Chairman’s Message

I recently read a study published in the journal *Clinical Infectious Diseases* that I found quite interesting for reasons having to do with more than just the scientific basis of infectious diseases. The article was entitled “The Differences in Antibiotic Decision-Making Between Acute Surgical and Acute Medical Teams: An Ethnographic Study of Culture and Team Dynamics”, by E. Charani and colleagues (CID 2019; 69:12-20). This paper describes an ethnographic study, defined by the authors as “The study of people within the context in which they live and work.” It was observational, there was no randomization and it was performed in only a single medical center in the United Kingdom. Data were collected by a single observer and followed up by interviews with the individuals observed and were analyzed using methods appropriate for this type of study. The purpose of the study was to determine whether a variety of techniques would be required to successfully implement antimicrobial stewardship programs within a complex medical center, and so naturally much of the focus was on the use of antimicrobial agents.

The primary conclusions of the paper will be unsurprising to those of us aware of the commonly held notions regarding differences between medical and surgical practice. The medical team decision-making process was described as “collectivist”, meaning that it involved discussions between a range of individuals, including the primary team (attending and trainees, pharmacists, infectious diseases consultants). Input was solicited from all members of the team. The regular input of the pharmacist was seen as valuable and often led to narrowing of regimens or shortening of antibiotic courses. The surgical team, in contrast, was seen as more vertical, with the primary surgeon making decisions and the rest of the team carrying them out. Decisions by the surgical team were focused more on the intervention than the medical management, with a heavy emphasis on prevention of infection. Antimicrobials were started more frequently without discussion or microbiological justification, and little attention was paid to shortening the course.

There were important differences in how the two teams perceived time. The surgeons felt pressed for time, needing to complete their rounds quickly because they practiced in three locations (wards, clinic and OR). As such, once ward rounds were completed, much of their communication came through text messaging, precluding significant discussion or real-time input from other specialties. Such communication methods limit the ability to take new data into account, consider alternate perspectives or change course. The medical team, in contrast, was focused primarily on a single ward, much like the Med B service in our residency. The pharmacist was present.
regularly, as was the infectious diseases consultant. The authors concluded that successful antimicrobial stewardship programs will need to take into account the different ways in which internists and surgeons practice if they are to be effective. Despite its methodological limitations, I found this to be a very interesting study.

I am proud to be an internist, counted among the physicians characterized as “collectivist”, who prefer to discuss the whole patient, take input from experts and make careful, considered decisions. I think we can all agree that thoughtful consideration of multiple inputs is best for patient care. However, the authors noted a potential negative side to this phenotype. They found that the internists were reluctant to change antimicrobial choices made in the emergency room, most of which were made without having the benefit of observing the course of the disease. The ER physicians were understandably wary of failing to give antibiotics in a timely manner to a patient who could have sepsis. The authors noted a reluctance on the part of the internists to discontinue antibiotics, even if the patient was rapidly improving and there was no laboratory evidence of an infection that would respond to antimicrobial therapy. It was interesting that they found no such reluctance to change ER physicians’ recommendations on treatment of non-infection-related diagnoses such as hypertension, anticoagulation or analgesics. The authors considered the possibility that the “collectivist” nature of our practice inhibits us from making decisions contrary to a previous physician’s decisions. I think it is more likely that the willingness to change therapy in these other areas involves the reliability of the physical diagnosis and laboratory data in these syndromes. Infections are often treated empirically, without the confident precision of measurement to guide decision-making. However, I agree with the point that we should be much more willing to narrow or discontinue antibiotics when patients are improving and the clinical picture does not support a serious bacterial infection, especially since most standard treatment durations are not based on compelling data.

I think this study also serves as a very useful reminder to all of us that the perceived and real pressures we feel in the hospital have a definable impact on the way that we practice. In particular, we should not fall into the trap of assuming that our surgical colleagues have days, pressures, or patients that are similar to ours. Moreover, their natural interest in the pathophysiology that we hold dear is limited, as is ours in the technical aspects of surgical interventions. If the patients in our hospitals are to get the very best care, we all need to spend our time focused on what we do best. So, the next time a surgical colleague appears to lack enthusiasm for discussing the intricacies of glucose control or antimicrobial spectra, give her a break and offer assistance readily. That little bit of grace may come in handy the next time you need help with a line! We are all colleagues with skills to share. Our patients will undoubtedly be the beneficiaries of such sharing and collaboration.

Thomas Ollila Joins Division of Hematology and Oncology; Organizes Fundraising Bike Ride

Thomas A. Ollila, MD recently joined the Division of Hematology and Oncology as a Hematologist/Oncologist at the Lifespan Cancer Institute. He earned his medical degree from Drexel University College of Medicine, and completed his residency, as well as a year as Chief Resident, in internal medicine and fellowship in hematology/oncology at Rhode Island Hospital.

Dr. Ollila also recently organized the first annual “Tour de Rhody”, a fundraising bike ride to support The Brown University Oncology Research Group (BrUOG). The event, held in September, was hugely successful, attracting nearly 100 riders and raising over $17,000.

The Brown University Oncology Research Group (BrUOG) was created in 1994 to coordinate clinical cancer research for Brown’s affiliated hospitals and Alpert Medical School faculty. BrUOG’s main mission is to improve cancer care through the implementation of innovative, multidisciplinary cancer clinical trials.

The trials sponsored by BrUOG investigate novel, cutting-edge applications of chemotherapy, biologic agents and other cancer treatments. These trials are unique because they are investigator-initiated—conceptualized by practicing physicians, not by pharmaceutical companies – and have led to the national adoption of protocols for treating many types of cancer including small scale lung cancer, rectal cancer and pancreatic cancer, as well as personalized treatment for breast cancer.

Dr. Ollila’s research interests include translational and clinical outcomes in lymphoma as well as addressing opioid use in cancer patients and survivors. In 2018, he was given the Conquer Cancer Foundation Merit Award by the American Society of Clinical Oncology. He is a member of the Alpha Omega Alpha Medical Honors Society, the American Society of Hematology and the American Society of Clinical Oncology.
Faculty Honored with Beckwith Family Award for Outstanding Teaching

The Beckwith Family Research and Education Fund has been established at The Alpert Medical School through generous gifts to the endowment from the Beckwith Family Foundation.

The endowment Fund is used to support the education and research mission of the Department of Medicine, with an emphasis on the education and training of medical residents.

Each year the Fund supports the presentation of the Annual Brown Medical School Department of Medicine Beckwith Family Award for Outstanding Teaching. This award is to recognize superb teaching by its faculty. The recipients are nominated and chosen by students, residents, physicians, program and course directors in the Brown Medical School Department of Medicine. Each winner is presented with a plaque and a cash prize.

Douglas Burtt, MD
Clinical Assistant Professor of Medicine

Angela Caliendo, MD, PhD
Professor of Medicine

Colleen Kelly, MD
Associate Professor of Medicine

Razib Khaund, MD
Clinical Assistant Professor of Medicine

Victor Shin, MD
Assistant Professor Medicine, Clinician Educator

Mindy Sobota, MD
Associate Professor of Medicine, Clinical Educator

Rounds Honored at ATS Conference

Sharon Rounds, MD, of the Pulmonary/Critical Care division at the VA Medical Center, was honored with the Breathing for Life Award at the 2019 American Thoracic Society International Conference. The award is the highest honor given by the ATS Foundation for philanthropy, scientific achievement, and commitment to mentorship.

As ATS president in 2004-05, Dr. Rounds championed the formation of the ATS Foundation. In addition to being one of the most generous supporters of the Foundation, she served on the Foundation’s board from 2012 until 2018.

At that same meeting, Rounds also received the Robert F. Grover Prize “For outstanding contributions to the study of the effects of hypoxia and high altitude on the pulmonary circulation.” Dr. Grover had a career-long interest in this field and made many contributions to that area.

A distinguished researcher on pulmonary circulation, Dr. Rounds has supported the Foundation’s efforts to advance the careers of promising young investigators. She chaired the ATS committee that selects grant recipients.

As an educator, Dr Rounds has been recognized more than a dozen times for her excellence in teaching and mentorship, including receiving the Elizabeth A. Rich, MD, Award from the ATS. As a clinician, she has been listed in Best Doctors in America for 25 years.

Throughout her career, she has pressed for more opportunities for women and minorities in the fields of pulmonary, critical care, and sleep medicine, both at Brown and the ATS. Along with Alvin Thomas, MD, and Estelle Gauda, MD, she created the ATS Minority Trainee Development Scholarships program two decades ago. At Brown, she is co-principal investigator of the CardioPulmonary Vascular Biology Center for Biomedical Research Excellence, and also serves as director of the AdvanceCTR Pilot Projects program, both of which aim to catalyze innovative research by providing seed funding for young investigators.
Resident Research Track Launches

The Brown Resident Research Track aims to provide structured support to internal medicine residents who wish to advance their research training by performing high-quality investigation and scholarship with the intent to develop original peer-reviewed publications and presentations. The Track supports participants as they establish and develop meaningful research mentorship, provides training in key elements of clinical research methodology and mobilizes university and departmental resources to support resident research. All members of the Brown/Rhode Island Hospital IM Categorical program, the GIM/Primary care program and the Medicine-Pediatric program are eligible to participate after completing their internship year. Interested individuals are encouraged to apply by May 1st of their intern year, identifying a research mentor, describing research interests, and explaining how participation in the research track aligns with their professional goals.

The Track consists of an 18-24-month comprehensive research experience during which time residents will develop and implement a research plan under a research mentor. There will be approximately 10 required workshops during the first year of participation which will cover a range of important topics (methodology, biostatistics, medical writing etc.). Participants will be required to schedule at least two research electives over the course of the 18-24-month experience which residents will use to execute their research plan. Participants will also be encouraged to participate in scholarly activities at Brown including BRIAR (Brown Residents Interested in Advancing Research) events, noon-conferences (one per year) and journal club (one per year). At the end of this time frame, participants will be expected to complete a capstone research project that will include a peer-reviewed publication and presentation at a local, regional, national or international conference. Those participants who successfully participate in the required activities and complete the capstone project, will receive a certificate highlighting their participation in the track.

News from the Infectious Diseases Division

Awards and Honors for Faculty

**Timothy Flanigan MD**, from the Infectious Diseases division, received The Milton Hamolsky Lifetime Achievement Award at the Annual ACP Meeting for the Rhode Island Chapter on March 20th, 2019. The award is given for lifetime achievement in clinical medicine with outstanding excellence in teaching, research, and administrative leadership.

Dr. Flanigan directed The Miriam Hospital Immunology Center in the early years (under the guidance of Dr. Charles Carpenter). The Immunology Center is the largest HIV care provider between New York and Boston and has played a key role in the dramatic decline in morbidity and mortality from HIV and a decrease in new infections over the last 10 years.

**Erica Hardy, MD, MA, MMSc**, was presented with the Visionary Voice Award from The National Sexual Violence Resource Center (NSVRC), at an event hosted by Day One. The Rhode Island Statewide Task Force to Address Adult Sexual Assault selected Dr. Hardy for her work in providing care and follow-up care for women who have suffered sexual assault.

Dr. Hardy has served as a member of Rhode Island’s Adult Sexual Assault (SA) Task Force since 2016 and leads the Medical Subcommittee. As chair of the Medical Subcommittee, Dr. Hardy has been helping the Task Force meet its objectives by offering expertise from a medical standpoint on how to provide trauma-informed care to victims of sexual assault.

Dr. Hardy completed a residency in medicine and pediatrics at Brown University in the Rhode Island Hospital/Hasbro Children’s Hospital program. She went on to complete an infectious disease fellowship at Beth Israel Deaconess Medical Center in Boston. During fellowship, she completed a master’s of medical science at Harvard Medical School. In addition, she holds a master’s degree in philosophy with a concentration in medical ethics from the University of Maryland.

Dr. Hardy’s clinical and research interests include infectious disease issues in women, including congenital infection, complex sexually transmitted infections, as well as the medical care and follow-up of survivors of sexual assault. She has grant funding from the Center for AIDS Research to explore the female genital tract immunology after sexual assault, as well as vaginal microbiome in women initiating long-acting contraception.

**Dr. Eleftherios Mylonakis**, Director of the Division of Infectious Diseases, and **Dr. Louis Rice**, Chair of the Department of Medicine, were elected members of the Association of American Physicians. Members are elected in recognition of their achievements in the pursuit of medical knowledge, advancement of basic and clinical science and the application of these discoveries to clinical medicine. Mylonakis studies how microbes infect non-human hosts and the hosts’ immune responses, as well as searching for new types of antibiotics. Rice also studies antibiotic resistance, focusing on how resistance spreads among bacteria.
New Hire in Infectious Diseases Division

Ralph Rogers, MD is an infectious disease physician with a non-traditional background. He received his undergraduate degree in computer science from the US Naval Academy and then served in the US Navy as a helicopter pilot. After leaving the Navy, he worked for several years in educational software development (and as a bicycle mechanic). Switching gears again and finally discovering his passion, he began to pursue a career in medicine and subsequently received his doctorate in medicine from Brown University. His post-doctoral training has included an internship and residency in Internal Medicine as well a fellowship in Infectious Diseases, both also here at Brown University.

New Hires at the Cardiovascular Institute

**Amy French, MD**

Is a board-certified cardiologist with expertise in advanced heart failure at the Lifespan Cardiovascular Institute at Rhode Island, The Miriam, and Newport hospitals. She earned her medical degree from Tufts University School of Medicine and completed her residency at Tufts Medical Center. Her cardiovascular medicine fellowship was completed at Boston Medical Center.

**Franklin Schneider, MD**

Is a board-certified cardiologist with expertise in cardiac imaging at the Lifespan Cardiovascular Institute at Rhode Island, The Miriam, and Newport hospitals. He received his medical degree from Tufts University School of Medicine. He completed is internal medicine residency at Faulkner Hospital. His cardiovascular medicine fellowship was completed at Lahey Clinic Medical Center.

**Mitchel Sklar, MD**

Is a board-certified interventionalist at the Lifespan Cardiovascular Institute at Rhode Island, The Miriam, and Newport hospitals. He received his medical degree from Georgetown University. He completed his internal medicine residency, cardiology and coronary interventions fellowships at Georgetown University Hospital.

Honors and Accomplishments for CVI Faculty

**Brian Abbott, MD** has accepted the position of Associate Chief, Clinical Excellence and Operations. Since coming to Brown in 2004, Dr. Abbott has served as the Medical Director of the Coronary and Intermediate Coronary Care Units and most recently the Director of Cardiovascular Imaging. Being a part of various quality and advisory committees, demonstrates his commitment to clinical excellence.

**Herbert D. Aronow, MD** was announced as president-elect at the The Society for Vascular Medicine’s annual Scientific Sessions conference.

**Katharine French, MD** has been appointed the Associate Program Director of the Clinical Cardiology Fellowship Program at Brown. She is a graduate of the program and an attending with the Lifespan Cardiovascular Institute.

**Christopher Song, MD** will be the new Director of Cardiovascular Imaging. Dr. Song joined CVI in 2015 after completing his BIDMC fellowship focused on imaging. He has showed his leadership and commitment with recent roles as Chair of the Cardiac Arrest Committee and Member of the Quality Improvement and Measurement Committee at RI Hospital as well as the non-invasive representative of the CVI Quality Steering Committee.

**Joseph Wyllie, DO** was the recipient of the 2019 Raymon S. Riley, MD, Teaching Award, which is chosen annually by the fellows of the Lifespan Cardiovascular Institute.
New Hires in the Division of General Internal Medicine

Michelle Breda, MD joined the Division of General Internal Medicine in October. Dr. Breda is an attending on the teaching service of the inpatient general internal medicine wards, as well as a preceptor in the Center for Primary Care. She also sees primary care patients in East Greenwich and East Providence. Dr. Breda grew up in Northern New Jersey. After spending her college years in Canada at McGill University, she returned to New Jersey to attend medical school as a member of the charter class of Cooper Medical School of Rowan University. Her experiences with the Camden community confirmed her interest in primary care. She then found her way to Rhode Island where she completed the Brown General Internal Medicine residency program at Rhode Island Hospital in 2019. Dr. Breda is thrilled to stay in Providence to continue working alongside her role models in the Division of General Internal Medicine.

Alisha Crowley, MD joined the Division of General Internal Medicine in July. Dr. Crowley is an attending on the teaching service of the inpatient general internal medicine wards, as well as a preceptor in the Center for Primary Care. Dr. Crowley also sees primary care patients in East Providence. Dr. Crowley received her undergraduate degree from the University of Maryland Baltimore County in 2010, Medical Degree from Chicago Medical School at Rosalind Franklin University of Medicine and Science in 2016, and completed the Brown General Internal Medicine residency program at Rhode Island Hospital in 2019. Dr. Crowley’s areas of clinical interest include LGBT health, substance abuse treatment, and the care of the psychiatrically complex.

Kate Mayans, MD joined the Division of General Internal Medicine in August. Dr. Mayans is an attending on the teaching service of the inpatient general internal medicine wards, as well as a preceptor in the Center for Primary Care. Dr. Mayans also sees primary care patients in East Greenwich. Dr. Mayans grew up in New Jersey and studied Molecular Biophysics and Biochemistry at Yale University from 2008-2012. She went on to attend Mount Sinai Medical School from 2012-2016 and completed the Brown Internal Medicine Residency at Rhode Island Hospital in 2019. She received the John B. Murphy Award in Primary Care at graduation, given to a resident who is entering full-time primary care practice and who embodies the principles of generalism.

Catherine Trimbur, MD, MPH joined the Division of General Internal Medicine in July. Dr. Trimbur is an attending on the palliative care inpatient service, as well as a preceptor and primary care physician in the Center for Primary Care. Dr. Trimbur received her undergraduate degree from Brown University in 2003, a Master’s in Public Health at the Columbia University Mailman School of Public Health in New York City in 2007, and a Medical Degree from the University of Rochester School of Medicine and Dentistry in 2012. She completed the Internal Medicine Residency Program at the Montefiore Medical Center/Einstein School of Medicine in 2015 and a fellowship in Palliative Care and Hospice Medicine from the University of California- San Francisco in 2016.

Carrie Wunsch, MD joined the Division of General Internal Medicine in September. Dr. Wunsch is an attending on the inpatient general medicine wards and a primary care physician and preceptor at the Center for Primary Care. Dr. Wunsch also sees patients at the Miriam Infectious Diseases and Immunology Clinic. She received her medical degree from Brown Alpert Medical School in 2016 and completed her residency training at Brigham and Women’s Hospital in Boston in 2019. Her interests include HIV primary care, health care and support for patients involved in the criminal justice system and medical education. Recent collaborative projects include the development of a resident curriculum focused on health care for justice involved patients at Brigham and Women’s, a workshop introducing internists and residents to caring for patients with a history of incarceration and a workshop for rising junior residents designed to bolster leadership skills and ease the transition from PGY-1 to PGY-2.
Multi-Center Bias Reduction Project Enters Second Phase

The Brown Department of Medicine is one of 20 academic Departments of Medicine across the country participating in a multi-center, NIH-supported, IRB-approved project called “Bias Reduction in Internal Medicine” (BRIM). This 2-year project is led by Molly Carnes, MD, MS, Professor, Departments of Medicine, Psychiatry, and Industrial & Systems Engineering at the University of Wisconsin-Madison.

The goal of BRIM is to raise faculty awareness regarding bias in our work as physicians and educators by applying a validated educational intervention entitled “Breaking the Bias Habit™” with a goal of reducing such bias. By raising awareness, particularly regarding bias based on gender, race, ethnicity and other factors, BRIM hopes to demonstrate an alteration in behaviors with respect to recruitment, opportunity, salary, promotion and other factors within our Department. Our outcomes will be a change in attitudes and eventually, an improvement in member recruitment, retention and satisfaction.

As part of this project, several Department of Medicine divisions and their faculty participated in Phase I workshops led by the Wisconsin faculty over the past Spring. Since that time, several Department of Medicine faculty have been trained as Local BRIM Implementers and have begun conducting the same educational workshops for their colleagues in divisions during Phase II, which has begun at the time of this writing and will continue through October 2019.

By training our local faculty Implementers (who have spent many hours reviewing bias literature and practicing the workshop delivery), our Department will have local talent for ongoing education, which can be applied to residents, new faculty, other Departments and as a “refresher” for faculty who have already had the original curriculum. We are very excited to be nearing the completion of this important aspect of our work as clinicians, educators and researchers. Please address any questions to Dominick Tammaro, MD, who is serving as the Lead Site Coordinator for this exciting project.

News from the Division of General Internal Medicine

Kelly McGarry, MD began her four year term as governor of the Rhode Island Chapter of the American College of Physicians. Dr. McGarry, promoted to Professor in the Teacher-Scholar Track, is a graduate of Brown University and Yale Medical School, followed by Internship, Residency and Chief Residency at Rhode Island Hospital. She has been an Associate Program Director for the Internal Medicine Residency here at the Lifespan Hospitals since 1998 and the Director of the Women’s Health Track and the General Internal Medicine Residency since 2007.

In addition to her residency roles, Dr. McGarry currently serves as the Interim Division Director for General Internal Medicine. Dr. McGarry’s outstanding skills as an educator have been recognized by many, she has received the Dean’s Excellence in Teaching Award in 2009 and 2011, she was twice nominated for the Milton W. Hamolsky Outstanding Physician of the Year Award (2011, 2013) and was chosen by the Class of 2012 as the Faculty Speaker at Commencement.

Kate Cahill, MD assumed the role of Clerkship Director this Spring. Dr. Cahill joined the Division of General Internal Medicine in 2010 after completing three years of Internal Medicine training followed by a year as Chief Resident in the Brown General Internal Medicine residency program at Rhode Island Hospital. Dr. Cahill’s passion is in medical education. She co-directs our High Value Care Curriculum and our Clinician-Educator Track. She has presented numerous abstracts, posters and oral presentations in the areas of medical education, peer mentoring, helping learners in need and bias and discrimination in medicine. Dr. Cahill has served as the Ambulatory Site Director for the Core Clerkship in Internal Medicine since 2013, ideal preparation for the broader responsibilities she will now be assuming.

Jael Rodriguez, MD was recently recognized with the Mentorship Award in Diversity and Equity in Medicine (MADE), as part of the Dean’s Excellence in Teaching Awards. The award recognized faculty members for their extraordinary dedication to mentoring medical students and residents in the promotion of diversity, inclusion and health equity.
Meet the Internal Medicine Chief Residents

Yetunde Asiedu, MD

**Hometown:** West Haven, Connecticut  
**Undergrad:** University of Connecticut  
**Medical School:** University of Connecticut School of Medicine

**Why I came to Brown:** On my interview day I was overwhelmed by the sense that Brown is where I belonged. It was evident to me that the culture at Brown was one which fostered professional growth and emphasized the importance of life outside of medicine. In my time at Brown I have come to find that the leadership is kind, approachable and supportive, and my co-residents have become part of my extended family. It has been an honor to train at such a wonderful program.

**Professional Interests:** Primary Care, Women’s Health

**Fun fact most people don’t know about me is:** I love road trips! I once drove a box truck from Connecticut to Las Vegas.

Kathryn DeCarli, MD

**Undergrad:** Tufts University, Medford MA  
**Masters in Bioethics:** University of Pennsylvania, Philadelphia PA  
**Medical School:** University of Massachusetts, Worcester MA

**Why I came to Brown:** I was looking for a residency program that offers rigorous training in a supportive environment. On my interview day, I was struck by the transparency, teamwork, and dedication of Brown’s leadership. The program directors truly support the residents, both professionally and personally. Whether you want to pursue primary care, subspecialty training, or are still exploring your career options, this program helps you navigate your path and discover more about who you want to be as a doctor. You will be prepared to think as an internist in any setting and gain a network of wonderful colleagues.

**Professional interests:** Medical education, clinical decision making

**Fun fact most people don’t know about me is:** My husband and I performed together in a street percussion group before we started dating.

Shane Greene, MD

**Hometown:** Burlington, VT  
**Undergrad:** University of Chicago  
**Medical School:** University of Vermont College of Medicine

**Why I came to Brown:** Brown stood out on the interview trail because the people here seemed genuinely kind, supportive, and interested in resident education. After three years I can attest that this first impression was an accurate representation of how things are here. The attendings here work hard to foster a culture of intellectual curiosity and my co-residents have always been supportive and fun to work with. Moreover, the quality of life here is remarkable. My wife and I were able to buy a house with a backyard that is only a 10 minute commute from the hospital. Providence has all the amenities of a major metropolis, like excellent restaurants and museums, without the struggles of a larger city. I’m excited to be able to spend another year here as one of the chief residents!

**Professional Interests:** Medical education, clinical decision making

**Fun fact most people don’t know about me is:** My undergraduate degree is in philosophy, so I graduated with absolutely no marketable skills. I spent about five years working on farms, working in coffee shops, and going on long bike rides before I decided to go into medicine. I could probably still make a pretty impressive cortado if given the opportunity!

Wei Sum Li, MD

**Hometown:** Westford, MA  
**Undergrad:** Brandeis University  
**Medical School:** University of Massachusetts Medical School

**Why I came to Brown:** I love the people here. From my first moments on the interview trail, I was struck by how earnestly warm and collegial the program felt. I immediately felt an emphasis on development both as an outstanding physician and as a human. Everyday, I am amazed by how brilliant and impressive my colleagues are while also remaining approachable and compassionate.

**Why I came to Brown:** The challenging and inspiring work has really fostered my growth, but it has only been possible on a foundation of extremely supportive program leadership, staff, and co-residents.

**Rhode Island is also is such a fun, unique location to embark on residency training. With amazing restaurants, diverse populations, and simultaneously “small town and city” feel, it’s a lovely place to live and work.**
**Professional Interests:** Addiction Medicine, General Internal Medicine, Medical Education, Primary Care, Underserved Populations

**Fun fact most people don't know about me is:** I was once a nationally competitive artistic roller skater (like ice skating on quad wheels). I also love to travel and have visited 6 continents so far. Plans to get to Antarctica are underway!

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**Breton Roussel, MD**

**Hometown:** Ivoryton, CT  
**Undergrad:** Providence College, Providence, RI  
**Medical School:** Rutgers, Robert Wood Johnson Medical School, New Brunswick, NJ

**Why I came to Brown:** At Brown I found a family of providers who advocate tirelessly for their patients AND each other. The culture of collegiality and resident support permeates each part of the day from morning conference to rounds. It is an added bonus to practice in a blossoming culinary city situated on some of New England’s most beautiful coastline. This is a special place to grow as a provider and I am elated to remain with the Brown Internal Medicine family as a chief resident.

**Professional Interests:** GI Malignancy, Goals of Care Counseling, Medical Education

**Fun fact most people don't know about me:** I was previously in a funk/ska cover band.

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**Development of Division Champions Aims to Improve Feedback**

Being an educator is both highly rewarding and highly challenging. Faculty development allows the rewards to be greater and the challenges less, but time and access are often a great barrier to participation. Jennifer Jeremiah MD, of the Division of General Internal Medicine was recently named Director of Faculty Development in Clinical Education and is bringing a unique faculty development opportunity directly to each academic division, training “Division Education Champions” who can teach their colleagues to provide high quality feedback to learners.

Each division has its own education champion who knows the unique joys and challenges faculty face as they teach medical students, residents and fellows. Champions have completed a series of five interactive training sessions led by Dr. Jeremiah. Topics included: Milestones 101, Forming an Educational Alliance and Reducing Rater Error, Goals-make them SMART, Effective Evaluation and Helpful Feedback.

Champions will be sharing their experience with their colleagues, first through Feedback Road Shows, and then through additional targeted faculty development activities. Pulmonary, Geriatrics, Hematology/Oncology and Renal have already had their first Road Show. Champions will also be available for consultation, advice, support and brainstorming about teaching. Dr. Jeremiah hopes that through the creation of Division Education Champions, and through faculty development efforts specific to each division’s needs, the rewards for both educators and learners will be significant and sustained.

**Please welcome our Division Champions:**

- **Sean Fine MD** (Gastroenterology),
- **Kate French MD**, Cardiology,
- **Hussain Khawaja MD** (General Internal Medicine),
- **Sakeena Raza MD** (Geriatrics),
- **Sabrina Witherby MD** (Hematology/Oncology),
- **Curt Beckwith** (Infectious Diseases),
- **Lucia Larson MD** (OB Medicine),
- **Ed Stulik MD** (Primary Care),
- **Andrew Levinson MD** (Pulmonary),
- **Mathew Lynch MD** (Renal),
- **Joanne Cunha MD** (Rheumatology),
- **Emily Leveen MD**, (Veteran’s Administration Hospital)
Faculty and Residents Honored with Excellence in Teaching Award

The Dean’s Excellence in Teaching Awards Reception is held each June to recognize the dedicated Warren Alpert Medical School faculty and residents who are exceptional teachers and mentors.

- Tanya Ali, MD
- Douglas Burtt, MD
- Cheston Cunha, MD
- Julio Defilip-Draiiby, MD
- Pamela Egan, MD
- Timothy Flanigan, MD
- Andrew Foderaro, MD
- Nancy Freeman, MD
- Sarah Freeman, MD
- Paul Gordon, MD
- Susie Lee Hu, MD
- Zilla Hussain, MD
- Matthew Jankovich, MD
- Edward Keating, MD
- Brian Kimble, MD
- John Lonks, MD
- Christopher Luttman, MD
- Stephanie Maryeski, MD
- Drew Nagle, MD
- Linda Nici, MD
- John O’Bell, MD
- Athena Poppas, MD
- Kittichai Promrat, MD
- Vinay Rao, MD
- John Leonard Reagan, MD
- Rebecca Reece, MD
- Katherine Richman, MD
- Jay Schachne, MD
- Fred Schiffman, MD
- Mark Schleinitz, MD
- Vijairam Selvaraj, MD, MPH
- Philip Stockwell, MD
- Thomas Sepe, MD
- Russell Settipane, MD
- Angela Taber, MD
- Dominick Tammaro, MD
- Karen Tashima, MD
- Tovah Tripp, MD

Resident Honorees
- Sarah Bashiruddin, MD – General Internal Medicine (Lifespan)
- Kiersten French, MD – Internal Medicine (Lifespan)
- Dina Ibrahim, MD – Internal Medicine (Kent)
- Jozal Waroich, MD – Internal Medicine (Lifespan)

Recently Awarded Grants

- **Gaurav Choudhary MD** (Cardiology), received $1,441,624 for “Role of Endothelial Anoctamin-1 in Pulmonary Arterial Hypertension,” an R01 award from the National Heart, Lung and Blood Institute.

- **Susan Cu-Uvin MD** (Infectious Diseases), The Miriam Hospital (TMH), received $196,885 for “Brown/Moi Training Program for the Prevention of HIV Related Cervical Cancer.” The grant is a subaward through Brown University from the Fogarty International Center.

- **Wafik S. El-Deiry MD** (Hematology/Oncology & Pathology), received $1,911,471 for “ONC201/TIC10 Anti-tumor Effect Through Regulation of the TRAIL pathway,” an R01 award from the National Cancer Institute.

- **Adam E. M. Eltorai**, and **Jason M. Aliotta MD**, Pulmonary, Critical Care & Sleep Medicine, received $190,538.10 for “Evaluating the utilization and effectiveness of breath-actuated nebulizers in acute COPD exacerbations” from the Monaghan Medical Corporation.

- **Sebhat Erogu, Ph.D.**, (Cardiology) and The Ocean State Research Institute received $25,000 from the Rhode Island Foundation for “Cardiopulmonary Fitness, Premature Vascular Aging and Subclinical Cardiovascular Disease in HIV,” and was also awarded a Developmental Grant for a one year pilot study by Centers for AIDS research titled “Epigenetic markers of aging in HIV and HIV-associated cardiac dysfunction.”

- **Heather Gaydos MD**, (Infectious Disease), TMH, received $189,300 for “Community Based Prison Re-entry Collaboration.” The grant is a subaward through Amos House from the US Department of Justice.

- **Rami Kantor MD**, (Infectious Diseases), TMH, received $3,504,061 for “Addressing HIV Drug Resistance Research Gaps in a Cohort of Perinatally Infected Kenyan Children and Adolescents” from the NIAID.

- **Mitchell Levy MD**, (Pulmonary), RIH, received $100,000 for “Identification of biologic marker profiles that predispose patients to acute lung injury during Fluid Resuscitation for Sepsis” from BPI.

- **Ulrike Mende MD**, (Cardiology), RIH, received $12,577 for “Regulation of Mitochondrial Calcium Uniporter in the Heart.” The grant is a subaward through the University of Minnesota from the NHLBI.

- **Bharat Ramratnam MD** (Infectious Diseases), RIH, received $1,234,886 for “Next-generation Extracellular Vesicle Biomarkers to Target Central Nervous System Reservoirs of HIV.” The grant is a subaward through Johns Hopkins University from NIAID.

- **Louis Rice MD**, (Infectious Diseases), RIH, received $3,650,918 for “Mechanism and Activity of Beta-lactam Resistant Enzymes in E. Faecium and E. Faecalis” from NIAID.

- **Katherine Sharkey MD**, (Pulmonary), RIH, received $8,960 for “Sleep Stress, Depressive Symptoms and Other Determinants of Infant Feeding” from Brown.

- **Karen Tashima MD** (Infectious Diseases), TMH, received $290,334 for “Multi-center, Randomized, Open-label Trial to Evaluate the Efficacy of Oral Fosfomycin versus Oral Levofloxacin Strategies in Complicated Urinary Tract Infections.” The grant is a subaward through Duke University Medical Center from NIAID.

- **Sicheng Wen MD** (Pulmonary), RIH, received $25,000 for “Effect of Moveable Niche Vesicles on the Development and Mitigation of Bone Marrow” from RIF.

- **Rahul Vanjani, MD**, (General Internal Medicine), RIH, received $4,700 for “Bridging from Waiver to Practice: Enhancing Student, Resident, and Provider Education on the Neurobiological and Psychosocial Aspects of Addiction” from the Rhode Island Department of Health. He also received $68,000 for “HospitalLink: Bridging Patients with Opioid Use Disorder from Inpatient to Primary Care” from the City of Providence.

- **Wen-Chih Wu, MD** (Cardiology) received a $35,120 VA BLR&D award for “Million Veterans Program gamma project” and also received a $108,400 VA HSR&D award for “Improving Outcomes in Veterans with Heart Failure and Chronic Kidney Disease”
Brown Physicians, Inc. Awards Academic Assessment Grants

In 2019, Brown Physicians, Inc. began awarding Academic Assessment Grants. This competitive program supports hypothesis driven research by our faculty. Ten physicians from the Department of Medicine received research awards from Brown Physicians Incorporated (BPI) in July.

BPI is comprised of six medical foundations (Brown Dermatology, Brown Emergency Medicine, Brown Medicine, Brown Neurology, Brown Urology and University Surgical Associates) and is committed to advancing science and medicine through its grant program. Please join us in congratulating:

Michelle Anvar, MD (GIM) : Brown Medicine Diabetes Initiative in Primary Care

Christopher Azzoli, MD (Hematology/Oncology) : Plasma and saliva exosome isolation and analysis to detect immune-mediated efficacy of immune checkpoint inhibitor therapy in patients with advanced lung cancer

Sevdenur Cizginer, MD, MPH (Geriatrics and Palliative Care) : Role of iron in Perioperative Cognitive Disorders: A multidisciplinary feasibility study

Erika D’Agata, MD, MPH (Infectious Diseases) : Antimicrobial Resistance among Helicobacter Pylori and Treatment Failure

Dimitrios Farmakiotis, MD, FACP (Infectious Diseases): Brown Registry to Address Unanswered Questions in Transplant Immunology and Infectious Diseases

Sean Fine, MD (Gastroenterology) : MANPURSE

Keith Corl, MD (Pulmonary, Critical Care and Sleep Medicine) : Identification of Biologic Marker Profiles that Predispose Patients to Acute Lung Injury during Fluid Resuscitation for Sepsis

Gerard Nau, MD, PhD (Infectious Diseases) : Francisella Tularensis as an Anti-leukemia Therapy

Ankur Shah, MD (Kidney Disease and Hypertension): Erythropoetin Stewardship Program

Corey Ventetuolo, MD, MS (Pulmonary, Critical Care and Sleep Medicine) : The effects of left atrial appendage closure on natriuretic peptide levels and cardiac filling pressures"

Faculty Appointments
February 1 – August 31, 2019

The Miriam Hospital:
Denise Fernandes, MD, Assistant Professor, Clinician Educator, General Internal Medicine
Ameya Hodarkar, MD, Clinical Assistant Professor, Endocrinology
Kun Yang, MD, Assistant Professor, Clinician Educator, General Internal Medicine

Kent Hospital:
Eric Berthiaume, MD, Clinical Assistant Professor, Gastroenterology
Charles Cronin, III, MD, Assistant Professor, Clinician Educator, General Internal Medicine
Naveed Rana, MD, Assistant Professor, Clinician Educator, Hematology/Oncology

Newport Hospital:
Eric Wright, MD, Clinical Assistant Professor, General Internal Medicine

Rhode Island Hospital:
Nishi Dedania, MD, Assistant Professor, Clinician Educator, General Internal Medicine
Andre DeSouza, MD, Assistant Professor, Hematology/Oncology
Sara Geffert, MD, Assistant Professor, Clinician Educator, Infectious Disease
Euy-Myong Jeong, PhD, Assistant Professor (Research), Hematology/Oncology
Eui Young So, PhD, Instructor (Research), Hematology/Oncology

Other:
Lauren DeLeon, MD, Clinical Assistant Professor, General Internal Medicine
Alexander Diaz de VillalVilla, MD, Clinical Assistant Professor, General Internal Medicine
Denise Glickman, MD, Assistant Professor, Clinician Educator, General Internal Medicine
Tsewang Gyurmey, MD, Assistant Professor, General Internal Medicine
Zia Kidwai, MD, Clinical Assistant Professor, Cardiology
Susan Kim, MD, Clinical Assistant Professor, Hematology/Oncology
Harry Matelski, MD, Clinical Assistant Professor, Hematology/Oncology