Chairman’s Message

I was browsing through the New York Times the other day and came upon an interview with Ruth Simmons, the former President of Brown University and current President of Prairie View A & M University in Texas. She discussed many things, but I was particularly struck by her discussion of leadership. She said, in part: “I think of leadership as more of a disposition — the ability to step into a situation to learn about the history of the enterprise, the opportunities that it faces, the culture that exists and the people who are served by it. To look at all of that, to listen to stakeholders and then to think about how that enterprise or institution should best be served. There is no one model of leadership if you approach it that way. What I have tried to do wherever I go is to start where the institution is rather than try to import particularly rigid constructs from other places. In that sense, I think a leader is more than anything else a facilitator. A person who is able to come in to show a community a picture of what it is, to provide some insight into what it could be — how it could be different or improved perhaps — and then enlist the help of people who are there and others who support that institution in order to move forward together.”

This description impressed me as particularly apt in these times of increasing fascination with dominating personalities who seek to bend people to their will, either with brute force or with dissembling appeals to fear and resentment. Around the world these days, we see troubling examples of bullying being mistaken for leadership. Bullying is most certainly not leadership. As Dwight Eisenhower, no stranger to leadership in high intensity settings once said: “...You do not lead by hitting people over the head. Any damn fool can do that, but it’s usually called ‘assault’ — not ‘leadership.’ I’ll tell you what leadership is. It’s persuasion, and conciliation, and education, and patience. It’s long, slow, tough work. That’s the only kind of leadership I know, or believe in, or will practice.”

The concept of leader as facilitator, which is at the core of both quotes, is particularly appropriate as we consider our roles as doctors. A true facilitator first seeks to understand, to listen and only then, to act. Gone (thankfully) are the days of frankly paternalistic medicine where doctors made unilateral decisions for patients, including whether they should be informed about their diagnoses. Instead, we now understand that our role is to partner with our patients, to facilitate their understanding of their illness and the different options for moving forward to lead the life that they choose to lead. To be effective, we must first take the time to learn who they are, where they came from and where they wish to go. It’s our job to help them get there whenever possible.

We are also called upon to lead each time a colleague asks our advice on a patient care matter. We should always remember that there is no such thing as a stupid question, that our colleague would not be asking if she/he did not.

Continued on next page
need our help. This type of leading should
again be facilitative, with the goal to
educate and reassure. We also need to be
open to being taught by our colleagues
without letting our egos interfere with
our receptivity. Listening is always the
first step in true leadership. None of us is
so smart that we cannot learn something
from our colleagues.

Those of us privileged to hold traditional
“leadership” positions within our medical
centers or offices must take the concept
of leader as facilitator most seriously.
We must remain mindful that the most
important work is performed by the front-
line physicians, advanced care providers,
nurses, medical assistants, lab technicians,
custodians and many other individuals
who devote their working lives to ensuring
that our patients’ experiences are safe
and comforting. As leaders, we must
serve those at the bedside. As leaders,
our job is to facilitate their ability to get
this important work done. To do so, we
must listen, give their concerns a high
priority and use our positions to facilitate
their work. When resources are limited,
obstacles plentiful and choices difficult,
we should emulate Dwight Eisenhower
- educate, conciliate and persuade. We
should do this with the patience and grace
that our colleagues have earned by their
hard work and dedication to our mission.

A lot of leadership discussions focus on the
more assertive elements: setting a vision,
determining a strategy to achieve that
vision, and articulating plans. These are
important, but the final element is much
less assertive - a leader must ASK people
to follow her/him. While a leadership
title may be given, the leadership role is
earned. If the leader has truly listened and
understood the needs of the organization,
effectively communicated the case and
convinced people of the worthiness of the
goal, then smart people will get on board. If
not, well, as John Boehner, former Speaker
of the House of Representatives once said
as he was considering how to get a piece
of legislation passed: “A leader without
followers is just a guy out for a walk.”

McNicoll Receives Women’s Health
Council Award

The Women’s Health Council of Rhode Island held its 2017 conference, “Healthy
Aging in Women,” in November. The free event, sponsored by the Women’s Medicine
Collaborative and Lifespan Community Health Institute, took place at The Warren
Alpert Medical School of Brown University.

The conference began with the presentation of the second annual Karen Rosene
Montella SPARK Award for Innovation in Women’s Health, which recognizes providers
or organizations for their part in providing social, medical, and behavioral health care
to women and girls in Rhode Island.

This year, the SPARK Award went to Lynn McNicoll, MD,
FRCPC, AGSF, a geriatrician at Rhode Island and The
Miriam hospitals. Dr. McNicoll specializes in quality
improvement and improving care for hospitalized
seniors. Her nominator noted that Dr. McNicoll has
helped make The Miriam Hospital the most geriatric-
friendly hospital in the region and that she “has
demonstrated superior abilities in all areas of her
academic career - not only as a dedicated and empathic
physician, but also as an outstanding educator and
innovative quality improvement activist.”

McGarry Named ACP Chapter Governor

Congratulations to the American College of Physicians
Rhode Island Governor Elect, Kelly A. McGarry, MD, FACP.
She will start her four-year term as Governor in the Spring
of 2019. As Governor, Dr. McGarry will serve as the official
representative of the College for the Rhode Island Chapter,
providing a link between members at the local level and
leadership at the national level.

Dr. McGarry has been a member of the ACP for nearly
two decades, and a member of the Rhode Island Chapter
Executive Council since 2010.

On the National level, she has served as a mentor in the
American College of Physicians Mentoring Program for medical students, physicians in
training and early career physicians, as well as participating in a workshop for medical
students on getting through the Match process.

McGarry is currently the Program Director for the General Internal Medicine/Primary
Care residency program at Rhode Island Hospital. She has served as a Board Member
of the University Medicine Foundation, and on the RI Hospital Executive Committee in
2015. She is an ongoing mentor for the Women in Medicine Mentor-Mentee Program
at Alpert Medical School, and a Collaborative Faculty Member for the Women’s Health
in Emergency Care Fellowship.

McGarry’s areas of professional interest and expertise are Women’s Health; Medical
Education; LGBT Healthcare/Care of Vulnerable Populations

Continued from page 1
Cardiovascular Institute Recognized by IBM Watson

The Lifespan Cardiovascular Institute at Rhode Island Hospital was on the list of 50 Top Cardiovascular Hospitals for 2018 by IBM Watson Health.

The list identifies and recognizes the highest-performing cardiovascular service lines across the nation in clinical, operational, and financial areas, and honors those who find the best opportunities to deliver high-quality health care to their communities. The Cardiovascular Institute at Rhode Island Hospital was recognized as one of the top teaching hospitals with cardiovascular residency programs, and was noted as appearing on the list for four years. The CVI was judged on several criteria and performance measures, including clinical outcome measures, clinical process measures, and efficiency measures.

The list is available exclusively on the Modern Healthcare website.

New Hires in Division of Infectious Diseases

Donald Page Rice, Jr., MD

Dr. Rice joined the Division of Infectious Diseases in December, 2017 working at The Miriam Hospital and Rhode Island Hospital. He graduated in 2012 from Eastern Virginia Medical School. He completed an Internal Medicine residency at Lankenau Medical Center in Wynnewood, PA, followed by a fellowship in Infectious Diseases at the University of Connecticut Health Center in Farmington, CT. His clinical and research interests include HIV and HCV care, sexually transmitted infections, addiction medicine, and tropical medicine.

The Miriam Hospital Receives NIH Grant

The Miriam Hospital was recently awarded a National Institutes of Health grant to study an innovative opioid addiction treatment program serving the Rhode Island Department of Corrections.

The $215,157 federal grant will fund research into medication-assisted treatment for incarcerated individuals. It will be led by principal investigator Jody Rich, MD, an infectious diseases specialist at The Miriam and director of its Center for Prisoner Health and Human Rights.

The nation’s deadly opioid abuse problem was acknowledged October 26, when President Trump declared it a national public health emergency. The Department of Corrections program treats individuals diagnosed with opioid use disorder by substituting synthetic narcotics – methadone and buprenorphine (Suboxone) – to stave off withdrawal symptoms and reduce cravings. It also provides access to naltrexone (Vivitrol), which deters opioid abuse by blocking a narcotic-induced high. As they re-enter the community, participants are connected with providers of medication-assisted treatment to further decrease risks of relapse, overdose, and re-incarceration.

"People with opioid use disorder who leave the correctional setting without medications are among those at the highest risk for overdose and death," said Dr. Rich. “The comprehensive program developed at the Rhode Island Department of Corrections, in partnership with CODAC Behavioral Healthcare and others, is having and will continue to have a substantial impact on reducing overdose deaths in Rhode Island. This grant will allow this program to be optimized and replicated across the nation.”

Dr. Rich’s research team is an interdisciplinary collaboration between Lifespan, Brown University’s Center for Alcohol and Addiction Studies, the University of Rhode Island’s Academic Health Collaborative, and the University of North Carolina at Chapel Hill. UNC’s Lauren Brinkley-Rubinstein, PhD, is the lead co-investigator for the study and will oversee the qualitative component of this research.
Rami Kantor MD, Associate Professor of Medicine, was appointed Deputy Editor of the Journal of International AIDS Society for a 3-year term. The Journal of the International AIDS Society is an official open-access, peer-reviewed, medical journal of the International AIDS Society. It covers all aspects of research on HIV and AIDS and has a 2017 Impact Factor of 6.296. Dr. Kantor has been on the Editorial Board of the Journal since 2013, and has now been appointed as Deputy Editor. In this role, his responsibilities will include processing the review process of manuscripts within his expertise, from submission to publication, in close work with the Journal’s Editors-in-Chief.

Dr Kantor was also appointed as the Co-Leader of the Viral Failure section of the Guidelines for the Use of Antiretroviral Agents in HIV-1-Infected Adults and Adolescents; Department of Health and Human Services (DHHS) (https://www.aidsinfo.nih.gov). This DHHS guidelines panel is a working group of the Office of AIDS Research Advisory Council at the National Institutes of Health (NIH), and provides HIV care practitioners with recommendations based on current knowledge of antiretroviral drugs used to treat adults and adolescents with HIV in the United States. It is also a global resource for HIV practitioners and researchers.

Criminal Justice Research program established

Dr. Curt Beckwith, Associate Professor of Medicine, Division of Infectious Diseases, and colleagues from Lifespan, Alpert Medical School of Brown University, and the Brown University School of Public Health established the Lifespan/Brown Criminal Justice Research Program on Substance Use and HIV in 2014. The program is funded by the National Institute on Drug Abuse (R25DA037190) and is designed to prepare junior investigators from a wide range of scientific disciplines for NIH-funded research careers that focus on improving HIV and related health outcomes among criminal justice-involved populations. Junior faculty, post-doctoral fellows, and exceptional pre-doctoral candidates participate in collaborative learning experiences, one-on-one mentoring, and conduct research projects with the support of pilot awards. To date, 18 scholars from 14 institutions (including Brown University) have enrolled in the training program.

Local program participants include Amanda Noska, MD, MPH, Division of Infectious Diseases, Providence VAMC, who investigates the overlap between injection drug use, sex exchange, depression, and abuse history as this relates to transmission of HIV and hepatitis C virus among women with a history of incarceration; and Matthew Murphy, MD, MPH, Internal Medicine Resident (PGY-3), Brown University, whose research interests include evaluating the impact of improved access to primary care for justice-involved populations and exploring the intersection of biomedical and social service provision to address health disparities. Home institutions for other program participants include Massachusetts General Hospital/Harvard University, University of North Carolina-Chapel Hill, Tufts University, and Yale University, among others. Participants are actively disseminating their work at national conferences, through peer-reviewed publications, and eleven federal grant proposals (Career Development Awards, R03, R34, R21, and R01) applications have been submitted by scholars.

Information on the program is available through the Center for Prisoner Health and Human Rights website prisonerhealth.org or contact Dr. Beckwith at CBeckwith@Lifespan.org.

News from the Division of Hospital Medicine

The inaugural Miriam Hospital Physicians’ CARE Awards ceremony was held on 03/22/2018. This was to acknowledge Physicians whose interactions with patients have generated glowing comments in the patient satisfaction comments. Out of the 21 hospitalists who were recognized, Dr James Atkinson and Dr Jennifer O’Brien were honorably acknowledged for receiving many accolades.

The academic and clinical activities in the division were duly acknowledged by the American College of Physicians. Dr Kristina Berglund, Christina Beyer and Arkadiy are now Fellows of the Society of Hospital Medicine.

Dr. Kwame Dapaah-Afriyie has once again been named as one of Rhode Island Top Doctors for 2018. Additionally, he is serving as one of the Co-chairs for the 2018 Scientific meeting of the Rhode Island Chapter American College of Physicians, and one of the on-site Judges of the Scientific session of the 2018 Annual meeting of the Society of Hospital Medicine.
Updates from the Cardiovascular Institute

Recognition/Awards/Leadership

Brian Abbott, MD currently serves on the Executive Council of the American Society of Nuclear Cardiology (ASNC) as Past President and serves on the Board of Directors of the American Society of Nuclear Cardiology. Dr. Brian Abbott was awarded the designation of Master of the American Society of Nuclear Cardiology (MASNC). He also serves on the American College of Cardiology (ACC) Cardiovascular Imaging Section Leadership Council, and last year served as Topic Leader for Noninvasive Imaging on the ACC Annual Scientific Sessions Program Planning Committee.

J. Dawn Abbott, MD serves on the Board of Trustees of the Society of Coronary Angiography and Interventions and is Co-Chair of the Fellows Summit for Complex Cases 2018. Dr. Dawn Abbott is Chair of the American College of Cardiology NCDR Cath PCI Research and Publications Committee through 2019.

Herbert Aronow, MD, MPH, FACC, FSCAI, FSVM will serve as Director for the Peripheral Track at the Society for Cardiovascular Angiography and Interventions (SCAI) 2018 Annual Scientific Sessions and Co-Director/Director for the SCAI 2018-2020 Fall Fellows Courses. He is a member of the SCAI Board of Trustees.

James Arrighi, MD, Director of Graduate Medical Education at Lifespan and faculty in the Division of Cardiology, has been named as Chair of the Competency Management Committee (CMC) for the American College of Cardiology. The CMC is responsible for the development and oversite of all training guidelines and learning statements published by the ACC.

Grants from past 4 months

J Dawn Abbott, MD
Abbott Vascular Inc.
Xience Short DAPT Study - This Study is being done to evaluate the safety of taking the FDA-approved P2Y12 inhibitor drug for 3 months and aspirin (with no specified time limit) after the implantation of any commercially approved XIENCE stents for patients at high risk of bleeding. Patients may be at high risk of bleeding because of older age, history of major bleeding, stroke, anemia, or severe liver disease.

The XIENCE stent is not being investigated in this Study, nor are the antiplatelet drugs. The purpose of the Study is to gather information on the use of the P2Y12 inhibitor drug for a short period of time (3 months) for patients receiving XIENCE stents.

Ulrike Mende, MD
Brown University
Human 3D Microtissues for Toxicity Testing via Integrated Imaging, Molecular and Functional Analysis

Paul Gordon, MD
Daiichi Sankyo, Inc.
Edoxaban versus Standard of Care and Their Effects on Clinical Outcomes in Patients Having Undergone Transcatheter Aortic Valve Implantation-in Atrial Fibrillation

Volcano Corp
DEFINE PCI
Physiologic assessment of coronary stenosis following Percutaneous Coronary Intervention

Duke Clinical Research Institute
Study of Access Site for Enhancing PCI in STEMI in Seniors

Paul Gordon, MD was the recipient of the 2017 Raymon S. Riley, MD, Teaching Award. In his name, the Division of Cardiology at Rhode Island Hospital has established The Raymon S. Riley, MD Memorial Endowment Teaching Award to honor his legacy of extraordinary care, friendship, and his passion for education and lifelong learning. This award is chosen annually by the fellows of the Cardiovascular Institute.

Athena Poppas, MD, FACC
Dr. Poppas continues to serve as Chair of American College of Cardiology’s (ACC) Governance committee. She served on the ACC, Latin American Conference Program Committee. She is also on three task forces for ACC. She is a member of the Health System’s Strategy and Workflow & Lab Management task forces and is Chair of the Quality and Leadership Conference task force.

Raymond Russell, MD
Finished his tenure as President of the American Society of Nuclear Cardiology.

Alan Morrison, MD
NIH NHLBI 1RO1HL139795 Morrison(PI)
Development of Rac-Targeted Therapeutic Strategy for Treatment of Calcific Atherosclerosis.

The goal of this work is to define the role of the Rac-GEF, Tiam1, and macrophage Rac-dependent signaling during inflammatory calcification of atherosclerotic plaque.

Christopher Song, MD
Hamilton Health Sciences Corporation
Apixaban for the Reduction of Thrombo-Embolism in Patients with Device-Detected Sub-Clinical Atrial Fibrillation (Artesia)

Peter Soukas, MD
Intact Vascular Inc.
Tack Optimized Balloon Angioplasty Study for the Below the Knee Arteries Using the Tack Endovascular System (TOBA II-BTK)
New Faculty Appointments
August 1, 2017 to February 1, 2018

Cardiology
Michael Wu, MD, Assistant Professor, Clinician Educator

Gastroenterology
Sean Fine, MD, Assistant Professor, Clinician Educator
Autumn Hines, DO, Assistant Professor, Clinician Educator
Abbas Rupawala, MD, Assistant Professor, Clinician Educator

General Internal Medicine
Nazir Ahmed, MD, Clinical Assistant Professor
Nadeem Anis, MD, Assistant Professor, Clinician Educator
Rana Assaf, MD, Instructor, Clinician Educator
Anneliese Bea brun, MD, Assistant Professor, Clinician Educator
Rongras Damrongwatanasuk, MD, Clinical Assistant Professor
Hector Derreza, MD, Clinical Assistant Professor
Meghan Geary, MD, Assistant Professor, Clinician Educator
Adey Gebru, MD, Instructor, Clinician Educator

Mustafa Gedik, MD, Clinical Assistant Professor
Karl Herman, MD, Assistant Professor, Clinician Educator
Mustafa Kaisi, MD, Instructor, Clinician Educator
Mridula Menon, MD, Clinical Assistant Professor
Bradley Minter, MD, Assistant Professor, Clinician Educator
Jessica Murphy, MD, Assistant Professor, Clinician Educator
Umair Nazir, MD, Clinical Assistant Professor
Damodar Penigalapati, MD, Clinical Assistant Professor
Nishanth Pundru, MD, Clinical Assistant Professor
Maheep Sangha, MD, Clinical Assistant Professor
Rahul Vanjani, MD, Assistant Professor, Clinician Educator
Adrian Velasquez, MD, MPH, Clinical Assistant Professor
Venkat Vuddanda, MD, Assistant Professor, Clinician Educator
Susanna Winston, MD, Clinical Instructor

Shenjun Zhu, MD, Assistant Professor, Clinician Educator

Geriatrics
Keith Cohen, MD, Assistant Professor, Clinician Educator
Mercedes Pacheco, MD, Assistant Professor, Clinician Educator
Jennifer Ritzau, MD, Assistant Professor, Clinician Educator

Hematology/Oncology
Don Dizon, MD, Associate Professor RST
Robert Sokolic, MD, Assistant Professor

Nephrology
Xiaoxu Zhou, MD, PhD, Instructor (Research)

Pulmonary & Critical Care
Andrew Foderaro, MD, Assistant Professor, Clinician Educator
Christopher Mullin, MD, Assistant Professor, Clinician Educator

Rheumatology
Laura Amorese-O’Connell, MD, Assistant Professor, Clinician Educator