



**Stony Brook**  
*School of Medicine*

# THE ACADEMIC

The Stony Brook School of Medicine Faculty Journal  
Volume 2 • Issue 1 • March 2014

## INSIDE THIS ISSUE

**Dean's Message**  
Page 1 & 2

**A Word From The Vice Dean  
For Faculty Affairs & Faculty  
Development**  
Page 1 & 2

**Appointments, Promotions  
And Tenure**  
Page 3

**Bravo!**  
Page 3

**New Faculty**  
Page 3

**Spotlight On Faculty**  
Page 4, 5 & 6

**Faculty Development  
Workshops 2014**  
Page 6

**Personal Perspective**  
Page 7

**Focus on CME**  
Page 7

**Focus on Diversity**  
Page 8

**Showcase Of Clinical Excellence**  
Page 8

**CFAS**  
Page 9

**Cancer Center Director**  
Page 10 & 11

**The Chief Medical Officer's  
Perspective**  
Page 11

**Sponsored Seminars**  
Page 12

**Upcoming Events**  
Page 12

**Editor: Meenakshi Singh, MD,  
Vice Dean for Faculty Affairs  
& Faculty Development**

Assistance from the Office of Faculty  
Affairs and Faculty Development  
Graphics Designer: **Danielle Greco**

## Dean's Message

**Kenneth Kaushansky, MD, Senior Vice President, for the Health Sciences; Dean, School of Medicine**



These are exciting times for Stony Brook **Medicine**. On Nov. 13, we broke ground on construction of the Medical and Research Translation (MART) building, the

centerpiece of the most ambitious expansion project in our 33-year history.

This \$194 million project will help create a truly collaborative environment that brings clinicians and researchers together to facilitate innovation, research and discovery. In so doing, we will catalyze major advances in understanding the origins of disease and in better treatments for our patients.

The MART is the first facility in a \$423 million expansion at Stony Brook **Medicine**. Scheduled for completion in 2016, the 240,000-square-foot, eight-story

building will be located adjacent to the Hospital and Health Sciences Center on the Medicine campus.

The MART will be a home for understanding the basis for human disease, where scientific discovery will be translated into clinical research, and where promising patient results can be turned into FDA-approved healthcare diagnostic and treatment options. As part of its core mission, the MART will be devoted to cancer research and care, including the new home for the Stony Brook University Cancer Center.

(continued on page 2 )

## A Word From the Vice Dean for Faculty Affairs & Faculty Development

**Meenakshi Singh, MD, Professor of Pathology**

### Greetings!

Let me begin by thanking you for your support of our office in 2013. It has always been our mission to provide you, our faculty, with high-quality programs that enhance your professional development. We are excited about what is being planned for 2014.

We will continue our Faculty Development Workshops on Thursdays, from 4:30-6:00 p.m. in the Dean's Conference Room. On **Wednesday, March 12, 2014** we hosted the 3rd Annual Partners in Quality & Patient Safety Day highlighting the Patient Safety and Quality Improvement accomplishments of Stony Brook

School of Medicine and Stony Brook University Hospital, faculty, residents, fellows, medical students, nurses and staff. This program combines outstanding lectures, a poster presentation and a distinguished panel discussion.

On **Wednesday, March 19, 2014**, from 4:00-7:00 p.m., we will be celebrating the achievements of

(continued on page 2 )



The MART will build on the strengths of Stony Brook University to create a world class bench-to-bedside incubator for the best ideas in medicine. It will allow us to attract and house top researchers with a particular focus on cancer, and on imaging, and on “big data” informatics. And it will house our clinical cancer center, designed to bring the very best ideas and people in cancer medicine directly to our patients. Our growth in cancer care will provide Suffolk County with the essential resources to address the tertiary care needs of patients, so that our community hospital and physician partners can focus on the region's needs for outstanding primary and secondary care.

The MART will also accelerate the biomedical research essential to put the devastating

effects of cancer behind us. Through the synergy of our Hospital, School of Medicine, the University and our Research and Development Park, the MART will help Stony Brook attract the very best minds in cancer, in imaging and in informatics.

The MART will significantly advance another one of Stony Brook Medicine's three critical missions – educating the biomedical scientists and healthcare providers of the future. In addition to classrooms and curriculum, the MART cancer research laboratories will provide work-study opportunities for Stony Brook University undergraduate students, and advanced research opportunities for graduate students and physician-scientist learners. It will expand the opportunities for medical residents and fellows to prac-

tice medicine in a specialized care setting. And since most of our physician graduates remain to practice on Long Island or in New York, the MART will provide another way for Stony Brook Medicine to deliver the best doctors and caregivers in the State.

Being bilingual – that is, being a physician AND a biomedical researcher – I have seen firsthand how research can create more effective diagnostic and targeted therapeutic approaches to cancer care. That's why I am especially excited about our plans, which will create a premier center of advanced medical research and treatment for the people of Long Island and beyond.

*Kenneth Kaushansky, MD*

## A Word From the Vice Dean for Faculty Affairs & Faculty Development (continued from page 1)

faculty mentees in a graduation ceremony and dinner in the HSC Galleria. The mentees who are scheduled to successfully complete the Peer Mentoring Program are: Drs. Imran Baig (VA Medicine), Michelle Bloom (Medicine), Eduardo Constantino (Psychiatry), Paula Denoya (Surgery), Alpa Desai (Medicine), Igor Kravets (Medicine), Olena Ksovreli (Medicine), Laura Kunkel (Psychiatry), Mark Marzouk (Surgery), Jonathan Mintzer (Pediatrics), Berrin Monteleone (Pediatrics), Melissa Strafford (Obstetrics, Gynecology & Reproductive Medicine), Dana Telem (Surgery), Mathew Tharakan (Medicine), and Patricia Tsui (Anesthesiology).

The achievements of women in academia will be celebrated on **Wednesday, April 23, 2014** at the 8th Annual Women in Medicine Research Day, Wednesday, April 23, 2014. We will begin our day with a Grand Rounds presentation, hosted by the Department of Pediatrics, on “Aging as a Women's Public Health Issue” by Dr. Anne B. Newman, Chair, Department of Epidemiology, Director, Center for Aging and Population Health and Professor of Epidemiology, Medicine and Clinical & Translational Science, Graduate School of Public Health, University of Pittsburgh. This presentation is scheduled from 8:00-9:00 a.m. in Lecture Hall 4 on HSC Level 2. The Grand Rounds presentation will be followed by the Women in Medicine Program in the Galleria on HSC Level 3, where we will have opening remarks by Dr. Kenneth Kaushansky, Senior Vice President for Health Sciences, Dean, Stony Brook **Medicine**, a poster session, a panel discussion on “a Successful Career for Women in Medical Research” moderated by yours truly, with panelists: Drs. Cordia Beverley, Assistant Dean for Community Health Policy, Lina Obeid, Dean for Research, Professor of Medicine, Anne B. Newman, Chair, Department of Epidemiology, University of Pittsburgh, Marina Piccioto, Charles B.G. Murphy Professor in Psychiatry, Deputy Chair for Basic Science, Professor of Neurobiology and Pharmacology, Yale University School of Medicine and Jennie Williams, Associate Professor, Preventive Medicine. The panel discussion will be followed by presentations by faculty, fellow/resident and medical student abstract winners followed by a special recognition of the research achievements of Dr. Sharon Nachman, Professor of Pediatrics. The Women in Medicine Research Day events will culminate with a **Faculty Networking Luncheon** for “A Celebration of

Women Faculty,” from 12:00-1:30 p.m. in the Galleria.

I am pleased that the Dean has given the Office of Faculty Affairs & Faculty Development the tremendous honor of coordinating all aspects of this year's faculty awards. This year, we will be distributing the awards at a celebratory event on **Tuesday, May 20, 2014**, from 10:00-11:30 a.m. in the Hospital Lobby. The awards categories are: Excellence in Undergraduate Medical Education (Aesculapius Award), Excellence in Graduate Medical Education Award, Early Career Investigator Award, Excellence in Translational Research Award, Excellence in Basic Biomedical Research Award, Excellence in Patient Care in a Surgical Discipline Award, Excellence in Patient Care in a Non-Procedural Specialty, and the Excellence in Mentorship Award.

The Leaders in Medical Education Program Fellows will be presenting their research as a part of the commencement ceremonies on **Wednesday, May 28, 2014** from 4:00 p.m. until 7:00 p.m. in the HSC Galleria. There shall be congratulatory remarks from Dr. Kenneth Kaushansky, Senior Vice President for Health Sciences, Dean Stony Brook **Medicine** and presentations from the graduating fellows: Drs. Azin Abazari (Ophthalmology), Peter Braverman (Medicine), Marina Charitou (Medicine), Athena Zias Dilena (VA Medicine), Roderick Go (Medicine), Scott Johnson (Emergency Medicine), Jennifer Pynn (Pediatrics), William B. Smithy (Surgery), Kelly Caramore Walker (School of Nursing) and Steven Zove (School of Dental Medicine).

This is just a snippet of what is being planned for this year. I recommend that you view the Faculty Affairs & Faculty Development website <http://medicine.stonybrookmedicine.edu/faculty-affairs> for information on our upcoming events and programs.

We sincerely look forward to a very exciting year of supporting our faculty in their academic endeavors and careers.

*Meenakshi Singh, MD*

## Appointments, Promotions and Tenure

### Professor

November 2013

**Alexander Dagum, MD (Surgery)**

Professor

**Joel Saltz, MD (Biomedical Informatics)**

Professor

**Mark Talamini, MD (Surgery)**

Professor

**Wei Xing Zong, PhD**

**(Molecular Genetics & Microbiology)**

Professor

December 2013

**Maurizio Del Poeta, PhD**

**(Molecular Genetics & Microbiology)**

Professor

### Associate Professor

October 2013

**James Penna, MD (Orthopaedics)**

Clinical Associate Professor

November 2013

**Jiang Chen, MD (Pathology)**

Research Associate Professor

**Zengmin Yan, MD (Radiology)**

Clinical Associate Professor

### Voluntary Appointments

December 2013

**Nicholas Berbari, MD (Medicine)**

Clinical Associate Professor

**John Hui, PhD (Medicine)**

Research Associate Professor

## Stony Brook School of Medicine Welcomes New Faculty Who Have Joined Us in October 2013 - December 2013

• Sadia Abbasi, MBBS	Medicine	Clinical Assistant Professor
• Lev Bangiyev, DO	Radiology	Clinical Assistant Professor
• Cordia Beverley, MD	Preventive Medicine	Visiting Associate Professor
• Jeffrey Chen, MD	Pediatrics	Clinical Assistant Professor
• F. Avraham Dilmanian, PhD	Radiation Oncology	Research Professor
• Nancy Enerlin, NP	Pediatrics	Clinical Instructor
• Geoffrey Girnum, PhD	Pathology	Associate Professor
• Amy Gruen, DO	Anesthesiology	Clinical Assistant Professor
• Tahsin Kurc, PhD	Biomedical Informatics	Visiting Associate Professor
• Michelle Levi, MD	Ophthalmology	Clinical Assistant Professor
• Tara Mahoney, NP	Pediatrics	Clinical Instructor
• Lucian Manu, MD	Psychiatry	Clinical Assistant Professor
• Joshua D. Miller, MD, MPH	Medicine/Endocrinology	Clinical Assistant Professor
• Samantha Haley Nagengast, MD	Medicine/Palliative Care	Clinical Assistant Professor
• Stephanie J. Powers, DO	Psychiatry	Clinical Assistant Professor
• Mark Talamini, MD	Surgery	Professor, Chair
• Darryl W. Williams, MD	Emergency Medicine	Clinical Assistant Professor
• Mathew D. Ednick, DO	Pediatrics	Clinical Assistant Professor
• Maria E Yee, MD	Pediatrics	Clinical Assistant Professor
• Jennifer Keluskar, PhD	Pediatrics	Clinical Instructor
• Peter Smith-Jones, PhD	Psychiatry	Visiting Professor
• Xiang He, PhD	Radiology	Assistant Professor

Data provided by Karen Wilk, CPA, MBA, Assistant Dean for Faculty Personnel and Virginia Desposito.

Data compiled by Virginia Desposito and

Karen Wilk, CPA, MBA, Assistant Dean for Faculty Personnel

## Bravo!

We congratulate the following faculty and leaders who have recently received awards:

### Dr. Kenneth Kaushansky Receives National Honor for Seminal Research in Hematology

Kenneth Kaushansky, MD, MACP, Senior Vice President for the Health Sciences and Dean of Stony Brook University School of Medicine was honored by the American Society of Hematology (ASH) with the 2013 Ernest Beutler Lecture and Prize. The prestigious award and accompanying lecture is an annual honor by the ASH given to leading national researchers and clinicians for their significant contributions to the understanding and treatment of hematologic diseases.

### Dr. Richard Fine Receives International Pediatric Transplant Association Lifetime Achievement Award

Richard N. Fine, MD, a Professor of Pediatrics and a former Dean of Stony Brook University School of Medicine, has received the 2013 Lifetime Achievement Award from the International Pediatric Transplant Association (IPTA). The award recognizes an IPTA member who has made outstanding contributions to the field of pediatric transplantation over the course of his/her career.

### Dr. Yusuf Hannun Receives Kuwait's Prize for Scientific Advancement

Stony Brook University Cancer Center Director Yusuf A. Hannun, MD, has received the Kuwait Prize in the category of Basic Sciences. The annual award issued by the Kuwait Foundation for the Advancement of Science (KFAS) recognizes the distinguished scientific accomplishments of an Arab scientist living anywhere in the world. Dr. Hannun received the honor for his research on a class of lipids implicated in the cancer disease process.

### Dr. Harold Fernandez receives honor from Mineola-Garden City Rotary Club

Harold Fernandez MD, Co-Director of the Stony Brook University Heart Institute, received the Distinguished Service Award from the Mineola-Garden City Rotary Club in recognition of his service to immigrant patients through the RotaCare clinic.

### Dr. Poon Takes "Minnies" Award for "Scientific Paper of the Year"

Stony Brook Medicine's Michael Poon, MD took home the 2013 "Minnies" Award in the Scientific Paper of the Year category for his study showing that use of computed tomography (CT) reduces healthcare costs by enabling better triage of patients with chest pain presenting to the emergency room.

### Dr. Henry Woo Named Fellow of World's Largest Organization of Surgeons

Stony Brook Medicine neurosurgeon Henry Woo, MD, FACS, has become a Fellow of the American College of Surgeons (ACS), the largest organization of surgeons in the world. Dr. Woo's initiation as an ACS Fellow took place at a convocation ceremony at the College's 2013 annual Clinical Congress where he officially earned the right to use "FACS" after his name. At Stony Brook, Dr. Woo is Professor of Clinical Neurological Surgery and Radiology, and Co-Director of the Cerebrovascular and Stroke Center. The ACS bases Fellowship distinction by evaluating the surgeon's education and training, professional qualifications, surgical competence and ethical conduct.

Data supplied by Greg Filiano, Media Relations Manager.

Please notify the Office of Faculty Affairs & Faculty Development if you would like to acknowledge a faculty member



## SPOTLIGHT ON FACULTY



### William A. Wertheim, MD

Professor of Clinical Medicine  
Associate Dean for Clinical Outreach

When I left Long Island for college in 1981, I expected I would only be coming back to visit family. Stony Brook's medical school was only 6 years old at the time and I really had barely heard of it. But looking for a position in academic General Medicine after medical school and residency, I wanted to find a place that had a medical school and a hospital closely linked, a faculty committed to education and scholarship, and a place that would offer me opportunity to grow my career as a clinician, teacher, and academic. Stony Brook was an ideal fit, and it has continued to be so ever since.

I began my career here in a dual role: in charge of the medical consult service, which gave me the opportunity to work directly with house staff daily in the hospital, and developing a practice in outpatient medicine. I enjoyed both of these roles, and was able to begin thinking about curriculum development by re-creating a medical consultation curriculum for the residents while still growing my own clinical practice at the newly-opened Primary Care Center in Tech Park. In 1998, I was offered a chance to get involved in the medicine residency program, and became an Associate Program Director for the Medicine Residency, and director of the Primary Care Residency Program. This was a wonderful opportunity to understand the structure, framework, and future direction of graduate medical education, and to mentor residents and help guide them as they developed into internists. In 2003 I became Residency Program Director. Many people at Program Director meetings would tell me that this was the best job they ever had, and after 9 years in that role (I stepped down in 2012), I heartily agree. The ability to advocate for the house staff, to guide their learning experiences, to counsel them and direct them to explore new opportunities, and to see them blossom into highly accomplished clinicians is tremendously gratifying. While the regulatory and administrative burden is challenging—for example, 2 ACGME site visits, yearly DOH time audits, an ABIM site visit, interviews of nearly 3,000 residency candidates in 9 years—those tasks were well-worth the effort when I look at people I trained, many now faculty here and elsewhere, who provide such outstanding patient care and education to the next generation of learners.

I've been fortunate to have been given the chance to grow professionally in addition to formal positions like Residency Director. The Leaders in Medical Education Fellowship, the Advisory Group Leadership Academy,

visits to International Health Education programs in Mozambique and Madagascar, and the Harvard-Macy Program for Educational Leaders are some wonderful experiences that gave me skills and tools to manage my roles at Stony Brook, and I am grateful to my mentors in the department and the Dean's Office for providing me with those opportunities which have enhanced my career. Something I came to understand as Program Director, with a system-wide perspective on how we as an institution provide care and where our patients come from, helped me recognize that Stony Brook is facing challenges now that were not present in years past: other large health-care systems are moving in to our neighborhood, and a structure of clinical practice that re-directs the flow of patients away from their usual doctors and hospitals to facilities further away—to sites which own or manage the practices in our backyard, even when our care at Stony Brook is as good or better. Understanding that this sea-change threatened our future, I eagerly accepted the opportunity Dean Kaushansky offered me to become Associate Dean for Clinical Outreach, my current role. In this, I am working to recruit physicians into our clinical network. This allows us to preserve and enhance our relationship with high-quality doctors in our community and throughout Suffolk County; it allows us to organize and demonstrate to the public what that high quality truly is. It also enables us to secure our future in an environment which is becoming a landscape where individual practitioners and independent hospitals fade away, and participation in large-scale networks to provide comprehensive services, from primary to quaternary care, is the norm. I believe we must engage in this effort, and I am excited to be a part of it.

I think my tenure at Stony Brook has taught me a few things. First, taking good care of patients is at the heart of everything we do. Second, I've tried to be open to new ideas about how best to help our institution: sometimes through education, sometimes through re-thinking programs, sometimes through recruitment, sometimes through organizing information and people. I have been very fortunate for the opportunities Stony Brook has given me, and I am very grateful to have been here for 18 years, and to continue to be here.

# SPOTLIGHT ON FACULTY

**Jennie L. Williams, PhD**  
**Associate Professor**  
**Department of Preventive Medicine**

I spent most of my early life in Savannah, Georgia; a city that has gained popularity due to the novel “midnight in the garden of good and evil” and the city’s huge St. Patrick day celebration. Savannah is demographically diverse and was a wonderful place for a child to develop and grow. I find it funny that most people are surprised by my absence of a southern accent. I often have to point out that not all southerners possess a southern drawl. I experienced a lot of pleasures living and studying in the south. As such, I was quite privileged by having a wonderful early educational experience at Tuskegee University in Tuskegee Institute Alabama. Due to the lack of entertainment distractions, the city is quite rural and isolated, education and learning was forefront. I felt honored to walk the hallowed grounds of Booker T. Washington and George Washington Carver.

I left the south to further my interest in biological research and to pursue the acquisition of an advanced degree. As such I entered Purdue University and obtained a PhD in Microbial Molecular Genetics. Here, my studies focused on the regulatory control of the ILVGMEDA promoter and the mechanistic role that attenuation played in transcriptional read-through and termination. These studies allowed me to acquire skills in Biochemistry and Molecular Biology (protein, RNA and DNA techniques), as well as technical aptitudes in the growth and maintenance of microbial organisms.

Upon graduation from Purdue, I moved to Boston, MA for post-doctoral training. I found the move to Boston to be one of the best decisions I had made thus far in my career. The opportunities and learning experience was limitless; not to mention the diversity of people and culinary adventures. As a post-doctoral fellow at the Infectious Diseases Unit at Massachusetts General Hospital (Harvard University), I investigated the role of the pagC gene of Salmonella typhimurium in pathogenesis, with the end goal being the development of a vaccine against typhoid fever. I was also involved, at the New England Regional Primate Research Center (Harvard University), in a gene therapy project seeking to protect rhesus T cells in vivo from challenge by the Simian Immunodeficiency Virus (SIV). These endeavors allowed me to transition from working in a prokaryotic to a eukaryotic system. As a result of these studies, I acquired skills in tissue culture and the handling and care of experimental animals.

Through a series of fortunate events, I was introduced to research in cancer biology and ultimately found my research niche. At this point in time, I was asked to collaborate with an individual who was seeking an in situ detection method for specific HPV serotypes as

biomarkers for cervical cancer. This was my introduction into cancer research and later presented me with the opportunity to work with Dr. Basil Rigas in the field of colon cancer chemoprevention. I received NIH funding (R01 supplementary grant) to study the role of nonsteroidal anti-inflammatory drugs (NSAIDs) and their formulated derivatives as chemopreventive agents against colon cancer. As a result of these studies, I received a NCI Mentored Career Development Award (K01). In this study, I evaluated the mode of action of NO-releasing aspirin on colon cancer in respect to signaling pathways (i.e., NF- $\kappa$ B). Overall, I studied the effect of chemopreventive agents on the cellular proliferation and death of colorectal adenocarcinoma cells. This work was conducted in the Division of Cancer Prevention within the Department of Medicine and has culminated in the publication of papers in a number of well respected journals. These studies involved in vitro (cultured cells) as well as in vivo analysis. For the latter, I used various animal models of colon cancer. It is my wish to provide important information on the mechanism of cell death, thus setting the stage for maximizing the clinical effectiveness of chemopreventive agents. In addition, examining drug metabolism at the molecular level is critical to understanding how these agents work. It is my desire to continue research that would lead, among others, to rational and effective formulation and combinations of chemopreventive agents and optimal dosing schemes.

My present research is an extension of the studies previously outlined. After completion of my K01 award, I was able to obtain an NIH R01 grant to study genetic contributions to colon cancer racial health disparity. These studies are based on my efforts to define how chemopreventive agents confer protection against cancer, what role transactivating factors (i.e., p53,  $\beta$ -catenin and NF- $\kappa$ B) play in this protection, and how these factors contribute to the health disparity seen between African American (AA) and Caucasian American (CA) cancer patients. To this end, I am focusing on mechanistic aspects of the chemopreventive effect of NSAIDs to provide at the level of gene regulation an explanation of the racial disparities in the response to NSAIDs. Despite increase in screening, the disparity in mortality rates between AAs and CAs has greatly widened in recent years. This would suggest that it is highly unlikely that socioeconomic status and dietary factors are the only determinants of racial cancer disparity. To this end, my studies are attempting to discern differences in genetic abnormalities associated with colon cancer in AAs and CAs and will help eliminate racial health disparities, resulting in some instances, from chemo-resistance due to genetic

(continued on page 6)

differences between ethnic populations. My work requires the use of retrospective and prospective colon tissue samples from the tissue bank and through collaboration with the Department of colon and rectal surgery at Stony Brook University Hospital, respectively. Using real time PCR, RNAseq and immunohistochemistry, I have analyzed miRNA, RNA and protein expression levels of target genes implicated in colon cancer. These studies are permitting me to determine genetic biomarkers in human colon carcinoma associated with poorer clinical outcome. Through a number of collaborations within and outside of Stony Brook University, I am acquiring information that can potentially allow me to translate my work from the bench to a clinical application.

In addition to my research endeavors at Stony Brook University, I have had the joy of working as a mentor within two NIH funded educational enrichment programs; a Bridges to the Baccalaureate program called Biology Partnership in Research and Education Program (BioPREP) and Minority Access to Research Careers (MARC). Yet another challenge that the United States faces is to increase the diversity of our nation's healthcare workers, researchers and educators who will strengthen our healthcare system and serve a growing multicultural population. The country can ill-afford not making a strong investment in the education of these individuals. To this end, for the first 3 years of my involvement, I voluntarily took part in the BioPREP program. Each summer twenty-four underrepresented long Island community college students are selected to participate in an intense laboratory training program (BioPREP) that convenes 5 days a week, 8 hours a day for

5 weeks. At the end of this training period, the most outstanding students (approximately 10) are selected to enter into an extended research internship. In all, as their instructor and mentor, I, along with others, provide students with the techniques, skills and background information needed to understand and use the basic tools of molecular biology. These students are encouraged to apply and transition from their community colleges to a four-year institution such as Stony Brook University. In the same vein, I have also been working with students in MARC program. The ultimate objective of this program, as well, is to provide assistance and guidance to underrepresented Stony Brook University students who have an aptitude for science but lack the skills needed transition to research at the PhD level. We provide information and send students to conferences and workshops that allow them to learn skills such as grant writing, networking and presenting of data (Poster and oral presentation). We encourage research here at SBU and at summer intermural programs. Students from both BioPREP and MARC are encouraged to apply for and to attend the graduate school of their choice. These are programs that have had a successful record and an undertakings that I feel strongly about and have found rewarding.

Overall, my primary goal is to continue establishing a rigorous independent program focused on the elimination of cancer racial health disparity. In addition, I am continuing to work with programs such as BioPREP and MARC. I now serve as Co-PI of the BioPREP program and am writing a renewal grant as PI this March for MARC.

## The Office Of Faculty Affairs & Faculty Development Presents: Faculty Development Workshops 2014

These workshops are specifically designed to help advance the careers of faculty, improve their involvement in undergraduate and graduate medical education and to enhance scholarship and research.

The overall goals of the sessions are:

1. Improve the understanding of teaching and learning based on adult learning theory and medical education research
2. Enhance the faculty's skills in areas of research and educational leadership so they will prepare and support their learners for the practice of medicine over a lifetime of learning
3. Provide guidelines for career advancement

*All workshops are from 4:30 until 6:00 pm in the HSC Dean's Conference Room 4-180, unless otherwise noted.*

DATE	TOPIC OF WORKSHOP	PRESENTER
April 10, 2014	Faculty Research Resources	Stephen Vitkun, MD, MBA, Ph.D, and Shang Loh, MD
April 24, 2014	First Impressions: Curriculum Vitae Workshop	Stephen Vitkun, MD, MBA, Ph.D
May 8, 2014	Mentoring in Academia	Janet Fischel, Ph.D
May 22, 2014	Health Disparities, Health Equity & Diversity	Jennie Williams, Ph.D
June 12, 2014	Mid-Career Professional Development: The AAMC Perspective	Allison J. McLarty, MD
June 26, 2014	Navigating the Appointments and Promotions Process for Early Career	Meenakshi Singh, MD
July 10, 2014	Minority Faculty Development: The AAMC Perspective	James Davis, MD

### Certification Statement

The School of Medicine, State University of New York at Stony Brook, is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The School of Medicine, State University of New York at Stony Brook, designates this activity for a maximum of 1.5 AMA PRA Category 1 Credits™. Physicians should claim credit commensurate with the extent of their participation in the activity.

For more information and to register, please contact Ryan by e-mail at [Ryan.Himpler@StonyBrookMedicine.edu](mailto:Ryan.Himpler@StonyBrookMedicine.edu)

## Personal Perspective

### Thoughts From a Funeral

Lloyd D. Lense, MD, Department of Medicine

Today I went to the funeral of a friend. He was a family physician who was forced to retire two years ago due to lymphoma. He battled valiantly and with determination for those two years before succumbing to the illness. He went through conventional treatments and experimental protocols, enduring chemotherapy injected into the blood and the spinal canal. He lived in the hospital for weeks but *home* for him was being with his family.

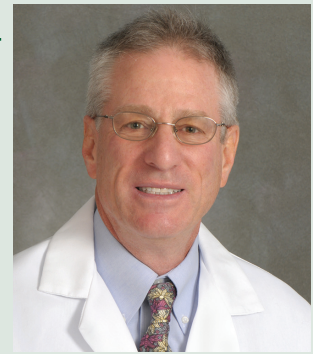
Getting better, survival was defined as enjoying and celebrating the specialness of his family and returning to his individual medical practice. What affects me about his life narrative is that it is substantial on so many levels. It is a story all of us as physicians will hopefully appreciate. These unfortunate and unexpected events where colleagues pass on are part of our personal and professional landscape. What I have learned from these events is the textured narrative I gleaned from the eulogies given by spouses and children. When we look past the homilies of the spiritual leaders and listen to the loved ones, the uniqueness of the real person emerges, even more than we see in our personal and professional interactions. I can remember not only discussing medical cases with this colleague but attempting to be a good and sympathetic listener as he lamented the changes in medicine and his altered valuation as a family physician. While I am certain he envisioned a life without the stressors and inconveniences of individual practice, he came to define his sense of health, identity and individuality as the physician for his patients and families. It was his way of caring. It was his connectivity, self-realization and self-fulfillment to

be part of the healing process for those who entrusted him with their health and more. My friend approached medicine in a very pure sense. While it may not have been the current model, it was the operating and functioning mode that worked for him and his patients. In the end, despite all the professional headaches and dislocations, changes and upheavals, he wanted to be the physician for his patients. It was not about ego. It was part of his life fabric that defined him as a person, a person who spent many years trying to do the best he could to make a positive and lasting difference.

In Maslow's hierarchy of human needs, we physicians spend a significant amount of energy and time securing the base of the pyramid – shelter, safety and security. Over time with experience, confidence, and positive reinforcement, we come to value that sense of belonging and love we hopefully have earned. As our career ascends positive and meaningful trajectories, self-esteem is essential. The apex of the pyramid is self-actualization. This is the gift so many of us strive for and which can be lost by illness. It is the gift and expression of individuality. Medicine is a profession that allows us to embody this special life force and attribute.

At the funeral his children and wife shared eulogies and insights that defined a man who was a respected physician as well as a man his family respected and adored. The stories and attributes were not superficial or mundane. Rather they reflected the investment of respect, caring and time that yielded a treasured father and husband.

My friend lived a life that allowed him to be a meaningful leader for his children and a



respectful and loving spouse to his wife. He lived a life of good intentions, respectful behaviors and generous actions that made him the father and husband who is deeply loved and missed.

Life as a physician is difficult and arduous. The rigors of constant studying and clinical training compel us to learn much about our selves and others. It provides another set of challenges in order that we can achieve life balance, self-esteem and self-realization. It is a journey measured in years and hopefully paralleled by the growth and love of our family and the respect and appreciation of our patients and colleagues.

My own personal journey has allowed me to witness experiences that went a full distance and others such as my friend that were cut short due to illness. I have seen physicians who take pride and fulfillment in healing and helping, and others embittered by altered expectations. What I take away from these experiences is the importance of identifying the needs of those in our personal and professional lives. By evolving into that meaningful leader through personifying and living the behaviors that make being a parent and physician so unique and gratifying, we can create our own textured and fulfilling life narrative.

## A Focus on Continuing Medical Education

### *A word from the Associate Dean for CME*

**Dorothy S. Lane, MD, MPH, Distinguished Service Professor**

There is a program that is accessible through the Office of CME website and is called Internet Point of Care CME. Any evidence-based resource recognized by our library, including but not limited to UpToDate can be used. A direct link to this Stony Brook CME activity is: [http://www.hsc.stonybrook.edu/cme\\_courses/poc/index.cfm](http://www.hsc.stonybrook.edu/cme_courses/poc/index.cfm)

Please note: Stony Brook recently renewed its subscription to UpToDate, which has allowed for a new access method called UpToDate Anywhere. This offers users the ability to register for an account and use UpToDate from their mobile devices. Once users have registered they will begin to earn AMA PRA Category 1 CME credit for each new clinical question they answer using UpToDate.

Below is the link to the UpToDate Anywhere Resource Center, full of customizable announcement templates, a UTDA poster, videos, UTDA slides, PDF's and more. UTDA Resource Center <<http://www.uptodate.com/home/advocate-resources-ssr>>

Information provided by : Brooke Lacy (UpToDate).



# SHOWCASE OF CLINICAL EXCELLENCE

## Comprehensive Psychiatric Emergency Program

The Comprehensive Psychiatric Emergency Program (CPEP) is the central hub of a network of emergency psychiatric services in Suffolk County. Patients in psychiatric crisis arrive from all parts of the county, 24 hours a day, 365 days of the year. After they are screened for medical complications, patients receive a comprehensive psychiatric evaluation. Those in need of on-going care are referred to mental health services in the community, while patients who require hospitalization are admitted to the hospital or transferred to psychiatric units throughout the county.

Our first concern is to provide a safe and secure environment for our patients. The physical environment, which is locked, is designed to prevent patients from harming themselves or being harmed by others. A separate area is provided for young patients.

Psychiatric patients in crisis may sometimes present a danger to themselves or others. In the past we used restraints as the first line for safety, but now we use them only as a last resort, when patients continue to present an imminent danger to themselves or others after all other methods of de-escalation have been employed. Since July 2012, we have engaged in a focused initiative to reduce the number of incidents of restraint and the amount of time our patients remain in restraint. This was accomplished by role modeling, education and staff training, using materials developed by the New York State Office of Mental Health, the National Association of State Mental Health Program Directors and Columbia University. Because of these interventions and others, our staff, working as a team, has reduced

the use of restraints significantly from a high of 315 episodes of restraint in the 2nd quarter of 2012 to just 37 in the 3rd quarter of 2013.

The restraint reduction program has been implemented in conjunction with an initiative to provide care that is sensitive to patients' experience of trauma. Using a program developed by the National Center for Trauma Informed Care, CPEP team members assess our patients' experience of trauma early in the visit and attempt to understand their vulnerabilities and triggers. Staff intervenes at the first signs of behavioral changes using information from the assessment to tailor care to individual needs and avoid re-traumatization. Many of their interventions are simple, yet effective. Engaging patients in conversation, providing information about what to expect, or leading them through stress reducing exercises can often reduce agitation and prevent the need for traumatizing restraint.

As we move forward we will continue to deliver care that integrates best practices, minimizes the need for restraint and is sensitive to our patients' experience of trauma.



**Al Alam, MD, Director  
Department of Psychiatry  
and Behavioral Science**



## Going from Diversity 1.0 to 3.0

**Inel J. Lewis, MPA., Senior Education Specialist, Office of Faculty Affairs & Faculty Development**

In his commentary: Diversity 3.0: A Necessary Systems Upgrade, Dr. Marc Nivet, the Chief Diversity Officer (CDO) of the Association of American Medical Colleges (AAMC) provides us with a blueprint for achieving diversity in health care systems.

According to Dr. Nivet, Diversity 1.0 was mostly prominent in the 1960's when the diversity emphasis was on creating diversity or minority affairs offices which were "siloeed entities separate from the existing educational, research, and patient care missions. In addition to providing safe spaces that nurtured racial and ethnic minority students, these offices were tasked with ensuring compliance with civil rights legislation and affirmative action."

In diversity 2.0, medical schools and hospitals included cultural competency in their curricula. There was also an emphasis on health disparities, and the integration of public health. As a result, there has been an increase in students

either seeking public health degrees either before matriculation to medical school or during medical school. More majority medical students and faculty members have become involved in programs that support inclusivity. As a result, a deeper, more nuanced view of diversity's role in academic medicine has emerged. To support this shifting sensibility, diversity offices expanded programming from a singular focus on student success to an emphasis on fostering the success of racial and ethnic minority and other underrepresented students, faculty, and staff."

What Dr. Nivet now proposes is diversity 3.0, in which "promoting diversity must be tightly coupled with developing a culture of inclusion, one that fully appreciates the differences of perspective. Together, diversity and inclusion can become a powerful tool for leveraging those differences to build innovative, high-performing organizations." In other words, diversity cannot simply focus on race, or gender, but must be used as a means for achieving good health outcomes for all.

In a few months, Dean Kaushansky will roll

out a Diversity Strategic Plan for the School of Medicine. It is to be used as a resource to assist departments in achieving diversity. However, in order to attain Dr. Nivet's plan for diversity 3.0, we should read Dean Kaushansky's diversity strategic plan and ask ourselves a very important question, how can I contribute to all Stony Brook patients achieving good health outcomes? You can achieve this by increasing your own cultural competency, or using your own knowledge of patients to educate your colleagues, e.g. a grand rounds presentation on some aspect of health disparities, establishing a diversity section on your department website, ensuring that there is varied representation on search committees and that search committee members are knowledgeable about unconscious bias. The Office of the Vice Dean for Faculty Affairs and Faculty Development has created a brochure on this topic with links to resources available at: <http://medicine.stonybrookmedicine.edu/system/files/neo-files/Unrecognized%20Biases%20and%20Assumptions%20Brochure.pdf>



# Perspectives From Your Elected Representatives to AAMC's Council of Faculty and Academic Societies (CFAS)

We are very excited to introduce ourselves and share our experiences thus far as your first Stony Brook faculty representatives to the Association of American Medical Colleges (AAMC.) For the first time since the AAMC was founded by 22 medical school deans in 1876, faculty from all the member medical schools will now be represented by a junior and senior medical school faculty member nominated by their respective faculty senates as part of the newly renamed Council of Faculty and Academic Societies (CFAS.) This newly revised Council is charged with identifying critical issues facing faculty members of medical schools so that the AAMC can be responsive as well as proactive with services, initiatives, programs, and policies.

"This will be a great opportunity to work with Drs. Fischel and Kaplan-Liss to take an in-depth look at the dialogue and initiatives that shall evolve from this Council at the AAMC and to inform the Council about the current and future needs and matters of interest to our faculty. I look forward to this collaboration," commented Dr. Meenakshi Singh, Stony Brook Medicine Vice Dean for Faculty Affairs and Faculty Development

We were both excited to become your CFAS representatives in order to share with the Stony Brook Medicine faculty important national trends, innovations happening elsewhere, and concerns impacting the faculty of academic medical centers. We want to help our faculty community successfully reach important goals in teaching, research and clinical care here at Stony Brook. As your newly elected CFAS representatives, we are expected to be bi-directional messengers, bringing information to the AAMC from you, and bringing information to you from the national forum of faculty concerns in the ever-changing and ever-challenging national scene in academic medicine

Currently, the organization has representation from the full array of medical schools in the U.S. and Canada. The mission statement of the AAMC is at once brief and massive: *The AAMC serves and leads the academic medicine community to improve the health of all.* The AAMC consists of three Councils which exist to address the diverse and

unique issues of academic medicine: the Council of Deans is the oldest of these, dating to the founding of the AAMC, the Council of Teaching Hospitals came along next, in 1966, and the Council of Academic Societies was started shortly thereafter, in 1968. Early in 2013, this last Council underwent a revision in purpose, composition, and title and was renamed CFAS – now including faculty representation. At that point, the membership of the Council of Academic Societies was broadened to include election of two faculty representatives from each medical school, and hence the change in name to the Council of Faculty and Academic Societies (CFAS).

A poll of CFAS members conducted before the November 2013 meeting of AAMC in Philadelphia elicited several topics of concern to academic medical center faculty. Those noted below and many other topics impacting faculty were further discussed at the initial five meetings of CFAS during the Philadelphia conference:

- Faculty recruitment and retention
- Balancing clinical productivity, research, teaching, advocacy
- Mission balance and strategic planning for tomorrow's medical schools
- Effects of health system aggregation on the role/value of academic faculty
- Federal fiscal crisis impact on sustainable research agenda
- Federal funding of residency positions, work force, and the GME Cap
- Mentoring – more need than ever in the current environment

There is a cluster of working committees within CFAS, and several additional work groups forming presently to address specific themes, with short- and long-term timelines for outcomes, products or recommendations aimed at making a difference to faculty life, faculty careers and productivity, or advancing our academic mission. We would be pleased to hear from you about the priorities you see as important for CFAS to address, and we consider it our responsibility to communicate with you, whether through the Faculty Senate, by email, or any other creative method of communication that works.

**Janet E. Fischel, PhD, Professor & Vice Chair for Education, Division Chief, Developmental & Behavioral Pediatrics**



*Dr. Fischel has been on the faculty of the School of Medicine for over 30 years, with teaching, research, and patient care in early childhood educational, developmental and behavioral problems. She serves as your senior representative to CFAS.*

**Evonne Kaplan-Liss, MD, MPH, Director of the Advanced Graduate Certificate in Health Communications**



*Dr. Kaplan-Liss, a physician – journalist, is the junior faculty representative from Stony Brook to CFAS, with strong and programmatic interest in teaching scientists and health professionals to be more effective communicators with their patients, students, the public and the media.*

# Cancer Center

Yusuf Hannun, MD

Director, Stony Brook University Cancer Center

Vice Dean, Cancer Medicine

Joel Kenny Professor of Medicine

The overarching goal of Stony Brook University Cancer Center (SBCC) is to become a leader and trailblazer in 21st century cancer medicine and research. We see our strategic mission as providing academically anchored cutting-edge clinical care in multidisciplinary units that promote clinical and translational research. Critical to the success of our Cancer Center is the establishment of innovative and novel research programs. As part of this vision, achieving National Cancer Institute (NCI) designation is one of our long-term goals, which would bring national recognition of our achievements.

## Disease Management Teams

The clinical services of the Cancer Center are currently organized into 12 disease-specific teams. These teams are multidisciplinary and provide a coordinated approach to cancer diagnosis, treatment, and follow-up/survivorship. Patients receive comprehensive cancer services across the full spectrum of care. It is delivered efficiently, offering a sense of continuity and comfort. This approach has another benefit as well: contributing to outcomes that exceed national benchmarks. Disease Management Teams also participate in community education, screenings, and early intervention – all to provide the best care.

Ongoing activities are aimed at enhancing the interface of our clinical programs with clinical and translational research. In major and ongoing activities, we are developing a new paradigm for a business plan for outpatient clinical oncology that focuses on enhancing clinical research and optimizing clinical activities.

## Research Development

The Cancer Center has expended a significant effort at enhancing the research activities pertaining to cancer. The focus is on creating and fostering the development of interactive research programs that bring multiple disciplines and areas of expertise to cancer research and that, at the same time, enhance cutting-edge translational research. Some of these activities include:

1. Organizing annual/bi-annual overall research retreats. The first one was held in July 2012 and the second one will be held in June 2014. The retreats bring together both clinical and research faculty as well as graduate and post doctoral students and other professionals interested in cancer research.
2. Development of several focused retreats and mini-retreats (e.g. Breast cancer, GI cancer, leukemia/transplantation, lung, imaging, nutrition and cancer)
3. Initiation of specific research programs. These include programs in GI cancer, cancer metabolomics and lipidomics, cancer informatics, cancer imaging, therapeutics, and other disease specific programs.
4. Conducting a grants-development seminar in order to increase our NCI funding base and to develop more solid cancer research proposals. All faculty are invited to present any cancer-focused

proposal in various stages of development and then engage in focused discussions on enhancing these proposals.

5. Organizing clinical trials operations. We are reorganizing the clinical trials office for optimal efficiency. The Cancer Center is also coordinating efforts with the Departments of Surgery and Pathology, under the leadership of Laurie Shroyer, to provide Cancer Center investigators with various formal educational tools to enhance their clinical research expertise.
6. The Cancer Center is working with various departments to recruit several experts who will fulfill leadership roles and further develop programs. Some of the recent recruits include: Jerry Yang, PhD (Surgery), Geoffrey Girnun and Scott Powers (Pathology), Chia-Hsin Chan (Pharmacology), Gerardo Mackenzie, PhD (Preventive Medicine), David Matus, PhD, Jarrod French, PhD, and Liang Gao, PhD (Biochemistry).
7. At the leadership level, Joel Saltz, MD, PhD, was recruited as the founding chair of the Department of Medical Informatics and as Associate Director of the Cancer Center for Cancer Informatics.



## Infrastructure Development.

A major component of the mission of the Cancer Center is to develop and provide infrastructure support for cancer activities. In this context, we are:

1. Developing the MART building which will house the new cancer outpatient activities as well as wet lab research space and space for clinical trials and informatics research.
2. Developing our advancement activities with new leadership under Kate Kaming.
3. Collaborating with the Office of Scientific Affairs on various shared resources and cores.

## Specific Goals for next year

Our goals for the next year are:

1. Complete the current phase of recruiting
2. Finalize the development of specific research programs
3. Continue key recruiting into bioinformatics, cancer imaging, therapeutic development, metabolomics, and other programs
4. Define key shared resources
5. Complete the Business Plan for the clinical operation.
6. Define key diseases for development and focused recruiting

# Dr. Yusuf A. Hannun Installed as Joel Strum Kenny Professor in Cancer Research

## The endowed professorship honors the son of Past President Shirley Strum Kenny

**Stony Brook, NY – March 13, 2014** – Yusuf A. Hannun, MD, an internationally renowned cancer researcher and Director of the Stony Brook University Cancer Center, was formally installed as the Joel Strum Kenny Professor in Cancer Research during a Stony Brook University Investiture Ceremony. The ceremony also recognized Stony Brook University Past President Shirley Strum Kenny and her husband, Robert W. Kenny, as the endowed professorship honors the legacy of their son, Joel Strum Kenny, a scholar, educator and rabbi, who lost his battle against leukemia.

"I am delighted to invest Dr. Yusuf Hannun as the Joel Strum Kenny Professor in Cancer Research," said Samuel L. Stanley Jr. MD, Stony Brook University President. "Dr. Hannun has made a huge mark on medicine as a researcher and educator and truly epitomizes the standard for an endowed professor. He has contributed to more than 500 scholarly publications with a remarkable impact factor, as 110 of his papers have been cited at least 110 times worldwide."

Endowed faculty positions are a hallmark of leading universities, the highest academic honor for faculty, and a lasting tribute to the donors who establish them. Dr. Hannun becomes the eighth officially invested member of Stony Brook's endowed faculty.

The Kenny Professorship, established in 2001, enables the University to recognize a world-class scholar and educator in the Department of Medicine. Holders of the Kenny Professorship are investigators in the field of cancer genetics, a burgeoning field essential to unlocking the mysteries of many forms of cancer. Future cancer research at Stony Brook underwritten by the Kenny Professorship will involve the most promising avenues of investigation in the search for the prevention of cancer and groundbreaking treatments.

"Dr. Yusuf Hannun brings a world of experience and insight as the Joel Strum Kenny Professor in Cancer Research," said Kenneth Kaushansky, MD, Senior Vice President of the Health Sciences and Dean of the School of Medicine. "He is a renowned physician-scientist whose research focuses on the lipid mediators of cancer cell signaling. His work has profoundly impacted cancer research, as well as research in neurobiology, inflammation and metabolism."

Dr. Kaushansky said that under Dr. Hannun's leadership, the Stony Brook University Cancer Center will reach new heights and create something new for Suffolk County: An internationally recognized cancer center where researchers work side-by-side with physicians to quickly transform scientific discoveries into the latest medical treatments for cancer patients. Keys to this development are Stony Brook Medicine's establishment of the Medical and Research Translation (MART) building, now under construction, and attaining National Cancer Institute (NCI) designation.

In his position, Dr. Hannun will build on the Cancer Center's existing strengths. He will expand clinical programs, more fully integrate research with clinical care, recruit new physicians and cancer investigators, spearhead facility expansion, and use his knowledge and experience to transform the Center into a basic and translational research hub.

"I am deeply honored to receive the Joel Strum Kenny Professorship in Cancer Research and am indebted to the many donors who created this endowed position," said Dr. Hannun, who is also Vice Dean of Cancer Medicine. "Stony Brook Medicine is undergoing a renaissance in its renewed focus on academic medicine, and we must deliver on our promise to innovate from bench to bedside."

Dr. Hannun explained that by building on the exceptional academic and medical strengths of Stony Brook University, including imaging, informatics, genomics, applied math, computational biology, chemical biology, basic biomedical sciences, and other disciplines, Stony Brook's multidisciplinary programs of excellence will be fortified to combat key cancers affecting millions and revolutionize care.

"All of us in the Cancer Center are committed wholly and completely to create medicines of the future that better treat and cure many forms of cancer," Dr. Hannun added. "We embrace this challenge in a difficult time when the federal government has scaled down funding to support cutting-edge research. How wonderful it is know that our donors have the vision and generosity to make our vital work possible."

In a special tribute to Joel Strum Kenny, President Stanley and Dr. Kaushansky presented Shirley Strum Kenny with flowers and a certificate to her and her husband, Robert Kenny, to commemorate their son's life and legacy.

They also recognized the donors who generously created the Joel Strum Kenny Professorship in Cancer Research, including Priscilla Knapp and the Knapp family, the Simons Foundation, Erwin and Pearl Staller, unanimous support from the Stony Brook Foundation Board of Trustees, and the Kenny family.

*As reported electronically by Stony Brook Medicine News on March 13, 2014*

## The Chief Medical Officer's Perspective

### Joseph H. Laver, MD, Professor of Pediatrics

It is my pleasure to introduce myself as the new Chief Medical Officer at Stony Brook **Medicine**.

I arrived here in September 2013 from St. Jude's Children Hospital in Tennessee, where I served as Executive Vice President and Clinical Director, and as Chief of St. Jude's clinical operations. In this position I headed the clinical care delivery and patient care quality and oversaw all clinical programs, including outside consulting physicians, nursing and clinical space, and supervised the planning and management of overall clinical systems and staff. Prior to joining St. Jude, I served as Chairman of the Department of Pediatrics and held the Jesse Ball DuPont Professorship in Pediatrics at Virginia Commonwealth University Medical Center. Overall, my career spans over 30 years of combined academic and administrative aspects of medicine. As a pediatric hematologist-oncologist and bone marrow trans-planter, I find it very rewarding to still practice medicine at the Cancer Center. I bring with me a firm commitment to patient safety and quality; the initiatives involved in this commitment will further lead to improvements in our clinical outcomes as we prepare for new delivery models through healthcare reform.

First, I am very thankful to my predecessor, Dr. Todd Griffin, who is the Chairman of the Department of Obstetrics, Gynecology, and Reproductive Medicine, and the Fellowship Director for Minimally Invasive and Robotic Surgery, who provided me with such a great

orientation of the job. In his article that appeared in this journal in August, 2013, he outlined what a Chief Medical Officer does; without repeating his outstanding description of the CMO's role, I'd like to share with you my own vision as the new CMO.

I envision SBUH to become one of the top ten hospitals in quality and accountability in the University Health System Consortium (UHC), a group of academic centers which developed quality benchmarks. In order to achieve that goal, we are in the process of developing a strategic plan in quality improvement. Our intent is to have clear priorities with a tactical plan to get there in five years. This will require full alignment of all parts of the organization at all levels. A quality curriculum will be developed in order to educate all professionals on the goals and objectives and the strategies to achieve them. I will share with you the metrics and progress as well as the challenges.

A centralized credentialing and performance evaluation system for physicians is also "under construction." Our intent is to have a system in place which continuously evaluates clinical performance and identifies weaknesses in real time. Hospital, ambulatory, and community doctors will be fully integrated under this system once operational. Our peer review process needs to be tied into this centralized system in order to fix problematic performances. For instance, credentialing should be reflecting proficiency and good out-

comes on the procedures the provider has privileges. With the leadership of our Department Chairs, we hope to have these initiatives completed by April and rolled out in July 2014.

An important aspect of clinical care is our patients' safety. We are assessing different systems that will give us better information and trends on issues that negatively affect our patients. This will require cooperation of different groups in our organization; nurses, residents, NPs, PAs, physicians, and administrators will need to work together to increase awareness and bring down barriers to patients' safety and quality of care. We need to engage all healthcare professionals to advance our organizational objectives and align all parts of the institution. I truly believe that this stepwise approach will result in better outcomes and improved patient satisfaction, as well as staff and faculty satisfaction.

I have an "open door" approach and answer emails within 24 hours. During the rollout of our strategic plan, I will share our goals with many different groups so we all will be working towards our common goal, providing our patients with the best possible care.





## Faculty Experiences at AAMC Conferences and Seminars

### **AAMC Mid-Career Women Faculty Professional Development Seminar**

**Allison McLarty, MD, Department of Surgery**

This was an outstanding seminar sponsored by the AAMC for mid-career women in medicine. 150 women at the Associate Professor or Associate Dean level from across the country gathered for this empowering experience. The reality of the paucity of women at the pinnacle of leadership in medicine was acknowledged. Barriers to promotion and career progression were frankly discussed. A comprehensive tool kit for effecting change and enhancing one's career was presented. Through a combination of lectures, break-out sessions, small group interactions and workshops, skills on team leadership, communication, mentoring, sponsorship, personal branding among others were introduced and refined. A presentation on funding of the Academic Mission provided a fundamental understanding of the financial considerations that drive an academic institution's decisions. Importantly, this seminar afforded us the opportunity to reflect on our career progress to date, and clarify our vision for our future. It also highlighted the handicap women in many ways impose on themselves and techniques for self-promotion rather than self-abasement. And finally it was an invaluable opportunity to network, learn from the differences and similarities of our peers and realize the power inherent in collaboration.

### **AAMC Early Career Development Seminar for Women Faculty**

**Jennifer Pynn, MD, Department of Pediatrics**

The AAMC held the Early Career Women Faculty Professional Development Seminar in Englewood, Colorado in July 2013. I had the privilege of attending this seminar which proved to be most beneficial to my future career development. The audience included female assistant professors, both physicians and scientists, from all areas of the country with the common goal of advancing to the associate professor level. The interactive lectures included topics such as 'Working Through Differences' which addressed how to deal with different personalities at work and 'Time Management and Organizational Skills' with an emphasis on how to efficiently handle email and paperwork in addition to how to deal with the frequent daily interruptions of the workday. Other topics included 'Managing Conflict', 'Challenges in Funding in Academia' and 'Leadership Presence and Communicating as a Leader' with an emphasis on 'Leading Like a Swan' as demonstrated by Gill Rider, president of the Chartered Institute of Personnel and Development. In addition, small group sessions were held on mentorship, creating a portfolio and academic promotion.

Overall, the seminar provided advice for career advancement and the opportunity for networking with women from around the country with similar concerns regarding how to advance their career while maintaining work-life balance. Etiquette was addressed as well and included how to dress, stand confidently, shake hands and introduce oneself. These sessions were held by Mary Mitchell, the president of the Mitchell Organization who has made appearances on CNN, Fox News and Good Morning America. She describes etiquette as 'the foundation of effective professional behavior, leadership development, and enhanced customer service.' In addition, an emphasis was always placed on finding time for relaxation and rejuvenation and the seminar provided attendees with Yoga, Zumba and writing classes during the 4-day conference.

The opportunity to participate in the Early Career Women Faculty Professional Development Seminar is one I would highly recommend to all who are confronted with the question 'how can I successfully advance my career?' The AAMC provides support, encouragement and guidance as we attempt to navigate through academia and progress as physicians, scientists and ultimately as women.

### **AAMC Minority Faculty Career Development Seminar**

**James Earl Davis, MD, Department of Pathology**

I found the Minority Faculty Development Workshop in New Orleans in September of 2013 to be a highly valuable experience. The speakers were excellent and the topics chosen were directly relevant to my professional career development. Small group sessions were also a nice feature of the workshop. The people I met were warm and welcoming. I would highly recommend this workshop to other minority physicians who are contemplating issues relating to career development.

## Conferences and Seminars

### **18th Annual National Hispanic Medical Association (NHMA)**

March 27-30, 2014

Marriott Wardman Park Hotel, Washington, DC

<http://www.nhmamd.org/>

### **AAMC Early Career Women Faculty Professional Development Seminar**

July 12-15, 2014

The Inverness Hotel and Conference Center, Englewood, Colorado"

<https://www.aamc.org/>

### **National Medical Association (NMA) Annual Convention and Scientific Assembly**

August 2-6, 2014

Honolulu, Hawaii

<http://www.nmanet.org/>

### **AAMC Minority Faculty Career Development Seminar**

September 5-8, 2014

Marriott Vancouver Pinnacle Downtown, Vancouver, British Columbia

<https://www.aamc.org/>

### **AAMC Mid-Career Women Faculty Professional Development Seminar**

December 6-9, 2014

AT&T Executive Education and Conference Center

The University of Texas at Austin, Austin, Texas

<https://www.aamc.org/>

*Please Note: The Office of Faculty Affairs & Faculty Development will reimburse up to \$2,000.00 for one faculty member to attend each one of these conferences/seminars Those interested need to apply for the seminars to the sponsoring organizations and get accepted. For support from the Office of Faculty Affairs and Faculty Development, interested faculty should submit to Dr. Meenakshi Singh: a CV along with a personal statement and letter of support from their Chair or Division Chief. These need to be submitted well in advance of the session.*

## UPCOMING EVENTS



- 3/19/14** Peer Mentoring Program  
Commencement Program  
4:00 p.m. - 7:00 p.m.  
HSC Galleria
- 4/23/14** Women in Medicine Research Day  
10:00 a.m. - 1:30 p.m.  
HSC Galleria
- 4/23/14** Faculty Networking Luncheon  
12:00 p.m. - 1:30 p.m.  
HSC Galleria
- 5/20/14** Faculty Awards Ceremony  
10:00 a.m. - 11:30 a.m.  
Hospital Lobby
- 5/28/14** Leaders in Medical Education  
Commencement Program  
4:00 p.m. - 7:00 p.m.  
HSC Galleria

*If you wish to contribute to one of our future issues please contact*