Medicine Matters

NEWS FROM THE UVA DEPARTMENT OF MEDICINE

DEPARTMENT OF MEDICINE

MISSION

UNIVERSITY

VIRGINIA HEALTH SYSTEM

We are dedicated to preventing disease and treating illness, educating and inspiring future leaders in the field of internal medicine, and supporting innovative biomedical research.

VALUES

We strive for a sense of community, connection, and synergy among all faculty, staff, and trainees.

PLEDGE

We will conform to the highest ethical standards, uphold the values of our partner organizations, and give back to our community through public service.

QUICK LINKS

DoM WEBSITE

DoM CALENDAR

GRAND ROUNDS

HOOS WELL

HIGHLIGHTED DIVISION

MINDFULLNESS MATTERS



SUBSCRIBE

GIVE TO DOM

OCTOBER 2019

MESSAGE FROM THE CHAIR



Welcome to fall and this edition of Medicine Matters. In this issue, we highlight the largest and most diverse division in the Department: the Division of General Medicine, Geriatrics, Palliative Care, and Hospitalist Medicine. As you will see, this vibrant division serves a broad array of patients with a continued and strong focus on education, advocacy, and quality. I am so proud of their many achievements and their community leadership. I think you will be very impressed. In addition, we feature the first division crossword puzzle!

Also of note, in partnership with the division, you will see some of the department's community outreach efforts which will be growing in the next year. This is part of our commitment to improving the health of our community.

Lastly, enjoy the beautiful fall weather. Take time to exercise, get outside, eat well and recharge your batteries.

Mitchell H. Rosner, MD, MACP Henry B. Mulholland Professor of Medicine Chair, Department of Medicine



Did you know that DOM has a Twitter account? Follow us here.

DOM FINANCIAL UPDATE

Department of Medicine Summary of Consolidated Financials FY20 as of August 31, 2019

	Budget	Actual	\$ Variance
	YTD	YTD	YTD
Work RVUs	143,208	143,394	186
Clinical Receipts (NPSR)	9,638,600	9,607,794	(30,806)
Total Revenues	32,828,253	35,428,939	2,600,686
Total Expenditures	32,256,526	32,329,038	(72,512)
Net Income	571,727	3,099,901	2,528,173

Summary Explanation of Variance:

For the fiscal year ending August 31, 2019 DOM posted a consolidated net surplus of \$3.1M and a favorable variance to net budget surplus of \$2.5M. Clinical support revenue from MOU agreements outperformed budget by \$808K.

The department realized non-personnel cost savings of \$345K driven by lower than expected grant expenditures.

BILLING TEAM SPOTLIGHT PROFILE

Donna Fuller



Tell us a little bit about yourself.

I have been working for UVA Physicians Group for eighteen years, and almost twelve of those have been for the Department of Medicine. Prior to coming to UPG, I worked in several fields including banking for twelve years and in social service work for six. I have one son, Trey, and daughter-in-law Jordan who live in Waynesboro. My husband, Dennis and I live in a condo in Albemarle County with our lab mix, Lincoln, and our two cats, Lucy and Dottie.

What brought you to Charlottesville?:

Birth! I am a true "townie" - very entrenched in this area. I attended Charlottesville City and Albemarle County schools, PVCC and UVA. My maternal family line dates back to at least the mid 1800's in Charlottesville that I can prove, and probably earlier.



Proudest/greatest achievement outside of the professional realm?

I went back to school at the age of 33 and earned my BA in English Language and Literature, minor in Sociology, in 1995 from the University of Virginia. At that time it was very unusual to be an adult student here; I only knew of 3 others. It was tough at times; I even had to bring my toddler son to Wilson Hall to class with me after an ice storm once, but my professors were accommodating and encouraging.

Best advice anyone ever gave you?

My stepmother taught me to be careful what I said to people in anger because once said, it could not be taken back. That was a nugget of wisdom that I have tried to live by my entire life, and it has served me well many times. (2)





Kathleen Oleson, AG, PCNP Elizabeth Gaughan, MD Trish Millard, MD

A division-wide welcome to John Kim, MD who is a new provider in Pulmonary and Critical Care Medicine. You may read more about Dr Kim online here.

Please help the Division of Hematology/Oncology welcome Ellyn Obrochta, who is a lab tech in Dr Lawrence Lum's lab. She began work September 9th. Welcome Ellyn!

Congratulations to Kathleen Oleson, AG, PCNP, on starting with UVA Community Oncology (Pantops) on September 10th.

Congratulations to LaToya Wilkerson for her ten years of service in Hematology/Oncology.

Congratulations to Dr Elizabeth Gaughan for her five years of service in Hematology/Oncology.

Congratulations to Dr Trish Millard on receiving the American Cancer Society Institutional Research Grant for her project titled "A Pilot Study of Neoadjuvant Endocrine Therapy Tolerance to Inform Treatment Decisions for Adjuvant Radiation in Geriatric Early Stage ER+ Breast Cancer."

A research paper was presented by Brandon Kemp at the AHA Council on Hypertension and AHA Council on Kidney in Cardiovascular Disease and American Society of Hypertension Joint Scientific Sessions, New Orleans, LA, September 5th-8th, 2019. "Ghrelin is Produced by the Kidney and Mediates Distal Tubular Sodium Reabsorption in Rats." [Kemp BA, Howell NL, Padia SH]

UVA Clerkship Administrator Conference

Karen Ward, Medicine Clerkship Administrator, was on the planning committee for a UVA Clerkship Administrator Conference that took place at The Draftsman Hotel on September 6. All UVA Clerkship Administrators were in attendance, and topics of the day included LCME site visits, Troubleshooting Your Clerkship, and Teambuilding activities.



Pictured left bottom to right: Rebecca Hensley (Psychiatry), Nell Harlow-Brooks (Surgical Subspecialties), KarenMarie Smith (Neurology), Lisa Morton (Peri-op), Karen Ward (Medicine), Marlo Meyers (Pediatrics),

Pictured left top to right: Shawnell McCreary (OB/GYN), Heather Trainum (Surgery), Kyle Williams (Emergency Medicine), Brittany Henslee (Family Medicine/AIM)

<u>Recent Publications in the Division of Endocrinology</u> and Metabolism

PI Houpt. Production of customized TAC cards for Antimicrobial and Antimalarial Drug Resistance. USAMRAA (Army).23 September 2019 to 22 February 2020

Saba Rouhani, PhD, Nicholas W Griffin, PhD, Pablo Peñataro Yori, MPH, Jeanette L Gehrig, PhD, Maribel Paredes Olortegui, BS, Mery Siguas Salas, BS, Dixner Rengifo Trigoso, BS, Lawrence H Moulton, PhD, Eric R Houpt, MD, Michael J Barratt, PhD, Margaret N Kosek, MD, Jeffrey I Gordon, MD. Diarrhea as a potential cause and consequence of reduced gut microbial diversity among undernourished children in Peru Clinical Infectious Diseases.

Kemp BA, Howell NL, Gildea JJ, Padia SH. Ghrelin0Induced Sodium Reabsorption is Mediated by PKA and Microtubule-Dependent aENaC Translocation in Female Rats. Journal of the Endocrine Society, September 2, 2019

<u>Studies Opened Since August 1, 2019</u>

Genitourinary Oncology 19-21545 PHAR 64091742PCR0002 Biomarker Study to Determine Frequency of DNA-repair Defects in Men with Metastatic Prostate Cancer Stages: IV CT.GOV ID: NCT03871816 Primary: Dreicer, Robert, CRC: Torres, Julio

Melanoma 9-21435 Other: National EA6174 A Phase III Randomized Trial Comparing Adjuvant MK-3475 (Pembrolizumab) to Standard of Care Observation in **Completely Resected** Stages: I; II; III CT.GOV ID: NCT03712605, Merkel Cell Carcinoma Primary: Gaughan, Elizabeth, CRC:Reed, Racheal (3)



DEPARTMENT OF MEDICINE COMMUNITY OUTREACH

On Saturday, September 14, 2019 the Department of Medicine partnered with the Virginia Wellness Initiative (comprised of UVA Medical Students) providing health screenings during the Scottsville Community Day Health Fair. Screenings for blood pressure, height/weight/BMI, mental wellness, and Hb/A1c, were available as well as Health Guidance and Counseling.

Thank you to Terri Washington from the Department of Medicine for organizing the event. Joe Mort with VWI for his leadership and for the participation of the following medical students who gave of their time and knowledge: Funmi Eletu, Andy Skipper, Lena Bichell, Vishi Bhatnagar, JungEun Ahn, Laura Fuhr, Sarah Flores, Ginny Lee Olivier, Jeffery White, Ashley Silver, Elias Ayoub, Zev Gurman, Tien Gomlekoglu, Ben Cardenas, Justin Coley, Lauren Dunavant, Alex Martin, Hannah Sigmon, Nicholas Deal, Madisyn Primas, Bahrom Ostad, Joe Mort, Nicole Thieken, Joanna Odenthal, Jenny Zhang, Katya Swarts, Sarbajeet Nagda, Lydia Luu, Courtney Heron, and Alexandra Deal.

TITLE



Nicholas Deal takes the blood pressure of a Scottsville resident



Elias Ayoub and Lydia Luu



Elias Ayoub, Zev Gurman, Madisyn Primas, and Lauren Dunavant



Nicole Thieken and Jenny Zhang



Elias Ayoub, Madisyn Primas





Bahrom Ostad, Tien Comlekoglu, Alex Martin, and Nicholas Deal

Greg Ahn, Lena Bichell, and Shefali Hegde



Dr Mitchell Rosner and Scottesville Mayor Nancy Gill



Lydia Luu and Ally Deal



Jeffery White and Joe Mort



Sarbajeet Nagda and Courtney Heron



Andy Skipper and Vishi Bhatnagar



Ashley Silver and Sarah Flores



UVA Medical Students Jenny Zhang, Joanna Odenthal, and Joe Mort work with Scottsville community members

Statewide Survey Report on Interest and Barriers to Telehealth Delivery of DSMES and National DPP in Virginia

Virginia Center for Diabetes Prevention and Education

Over the next five years, the Virginia Department of Health would like to expand telehealth's use for Diabetes Self-Management Education and Support (DSMES) and National Diabetes Prevention Program (National DPP) throughout Virginia. To reach that end, the Virginia Center for Diabetes Prevention & Education conducted a state-wide survey to better understand Virginia-based DSMES and National DPP program's use, interest in and barriers around using telehealth for the delivery of any aspect of their programming. There was a 97% response rate for National DPP providers, and an 80% response rate for DSMES providers across the state.

You can find the full report **<u>HERE</u>**.

The Key Findings for both populations are:

- Few programs in Virginia are using Telehealth to deliver the National DPP (8%) or DSMES (14%)
- A minority of the programs use mHealth apps to engage patients (22% DPP; 8% DSMES) and only 1 DSMES used remote monitoring of blood glucose
- Lack of reimbursement and perceived cost of technology are the primary barriers to using technology
- Both groups of providers were "interested" in using telehealth as a delivery mode but interest was subdued (mean 2.9 of scale from 1-5 with "3" being interested)
- Majority of both sets of providers report a lack of training in telehealth but the majority (75% of National DPPs and 97% of DSMES) would like further support and training

VCDPE will be using this information to educate and mentor National DPP and DSMES providers over the next few years. These survey findings can also support and inform all of our work for the InnoVAte grant.





DSMES National DPP

GET THE MOST OUT OF YOUR BENEFITS DURING OPEN ENROLLMENT OCTOBER 7-18



DIVISION SPOTLIGHT - GENERAL, GERIATRIC & PALLIATIVE MEDICINE

Division Chief Message - Mohan Nadkarni, MD



Mo Nadkarni, MD

It is my pleasure to highlight the work of the Division of General, Geriatric, Palliative, and Hospital Medicine (GMGPH) and the excellent, varied work of our 85 Faculty, six NPs, and fifteen staff produce. In this month's newsletter, we will focus on General, Geriatric, and Palliative Medicine. Next month's newsletter will highlight the work of Hospital Medicine.

A large and diverse division, GMGPH is the backbone of Internal Medicine Training in the inpatient and outpatient arena. Among other things, Divisional faculty hold leadership roles in the preclinical courses of Foundations of Clinical Medicine, Social Issues in Medicine, Geriatric Clerkship, and AIM. Additionally, many faculty also teach on the General Medicine wards. Division Members are also engaged in providing the Internal Medicine residents with a three-year continuity experience at UMA and much of the ambulatory didactic and experiential education the medical residents receive.

The division also provides expertise in the quality improvement arena with multiple members engaged in departmental

and hospital projects that are improving care for patients. Research excellence in the areas of end-of-life, dementia, and rural health are also exhibited.

This issue highlights just a few of the panoply of activities in which our faculty excel. From infectious disease preventive care in nursing facilities to expertise in sports medicine programs to innovative educational experience such the Patient Student Partnership Program to the new Transitional Care Management clinic to reduce hospital admissions, to the national model Palliative Care program.



Ira Helenius, Physician Workroom

Most importantly, though, our faculty care about patients and each other. I couldn't ask to lead a better



Residents learning about glucose monitoring

group of collaborative colleagues and friends. I am very proud of our faculty and staff for the hard work they do and invite you to learn more about a few of our robust programs in the articles featured here.

~Mo Nadkarni, MD, Division Chief

ECONSULTS

By Kim Dowdell, MD



eConsults are an asynchronous consult exchange within the electronic medical record between care providers. In many ways, it is the formalization and digitalization of the curbside consult. It allows for more comprehensive care to be done in the primary care home by providing PCPs the support they need to handle low-complexity specialty issues. The eConsult project is a value-based program run out of the office of Telemedicine at UVA with integral support from the Department of Medicine. UVA was an early adopter of eConsults, participating in a Center for Medicare and Medicaid Innovation grant facilitated by the American Association of Medical Colleges in 2014 and moving under Telemedicine in 2017.

The service is available to all UVA Primary Care Providers, with all medicine specialties participating in the eConsult program. Medicine specialties are responsible for completing the majority of the over 5000 eConsults submitted to date, with the majority answered within just 24 hours of submission. There is a national uptake trend of eConsults at academic medical centers, and UVA has emerged as a leader in the application of this improved means of patient access. Through our advocacy work with the AAMC, Medicare recently created new CPT codes for eConsults. Our ongoing advocacy surrounds clarification of the parameters of these codes and further engagement with billing and reimbursements opportunities. Advancing our role as a leader in eConsults, the department has produced notable scholarship, with abstracts accepted to national conferences for internal medicine (SGIM/ACP), Hematology (ASH), Gastroenterology (ACG, DDW) and currently have 3 publications in press.

For more information, please contact Kim Dowdell, MD or Samuel Collins, program manager.

COMBATTING INFECTIONS IN THE ELDERLY

Laurie Archbald-Pannone, MD



Over the past 15 years, Dr Laurie Archbald has been involved in infectious disease research to address the infections that affect the geriatric population. With a fellowship in both geriatrics and infectious diseases and biodefense, as well as an MPH in clinical trials and research, she is a national leader in the field. She has extensive collaborations with Drs Dick Guerrant and Cirle Warren in Infectious Diseases, focused on clinical

impact and outcomes of C. difficile infectious Discusse, locused on enheur and in further collaboration with Dr Ann Hays and Brian Behm in GI and others, they developed the Complicated C. difficile Clinic for the care and management of patients with recurrent and severe C. difficile infection (J. Clin. Med. 2019, 8(7), 1036; https://doi.org/10.3390/ jcm8071036).

In addition, since 2013, Dr Laurie Archbald has served on the Infection



American Geriatric Society Annual Convention

Control Committee for AMDA – The Society for Post-Acute and Long-Term Care Medicine. AMDA is the only medical specialty society representing physicians and other practitioners working in various post-acute and long-term care (PALTC) settings. In this role, she has worked to shape the national dialogue on patients in these setting and infections and infection control. She is a faculty instructor for the Infection Prevention in PA/LTC Certificate



UNIBE Medical School teaching, Santo Domingo, DR

Course, in collaboration with CDC and SHEA, as well as a content evaluator for the pilot CDC Preventionist Training Course. She has also helped to develop guidelines for pneumonia vaccination for residents in PALTC (J Am Med Dir Assoc. 2017 Feb 1; 18(2): 99–104. https://doi.org/10.1016/j.jamda.2016.11.010), as well as upcoming guidance statements on influenza and measles prevention guidelines for PALTC healthcare workers.

Dr Archbald has taught clinicians geriatric and PALTC infection control locally, nationally, and internationally. In May 2019, she was invited faculty to UNIBE Medical School in Santo Domingo, Dominican Republic to work in collaboration with local students, faculty and administration regarding geriatric clinical care, education, and C. difficile infection. Here at UVA, Dr Archbald has worked in local skilled nursing facilities since 2008 and provides primary and consultative care for geriatric patient at UVA Geriatrics JABA clinic.

GENERAL, GERIATRIC & PALLIATIVE MEDICINE - CLINICAL HIGHLIGHT

SPORTS MEDICINE

By John MacKnight, MD



When I began my faculty career here at the university in 1996, I could not have dreamed that my professional life would evolve into the dream job of any sports medicine provider. It was my good fortune that Danny Becker and acting chair

Munsey Wheby envisioned a musculoskeletal care and teaching niche for me. In just three years I had established myself in the sports medicine community and had created a primary care team physician model with UVA Athletics that had never existed before. Over the years my clinical responsibilities have varied considerably between



Olympic Gold Medal

U n iversity P h y sicians Charlottesville, Athletics, and a



joint appointment in Orthopedics. It's been a joy and challenge to wear all of those hats.

Day to day management of our student-athletes involves the usual maladies of young adults superimposed on the nuances of their athletic demands, the time of the season, and travel. Those are fun challenges to work through. In recent years, our attention has focused more heavily on the management of concussion and concerns about the long-term consequences of head injury, heat illness and the prevention of heatstroke, eating disorders and disordered eating, and the full breadth of mental health concerns. On any given clinic day, I'm using almost all of my primary care skills in one session. Away from

the clinic, I have worked every football game for the last 20 years and every men's basketball home game as well as ACC and NCAA tournament games. The fall and spring sport demands can really wreak havoc on my clinic schedule, but my patients graciously roll with it, and some clearly like having the "Hoos Doc" for their physician.

In my capacity as a UVA team physician, I've had the privilege of helping countless patients from the community reach



their exercise and competitive goals. I've worked with individual national champions, professional athletes, World Cup stars, and Olympians. I've been a part of 15 NCAA national championship many ACC championships, teams. and 10 bowl games. Without question, my professional highlight to date was the 2019 men's basketball national championship. That team embodied all that is great about collegiate athletics. No team will ever have a greater comeback story, and I am humbled to have played a small role in their success. What a thrill to climb the ladder in Minneapolis and 📶 help to cut down the championship nets.

I am thankful every day for the opportunities that the Department of Medicine has encouraged me to pursue. Many more to come! Go, Hoos!



NCAA Basketball Net

NCAA Basketball Trophy

TRANSITIONS IN CARE

By David Callender, MD



Transitions in care from the inpatient to outpatient settings are a vulnerable time for patients and their care teams. There are countless interventions that could be undertaken within this realm. However, the best is a targeted and collective effort via the Transitions of Care Management (TCM) Services model. This model consists of an extended primary care visit with a dedicated transition team within 14 days of discharge. To prevent any gaps in care during the transition, this team consists of nursing coordination, pharmacy level interventions, and a direct physician evaluation.

We have iteratively expanded our TCM clinic at University Medical Associates (UMA) since 2016. I currently oversee this clinic which consists of three half days a week. Two sessions are staffed by residents and one by myself directly. These visits are often very exhaustive, yet the fruits of our labor are highly rewarding. We have found that patients seen via the transitions of care model have a reduction in readmission rate, a trend towards fewer ER visits, and result in less direct cost utilization.

We have navigated many challenges in our extensive academic practice which include complex cases, a large catchment area, and hefty no-show rate. On the horizon, we plan to create highly dedicated nursing support that can collect, coordinate, and anticipate potential gaps in care. Our goal, as always, is to get the right patients seen by the right providers at the right time. Please refer admitted patients already established at UMA to the "HOSP FV RES" Clinic. We have a dedicated scheduler who will guide you through acquiring an appointment with our team. Please always let your patients know the unique nature of this visit as they will be seen by team who specializes in the transitions of their care!

NATIONAL PALLIATIVE CARE LEADERSHIP CENTER

By Leslie Blackhall MD



As a CAPC National Palliative Care Leadership Center, the Section of Palliative Medicine provides training and consultation for institutions which want to start or grow their community and clinic-based palliative care program. The Section recently hosted the Inova Medical Center Palliative Care service for a 2-day intensive training and will be providing ongoing consultation for the next year.



Tim Short, MD, Josh Barclay, MD and Kenneth White, PhD, ACNP-BC, FAAN

PATIENT STUDENT PARTNERSHIP

By Rachel Kon



To expose medical students to longitudinal care of chronic illness patients and have a context to mentor students' professional identity formation, the UVA School of Medicine launched a new required longitudinal course called the Patient Student Partnership (PSP). Piloted by Dr. Peggy Plews-Ogan in the Phronesis Project prior to being expanded last year to the whole class, the PSP program instills the mindset of physicians as health advocates from the beginning of their training as they help their patients navigate the health care system. Patients are recruited who are excited to teach medical

students what it is like to live with chronic illness and how they would like doctors to communicate with them. Together a mutually beneficial student doctor-patient relationship can develop and give the student context for the pre-clinical science knowledge they are learning. As the students' clinical skills develop, they will be able to contribute more to



UVA Student Partnership

the health care team and learn about multidisciplinary care necessary to care for chronic illness patients. The students are mentored in the relationship building with the patient by their Foundations of Clinical Medicine (FCM) faculty coach.

The PSP program has been fortunate to partner with many UVA clinical sites, including many in the department of medicine, to recruit patients that will shape our future doctors. UMA, UPC, Heart, and Vascular clinic, Nephrology and transplant nephrology clinics, Ryan White HIV clinic, JABA Geriatrics, GI/Hepatology, Pediatric Endocrinology, Pediatrics Birdsong clinic, Pulmonary clinics, Rheumatology clinic, PCC and Crossroads Family Medicine have all been sharing their patients with our students. Through these clinics the students meet the pharmacists, social workers, dieticians, and nursing teams that support our patients. The students have been able to practice skills they learn such as medical interviewing, motivational interviewing, and medication

reconciliation with their PSP patient rather than only in role plays and with actors. In the first year, students go on home visits and get to see how complex managing chronic illness can be. The PSP program has been highlighted

in several UVA publications as both patients and students are finding great value in the <u>program</u>.

The Patient Student Partnership course is directed by Rachel Kon, MD. We are very fortunate to have a fulltime coordinator, Colleen Kiernan, who reaches out to patients, explains the program, enrolls them, sends them regular updates, and troubleshoots communication issues with the students and patients.

If you have interested patients, please connect them with Colleen at <u>patientstudentpartnership@virginia.edu</u> (434) 243-3996) <u>https://med.virginia.edu/psp/</u>



GENERAL, GERIATRIC & PALLIATIVE MEDICINE - RESEARCH HIGHLIGHT

LEARNING ABOUT GERIATRIC CARE IN NEW PLACES AND NEW WAYS

By Christina Tieu



The geriatrics clerkship for the UVA School of Medicine has gotten off to a strong start this year with a revamped curriculum focused on the importance of managing multi-morbidity in geriatric adults, prevalence of geriatric syndromes and patient-centered decision making. As clinician-educators we believe that thoughtful care of the geriatric patient is vital to the success of our community and the UVA health system at large. Our mission is to ensure that all UVA medical school graduates are adept and confident in caring for the growing elderly population and that they understand how geriatric care impacts their chosen specialty.

The 2 week geriatrics clerkship is held during the fourth year of medical school and exposes learners to a variety of learning environments along the continuum of care, from outpatient geriatric primary care to long term care in local skilled nursing facilities. Many students remarked that this was a unique strength of the clerkship, with one student noting "I loved having exposure to places like SNF, rehab, [and] TCH because it really helps contextualize where patients are going after the hospital." This year, we have strengthened our partnership with the Palliative Medicine department and offered students experiences in inpatient Palliative consultations, outpatient clinic as well as hospice experiences. This too, has been met with very positive student feedback. We continue to elicit feedback from students and preceptors as the curriculum is fine-tuned and are partnering with the Simulation and Clinical Skills Centers to launch a simulation experience within the next year. This experience will focus on bringing delirium, dementia and palliative care concepts to life in a realistic learning environment.

We are excited to bring innovative curricula to geriatric education and feel privileged to have the opportunity to continue working with the dedicated students at UVA School of Medicine. To that end, we welcome any ideas and partnerships from staff members both in and outside of the Department of Medicine. Please don't hesitate to contact Christina Tieu at: ct7qf@virginia. edu if you'd like to be involved in the clerkship or have ideas to expand learning opportunities for our students.

POSITIVELINKS

By Tabor Flickinger



I am a co-investigator on the PositiveLinks (PL) project, a mobile health (mHealth) intervention designed to improve HIV care. The program involves a custom smartphone app that promotes selfmanagement, while also connecting patients to their care team and to other People Living with HIV (PLWH). PL development was informed by the

mHealth literature, behavior change theory, and formative input from our non-urban, socio-economically disadvantaged, patient population. The app includes daily queries of medication adherence, mood and stress, weekly quizzes, appointment reminders, tailored educational resources, a community message board (CMB), and secure messaging between patients and their HIV care team. Participants in the pilot phase demonstrated improved engagement in care and viral suppression. The CMB provides a secure anonymous forum for PLWH to give and receive social support and mitigate HIV-related stigma. Preliminary analysis of the messaging indicates that this feature is used both for information exchange and rapport-building, helping



patients remain engaged in care between clinic visits. PL is tailored to a population with low literacy, predominantly non-white and living below the federal poverty level. PL engages patients who tend to have low uptake of technological interventions and who are at higher risk of poor clinical outcomes.

Due to the success of the PL program, it has now been adopted as usual care at the Ryan White Clinic at UVA. It is expanding to other sites within Virginia and across the United States. We are formally evaluating the implementation of the multi-site expansion using the Consolidated Framework for Implementation Research (CFIR) methodology. Our team is working on adaptation of PL to other areas of need, including individuals with substance use disorders and those who use HIV pre-exposure prophylaxis (PrEP). PL and its related projects are funded by the Virginia Department of Health. I am also preparing a NIH grant submission that would focus on analysis of technology-mediated communication between patients and their HIV care team and how to optimize mHealth for supporting chronic care management, in particular for vulnerable populations. PL is a multidisciplinary collaboration, led by Dr Dillingham and Dr Ingersoll, including expertise from infectious disease, psychology, general medicine, public health, educational design, and information technology. My main role is in the qualitative and mixed methods analyses. I also enjoy mentoring students and other trainees on the team to develop their research skills. We are a busy and productive group, actively engaged in improving care for patients. (13)

GENERAL, GERIATRIC & PALLIATIVE MEDICINE - RESEARCH HIGHLIGHT

Integrated translational health Reseach / Laurie Archbald / THRIV

Comparative Effectiveness trial of early integrated telemedicine versus In-Person Palliative Care for Patients with Advanced Lung Cancer / Leslie Blackhall / Mass General

Patients, Family Caregivers & Clinicians Perspectives on What Matters Most in the Management of End-stage Kidney Disease / Leslie Blackhall / 3 Cavaliers Program

Using mHealth to Support Patients and Caregivers in Managing Cancer Pain / Leslie Blackhall / American Cancer Society

Innovative State and Local Public Health Strategies to Prevent and Manage Diabetes and Heart Disease and Stroke / Kim Dowdell / VDH

HIV / Tabor Flickinger / VDH

Virginia at Home: An Interprofessional Home-Based Medical Care and Education Program Serving Rural Older Adults Living with Dementia and Multimorbidity / Justin Mutter / HRSA

The Risk Underlying Rural Area Longitudinal Study and is an observational study of adverse lung, heart, blood and sleep outcomes / **Paul Targonski** / NIH

GENERAL, GERIATRIC & PALLIATIVE MEDICINE - PUBLICATIONS

Mehta A, Blackhall LJ Women in palliative care leadership. J Pall Med Accepted for publication 3-2019

Mitchell JL, **Blackhall LJ**; **Barclay JS**. Screening for opioid misuse in the nonhospitalized seriously ill patient. J Pall Med accepted for publication: 3/2019

STAT RT: a prospective pilot clinical trial of Scan - Plan – QA – Treat stereotactic body radiation therapy for painful osseous metastases. Wilson DD, Alonso CE, Sim AJ, Tack T, Hansfield LL Chen Q, Blackhall L, Showalter TN, Reardon KA, Read PW. Annals of Pall Med Accepted for publication 1/2019

Raj Desai, MS; Fabian Camacho, MS, MA; Xi Tan, PhD; Virginia LeBaron, PhD; Leslie Blackhall, MD; Rajesh Balkrishnan, PhD, Mental Health Comorbidities and Elevated Risk of Opioid Use in Elderly Breast Cancer Survivors Using Adjuvant Endocrine Treatments. Journal of Oncology Practice accepted for publication 6/2019

Weiner DK, Gentili A, **Coffey-Vega K**, Morone N, Rossi M, Perera S. *Biopsychosocial profiles and functional correlates in older adults with chronic low back pain: a preliminary study.* Pain Medicine 2019; 20: 1300–1310 https://doi.org/10.1093/pm/pny065

Debra K. Weiner, M.D.1-5, Angela Gentili, M.D.6,7, Michelle Rossi, M.D.1,2, Katherine Coffey-Vega, M.D.8, Keri L. Rodriguez, PhD9,10; Kristina L. Hruska, MS9, Leslie Hausmann, PhD9,10, Subashan Perera, Ph.D.2,11 Aging Back Clinics - A Geriatric Syndrome Approach to Treating Chronic Low Back Pain in Older Adults: Results of a Preliminary Randomized Controlled Trial. Pending publication, accepted for publication to Pain Medicine

Deeds S, Dowdell K, Chew L, Ackerman S. Implementing Opt-in eConsult program at Seven Academic Medical Centers: Primary Care Provider experiences. Journal of General Internal Medicine. E Published June 2019

Bhavsar I, Wang J, Burke S, Dowdell K, Hays R, Intagliata N. Electronic Consultations to Hepatologists Reduce Wait Time for Visits, Improve Communication, and Result in Cost Savings. Hepatology Communications. July 2019

Ackerman S, Dowdell K, Clebak K, Quinn M, Shipman S. Patients assess an eConsult model's acceptability at five U.S. academic medical centers. Annals of Family Medicine

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GENERAL, GERIATRIC & PALLIATIVE MEDICINE - PUBLICATIONS (con't)

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GENERAL, GERIATRIC & PALLIATIVE MEDICINE SPOTLIGHT PROFILE

STAFF PROFILE - Michelle Pottala



Trevor and I at a Formula One race

Tell us a little bit about yourself.

I've worked at UVA for a total of ten years, spending the last two in the SOM-Division of General Medicine and the previous eight in the MC-Finance Department. My husband, Trevor and I built a home 15 years ago near Fork Union on 11 acres of land that no one can find because it doesn't appear on GPS and people are scared to drive into the woods. We live there with our three cats, who love us unconditionally on their own terms.

Why Healthcare?

I hadn't planned on a career in healthcare. After I received my bachelor's degree, I went for an interview at UVA that led to another interview with someone I had met while working my way through college at a local bank.

What brought you to Charlottesville?

I have lived near Charlottesville my entire life. I'm definitely a small-town girl!

What excites you about your work?

I enjoy working with numbers, and I'm somewhat addicted to spreadsheets! My finance job in General Medicine offers me plenty of opportunities to work with both. Also, I value the many friendships I've made while working at UVA.

Proudest/greatest achievement outside the professional realm?

My proudest achievement is being the first person on my father's side of the family to earn a college degree. A modest upbringing meant a long term plan for earning the degree, so I was about 26 years old when I received my bachelor's. Unfortunately, my father passed when I was 21, but I used that adversity to drive me forward.

Next life?

I think a job studying and researching wild cats would be cool! I often find myself envying the researchers in the big cat documentaries.

What are you usually doing on the weekend?

I like to spend time at home on the weekends because it's like fancy camping! There's so much wildlife to observe, and the sounds of nature are deafening. I love going for runs on my long driveway and having encounters with all of the different animals.



Trevor and I at a friend's wedding

How did you meet your partner?

My brother's interaction with Trevor played a part in us, ultimately getting together. While chatting, it came up that Trevor and I were both attending the same college, and Trevor realized that he knew of me. Trevor asked him for my phone number, and my brother gave it to him. (I was not happy with my brother!) Several months later Trevor asked me out. I accepted, and when I asked if he wanted my number, he said "I already have it" and quickly rattled it off to me! That was 24 years ago.



Our kitty, Joey

Favorite vacation/activity spot?

I don't have a favorite spot but have enjoyed everywhere I've vacationed. I've especially enjoyed my trips to Saratoga to watch the horse races and my trips to Indianapolis to attend the Formula One races.

Most admired person, and why?

I admire my husband, and I'm reminded on a daily basis of the strength of his character. Trevor medically retired from the U.S. Navy 27 years ago after suffering a traumatic spinal cord injury that resulted in paraplegia. His medical knowledge and experience as a Navy Corpsman allowed him to adapt better than some folks. Living with a physical disability has its many challenges, and one challenge that Trevor (and I) have been slow to respond to differently is the human

curiosity component. When most folks meet someone with a visible physical disability for the first time, they are curious as to how it happened. They don't realize when they make the inquiry, it forces the person to relive a very tragic experience over and over. We've answered the questions, and we've had the conversations only because we didn't want to be rude or have the person feel bad for asking it. However, we've grown tired of this "broken record" experience. We realize that we need to respond differently so that meeting new people can be a more enjoyable, positive experience for him (and me.) We decided the response could be as simple as "Let's not ruin a good time by recounting a sad story."

Best advice anyone ever gave you?

"Slow is smooth, smooth is fast" and "Work smarter, not harder." I don't know who to credit with these quotes, but they can be applied to almost anything in everyday life.

What about you would surprise us?

I raised laying hens for about five years and loved it! Raising baby chicks proved to be a somewhat lonely time for Trevor. He would often find me in the garage, sitting next to the brooder with a sleeping baby chick perched on my hand. I had very spoiled chickens!

FACULTY PROFILE - Nat Timmins



My lovely wife and I

Tell us a little bit about yourself.

I have been at UVA for just over a year. After practicing in Colorado Springs, CO for 19 years, my wife and I moved to Charlottesville for the next chapter in our lives after "empty nesting" in the summer of 2018.

Why Healthcare?

Healthcare, for me, is a wonderful juncture of science and service. Some science feels too nebulous to me. Using scientific advances to care for my fellow humans is where I believe healthcare has such an important, practical role.

What brought you to Charlottesville?

My wife grew up in Charlottesville, and we have been visiting every year to see family and go to the beach in Sandbridge. We were looking for a new adventure as empty nesters. I had always been impressed by UVA and finally have the chance to practice at this great institution.

What excites you about your work?

I love practicing at UVA because our medical staff is very welcoming and collegial. Having daily interactions with other experts in my own field and in many different medical fields inspires me. Working in a teaching institution brings the added excitement of working with the new ideas and enthusiasm of students and learners of all levels. My position in the Palliative Care Clinic in the Cancer Center allows me every day to practice my favorite aphorism of medicine "to cure sometimes, to relieve often, and to comfort always."

Proudest/greatest achievement outside the professional realm?

Raising two daughters to adulthood. Well, close enough – they are both in college. My oldest is a Junior at the University of San Diego studying to be an occupational therapist, and my youngest is a Sophomore at Kenyon College studying anthropology and psychology.

Next life? Forest ranger.

What are you usually doing on the weekend?

Trying to figure out how to manage (tame?) a lawn and garden in Virginia after years of xeriscaping in Colorado and California. We also like to explore the historical sites around Virginia or visit the beach. We have been landlocked in Colorado for a long time.

How did you meet your partner?

Surprisingly, we were set up by my wife's boss. I was doing a summer

project in medical school at UCSD on the health of homeless teenagers in San Diego. My wife worked as a social worker at the agency that ran a homeless shelter. Her boss had me present the findings of my research and invited my wife to attend to the "presentation." After the presentation, the boss had all her staff leave...except my wife. Awkward but effective. We just celebrated our 24th anniversary!



Favorite vacation/activity spot? Beaches or cruises...or better yet, both.

Most admired person, and why?

My great-grandfather, E.B. Wilson. Of course, I am biased, but he was a renaissance man and scientist of the first order. He wrote the first book on the cell, played the cello, spoke multiple languages, and traveled the world.

Best advice anyone ever gave you? Trust but verify.

What about you would surprise us? After living in Switzerland and California, I can understand Swiss German and speak German, French, and Spanish.

Daughters

Happy father

GENERAL, GERIATRIC & PALLIATIVE MEDICINE SPOTLIGHT PROFILE

FACULTY PROFILE - David Callender



Soccer star

Tell us a little bit about yourself.

I've been at UVA for 1 year, after an early career as a military and embassy physician. I grew up in Northern Virginia, attended college and medical school in Virginia, and lived in a lot of places early in my career (Hawaii, Georgia, Washington, Kuwait, and Brazil). My clinical practice is in general internal medicine with a focus on public health, transitions of care, and education of medical residents. I am a foundations of clinic medicine coaches at the School of Medicine and am interested in leadership. I live in Ivy, have a wife and 2 kids, and two labs.

Why Healthcare?

I have always been interested in people. With that, I was drawn to medicine from an early age. How better to interact with people than during times that range from the lowest of lows to the highest of highs? I have always been very comfortable in front of people and get great enjoyment out of teaching. Thus, I am naturally drawn to being an educator of both patients and medical professionals.

What brought you to Charlottesville?

My relocation to Charlottesville was very purposeful. I spent the previous decade living far away. I gained a lot of foundational insight into myself and others being immersed in other cultures. However, my family and I were ready to be done with that stage in our lives. My most fulfilling professional time to

date had been the years I had spent at a major academic center. I knew that I wanted to go back to a similar setting permanently. I also knew I wanted to be relatively close to my family in the Washington, DC, area. Finally, I needed the charms of rurality, and this is clearly something that the Charlottesville has to offer.





Just about everything excites me about work. I love teaching. I love taking care of patients. I love getting to know both students and patients. Probably the best part of work is the variability one has in the academic setting. One day you are seeing a private patient from just west of town. Another day you are staffing a resident patient who has Return from deployment

traveled from 4 hours south of town. The next day you are teaching a group of medical students what it means to be a physician. It is always fun and often different day to day. I embrace this variability.

Proudest/greatest achievement outside the professional realm?

My greatest achievement is my kids. I have two wonderful children, Anna and Miles. The best thing about them is that they really get along well. They are currently six and nine and can play for hours without much of an argument. I am very proud of everything they do and what they may become.

Next life?

My next life would be a coach for a professional or college sports team. I have always been a huge fan of sports. I have never wrapped my head around how one becomes a serious coach. However, I am envious of what a coach does. They mentor, educate, and often heal their players. Seems like a great fit for me.

What are you usually doing on the weekend?

On the weekends, I am often coaching my children's baseball, softball, and soccer teams. After that I enjoy spending time with my family and neighbors outdoors talking, grilling, and doing yard work. I also enjoy walking my dogs through various dirt roads in the county and hiking the many awesome trails in the Shenandoah and surrounding areas. You will also see me at just about every UVA sporting event I can go to.

Favorite vacation/activity spot?

My favorite vacation by far is Sebago Lake, Maine, in the summer. Nothing beats 80 degrees, a warm breeze, and the cold clear water. I enjoy long open water swims, running the railroad tracks and jumping in the water, and spending time with my family by the campfire.



The Olympics



Soccer kids

Most admired person, and why?

I admire my parents the most. I have taken a lot from each of them. My father instilled in me the dedication to be a leader and serve our country as a military officer. My mother instilled in me the passion to help and take on the suffering of others as a medical professional.

Best advice anyone ever gave you?

The best advice anyone ever gave me is to give everyone the benefit of the doubt. To that, I must say we should always consider people intelligent and with the best interest at hand.

What ultimately distinguishes us as a healer is how empathetic or kind we are to each other. This can be applied to patients, learners, and colleagues.

What about you would surprise us?

In my next life, I'd like to be a meteorologist. I am always up on the weather, tracking storms, and warning others about what is to come. Kind of like a physician you are not always going to be correct. Instead, it is the information you provided and how you interpreted it that is important. I am also a twin, and my twin brother has a full head of hair. I clearly do not!

GENERAL, GERIATRIC & PALLIATIVE MEDICINE SPOTLIGHT PROFILE

FACULTY PROFILE - Christina Tieu



My parents, boyfriend, and me at Luray Caverns

Tell us a little bit about yourself.

I have been an assistant professor within the Geriatrics department at UVA for two years and have been co-clerkship director of the UVA SOM Geriatrics Clerkship this past year. I was born in Vancouver B.C. Canada, grew up in Seattle, WA, and am a stereotypical Northwesterner. I love a good rainy day, drink more coffee than I'd like to admit and enjoy being by the water. I now live in Charlottesville with my wonderful boyfriend Jeff, who is a neurosurgery resident at UVA, our two dogs, and a cat.

Why Healthcare?

I pursued medicine as a result of personal experiences with my mother, who struggled with severe depression in my childhood. I grew to understand how health conditions impact patients' lives and the lives of their families and wanted to translate this understanding into a career. I ultimately subspecialized in geriatrics as a result of several superb physician mentors who I had the privilege of

working with in medical school. They were wonderful models for how empathic physician-educators can make a substantial impact on the care of our elders.

What brought you to Charlottesville?

I spent eight wonderful years in Rochester, MN, as part of my training but needed to escape the sub-zero winters! Charlottesville seemed like a



good place to do that.

What excites you about your work? I became a geriatrician because love interacting with elderly Т patients; this continues to be one of the best parts of my job. I have a wonderful panel of patients with eclectic backgrounds, skills, and hobbies and I am always



Ollie the Beagle

learning from them. It has truly been a privilege to serve as their physician. As an educator, I love it when students have an "ah-ha" moment during our time together! Their enthusiasm and positive energy help drive my work every day.

Brody the wirehaired dachshund

Next life?

I'd become a potter or a quilter. Maybe both.

What are you usually doing on the weekend?

Jeff and I usually spend time with the dogs and playing board games. When I have downtime on my own, I love to sew even though I am not very skilled yet. Picking out fabric combinations for quilts is one of my favorite parts.

Helping my parents purchase their first home.

Proudest/greatest achievement outside the professional realm?

How did you meet your partner?

We met in medical school over eight years ago and have been inseparable ever since.

Favorite vacation/activity spot?

Being anywhere in Hawaii. The laid back "Island Time" is a cure for anything.

Most admired person, and why?

My parents. They fled Vietnam during the war when they were 22 y/o and ended up in a Malaysian refugee camp before being sponsored to immigrate to Canada. They successfully raised two kids on their own, despite having limited education and resources. I derive much of my strength from them.



Dora the tortoiseshell tabby

Best advice anyone ever gave you?

Concerning work-related inbox messages: "only touch one message once." In other words, once you open a message, handle it immediately instead of leaving it for "when I have more time." I was once told that a physician's inbox is like the Bermuda Triangle, you can get lost in it forever.

What about you would surprise us?

My guilty pleasure is binge-watching reality cooking competition shows. I've watched more than I'd like to admit.

HOW WELL DO YOU KNOW GENERAL, GERIATRIC & PALLIATIVE MEDICINE?



Across

- 1 This double Hoo (last name) bleeds blue and orange.
- 4 He's like Dorothy and isn't in Kansas anymore (last name).
- 5 Jon Bartels developed this practice to offer closure to medical team and patient after a patient death (two words).
- 6 This clinic is the largest provider of indigent primary care.
- 8 This physician (last name) works his craft on the field of play.
- 10 This physician's name is like a measure of time just spelled differently.
- 11 What is new Geriatric Section Head, Justin Mutter's, favorite word?
- 13 This physician (last name) is a birder extraordinaire.
- 16 Laurie Archbald-Pannone grew up with crawfish boils and Mardi Gras. In what state did she reside? 18 Specialty at UMA that deals with "agony of de feet."
- 20 Which Division is Mitch Rosner's favorite (three words)?
- 22 Clay may be his name but a potter he is not. What is Russ Clay's specialty (two words).
- 25 Division employee, Debra Burleigh, was born in this city where mummers march every New Years.
- 26 Which Batman villain does Sr. Admin Assistant, Shaun Wickline, most identify with?
- 27 Leslie Blackhall has spent time with which world leader (two words)?
- 28 For what is Peggy Plews-Ogan known?

Down

- 2 Division Administrator, Cyndi Smith-Power, grew up in this state where the winds come sweeping down the plains.
- 3 This physician (last name) teaches others to focus awareness on the present moment.
- 6 Joel Schectman is responsible for the management of what?
- 7 Palliative fellow, Alina Fomovska, speaks this number of languages.
- 9 What item can division staff not live without?
- 12 We can blame this physician's work for lowering the age at which colonoscopy's are now recommended. He's also hungry like a.
- 14 This may keep the doctor away but most physicians love them.
- 15 Behind bars is where this physician spends most of his time (last name).
- 17 Ruth Aldridge kayaked this mysterious barrier island in September 2017. It no longer exists (two words).
- 19 Some believe that one or more of the offices on the sixth floor of the CDW are what?
- 21 Last name of the physician whose photography is something to behold and adorns the Division's walls.
- 23 Ira Helenius was born and raised in what country?
- 24 The DOM Associate Chair for Professionalism and Diversity has been working in this SE Asia country to develop professionalism and ethics among students, residents and faculty.
- 25 Palliative physician, Tim Short, makes these as a hobby.

(Answers Provided in Next Month's Issue)