

Rohrmann Endowment for UW Radiology Resident Educational Excellence

A truly inspiring response from our donors!

Thank you, UW Radiology Donors!

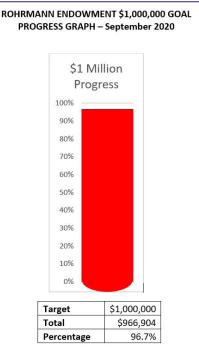
Since the inception of the Rohrmann Endowment in 2010, UW Radiology has been engaged in an ambitious undertaking – to raise \$1 million in support of perpetual funding for Radiology Resident Educational Excellence. Over the course of the past decade, over 350 UW Radiology resident alumni, faculty, staff, and friends have been vital supporters of this outreach. You have invested in the future of radiology – providing scholarships to underrepresented medical students through the <u>UW Radiology Diversity Visiting Student Program</u>, providing seed money for resident research projects, supporting life-changing <u>global health teaching experiences</u> and countless other resident experiences including presentations at national meetings that have enhanced the residency experience, contributed to advances in science and improving patient care. As we enter the 2020 Fall season, we are grateful for the investments you have placed in the residency program to enhance their training.

In early April, we challenged all to join in honoring Dr. Charles Rohrmann in recognition of his 45+ years of service at UW Radiology. We envisioned early and regular supporters who have always responded generously to share in this special recognition challenge. Collectively, you exceeded our aspirations. Of the more than 150 alumni, faculty, staff, and friends who responded with donations, many were first-time donors. Countless other supporters contributed with their time and energy, conveying heartfelt memories of working with Dr. Rohrmann. This was a testament that every gift has significance. As a collective, raising more than \$966,000 over ten years is truly inspiring.

While reaching close to the \$1 million goal has allowed us to significantly increase our impact, there is still much more to be done as new initiatives surrounding **Equity, Diversity, and Inclusion (see p. 7)** have brought to light more opportunities to engage with medical students and develop programs to attract underrepresented students to the field of Radiology. We encourage each of you to continue deepening your partnership with the Endowment and other funding outreach opportunities to continue the mission towards Radiology Resident Educational Excellence.

The generosity you have shown over these past 10 years reflects your commitment to advancing our mission. Thank you for your contributions and continued support!

You can support Radiology Resident Excellence! **Mail your donation [note Rohrmann Endowment on your check]:** UW Advancement, Gift Services, Box 359505, Seattle WA 98195-9505 **Call:** 206.543.5686 / 866.633.2586 **Online:** <u>Acceleratemed.org/Rohrmann</u>



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Residency in Focus 2020



Radiology residents have found creative ways to stay in touch and on task during these challenging times, with the need to continue social distancing and other precautions due to the COVID-19 virus. It is amazing how quickly they have adapted and embraced opportunities to connect virtually.

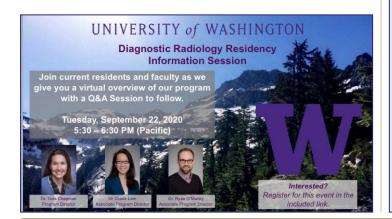
• Women in Radiology Book Club on July 23, 2020 -

Faculty and residents joined together via Zoom to discuss the book "Be the Person You Mean to Be" by Dolly Chugh. It was a riveting discussion and focused on how to promote change within our community and work environment.



• Diagnostic Radiology Residency Virtual Open House September 22, 2020 - We did our first virtual open house for 4th year medical students to get an idea of what UW Radiology has to offer prior to submitting their residency applications. It was a collaborative event with numerous residents presenting on various topics from the curriculum, call experience, global health opportunities, and resident social life.

Residents involved include: John Wu, Marissa Lawson, Larry Cai, Grace Laidlaw, JJ Weaver, Jennifer Xiao, Adam Skibinski, Shamus Moran, and Patty Ojeda.



Our program director and associate program directors were also involved. We had medical students logging in from across the nation and even internationally. It was a big event and it seems, from the feedback we received, the medical students thought it was worthwhile!

• Staying social while distancing - Although we cannot have as many social gatherings, we have still been able to maintain some bonding amongst the residents during these times. We intermittently have Virtual Trivia as a fun way to get together outside of work - and learn random facts which will one day help us win Who Wants To Be a Millionaire.

• New resident run journal clubs have become a monthly activity within the program. Promoted by John Wu our current Research Chief, junior and senior residents present different research papers to their co-residents, focusing on a particular topic. The goal has been to incite engaging discussions but also to increase interest in some areas of radiology which the junior residents may not have yet had much experience. It has been quite fun and educational thus far.

The <u>UW Diagnostic Radiology Residency website</u> has been completely redone and offers a plethora of information regarding our program.

We have become quite active in the social media realm as well, thanks to Mariam Shehata and Janis Yee. Any and everyone is encouraged to follow us on Twitter <u>@UW_RadRes</u> or on Instagram <u>uw_radres</u>.

- Patricia Ojeda, M.D., PGY-5, Co-Chief Resident

The 10-year anniversary of the Endowment continues!

Your 10-year anniversary donation to the Endowment will fund these strong enhancements to the resident educational experience:

• Funding valuable educational resources, infrastructure, opportunities, and provide meaningful awards to high-achieving residents for experiences that enhance their core training.

Together with colleagues, you will create a legacy and underscore your commitment to the enrichment of the **University of Washington Radiology Residency program**.

Virtual Connections Abound for Residents!

Women in Radiology Evening Discussion with Dr. Ruth Carlos, current JACR Editor-in-Chief September 24, 2020

Several faculty, fellows, and residents joined together via Zoom for an interactive discussion "Failing Up" with Dr. Carlos who shared with us her personal experiences and lessons learned during her professional career.



Virtual IR Residency Activities!

UW Interventional Radiology Residency has started a Twitter and Instagram account – both handles are <u>@UofWa IR</u>. Just a few months into starting these accounts, we have 360 Instagram followers and 220 Twitter followers and have used these platforms to promote the culture of our program and case diversity we get at UW.



- UW IR Residents hosted two virtual "Meet and Greets" with over 60 medical students attending between the sessions. Prospective applicants were able to learn about the city, the culture of our programs, and had some face time with our residents. We had both national and international participants.
- UW IR Residents Drs. Grace Laidlaw, IJ Weaver, Andrew Woerner, and Tyler Jackson were able to present virtually at the Cardiovascular and Interventional Radiologic Society of Europe.

- Kara Fitzgerald, MD PGY-2 Interventional Radiology

Double Barrel Brachio-Cephalo-Caval Viabahn VBX Stent-Graft **Reconstruction for Treatment of Superior Vena Cava Syndromes: Early Experiences**

Tyler Jackson, MD Integrated IR Resident PGY-3

ENDOVASCULAR RECANALIZATION AND RECONSTRUCTION FOR THE TREATMENT OF SYMPTOMATIC VENOUS LIGATION: TECHNICAL RESULTS, ADVERSE EVENTS, CLINICAL OUTCOMES, AND STENT PATENCIES





Andrew Woerner, MD, MS Integrated IR Resident PGY-3 (left and below)

JJ Weaver, MD Integrated IR Resident PGY-3 (right)

Transforaminal Intrathecal Delivery of Nusinersen for Older Children and Adults with Spinal Muscular Atrophy and Complex Spinal Anatomy: An Analysis of 200 **Consecutive Injections**

🕝 Seattle Children's

PERCUTANEOUS EXTRA-ANATOMIC DOUBLE BARREL VENOUS BYPASS CREATION FOR SALVAGE OF A HEMODIALYSIS ACCESS **GRAFT AND TREATMENT OF REFRACTORY CHRONIC UPPER** EXTREMITY VENOUS OCCLUSIVE DISEASE

Inferior Vena Cava (IVC) Diameter Predicts IVC Filter **Tilt and Need for Advanced Retrieval Techniques:** An Analysis of 188 Consecutive Patients

Grace Laidlaw, MD, MSc¹; Jeffrey Forris Beecham Chick, MD, MPH, FCIRSE, FSVM¹ Christopher R. Ingraham, MD¹; Eric J. Monroe, MD¹; Guy E. Johnson, MD, PharmD¹; Karim <u>Valij</u>, MD, FSIR¹; David S. Shin, MD¹. Department of Radiology, University of Washington, 1959 Northeast Pacific Street, Seattle, WA 98195

The authors report no relevant disclosures.

Grace Laidlaw, MD Integrated IR Resident PGY-4

Meet UW Radiology Alumnus Dr. Jeffrey Kanne



Jeffrey Kanne, MD, UW Radiology Chief Resident, 2004, currently serves on the Rohrmann Endowment Advisory Committee. He graciously agreed to answer some questions and provide insights to today's residents. Dr. Kanne is Professor of Thoracic Imaging and Vice Chair of Quality, Department of Radiology at University of Wisconsin School of Medicine and Public Health.



Jeffrey P. Kanne, MD Advisory Committee Member

Where are you from originally?

I am originally from Atlanta, Georgia. I grew up there when it was a small, big city.

What was your path towards becoming a radiologist?

I went to medical school right after graduating from college. I initially was interested in cardiology, but after my first few third-year clerkships, I realized that radiology was the place our team went to find out what was wrong with our patients. The combination of technology, problem solving, and the wide variety of pathology drew me into radiology. I really liked anatomic pathology, too, but my red-green color deficiency was a bit problematic. Who knew there are multiple shades of pink and red?

What was your experience like as a resident at UW Medicine?

I was in training at UW from 2001-2005, which was an exciting time in radiology. PACS and voice recognition software were just making their debut. I still remember the collection of crazy transcription errors, which were embarrassing to all parties involved! I still remember hanging films at the VA and Children's (sometimes putting the scoliosis studies in the back of the bin) and trying to compare a PACS image to a real film image.

What always struck me at UW was the passion the faculty had for teaching the residents and fellows. That passion is what inspired me to want to focus much of my academic career in education.

The breadth of experiences I had while at UW prepared me for my own practice. The crazy nights working in the Harborview Emergency Department gave me the efficiency and confidence to manage large caseloads and demanding clinicians, and the complex cases at UWMC gave me the knowledge to take care of complicated patients. Add in the experiences at Seattle Children's, SCCA, and the VA, and one has a well-rounded radiology education.

What excites you most about radiology and what are some of your specialty areas?

The constant evolution of technology and applications in diagnostic imaging excite me most. I was in training when we saw marked growth in CT and MRI technology and applications. Now we are seeing how artificial intelligence can augment our practices. Even after 15 years of practice, I still encounter challenging or strange cases. It's so fulfilling to have a group of colleagues across the country (including Dr. Godwin!) with whom I can share cases and get others' thoughts on them.

My specialty area is thoracic imaging, with special expertise in interstitial and occupational lung disease, lung infections, and pulmonary vascular diseases. I am also the Vice Chair of Quality and Safety for my department, and I work with our institutional leadership to ensure that our patients are receiving the best care.

What do you think are some of the most important experiences for residents to have?

Residents need to be exposed to as many cases, practice environments, and supervising radiologists as possible in order to gain the broadest experience in training. Attendance at and participation in multidisciplinary conferences is an important part of being a radiologist. Understanding how our colleagues in other specialties make decisions based off of our work allows us to improve the quality of our own practice.

It is evident that education is very important to you – in 2013 and 2019 you were named Department of Radiology Teacher of the Year, and in 2015 you were the recipient of the Health Clinical Educator Excellence Award from the University of Wisconsin Hospital and Clinics. You recently chaired the Society of Thoracic Radiology's Education Committee. Tell us more about your passion and vision for medical student education.

My approach to teaching my learners is to teach an understanding of why we see what we see on imaging studies. This includes a mix of anatomy, pathology, and physiology. Gone are the days of mnemonics for upper lobe predominant lung diseases or cavitary nodules. The current generation of residents grew up with smart phones and Google. They know how to find information quickly—information I had to commit to memory from a textbook or notes taken during a lecture (for the record, I never liked mnemonics because they do not reflect any understanding of the material).

"My earliest mentors were Drs. David Godwin, Julie Takasugi, Eric Stern, Joel Lichtenstein, Eric Effmann, and Chuck Rohrmann. They encouraged and challenged me to grow professionally during my residency training. They taught me how to write better manuscripts. They modeled for me how to interact with patients, families, and other healthcare professionals."

As I've matured as a teacher, I've learned to guide my learners to the answers, often by asking them questions in response. I try to provide practical information for their exams and for the real world. I teach them the pathology, the physiology, and the anatomy they need to understand a disease so that they can then understand how imaging findings reflect alterations of normal.

Our trainees and students train in an era in which professional certification consists of multiple-choice exams on a computer. There is no discussion with an examiner, no method to assess understanding of a disease, no methods to assess how one thinks. While we need to ensure they are prepared for those exams, we also need to ensure they have the knowledge to be successful radiologists.

What are some of the biggest challenges you face in radiology?

The biggest challenge I am facing right now is a workforce shortage in cardiothoracic imaging. The number of open positions in both academic and private practices continues to outstrip the number of radiologists choosing this subspecialty. Fortunately, for me, my section is fully staffed, but I remain concerned because my colleagues at other institutions are feeling the stress, and it becomes hard to inspire residents when one is so overworked.

Artificial intelligence is both a positive and a negative challenge. Many students and trainees worry that AI will replace or greatly reduce the role of the radiologist. I think AI has the potential to improve the quality of our practice through improved detection of abnormalities, worklist triage, and doing so many of the mundane tasks that do not require higher level thinking such as measuring and comparing lung nodules and assessing support device locations. With the help of AI, I can spend more time consulting with my clinical colleagues, participating in multidisciplinary conferences, analyzing and reporting complex cases, and of course teaching.

Having great mentors plays such an important role for all of us. Who were some of your early mentors? And who were your most recent ones?

My earliest mentors were Drs. David Godwin, Julie Takasugi, Eric Stern, Joel Lichtenstein, Eric Effmann, and Chuck Rohrmann. They encouraged and challenged me to grow professionally during my residency training. They taught me how to write better manuscripts. They modeled for me how to interact with patients, families, and other healthcare professionals.

Mentors later in my career include Drs. Nestor Müller, John Mayo, Phillip Boiselle, and Gerald Abbott. They taught me how to nurture professional relationships, how to build multidisciplinary clinical programs, how to manage difficult coworkers and trainees, and many other skills one cannot learn earlier in one's career.

What advice do you give to radiology residents today?

Read early and often. So much of radiology is not taught (or is poorly taught) in medical school. Today, there are so many excellent resources available beyond the traditional textbook. While one does not need to know every single fact or statistic of a disease (easy enough to find on the internet), you need to develop a fund of knowledge that allows you to practice efficiently and makes you an outstanding consultant. A combination of targeted learning based on your experience each day along with a review of the core knowledge of a specific discipline will go a long way. Remember even though your exams may be multiple choice, the real-world practice of radiology is not.

We all get frustrated with excessive ordering of imaging studies, incomplete exams, meetings not placed on your calendar, phones incessantly ringing, PACS crashing, trash not being taken out. Remember that everyone is usually trying their best to do their job. Give appropriate feedback but be kind. It goes very far.

What are some of your favorite activities outside of work?

I really enjoy traveling all over the world, both to teach and to vacation with my family.

Yoga has been an important part of my life. My yoga practice has evolved from a remedy for a stiff neck and shoulders developed during residency to a mental break from work and everything else I need to do. Even with the pandemic I have been able to keep a regular practice at home.

I also enjoy reading (especially history), playing the piano, gardening, and vegetarian cooking (primarily as sous-chef to my wife, Elizabeth).



In the <u>Summer 2019</u> (pp. 4-5) edition of the Rohrmann Endowment newsletter, we highlighted the Michael and Rebecca McGoodwin Endowment for Radiology Resident and Fellow Training and Education. This fund was started by Dr. Michael McGoodwin, UW Radiology Resident '75, NucMed Resident '76, to provide broad-based direct financial support to residents and fellows in the Department of Radiology including residents within the disciplines of diagnostic radiology, interventional radiology, and nuclear medicine.

Funds from the McGoodwin Endowment were planned for supporting our Nuclear Medicine Chief Resident's participation in the 2020 SNMMI Annual Meeting. However, as this meeting was in June – like all national radiologic meetings during this season – it was held virtually and was free of charge to SNMMI members.

However, an opportunity presented with a fitting project to utilize funding from the McGoodwin Endowment. Publication of a first-author research project by Lisa Johnson, MD, PGY4,

Endowment Support for Residents!

in <u>Radiology Case Reports</u> was a worthy recipient. Dr. Johnson reflected upon her experience on this project:

I was able to publish a case report I authored with Dr. Hubert Vesselle (Professor of Nuclear Medicine) about an incidental case of COVID-19 on FDG PET/CT with support from the McGoodwin Endowment.

I had my first rotation in PET/ CT at UW in April 2020, which was during the early stages of the coronavirus pandemic in the United States. Characteristic radiologic features of COVID-19 were already widely known and Dr. Vesselle and I were able to recognize these features on the patient's attenuation correction CT that accompanied the FDG PET portion of the exam and alert the nuclear medicine staff and the patient's physician immediately. In this case, the diagnosis of COVID-19 was entirely incidental as the patient was asymptomatic and just getting a routine staging FDG PET/CT for his history of Lynch syndrome (with a personal history of colon, liver, and thyroid cancer).

As is typical for coronavirus, the patient had multifocal areas of peripheral ground glass opacities in both lungs. These areas demonstrated marked FDG uptake and revealed other areas of disease, which were only faintly visible on CT. The patient underwent testing for COVID-19 and the PCR results were positive; the patient was advised to self-isolate for 14 days.

Writing the discussion for this case report helped me learn a lot about the symptoms and diagnosis of COVID-19, which is still an ongoing global

pandemic many months later. I am grateful to the McGoodwin Endowment for allowing me the opportunity to publish this case report with Dr. Vesselle.



Lisa Johnson, MD, PGY-4

The Department of Radiology is very grateful to Dr. Michael McGoodwin for his generosity and support of the residents and fellows by creating this special Endowment in honor of his late wife, Rebecca. Dr. McGoodwin has been a dedicated and benevolent contributor to the Rohrmann Endowment for many years.

You can donate directly to the <u>Michael and Rebecca McGoodwin Endowment for Radiology Resident and</u> <u>Fellow Training and Education</u> fund here, or by sending in your donation to: UW Advancement, Gift Services, Box 359505, Seattle WA 98195-9505

OUR DONORS

Endowments that support UW Radiology Residents are funded by:

- UW Radiology Resident and Fellow Alumni
- UW Radiology Faculty and former faculty, staff
- Friends, associates, and family of the above

Thank you for your ongoing support for these programs

Equity, Diversity, and Inclusion: A Report from UW Radiology Chief Resident for Diversity

In the wake of recent events surrounding police brutality and protests, underrepresented minority (URM) radiology trainees led a department-wide talk on the current state of equity, diversity and inclusion (EDI) within our department from a resident perspective. Since then, conversations have sparked and committees have been formed to help address EDI with the goal of achieving the four aims presented by our underrepresented trainees:

- Increase Awareness about the challenges that URM trainees face daily both at work and outside of work. Understanding how inequality influences the URM experience.
- Change Perceptions by actively challenging the perception that "different" means "deficient." Understanding that equity should be the goal, not simply equality.
- Active Engagement by conscientious efforts to remain aware of and actively address issues that URM trainees may be facing.
- Increase Retention through a concerted effort to retain URM trainees as faculty, as well as recruit URM faculty.

The newly created department-wide diversity committee is led by Department Chair Dr. Dushyant Sahani and Vice Chair for Education Dr. Angelisa Paladin, and consists of subcommittees covering areas such as education, recognition, recruitment and pipeline programs. Subcommittees are composed of members reflecting different areas of our department including imaging technologists, administrative personnel, researchers, physicists, residents, fellows and faculty.

The goal is to create a department-wide culture change, one that supports the mission of EDI and creates an environment where underrepresented members of the department can thrive. Several initiatives are being created; for example, partnering with the UW Office of Healthcare Equity to create a lecture series covering areas such as cultural sensitivity and unconscious bias, and creating a pipeline program to increase exposure of URM high school and college students to careers in healthcare through the lens of radiology. An additional committee, specifically to serve at the residency level, was also created and includes faculty selected by URM trainees and a newly created chief resident position for diversity, for which I have taken the role. **The Residency Diversity Advisory Council**, as we are called, work together with the residency program directors with the task of creating ways to improve support for URM residents and address resident level concerns.



Segen Aklilu, MD, PGY-5 UW Radiology Chief Resident for Diversity

My primary objective as the Diversity Chief Resident is to serve as an advocate for URM residents and increase recruitment of URM candidates. One of the keys to increasing recruitment of URM trainees and retention as faculty, with an emphasis on Black faculty members which our department is lacking in, is by creating an environment that is conducive for URM trainees who come to UW with strong academic backgrounds to continue to thrive and succeed.

I worked with all URM residents to compile a list for faculty of tools for an inclusive approach to URM residents. A couple of the initiatives that my committee and I have worked on thus far include matching URM residents with faculty or URM graduates for mentorship and to serve as their resident advocate, and improving access to lactation rooms for nursing trainees.

In just a few short months, we as a department have successfully come together to start working on improving EDI. I look forward to seeing where we go from here! I hope our ideas and initiatives will not only create a culture change in our department, but also inspire other departments to pursue a more intentional approach in creating an inclusive atmosphere for all underrepresented minorities at UW.

> – Segen Aklilu, MD Diagnostic Radiology, PGY-5 Chief Resident for Diversity

EQUITY, DIVERSITY, AND INCLUSION (EDI) A CALL TO ACTION – JOIN THE CONVERSATION! Are you interested in how you, as a UW Radiology alumnus, can become involved in this important initiative?

Please contact Betty Lanman, blanman@uw.edu

Rohrmann Endowment UW Medicine, Department of Radiology 1959 NE Pacific St, Box 357115 Seattle, WA 98195

Betty L. Lanman Phone: 206.598.3303 <u>blanman@uw.edu</u>

Fifth Annual Doug Green Memorial Hike!

It's hard to believe, but this year marks the 5th anniversary of the Annual Doug Green Memorial Hike. Dr. Doug Green was one of our beloved faculty members in the Body Imaging section. He was an enthusiastic educator and an avid outdoorsman, hiking throughout the Pacific Northwest and spending the winter months in his beloved Utah skiing rugged backcountry slopes.



Above, top: Jared, Christine, Majid (holding Beau), and Bahar strike a pose! Middle: Asa and Michael snack break Right: Lower Falls bridge pose Above: Wallace Falls

Photo Credits: Christine Rehwald and Tess Chapman Doug's love of nature inspired us to get outdoors and hike in his memory. This year, we took a trip to Wallace Falls, a lovely hike nestled in a Central Cascades river valley.





L to R: Majid Chalian, Bahar Mansoori, Michael Flowers, Ryan O'Malley, Tess Chapman, Christine & Jared Rehwald, Emmy, Beau, and Asa

The well-groomed trail made for easy hiking (perfect for kids in tow!), and the lush forest made

for great scenery the whole way up. Hiking along the Wallace River, we enjoyed crossing bridges over rushing water. We then worked our way uphill to the lower and middle waterfall viewpoints, where we were welcomed by spectacular cascades over 200 feet tall.



This provided a perfect spot to stop for a snack and soak in the scenery. We then returned for a leisurely hike downhill, the sun shining and the fall colors glowing. Along the way, we encountered chipmunks, a woodpecker, a fuzzy caterpillar, and lots of slugs. Kids and adults alike were entertained! Thank you, Doug, for continuing to inspire us.

Christine Rehwald, MD Assistant Professor, MSK Radiology

Correction from Summer 2020 Newsletter, thanks to Michael A. Foster, MD, Class of 1988. Dr. Foster aptly pointed out, "That is actually Spring 1986. I am on the back row one removed from Dr. Rohrmann. I am the handsome guy without the 1980s Tom Selleck mustache."

