



 *SIU School of Medicine*

*2010-2011*

*GME Annual Report*



# Chair's Message

In the 2010-2011 academic year, SIU and its affiliated hospitals trained 294 residents and fellows in our 19 core residency and 16 fellowship programs located in Carbondale, Decatur, Quincy, and Springfield. We have a lot to be proud of in these programs. The Graduate Medical Education Committee (GMEC) serves as the primary oversight body for our GME programs. As GMEC chair, I am required by the ACGME to present an annual report on our GME programs. Although some of the report content is mandated by the ACGME, it also includes a number of indicators of GME quality.

In September 2010 the ACGME released a new set of Common Program Requirements (CPRs) that became effective July 1, 2011. These are standards that must be adopted by all programs. The GMEC spent much of this year working actively with programs and our affiliate hospitals to ensure that our programs were ready and adequately resourced to meet the new requirements. Standards have been expanded in the following areas:

- Patient Safety and Quality
- Transitions of Care
- Duty Hours and Resident Fatigue
- Resident Supervision.

Beginning in July 2011, all incoming residents and new faculty will have required basic education and training on recognition and management of fatigue and supervisory expectations. These training modules can be made available for any member of the medical staff who wishes to take them by calling Debi Santini at 217-545-8546.

All of our programs have made adjustments to their resident rotation and coverage schedules to accommodate the new requirements for duty hour length and supervision. In our hospitals and clinics, we strive to balance the increasing numbers of patients needing care with reductions in the amount of hours residents can work and in the amount of autonomy they are allowed to maintain outstanding educational programs.



Karen Broquet, MD  
Associate Dean for Graduate Medical Education  
Chair, Graduate Medical Education Committee

Janet Albers, MD	Program Director	Siddarth Kaul, MD	Resident
Beau Batton, MD	Faculty	Tobias Köhler, MD	Program Director
John Becker, MD	Program Director	James Malone, MD	Program Director
John Bradley, MD	Program Director	Anita Mehta, MD	Resident
Karen Broquet, MD	Chair	John Mellinger, MD	Program Director
Reuben Bueno, MD	Program Director	Thomas Miller, MD	Program Director
Lucinda Buescher, MD	Program Director	Michelle Miner, MD	Program Director
Amy Bulpitt, JD	GME Director, SJH	Erica Nelson, MD	Program Director
Luke Crater, JD	Legal Counsel	Manisha Punwani, MD	Program Director
Elizabeth Dabbs, MD	Resident	Jan Rakinic, MD	Fellowship Director
James Daniels, MD	Fellowship Director	Hilary Sanfey, MB, BCh, FACS	Faculty
Rodger Elble, MD, PhD	Program Director	Linda Schneider	Coordinator
Keith Gabriel, MD	Program Director	Kyle Siewert, MD	Resident
Rajesh Govindaiah, MD	CMO, MMC	Eric Taylor, MD	Resident
David Griffen, MD	Program Director	Penelope Tippy, MD	Program Director
Jennifer Hardwick, MD	HSBD President	Andrew Varney, MD	Program Director
Jessie Junker, MD	Faculty	Melanie Zupancic, MD	Resident

## Accreditation

The ACGME has granted the School of Medicine full accreditation for all of its eligible programs. SIU also sponsors a number of GME programs that are not eligible for accreditation. These programs are held to the same standards of education, duty hours, and GME oversight as our accredited programs. To ensure that accredited programs continue to meet ACGME requirements, they are reviewed by the Residency Review Committees (RRCs). RRC reviews are extremely meticulous and require a great deal of time, effort, and preparation by the programs.

### **During 2010-2011:**

The Otolaryngology program was reviewed by its RRC in June and is awaiting a notification letter.

The Integrated Vascular Surgery residency program was granted accreditation during the previous academic year and will enroll its first resident in the next academic year. The Spine Surgery and Adult Reconstructive Surgery programs both received initial accreditation.

Five programs received their RRC notification letters from site visits that occurred during the 2009-2010 or 2010-2011 academic years: Internal Medicine, Orthopaedics, Springfield Family Medicine, Surgery, and Child Psychiatry.

# Accreditation

Six internal reviews were conducted for the following programs: Decatur Family Medicine, Dermatology, Emergency Medicine, Hand Surgery, Plastic Surgery, and Vascular Surgery-Integrated.

Table 1 below is a review of each accredited program, its current cycle length, and the average ACGME cycle length for all accredited programs.

**Table 1:**

Program Name	Cycle Length	†Average ACGME Cycle Length
Carbondale Family Medicine	5 years	4.17
Decatur Family Medicine	5 years	4.17
Dermatology	5 years	4.36
Emergency Medicine +	3 years	n/a
Internal Medicine	5 years	4.87
Med/Psych	n/a	n/a
Neurology	5 years	4.12
OB/GYN	3 years	3.62
Orthopaedics	4 years	4.05
Otolaryngology *	4 years	3.76
Pediatrics	5 years	3.93
Plastic Surgery	5 years	4.39
Psychiatry	3 years	4.20
Quincy Family Medicine	5 years	4.17
Radiology	5 years	4.48
Springfield Family Medicine	4 years	4.17
Surgery	3 years	3.78
Urology	5 years	4.36
Vascular Surgery - Integrated +	3 years	n/a
<b>Fellowships</b>		
Adult Reconstructive Surgery +	2 years	4.00
Carbondale Sports Medicine	5 years	4.36
Child Psychiatry	3 years	4.53
Colon & Rectal Surgery +	3 years	n/a
Endocrinology	6 years	4.98
Hand Surgery	5 years	3.69
Infectious Diseases	5 years	5.10
Pulmonary Medicine	6 years	4.43
Quincy Sports Medicine	5 years	4.36
Spine Surgery +	2 years	3.69
Vascular Surgery	5 years	4.06
<b>Other</b>		
Institution	4 years	3.80

## 5 + year club

In most instances the longest reaccreditation cycle granted by the ACGME is 5 years. We are proud of all our programs. However, those programs with a 5 or more year cycle length are worthy of special acknowledgement and are highlighted in blue.

+Newly accredited programs can only obtain a maximum accreditation cycle of 3 years. If awarded the maximum accreditation, the program is also highlighted in blue.

†2009-2010 ACGME Data Resource Book

\*Site visited in 10/11, results pending

Resident recruitment is outlined in Table 2 for the residency programs. Comparisons are made between the SIU match fill rate and the national fill rate, as well as matriculating resident USMLE exam scores compared to the national mean.

**Table 2:**

Program Name	SIU NRMP Fill Rate	National NRMP Fill Rate <sup>^</sup>	Step I Mean Score-Matriculating Residents	National Mean Step I Score-Matriculating Residents †		Step II Mean Score-Current Residents	National Mean Step II Score-Matriculating Residents †		Step III Mean Score-Current Residents
				US Seniors	Other		US Seniors	Other	
Carbondale Family Medicine	100%	94.4%	196	214	201	202	223	205	198
Decatur Family Medicine	100%	94.4%	205	214	201	213	223	205	204
Dermatology	100%	92.9%	239	242	225	252	251	232	236
Emergency Medicine	100%	99.7%	206	222	219	226	230	226	N/A
Internal Medicine	100%	98.9%	231*	225	222	236*	232	226	207
Med/Psych	100%	89.5%	212	N/A	N/A	233	N/A	N/A	208
Neurology	100%	98.9%	223	225	224	221	231	226	226
OB/GYN	50%	98.9%	230	219	212	240	229	219	205
Orthopaedics	100%	99.7%	223	238	226	230	241	228	210
Otolaryngology	100%	98.9%	251	240	230	259	246	232	218
Pediatrics	100%	98.2%	197	219	214	204	229	220	205
Plastic Surgery	100%	100.0%	240	245	224	250	245	219	218
Psychiatry	100%	97.4%	202	216	207	200	221	209	206
Quincy Family Medicine	100%	94.4%	220	214	201	205	223	205	205
Radiology	67%	94.4%	221	238	235	233	242	239	211
Springfield Family Medicine	100%	94.4%	213	214	201	222	223	205	200
Surgery	100%	99.8%	219	224	223	222	231	227	205
Urology	100%	N/A	225	N/A	N/A	236	N/A	N/A	216

Minimum passing scores for USMLE Exams:

Step I	188
Step II	189
Step III	187

<sup>^</sup>NRMP Results and Data, 2011 Residency Match

<sup>†</sup>NRMP Charting Outcomes in the Match, August 2009

\*Data includes Preliminary Medicine resident scores

## Quality Indicators

A number of measurable indicators of GME quality have been adopted by the GMEC and are presented throughout this report. In addition, residents have two opportunities each year to evaluate various aspects of their training directly to SIU and the ACGME. The ACGME conducts an annual resident survey. The GMEC conducts an annual end of year evaluation for all residents participating in the residency programs in Carbondale, Decatur, and Springfield. Quincy Family Medicine administers an end of year evaluation customized to its respective locations, therefore throughout the tables in this report, this program may not have data reported if that particular area was not addressed in their evaluation. For 2010-2011, 245 evaluation responses were received from Carbondale, Decatur, Quincy, and Springfield programs for a 79% response rate. Resident input from the SIU end of year evaluations and ACGME resident survey on a variety of training parameters are listed in tables on the following pages.

# Exam Performance

Table 3:

	2010-2011			In-Service Exam			
	Board Pass Rate		RRC Required Pass Rate for Board Exam				
	Part I	Part II					
<b>Carbondale Family Medicine</b>			N/A				
<b>Decatur Family Medicine</b>			N/A				
<b>Dermatology</b>	100%		N/A				
<b>Emergency Medicine</b>	N/A		N/A				
<b>Internal Medicine</b>			80% of takers				
<b>Med/Psych</b>	100%*	**	N/A	Med	Psych		
<b>Neurology</b>	100%	100%	60% of takers				
<b>OB/GYN</b>			N/A				
<b>Orthopaedics</b>	100%	100%	75% of graduates				
<b>Otolaryngology</b>	100%	100%	NA				
<b>Pediatrics</b>			60% of takers				
<b>Plastic Surgery</b>	100%	100%	N/A				
<b>Psychiatry</b>		100%	50% of takers	Neuro	Psych		
<b>Quincy Family Medicine</b>	100%		N/A				
<b>Radiology</b>			50% of graduates				
<b>Springfield Family Medicine</b>			N/A				
<b>Surgery</b>			65% of graduates				
<b>Urology</b>	100%	100%	N/A				
Fellowships							
<b>Carbondale Sports Medicine</b>	100%		N/A				
<b>Child Psychiatry</b>	N/A		N/A				
<b>Colorectal Surgery</b>	100%		70% of graduates				
<b>Endocrinology</b>	100%		N/A				
<b>Infectious Diseases</b>	100%		N/A				
<b>Pulmonary Medicine</b>	100%		N/A				
<b>Quincy Sports Medicine</b>			N/A				
<b>Vascular Surgery</b>	100%	100%	N/A				
KEY							
<b>Scale</b>							
<b>Board Pass Rate with RRC Requirements</b>	Meets or exceeds RRC Requirement		Within 20% of RRC Requirements	Below 20% of RRC Requirement			
<b>Board Pass Rate-last three years</b>	≥ than 80%		50-79%	≤ 49%			
<b>Average In-Service Exam</b>	≥ than 80th percentile		50th - 79th percentile	≤ 49th percentile			

\*Parts I & II Psychiatry Boards

\*\*Internal Medicine Boards

Table 3 addresses exam performance. The green bars indicate a level of performance meeting the thresholds outlined in the key below the table. Some programs' RRC determine the benchmarks for performance regarding Board Pass Rates. The remaining thresholds were set by SIU and are quite high. Yellow bars indicate a mid-range of success and red bars indicate a need for real improvement. Because our programs are small, the board performance of 1 or 2 graduated residents can have a significant impact on the pass rate. A significant number of programs currently have a 100% board pass rate.

# Program Satisfaction

The following two tables use data collected from the SIU School of Medicine End of Year Evaluations that are distributed to all residents and fellows. Table 4 addresses satisfaction with the training program and Table 5 reflects the number of graduates who obtained their fellowship of choice.

**Table 4:**

	SIU End of Year Evaluations							
	Extent to which your educ. exp. this year will prepare you for practice		Your overall satisfaction with the educational environment of your program		I would recommend my residency program to a friend			
	Responses listed as total number of responses							
	Poor/Fair	Good/Excellent	Poor/Fair	Good/Excellent	Strongly Disagreed	Disagreed	Agreed	Strongly Agreed
1-2	3-4	1-2	3-4	1	2	3	4	
<b>Carbondale Family Medicine</b>	0	7	0	7	0	0	4	3
<b>Decatur Family Medicine</b>	0	15	0	15	1	0	6	6
<b>Dermatology</b>	0	6	0	6	0	0	1	5
<b>Emergency Medicine</b>	0	6	0	6	0	0	0	6
<b>Internal Medicine</b>	2	24	3	23	2	2	14	7
<b>Med/Psych</b>	0	7	0	7	1	0	3	4
<b>Neurology</b>	0	5	0	5	0	0	2	3
<b>OB/GYN</b>	0	6	0	6	0	0	3	3
<b>Orthopaedics</b>	1	16	1	14	1	5	10	1
<b>Otolaryngology</b>	0	10	0	9	0	0	6	4
<b>Pediatrics</b>	3	11	2	12	0	0	10	3
<b>Plastic Surgery</b>	0	12	0	12	0	0	4	8
<b>Psychiatry</b>	0	18	0	17	0	2	8	8
<b>Quincy Family Medicine</b>	1	17	1	16	0	0	5	13
<b>Radiology</b>	0	12	2	10	0	2	9	1
<b>Springfield Family Medicine</b>	1	18	0	19	1	1	3	12
<b>Surgery</b>	1	11	2	10	1	1	5	5
<b>Urology</b>	0	10	0	10	1	0	0	7

**Table 5:**

Residency graduates who obtained their fellowship of choice				
Core Programs	Entering Fellowship: 1st Choice	Entering Fellowship: Not 1st Choice	Unable to obtain Fellowship	Chose not to enter Fellowship
<b>Carbondale Family Medicine</b>	0	0	0	2
<b>Decatur Family Medicine</b>	1	0	0	4
<b>Dermatology</b>	1	0	0	1
<b>Internal Medicine</b>	3	0	1	3
<b>Med/Psych</b>	0	0	0	2
<b>Neurology</b>	2	0	0	0
<b>OB/GYN</b>	1	0	0	0
<b>Orthopaedics</b>	1	1	0	2
<b>Otolaryngology</b>	0	0	0	3
<b>Pediatrics</b>	0	1	0	5
<b>Plastic Surgery</b>	1	0	0	1
<b>Psychiatry</b>	2	0	0	1
<b>Quincy Family Medicine</b>	1	0	2	3
<b>Radiology</b>	3	0	0	0
<b>Springfield Family Medicine</b>	0	0	0	7
<b>Surgery</b>	2	1	0	2
<b>Urology</b>	1	0	0	1
<b>TOTAL</b>	<b>19</b>	<b>3</b>	<b>3</b>	<b>37</b>

# National Leadership

Table 6:

<b>Residents or Faculty Holding National Leadership Positions</b>		
<b>PROGRAM</b>	<b>FACULTY OR RESIDENT</b>	<b>LEADERSHIP ACTIVITY</b>
<b>Carbondale Family Medicine</b>	<b>Penny Tippy, MD</b>	Chair, Academic Council, National Institute for Program Director Development and Member, Review Committee for Family Medicine
	<b>Quincy Scott, DO</b>	Building Community-Based Medical Homes for Children Program, Lead Family Physician, SIU Carbondale & West Frankfort Clinics; Kirksville College of Osteopathic Medicine OPTIK Governing Board Member; American Osteopathic Association Family Medicine Accreditation Site Inspector
<b>Child Psychiatry</b>	<b>Mary Dobbins, MD</b>	DocAssist Group Committee on Childhood Anxiety, Chair; Committee for Psychosocial Aspects of Child and Family Health for the American Academy of Pediatrics
<b>Colon &amp; Rectal Surgery</b>	<b>Jan Rakinic, MD</b>	Elected to American Board of Colon and Rectal Surgery April 2011; Association of Program Directors in Colon & Rectal Surgery, Chair, Faculty Development Committee; ACGME Appeals Panel for Colon & Rectal Surgery
<b>Dermatology</b>	<b>Stephen Stone, MD</b>	SKINnovations Committee, Chair, Deputy Chair (2010); Regulatory Policy Committee; Ad Hoc Task Force on the Astellas Awards, Chair; Selection Panel for the Eugene J. Van Scott Award and Phillip Frost Leadership Lecture, Chair; iPLEDGE Scientific Advisory Board Development and Industry Liaison Committee, Chair
<b>Hand &amp; Micro Surgery</b>	<b>Michael Neumeister, MD</b>	American Board of Plastic Surgery, Oral Board Examiner; American Society for Reconstructive Microsurgery, Vice President (2010-2011), President Elect, Chair of Membership Committee; American Society for Plastic Surgeons / Plastic Surgery Foundation, PSF President Elect, Annual Meeting Program & Instructional Course Committee, Journal Business Operations Committee, Curriculum Development Committee, Research Oversight Committee, Executive Committee, Board of Directors, Vice President of Research, Chair of Research Coordinating Council, Governance Task Force; American Society for Peripheral Nerve, Education Committee, Grant Generating Committee; American Society for Surgery of the Hand, Research Management Committee; American Association for Hand Surgery, Treasurer, Chair of Finance Committee, Program Committee; Plastic Surgery Research Council, Award Committee, Chief Representative to the PSF Grant Committee, Program Committee; Midwestern Association of Plastic Surgeons, Trustee Board Member; Annals in Plastic Surgery, Editorial Board; Journal of Reconstructive Microsurgery, Editorial Board; Plastic & Reconstructive Surgery, Editorial Board; AAHS "Hand", Editor, Associate Editor (2008-2010); Journal of Plastic & Reconstructive Surgery, Associate Editor
<b>Infectious Diseases</b>	<b>Nancy Khardori, MD, PhD, FACP, FIDSA</b>	Infectious Diseases Society of America, Test Development Committee / Fellow's In-Training Exam, Education Committee
<b>Internal Medicine</b>	<b>David E. Steward, MD</b>	U.S. Medical Licensing Examination Clinical Skills Examination, Test Materials Development Committee
	<b>Janak Koirala, MD</b>	American Nepal Medical Foundation, Chair
	<b>Susan T. Hingle, MD</b>	American College of Physicians, Executive Committee of Board of Governors, Credentials Committee, IL Downstate Governor; Clerkship Directors of Internal Medicine, Vice Chair, Program Planning Committee; Clerkship Directors of Internal Medicine-Association of Program Directors in Internal Medicine, Task Force on Residents as Teachers
<b>Medicine/ Psychiatry</b>	<b>Karen Broquet, MD</b>	Association for Academic Psychiatry, Vice President, President Elect, Executive Committee

<b>Neurology</b>	<b>Rodger Elble, MD, PhD</b>	Tremor Research Group, President; Parkinson Study Group, Credentials Committee; International Essential Tremor Foundation, Medical Advisory Board
<b>Orthopaedic Surgery</b>	<b>John Froelich, MD</b>	Washington Health Policy Fellow (2011-2012); American Academy of Orthopaedic Surgeons Resident Liaison
<b>Otolaryngology</b>	<b>Carol Bauer, MD</b>	American Tinnitus Association, American Auditory Society, Executive Board of Directors
	<b>Gayle Woodson, MD</b>	American Association of Academic Departments of Oto, Councilman; American Laryngological Voice Research and Education Foundation, Board of Directors; Food and Drug Administration, ENT Devices Panel, Consultant
<b>Plastic Surgery</b>	<b>Kelli Webb, MD</b>	American Medical Association - Resident/Fellow Representative (Alternate Delegate)
	<b>Reuben A. Bueno, MD</b>	Midwestern Association of Plastic Surgeons, Treasurer, Board of Directors, Vice President--Program Chair (2011-2012)
	<b>Nicole Sommer, MD</b>	American Society for Aesthetic Plastic Surgery, Women's Health Advocacy Committee
<b>Psychiatry</b>	<b>Radmila Bogdanich</b>	Administrators in Academic Psychiatry, President
	<b>Philip Pan, MD</b>	Midwest Chapter of the American Academy of Psychiatry and the Law, President
<b>Quincy Family Medicine</b>	<b>Jerry Kruse, MD</b>	Society of Teachers of Family Medicine, President Elect; Association of Departments of Family Medicine; COGME Council on Graduate Medical Education
<b>Quincy Sports Medicine</b>	<b>James M. Daniels, MD</b>	Medical Review Board for the Federal Motor Carrier Safety Administration, Alternate Member; AMSSM Sports Medicine ITE, Midwest Chair, Panel Member
<b>Radiology</b>	<b>Charles Smittkamp, MD</b>	Resident Fellow Section - AMA Delegate to the AMA House of Delegates; State RFS Delegate to the ISMS; Communications Council for ISMS, Resident Member; American College of Radiology - AMCLC, Chapter Resident
	<b>Stephen Garrison, MD</b>	American College of Radiology AMCLC, Chapter Resident
<b>Springfield Family Medicine</b>	<b>Harald Lausen, MD</b>	AOA Member, National Project Team for Strategic Planning; Association of Osteopathic Directors and Medical Educators, Treasurer, Secretary (2009-2011); Board Task Force on Residency Program Development (ACFP), Member; Association for American College of Osteopathic Medicine (AACOM), Member Core Competency Liaison Group
<b>Surgery</b>	<b>John Mellinger, MD</b>	Association of Program Directors in Surgery, Program Committee Chair; APDS Board of Directors, Member; Society of American Gastrointestinal and Endoscopic Surgeons (SAGES), Board of Governors; SAGES Fundamentals of Endoscopic Surgery, Committee Co-Chair
	<b>Hilary A. Sanfey, MB, BCH, FACS</b>	American College of Surgeons Women in Surgery Committee, Chair; American College of Surgeons Board of Governors, Member; Association of Women Surgeons Executive Council, Member
<b>Urology</b>	<b>Bradley Schwartz, MD</b>	NCS Board of Directors, IL Representative to the North Central Section; Society of Urologic Robotic Surgeons, Member Socio-Economic Committee; North Central Section of the American Urological Society, Nominating Committee Member, Editorial and Awards Committee Member; Endourological Society, Laparoscopic Transperitoneal Nephrectomy Committee Member

# National Leadership

Residents or Faculty Holding National Leadership Positions		
PROGRAM	FACULTY OR RESIDENT	LEADERSHIP ACTIVITY
<b>Urology (continued)</b>	<b>Tobias Köhler, MD</b>	North Central Section of the American Urological Society, Young Urologist Member; AUA Public Media Sexual Medicine Spokesperson
	<b>Thomas Tarter, MD</b>	American College of Surgeons, Oncology Committee Member
	<b>Patrick McKenna, MD</b>	Society of University Urologists, President Elect; American Academy of Pediatrics, Urology Section Board of Directors; North Central Section of the American Urological Society, Secretaries Committee Member, Annual Meeting Committee Member, Bylaws Committee Member, Finance Committee Member, Long Range Planning Committee Member, Program Committee Member, Personnel Committee Member; American Urological Society Judicial & Ethics Committee, Chairman
<b>Vascular Surgery</b>	<b>Kim Hodgson, MD</b>	Vascular Education & Self Assessment Program, Chair; SVS Vascular Chairs Committee
	<b>Robert McLafferty, MD</b>	Vascular Disease Foundation Representing the American Venous Forum, President; American Venous Forum, Secretary, Chair American Venous Registry Marketing Committee, Co-Chair Research Council; SCVS Council Society for Clinical Vascular Surgery, Secretary; Society for Vascular Surgery, Member Board of Directors; Society for Clinical Vascular Surgery, Program Committee Member; Midwestern Vascular Surgical Society, Co-Director Post Graduate Vascular Surgery Course
	<b>Colleen Moore, MD</b>	Society for Clinical Vascular Surgery, Co-Chair Young Vascular Surgeons Committee, Chair Constitution and By Laws Committee

## NATIONAL EDUCATIONAL RECOGNITION BY PROGRAM

<b>DERMATOLOGY</b>	ACGME Notable Practices Assessment Tool: The program's observation checklist was adopted by the RRC as a tool of best practice.
<b>QUINCY FAMILY MEDICINE</b>	Allscripts Presidents Award: National recognition for achieving superior, measurable outcomes using Allscripts health information technology.
<b>INTERNAL MEDICINE</b>	Continued participation in the ACGME Educational Innovations Project (EIP)
<b>MEDICINE/ PSYCHIATRY</b>	<b>Gaurav Jain, PGY3:</b> 2011 American Psychiatric Association meeting won the "Best Resident Research Award". <b>Melanie Zupancic, PGY4:</b> 2011 Joseph E. Johnson Leadership Award by the American College of Physicians
<b>PLASTIC SURGERY</b>	<b>Kelli Webb, PGY 3:</b> 2011 1st Place Award for International Clinical Research by the International Confederation of Plastic Reconstructive & Aesthetic Surgery
<b>UROLOGY</b>	American Urological Association, national recognition for the program's Operative Performance Rating System for Urology Residents

## **WINNERS OF THE 2011 SIU SCHOOL OF MEDICINE TRAINEE RESEARCH SYMPOSIUM**

- 1st Place:**                    **Christopher Perro, Otolaryngology:** *Preconditioning the Cochlea with Capsaicin Protects Against Cisplatin Ototoxicity*
- 2nd Place (2):**            **Miriam Krause, OB/GYN:** *Expression of Metallothioneins in Human Endometrium*
- Kelli Webb, Plastic Surgery:** *Botulinum Toxin Type A for Chronic Pain*
- 3rd Place (3):**            **Gaurav Jain, Medicine/Psychiatry:** *Reduction of Inappropriate Stress Ulcer Prophylaxis by the General Internal Medicine Residents: An Impact of a Low-Cost Intervention*
- Sini Kalapurakal, Internal Medicine:** *Factors Associated with Fatigue, Sleep Dysfunction and Joint Symptoms in Breast Cancer Survivors*
- Jacob Sams, Orthopaedics:** *Redefining Revision Total Hip Arthroplasty Based on Hospital Admission Status*

## Duty Hours

With the new Common Program Requirements (CPRs), residents will still be permitted to work up to 80 hours per week, but there are increased restrictions on how these hours are distributed. For example, PGY1's will be permitted to work only up to 16 hours at a stretch. PGY2's and above will still be permitted to take overnight in-house call, but the total time on duty will be limited to a maximum of 28 hours with a subsequent minimum of 14 hours off. The new rules also increase the responsibility on the institution to provide education for residents and faculty members regarding how to recognize fatigue, how to manage fatigue and also the professional responsibility of all physicians to manage their time outside of clinical assignments to assure their fitness for duty.

Compliance with ACGME duty hour rules is monitored continually and by a variety of instruments. Springfield residents record their duty hours each month in a web based reporting system. Programs are able to review this data month by month. Aggregate duty hour data is reviewed periodically by the GMEC. The institution takes a number of steps to monitor compliance with duty hours.

1. Information from each program's annual ACGME resident survey is reviewed by GMEC.
2. Duty hour questions on the SIU resident's annual end of year evaluation mirror the questions on the resident survey.
3. Any program with identified non-compliance on these instruments is asked to address it specifically and follow up to GMEC.
4. Aggregate duty hour data from resident reporting is reviewed as part of each internal review. Residents are queried very specifically about their knowledge and compliance with duty hours and the supports provided by their program for this.
5. Resident responses from these two instruments are outlined in tables 5 and 6.
6. Avenues for confidential reporting of duty hour violations are available both through the SIU website and the ACGME.

Data collected during the 2010-2011 academic year regarding duty hour rule compliance is displayed in Table 7 and Table 8 on the following two pages.

# Duty Hours

Table 7:

	SIU End of Year Evaluations																			
	Resident ratings of compliance with the following duty hour rules:																			
	80 Hours				1 day off in 7				Call Frequency (Q3)				10 Hours off				24+6			
	Total number of responses																			
	Rarely or Never	Sometimes	Most of the time	Always	Rarely or Never	Sometimes	Most of the time	Always	Rarely or Never	Sometimes	Most of the time	Always	Rarely or Never	Sometimes	Most of the time	Always	Rarely or Never	Sometimes	Most of the time	Always
Scale:	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
<b>Carbondale Family Medicine</b>	0	0	0	7	0	0	1	6	0	0	0	7	0	0	1	6	0	0	1	6
<b>Decatur Family Medicine</b>	0	0	0	14	0	0	0	14	0	0	0	14	0	0	1	13	0	0	0	14
<b>Dermatology</b>	0	0	0	6	0	0	0	6	0	0	0	2	0	0	0	6	0	0	0	2
<b>Emergency Medicine</b>	0	0	0	6	0	0	0	6	0	0	0	6	0	0	1	5	0	0	0	6
<b>Internal Medicine</b>	0	1	3	23	0	1	2	24	0	2	1	24	0	1	5	21	0	0	5	22
<b>Med/Psych</b>																				
<b>Neurology</b>	0	0	0	5	0	0	0	5	0	0	0	5	0	0	0	5	0	0	0	4
<b>OB/GYN</b>	0	0	1	5	0	0	2	4	1	0	0	5	0	0	2	4	0	0	1	5
<b>Orthopaedics</b>	0	0	0	17	0	0	0	17	0	0	0	17	0	0	2	15	0	0	0	17
<b>Otolaryngology</b>	0	0	1	9	0	0	0	10	0	0	0	6	0	0	7	3	0	0	0	4
<b>Pediatrics</b>	0	0	6	8	0	0	6	8	0	0	4	10	0	2	5	7	0	1	3	10
<b>Plastic Surgery</b>	0	0	2	10	0	0	0	12	0	0	1	9	0	0	4	8	0	0	0	8
<b>Psychiatry</b>	0	0	0	18	0	0	1	17	0	0	0	17	0	0	1	17	0	0	0	16
<b>Quincy Family Medicine</b>	0	0	0	18	0	0	0	18					0	0	0	18				
<b>Radiology</b>	0	0	0	12	0	0	0	12	0	0	0	11	0	0	0	12	0	0	0	12
<b>Springfield Family Medicine</b>	0	1	4	13	0	2	1	15	0	0	3	14	0	0	5	13	0	2	3	12
<b>Surgery</b>	0	1	1	10	0	1	1	10	0	1	0	11	0	1	1	10	1	0	2	9

Table 8:

	ACGME Resident Survey																														
	How often did you break the rule that duty hours must be limited to 80 hours/week, averaged over a 4-week period, inclusive of all in-house call activities?						How often did you break the rule that residents/fellows must be scheduled for a minimum of 1 day in 7 free from all residency related duties, averaged over a 4-week period?						How often did you break the rule that in-house call must occur no more frequently than every 3rd night, averaged over a 4-week period?						How often did you break the rule that there should be a 10-hour time period provided between all daily duty periods and after in-house call?						How often did you break the rule that continuous on-site duty, including in-house call, may be scheduled to a maximum of 24 consecutive hours with up to 6 additional hours on duty to allow for continuity or transition of care, scheduled didactic activities, or outpatient clinics?						
	Responses listed as percentages						Responses listed as percentages						Responses listed as percentages						Responses listed as percentages												
	Not Applicable	Never	Rarely	Sometimes	Very Often	Extremely Often	Not Applicable	Never	Rarely	Sometimes	Very Often	Extremely Often	Not Applicable	Never	Rarely	Sometimes	Very Often	Extremely Often	Not Applicable	Never	Rarely	Sometimes	Very Often	Extremely Often							
Scale:	NA	0	1	2	3	4	NA	0	1	2	3	4	NA	0	1	2	3	4	NA	0	1	2	3	4							
<b>Carbondale Family Medicine</b>	0	61.1	33.3	5.6	0	0	0	94.4	5.6	0	0	0	38.9	61.1	0	0	0	0	0	61.1	27.8	11.1	0	0	0	0	100	0	0	0	0
<b>Decatur Family Medicine</b>	0	93.3	6.7	0	0	0	0	93.3	0	6.7	0	0	20	73.3	6.7	0	0	0	0	73.3	20	6.7	0	0	0	0	86.7	6.7	6.7	0	0
<b>Dermatology</b>	0	100	0	0	0	0	0	83.3	16.7	0	0	0	100	0	0	0	0	0	0	100	0	0	0	0	0	0	100	0	0	0	0
<b>Emergency Medicine</b>	0	100	0	0	0	0	0	100	0	0	0	0	0	100	0	0	0	0	0	66.7	33.3	0	0	0	0	0	83.3	16.7	0	0	0
<b>Medicine</b>	0	51.2	39	9.8	0	0	0	70.7	24.4	2.4	2.4	0	0	85.4	9.8	4.9	0	0	0	73.2	17.1	9.8	0	0	0	0	58.5	34.1	4.9	2.4	0
<b>Med/Psych</b>																															
<b>Neurology</b>	0	100	0	0	0	0	0	100	0	0	0	0	85.7	14.3	0	0	0	0	0	85.7	14.3	0	0	0	0	0	100	0	0	0	0
<b>OB/GYN</b>	0	58.3	41.7	0	0	0	0	66.7	33.3	0	0	0	16.7	83.3	0	0	0	0	0	58.3	33.3	8.3	0	0	0	0	100	0	0	0	0
<b>Orthopaedics</b>	0	94.1	0	5.9	0	0	0	100	0	0	0	0	17.6	82.4	0	0	0	0	0	82.4	17.6	0	0	0	0	0	94.1	0	5.9	0	0
<b>Otolaryngology</b>	0	80	20	0	0	0	0	80	20	0	0	0	80	20	0	0	0	0	0	30	60	10	0	0	0	0	80	20	0	0	0
<b>Pediatrics</b>	0	58.8	23.5	17.6	0	0	0	64.7	29.4	5.9	0	0	5.9	88.2	5.9	0	0	0	0	52.9	35.3	11.8	0	0	0	0	70.6	23.5	5.9	0	0
<b>Plastic Surgery</b>	0	91.7	8.3	0	0	0	0	83.3	8.3	8.3	0	0	66.7	33.3	0	0	0	0	0	75	16.7	8.3	0	0	0	0	75	25	0	0	0
<b>Psychiatry</b>	0	100	0	0	0	0	0	100	0	0	0	0	90	10	0	0	0	0	0	100	0	0	0	0	0	0	100	0	0	0	0
<b>Quincy Family Medicine</b>	0	70.6	17.6	11.8	0	0	0	94.1	5.9	0	0	0	58.8	41.2	0	0	0	0	0	82.4	5.9	11.8	0	0	0	0	88.2	11.8	0	0	0
<b>Radiology</b>	0	100	0	0	0	0	0	100	0	0	0	0	8.3	91.7	0	0	0	0	0	100	0	0	0	0	0	0	100	0	0	0	0
<b>Springfield Family Medicine</b>	0	86.4	9.1	4.5	0	0	0	86.4	9.1	0	4.5	0	22.7	77.3	0	0	0	0	0	86.4	4.5	9.1	0	0	0	0	81.8	13.6	4.5	0	0
<b>Surgery</b>	0	66.7	26.7	6.7	0	0	0	80	13.3	6.7	0	0	6.7	93.3	0	0	0	0	0	73.3	20	6.7	0	0	0	0	53.3	40	6.7	0	0
<b>Urology</b>	0	100	0	0	0	0	0	100	0	0	0	0	100	0	0	0	0	0	0	100	0	0	0	0	0	0	100	0	0	0	0

# Feedback & Evaluations

Evaluation is an ongoing process and is crucial to the educational development of our residents. Residents are evaluated on a regular basis by faculty, staff, patients and sometimes peers. Residents likewise have multiple opportunities to evaluate their teaching faculty, programs, rotations, and affiliated hospitals. All of our training programs are required to perform a self-assessment on at least an annual basis. At the end of each rotation or educational experience it is vital to let the trainee and program director know that the trainee is meeting the objectives of his/her clinical rotations and is gaining the skills necessary to accept increasing levels of responsibility for patients and for the supervision of more junior residents. This is known as *summative evaluation*. Feedback, sometimes known as *formative evaluation*, which is the ongoing verbal communication to trainees at the time of a clinical encounter to let them know what they are doing well and what they need to improve, is a critical part of the learning process.

**Table 9:**

	SIU End of Year Evaluations								ACGME Resident Survey						
	Ability to confidentially evaluate full-time faculty		Provision of feedback by full-time faculty		Ability to confidentially evaluate community faculty		Provision of feedback by community faculty		Overall, how satisfied are you with the written or electronic feedback you receive after you complete a rotation or major assignment?						
	Responses listed as total number of responses										Responses listed as percentages				
	Poor/Fair	Good/Excellent	Poor/Fair	Good/Excellent	Poor/Fair	Good/Excellent	Poor/Fair	Good/Excellent	Extremely	Very	Somewhat	Slightly	Not at all		
Scale:	1-2	3-4	1-2	3-4	1-2	3-4	1-2	3-4							
<b>Carbondale Family Medicine</b>	1	5	1	6	1	6	1	6	11.1	16.7	66.7	5.6	0		
<b>Decatur Family Medicine</b>	2	12	1	14	0	14	0	15	20	60	20	0	0		
<b>Dermatology</b>	0	6	0	6	0	3	0	3	50	16.7	33.3	0	0		
<b>Emergency Medicine</b>	0	6	0	6	0	6	2	4	50	33.3	16.7	0	0		
<b>Internal Medicine</b>	1	26	1	27	2	14	2	14	19.5	46.3	29.3	4.9	0		
<b>Med/Psych</b>	0	7	0	7	0	0	0	0							
<b>Neurology</b>	0	5	0	5	0	5	0	5	57.1	42.9	0	0	0		
<b>OB/GYN</b>	0	6	0	5	0	6	1	5	25	41.7	33.3	0	0		
<b>Orthopaedics</b>	3	14	5	12	0	16	3	13	17.6	47.1	29.4	5.9	0		
<b>Otolaryngology</b>	0	10	1	7	0	9	0	10	40	40	10	10	0		
<b>Pediatrics</b>	3	11	0	14	3	8	4	6	23.5	47.1	23.5	5.9	0		
<b>Plastic Surgery</b>	0	12	0	12	0	11	0	11	25	58.3	8.3	8.3	0		
<b>Psychiatry</b>	0	19	0	19	0	15	0	15	50	40	10	0	0		
<b>Quincy Family Medicine</b>							2	16	17.6	35.3	41.2	5.9	0		
<b>Radiology</b>	1	11	1	11	0	5	0	5	41.7	33.3	16.7	8.3	0		
<b>Springfield Family Medicine</b>	1	19	0	20	0	17	0	17	40.9	40.9	18.2	0	0		
<b>Surgery</b>	1	11	1	11	1	11	3	9	40	33.3	13.3	13.3	0		
<b>Urology</b>	0	10	0	10	0	8	0	8	100	0	0	0	0		

**Table 10:**

	SIU End of Year Evaluations								ACGME Resident Survey																	
	Your program's commitment to good patient hand off practices		Patient care responsibilities are commensurate with resident's level of advancement		Emphasis on practices that ensure patient safety		The balance between time for patient care and time for educational activities		In your opinion, how often do your rotations and other major assignments provide an appropriate balance between your residency education and other clinical demands?					How often has your clinical education been compromised by excessive service obligations?												
	Responses listed as total number of responses								Responses listed as percentages																	
	Poor/Fair		Good/Excellent		Poor/Fair		Good/Excellent		Poor/Fair		Good/Excellent		Poor/Fair		Good/Excellent		Extremely Often	Very Often	Sometimes	Rarely	Never	Extremely Often	Very Often	Sometimes	Rarely	Never
Scale:	1-2	3-4	1-2	3-4	1-2	3-4	1-2	3-4	1-2	3-4	1-2	3-4	1-2	3-4	1-2	3-4	Extremely Often	Very Often	Sometimes	Rarely	Never	Extremely Often	Very Often	Sometimes	Rarely	Never
<b>Carbondale Family Medicine</b>	0	7	0	7	0	7	0	7	0	7	16.7	55.6	27.8	0	0	0	5.6	27.8	33.3	33.3	33.3	0	0	0	0	100
<b>Decatur Family Medicine</b>	0	15	0	15	0	15	0	15	2	13	13.3	53.3	33.3	0	0	0	0	20	46.7	33.3	33.3	0	0	0	0	100
<b>Dermatology</b>	0	5	0	6	0	6	0	6	0	6	83.3	16.7	0	0	0	0	0	0	0	0	100	0	0	0	0	100
<b>Emergency Medicine</b>	1	5	0	6	0	6	0	6	0	6	33.3	66.7	0	0	0	0	0	0	0	16.7	83.3	0	0	0	0	100
<b>Internal Medicine</b>	1	25	1	25	1	25	2	24	17.1	58.5	17.1	4.9	2.4	0	0	0	14.6	39	34.1	12.2	0	0	0	0	100	
<b>Med/Psych</b>	0	7	0	7	0	7	0	7	0	7	0	7	0	7	0	7	0	7	0	7	0	7	0	7	0	7
<b>Neurology</b>	0	5	0	5	0	5	0	5	0	5	42.9	57.1	0	0	0	0	0	0	0	42.9	57.1	0	0	0	0	100
<b>OB/GYN</b>	0	6	0	6	0	6	0	6	41.7	58.3	0	0	0	0	0	0	0	16.7	58.3	25	0	0	0	0	100	
<b>Orthopaedics</b>	0	17	0	17	0	17	0	17	52.9	35.3	5.9	5.9	0	0	0	0	5.9	0	58.8	35.3	0	0	0	0	100	
<b>Otolaryngology</b>	0	10	0	10	0	10	4	6	40	60	0	0	0	0	0	0	0	20	40	40	0	0	0	0	100	
<b>Pediatrics</b>	1	13	1	13	0	14	5	9	5.9	58.8	29.4	5.9	0	0	0	0	5.9	17.6	35.3	35.3	5.9	0	0	0	100	
<b>Plastic Surgery</b>	2	10	0	12	0	12	0	12	50	50	0	0	0	0	0	0	0	0	41.7	58.3	0	0	0	0	100	
<b>Psychiatry</b>	1	17	1	17	1	17	1	17	60	30	0	10	0	0	0	0	0	10	30	60	0	0	0	0	100	
<b>Quincy Family Medicine</b>			1	17	0	18			11.8	52.9	29.4	5.9	0	0	0	0	11.8	47.1	29.4	11.8	0	0	0	0	100	
<b>Radiology</b>	0	5	0	9	0	10	3	9	41.7	41.7	16.7	0	0	0	0	0	0	16.7	25	58.3	0	0	0	0	100	
<b>Springfield Family Medicine</b>	0	20	0	20	0	20	1	19	40.9	45.5	9.1	4.5	0	0	0	0	9.1	9.1	31.8	50	0	0	0	0	100	
<b>Surgery</b>	1	11	1	11	0	12	2	10	46.7	33.3	20	0	0	0	0	0	6.7	20	60	13.3	0	0	0	0	100	
<b>Urology</b>	0	9	0	9	0	9	0	9	100	0	0	0	0	0	0	0	0	0	0	100	0	0	0	0	100	

The importance of consistent and well done patient handoffs is universally recognized and assumes greater emphasis in the 2011 CPRs. This corresponds with an expected increase in the number of handoffs to accommodate changes in the number of hours residents can work. Traditionally, the organization and oversight of handoff protocols has occurred at the program level. With the new standards, the responsibility is placed on the sponsoring institution to ensure and monitor that all programs have structured and effective handoff processes. In recognition of the increasing complexity of resident schedules, there are also new requirements for the sponsoring institution to ensure that all nurses, physicians and other caregivers can identify the appropriate resident and attending caregivers for a patient at any point in time.

The new quality standards require that residents be integrated and actively participate in interdisciplinary clinical quality improvement and patient safety programs. There is an increasing national focus on the alignment and integration of patient safety/QI activities, and the goals and culture between and within teaching hospitals and GME programs. We will be expected to demonstrate that the alignment of medical education and clinical quality measures actually improves patient care. On an individual program level, we have innumerable quality projects taking place that more than meet this standard. Our challenge over the upcoming year or so will be to coordinate and fully integrate activities at the program level with our affiliate hospitals. To aid in this process, throughout the spring of 2011, GMEC meetings included presentations and discussions of opportunities for GME integration and quality at our Springfield affiliate hospitals. In addition, the two GMEC subcommittees were chartered (Transitions of Care and GME and Quality) to provide leadership and coordination in these important areas.

# Teaching, Supervision, & Resident Responsibilities

The 2011 CPRs bring a number of new expectations regarding clinical supervision of residents. For example, PGY1 residents will be expected to have a supervisor (either attending or more senior resident) physically within the hospital.

Instead of organizing resident responsibilities by rotation and year of training, they must be based on individual resident capabilities, the individual patient needs, the resident's educational needs and the severity and the complexity of the patient's illness. Programs will be expected to set specific guidelines for circumstances and events in which residents must communicate with their supervisor and ensure that each resident knows the circumstances under which he/she is permitted to act with conditional independence. In addition, programs are asked to develop and assess specific criteria and skills to determine when a resident is ready and capable of practicing with conditional independence. This will be an area of much focus and exploration over the next year or so. There is a wide degree of variability among the individual specialty review committees regarding what this means and a paucity of specific validated national educational standards to guide us. A number of our faculty are enthusiastically embracing this educational challenge. I suspect there will be much to report in this regard in next year's annual report.

The SIU/GMEC Supervision policy has been reviewed and adopted by the Medical Executive Committees of all our affiliate hospitals. The GMEC reviewed this policy and determined that it was in compliance with the new supervision requirements as written.

**Table 11:**

	SIU End of Year Evaluations								ACGME Resident Survey						
	Adequate and prompt supervision by full-time faculty		Adequate and prompt supervision by community faculty		Full-time faculty teaching skills		Community faculty teaching skills		How often do your faculty and staff provide an appropriate level of supervision for residents when the residents care for patients?						
	Responses listed as total number of responses										Responses listed as percentages				
	Poor/Fair	Good/Excellent	Poor/Fair	Good/Excellent	Poor/Fair	Good/Excellent	Poor/Fair	Good/Excellent	Extremely Often	Very Often	Sometimes	Rarely	Never		
Scale:	1-2	3-4	1-2	3-4	1-2	3-4	1-2	3-4							
Carbondale Family Medicine	0	7	0	7	0	7	0	7	55.6	38.9	5.6	0	0		
Decatur Family Medicine	0	15	0	15	2	13	0	15	33.3	66.7	0	0	0		
Dermatology	0	6	0	3	0	6	0	3	83.3	16.7	0	0	0		
Emergency Medicine	0	6	1	5	0	6	0	6	100	0	0	0	0		
Internal Medicine	1	27	3	13	2	26	2	14	43.9	48.8	7.3	0	0		
Med/Psych	0	7	0	0	0	8	0	0							
Neurology	0	5	0	5	1	4	1	4	57.1	42.9	0	0	0		
OB/GYN	0	6	0	6	0	6	0	6	83.3	16.7	0	0	0		
Orthopaedics	1	16	0	16	3	14	1	15	64.7	35.3	0	0	0		
Otolaryngology	0	10	0	10	0	8	0	10	80	20	0	0	0		
Pediatrics	0	14	5	6	0	14	2	7	47.1	52.9	0	0	0		
Plastic Surgery	0	12	0	11	0	12	0	11	50	33.3	8.3	8.3	0		
Psychiatry	0	19	0	15	2	17	0	14	80	20	0	0	0		
Quincy Family Medicine			0	18			0	18	47.1	52.9	0	0	0		
Radiology	1	11	0	5	0	12	0	5	50	50	0	0	0		
Springfield Family Medicine	0	20	0	17	1	19	0	17	68.2	31.8	0	0	0		
Surgery	0	12	2	10	1	11	1	11	60	33.3	6.7	0	0		
Urology	0	10	0	8	0	10	0	8	100	0	0	0	0		

## PUBLICATIONS

### Child Psychiatry (also see Medicine/Psychiatry)

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### Colon & Rectal Surgery

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**Rylander LS,** JC Milbrandt, A Wallace, DG Allan. Clinical and Radiographic Evaluation of Midterm Failure Rates Following Metal-On-Metal Hip Resurfacing. J Arthroplasty 2010 Dec 3 (E-pub ahead of print)

### Otolaryngology

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**Vega Cordova X,** Cosenza NM, Helfert RH, Woodson, GE. Neurotrophin expression of laryngeal muscles in response to recurrent laryngeal nerve transection." Laryngoscope. Aug 2010. 120(8):1591-6.

### Plastic Surgery

**Berry, Nada;** Neumeister MW; Russell, Robert; Dellon, A Lee. Epicondylectomy versus denervation for lateral humeral epicondylitis. HAND(2011) 6:174-178.

**Henkelman, E,** Neumeister MW. Bone and Joint Pain Decision Making in Plastic Surgery Marsh & Perlyn Chapter 92: 214 – 215 Quality Medical Publishing, Inc. 2010

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**Webb, KN,** Cooney, DS, Cooney, CM, Bueno, RA, Neumeister, MW. A Validated Tool for Assessment of Microsurgical Skills. Pla Reconstr Surg May 2011 Supplement; 127(55)88. (Abstract)

### Psychiatry (also see Medicine/Psychiatry)

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### Quincy Sports Medicine

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## **Radiology**

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## **Surgery**

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## **Urology**

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**Benson AD, Kramer BA**, Boehler M, Schwind CJ, Schwartz BF. Robotic-Assisted Laparoscopic Skills Development: Formal vs Informal Training. J Endourol. 24(8): 1351-55. Aug 2010.

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**Benson AD, Taylor ER**, Schwartz BF. "Metal Ureteral Stent for Benign and Malignant Ureteral Obstruction." J Urol. 185(6): 2217-2222. Jun 2011.

Frederick LR, **Ballek NK**, Esplin JA, Köhler TS. "Primary Carcinoid Tumor Presenting as a Nonpalpable Testicular Mass." J Clin Oncol. 28(31): e637-9. 2010 Nov 1. Epub 2010 Sep 20.

Frederick L, **Benson AD**. "A Case of Coronal Urethral Duplication With No Other Abnormalities." Can J Urol. 18(1): 5557-9. 2011 Feb.

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**Koenig JK**, McKenna PH. "Biofeedback Therapy for Dysfunctional Voiding in Children." Curr Urol Rep. 12(2): 144-52. Apr 2011.

**Wiser J**, Köhler TS. "Sexual Impact of Benign Prostatic Hyperplasia/ Lower Urinary Tract Symptoms Treatment." Curr Urol Rep. 11(4): 228-35. Jul 2010.

**Wiser J** & Köhler TS, Self-injection, Transurethral and Topical Therapy in Erectile Dysfunction. Contemporary Treatment of Erectile Dysfunction, Editor K McVary, New York, Humana Press, 12/10.

## **PRESENTATIONS**

### **Child Psychiatry**

**American Psychiatric Association Annual Meeting in Honolulu: May 17, 2011**

Adolescents With Substance Abuse Are Often Misdiagnosed As Bipolar Disorder. Poster Presentation Presented by: **Salman, A**.

## **Colon & Rectal Surgery**

**American Society of Colon and Rectal Surgeons Annual Meeting, Vancouver, CA: May 2011**

Does percutaneous drainage of diverticular abscess allow for one-stage surgery? Poster presentation Presented by: **Tsoraides S**, Hassan I, Rakinic J, Firilas A.

## **Dermatology**

**American Academy of Dermatology Annual Meeting, Gross & Microscopic Symposium, New Orleans, LA: February 2011**

A Case of Cutaneous Angioimmunoblastic T-Cell Lymphoma with a Vitiligo-like Presentation. Presented by: **Larson R, Reid E**, Goldfarb J.

Intravascular B Cell Lymphoma Presenting as Chronic Ulcers of the Lower Extremities. Presented by: **Ufkes L**, Buescher L, Nietert E.

Psoriasis Herpeticum. Presented by: **Reid E**, Stone S.

Type 1 Segmental Darier Disease. Presented by: **Mehta A**, Stone SP, Buescher LS, Nietert E, Wilson ML.

## **Endocrinology**

**Endocrine Society, San Diego, CA: June 2010**

Hyperthyroidism in a Patient Therapeutically Immunosuppressed after Successful Cadaveric Renal Transplantation. Presented by: **P Jayaramaiah, N Speil**, S Gupta, R Khardori, C Fratianni

Osteogenesis Imperfecta and Nephrolithiasis in a Young Adult. Poster Presented by: **N Speil, P Jayaramaiah**, S Gupta, CM Fratianni, R Khardori

Unusually high levothyroxine replacement dose leads to recognition of subclinical celiac disease in 2 patients. Presented by: **N Speil, C Fratianni**, S Gupta, R Khardori

**Endocrine Society, Boston, MA: June 2011**

Benign Transient Hyperthyroxinemia Following Neck Exploration – A Report on Three Cases. Presented by: **E Rico, N Speil, C Mamillapalli**, S Gupta, R Khardori

Cabergoline resistant prolactinoma: Failure to achieve euprolactinemia and normal ovulatory function despite high dose cabergoline therapy. Presented by: **C Mamillapalli, E Rico, N Speil**, C Fratianni, R Khardori, S Gupta

Coronary vasospasm mimicking diffuse coronary artery disease in thyroid storm. Presented by: C Fratianni, **N Speil, C Mamillapalli, E Rico**, R Khardori

Factitious Hyperglycemia and Subsequent Iatrogenic Hypoglycemia in a Hospitalized Peritoneal Dialysis Patient Managed with Icodextrin Dialysate. Presented by: **E Rico**, M Jakoby

## **Infectious Diseases**

**XVIII International AIDS Conference, Vienna, Austria: July 18-23 2010**

HIV education program for high school students. Presented by: J. Koirala, A. Adamski, M. Jenot, T.H. Htwe, C. Speil, V. Sundereshan, J. Andoh, M. Ahmed, **I. Tyagi**, S. Basnet

**ECCMID, Milan, Italy: May 2011**

Activity of polymyxin B and rifampin against Acinetobacter baumannii in suspension and biofilm. Presented by: C Speil, **RW Rzepka** and N Khardori

## **Internal Medicine**

### **AHNS 2010 Research Workshop**

Preliminary Results of a Phase II Study of RADPLAT and Tarceva in Locally Advanced Head and Neck Squamous Cell Carcinoma. Presented by: **Kalapurakal, S.**

### **American College of Gastroenterology Annual Scientific Meeting, 2010**

Fatal Chronic Ischemic Colitis Involving the Cecum Mimicking a Neoplasm - 2nd place winner. Presented by: **Cheema, UY**

### **Chest 2010, Canada**

Outcome After Coronary Artery Bypass Grafting in Patients with Restrictive Spirometry Pattern. Presented by: **Aslam, J.**

### **American Federation of Clinical Research, Chicago, IL: April 2011**

Prevalence of Infections caused by Streptococcus anginosus group at a tertiary care setting hospital. Poster Presentation. Presented by: **O. Mansuri, V. Sundareshan, N. Khardori**

### **AACR Meeting; 2011**

Factors Associated with Fatigue, Sleep Dysfunction, and Joint Symptoms in Breast Cancer Survivors. Presented by: **Kalapurakal, S.**

### **National ACP Meeting, 2011**

Abducens Nerve Palsy as a Complication of Cold Sores. Presented by: **Cheema, UY**

Deep Vein Thrombosis in Young Adult with Congenital Inferior Vena Cava Atresia. Presented by: **Thiruvashar, T.**

### **Society of General Internal Medicine, 34th Annual Meeting: 2011**

Rare Etiology of Small Bowel Obstruction. Presented by: **Moonat A.**

### **Medicine/Psychiatry (also see Psychiatry)**

### **Association of Medicine & Psychiatry Annual Meeting, Chicago, IL: September 2010**

Porphyria in a 34-year old Female. Clinical vignette presented and received 3rd place. Presented by: **Jain G.**

### **30th Annual Conference of the National Academy of Neuropsychology, Vancouver BC, Canada: October 2010**

Altering Factor Structures of the RBANS Based on Cortical or Subcortical Dementing Etiologies. Poster presented by: **Jain G, Noggle C, Sohi J, Jeetwani A, et al.**

Correlations between Outcomes on the Word Memory Test and RBANS Subtest Performance. Poster presented by: **Shahani L, Noggle C, Jain G, Sohi J, et al.**

Predictability of Outcomes on the Independent Living Scale Based on RBANS Subtest Performance in a Sample of Patients with Cortical-Based Dementing Disorders. Poster presented by: **Sohi J, Noggle C, Jeetwani A, Jain S, Thompson JC, and Barisa M.**

### **48th Annual Meeting of IDSA, Vancouver, Canada: October 2010**

Changing Microbiology of Central Venous Catheter Related Infections. Presented by: **Shahani L, Khardori N.**

Reduced Mortality Associated with Prior Statin Therapy in Patients Admitted to the Intensive Care Unit with Sepsis. Presented by: **Shahani L.**

### **American Association of Directors of Psychiatric Residency Training, March 2-5, 2011**

Psychological Mindedness in Psychiatry Residency Candidates A necessity or a commodity. Presented by: **Punwani M, Zupancic M, Noggle C.**

### **22nd Annual Meeting of the American Neuropsychiatric Association, Denver, CO: March 2011**

Memory functioning in a sample of referred patients with Fibromyalgia: An exploratory approach. Poster presented by: **Shahani L, Noggle CA, Basnet P, Mahajan A, Yost J, Uga A, Thompson JC.**

Methotrexate-Induced toxicity plus or minus cerebral radiation: A qualitative comparison of two pediatric ALL cases. Poster presented by: **Noggle CA, Jain G, Jain S, Shahani L, Basnet P, Mahajan A.**

Relative impact of comorbid depression and/or anxiety following closed head injury. Poster presented by: **Uga A, Noggle CA, Pilla T, Jain G, Jain S, Shahani L, and Dean RS.**

### **American College of Physicians Annual Meeting, San Diego, CA: April 2011**

Causes of Hospitalization and Access to Care Among Newly Diagnosed HIV Patients. Presented by: **Shahani L.**

The Impact of Educational Intervention on the Abdominal Aortic Aneurysm (AAA) Screening: Analysis of Achievement and Sustainment. Poster presented by: **Jain G, Thomas J, Cheema U, Compa E, and Varney A.**

### **American Psychiatric Association Annual Meeting, Honolulu, HI: May 2011**

Disabling Tardive Dyskinesia with rapid response to Amantadine. Poster presented by: **Jain G.**

Psychiatry Residency Training in the United States, Canada, United Kingdom, India, and Nigeria: A Transcontinental Comparison. Poster presented by: **Jain G, Mazhar M, Uga A, Punwani M.**

Synchronicity – Coincidence Detection and Meaningful Life Events Among Individuals Affiliated with a Medical School. Poster presented by: **Costin G, Dzara K, and Resch D.**

### **Digestive Disease Week, 2011**

Knowledge and Attitude of Residents Towards Stress Ulcer Prophylaxis. Presented by: **Jain, G.**

### **Neurology**

### **135th Annual Meeting, American Neurological Association, San Francisco, CA: Sept 12-15, 2010**

A Unique Case of Esthesioneuroblastoma with Leptomeningeal Spread. Presented by: **Siddiqui FM, Agrawal BK, Patel V, Bekker S, Moore BE, Rao K, Robbins KT, Elble RJ.**

### **Neurology Resident Scholar Program Annual Meeting, Scottsdale, AZ: Sept 25, 2010**

Epilepsia partialis continua: pitfalls in diagnosis. Presented by: **Singh A.**

### **63rd Annual Meeting, American Academy of Neurology, Honolulu, Hawaii: April 9-16, 2011**

Autosomal dominant core-rod myopathy with a unique phenotypic presentation and a potentially novel genotype. Presented by: **Siddiqui FM, Moore BE, Von der Hagen M, Winder T, AbdelSalam H, Huebner A, Moore SA.**

Effect of Pre-morbid Use of Antiplatelet therapy on Hematoma Expansion, and Death among 5426 Patients with Spontaneous Intracerebral Hemorrhage. Presented by: **Siddiqui FM, Qureshi AI.**

Impaired pentagon drawing is a predictor of impending dementia in Parkinson's Disease patients. Presented by: **Kaul S**, Verhulst S, Elble R.

## **OB/GYN**

### **Central Association of Obstetricians and Gynecologists Annual Meeting, Las Vegas, NV: October 27-30, 2010**

Expression of metallothioneins in human endometrium. Abstract accepted for oral presentation. Presented by: **Krause MS**, McAsey M, Li M, Loret de Mola R.

## **Orthopaedics (also see Spine Surgery)**

### **12th Annual Meeting of the Combined Orthopaedic Associations, Glasgow, Scotland: September 2010**

Symposium: Incorporating a Culture for Improving Quality and Patient Safety Through Education and a Paradigm Shift. Presented by: Novicoff WM, Swiontkowski M, Wright J, Bozic K, **Froelich JM**, Graham D, Shah S, Saleh KJ.

### **Society for Minimally Invasive Spine Surgery Annual Meeting, Miami, FL: November 2010**

Radiological Changes of Decompression in Axial Lumbar Interbody Fusion. Poster presentation by: **Kukkar N**, Beck RT, **Mai MC**, **Sullivan DN**, Freitag P.

Sagittal Alignment Following Single and Multi-Level Axial Lumbar Interbody Fusion. E-Poster presentation by: **Mai MC**, **Kukkar N**, **Froelich JM**, Beck RT, Milbrandt JC, Freitag P.

### **Society of Military Orthopaedic Surgeons Annual Meeting, Vail, CO: December 2010**

Chronic Axial Skeletal Pain: Evaluation of a Single Institution's Referral Patterns. Podium presentation by: **Mai MC**, Bulkley A, Milbrandt JC, Freitag P.

Radiological Changes of Decompression in Axial Lumbar Interbody Fusion. Podium presentation by: **Mai MC**, Beck RT, **Kukkar N**, **Sullivan DN**, Freitag P.

### **OREF/ORS, St. Louis, MO: March 18, 2011**

Conscious Sedation for Total Hip Arthroplasty Dislocation. Presented by: **Sullivan DN**, Varboncouer E, Milbrandt JC, Burdette S., O'Keefe D, DeLaCruz J, Duong M, Saleh KJ.

Does Insurance Equal Access to Care? Presented by: **Froelich JM**, Beck RT, Michelson A, Novicoff WM, Saleh KJ.

Pain Management after Total Joint Arthroplasty: A Multi-Modal Approach. Presented by: **Sharif KR**, Robinson BS, Novicoff WM, Kuegler N., Perkins J, Allan DG, Saleh KJ.

Percutaneous Acetabuloplasty: A Cadaveric Study. Presented by: **Eilers M**, Banerjee D, Beck RT, Freitag P, Saleh KJ.

Redefining Revision Total Hip Arthroplasty Based on Hospital Admission Status. Presented by: **Sams J**, Francis ML, Scaife SL, Robinson BS, Novicoff WM, Saleh KJ.

The Relationship of the Coracoid to the Glenoid and Humerus: An MRI Study. Presented by: **Mai MC**, **Blankenship JS**, Beck RT, El-Amin SF.

### **Mid-America Orthopaedic Association Annual Meeting, Tucson, AZ: April 2011**

Chronic Axial Skeletal Pain: Evaluation of a Single Institution's Referral Patterns. Poster presentation by: **Mai MC**, Bulkley A, Milbrandt JC, Freitag P.

Disc Height Following Single Level Axial Lumbar Interbody Fusion. Podium presentation by: **Mai MC**, Beck RT, **Kukkar N**, Freitag P.

Does Placing Pedicle Screws Prior to Axial Lumbar Interbody Fusion Alter the Sagittal Alignment? Podium presentation by: **Mai MC**, Beck RT, Freitag P.

Indirect Decompression of Lumbar Nerve Roots with Percutaneous Pedicle Screws. Podium presentation by: **Mai MC**, Beck RT, **Kukkar N**, **Sullivan DN**, Freitag P.

### **SAS Annual Meeting, Las Vegas, NV: April 2011**

Alterations in Disc Height, Foraminal Height and Foraminal Width Following One and Two Level Axial LIF: A Radiological Analysis. Poster presentation by: **Kukkar N**, Beck RT, **Mai MC**, **Sullivan DN**, Milbrandt JC, Freitag P.

### **AOA Annual Meeting, Boston, MA: June 2011**

Chronic Axial Skeletal Pain: Evaluation of a Single Institution's Referral Patterns. Special Merit poster presentation. Presented by: **Mai MC**, Bulkley A, Milbrandt JC, Freitag P.

Finding the Tipping Point: When Should Surgery be Performed in Children with Early Onset Idiopathic Scoliosis? Poster presentation by: **Corona J**.

Influence of Patient Clinic Experiences on Recommending Their Provider to Family or Friends. Poster presentation by: **Froelich JM**, Milbrandt JC, Novicoff WM, McLafferty RB, Williams RG, Saleh KJ.

Occupational Hazards to the Pregnant Orthopaedic Surgeon. Poster presentation by: **Keene RR**, Hillard-Sembell DC, Robinson BS, Beck RT, Novicoff WM, Saleh KJ.

Predictive Measures of a Resident's Performance on Written Orthopaedic Board Scores. Poster presentation by: **Dyrstad BW**, Pope DJ, Milbrandt JC, Beck RT, Weinhoef AL, Idusuyi OB.

## **Otolaryngology**

### **The Triological Society's Combined Sections Meeting, Scottsdale, AZ: January 2011**

Mediastinal Goiter Presenting with Ventricular Tachycardia. Presented by: **Gilbert, K**

## **Pediatrics**

### **Grand Rounds, Patan Hospital, Kathmandu, Nepal: November 2, 2010**

Lead Prevalence. Presented by: **Venepalli, P**.

### **Society Critical Care Medicine Congress, San Diego, CA: January 18, 2011**

Normal Saline vs. Half Normal Saline in the Management of Diabetic Ketoacidosis. Presented by: **Venepalli, P**, Basnet, S.

### **Striving for Excellence in Research and Clinical Thinking: A Symposium for Pediatric Residents, Jacksonville, FL: April 5, 2011**

Normal Saline vs. Half Normal Saline in the Management of Diabetic Ketoacidosis. Presented by: **Venepalli, P**, Basnet, S.

## **Plastic Surgery**

### **ASPS, Toronto, Canada: October 2010**

Integra Application on Denuded Tendon in an Animal Model. Presented by: **Diederich, R**.

### **Senior Resident Conference, Nashville, TN: January 2011**

Integra Application on Denuded Tendon in an Animal Model. Presented by: **Diederich, R**.

Validated Tool for Microsurgical Skills. Presented by: **Herron, M**.

**AAHS/ASP/ASRM, Cancun, Mexico: January 2011**

AAHS, Early Growth Response Factor – 1(EGR-1): Expression in a Rabbit Flexor Tendon Scar Model. Presented by: **Derby, B.**

AAHS, Botulinum Toxin Type A for Raynaud's Phenomenon. Presented by: **Webb, K**

ASP, Target Muscle Reinnervation of a Free Flap. Presented by: **Herron, M**

ASP, Botulinum Toxin Type A for Chronic Pain. Presented by: **Webb, K.**

**PSRC, Louisville, KY : April 2011**

A Validated Tool for Assessment of Microsurgical Skills. Presented by: **Webb, K.**

**IPRAS, Vancouver, British Columbia, Canada: May 2011**

Botulinum Toxin Type A: A Treatment for Raynaud's Phenomenon. AWARD: 1st Place International Clinical Research, Presented by: **Webb, K.**

**Psychiatry (Also see Med/Psych)**

**22nd Annual Meeting of the American Neuropsychiatric Association, Denver, CO: March 2011**

Covariance of Sensory-motor and cognitive profiles in a sample of pervasive developmental disorders. Poster presented by: **Yost J, Noggle CA, Uga A, Pilla T, Jain G, Jain S, Dean RS.**

Does the F-scale of the MMPI-2 predict outcomes on validity measures in neuropsychological assessment? Links between cognitive and psychiatric malingering. Poster presented by: **Mahajan A, Noggle CA, Yost J, Uga A, Pilla T, Jain G, Thompson JC.**

Is there such a thing as pseudo-Mild Cognitive Impairment? Exploring cognition in middle-aged depression." Poster presented by: **Jain S, Noggle CA, Shahani L, Basnet P, Mahajan A, Yost J, Dean RS.**

Neurocognitive discrepancies between Autism and Asperger's beyond language. Poster presented by: Basnet P, Noggle CA, **Mahajan A, Yost J, Uga A, Pilla T,** and Dean RS.

**Quincy Sports Medicine**

**AMSSM 20th Annual Conference, Salt Lake City, UT: May 3, 2011**

The Volleyball Player Who Couldn't High Five! Poster presentation by: **Pontius GM.**

**Spine Surgery (also see Orthopaedics)**

**Society for Minimally Invasive Spine Surgery, Miami, FL: November 5-7, 2010**

Alterations in Disc Height, Foraminal Height and Foraminal Width Following One- and Two-Level Axial LIF: A Radiological Analysis. E-poster presentation by: **Kukkar N, Beck RT, Mai MC, Sullivan DN, Milbrandt JC, Freitag P.**

**Canadian Orthopaedic Association Annual Meeting, St. John's Newfoundland, Canada: July 7-9, 2011**

Alterations in Disc Height, Foraminal Height and Foraminal Width Following One- and Two-Level Axial LIF: A Radiological Analysis. Podium presentation: **Kukkar N, Beck RT, Mai MC, Sullivan DN, Milbrandt JC, Freitag P.**

Chronic axial skeletal pain: evaluation of a single institution's referral pattern. Podium presentation by: **Kukkar N, Mai MC, Milbrandt JC, Freitag P.**

Clivus Hyperplasia and Cleft and Degenerative Atlantooccipital/Atlantoaxial Joints: A Rare Case of Cervicomedullary Compression. Presented by: **Kukkar N, Amin DV, Beck TR, Bedi N, Freitag P.**

Predictive Measures of a Residents performance on Written Orthopaedic Board Scores. Podium presentation by **Kukkar N.**

Influence of Patient Clinic Experience on Recommending their Provider to Family and Friends. Presented by **Kukkar N.**

**Springfield Family Medicine**

**Behavioral Science Forum, Chicago, IL: 2010**

How Patient Centered Am I? Presented by: **Wells, T, Snyder, L, RN, LCSW**

**Surgery**

**Breast Cancer Symposium, Washington D.C.: October 2010**

Biology of the Estrogen Receptor GPR30 in Triple Negative Breast Cancer. Poster presentation by: **J. Steiman**

**ASCRS, Vancouver, Canada: May 14-18, 2011**

Does Residents Involvement During Laparoscopic Colorectal Surgery Impact patient Outcomes? Results from the ACS-NSQIP. Presented by: **V. Advani, S. Markwell, J. Rakinic, I. Hassan**

**ASC meeting, Huntington Beach, CA: February 1-3, 2011**

The Impact of Diagnosis and Symptoms on Quality of Life of Patients with Colorectal Disease. What Matters Most? Presented by: **V. Advani, M. Thomas, J. Patton, M. L. Boehler, C. J. Schwind, J. Rakinic, I. Hassan**

**Urology**

**28th World Congress of Endourology, Chicago, IL: September 1-4, 2010**

An Experimental Model of Cox-2 Expression in Renal Cell Carcinoma. Presented by: **Frye T, Miller J, Reed D, Wilber A, Tarter T.**

An Operative Performance Rating System for Urology Residents. Presented by: **Benson A.**

Cost Analysis of and Experience with Metallic Ureteral Stents. Presented by: **Taylor E.**

Metal Ureteral Stents: A Single Institution Experience. Presented by: **Benson A.**

Renal Mass in the Octogenarian: Observation, Ablation and Extirpation. Presented by: **Miller J.**

**North Central Section of the American Urological Society Annual Meeting, Chicago, IL: September 29-October 2, 2010**

An Experimental Model of Cox-2 Expression in Renal Cell Carcinoma. Presented by: **Frye T, Miller J, Reed D, Wilber A, Tarter T.**

An Operative Performance Rating System for Urology Residents. Presented by: **Benson A, Tarter T.**

Intentionally Retained Reservoir in Artificial Urinary Sphincter Revision. Presented by: **Benson A, Ost L, Kohler T, Wilson S.**

Primary Testicular Carcinoid: A Rare Cause of Testicular Tumor. Presented by: **Ballek N, Kohler T, Esplin J.**

Spermatogenesis in Orchiectomy Specimens. Presented by: **Wiser H, Miller J, Bell S, Hutto J, Brannigan R, Kohler T.**

# Resident/Fellow Publications, Presentations & Research

Renal Mass in the Octogenarian: Ablation, Extirpation and Observation. Presented by: **Miller J**, Schwartz B.

## **American Urological Association Annual Meeting, Washington, DC: May 14-19, 2011**

An Operative Performance Rating System for Urology Residents. Presented by: **Benson A**.

Ocular Radiation Exposure in Urologic Practice. Presented by: **Taylor E**.

## **Engineering & Urology Society Annual Meeting, Washington DC: May 14, 2011**

Cost Analysis of and Experience with Metallic Ureteral Stents. Presented by: **Taylor E**.

## **Society of Government Service Urologists Annual Meeting (Kimbrough), Seattle, WA: January 16-21, 2011**

Cost Analysis of and Experience with Metallic Ureteral Stents. Presented by: **Miller J**.

Metal Ureteral Stents: A Single Institution Experience. Presented by: **Miller J**.

Renal Mass in the Octogenarian: Ablation, Extirpation and Observation. Presented by: **Miller J**.

## **Vascular Surgery**

### **Midwestern Vascular Surgical Society Meeting, Indianapolis, IN: September 9, 2010**

Predictors of wound complications following major amputation for critical limb ischemia. Presented by: **Hasanadka R**, McLafferty RB, Moore CJ, Hood DB, Ramsey DE, Hodgson KJ.

## RESEARCH

**(includes research with Resident/Fellow involvement as a Principal or Co-investigator)**

### **Carbondale Family Medicine**

Smaga S. *Residency Training in Primary Care*; HRSA; \$150,354

Tippy P. *Heart Smart for Teens*; IDPH; \$15,000

### **Child Psychiatry**

**Khan M**. Exemption study, *Neuroleptic Withdrawal Dyskinesia in Children and Adolescents* (approved).

**Salman A**. Exemption study, *A Gateway Into Bipolar*. Approved July 7, 2010.

**Singh G**. Exemption study, *Overlapping symptoms in Bipolar Disorder and Autism Spectrum Disorder*. Approved May 3, 2011.

### **Dermatology**

**Davis J, Hayes S, Larson R, Ufkes L**. *A Multicenter, Open Registry of Patients with Psoriasis Who Are Candidates for Systemic Therapy Including Biologics*, Protocol C0168Z03

### **Endocrinology**

P Bakhtiani (PI); C Osuoha, R McLafferty (Co-PIs). *Impact of glyceemic control on diabetic lower extremity ulcer healing among patients undergoing hyperbaric oxygen therapy*. NIH/Nevada Idea Network of Biomedical Research Excellence (INBRE), Grant # P20 RR016464.

M Jakoby. *Impact of glyceemic control on diabetic lower extremity ulcer healing among patients undergoing hyperbaric oxygen therapy*. SCRHS protocol 10-134.

M Jakoby. *Utilization of basal/bolus insulin on ward medicine by resident physicians after introduction of a pocket insulin dosing guide*. SCRHS exempted research, Residency QI project.

M Jakoby. *Association of hyperglycemia with clinical outcomes in hospitalized patients receiving enteral nutrition*. SCRHS exempted research.

M Jakoby. *Impact of glyceemic control on clinical outcomes for diabetic patients admitted to non-critical care internal medicine and family practice hospital services*. SCRHS exempted research, MPEE project.

### **Infectious Diseases**

J Koirala. *HIV/AIDS Education and Prevention in Central Illinois*. Illinois Department of Public health (2010)

J Koirala, **I Tyagi, R Rzepka**. *Clinical characterization of patients with carbapenem-resistant versus carbapenem-susceptible Acinetobacter baumannii infections*. 2010

C Speil, **R Rzepka**. *Activity of antibiotics a single agents and in combination against Acinetobacter baumannii in suspension and biofilm*: - a study sponsored by a Central Research Committee Grant at SIU School of Medicine. As a principal investigator in this project, we are studying in vitro efficacy of various antibiotic combinations against Acinetobacter baumannii in suspension and in biofilm, August 2009 - present.

V Sundareshan. *Current research on heteroresistance in Staphylococcus aureus: prevalence in Southern Illinois University*. Funded by Memorial Foundation grant: March 2010- March 2011

*Sequential and combination antibiotics for biofilm infections*. Principal Investigator with Warren Rose, PharmD at the University of Wisconsin - Madison, WI. SIUE Graduate School STEP grant (\$16,000, applied) 10/10, American Association of Colleges of Pharmacy New Faculty grant (\$10,000, applied) 9/10, Society of Infectious Diseases Pharmacists New Investigator grant (\$10,000, unfunded) 8/10

### **Internal Medicine**

**Also See Med/Psych Research**

### **Medicine/Psychiatry**

Bennett, J (PI); **Costin, G, Khan, M**, Mazhar, N, Dzara, K PhD (Co-PIs). Additional Personnel: Conklen, M RN; Hannig; JA RN. *The Acute Care Psychiatry Clinic: A Model of Collaboration Between an Academic Medical Center and a Mental Health Center*. Exempt SCRHS approval: 3/16/2009.

**Costin, G** (PI); Resch, D, Dzara, K PhD (Co-PIs). *Weird Coincidences Survey in SIU Population*. Exempt SCRHS approval: 03/15/2010.

Dzara, K PhD (PI); **Jain, G**, Soltys, S (Co-PIs). *The Annotated Bibliography as a Teaching Tool in a Psychiatry Journal Club*. SCRHS determination: 04/29/2011.

**Jain, G** (PI); Cumpa, E, **Solomon**, Chewaka, S, **Cheema, U**, Elmahi, M, **Thomas, J** (Co-PIs). Project Title: "Assessing the Effect of a Targeted Intervention for Abdominal Aortic Aneurysm Screening." Exempt SCRHS approval: 03/26/2010.

**Jain, G** (PI); Resch, D, Dzara, K PhD (Co-PIs). *Survey of Dual-Trained Physicians in Primary Care and Psychiatry*. Exempt SCRHS approval: 09/07/2010.

**Zupancic, M** (PI); Resch, D, Fulk, L RN, Noggle, C PhD, Verhulst, S PhD (Co-PIs). *Serum Leptin Levels and Cognitive Dysfunction in Patients with Schizophrenia*. SCRHS expedited: 03/02/2011.

## **Neurology**

**V Sabodash** (Research Assistant); S Evans (PI). *Pilot Study of Flax Seed Oil for Partial Onset Seizures*. October 2009 - present

**A Singh** (POINT Trial investigator). *Head shaking allodynia in migraine patients*.

## **OB/GYN**

**C Doerr**. *Visually estimated versus calculated blood loss in vaginal and cesarean delivery*.

**X Garcia, A Huff, S Radtke**. *A comparison of the sensitivity of the Medtronic iPro Continuous Glucose Monitoring device and standard diagnostic criteria for diabetes in women with Polycystic Ovary Syndrome*.

**H Hoefgen**. *Optimization of umbilical cord blood stem cell isolation, expansion and cryopreservation*.

**H Hoefgen**. *Stem Cell Targeting of Ovarian Cancer: A Novel Approach to Delivery of Cell-Based Therapeutics*, William E. McElroy Charitable Foundation.

**H Hoefgen**. *The Southern Illinois Regenerative Medicine Institute—an ABC Approach*. State of Illinois, Illinois Department of Public Health.

**M Krause**. *Expression and regulation of metallothioneins in human endometrium*.

## **Othopaedics**

**Armington ER, Mai MC**. *Serum titanium and niobium levels following flexible intramedullary nail insertion in pediatric population*.

**Armington ER**. Received a \$2500 Department of Surgery FY2011 Cycle I Research Grant.

**Blankenship JS, Mai MC**. *The relationship of the coracoids to the glenoid and humerus: An MRI study*.

**Dabbs RL**. *Driving under the influence of narcotics*.

**Dabbs RL**. *Survey of resident involvement and attitudes following restructuring of an orthopaedic residency research program*.

**Dyrstad BW**. *Are there predictors of an orthopaedic resident's performance on oral and written specialty certification examinations*.

**Dyrstad BW**. *Bilateral versus unilateral metal ions levels and correlation with head size*.

**Eilers M, Dyrstad BW**. *Porous press-fit stem extensions and revision total knee arthroplasty*.

**Froelich JM**. *Influence of patient clinic experiences on recommending their provider to family or friends*.

**Keene RR, Lovell ME**. *Comparison of time to proximal femoral physeal closure in pinned slipped capital femoral epiphysis hips versus pinned contra lateral hips*.

**Lovell ME, Froelich JM**. *Plastazote hip abduction orthosis for pediatric hip dysplasia; Follow-up of developmental dysplasia of the hip treated with congenital hip orthosis*.

**Mai MC**. *Chronic axial skeletal pain: Evaluation of a single institution's referral patterns*.

**Mai MC, Banerjee D, Kukkar N, Freitag P**. *Comparison between anterior cervical discectomy and fusion and posterior foraminotomy in degenerative cervical radiculopathy*. Initiated on 7/10/2010.

**Mai MC, Froelich JM**. *Sagittal alignment following multilevel axial lumbar interbody fusion*.

**Mai MC, Kukkar N, Beck RT, Banerjee D, Freitag P**. *Transforaminal lumbar interbody fusion versus axial lumbar interbody fusion comparison of operative room time, fluoroscopy radiation dose/time, and blood loss analysis*. Initiated on 6/10/2010.

**Mai MC, Sullivan DN**. *Radiological changes of decompression in axial lumbar interbody fusion*.

**Sams JD**. *Redefining revision total hip arthroplasty based on hospital admission status*.

**Sharif KR**. *Pain management after total joint arthroplasty: A Multimodal Approach*.

**Sullivan DN**. *Multifactorial analysis of anterior cruciate ligament injury in teenage females: A longitudinal study*.

**Sullivan DN**. *Conscious sedation for closed reduction of dislocated total hip arthroplasty*.

## **Otolaryngology**

**X Vega Cordova**. \$2,500.00 grant awarded by SIU Dept of Surgery. *MMP-2 as a Marker for Differentiated Thyroid Cancer on FNA Biopsy*. February 2011

## **Plastic Surgery**

**T Hegge**. \$10,150.00 Memorial Medical Center Foundation Grant, *3-D Ultrasound/Flexor Tendon*. February 2011

**N Luckey**. \$2,500.00 SIU Surgery Grant, *Tissue Engineered Skin for Upper Extremity Wounds*. February 2011

**A Maciolek**. \$6,015.00 Memorial Medical Center Foundation Grant, *HBO Hindlimb Transplants in Rats*.

**K Webb**. \$63,307.00 Memorial Medical Center Foundation Grant, *Best Practices Hand Fractures*. February 2011

## **Psychiatry (also see Medicine/Psychiatry)**

Bennett, J (PI); Mazhar, N, Dzara, K PhD, **Behere, A** (Co-PIs). *Emergency Psychiatry Experience - A Survey of Chief Residents*. Exempt SCRIHS approval: 05/17/2010.

Dzara, K PhD (PI); Pan, P, Mazhar, M, **Shrestha S, Shrestha S** (Co-PIs). *Attending, Resident, and Medical Student Attitudes Toward DNR Orders*. Exempt SCRIHS approval: 04/01/2010.

**Hardwick, J** (PI); Koechle, B RPh, Beck, D PhD, Gillette, C PharmD, Lloyd, M RPh (Co-PIs). *Medication Management of the Forensic Psychiatric Patient*. Exempt SCRIHS approval: 12/23/09.

Sarver, J BS (PI); Dzara, K PhD, Bennett, J, Basnet, P (Co-PIs). *Resident and Medical Student Viewpoints Toward their Participation in a Telepsychiatry Rotation*. Exempt SCRIHS approval: 08/16/2010.

## **Pulmonary**

*Clinical Trial*. SCRIHS #06--017, Protocol # 1219.2

P White (PI). *Cytokines in lung cancer*. McElroy Grant

## **Quincy Family Medicine**

*Illinois Children's Healthcare Foundation grant for Integrating Behavioral Health into Primary Care*, 2009 - current date

## **Quincy Sports Medicine**

T Terrell (PI). *Genetic Risk Factors for Concussion in College Athletes* (08-097).

### **Spine Surgery (also see Orthopaedics)**

**Kukkar N**, Milbrandt JC, Freitag P. *Chronic back pain: evaluation of serum 25 OH vitamin D and their correlation with dual energy X-ray absorptiometry*. Initiated on 6/10/2010.

Banerjee D, Beck RT, **Kukkar N**, Novicoff WM, Saleh KJ. *Total joint arthroplasty utilization in rural versus urban population using National Inpatient Sample database*. Initiated on 11/8/2010.

### **Springfield Family Medicine**

**C Viteri, K Matsumoto**, C Brenham, I Hassan, J Albers, W Jenkins PhD.: Co-investigators. *Survey of Primary Care Physicians' Cancer Screening Recommendations and Practices. Colorectal, Breast, Cervical, Lung and Prostate Cancer Screening Questionnaire*.

### **Urology**

Tarter T, Schwartz B, **Benson A**. *An Operative Performance Rating System for Urology Residents* (\$25,000)

Kohler T, **Koenig J, Benson A**, Goswami N, Rocha-Singh K. *Cardiac & Urologic Pathology/Prevalence Interplay Determination Study* (\$72,000; \$20,000)

**Benson A**, Ost L, Kohler T. *Intentionally Retained Reservoir in Artificial Urinary Sphincter Revision*.

**Benson A**, McAsey M, Kohler TS. *Effect of Consecutive Daily Ejaculation on Sperm DNA Fragmentation*. (\$2,500)

**Taylor E**, Kramer B, Kohler TS. *Ocular Radiation Exposure to Urology Residents*.

**Koenig J**. *Aldo-keto Reductase Family 1 Member B10 as a Biomarker for Prostate Cancer*. (\$2,500)

**Benson A**. *Effect of Consecutive Daily Ejaculation Sperm DNA Fragmentation*. (\$2,500)

**Wiser H, Miller J**, Bell S, Hutto J, Brannigan R, Kohler T. *Spermatogenesis in Orchiectomy Specimens*.

**Frye T, Miller J**, Reed D, Wilber A, Tarter T. *An Experimental Model of Cox-2 Expression in Renal Cell Carcinoma*.

### **Vascular Surgery**

K Hodgson. *Anaconda AAA Graft Phase I*.

K Hodgson. *Anaconda AAA Graft Phase II*.

K Hodgson. *Aptus Endo Stapling Technique*.

K Hodgson. *ATTRACT*.

K Hodgson. *CREST*.

K Hodgson. *Endologix AAA Suprarenal Stent Graft*.

K Hodgson. *Endologix 34 mm cuff*.

K Hodgson. *Pythagoras—Angulated Necks Study*.

K Hodgson. *SAPPHIRE—Worldwide*.

K Hodgson. *THRIVE*.

K Hodgson. *Trivascular AAA Trial*.

D Hood. *Healthpoint Venous Stasis Ulcer Follow-Up*.

R McLafferty. *Venous Clinical Severity Score Revision*.

C Moore. *CloSys Closure System Device*.

C Moore. *DVT Database*.

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