Supplement
- CTSI Competencies-based Education Supplement
- Doris Duke Clinical Research Fellowship Program for Medical Students
- AHRQ Postdoctoral Program in Health Services Research (T32)
- CTSI Predoctoral Fellowship Program (TL1)
- CTSI Research Education and Career Development Core (UL1)
- CTSI Clinical Research Scholars Program (KL2)
- NIH Roadmap Multidisciplinary Clinical Research Scholars Program (K12)
- NIH Design of a New Clinical Research Training Program (K30)
Research

- Research Infrastructure
- Funding
- Highlighting examples of research
- Leadership roles
Research Program

• Research Infrastructure
  – Center for Research on Health Care (CRHC)
  – Center for Health Equity Research and Promotion (CHERP) at the VA
  – CRHC Data Center
  – Sections
  – Institute for Clinical Research Education
  – RAND University of Pittsburgh Health Institute
RESEARCH EXPENDITURES
GENERAL INTERNAL MEDICINE

ARRA funded programs
ending: AHRQ K12, T32
Fewer KL2 positions
<table>
<thead>
<tr>
<th>PI</th>
<th>Type</th>
<th>Title</th>
<th>Total Amount</th>
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<tr>
<td>Bruce Rollman</td>
<td>R01</td>
<td>Blended Collaborative Care for Heart Failure and Co-Morbid Depression</td>
<td>$7,335,886</td>
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<td>Hilary Tindle</td>
<td>R01</td>
<td>Cessation in Non-Daily Smokers: A RCT of NRT with Ecological Momentary</td>
<td>$3,056,686</td>
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<td>Amber Barnato</td>
<td>Foundation</td>
<td>Consumer-directed financial incentives to increase advance care planning among Medicaid beneficiaries</td>
<td>$200,000</td>
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<tr>
<td>Doug Landsittel</td>
<td>PCORI</td>
<td>Modeling Strategies for Observational CER – What Works Best When?</td>
<td>$1,021,546</td>
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<td>Rachel Hess</td>
<td>PCORI</td>
<td>A P2aTH towards a learning health system in the Mid-Atlantic region</td>
<td>$6,843,216</td>
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<td>Kevin Kraemer</td>
<td>R01</td>
<td>Comparative Effectiveness of Alcohol and Drug Treatment in HIV-Infected Veterans</td>
<td>$2,436,907</td>
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<td>Doug Landsittel</td>
<td>R25</td>
<td>Expanding National Capacity in PCOR Through Training (ENACT)</td>
<td>$2,267,162</td>
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<tr>
<td>Wishwa Kapoor</td>
<td>K12</td>
<td>Patient-Centered Outcomes Research (PCOR) Scholars Program</td>
<td>$3,943,539</td>
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<tr>
<td>Ken Smith</td>
<td>R01</td>
<td>Future of Influenza Vaccine Strategies Given Interference and Choice</td>
<td>$1,508,987</td>
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<td>Sonya Borrero</td>
<td>R21</td>
<td>Racial Differences in Low-Income Men’s Fertility Intentions and Behavior</td>
<td>$421,340</td>
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<td>Larissa Myaskovsky</td>
<td>R01</td>
<td>Increasing Equity in Transplant Evaluation and Living Donor Kidney Transplantation</td>
<td>$2,661,194</td>
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<tr>
<td>Brian Primack</td>
<td>R21</td>
<td>Improving U.S. Health Policy Regarding Water-Pipe Tobacco Smoking</td>
<td>$368,445</td>
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<tr>
<td>Janel Hanmer</td>
<td>R03</td>
<td>Quality Adjusted Life Expectancy Estimates for the US General Population</td>
<td>$288,898</td>
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<tr>
<td>Brian Primack</td>
<td>R21</td>
<td>Sponsored Health IT and Evidence-Based Prescribing among Medical Residents</td>
<td>$300,000</td>
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<tr>
<td>Esa Davis</td>
<td>R01</td>
<td>Comparison of Two Screening Strategies for Gestational Diabetes</td>
<td>$2,584,941</td>
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</table>

**Total funding: $35,238,747**
Research Areas

- Health Services Research
- Epidemiology/Clinical Epidemiology/Intervention Studies
- Decision Sciences/Comparative Effectiveness
- Women’s Health
- Disparities
- Methods/Analyses
- Palliative and Supportive Service
PI: Bruce L. Rollman, MD, MPH

Supported by NIMH R01 MH093501

704 Depressed and/or anxious primary care pts. aged 18-75 from 26 UPMC offices (101% goal)

Randomized to:
- *Beating the Blues* Computerized CBT (CCBT)
- Internet Support Group + CCBT
- Usual care

2015 Anticipate open study blind
What if we Apply Collaborative Care for Depression to CHF?

**Telephone-Delivered Collaborative Care for Treating Post-CABG Depression: A Randomized Controlled Trial**

**Context:** Depression symptoms commonly follow coronary artery bypass graft (CABG) surgery and are associated with less positive clinical outcomes.

**Objectives:** To test the effectiveness of telephone-delivered collaborative care for post-CABG depression in adult patients with depression and are associated with less positive clinical outcomes.

**Design:** Single-site clinical trial of 371 participants with depression who were randomized to receive collaborative care or usual care.

**Results:** At 12-month follow-up, participants in the collaborative care group had significantly lower levels of depressive symptoms compared to those in the usual care group. The 12-month proportion of participants with depression was significantly lower in the collaborative care group (20%) compared to the usual care group (8%), with a p-value of 0.007.

**Conclusion:** Telephone-delivered collaborative care is an effective treatment for depression in patients with coronary artery bypass graft surgery.

**Graph:**

- **Y-axis:** Proportion Mortality
- **X-axis:** Month
- **Legend:**
  - PHQ-2 (+) (n=371)
  - PHQ-2 (-) (n=100)

12-Months: 20% vs. 8%; P=0.007
Study Design: Hopeful Heart Trial

In-Patient
PHQ-2 & PHQ-9 Depression Screen

PHQ-2 (-) & PHQ-9 < 5
2-Week Outpatient Telephone PHQ-9

PHQ-9 ≥ 5
Ineligible

PHQ-9 < 10
2-Week Outpatient Telephone PHQ-9

PHQ-9 ≥ 10
RANDOMIZE

Non-Depressed Comparison Cohort (N=125)

Collaborative Care for both Depression + HF (“Blended”; N=250)

Co-Primary Hypothesis A

Collaborative Care for HF alone (Enhanced Usual Care (eUC); N=250)

Usual Care for HF + Depression (UC; N=125)

Co-Primary Hypothesis B
Kevin Kraemer – New R01

• **Title:** Comparative Effectiveness of Alcohol and Drug Treatment in HIV-infected Veterans

• **Funding:** NIH/NIAAA, $2,436,907, 5 years

• **Aims:**
  1) Compare the effectiveness of different types of alcohol and drug treatment on quality of HIV care and virologic suppression
  2) Identify predictors of initiation, engagement, and retention in alcohol and drug treatment among HIV-infected Veterans
  3) Assess the impact of Affordable Care Act insurance expansion on alcohol and drug treatment in HIV-infected Veterans

• **Methods:**
  – *Aims 1 and 2:* quasi-experimental, propensity score adjusted analyses of 44,180 HIV-infected Veterans using national VA data
  – *Aim 3:* semi-structured qualitative interviews of key informant clinicians and administrators and HIV-infected Veterans
Waterpipe Tobacco Smoking among US Adolescents and Young Adults

• PI: Brian A. Primack, MD, PhD
• Methods and Population: This 5-year NCI R01 utilizes qualitative and quantitative components to assess waterpipe (hookah) smoking nationally.

Results

1. Among a national sample of over 100,000 college students, 31% have smoked tobacco from a hookah, making it nearly as prevalent as cigarette smoking.

2. About 95% of US municipalities which disallow smoking in bars allow indoor hookah smoking. This represents an important policy gap.

3. Meta-analysis demonstrates that a single hookah smoking session exposes the user to about 25 times the tar of a single cigarette.
Portrayal of Alcohol Use on YouTube

- Brian Primack, MD, PhD

Methods and Population: This 2-year study involves in-depth assessment of alcohol-related content on YouTube.

Results: The 70 most popular YouTube videos involving alcohol have been viewed a combined 333,246,875 times. Motor vehicle use is present in 24% of alcohol-related videos. There are significantly more likes per dislike, indicating more positive sentiment, when there is representation of liquor, brand references, and/or physical attractiveness.

Source of Funding: ABMRF Alcohol Research Foundation
The CONNECT Study

- Yael Schenker, MD, KL2 Scholar
- A nurse-led care management approach to improve provision of “primary” palliative care in oncology practices.
- Demonstrated feasibility, acceptability, and perceived effectiveness in a pilot trial.
- Submitted an R01 to NCI for a cluster randomized trial to evaluate efficacy.
Objective: To assess the quality and equity of care for patients with acute myocardial infarction (AMI), heart failure (HF), and community-acquired pneumonia (CAP) in non-Hispanic white, non-Hispanic black, and Hispanic patients from 2005 to 2010 in U.S. acute care hospitals

Methods:
1. Study sample included 518,905 AMI, 844,535 HF and 803,873 CAP admissions in 2005; and 459,823 AMI, 737,703 HF and 817,824 CAP admissions in 2010 (>4000 hospitals both years)
2. Assessed performance rates for 6 AMI, 4 HF, and 7 CAP process-of-care quality measures, adjusted for patient and hospital characteristics, using all payer data from CMS’ Corporate Data Warehouse
Key Findings:

1) Adjusted performance rates for the 17 quality measures improved by 3.4 to 58.3 percentage points (% pts) from 2005 to 2010 (p<0.001 for all) for whites, blacks, and Hispanics.

2) Compared to whites, adjusted rates in 2005 were >5 % pts lower in blacks for 3 measures and in Hispanics for 6 measures. These differences decreased significantly for all 9 measures from 2005 to 2010.

3) The reduced racial/ethnic differences occurred through more equitable within-hospital and between-hospital care for white and minority patients.

Conclusion: Improved quality of care for white, black, and Hispanic patients with AMI, HF, and CAP was accompanied by increased equity of care both within and between U.S. hospitals from 2006 to 2010.

Physician Scientists and Scientists—Leadership Roles

• Kevin Kraemer, MD, MSc—**Director:** T32s, Grant Writing Course, Fellowship
• Matthew S. Freiberg, MD, MSc—**Director:** Section of Chronic Disease Translation
• Kathleen M McTigue, MD, MPH—**Director of CST:** major role in ICRE teaching
• Walid Gellad, MD, MPH—**Co-Director, Center for Pharmaceutical Policy and Prescribing**
• Natalia E Morone, MD, MS—**Co-Director of CEED Program, ICRE**
• Hilary A. Tindle, MD, MPH—**Director, Tobacco Treatment Service, UPMC**
• Brian A. Primack, MD, PhD, EdM—**Director, Program for Research on Media and Health**
• Molly Conroy, MD, MPH—**Assistant Dean for Scholarly Project**
Leadership Roles

- Bruce Rollman, MD, MPH—Director for Grant Reviews; ICRE; Grant Writing Course
- Amber E. Barnato, MD, MPH, MS—Director CSTP Medical Students and Director, Doris Duke Fellowship; New Director, Section of Decision Sciences
- Kenneth Smith, MD—Directing EBM Curriculum and LEAD Curriculum; Co-Director, Section of Decision Sciences
- Nicole Fowler, PhD—Assistant Director, PhD Clinical and Translational Science, ICRE
- Esa Davis, MD, MPH—Director, TTS; Leads Research Development Seminar
- Lauren Broyles, PhD, Director of the ICRE RAMP to K Program, ICRE
Leadership Roles

- Michael Fine, MD, MSc—Director of LEAD, Director of CHERP
- Galen Switzer, PhD—Director of PhD in Clinical and Translational Science
- Larissa Myaskovsky, PhD—Course Co-Director on Disparities in ICRE
- Sonya Borrero, MD, MS—Co-Director, CEED program for medical students; Director, CWHRI
- Leslie Hausmann, PhD—Course Co-Director on Disparities
- Susan Zickmund, PhD—Director, Qualitative Core, CRHC Data Center
Leadership Roles

- Doris Rubio, PhD—**Director, CRHC Data Center; Co-Director ICRE; CTSI Evaluation Director**
- Doug Landsittel, PhD—**Director, Comparative Effectiveness Research Track in MS, Certificate, ICRE; Associate Director, CRHC DC**
- Joyce Chang, PhD—ICRE teaching programs; one of our very best teachers
- Charity G. Moore, PhD—**Director, Academic Programs ICRE**
- Kaleab Abebe, PhD—**CEED Co-Director**
- Lan Yu, PhD—Biostatistics; Patient Reported Outcomes
- Seo Young Park, PhD—Biostatistics; Advising KL2 scholars
- Dana Tudorascu, PhD—Biostatistics collaborations
Leadership Roles

- Robert Arnold, MD—Chief, Section Palliative Care, Director, Institute for Patient Doctor Communication; UPMC wide palliative care
- Bruce Ling, MD—Director, IRB at VA
- Eleanor Bimla Schwarz, MD, MS—Director, Women’s Health Service Unit, CRHC; Medical Director of eRecord Evaluation
- Rachel Hess, MD, MS—Co-Director, CTSI TL1; Chair of Patient Reported Outcomes at UPMC
Promotions—Fiscal year 2014

**Associate Professor**
- Natalia Morone, MD, MS
- Sonya Borrero, MD, MS
- Winifred Teuteberg, MD
- Alda Maria Gonzaga, MD, MS

**Clinical Associate Professor**
- Lori Bigi, MD
Principles

• Clinical revenues support clinical activities

• Teaching:
  – Medical student: supported by ECU
  – Graduate student: CTSI grant and partial return of tuition (ICRE)
  – Residency teaching: supported by identifiable roles—teaching is part of this support

• Research
  – External funding; internal support through bridge funding
  – Seed funding: provided for start up

UPMC Support tied to RVUs, panels—for clinical activities

We have to generate funds for everything we do!
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<tr>
<th>Faculty</th>
<th>UPMC Mont/Presby</th>
<th>VAPHS</th>
<th>UPMC Shadyside</th>
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<td>MD/MPH*</td>
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Faculty Departures Fiscal Year 14

**Hospitalists (12)**
- Melissa Wotring-Norman, MD
- Delia Cucoranu, MD
- Jilalu Kelbe, MD
- Shari Montandon, DO
- Carlos Nieto, MD
- Pilar Ortegon-Zambrano, MD
- Ritu Soni, MD
- Wesley Thacker, MD
- Samantha Vogt, MD
- Saiqua Waien, MD
- Janel Williams, MD
- Candace Wilson, MD

**Clinicians (4)**
- Harish Jasti, MD
- Anu Munshi, MD, MS
- Dianne Zalenski, MD
- Rebecca Hostetler, MD

**Research (4)**
- Matthew Freiberg, MD, MSc
- Hilary Tindle, MD, MPH
- Eleanor (Bimla) Schwarz, MD, MS
- Nicole Fowler, PhD

**Palliative Care (1)**
- M. Hamza Habib, MD
A few words about departures

- We are a large organization and we have departures every year
- Hospitalist program—departures are common everywhere
- Clinician educators—many reasons for departure, family, geography and others
- Researchers: we are a very attractive target—successful, outstanding faculty, leaders, innovators
  - It is a tribute to the success of the Division
Faculty Recruitment for fiscal year 15

• Recruited 20 new faculty
  – Full time hospital medicine—13
  – Palliative Care—2
  – Clinician/Educator—2
  – Investigators—3
New Hospitalists

• **Sudha Bhadriraju, MD**
  – MD Texas Tech University Health Sciences Ctr 2011
  – Internal Medicine Residency – UPMC 2014

• **Ashwin Bhirud, MD**
  – MD – West Virginia School of Medicine – 2011
  – Internal Medicine Residency – UPMC – 2014

• **Preethi Chintamaneni, MD**
  – BS – Communications – Northwestern University – 2007
  – MD – Case Western – 2011
  – Internal Medicine Residency – UPMC – 2014

• **Emily Clausen, MD**
  – MD – University of North Carolina – Chapel Hill – 2011
  – Internal Medicine Residency – UPMC - 2014
New Hospitalists

• **Thomas DeCato, MD**
  - MD – University of Pittsburgh – 2010
  - IM Residency – University of Washington Affiliated Hospitals – 2013

• **Katherine Foor, DO**
  - DO – West Virginia School of Osteopathic Medicine – 2011
  - IM Residency – UPMC – 2014

• **Daniel Giesler, MD**
  - PHARM-D – SUNY at Buffalo 2005
  - MD – SUNY Update Medical University – 2011
  - Internal Medicine Residency UPMC - 2014

• **Colin Hoffmann Holtze, MD, MPH**
  - Internal Medicine Residency – Vanderbilt University - 2014
New Hospitalists

• Ana Inashvili, MD
  – MD – Ivane Javakhisvili State University of Tbilsi - 2003
  – IM Residency – University of Illinois – 2014

• Amir Kamran, MD
  – MBBS – (Medicine/Surgery) - Khyber Medical College – 2006
  – Internship – Mount Sinai School of Medicine – 2012
  – IM Residency – Univ. of Alabama, Birmingham 2014

• Abbal Koirala, MD
  – MBBS – King Edward Medical School - 2008
  – IM Residency – St. Francis Hospital of Evanston – 2014

• Judy Vu, MD
  – MD – University of Utah – 2010
  – IM/Pediatrics Residency – University of Utah - 2014
New Hospitalist

• Ann Demopoulos, MD, MS
  – MD – University of Illinois College of Medicine – 2008
  – Internal Medicine Residency – Rush University Medical Center - 2011
New Investigators

• **Charles Jonassaint, PhD**
  - PhD Psychology – Duke University – 2009
  - MHS – Epidemiology – Johns Hopkins Public Health
  - Internship – Duke University Medical Center – 2009
  - Fellowship – Johns Hopkins University – 2014

• **Dio Kavalieratos, PhD**
  - PhD – Health Policy & Management – University of NC – 2012
  - RAND Univ. of Pittsburgh Scholar, Univ of Pittsburgh – 2014

• **Holly Thomas, MD, MS**
  - MD University of Pittsburgh– 2009
  - Internal Medicine Residency – UCLA Medical Center – 2012
  - GIM Fellowship – University of Pittsburgh/VA - 2014
  - MS – Clinical Research – ICRE University of Pittsburgh 2014
New Palliative Care

• Lisa Podgurski, MD
  – MD – Harvard Medical School – 2009
  – Internal Medicine Residency – UPMC – 2012
  – Hospice and Palliative Care Fellowship – UPMC – 2013
  – MS – ICRE University of Pittsburgh – 2014

• Rebecca Sands, DO
  – DO – Midwestern University – 2006
  – IM Residency – Cambridge Health Alliance – 2009
  – CMR – Cambridge Health Alliance – 2010
  – Palliative Medicine Fellowship – Harvard Univ - 2011
New Clinician Educators

• Anna Donovan, MD, MS
  – MD – West Virginia University SOM – 2008
  – MS – ICRE University of Pittsburgh – 2014
  – Internal Medicine Residency – UPMC – 2011
  – Chief Medical Resident – UPMC – 2012
  – Women’s Health Fellowship – UPMC – 2014

• Anna Marie White Lewarchik, MD
  – MD – University of Pittsburgh – 2010
  – Internal Medicine/Pediatric Residency – UPMC – 2014
Awards

- *Eric Anish, MD* Teaching Attending award
- *Amber Barnato, MD, MPH, MS,* Distinguished Mentor Award, ICRE
- *Sonya Borrero, MD,* Elected to the Board of Directors, Society of Family Planning; Best poster abstract award, 1st place, North American Forum on Family Planning Annual Meeting, Seattle
- *Molly Conroy, MD,* Inducted Fellow, American College of Sport Medicine
Awards

• **Dave Demoise, MD**  Clerkship Preceptor of the Year 2013 award

• **Adam J. Gordon, MD, MPH**, AMERSA W. Anderson Spickard, Jr. Excellence in Mentorship Award from the Association for Medical Education and Research in Substance Abuse

• **Harish Jasti, MD**  Elected to Fellowship of the American College of Physicians

• **Kaleab Abebe, Natalia Morone and Sonya Borrero** Chancellor’s Affirmative Action Award for Career Education and Enhancement for Healthcare Diversity (CEED)
Awards

- **Missy McNeil, MD**  
  Award for Clinical Practice for the Western Pennsylvania ACP

- **Brian Primack, MD, PhD**  
  Mentoring Merit Award, University Medical Student Research

- **Reed Van Deusen MD**  
  Excellence in Education Award for small Group Facilitation from the 2nd year medical students.

- **Dianne Zalenski, MD**  
  Cohen Award

- **Joanne Suffoletto, MD, MSc**  
  Outstanding Physician of the Year Award from VA Pittsburgh Healthcare System
<table>
<thead>
<tr>
<th>Faculty</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert Arnold</td>
<td>Leadership and mentoring in palliative care</td>
</tr>
<tr>
<td>Peter Bulova</td>
<td>Organization and leadership of ISP</td>
</tr>
<tr>
<td>Greg Bump</td>
<td>Patient Safety</td>
</tr>
<tr>
<td>Gary Fischer</td>
<td>Quality, EMR, Leadership in Innovations</td>
</tr>
<tr>
<td>Peggy Hasley</td>
<td>Health Policy, High Value Health Care</td>
</tr>
<tr>
<td>Kevin Kraemer</td>
<td>Mentoring, Fellowship Training, ICRE Courses</td>
</tr>
<tr>
<td>Missy McNeil</td>
<td>Mentoring, Student Teaching, Everything else</td>
</tr>
<tr>
<td>Carla Spagnoletti</td>
<td>Patient experience and satisfaction</td>
</tr>
<tr>
<td>Gary Tabas</td>
<td>Annals of Internal Medicine Virtual Patient</td>
</tr>
<tr>
<td>Shanta Zimmer</td>
<td>Innovations in Residency and everything else</td>
</tr>
<tr>
<td>Faculty</td>
<td>Role</td>
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</tr>
<tr>
<td>Julie Childers</td>
<td>Quality and innovations</td>
</tr>
<tr>
<td>Rene Claxton</td>
<td>Fellowship and mentoring</td>
</tr>
<tr>
<td>Anoo Tamber</td>
<td>Citizenship</td>
</tr>
<tr>
<td>Andrew Thurston</td>
<td>Initiating a program at Mercy</td>
</tr>
</tbody>
</table>
### Chief’s Discretionary Award: Hospital Medicine

<table>
<thead>
<tr>
<th>Faculty</th>
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</thead>
<tbody>
<tr>
<td>Franziska Jovin</td>
<td>Leadership and innovations</td>
</tr>
<tr>
<td>Kristian Feterik</td>
<td>Citizenship and EMR</td>
</tr>
<tr>
<td>Dayakar Kancherla</td>
<td>Citizenship</td>
</tr>
<tr>
<td>Chandra Umapathy</td>
<td>Citizenship</td>
</tr>
</tbody>
</table>
Top Doctor Recognition—2014

Robert Arnold, MD
Hollis Day, MD
Michael Elnicki, MD
Michael Fine, MD
Rosanne Granieri, MD
Peggy Hasley, MD
Wishwa Kapoor, MD
William Levine, MD
Top Visionary Award—Palliative Care

- Robert M. Arnold, MD, Chief, Section of Palliative and Supportive Care
  - Named 30 most influential leaders in hospice and palliative medicine
  - The American Academy of Hospice and Palliative Medicine asked its 5,000 members to nominate who they think are the leaders – or Visionaries – in the field.
  - Dr. Arnold is one of 30 physicians, nurses and authors recognized by peers and presented with the award in San Diego, California in March 2014.
Society of General Internal Medicine
Awarded for leadership in the field of women’s health, mentoring and advancing careers of women in academic medicine
Summary

• Clinical—Outstanding
  – Many Innovations
  – Outstanding Care

• Education and Training—Outstanding
  – Outstanding Residency Training
  – Outstanding Research Training
  – Unique Fellowship Training
  – Outstanding Medical Student Teaching

• Research
  – Outstanding Infrastructure
  – Outstanding Funding
Special Thanks

• The entire Division

• Missy McNeil
• Franziska Jovin
• Gary Fischer
• Shanta Zimmer
• Doris Rubio
• Kathy Nosko

• John Reilly
• Annmarie Lyons