In my 20 plus years in academic emergency medicine I cannot recall a more dynamic and interesting time. Healthcare in the US is currently like a raging river, with lots of debris and sediment being bounced around in unpredictable currents. We all long for the clarity of a clear stream of policy, financing, and practice changes that will allow us to provide high quality care at reasonable costs. But, for the next couple years it appears that we will continue to bob along in uncertainty. As a result academic leaders feel that each decision we make carries a greater weight than normal. As we look at clinical care in our emergency departments, the education of residents and medical students and our research programs we are struck with the level of both threats and opportunities that exist.

John Prescott, MD, who is the Chief Academic Officer of the Association of American Medical Colleges, and an emergency physician and former Dean, gave an address at our EM Chairs meeting in 2011 in which he described the challenging landscape for academic medicine in the era of health care reform. John advised us to “Keep your values, but change your practice.” In the Department of Emergency Medicine at Brown we have been adopting that approach. With a clear mission, and a 5 year vision that was set in motion in 2007, we have defined our values. Our academic progress, as outlined in this and previous newsletters, demonstrates what we value and what we are willing to work hard to achieve. The next step is to be bold enough to change our practice - not just in the clinical setting, but also in education, research and service - to position ourselves for continuing success. Some examples of how we need to change our practice are as follows:

1. **Emergency Department Patient Care** - The best EDs in the US have near perfect safety practices, extremely high quality as measured by accepted performance metrics, high service and satisfaction scores from patients and families, and minimal to no waiting time for care. In the future they will also be expected to perform at this high level with lower costs to payers and patients. We aspire to this at our EDs and have the metrics to rate among the best in some but not all categories. Now we need to be bold enough to make the commitment that no patient should be subject to a medical error in our EDs, should have an unreasonable wait, or poor communication or service. As you will read about in this Newsletter, Project CLEAR will help move us toward this commitment.

2. **Education** - The best residency programs, medical student education programs, and fellowships provide ample, high quality clinical teaching, outstanding didactics and a strong educational infrastructure, but have the flexibility to allow learners to incorporate their best learning practices as part of the program. We feel that we accomplish much of this in our outstanding EM residency and other educational programs. But, to improve what we offer, we held a special education retreat in 2011. We developed new approaches and methods to increase...
Message from the Chair

continued from page 1

4. Service – This component of our vision is broad and growing. Whether it is service and education through our international work in Liberia, Rwanda, American Samoa (and soon to be Nicaragua), or national service in SAEM, or ABEM, or ACEP, or the Rhode Island Free Clinic or the many activities of the Injury Prevention Center, we are having an impact locally, nationally and abroad. The challenge is to be able to fund all these activities in our growing department. In the coming years we will be seeking grants, philanthropy and other sources of funding in order to keep these programs moving in a positive direction.

As we raft down the white water river of health care reform over the next couple years we will endeavor to keep our values, and change our practice. As emergency physicians, we may actually enjoy the thrill of the rapids, but as a Chair, I won’t mind it when we reach that more placid section of the river!

Enjoy this edition of the Newsletter, and please stay in touch. Happy New Year!

Frances Weeden Gibson—Edward A. Iannuccilli, MD
Professor & Chair, Physician-in-Chief
Department of Emergency Medicine
Alpert Medical School of Brown University
Rhode Island & The Miriam Hospitals
Assistant Dean, Medical Student Career Development

Brian J. Zink, MD

Alpert Medical School Building Opens & Update - Emergency Medicine

The new Alpert Medical School building at 222 Richmond Street opened its doors on August 15, 2011 with an official dedication from the Corporation of Brown University on October 21, 2011. The new building is the cornerstone for the transformation of the historic ‘Jewelry District’ to the ‘Knowledge District’. The Knowledge District will continue to grow with newly unoccupied land made available with the Route 195 relocation project.

The Medical School has designated large areas for 3 separate student academies, which were designed to be support networks for medical students to meet, converse, and study. The building houses two auditoriums, seating up to 150 people. There are seminar rooms, case study rooms, a large anatomy lab, 16 clinical examination rooms, and various common areas as well as the atrium.

As part of the new building, The Department of Emergency Medicine and University Emergency Medicine Foundation has made a significant contribution to the medical school which will name the outdoor terrace on the 4th floor “Emergency Medicine Terrace”. The terrace overlooks the waterfront, downtown, as well as the “Knowledge District”. There will also be a new city park that will be seen from the terrace. It will be a great location for medical school events and will be enjoyed by medical students and visitors to the medical school for years to come. The terrace will be part of Brown’s “green” efforts. Bids for contractors for the space will be submitted by the first week of January 2012. The work is estimated to start on February 22, 12. Construction on the terrace should be completed any time between April 30th and May 30th, depending on the weather. An opening event will occur in some-time in May or early June 2012.
**The Miriam Hospital Emergency Department**

Gary Bubly, MD, Medical Director, The Miriam Hospital, Emergency Department

TMHED remains busy: we finished the year at 55,343, which was approximately 3000 patients over budget and the prior year’s volume. That growth seems to be continuing. From the beginning of October through mid-December, we are running 6-8% higher than last fall with an average of around 154 patients per day. Ambulance volume remains high as well. Service line changes to cardiology and orthopedics within the hospital have had no apparent impact on growth or patient mix within the ED.

The Op X project hit TMHED in October, and focused on enhancing ED throughput. Ilse Jenouri, Nathan Hudepohl, Dave Portelli, and I were part of a large multi-disciplinary team that participated in the ED OpX project. This primarily involved switching the layouts of 1C and the Annex, re-opening care rooms previously used for storage, doubling up larger bays in 1C, changing our triage process, re-allocating rooms 32-35 for triage, and reorganizing the storage in the department. We rolled out the project quickly on October 28th, and have maintained and fine-tuned the processes and layout since. There were many valuable improvements ranging from more consistent rapid delivery of registration stickers to radiology re-prioritizing our reads. Staff have adjusted to the changes, and the majority of the feedback has been positive. The OpX project was a bit of a test for the ED renovation plan, and seems to work.

The ED renovation plan, which has been scaled back several times over the years, required a change order with the Department of Health. This required us to make an appearance before the Health Services Council twice in December. As I write this we anticipate final approval from the Director of HEALTH. Meanwhile development/fundraising for the project is about to begin. This will include

(continued on page 12)

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**Anderson Emergency Center**

Frantz Gibbs, MD, Medical Director, Rhode Island Hospital, Anderson Emergency Center

The quality of the care in the Anderson Emergency Center depends on a complex collaboration of hospital clinical services.

The staff of the Andrew F. Anderson Emergency Center continues to develop clinical operations and care to ensure our patients receive high quality medicine on their terms. The staff communication and collaboration continues to create the foundation for these efforts.

With a focus on delivering patient-centered value, we continue to enhance our expertise in customer service. We have benefitted greatly this year from a home-grown continuing education program named Project CLEAR! This innovative program combines the elements of customer service and crew resource management. Didactic sessions are reinforced by immersing trainees in realistic simulations implemented by the Rhode Island Hospital Simulation Center. The initial education phase has been accomplished for the majority of staff and has given our highly experienced staff more tools to advance their care delivery. We look forward to supporting and maintaining these skills through team building events, communication tools, and service rounds. The broad participation by staff has been the program’s greatest strength and continues to grow throughout the department. Through this program and other endeav-

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There have been enhancements to the Hasbro Emergency Department to improve the experience for patients and families thanks to the proceeds from the 2011 Hasbro Ball. Every patient room will be equipped with new plasma TVs and DVDs, comfortable rockers or recliners and additional seating. Portable game systems and iPads for movie and game viewing will be available for patients during their visits and Keurig drinks are now provided to families. Specialized portable equipment and a music system are designed to provide distraction and to relieve anxiety for children with special needs. Equipment has been purchased and will be available for staff and families to use to help children cope with ED visits. An art cart for PED patients, complete with packaged projects is being designed by the artists in residence at RIH.

For most hours of the day, children and adolescents with psychiatric complaints now receive their emergency department care, including mental health evaluations in the Hasbro ED where the environment is well suited to the needs of children, adolescents and their families. Thanks to the tremendous effort of the Entire Hasbro ED staff and the department of Child Psychiatry at RIH and Bradley Hospital and the clinicians from Gateway Mental Health, the transition of patients from the DPod has been a success and has improved the patient experience and care and significantly decreased the turn around time.

The 18 month Hasbro ED core “Team Training Project” funded through a grant by the Risk Management Foundation was successfully completed this past year. The project used in situ simulation to train and reinforce the principles of team work and crew resource management to all RNs, MDs and ancillary staff in the PED. The Program will be presented at a national meeting in the upcoming year. A sustainability program for staff will begin in 2012.

We had an outstanding PEM fellows match. We are pleased to welcome 2 outstanding individuals to the PEM fellowship in July 2012. Marleny Franco, MD and Matthew Wylie, MD. Marleny Franco is a third year Pediatric Resident from The Children’s Hospital of Philadelphia. Marleny is a graduate of Case Western Reserve School of Medicine; and was an undergraduate at Brown. Matt Wylie is currently a research fellow at Children’s Hospital of Boston. He was a pediatric resident in the Boston Combined Residency Program. Matt is a graduate of The University of Cincinnati College of Medicine and brings significant pediatric transport and critical care experience.

Our active involvement in PECARN has begun. We welcome our new PECARN research coordinator, Rosalie Berrios-Candalaria, who will be traveling with Drs. Tom Chun and James Linakis to Salt Lake City to get trained on our first study protocol, Biosignatures in infants with fever.

I’m struck by how busy our two member Division of Medical Toxicology has been over 2011. We have just been awarded a grant for $46,560 from Lifespan Risk Services for a study called “Naloxone Administration Trigger Response”. This is an institutional wide tracking of naloxone administration as a potential marker for adverse events in the hospital and evaluating to circumstances for its use. This will be a combined effort including the division of pharmacy and risk management.

Dr Hack with Drs Carriero and Blum has just completed an animal study investigating intralipid’s effects on epinephrine and are working hard to begin two new studies using intralipid’s use in previously unexplored drug exposures. Dr Babu continues to investigate drug exposures in pregnant women, amphetamine use in young ED patients, and opioid use in the geriatric population. We’ve had 6 papers published in 2011 in peer reviewed journals and presented several well received posters at local and national forums.

We have established a hospital presence with Dr. Babu becoming a member of the pharmacy and therapeutics committee for RIH and TMH and Dr Hack has had, in addition to the 13 EM residents, 2 pediatric fellows, 2 TMH critical care fellows and one PA rotate on the Tox service. We’ve been spreading the word as in-
EMERGENCY MEDICINE FACULTY

**Professor**
Bruce Becker, MD  
Gregory Jay, MD, PhD  
William Lewander, MD  
James Linakis, MD, PhD  
Brian Zink, MD

**Clinical Professor**  
Elizabeth Nestor, MD

**Associate Professor**
Adam Chodobski, PhD (Research)  
Thomas Chun, MD  
Susan Duffy, MD  
Jason Hack, MD  
Leo Kobayashi, MD  
Michael Mello, MD  
R. Clayton Merchant, MD, MPH, ScD  
Ted Nirenberg, PhD (Secondary)  
Frank Overly, MD  
Daniel Savitt, MD  
Dale Steele, MD  
Andrew Sucov, MD  
Selim Suner, MD

**Clinical Associate Professor**  
Gary Bubly, MD  
Mihir Kamat, MD  
Ali Kazim, MD  
Andrew Nathanson, MD  
David Portelli, MD  
Lawrence Proano, MD  
Francis Sullivan, MD

**Assistant Professor**
Siraj Amanullah, MD, MPH  
Kavita Babu, MD  
Janette Baird, PhD (Research)  
Francesca Beaudoin, MD  
Jay Baruch, MD  
Linda Brown, MD  
Joanna Szmydynger-Chodob ska, PhD (Research)  
Geoffrey Capraro, MD  
Esther Choo, MD  
Brian Clyne, MD  
Jeffrey Feden, MD  
Rachel Fowler, MD  
Aris Garro, MD  
Frantz Gibbs, MD  
Eric Goldlust, MD, PhD  
Nathan Hudepohl, MD  
Adam Levine, MD  
Otto Liebmann, MD  
Alyson McGregor, MD  
Christopher Merritt, MD, MPH  
Anthony Napoli, MD  
Megan Ranney, MD  
Neha Raukar, MD  
Lisa Schweigler, MD  
Robert Tubbs, MD  
Jonathan Valente, MD  
Erica Constantine, MD  
Catherine Cummings, MD  
Thomas Germano, MD  
Kirstin Gregg, MD  
Andrew Griscom, MD  
Thomas Haronian, MD  
Ilse Jenouri, MD  
David Kaplan, MD  
Matthew Kopp, MD  
John LaFleur, MD  
David Lindquist, MD  
James Monti, MD  
James Rayner, MD  
John Riedel, MD  
Marcia Robitaille, MD  
Nathan Siegel, MD  
Dana Sparhawk, MD  
Elizabeth Sutton, MD  
Brian Wiley, DO

**Assistant Professor (Clinical)**
David Bullard, MD, MEd  
Charles Callahan, MD, MPH  
Sarah Case, MD  
Laura Chapman, MD  
Jamieson Cohn, MD  
Michelle Daniel, MD  
Deirdre Fearon, MD  
John Foggle, MD  
Ahteri Forcada-Lowrie, MD  
Sarah Gaines, MD  
Peter Kriz, MD  
Tobias Kummer, MD  
Elizabeth Jacobs, MD  
Joseph Lauro, MD  
Laura McPeake, MD  
Thom Meredith, MD  
Lynne Palmisciano, MD  
Paul Porter, MD  
Todd Seigel, MD  
Anand Shah, MD  
Jessica Smith, MD  
Lynn Sweeney, MD  
Otis Warren, MD

**Clinical Instructor**
Amir Bernaba, MD  
Sonya Daria, MD  
Laura Forman, MD  
Megan McNamara, MD

**Teaching Associate**
Christine Garro, PA  
Allison Jackson, PA  
Lisa Murphy, FNP  
John Pliakas, MSN

**Research Associate**
Julie Bromberg, MPH

**Teaching Fellows**
Meera Murgunandan, MD—Ultrasound  
Devin Tsai, DO—EMS

Elizabeth “Libby” Nestor, MD was promoted to Clinical Professor in the Clinical Voluntary Track effective July 1, 2011.
The Department of Emergency Medicine’s educational leadership recently convened for an inaugural retreat where we reviewed our medical student, residency, and fellowship programs. We spent time brainstorming about how to achieve our vision and take our programs to the next level. One of the exercises focused on the “Brown EM Brand.” We went around the room describing the prototypical Brown EM resident, trying to capture the essence of what sets them apart from the other 5,000 EM trainees across the country. Descriptions included: “fearless”, “expert communicators”, “deep and comprehensive EM knowledge”, “efficient” and “consummately professional.”

While true, none of these terms felt adequate to describe the signature traits of a Brown EM graduate. They seemed generic and cliché, and highlighted the fact that our brand is not easily defined. Graduates tell us that the Brown training confers a unique confidence, critical thinking skills, a sense of responsibility, and a philosophy of continual growth and self-improvement. To illustrate this, I’d like to share comments from recent graduates reflecting on their training experience.

“I couldn’t help myself from bragging about my amazing residency at Brown :). I really do feel so lucky to have had the opportunity to train at Brown. It became so obvious as soon as I started my job how fortunate I am compared to many other residencies. I got to see so many more sick medical and trauma patients at RIH and Hasbro than many of even the more seasoned attendings in both the ED and consulting services here. Learning how to manage a busy department and oversee residents during the 4th year has also been imperative to my success as at first year attending. Thanks so much for everything!”

“Next time you have the opportunity to talk to the residents, you can reassure them, at least from my perspective, I think that we are very well trained. In my first few weeks here I relocated a jaw, dug out a corneal foreign body and decompressed a priapism, all to the amazement of my colleagues, who said they would have consulted rather than do any of those procedures themselves. I am especially grateful for our peds training, which is shockingly thorough. I actually enjoy my peds cases to the point where I found myself tickling a little peanut with RSV last night... Good God in Heaven, what has become of me?”

“After working a month as an independent attending I have had a good dose of what it’s like to see patients without anyone looking over your shoulder. I had anticipated feeling uncertain and scared, wishing I had someone to check my decisions. But that didn’t happen. What I found was that the Brown program, especially the 4th year, trained me to trust my clinical instincts with patients. This isn’t to say that I never have any doubt, but it’s the same anxiety I had before with any sick patient. The program encourages senior residents to act independently and develop appropriate care plans without relying on the attending. Be the attending (or pretending as it’s referred to) before you have to, and the switch to actual practice isn’t such an adjustment. I see other residents from other programs where there’s less of an emphasis on solid decision making and resident autonomy, and I know they aren’t as comfortable with the transition as I am. That’s the Brown difference.”

I couldn’t have said it better myself.

Jay Baruch, MD was interviewed and featured prominently in a Providence Journal article on December 12, 2011 entitled Making Model Doctors. The article discusses Alpert Medical School’s medical humanities curriculum. Dr. Baruch speaks of “an artist’s way of thinking” in describing the human side of medicine versus the scientific focus.
Much like the Emergency Department, chest pain unit volume continues to increase. We have seen a 7% increase in the census and are caring for over 1600 patients annually while maintaining an excellent track record of safety and quality of care. Additionally, we continue to strive to improve the care of these patients clinically and through academic pursuit; we have presented and published 2 manuscripts this year regarding chest pain unit resource utilization and outcomes. Our application for Chest Pain Center Certification for Rhode Island Hospital continues to be under review with a site visit expected in the first half of 2012. Therapeutic hypothermia for out of hospital arrest has been equally successful with over 30 patients treated at Rhode Island Hospital and The Miriam Hospital. Our outcomes have been equivalent if not better than those reported in the literature. A revised algorithm and the inclusion of the medical intensive care units at each site has allowed us to more accurately and completely offer this therapy to eligible patients.

Rhode Island Hospital—Chest Pain Center

EM Ultrasound

The Emergency Ultrasound Division is alive, well and growing. We are happy to welcome Jamie Cohn who has joined the division as an EUS teaching attending. He has already had a very positive impact on our weekly journal club/video review sessions and will be focusing on medical student EUS education. Meera Muruganandan is completing her second year of her joint IM/EUS fellowship and we will be welcoming two stellar fellows for the 2012-2013 academic year. Tobias Kummer has been updating and streamlining our credentialing and QA process, including new software (which he designed) and hardware. (This process, as well as our impressive third quarter numbers, were recently successfully presented to the QMIC). We’ve been getting great feedback (for all members of the division) on our daily teaching rounds for students, residents, and fellows (PedEM, ICU). Finally, we are looking forward to our first annual Brown University Emergency Ultrasound Course coming in the 2012-2013 academic year (dates coming soon) which will be open to all UEMF providers!!

EM in Germany

Drs. Brian Zink, Tobias Kummer, and Otto Liebmann traveled to Gottingen, Germany to attend the German EM conference held by DGINA. Dr. Zink gave a lecture on the development of EM in the United States. Besides attending the lecture, they also toured a hospital in Hamburg, Germany, where Dr. Barbara Hogan, DGINA President, is the Director of Emergency Medicine.
The Injury Prevention Center was awarded a Kohl's Cares for Kids grant for the seventh consecutive year. This year’s grant is the largest ever, which will allow us to expand our child passenger safety program. This past year we were able to check over 1500 car seat installations as well as provide almost 700 car seats to qualifying low income families. We are optimistic that we will be exceeding these numbers in the coming year. This grant has also allowed us to replace our eleven year old van with a new vehicle which we will use to deliver our programs to the surrounding communities.

This summer we welcomed three new research assistants to the Injury Prevention Center. Anja Zgodic, Manuel Ortiz and Amanda DeSenna have all completed our child passenger certification course and will be assisting with the Kohl’s cares car seat program as well as other community outreach events.

A highlight of our car seat program occurred in August when a child passenger safety event was held at Blackstone Valley Health Center in Pawtucket, RI. Qualifying families signed up ahead of time to receive child restraints as well as child passenger safety education from CPS certified technicians. We were able to provide over 40 families with car seats during this event. The mayor of Pawtucket presented the Injury Prevention Center with a citation for our part in making this event possible. We are planning to hold similar car seat distribution/education events at more organizations that serve low income families.

This year we also called attention to important sports injury prevention topics by airing two sports injury prevention webinars. The first webinar covered prevention and management of concussions and the second dealt with overuse injuries and hydration. These webinars were viewed by numerous coaches as well as parents of student athletes. The webinars are still available for anyone to view on our website.

2011 was a year of growth and expansion for the Division of Sports Medicine. We look forward to a productive 2012.

We have expanded our practice from East Providence, where we still maintain a presence at 900 Warren Avenue, to Barrington, in the Barrington Medical Center at 1525 Wampanoag Trail. With this expansion, we also welcome 2 additional physicians to the Center for Sports Medicine.

We welcome Dr. Jeffrey Feden to the staff of Center for Sports Medicine. Dr. Feden will be seeing patients every Monday at the new office. Dr. Erin Teeple, an Orthopedic Fellow in Research, will be seeing patients Tuesdays and Wednesdays. All of the providers are able to see patients with both musculoskeletal complaints and sports-related concussions. Patients can still make their own appointments on the Center’s website: www.thecenterforsportsmed.org.

The EM/Primary Care Sports Medicine Fellowship has been approved by the Rhode Island Hospital Graduate Medical Education Office and will now be submitted for ACGME, national approval. We anticipate being able to recruit for this fellowship for July 2013.

The Division of Sports Medicine coordinated medical coverage for 2011 USGA 111th US Women’s Amateur Golf Championship in August at the RI Country Club in Barrington, RI. We received lots of praise with regarding our organization and participation.

Besides coordinating the Women’s Golf Tournament, the Division also organized medical support for the Rock & Roll ½ Marathon that took place in downtown Providence in August. There were several checkpoints throughout the course that had medical coverage.

2012 has many activities planned already. Coming up, look for us at the 60th Annual RI Ski Runner’s Giant Slalom Race on February 12th at Wachusett Mountain. Pre-register at: www.riskirunners.com.
The Resident Scholarly Development Fund provides scholarships for Brown emergency medicine residents to carry out projects or training in the research or education realms. The fund was created in 2009 with an initial $5,000 donation from University Emergency Medicine Foundation. The fund has received great support from past graduates and current faculty. And we are again asking our Brown EM faculty members and alumni to help build the Resident Scholarly Development Fund through donations. The strength of any fund raising effort is not just in the amount of contributions, but also in the level of participation of those who care about the cause. Many of you have invested a great deal of time and effort in making the Brown Emergency Medicine residency one of the premier EM residencies in the nation. Now you can make a financial investment into an EM resident’s future.

Your contribution is tax deductible. Please consider sending a check as follows:

UEMF, Resident Scholarly Development Fund
Department of Emergency Medicine
593 Eddy Street, Claverick 2
Providence, RI 02903
Attention: Michelle Costa

MedHost Documentation—PhysDoc
After years of documenting on paper, UEMF will soon be implementing MedHost physician documentation as part of the electronic medical record. This will improve legibility, search ability, and the quality of our medical records. It will also be easier to determine levels of service for coding and billing.

The physician documentation is a 3 phase process:

Phase I: Includes the Pilot Group (17 physicians) with go-live in December 2011.
Phase II: Go-live is 3-4 weeks after the Pilot Group.
Phase III: Go-live is 3-4 weeks after the Phase II group.

There will be training for all with hands-on one-on-one sessions, group training sessions, and individual practice with a non-production training version available. ☰

Publish This!
Publish This! is an academic writing workshop in an informal format, where faculty and residents discuss their research data. The goal is to receive peer feedback to polish this data into a publishable manuscript. Publish This! takes advantage of the broad research interests and experience of the group and allows for a collaborative flow of ideas between researchers of all levels of experience.

To date, we have resulted in 5 manuscripts submitted for publication, and one accepted for publication. Thanks to all the regular participants. Anyone having research and data that are complete, but still need to work on the writing and submission are welcome to join us. The PT! meetings are announced via email and at the faculty meetings.

Special thanks to Otis Warren, MD for coordinating “Publish This!” ☰

Welcome new Board of Directors:
Isle Jenouri
Mihir Kamat
James Monti
Re-elected: Anthony Napoli

Thanks to our outgoing Board Members:
Gary Bubly
Brian Clyne
Catherine Cummings.

Save the Date
The next Department of EM Faculty Retreat is Friday, May 18, 2012.
Details to follow....

In Spring 2012, look for our next visiting professor...

Wendy Coates, MD,
Professor of Clinical Medicine
Department of Emergency Medicine,
David Geffen School of Medicine at UCLA
Director of Medical Education
Director, Education Fellowship Program
Chair (Assistant Dean) Acute Care College
EXTRAMURAL FUNDING:

Esther Choo, MD, MPH was awarded a 5-year, $900,926, K23 award from the National Institutes of Health / National Institute on Drug Abuse. Her project, entitled “A Computer-Based Intervention for Women with Substance Use and Interpersonal Violence in the ED,” will address the health care of women with coexisting substance use and IPV presenting to the ED setting, a population at high risk and with high health care needs and yet few available resources.

Bruce Becker, MD, MPH, along with Co-PI Beth Bock, PhD of the Center for Behavioral Medicine, was awarded a 5-year, $2,610,178, R01 grant entitled “System-based Tracking and Treatment for Emergency Patients who Smoke: STTEPS.” This project is a comprehensive, translational research study that will integrate the process of tobacco treatment into an electronic medical tracking system that is currently used in our emergency department and in hundreds of hospitals nation-wide.

JUNIOR FACULTY RESEARCH DEVELOPMENT GRANTS:

Neha Raukar, MD was awarded a 1-year, $38,330 grant from the University Emergency Medicine Foundation for her project entitled “The Effect of Concussion on the Driving Ability of the College Athlete.” This research project will provide critical information about the impact of concussion on driving skills, and the relationship of driving skills to neurocognitive test performance, and will allow the research team to formulate preliminary hypotheses about appropriate instructions for the concussed athlete regarding safe driving.

Geoffrey Capraro, MD was awarded a 1-year, $39,053 grant from the University Emergency Medicine Foundation for his project entitled “Electromagnetic Radiation as a Screen for Life-Threatening Infection.” This project builds on the investigator’s previous work with infrared thermography by quantifying electromagnetic radiation associated with life-threatening infection, by quantifying true temperature, and by testing the association between these measurements.

Todd Seigel, MD was awarded a 1-year, $39,854 grant from the University Emergency Medicine Foundation for his project entitled “Identifying Patterns of Mechanical Ventilation in the Emergency Department.” This project hopes to improve the understanding of the way Emergency Medicine physicians manage patients on a ventilator, to enable opportunities for improvement in patient care and safety.

Kudos to Karina

Research Fellowship— Approved

The SAEM Research Fellowship Committee approved our application for the Institutional Research Fellowship Program. This means that our fellowship will be advertised as accredited and endorsed by SAEM as a high quality research fellowship that meets expectations set by NIH and SAEM Research Committee.

Extramural Funding Spotlight—PECARN

Thomas Chun, MD, MPH was awarded a 4-year, $623,296 award from the Health Resources and Services Administration (HRSA), through a subcontract with the University of Pittsburgh, to become part of the Pediatric Emergency Care Applied Research Network (PECARN). PECARN is the first multi-institutional pediatric EM research network in the U.S. Research includes topics such as management of acute pediatric illness, injuries, and prevention. PECARN has 6 research nodes (RNC) across the country, each hosting 2 hospital ED affiliates (HEDA). Brown is in the PRIDENET node. PECARN has current studies including SBI biomarkers in febrile infants; clinical decision rules; Dexamethasone & bronchiolitis; fluid therapy & DKA; magnesium for sickle pain crisis; patterns of psychiatric emergencies; as well as quality and safety initiatives to name a few.

Karina Bertsch, our Clinical Research Coordinator, presented at the SoCRA 20th Annual Conference in San Diego, California, which was held Sept.23-25. SoCRA [Society of Clinical Research Associates] is an international clinical research professional organization with 13,300 members (900 attended the conference). Karina’s presentation was entitled, “Clinical Research in the Emergency Room.”
touring the fundraising team, aka the “Campaign Cabinet,” through the existing department in December. Several fundraising events are planned. UEMF and individual emergency physicians will have the opportunity to contribute to the project.

The TMH Stroke Center was recognized by the American Heart Association/American Stroke Association’s and received the Get With The Guidelines Gold Plus Award. TMH was one of several hundred hospitals recognized in achieving and maintaining an average of 85% or greater on a number of stroke indicators. The hospital was named in an issue of US World Report. Todd Siegel received the award at the Annual Stroke center dinner and also gave a presentation on recognizing stroke syndromes FAST.

We are scheduled to roll out a hopefully improved version of Medhost 4.3 in January, and Medhost physician documentation in February. Stay tuned.

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**Dr. Brian Zink Named Assistant Dean for Medical Student Career Development**

Dr. Brian Zink was appointed Assistant Dean for Medical Student Career Development for the Alpert Medical School of Brown University. Dr. Zink assumed this role on October 1, 2011. In addition to his other roles as Chair & Physician-in-Chief for the Department of Emergency Medicine at Brown and Rhode Island and The Miriam Hospitals, Dr Zink will provide 10% effort in this position. Dr. Zink will remain in his current office at the Department of EM administrative offices at 55 Claverick Street, a stones throw away from the new medical school building. Dr. Zink will be responsible for medical student career counseling including guidance, education, and evaluation; supervising the Postgraduate Referral Committee, which writes the Medical Student Performance Evaluation and counsels PGY4s; he will oversee the student career development program with Alexandra Morang, the Director of Medical Student Affairs; and lastly he will work with the Director of the Clinical Curriculum on the 3rd and 4th year Doctoring Curriculum.

He is also a member of the Alpert Medical School Admissions Committee. Dr. Zink is also serving as the Chair of the search committee for the Chair of the Department of Neurology.

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**Pediatric EM**

We have also completed the first phase of an industry-sponsored study of a possible biomarker for appendicitis and look forward to being involved in the second phase.

Dr. Siraj Amanullah continues to assume increasing responsibility in his new role overseeing fellow research and the Section’s research education efforts. Dr. Elizabeth Jacobs has been named Director of Pediatric Emergency Medicine Quality Improvement.

We look forward to an excellent 2012!

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**LifePACT**

Bryan Choi, MD will be our new EMS Fellow, starting July 1, 2012. LifePACT continues to grow. Staff at Express Care and LifePACT, not including transport physicians, is now about 60 people. Volume is up slightly over last year, despite reductions in trauma transfers due to new triage protocols (more patients arriving directly at RIH/HCH from the scene).

After a thorough audit of billing operations, UEMF Billing will now be processing and billing both adult and pediatric transports for LifePACT.

PGY 2, 3, and 4 residents now all have personalized LifePACT uniform shirts and jackets, and are wearing them proudly.

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**Know & Grow**

In August 2011, as part the Dept. of EM’s Know & Grow Sessions, Jonathan Valente organized a panel of physicians & discussed How to Become Involved in National & Regional Academic Organizations.


Dr. Zink Honored with an EM Endowed Professorship

Dr. Brian Zink was awarded the inaugural Frances Weeden Gibson—Edward A. Iannuccilli, MD Professorship in Emergency Medicine at the Alpert Medical School. This $3 million joint endowment by Brown University and Rhode Island Hospital was made possible by generous contributions including a gift from the estate of Frances Weeden Gibson, the Collis Family, Rhode Island Hospital, Brown University, UEMF, and many others. The proceeds from this endowment will benefit and support education and research in the Department of Emergency Medicine.

The dedication ceremony and reception was held on September 12, 2011 at the new Alpert Medical School building. Dr. Iannuccilli and members of the Collis family were present and speeches were given by honoree Dr. Iannuccilli, as well as Dr. Timothy Babineau, and Dean Edward Wing, who presented the award to Dr. Zink. Dr. Zink’s family, emergency medicine faculty, administration, along with physicians from the Alpert Medical School and the Lifespan health system attended the event.

Dr. Zink received a Brown professorship medallion and then spoke on the brief history of emergency medicine nationally as well as at RIH & Brown; the current state of Department of EM at Brown and RIH/TMH; the importance of continued academic advancement in EM locally and nationally; and what the future might hold for emergency care. Dr. Zink thanked all those who were part of this tremendous effort to further emergency medicine at Brown & Rhode Island.

Brown EM 2011 ABEM Oral Examiners

- David Bullard
- Catherine Cummings
- Mihir Kamat
- Elizabeth Nestor
- David Portelli
- Elizabeth Sutton
- Andrew Sucov

Dina Himelfarb (center), a 4th year EM Resident, is pictured above with Drs. Smith and Tubbs. Dina won the national CPC competition at this year’s ACEP Scientific Assembly in San Francisco in October.

Kavita Babu, MD was the conference organizer for the North American College of Clinical Toxicology annual meeting held in Washington, DC in September 2011.

Dr. Babu moderated an all-day ACMT session on the intersection of government and medical toxicology at this meeting.

Dr. Babu was also nominated to the ACMT Board of Directors.

Dr Babu is also organizing a one-day session called the Prescription Opioid Academy for ACMT, to be held in the Spring of 2012 & will be giving a lecture to a national audience at that meeting.

Adam Levine was named Official ACEP International Lead Ambassador to Rwanda. This is a 2 year term ending in October 2013.

Manuscripts by Dr Adam Levine and Dr. Megan Ranney were on the 27 Best Articles List in International EM in 2010 as mentioned in AEM.

Megan Ranney is one of the didactic committee chairs for the 2012 SAEM Annual Meeting. The SAEM 2012 meeting will be held in Chicago in May.

EM faculty & residents are pictured at the Brown Emergency Medicine reception held on October 16, 2011 at the Hilton Hotel Union Square, San Francisco.

Dr. Zink Honored with an EM Endowed Professorship
November 8 & 9, 2011
Inaugural Visiting Professor—Gabe Kelen, MD

Our Department welcomed our first Visiting Professor Lecturer and guest Dr. Gabe Kelen, Professor & Chair, Department of Emergency Medicine Johns Hopkins University School of Medicine. Dr. Kelen is also the Director of Johns Hopkins Office of Critical Event Preparedness & Response (CEPAR) and the Director of the Center for the Study of Preparedness & Catastrophic Event Response (PACER).

Dr. Kelen was busy with 2 full days of activities with the Department’s faculty and residents including a welcome lunch and a moderated dinner with an emphasis on emergency medicine leadership. Dr. Kelen participated in a faculty development workshop on How to Develop an Academic Career with over 15 participants joining him.

Besides touring the Anderson Emergency Center, The Miriam Hospital ED, and Hasbro Children’s Hospital’s ED, Dr. Kelen took part in walk rounds with case presentations in the RIH Anderson Emergency Center. This highlighted real time clinical cases. For EM Grand Rounds, Dr. Kelen delivered Disaster Health: A New Discipline, which was held at the new Alpert Medical School. He also provided a case-based Risk Management session.

The inaugural event concluded with one-on-one mini mentoring sessions with Dr. Kelen. 6 faculty members were able to have approximately 15 minute of focused time with Dr. Kelen to discuss their academic careers. Dr. Kelen’s visit was educational, inspiring, and highly regarded by all who participated.
The Rhode Island Hospital Medical Simulation Center continues to expand its role in medical training, provider education, patient safety, healthcare device design and academic research.

Highlights for the past 6 months include:
- Successful recruitment of John Callahan as new administrative manager.
- Successful enrollment of medical simulation fellow Dr. Rakan Al-Rasheed into center activities, operations and research.
- Integration of Sarah Freelove RN into PRECISE study as research coordinator.
- Ongoing medical simulation mentorship for EM providers (Dr. Marc Lieberman, Dr. VanNess-Otunnu) and regional educators/researchers (Jeffrey Devine RN NREMT-P, Jennifer Dunbar-Viveiros MS).
- Acquisition of state-of-the-art tetherless Laerdal SimMan 3G manikin system as well as additional pediatric simulation equipment.
- Overall increase in simulation activities: 240 sessions (20% increase relative to 2010).
- Successful Lifespan GME new housestaff orientation for AY2011-2012.
- Completion of over 25 CLEAR! sessions for RIH Anderson Emergency Center, with QM analysis for improved outcomes pending and investigation into expansion of CLEAR! brand / opportunities.
- Continued and expanded Lifespan nursing/respiratory therapy training sessions (including ECMO, CTIC).
- Innovative collaboration with RIH pharmacy for chemotherapy CPOE / MAK use-testing.
- Fruitful strategic alliance with Ximedica for several successful industry projects.
- Inaugural Medical Simulation Interest Group session for Alpert Medical School.
- Productive research activities resulting in abstracts, presentations and manuscripts at MEMC 2011, SAEM 2011, and IMSH* national / international meetings.

*5 workshops and podium presentations, 5 abstracts accepted for January 2012 IMSH meeting.

Active areas for future expansion include institutional anesthesia collaboration for resuscitation re-/certification, training arrangements for regional healthcare systems’ hospitalist groups and oromaxillofacial surgeons, and WebMD / MedScape simulation-based procedural video development.

Early Antibiotic Administration Wins the Fain Quality Award for EMI!

In recognition of our improvement in antibiotic delivery in <3 hrs from arrival for the patients with severe sepsis and septic shock, the personnel of the Anderson Emergency Center and Miriam Emergency Departments have jointly been granted the Barnet Fain Quality Award this year. This effort was championed by David Portelli, MD, our Director of Quality & Patient Safety.

As you are well aware, the Emergency Department has been focusing on improving our care of the patient with severe sepsis and septic shock according to the International Surviving Sepsis Campaign Guidelines for the past several years. While much of the low hanging fruit has been picked, this past fiscal year we decided to re-dedicate ourselves to this cause by applying our efforts to improving compliance with antibiotic administration (without losing focus on the other resuscitation bundle elements). We chose antibiotic administration in <3hrs of ED arrival because the literature strongly suggests that earlier antibiotics improves survival in Severe Sepsis and Septic Shock. The results show significant improvement in antibiotic delivery within 3 hours as well as decreased mortality at both sites! Thanks for your hard work which has gained our department recognition from the highest levels of Lifespan.

This Fiscal year our goal is to improve compliance with antibiotic administration to 80% at RIH and improve compliance with IVF (20cc/kg) to 70% at TMH.

As we improved compliance with Abx administration in patients with severe sepsis and septic shock, mortality has decreased.
ors, we remain committed to excellence in the
healing experience of our patients.

The quality of the care in the Anderson Em-
ergency Center depends on a complex collabora-
tion of hospital clinical services. This has been exempli-
fied in the high quality of care delivered by our
targeted clinical programs in sepsis, myocardial
infarction, stroke, and trauma. These care delivery
systems focus hospital-wide resources at the bed-
side for specific emergent illnesses upon arrival to
the Anderson, and have demonstrated improve-
ments in patient outcomes. The skill and dedica-
tion demonstrated by our staff in implementing
these care programs consistently over the years
has exemplified the high standard of today’s emer-
gency medical care.

As we advance care in sepsis, cardiac ischemia,
stroke, and trauma, we continue to look ahead in
making further evidenced-based improvements in
patient’s lives. One recent highlight is the signifi-
cant clinical impact of our hypothermia-after-
cardiac-arrest program, which has already im-
proved the quality of life of many patients. In the
near future, we look forward to the benefits of our
early efforts in advancing the care of patients suf-
fering neurologic transient ischemic attacks,
asthma, and alcohol abuse.

The broad coordination of care delivery systems is
a national priority. The Anderson Emergency Cen-
ter has already made significant strides in imple-
menting the most current advancements in opera-
tions management and value-based patient flow
processes. We continue to collaborate closely with
in-patient services to develop capacity/demand
surveillance systems and apply LEAN management
principles to hospital overcapacity planning. In
conjunction with evolving medical home care sys-
tems, we actively coordinate and plan with re-
gional primary care specialists to enhance the es-
sential interaction between primary care and
emergency services. With our partners, we are
poised to meet the challenges and opportunities of
the evolving medical care landscape in order to
provide our community with the emergency cen-
ter it deserves.

This holiday season, the faculty from the Division of
International Emergency Medicine is thankful for
many things! Our recent academic year has been
fruitful with chapter and journal article submissions;
multiple oral and poster presentations; and invited
speaking engagements nationally and internation-
ally. Our faculty have continued their research and
program development work abroad, totaling close
to 9 months of continuous ground support in vari-
ous nations.

At home, we are celebrating our academic invest-
ments in the lives of medical students, resident phy-
sicians, and anticipating the graduation of our cur-
rent fellow, Dr. Krithika “Meera” Muruganandan, our
first ever Ultrasound/IEM dual fellowship trainee!
We are grateful for the leadership Dr. Lawrence
Proano has provided us over the last eight years.
The impact he has made in the Brown University
community, our Fellowship program, and the field
of IEM are exemplary, and set a high standard for
our future endeavors.

As we look ahead to 2012, we invite resident and
attending physicians, and persons of any training
background, to join us on our international ven-
tures. We are pleased to announce that Nicaragua
will join our list of international sites! Rotations in
Managua are beginning in March 2012 and will
include Spanish language training, EM clinical and
educational endeavors, and will include curriculum
development for the local medical school! Rotations
are open to residents, fellows, medical students and
attendings alike! Please look for our inaugural IEM
newsletter in January 2012 for a full description of
these opportunities!

Also in January, we will be transitioning our
monthly IEM business meeting to an educational
conference! January 13th we will begin this series
with “Cultural Intelligence and Principles of Global
Physician Leadership.” Look for official invitations via
email in the next week!

Whether you are heavily invested in the develop-
ment of EM globally or just looking to give yourself a
“shot in the arm” of altru-
ism......we welcome your
participation in 2012!

From the Division Faculty
to all of you! Have a
happy holiday season,
and a wonderful new
year!

Dave Bouslough, MD,
Director, International EM
In the Spotlight—Media

November 2011—Adam Levine, MD & Kim Pringle, an EM Resident, led a study to evaluate the accuracy of the dehydration scales used in children in a low income country based on their experience in Rwanda. They found none of the 3 scales were accurate predictors of severe dehydration and called for further research to develop new clinical scales for use in low-income countries. The study was published in International Journal of Emergency Medicine.

Articles regarding this study were published in the following media outlets:
RedOrbit
NewMedical.net (Australia)
Haiti Medical & Public Health Information
Trove (National Library of Australia)

Choo Choo Choo—Esther IS Everywhere!

Dr. Esther Choo was interviewed on WPRO 630AM on November 4th & discussed her findings in a recent study that indicate the legalization of medical marijuana in 2006 in RI has not increased usage among youth.
Dr. Choo presented her findings at the annual meeting of the American Public Health Association in November 2011.
Dr. Choo was also featured in the “5 Questions” section of the Providence Business News on November 2nd.
Dr. Choo’s work was highlighted in other media outlets as well:
TimeHealthLand
MSNBC
HealthDay
MedicalXPress
Science Daily
National Public Radio
GoLocalProv.com
My Health News Daily
Yahoo! News
Los Angeles Times
LA Weekly

November 2011—Dr. Leo Kobayashi’s study in the Anderson Emergency Center was presented in the article Survey of Patients’ Experiences in the Emergency Department Looks at Staff Perception of their Roles in the publication Medical News Today. The study examined how the perception of roles among emergency department staff can impact patient satisfaction. Through a web survey with embedded interventions, the researchers were able to determine where gaps exist in key indicators of patient satisfaction, while staff reported changing or reconsidering how these factors play into their roles. The study results were published in the European Journal of Emergency Medicine.

It’s No Accident

Dr. Zink was featured in the article “He’s your man—anywhere, anytime” in the Fall 2011 edition of the Brown Medicine magazine. The article is about growing & developing the department into what it is today.

Injury Prevention in the News

9/23/11—The Injury Prevention Center was featured as part of a story on WPRI-TV Channel 12 on IPC’s free child safety seat inspections. The story was highlighted for National Seat Check Saturday.
9/30/11—The IPC was featured in an article in The Times entitled All They Can Seat. The story was on their car seat checks on National Seat Check Saturday. IPC had checked 101 car seats. IPC was awarded a grant for over $189K from Kohl’s for car seat inspection and replacement.

Also regarding National Seat Check Saturday, IPC was featured in an article in the Narragansett Times entitled Car Seat Safety.
On 10/14/11, IPC’s Dina Morrissey was interviewed on WPRO- 630AM regarding child safety issues and an October campaign on safe car seat installation.
IPC was also featured in the Summer 2011 edition of Touchpoints an RIH Development office publication.

November 2011—Adam Chodobski, PhD gave a lecture at the workshop entitled “Brain Barriers: A Hurdle for Drug Discovery”. The meeting was organized by the New York Academy of Sciences. Adam’s talk title was: Blood–Brain versus Blood–CSF Barrier: Anatomical and Functional Differences and Their Pathophysiological Implications.

11/9/11—Dr. Liz Jacobs was featured in the Jamestein Press in an article Concussion Sidelines Island Athlete for the Season. Dr. Jacobs was interviewed regarding her pilot program for RI schools to mandate IMPACT testing for all athletes.

12/8/11—On WRNI (Rhode Island NPR) 88.1 FM on Friday at 6:50 and 8:50 a.m. for a story about the impact of gun violence. Dr. Selim Suner will talk about what he sees in the Rhode Island Hospital emergency department.
Women’s Health in Emergency Care Division

The Women’s Health in Emergency Care (WHEC) Program has risen to Division Status at record speed! This makes The Department of Emergency Medicine at Alpert Medical School at Brown University the first in the country to host a Women’s Health Division and the first to have a Fellowship in Women’s Health in Emergency Care. We look forward to welcoming Tracy Madsen as the first WHEC Fellow for 2012! WHEC is fortunate to have such a rising star as our trail-blazing Fellow.

The WHEC research program is brimming with topic ideas and starter projects including sepsis, pelvic inflammatory disease, adnexal torsion, intimate-partner violence, HIV in women... If anyone is interested in gender-specific Women’s Health research initiatives, please contact us.

Recently, Esther Choo gave a well-received CME presentation to Rhode Island Medical Women’s Association entitled “We Don’t Ask: The Problem of Intimate Partner Violence.” Alyson McGregor was a guest faculty member for the Women and Infants Hospital CME Program Managing OB/Gyn Pitfalls in Triage and Emergency Room Settings. She gave a case based presentation on women’s health in collaboration with Dr. Ana Laurenco, a Rhode Island Hospital Radiologist.

Look for us at SAEM this spring. WHEC will be sponsoring a Didactic entitled “2012 Updates in Gender-Specific Emergency Care.” This will be performed in the Pechu-Kucha presentation style with concise rapid “chit-chats” updating emergency medicine physicians on common emergency themes using a gender lens.

We are grateful for the tremendous opportunity to have real impact on the emergency care of women and hope to lead by example as we become a model for other academic programs throughout the country.

WHEC Quarterly meeting with guest speaker Basmah Safdar MD from Yale. Assistant Professor of Emergency Medicine; Co-Chair, Chest Pain Center; Director, YNHH Women’s Heart Program

Alyson McGregor, MD
Co-Director

Esther Choo, MD, MPH
Co-Director

(continued from page 11)
vited educators: Dr Hack spoke at TMH critical care rounds and Dr. Babu spoke at the Northeast Epidemiology Conference on opioids. Kent Hospital has invited Dr. Hack to speak at their resident conferences. We continue to have a State and National presence with Dr. Hack sitting on the Violent Death Reporting Committee for the state of Rhode Island and Dr. Babu is organizing the American College of Medical Toxicology course “the Prescription Opioid Misuse Academy” to be held on March 15th in San Diego, CA. In multimedia, we’ve produced 3 Toxic Natter newsletters, showcasing the expertise and Tox knowledge of our rotators, produced by Lynn Levesque; and Matthew Zucker- man (doing a UMass tox fellowship) launched a toxicology themed podcast, toxtalk.org.

We are exceedingly grateful to everyone who helped make this year such a success. Thank you one and all!

Mid-level Providers

What is an EMPAD?

You may have heard this term used around the ER over the past few months and may have wondered what or who the term refers to?

In February of this year, UEMF welcomed our first new graduate Physician Assistants and Nurse Practitioners to a one year training program tailored for Physician Extenders in Emergency Medicine. The goal is to provide newly graduated Physician Extenders the opportunity to increase their EM clinical skills and learn the art of Emergency Medicine while working alongside of our senior PA and NP clinicians.

As of September 1, 2011, we have 4 EMPAD clinicians training in the program. With the support of UEMF faculty these clinicians are integrated into the department with shifts at both Anderson and Miriam Emergency Departments.

After a successful recruitment for 2012, we will welcome our second EMPAD class of clinicians in April 2012.

New Midlevel Provider

Gino Paolucci, NP
September 1, 2011

Toxicology

Medical humanities continues to evolve. What once was an eager shadow is quickly becoming a lurking presence on the margins who occasionally gets invited to play in the sandbox.

Two medical humanities courses are being taught this semester. One is a seminar offered through the Cogut Center for the Humanities called “Pain, Medicine, and Society,” and co-taught by myself, Dr. Christine Montross and Prof. Micheal Steinberg, who directs the Cogut Center. The other course is a medical school elective called “Humanities as Medical Instruments,” which trains 2nd year medical students to become humanities fellows, leading small group sessions in the 1st year medical school curriculum. For the first time we have received space in the curriculum. Kevin Liou MS2 worked with me to create “Integrated Clinical Arts,” a medical humanities curriculum with a focus on creativity and imagination in clinical practice. We took the entire 1st year class to the RISD museum, using the objects in the museum to hone their thinking skills through observation, deduction and speculation. We have established sessions that draw on the resources in the Brown community, including theater, sculpture and visual artists.

The Creative Physician Series is charging into its second year, and seeks common ground in its three co-sponsors: UEMF, Creative Arts Council and the Cogut Center for the Humanities. Our first speaker was physician/photographer Ana Blohm, MD. Our next speaker is Katie Watson, JD, who is faculty at the Center for Medical Humanities and Bioethics at the Feinberg School of Medicine at Northwestern University. A playwright and sketch performer, she spoke on improvisation in medicine. Our third speaker will be Deb Salem Smith, MFA and playwright-in-residence at Trinity Rep, whose new play opening in 2012 centers on medical error. (Yes, I realize the last two speakers are not physicians, and we are renaming the series)

The Medical Humanities and Bioethics Scholarly Concentration has three spirited and talented students.

In October I presented a paper at the American Society for Bioethics and Humanities based on my work last year at the Cogut Center, called “Creativity as a Medical Instrument.”

Within the department, Sarah Gaines and I are finishing the final touches on a website for the Foundry in Humanities and the Arts in Emergency Medicine. We hope it will satisfy all your humanities needs, including being THE place on the web to find humanities events at Brown. We started a creative writing group. The first session was lead by novelist Nellie Hermann, MFA (Columbia). For the second session we were joined by novelist/screenwriter Kelli Auerbach, MFA (Brown) The group invites all forms of writing, traditional and experimental, from poetry to fiction to essays, as long as it is creative and statistically insignificant.
Several Lifespan Executives attended Project CLEAR Training. Dr Zink presented Project CLEAR at the Annual RISE Board of Directors’ Meeting in October 2011. Project CLEAR was designed to serve the ED patients & their families. It will impact and change our culture in the ED. The team is in the “sustaining” phase of the program.

Live it; Breathe It; Model It!

Dr. Andrew Nathanson was interviewed & quoted for two articles on sailing injuries. Dr. Nathanson gave his statistics on his research regarding sailing injuries and illnesses in an article entitled On Deck: How People Prepare for Injuries and Illness On Board in Sail Magazine June 2011. His research was also featured in an article in the November/December 2011 issue of Sailing Magazine entitled Beware of the Boom.

Lifespan Lifelines Web digest highlighted a RIH research study on violence & gender that showed a large proportion of victims of community violence treated in the ED are female. The findings were published in Journal of Emergency. The lead author on the study is Megan Ranney.

The Stroke Center at Rhode Island Hospital has earned the Bronze Award from the American Heart Association. Achieved at least three months of 85% or higher adherence to the “Get with the Guidelines” stroke standards. The center has also been named a Target: Stroke honor roll site for treating more than 50% of stroke patients with tPA in less than 60 minutes during a quarter. Less than 10% of hospitals meet that target.

The Department of Emergency Medicine is further centralizing by expanding to the 1st floor of the 55 Claverick Street location. This will promote even better communication throughout the Department. The floor plans are progressing. There will be limited construction that needs to be completed prior to staff moving in. The space will include a sleep room and shower room. The EM Residency Program will be relocating from the 2nd floor to the 1st floor of the Claverick Street building. The temporary offices that were at located in the Coro Building will be relocated to the Claverick Building. The space should be ready in Spring of 2012.

The Department of Emergency Medicine 2011 Holiday party was held at the Alpine Country Club in Cranston, RI on December 16th. There was an outstanding showing. The annual raffle was held to benefit the Crossroads Women’s Shelter. A record setting $1716 was raised to benefit the shelter.

Dr. Seigel accepted an award by the AHA called the Get With the Guidelines Award at the annual Fain Memorial Stroke Lecture on November 2, 2011. He accepted the award on behalf of TMH Stroke Program. Todd also gave a lecture at the event.

Megan Ranney. Reproduced from Sailing Magazine

Reproduced from Sailing Magazine