

# Department of Medicine

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BROWN  
Alpert Medical School

## Inside

Chairman's Message .....	1
Besdine to Advise .....	2
New Grant	
Chairman's Message Continued	
News from Memorial Hospital .....	3
Recent Honors for .....	3
Memorial Hospital	
Recent Faculty .....	4
Accomplishments	
New Hires in the Division .....	4
of Infectious Diseases	
Hospitalist Service Marks .....	5
20 Years of Growth	
Lally Recognized .....	5
Newly Awarded Research Grants ..	6
Mermel Honored.....	6
News from the .....	7
Cardiovascular institute	
Faculty Honors and Accomplishments	
Hollman Named Academic	
Director for Brown Healthcare	
Leadership Program	
University Medicine Announces New	
Chief Financial Officer	

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## Chairman's Message Shiny objects and simple solutions.



*Louis Rice, MD*

In medicine, a physician's susceptibility to shiny objects and simple solutions can be dangerous for patients. When the readily apparent right lower lobe pneumococcal pneumonia seen on radiograph distracts our gaze and attention from the punched out lesion in the rib, the end result may be a failure to recognize that the patient's risk for the pneumonia lies in the multiple myeloma suggested by the rib lesion. The simple solution in this case, a course of highly effective antibiotics, will address the immediate problem but fails to address the underlying cause – the condition that ultimately determines the patient's prognosis. We must therefore always strive to ask the simple question whenever we confront a patient and their illness – **Why?**

There is always time to ask that simple question, even in the controlled frenzy that occurs during in-hospital cardiac arrests. A recognition that a patient is in pulseless electrical activity should lead to several immediate thoughts: Why did this happen now? Is this due to a tension pneumothorax from a recently attempt at central line placement? Pericardial tamponade? A massive pulmonary embolus? Hypovolemic shock? Each of these circumstances calls for a specific

intervention. The intervention chosen for one diagnosis may be contraindicated in the case of another. It is imperative to make every effort to distinguish between the possibilities before acting. Needless to say, one cannot distinguish between the possibilities if one has not considered them in the first place. The primary culprit often hides behind the maladies it creates.

The same rules apply in situations of lesser acuity, especially as we accumulate information regarding the negative consequences of some of our more routine interventions. Does that low hemoglobin really require a blood transfusion?

Those of us who practiced at the dawn of the AIDS era remember many patients who died of AIDS contracted through transfusion. When will the next virus invade our blood supply? Moreover, accumulating evidence

suggests that blood transfusions may be deleterious for patients' health in other ways as well. Does that fever *really* imply a bacterial infection? Is it worth putting the patient at risk for *Clostridium difficile*? Does this back pain *really* warrant an MRI scan at this point? Will the common abnormalities likely to be seen truly be the cause of the symptoms and will surgery ultimately help or hurt the patient?

*Continued on next page*

## Besdine to Advise New Grant to Support Hip Fracture Co-management



*Dr. Richard W. Besdine*

A new three-year, \$1.399 million grant was approved by the American Geriatrics Society's Trustees which will support AGS's efforts to broadly disseminate a Geriatrics-Orthopedic Hip-Fracture Co-management Intervention. Evidence indicates this would greatly improve care and outcomes for older adults hospitalized with hip fractures in a cost-effective way. Dr. **Richard W. Besdine**, Director of the Division of Geriatrics and Palliative Care, will serve as Senior Medical Advisor for this grant. Drs. **Lynn McNicoll**, from the Division of Geriatrics, and **Daniel A. Mendelson**, of the University of Rochester Medical Center, will serve as Medical Directors.

One of the serious gaps in our current health care system involves fragility hip fractures, which often lead to loss of function and loss of independence, and prove fatal in far too many cases. An estimated 260,000 hip fractures occur each year. Within the first year of hospitalization for a hip fracture, 20 percent of patients die. Hip fractures are the third most costly diagnosis in the United States, totaling more than \$18 billion in 2012.

This new grant will build on the work of a 2015 planning grant awarded by the John A Hartford Foundation. That grant developed a business plan to disseminate the Co-management intervention model to academic and community hospitals and health systems nationwide.

*Continued from page 1*

Of course, thinking about different etiologies for symptoms is not carte blanche to order as many tests as you can think of to diagnose an illness. Shotgun testing is unsustainable in this era of runaway medical costs. Moreover, circumstances in which tests have a low prior probability of being positive create a high risk that the result will be unreliable, which could send the diagnostic workup further down unfruitful and potentially harmful paths. It is incumbent on all of us to take the time to understand the characteristics of the tests we order AND the relevance of these characteristics to the individual patients we are treating. As a carpenter friend of mine used to tell me: "Measure twice, cut once".

I think it is also important that we as physicians bring this perspective to our national discourse, especially regarding issues that are relevant to our lives and the lives of our patients. There is a lot of talk in Washington about repealing the Affordable Care Act. It is often stated that President Obama's initial promise that you could keep your health plan was false, that large insurers are leaving the exchanges in many states and that premium increases and rising deductibles are unsustainable.

These claims have some merit, but I propose that they are the shiny objects to distract us and repeal is the simple solution we need to be wary of.

Repealing the Affordable Care Act without a very thoughtful replacement would be, to use the term favored by our president, a disaster. It would throw insurance markets into disarray, prevent many people with pre-existing illnesses from purchasing insurance and place unsustainable demands on hospitals, especially academic institutions like ours that provide a disproportionate share of care to people without means.

As a physician and citizen, I am not wed to the Affordable Care Act. If the Republicans in power have a better replacement, one that adequately addresses the needs of our patients and creates sustainable mechanisms for paying the costs we are currently incurring and controlling costs into the future, I will be all for it.

But the Affordable Care Act is complicated because the problem of delivering health care to more than 300 million people is complicated. Simple solutions won't work.

Physician voices must be among the loudest informing our elected officials as they navigate among distracting shiny objects for the real priorities – the health of the people of the United States. It will be incumbent upon us to tell our elected representatives in very direct terms: "Measure twice, cut once".

# News from Memorial Hospital

## Fellowship match results

**Ahmad Abdin MD** - Cardiology SUMMA Health System/NEOMED - Akron, Ohio

**Mohammed Aboelsoud MD**  
Gastroenterology - Georgetown University Medical Center - Washington DC

**Farhan Ashraf MD** - Cardiology University of Tennessee Health Science Center - Memphis, TN

**Jaleh Fallah MD** - Hematology/Oncology Cleveland Clinic - Cleveland, OH

**Saira Imran MD** - Pulmonology Memorial Sloan Kettering Cancer Center New York, NY

**Somwail Rasla MD** - Cardiology - St. Vincent Hospital - Worcester, MA

**Diana Silva Cantillo MD** - Infectious Disease - George Washington University Hospital - Washington DC

PGY3 residents **M. Firas Barbour MD**, **Fatima Hamid**, and **Akiko Minami MD** are going into hospitalist medicine.

## Memorial Hospital appoints interim Chief of Medicine

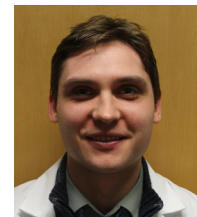


Dr. F. Dennis McCool has been appointed the interim Chief of Medicine at Memorial Hospital of Rhode Island effective January 1, 2017.

Dr. McCool is a Professor of Medicine

at Brown University and has been a member of the Pulmonary, Critical Care and Sleep Division at MHRI and Brown since 1981. He also will continue to be Medical Director of the Sleep Centers at Kent and Memorial Hospitals.

## Meet the Memorial Hospital Internal Medicine Chief Resident



**Oleksandr Halytskyy MD** received his undergraduate degree from the University of Toronto, and his medical degree from Jagiellonian University Medical College in

Poland during which time he rotated at the University of Rochester Medical Center, Strong Memorial Hospital in Rochester NY; Methodist Hospital in Houston TX; and, Loma Linda Medical Center in California. Oleksandr did his Internal Medicine residency training at St. Joseph Hospital in Chicago, IL. He has published in numerous peer-reviewed journals and helped to translate *Endocrinology in Everyday Medical Practice* from Polish to English. Oleksandr is fluent in English, Polish, Russian, and Ukrainian. His interests include hiking, kayaking, swimming, table tennis, badminton, learning golf, auto mechanics, and trying new foods.

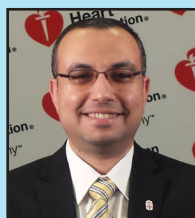
## Recent Honors for Memorial Hospital

The Internal Medicine Residency Program at Memorial Hospital of Rhode Island, Alpert Medical School emerged the winner after a spirited Doctor's Dilemma aka Medical Jeopardy competition, held in November at Rhode Island Hospital. Memorial emerged victorious against the teams from Rhode Island Hospital, Kent Hospital, and Roger Williams Medical Center. Leading Memorial's winning team were **M. Firas Barbour (PGY3)**, **Anais Ovale (PGY2)**, and **Faeq Kukhon (PGY1)**.

For the ninth consecutive year in a row, the Internal Medicine Residency Program at Memorial Hospital of Rhode Island, Alpert Medical School achieved a 100% ABIM Board Examination Pass Rate. This achievement can only be claimed by a handful of the internal medicine residency programs in the nation.

On November 29, 2016, the Internal Medicine Residency Program at Memorial Hospital held a Diversity Workshop. Moderated by Sajid Saraf MD

FACP, Program Director, the workshop addressed topics of inherent bias, racism, sexism, and other discriminatory behaviors. A Statement on Diversity and Inclusivity was distributed to all residents. "We have a longstanding and proud tradition of valuing and practicing inclusivity," said Margo Katz, IMRP Education Coordinator. "We felt a need to formalize our core values; give our residents an opportunity to share their feelings and experiences; and, commit to them our ongoing support, protection, and advocacy."



*Somwail Rasla MD*

Three Memorial residents – **Farhan Ashraf MD**, **Somwail Rasla MD**, and **Mohamed Firas Barbour MD** -presented their research at the AHA 2016 Scientific Sessions held in

New Orleans in November. Ashraf's research: "Decreased Kidney Function in the form of Estimated Glomerular Filtration Rate Increases the Risk of Development of Incident Hospitalized Heart Failure and Its Subtypes in Postmenopausal Women" was published in the journal *Circulation*; Rasla's research looked at the link between yo-yo dieting and heart attacks in postmenopausal women; Barbour's research showed that postmenopausal women over 50 who eat high-protein diets can double their risk of heart failure especially when much of the protein comes from meat. Both Rasla and Barbour's research were picked up by global news outlets and featured on CNN, NBC's *The Today Show*, and *Time Magazine* amongst others.



## Recent Faculty Accomplishments

**E. Jane Carter, MD**, of the Division of Infectious Diseases, was appointed to the Technical Review Panel (TB expert) of the Global Fund To Fight HIV, TB and Malaria at UNOPS in Geneva, Switzerland. The Global Fund to Fight AIDS, Tuberculosis and Malaria (<http://www.theglobalfund.org>) was created in 2002 to raise, manage and invest the world's money to respond to three of the deadliest infectious diseases the world has ever known. The Global Fund, based in Geneva, Switzerland, is a partnership between governments, civil society, the private sector and people affected by the diseases. The Global Fund raises and invests nearly US\$4 billion a year to support programs run by local experts in countries and communities most in need. Countries eligible for funding write proposals with solutions to end these three epidemics in their own country. The Technical Review Committee of the GF is the independent body of health, development and finance experts who evaluate the technical merit of all requests for funding.

**Lynn E. Taylor, MD, FACP, FAASLD**, Assistant Professor of Medicine, Division of Infectious Diseases, was made Member of the Centers for Disease Control and Prevention (CDC) and Health Resources and Services Administration (HRSA) Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment.

The CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment advises HHS, CDC and HRSA regarding objectives, strategies, priorities and policies for HIV, Viral Hepatitis and other STDs; epidemiologic, behavioural, health services and laboratory research on HIV/AIDS, Viral Hepatitis, and other STDs; and identification of policy issues related to HIV/Viral Hepatitis/STD professional education, patient healthcare delivery, and prevention services. The Committee makes recommendations for the future directions of CDC's and HRSA's programs to prevent, control, and treat STDs, HIV/AIDS, and Viral Hepatitis.

## New Hires in the Division of Infectious Diseases



**Martha Cristina Sanchez, MD**  
*Assistant Professor of Medicine*

Dr. Sanchez joined the Division of Infectious Diseases in September 2016. She is an adult infectious diseases physician at The Miriam Hospital, the Rhode Island Hospital and the Lyme disease center at Newport Hospital. Dr. Sanchez is an Assistant Professor of Medicine at The Warren Alpert Medical School of Brown University. She earned her medical school degree at the Instituto Tecnológico de Santo Domingo (INTEC), in Dom. Rep. She completed her Internal Medicine residency in the Icahn School of Medicine at Mount Sinai at Englewood Hospital and Medical Center, Englewood, NJ. She subsequently completed her Infectious Disease Fellowship at Rutgers New Jersey Medical School program, Newark, NJ. Dr. Sanchez's clinical and research interest include HIV, Hepatitis C, tropical infections, tick-borne diseases, antimicrobial resistance and orthopedic infections.



**Jennifer Adelson Mitty, MD, MPH**  
*Attending Physician*

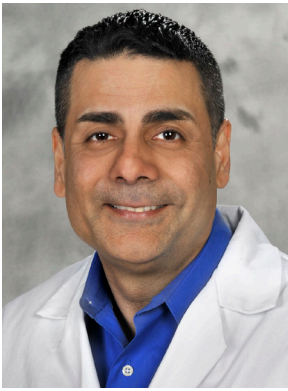
Dr. Mitty is rejoining the Division of Infectious Diseases after spending the last 7 years at the Beth Israel Deaconess Medical Center in Boston. She is also a deputy editor of Infectious Diseases at UpToDate, an online medical resource that is used by physicians worldwide. Dr. Mitty obtained her medical degree from New York University. She completed her residency in Internal Medicine at Beth Israel Deaconess Medical Center and completed her fellowship at Beth Israel Deaconess Medical Center and Brigham and Women's Hospital in Boston. Her clinical and research interests include general infectious diseases, HIV treatment and prevention, and Lyme disease.



**Natasha Rybak, MD**  
*Assistant Professor of Medicine*

Dr. Natasha Rybak joined the Division of Infectious Diseases in July 2016. She is an attending in adult infectious diseases at The Miriam Hospital and Rhode Island Hospital. She is an Assistant Professor of Medicine at Warren Alpert Medical School of Brown University. Dr. Rybak received her medical degree from the Warren Alpert Medical School of Brown University as part of the Brown-Dartmouth medical program in 2007. She then stayed on at Warren Alpert Medical School of Brown University to complete her residency in Combined Medicine and Pediatrics in 2011 followed by Fellowship in Combined Adult and Pediatric Infectious Diseases, which she completed in 2016. Dr. Rybak's clinical and research interests are in global health with a specific interest in tuberculosis (TB), HIV and TB, and multi-drug resistant (MDR) tuberculosis among adults and children in Eastern Europe. She helped to create the Brown University Ukraine Collaboration, a global health initiative program at Brown University to address these issues of TB, TB/HIV co-infection and MDR-TB in Ukraine. She will also serve as the Medical Director of the RISE TB Clinic.

## Hospitalist Service Marks 20 Years of Growth



University Medicine's Hospital Medicine Division, with staff located at Rhode Island Hospital and The Miriam Hospital, just marked its 20th anniversary. Drs. **Sajeev Handa** and **Kwame Dapaah-Afriyie**, both UM physicians, , helped found the Hospital Medicine Divisions at both institutions. The division at Rhode Island Hospital was the first dedicated hospitalist program in the state as well as the first to establish a dedicated inpatient unit and to become an independent division within the Department of Medicine.

The term "hospitalist" was first coined in 1996 at the University of California at San Francisco. Rhode Island Hospital established its program prior to this term even being coined and The Miriam followed suit in 1997. Initially both programs started with a handful of physicians and currently there are sixty five across both sites with a complement of advanced practice practitioners. Each program cares for approximately 10, 000 patients annually.

According to the Society of Hospital Medicine, there are now more than 50,000 physicians working today in hospital medicine.

The term "hospitalist" refers to doctors who do not have private outpatient practices, choosing instead to work exclusively in hospitals fulltime. In the 20 years since the Hospital Medicine Divisions were established, the programs have not only grown exponentially but have increased the quality and coordination of patient care within the institutions that they operate.

The hospitalist coordinates the patient's care while they are an inpatient, working with specialists and other members of the care team. The hospitalist also communicates to the patient's primary care physician regarding their hospital stay.

"A hospitalist is a full-time, hospital-based doctor leading a care team," states Dr. Sajeev Handa. "It's more efficient, productive and healing to have an experienced navigator working with a team they know. This model of care encourages continuity of health treatment and planning, with the best intended results."

According to Dr. Handa, a hospitalist has more expertise in caring for complicated hospitalized patients on a daily basis, and is more available than a primary care physician during the day to meet with family members, other health professionals, and to deal with any problems that may arise. They often see a patient more than once per day, since their "office" is the hospital.

## Lally Recognized by American College of Rheumatology



**Edward V. (Ted) Lally, M.D.**  
*Director of the Division of Rheumatology,*

Dr. Lally was recognized by American College of Rheumatology was recently recognized as a Master of the American College of Rheumatology (ACR) at their Annual Scientific Meeting held in Washington, D.C. on November 17, 2016. This award is conferred on ACR members who have made outstanding contributions to the field of Rheumatology through scholarly achievements and/or service to their patients and profession. It is one of the highest honors the college bestows.

Dr. Lally has served in a number of capacities for the American College of Rheumatology. He is the former President of the Northeast Region of the former American Rheumatism Association. He has served on several American College of Rheumatology Committees including the Executive Council of the Directors of Rheumatology Training Programs (DORTP), the Communications and Marketing Committee, Abstract Selection Committees, and Annual Scientific Meeting Planning Committees. He has served on the Editorial Board of [Arthritis and Rheumatism](#) and been a reviewer for several rheumatology journals.

Dr. Lally's areas of clinical and research interest have involved a number of rheumatic disorders, especially scleroderma, crystal-associated arthritis, and HLA-B27 arthropathies. He has published extensively in these areas and others. Under his leadership, Brown University was one of the founding members of the Scleroderma Clinical Trials Consortium. He has served as the Director for the Division of Rheumatology from 1985-1998 and from 2005 to present.

## Newly Awarded Research Grants

**Jinnette Dawn Abbott, MD ( RIH ) and Herbert Aronow, MD ( TMH ) of the Cardiovascular Institute** are the Principal Investigators for **The MINT Study**, a multicenter trial, trial evaluating transfusion strategies (liberal vs restrictive strategy) in patients with known ischemic heart disease

**Dr. Douglas Burt of the Cardiovascular Institute** is the Principal Investigator for the **Perspective Trial** sponsored by Novartis Pharmaceuticals and entitled "A multicenter, randomized, double-blind, active-controlled study to evaluate the effects of LCZ696 compared to valsartan on cognitive function in patients with chronic heart failure with preserved ejection fraction.

**E Jane Carter, MD, of the Division of Infectious Diseases**, was awarded a TB Reach Grant from the STOP TB Partnership, UNOPS, for \$995,900 entitled "Finding the Children: Pediatric TB in Kenya"

**Dr. Daniel Levine of the Cardiovascular Institute** is the Principal Investigator for the **Pioneer Trial** sponsored by Novartis entitled, A multicenter, randomized, double-blind, double dummy, parallel group, active-controlled 8 week study to evaluate the effect of sacubitril/valsartan (LCZ696) versus enalapril on changes in NT-proBNP and safety and tolerability of in-hospital initiation of LCZ696 compared to enalapril in HFrEF patients who have been stabilized following hospitalization for acute decompensated heart failure (ADHF).

**Qing Lu, DVM, PhD**, Associate Professor of Medicine and Research Biologist at the **Providence VAMC in the Vascular Research Laboratory**, was awarded an RO1 research grant from the NHLBI entitled: HDAC6 regulates cigarette smoke-induced endothelial barrier dysfunction and acute lung injury". The award is \$250,000 per year direct costs with a duration of 7/1/16-6/30/20.

## Mermel Honored with Outstanding Physician Award



PROVIDENCE, R.I. – The medical staff of Rhode Island Hospital recently honored Leonard Mermel, D.O., Sc.M., with the 2016 Annual Milton Hamolsky Outstanding Physician Award. Mermel, an internationally noted expert in infectious diseases and infection control, is the medical director of Rhode Island Hospital's Department of Epidemiology & Infection Control. He joined the Rhode Island Hospital staff in 1991.

"Dr. Mermel is a world leader in epidemiology of hospital-acquired infections, most specifically as it relates to catheter-associated bloodstream infections. He has a remarkable background with more than 100 peer reviewed publications... (and) has represented the hospital and

Brown University faculty in myriad national and international meetings," said Jorge Albina, M.D., who nominated Dr. Mermel for the award. Dr. Albina added that Mermel was a tremendous resource to Rhode Island Hospital and the entire Lifespan system on issues related to H1N1, Ebola, and C. difficile, among other issues.

"The benefits of Dr. Mermel's expertise have had a direct impact not only on our hospital community and our state, but across the nation and in the global health community," said Latha Sivaprasad, M.D., chief medical officer of Rhode Island Hospital.

Mermel, a resident of Barrington, is also a professor of medicine at the Warren Alpert Medical School of Brown University and adjunct clinical professor in the University of Rhode Island College of Pharmacy. He has served in expert advisory capacities for numerous state, national and global organizations, including the Centers for Disease Control and Prevention, the U.S. Department of Health and Human Services, the Federal Drug Administration, and NASA, as well as national bodies in Switzerland, Ireland, Israel, Germany and the United Kingdom. He is a fellow of the American College of Physicians, the Infectious Diseases Society of America and the Society for Healthcare Epidemiology of America.

After training as a Doctor of Osteopathy at the University of Osteopathic Medicine and Health Sciences in Des Moines, Iowa, Mermel completed his residency in internal medicine at St. Louis University Hospitals and a fellowship in infectious disease at University of Wisconsin Hospitals and Clinics. He also holds a Master of Science degree from Johns Hopkins University School of Hygiene and Public Health.

The Milton W. Hamolsky Outstanding Physician Award is presented each year to a doctor who has made exceptional contributions to patient care and leadership. The late Milton Hamolsky, M.D. was an endocrinologist who came to Rhode Island Hospital in 1963 and served as the first full-time physician-in-chief. Hamolsky served as the chief administrative officer of the Rhode Island Board of Medical Licensure and Discipline and was a noted pioneer of medical education in Rhode Island.



# News from the Cardiovascular institute

## Faculty Honors and Accomplishments

**James Arrighi, MD**, of the division of cardiology, and Director of Graduate Medical Education at Lifespan, has been appointed Chair of the Medical Residency Review Committee for **ACGME-International**. This committee is responsible for accrediting medical residencies and fellowships outside of the US and developing standards for such programs.

**Raymond Russell, MD, PhD**, Associate Professor of Medicine, of the Cardiovascular Institute was elected President of the American Society of Nuclear Cardiology. His term runs from January through December of 2017. He succeeds Brian Abbott, MD, also from the Cardiovascular Institute, in this position. The American Society of Nuclear

Cardiology is a 4500-member society committed to education, advocacy and innovation in noninvasive cardiovascular imaging.

**Fredric V. Christian MD, FACC** was awarded the “Dr. Fredric V. Christian Award” at the 17th Annual Meeting of the Rhode Island Chapter of the American College of Cardiology on October 19, 2016. The inscription reads, “In recognition of Excellence in Cardiology and Outstanding Contributions to the Rhode Island Chapter of Cardiology”. Dr. Christian established the Rhode Island Chapter in 1999 while serving as the Rhode Island Governor of the American College of Cardiology. Rhode Island ACC Chapter members may be recognized with this award as determined by the Chapter Council.

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## Hollman Named Academic Director for Brown Healthcare Leadership Program



*Dr. Peter Hollman*

Brown University has named Dr. Peter Hollman as the new academic director of its Executive Master of Healthcare Leadership (EMHL) program.

Karen Sibley, vice president for strategic initiatives and dean of the School of Professional Studies at Brown recently remarked on Hollman’s appointment: “With his vast health care experience as a physician, administrator and innovator, Peter understands what it takes to deliver quality health care and organizational success, and he will ensure that EMHL continues to meet the needs of healthcare professionals in these rapidly changing times.”

Hollmann is chief medical officer for University Medicine, a Rhode Island-based academic and patient care medical group practice with more than 200 physicians in a dozen medical specialties. He helps define the strategy and direction of the organization in the delivery of health care services; performance improvement activities; and the development of clinical programs. Hollmann is assistant clinical professor in the Department of Family

Medicine in the Warren Alpert Medical School and maintains a geriatric primary care practice in East Providence, R.I.

Hollmann earned his undergraduate and medical degrees at Brown University. Since then he has gained more than 25 years of experience in medical management. He served as associate chief medical officer at Blue Cross & Blue Shield of Rhode Island, where his major duties involved practice transformation, payment methods and system/coding implementation. He also served as medical director for a long-term care hospital, skilled nursing facility and hospital-based home care company.

The Executive Master of Healthcare Leadership degree program builds on Brown University’s multidisciplinary strength in public health and policy, health economics and evidence-based medicine. It prepares practitioners in clinical care, hospital and system administration, insurance, the biotech and pharmaceutical industry, and from legal, consulting and patient advocacy settings to address the rapidly evolving health care environment and to build innovative, sustainable solutions to pressing challenges in their organizations and across health care.

## University Medicine Announces New Chief Financial Officer

Ann M. Kashmanian, CPA, MBA was recently named Chief Financial Officer for University Medicine

In this role, Ms. Kashmanian will be responsible for developing a strategic financial plan to allow University Medicine to thrive in a rapidly changing health care environment, exploring new business models to optimize relationships with health care partners and coordinating internal financial management structure and practices.

Ms. Kashmanian has been employed in financial management in the health care sector of Rhode Island since 1987. For the last 15 years, she has served several important roles for Lifespan Corporation, including treasurer and chief financial officer of Newport Hospital and vice president finance for Rhode Island Hospital and The Miriam Hospital. Prior to joining University Medicine, Ms. Kashmanian held the position of senior vice president of financial operations and care management at Lifespan.

“Ann has an extensive background in financial operations and care management, directly related to hospital operations, and we are so pleased to have her as our CFO. With her proven success at increasing efficiencies, streamlining operations, reducing costs and modernizing systems on both the accounting and clinical sides, we are confident that Ann’s leadership will help keep University Medicine in excellent fiscal condition,” said President and CEO Dr. Louis Rice.

Ms. Kashmanian earned a bachelor of arts degree from Holy Cross College in Worcester, Massachusetts and her master’s of business administration degree from Northeastern University in Boston. She resides in North Providence, R.I.

Department of  
**Medicine**

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