



**University of Virginia
Department of Family Medicine
Annual Report
2020**



Letter from the Chair

There is little doubt that 2020 has been a uniquely challenging and stressful year. COVID-19 has intensely affected all of us in so many ways, yet it has also reminded us of the essential value of primary care, the pressing need to address significant health disparities among people of color, and the necessity to more effectively meet the needs of our vulnerable populations. Family physicians are often the unsung heroes who provide front-line care to individual patients, their family, and the community and this has been profoundly exemplified this year.

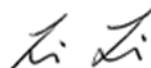
Even through all of the challenges we have faced, our department has continued to move forward in accomplishing our missions in patient care, education, research and faculty development. This report highlights our many successes this year.

- ♦ *We adapted our clinical efforts to better meet the needs of our patients by leading the Health System in telemedicine visits and actively collaborating in the creation and implementation of a community call line.*
- ♦ *We recruited an outstanding group of resident interns. In addition, we typically see a substantial increase over the national average of in-training exams for our PGY2 and PGY3 residents, reflecting their hard work and significant knowledge growth during their time in our program.*
- ♦ *We hired a new and highly qualified faculty member to lead our predoctoral education efforts and, this year, the number of graduating medical students choosing family medicine was almost three times greater than last year.*
- ♦ *We are continuing to expand our research and scholarly activities: the number of faculty publications has more than doubled from last year; we are expanding our research infrastructure; and a number of faculty have received new federal and foundation grant awards.*
- ♦ *Our faculty have continued to contribute in exceptionally meaningful ways at the local, regional and national level and have received multiple honors and recognitions for their clinical care, teaching and research. For example, Dr. Fern Hauck was the 2020 recipient of the Curtis G. Hames Research Award.*

This year we are also honoring Peter Slagle Ham, MD, a much beloved faculty member in our department who was greatly admired for his love of teaching and his dedication to providing the highest quality of care to his patients. Peter exemplified who we are as academic family doctors and we are launching an effort to establish a memorial fund to honor him. This fund will support department efforts to enhance family medicine education and it will help us continue his legacy.

I am so proud of how our department members have responded during this momentous year and it has only served to reinforce the extraordinary qualities that are [UVA Family Medicine](#).

Stay Healthy, Live Well



**Li Li, MD, PhD
Walter M. Seward Professor and Chair
UVA Department of Family Medicine**

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UVA Family Medicine Department



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PhD, JD



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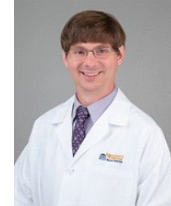
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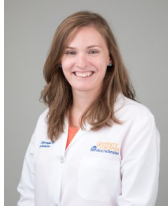
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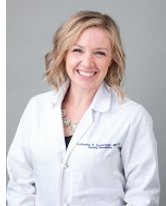
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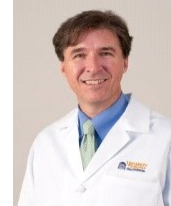
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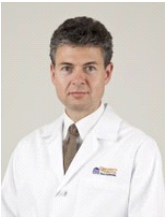
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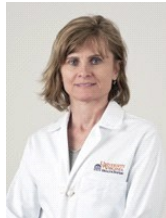
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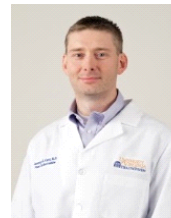
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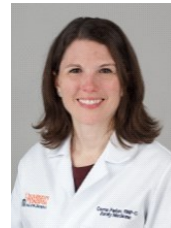
Andrew Lockman
MD



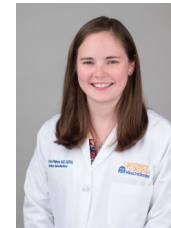
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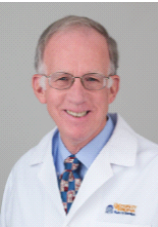
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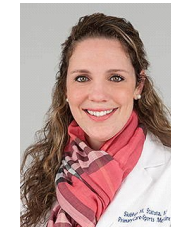
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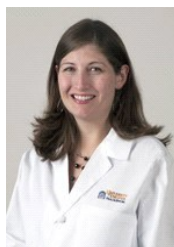
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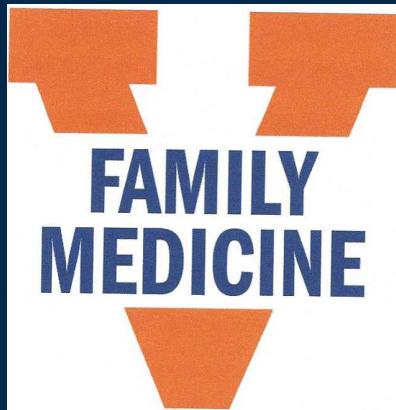
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Reagan Thompson
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Annie Way
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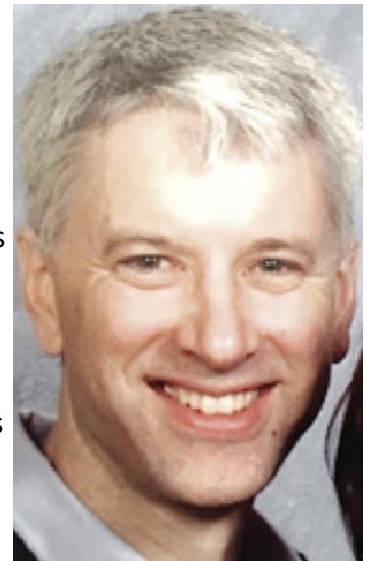
Our Vision

Be a leading academic department, nationally and internationally recognized for excellence in:

- 1) Providing integrated, patient-centered, comprehensive care for individuals, families, communities and populations.
- 2) Training next-generation family physicians who are passionate about providing whole-person care for individuals, families, communities and populations.
- 3) Leading research in population health, disparities/equity, chronic disease prevention/management, and healthcare transformation.
- 4) Developing each faculty to the full potential aligned with their personal goals and institutional priorities.

Peter Slagle Ham Legacy

Peter Slagle Ham, MD, MPH was a much loved faculty member in our department who tragically passed away in 2017 at the age of 50. Peter was a triple Hoo, having completed medical school, family medicine residency, and his faculty development fellowship/MPH at the University of Virginia. Peter was an old school clinician and educator who truly cared for his patients, students, residents, colleagues and everyone around him. He was particularly passionate about teaching and was always mindful of teaching moments, often taking extra time with medical students or to be present in our resident room to provide guidance, support, and to educate.



Peter's teaching profoundly affected countless residents and medical students, and his engaged and valued teaching helped to sustain a pipeline of high quality family medicine clinicians who have gone on to become the backbone of our healthcare system, both in academic and clinical environments. Peter was known for his approachable and comfortable teaching style and his self-effacing sense of humor was legendary. He always shared of himself with those around him and throughout his illness, he never failed to thank those who cared for him, as individuals. Peter's wife, Karen Maughan, is also a faculty member in our department and he had such great love for Karen and his three children, William, Henry and Katherine.

The poem on the following page was written by the residency class of 2017 in Peter's memory. His passing created a deep sense of loss within the department and we would like to honor his passion for teaching and education in a particularly impactful manner.

In honor of Peter and his love for teaching, we plan to establish a memorial fund in Peter's name. This fund will be used to support and promote the education of future family physicians and to create a tangible and visible manifestation of Peter's deep and dedicated passion for teaching and mentoring those around him.

To learn about how you can support Peter's legacy or to make a gift to the department, please contact:

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When we think of you, we remember

Balance, joy laughter.

You were our temperate leader, helping us grow when being a new doctor was unfamiliar and uncomfortable,

There as a mentor, a role model, a friend.

When we think of you, we remember

A room filled with humor and wisdom.

Teaching us to simplify our care of the patient,

To see them through a human lens.

That bringing empathy and compassion to a patient's bedside is just as vital in healing as our stethoscopes and physical exams.

When we think of you, we remember

How you showed us that it is okay to question.

If the traditional way of doing things needed a moment of pause and pondering, you gave us courage to go against the grain and challenge the norm,

Always ready to help us think through a perplexing patient.

When we think of you, we remember

Your inspiring curiosity and your passion for teaching,

Making learning a two way experience.

You gave us a voice,

And even if we were wrong, guided and supported us, gently showing us the right way.

When we think of you, we remember

The sacrificial love you had for patients, colleagues, friends and family, prioritizing all others before yourself no matter the circumstance

And even as your health was threatened you asked, "What can I help you with?"

When we think of you, we remember

When everything around us was serious, stressful, and demanding,

You were calm, peaceful, and most importantly happy sitting beside us at all hours of the night with your huge grin,

We gravitated towards you.

You showed us happiness is contagious even at two o'clock in the morning.

For the learners behind us, may we have the compassion and patience you gave us.

For our patients, may we care for them justly, sacrificially, and rightly as you did.

For our families, may we keep them and love them first, as you did as a husband and father.

For our colleagues, may we keep joy and fun in our work, the way you showed us.

We'll do our best to live in the moment, and keep something beautiful nearby.

Because

When we think of you, we remember!

With all our love, Family Medicine Residents Class of 2017

Family Medicine's COVID Response

Clinical Operations

In March 2020 we recognized the need to reorganize our clinical operations due to COVID.

Through our leadership of the Primary Care Service Line, we worked with our partners in General Internal Medicine and the UPG Clinical Practice Group to create an evaluation center for patients with symptoms of COVID-19 virus. UVA Family Medicine providers volunteered to work at the office conducting medical evaluations and performing COVID-19 testing.

The department also helped to establish a community call line (CCL). The CCL was established in direct response to requests from multiple community partners to enhance accessibility to care, by phone, for local community members who did not have a primary care provider. The call line opened on May 1, 2020 and was established off of the existing COVID hotline. The CCL was staffed by volunteer medical students who answered questions and transferred calls to appropriate resources, including on-call volunteer primary care providers for medical questions/concerns. Family Medicine residents assisted in developing the CCL and helped to staff the line once in operation, along with additional family medicine faculty providers. Dr. Hauck was the Family Medicine faculty lead working with two Internal Medicine faculty leads to develop and implement the CCL and to provide ongoing supervision. The line was transitioned to Medical Center staffing in late November, 2020.

The pandemic caused a large reduction in ambulatory visit volumes due to the Governor's stay-at-home order. In order to meet our patients needs and continue to provide access to high quality medical care, UVA Family Medicine greatly accelerated our telemedicine program and led the health system in telemedicine visits, as illustrated below:



Epic Telemedicine Encounters, January 01, 2020 - December 31, 2020*

By Complete/Incomplete/Scheduled, Comparison of SOM Departments with at least 5 encounters

	Grand Total	Completed	Not Completed
Grand Total	16,881	13,977	2,850
MD-FMED Family Medicine	8,413	6,823	1,581
MD-INMD Internal Medicine	6,727	5,721	970
--SOM Department Not applicable	1,524	1,254	265
MD-PSCH Psychiatric Medicine	208	170	34
MD-EMED Emergency Medicine	7	7	0
MD-PHMR Phys Med & Rehab	2	2	0

Finally, in order to best serve our patients and the community we consolidated providers, staff, and supplies and temporarily closed our offices in Nelson County and Southern Albemarle in April. We subsequently expanded access at our Crozet office continuing to offer essential face to face medical services including care of vulnerable populations, women and children. We were able to reopen the offices in late May, 2020 and now have fully expanded patient access at all of our offices.

Highlighted Efforts of our Integrated Mental Health Team

The Integrated Mental Health group in Family Medicine (colloquially known as “The Family Stress Clinic”) is currently staffed by two faculty clinical psychologists (Drs. Claudia Allen and Joseph Tan) and three part-time Masters levels clinicians enrolled in doctoral programs in clinical psychology at UVA. Residents in Family Medicine and Psychiatry and 4th year medical students also rotate with us. Normally we provide both traditional ongoing psychotherapy to individuals of all ages as well as families and couples, and we provide on-site, point-of-care mental health services as an Integrated Mental Health Clinic in Primary Care. We also provide consultation services to inpatients in Family Medicine, Pediatrics, and other hospital services, as requested.

Like many others, last March we found ourselves needing to suspend in-person appointments temporarily due to COVID-19. We were concerned about the impact that suspension of services would have on our patients, who are often quite fragile, and on our learners. Realizing that we had more flexibility than some other medical services that require physical interaction, we immediately shifted our appointments to video and phone. Our department and IT support were extremely helpful and flexible, helping us use a variety of platforms as they became available. We started with what was already available (Zoom, Face-Time and phone), and substituted WebEx, doxy.me, and doximity as they became available to us. Because of the commitment and notable flexibility of our team, and the support of our department and IT, we were able to shift almost all of our appointments to a virtual format with minimal gap in services (less than a few days). Because of the lengthy nature of most of our appointments (45-60 minutes) and the potential COVID exposure, we have continued to meet with most patients virtually, with a few exceptions as needed.

Since mid-March through November, we have conducted approximately 1600 virtual behavioral health visits (30-60 minutes) and 575 shorter behavioral health contacts with patients.

While we will be joyful to return to in-person services, which are particularly important with very young children and non-English-speaking families, there have been some positive surprises and more than a few bright spots in our virtual experience. In our patient care role, the virtual format has allowed us to provide services that would otherwise have been unlikely. For example, one of our patients is a 15-year-old girl who we will call “Carrie,” who has made multiple suicide attempts (one serious enough to require medical hospitalization). Carrie has four highly invested parents (two biological parents and two step-parents). Before the shutdown, we were not able to get more than one parent at a time to come to in-person sessions, both because of the parents’ work schedules and because two of the parents live out of town. When we shifted to our virtual format, we requested a session with all four parents to discuss safety planning, and we have had **family sessions with all four parents present almost every week** since that time. Having all four parents “in the room” together has been crucial for improving family dynamics and planning appropriate support and supervision for Carrie. Recently Carrie has begun participating in the sessions with all four parents and they report that she is communicating with them more clearly and honestly than ever before. In spite of the isolation of COVID and some other stressors, Carrie is doing well and has not self-harmed in over two months.

In other cases we have been pleased to find that patients who were previously unwilling to attend mental health services in person (due to stigma, anxiety, or transportation) have been open to engaging by phone or video. We have been thrilled to provide access to these patients and will likely continue to offer this option even after we return mainly to in-person work. We have been pleased to be able to stay connected to our patients through the virtual platforms and have learned some new skills along the way. We look forward to using these lessons learned when we return to in-person work.

A New WebEx Format for Visits with Resident Providers in our Family Stress Clinic

Typically our teaching in the Family Stress Clinic involves two afternoons a week working as a team behind a one-way mirror. This involves one team member functioning as the therapist with a patient, and the rest of the team observing behind a mirror/one-way window in an adjacent room. This extremely powerful teaching tool, pioneered at the Children's Hospital of Philadelphia in the 1970's, allows the attending psychologist to provide live supervision (by phone into the room) of new therapists, residents, and medical students, and allows these learners to observe each other and more experienced therapists as they navigate real patient challenges.

Initially we were crushed that we would have to suspend this method during COVID, but quickly realized that we could approximate this situation over WebEx. Since March, two afternoons a week we continue to operate as a team on a virtual platform, where we brief and debrief cases as a group, and then observe one therapist conduct a session with the patient's informed consent. Even better than phoning in, the attending psychologist uses the "chat" function to send ideas and guidance to the therapist in real time. ***In multiple family member sessions, the attending psychologist can even coach the family members privately through the chat, which is not something we were able to do in person.*** The team members who are observing turn off their video, so their faces are not present, but patients can still see the box with the team member's name or initials, so there is transparency in the process. Partway through the session, the therapist can put the patient in the virtual "waiting room," and team members all turn their cameras back on temporarily to discuss how the therapist should use the last part of the session. Then, they turn their cameras off and the patient is brought in from the virtual waiting room for the conclusion of the session.

Patients have greatly appreciated the team's interest and input, and learners have loved the extra guidance that can so unobtrusively be provided by the attending through the chat.

In addition to their ongoing and significant support of our patients, our behavioral science faculty have helped members of the department, UVA Health, and the larger community cope with the many challenges brought about by COVID:

- ♦ Joey Tan, PhD was featured in a local CBS news story about helping families cope with stress during the pandemic.
- ♦ Claudia Allen, PhD, JD was featured in a UVA Today story about protecting your mental health during quarantine:

https://news.virginia.edu/content/how-protect-your-mental-health-during-quarantine?utm_source=DailyReportr&utm_medium=email&utm_campaign=news

- ♦ Joey and Claudia facilitated multiple department Zoom support group meetings for residents and faculty and served as a valuable resource in helping everyone maintain their mental health through this challenging year.



Joey Tan, PhD



Claudia Allen, PhD, JD

“At UVA Family Medicine, we do not tolerate racism. We—both residents and faculty—stand united with our Black colleagues, patients, friends and families. We must confront structural racism and acknowledge our own implicit biases, and we must use our power to shed light on injustices. We pledge to listen, to learn, and to act to change the status quo.”

UVA Family Medicine Statement

During the past year, we watched as the country erupted in protests in response to racial injustice against the backdrop of a deadly pandemic with disproportionate impact on Black and Brown communities. In response to these events and as a continuation of previous work, the Department of Family Medicine expanded its diversity, equity, and inclusion efforts.

The resident Diversity and Inclusion Resident Subcommittee successfully launched a book and movie club for residents and faculty with a February screening of the documentary *13th*. The club has persisted through the pandemic, meeting masked and widely spaced in the outdoors to discuss the books *White Fragility* and *How to Be an Antiracist*.



The Resident Subcommittee also convened an evening video discussion on race to engage our incoming interns and current residents, faculty and staff in debriefing current events and brainstorming a path forward. The outcomes of the discussion included the addition of a monthly antiracism didactic to our residency curriculum, increased interest in the book and movie club, and an antiracism resource list.

To our health equity curriculum we added the History of African Americans at UVA tour to our local history series, a PGY1 didactic on race as a social construct, and a PGY3 legislative advocacy workshop. The health equity curriculum gained national attention through the [American Academy of Family Physicians Virtual Town Hall: The Public Health Crisis of Racism](#), where our faculty member Kristina Johnson presented the curriculum. The AAFP also featured Dr. Johnson's reflections on the role of white faculty in antiracism teaching in a [guest editorial](#).



We look forward to continuing these efforts in the coming year.

Clinical Updates



Four of our practices have received Certificates of Recognition by the National Committee of Quality Assurance and are recognized as Patient Centered Medical Homes:

UVA Family Medicine Primary Care Center

UVA Family Medicine Stoney Creek

UVA Family Medicine Crozet

UVA Family Medicine Crossroads

These practices are recognized for the periods of December 31, 2020 through February 3, 2022 for their “systematic use of patient-centered, coordinated care management processes.”

Congratulations to these sites and special thanks to all of the team members who helped to make this possible, including the leadership efforts of Rebekah Compton, DNP, FNP, our Director of Ambulatory Quality Improvement, and Amanda Sebring, our Senior Data Analyst.

Celebrating 25 Years of Crossroads



Our Crossroads Practice turned 25 years old this year and was highlighted on Channel 29 NBC News, featuring Andy Lockman and Bonita Toms:

<https://www.nbc29.com/2020/01/20/uva-clinic-celebrating-th-year-albemarle-co/>

Bonita was with the practice since its inception and sadly passed away this year. We will miss her tremendous devotion to her patients. Crossroads opened its doors in January, 1995. Since then, the practice has blossomed and it serves as a rural continuity site for our residents.

Andy Lockman, MD serves as the lead physician and was the founding provider. Kate DeGeorge MD, MS, a former graduate of our residency, joined the staff in 2013. Donna Landen, MD moved her practice to Crossroads from the Primary Care Center (PCC) Practice in 2016. She also continues to see patients at the PCC International Family Medicine clinic once a week. Sammie Philman, MD, MPH, joined the practice in September of 2020. She was a resident in our program and she completed our Faculty Development Fellowship. She received a number of significant recognitions as a resident and she is a highly valued clinician and teacher. Corrie Parker, FNP-C, MSN joined the practice late in 2017.

We also have a wonderful staff at Crossroads to serve our patients. Amy Gilchrist, RN supervises our nurses and care coordination team: Suzanne Malone RN, Susan Power RN, Heather Zirkle LPN, and Sheryl Goolsby MA. Robin Smoot, who has spent many years working in and around the department, helps Heather Gibson and Kaitlin Thompson balance the many simultaneous tasks that happen at the front desk.

We are looking forward to another 25 years of working for the health of southern Albemarle County!

UVA Medical Center received a perfect score on the HEI in 2020. Dr. Casey partnered with Amy Sarah Marshall, UVA Marketing and Communication, to deliver multiple “Safe Space” workshops that allowed us to exceed the training requirement. This training provided critical information to UVA team members about the needs of our LGBTQ+ patients.



Gender Health Clinic

How would you feel if you went to the doctor because you were sick, and they refused to see you? Or if you had to teach your doctor about your health issues, because they weren't sure how to manage them?

For many gender-diverse patients, these experiences are a painful reality. After meeting several of these patients and realizing that there was no safe place they could get all of their healthcare needs met, Dr. Catherine Casey collaborated with colleagues in Endocrinology and Behavioral Health to create UVA's Adult Gender Health Clinic.

Here, patients who are transgender, nonbinary, or have intersex medical conditions can get primary and specialty care in a respectful and welcoming environment.



Catherine Casey, MD

“Family Medicine’s job is to meet the needs of the community,” says Dr. Casey. “Like most physicians, I never received training in the healthcare needs of LGBTQ+ patients.” By finding mentors, attending conferences, and joining local organizations, Dr. Casey learned to provide gender-affirming medical care, including hormone therapy, to her patients. When she isn’t working in the clinic, she finds great joy teaching medical students, residents, and other health professionals these skills, so they can take them back to their patients.

Today, UVA’s Adult Gender Health Clinic provides hormone therapy, primary care, mental health care, and free legal services. In just two years, it has served hundreds of patients ranging in age from 18-80 years old. They travel from all over Virginia and surrounding states, driving up to 5 hours each way for an appointment. Telehealth visits are utilized when possible and preferable for patient convenience.

Dr. Casey and the Adult Gender Health Clinic team are actively collaborating with multiple specialties at UVA to develop a comprehensive Gender Health Program. These specialties include Plastic Surgery, Urology, OB-GYN, Dermatology, Speech Therapy, Teen Health, and Student Health.

“Working with gender-diverse patients is one of the most rewarding parts of my job,” says Dr. Casey. “You see a person come in who has suffered so long hiding an essential part of themselves, and how much happier they are once that identity is respected and allowed expression.” While she enjoys her patients’ appreciation, she tempers it with what she sees as the long-term goal of her clinical work and her teaching. “Healthcare is a right, and we need to work towards eliminating the discrimination and health disparities that caused this problem in the first place.”

Cancer Survivorship Clinic



Imagine the diagnosis of cancer. The stress of feeling threatened that your life may end earlier than you thought it would. The marathon of treatments and side effects. Finally, you are finished with treatment and are ready to move on from being a cancer patient to being a cancer survivor. You have unique needs related to your cancer, but seeing many specialists for these needs can be exhausting, financially impossible and impractical. Your cancer-related issues such as fatigue, anxiety, depression, sleeplessness, lymphedema, neuropathy, pain, and bone loss could lead you to see a legion of specialists who are managing primary care complaints while your other pre-existing medical issues are neglected. ***Now imagine seeing one doctor who is trained in cancer survivorship for all of these concerns.*** A doctor who is equipped to manage these problems and can address each of these issues with appropriate management and care, and with specialty referrals when needed. A doctor who will support your survivorship and help you recover from the traumas and sequelae related to cancer treatments.

The UVA Family Medicine Adult Cancer Survivorship Clinic is a new endeavor to better meet the needs of cancer patients and survivors. This first-of-its-kind clinic, launched in October 2019 in the Department's Primary and Specialty Clinic Pantops location, is a cross-disciplinary and collaborative effort with the UVA Emily Couric Cancer Center. We recognize that cancer patients have medical needs in addition to their cancer treatments that often cannot be met solely by their oncology team. This clinic meets those needs with individualized and specific post-cancer care that is paired with the best primary-care prevention and treatment of a patient's pre-existing issues. ***We offer guidance in how to live a full life, how to best prevent cancer recurrence or new cancers from occurring, and we provide individualized recovery support.*** We offer group sessions, nutritional coaching, stress reduction techniques, and exercise guidance for patients at all stages of cancer care.

The program and clinic are directed by Denise "Annie" Way, MD, MS, who has 15 years of primary care experience, trained in the UVA family medicine residency program, and completed a Fellowship in Integrative Medicine from the University of Arizona in 2019. Working with cancer patients is both inspiring and challenging for her and she finds great reward in providing them with individualized care. She works closely with the Cancer Center, developing pathways that connect primary care with cancer care. One goal of the program is to train primary care providers to have the capacity to care for cancer survivors, using the strengths of primary care to augment and support patients' cancer treatment. Her vision is that this program and clinic grow into being an independent center, providing cancer survivors with the unique care and support they need.

The American Cancer Society predicts that, because of earlier detection and improved therapies, the number of cancer survivors will exceed over 22 million in the U.S. by 2030. A primary-care centered survivorship clinic is the most efficient and effective way to give superior and tailored survivorship care to cancer patients, lessening the burden on oncology to manage issues outside their specialty. The UVA Family Medicine Adult Cancer Survivorship Clinic is at the leading edge of this new collaborative way of supporting survivors, helping them imagine a future beyond cancer.

Predoctoral Education

New Faculty Spotlight

Dr. Terri Babineau (our new physician lead at our Crozet practice) was hired this year and we are excited that she is filling two important predoctoral leadership roles within the department: she is our new clerkship director and she serves as Director of Predoctoral Education for the department. In this capacity, Terri is working to develop coordinated Undergraduate Medical Education programming within family medicine and she serves as our predoctoral ambassador to the larger health system.



Terri Babineau, MD

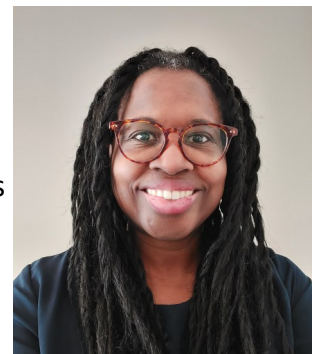
Terri is eminently qualified for these roles. She most recently was on faculty at Lynchburg Family Medicine and prior to that, she was an Assistant Dean of Student Affairs/Global and Service Learning and Associate Professor at Eastern Virginia Medical School. She has a long history of awards related to teaching and community service, as well as significant experience developing programs related to service learning at the local, national, and international levels.

Terri also went to Oxford University for a Master's degree in Mindfulness and she wrote her dissertation on healthcare burnout. She helped to create and serves as the volunteer Chief Medical Officer for the SafeHaven Physician Wellness program for the Medical Society of Virginia, advocating for legislative change for providers who seek help for mental health issues. In addition, she works extensively with the Wisdom and Wellbeing Program at UVA.

We are so pleased that Terri has joined our faculty and we are confident that she will have significant impact on our medical student programming.

New Teaching Elective

Dr. Sharon Diamond Myrsten and Dr. Andrew Parsons (Department of Medicine) will be co-directing a new teaching elective for 4th year medical students. Students in the elective will assist in teaching clinical skills to 1st and 2nd year students in their Foundations of Clinical Medicine small groups. Students participating in the elective will also learn about evidence based teaching methods and they will have a chance to utilize these skills during their small group teaching.



Sharon Diamond Myrsten, MD

Graduate Medical Education

The 2019/2020 interview season was our busiest ever and we conducted 119 applicant interviews. We matched an outstanding group of interns



Danielle Bullock is from Norfolk, Va. She went to Howard University for undergrad and medical school. Her passions are caring for underserved and marginalized populations, health advocacy, mobile health and global health. She also has a growing interest in urgent care.



Noopur Doshi is from Baroda, India and Concord, NC. She went to undergraduate school at UNC-Chapel Hill and attended medical school at Brody School of Medicine (ECU), North Carolina. Her interests in medicine include: reproductive health care, maternal and child health, quality improvement/patient safety/leadership, population health, Latino health, urban underserved, full-spectrum FM.



Tim Howland is from Mickleton, NJ. He went to Penn State for undergrad and Virginia Commonwealth University (VCU) for medical school. His interests in medicine are economics, geriatrics, sports medicine, and pediatrics.



Nicholas Kidd grew up in Roanoke, VA. He attended Virginia Tech for undergrad and VCU for medical school. His interests in medicine are dermatology, LGBTQ health, teaching, and procedures.



Hannah Rak is from Vienna, VA. She completed undergrad at Washington and Lee University and medical school at VCU. Her interests in medicine are primary care, health equity, social determinants of health, reproductive health care, and pediatrics.



Adam Richardson is from Marion, VA. He went to Radford University for undergrad and med school at VCU. His interests in medicine include: dermatology, rural health, and hospital medicine.



Jessica Row is from Gaithersburg, MD. She attended undergraduate at UVA and medical school at New York Medical College. Her interests in medicine are primary care, population health, health equity and behavioral health.



Terrell Smith grew up in Hershey, PA. He went to undergraduate school at Penn State University and medical school at UVA. His interests in medicine are culture centered care, sports medicine, and rural medicine.



Our PGY2s (from left to right):

Monique Meade—Boston University

Sara Seifu—University of Virginia

Eli Hammer—Virginia Commonwealth University

Ory Streeter—University of Virginia

Dawit Bezabih—Tufts University

Mateen Manshadi—University of Iowa Carver
College of Medicine

Ellie Ginn—University of Iowa Carver College of
Medicine

Jane Forbes—Pennsylvania State University



Our PGY3s

First Row (left to right):

Nadia Saif—University of Miami

Molly Grover—Virginia Commonwealth University

Sylvia Akauola—Medical College of Wisconsin

Zach Blom—Brody School of Medicine

Second Row (left to right):

Ben Neltner—University of Louisville

Cassie Dishman—Marian University College of
Osteopathic Medicine

Aviva Friedman—Ben Gurion University

Allison Yeaman—Virginia Commonwealth University

Global Health Leadership Track Spotlight

In 2009, we welcomed our first class of Family Medicine and Internal Medicine Residents to the Global Health Leadership Track (GHLT). This was the brainchild of Dr. Fern Hauck (Professor of Family Medicine) and Dr. Rebecca Dillingham (Associate Professor of Internal Medicine and Director of the Center for Global Health Equity), conceived as a joint educational opportunity for residents in the two departments to become leaders in global health practice, research, policy and education. Initially funded through a grant from the Health Resources & Services Administration (HRSA), the track has continued to thrive and grow since the original class, now encompassing 9 additional residency programs: Pediatrics, Psychiatry, General Surgery, Plastic Surgery, Dermatology, Anesthesiology, Emergency Medicine, Pathology and Radiology. This collaboration across so many departments and disciplines is, to our knowledge, the only one of its kind.

The GHLT is open to 2nd and 3rd Family Medicine residents who apply for a position through a competitive process. The curriculum consists of monthly journal clubs hosted by the participant programs, lectures and seminars by leaders in global health, both locally and internationally, participation in the International Family Medicine Clinic, two two-week courses taught in alternating years, Tropical Medicine and Policy and Practices in Global Health, and an Ethics and Wellness Workshop to orient residents for their away rotations. These rotations are typically one-month each in the second and third years of residency in an international, resource-poor setting but may also be located at a site in the US or Canada that is underserved. These experiences provide an excellent learning opportunity for our residents to see first-hand the interface between social factors, health system infrastructure and policy, and health outcomes of the local community served.

We have had steady interest among our residents in the GHLT, with 4-6 participating annually. Our residents have been to all the sites offered through the track in addition to others that they identified. These include hospitals and clinics in Uganda, Tanzania, Guatemala, Cambodia, Costa Rica and the US Indian Health Service. Several of our graduates have gone on to careers in public health, refugee and global health and working with underserved communities.



Dr. Nicole Jensen with the medical team at the Mbarara Regional Referral Hospital, Uganda



Dr. Audrey Nguyen (right) with her Spanish tutor, San Jose, Costa Rica



Dr. Jackie Britz enjoying the natural beauty of Canyonlands National Park while doing her rotation at the Indian Health Service in Ship Rock, New Mexico



The Lake Clinic, Cambodia – Dr. Nadia Saif enjoying a meal with the staff

Brief Bios of our Fellows

Sports Medicine

Originally from rural Pennsylvania, Erin spent much of her time growing up active in both organized sports and outdoor pursuits. She received her undergraduate degree in Biology/Vertebrate Physiology from Penn State University where she was a member of the Schreyer's Honors College. She attended medical school at Drexel University College of Medicine, and it was during this time that she discovered the field of physiatry. Its' emphasis on functional restoration resonated with her and her own athletic endeavors. She went on to do residency in Physical Medicine & Rehabilitation at Temple University/Moss Rehab in Philadelphia, PA.



Erin Barnes, MD
PM&R

Due to her interest in treating musculoskeletal injuries specifically in the athlete population, Erin decided to pursue a fellowship in Sports Medicine, and could not be happier to be a part of the exemplary UVA team. She has particular interest in musculoskeletal ultrasound, sports performance and nutrition, and education. Her goals as a clinician include being able to help people at all levels of activity move better and to get people back to doing what they love after injury.

Faculty Development



Nicole Jensen, MD

Nicole graduated from the UVA Family Medicine Residency Program and she is looking forward to spending another year with the UVA Family Medicine Department. She is originally from New York and completed medical school at SUNY Downstate College of Medicine.

Nicole has many interests within family medicine, including global health and refugee care, as well as mental health and environmental health. At UVA, she has had the opportunity to develop her interests in global health and work with the underserved through participation in the Global Health Leadership Track and as a refugee provider in the International Family Medicine Clinic. With this experience and after several short-term global health experiences in Nepal, India, and Uganda, she learned just how important teaching and research are in the fight for healthcare equity both domestically and abroad. Her goal is to develop these skills during her fellowship year.

Research and Scholarship

As this report goes to press, we cannot fail to mention the most important news of the day—the distribution of the first approved COVID-19 vaccines across the US. This is an amazing accomplishment for science and we are in awe of the warp speed with which these vaccines have been developed, tested, evaluated, distributed and injected into the first recipients. There is a light now at the end of the very dark COVID tunnel.

There are all kinds of research; some is done in laboratories to study molecules, DNA, RNA, and microbes. Some is done in the clinical setting to study the efficacy of treatments on disease states, for example, cancer treatment trials. And some is done on a population level, for example, finding the best way to teach parents about safe infant sleep or motivating smokers to quit. All of these areas of research are critical and contribute to the well-being of communities.

The Department of Family Medicine is conducting a number of different types of research to answer important questions. Three unifying themes underscore the values of the Department and its research and scholarly activities: **1) eliminating health disparities; 2) prevention of illness and promotion of wellness; and 3) enhancing quality of care for the special populations that we serve.** The department, under the new leadership of Dr. Li Li, has a strong commitment to research and a vision of becoming one of the nation's leading academic Family Medicine departments. In pursuing this strategic goal, the department has begun expanding its research infrastructure and proactively engaging wide-ranging collaborations across UVA Grounds. A few of these are highlighted below.

- ◆ **Dr. Fern Hauck's** research has focused primarily on Sudden Infant Death Syndrome—identifying the risk factors and reasons for Black-White disparities (Black infants are 2-3 times more likely to die from SIDS than white infants) and studying interventions to prevent SIDS through promotion of safe infant sleep and breastfeeding. She was recently awarded an NIH R01 grant to study genetic and epigenetic determinants of SIDS with colleagues in the Center for Public Health Genomics at UVA and others at East Carolina University.
- ◆ **Dr. Li** has several projects in progress, a large multi-center P50 Cancer Disparities SPORE grant under review, and collaborations with the UVA Cancer Center. The focus of his research is at the intersection of molecule and population as related to colon cancer epidemiology, prevention, and disparities. He contributes significantly to the international consortium CORECT in colon cancer gene discovery and characterization. He co-leads a main project as part of the Case Comprehensive Cancer Center GI SPORE P50 program to examine 15-PGDH as a novel biomarker for personalized chemoprevention of colorectal neoplasia using aspirin. A NCI-funded cancer disparities SPORE planning grant P20 team led by Dr. Li has recently reported sharp racial disparities in epigenetic aging of right versus left normal colon tissue (*Journal of National Cancer Institute*, 2021 in press). This discovery lends support to the notion that race-differential and side-specific biological aging of colon is a novel mechanism underlying the well-documented racial disparities in colorectal cancer.

- ◆ **Drs. Siobhan Statuta and Jeremy Kent**, Sports Medicine experts, are conducting research in concussions among athletes and conditions unique to women athletes, respectively.
- ◆ **Dr. Statuta** is the lead for an NCAA study with UVA. Specifically, this is a nationwide NCAA study, involving over 80 institutions. They are tracking short and long-term cardiac and exercise effects of COVID on elite athletes - in our case, Division 1 athletes. This involves tracking their incoming EKG's and comparing them to post-COVID EKGs, echocardiograms, and other tests. **Dr. Kent** is also assisting with this project.
- ◆ **Drs. Kate DeGeorge and Nicole Jensen** are seeking funding for an exciting project to evaluate topical cannabidiol in the treatment of knee osteoarthritis.
- ◆ **Our residents** are actively engaged in developing and conducting a quality improvement project each year —this year's project is to increase depression screening of all adults.
- ◆ One of our residents, **Dr. Ory Streeter**, is working on an alcohol screening project with **John Gazewood, MD** and **Rebekah Compton, DNP, FNP**.
- ◆ Another resident, **Dr. Ben Neltner**, along with **Terri Babineau MD, Rebekah Compton, DNP** and **Christa Brooker, PharmD** are working on an aspirin use project to address the use of aspirin in those individuals for whom aspirin may cause greater harm than benefit.
- ◆ **Rebekah Compton, DNP** and our resident, **Dr. Nadia Saif (PGY3)** are conducting a quality improvement project to increase patients' use of MyChart (electronic medical record communication).

Research Support

- ◆ We are delighted to have recently hired Sarah Blackstone, PhD as the Research Program Advisor to help faculty in developing new research projects, grant writing and other scholarly activities.
- ◆ Lisa Rollins, PhD, Director of the Department's Fellowship Program, also provides valuable support to faculty, fellows and residents in research, grant writing and scholarship.
- ◆ Dr. Xianqing Sun, statistician, and Fangcheng Yuan, MPH, research technician, provide exceptional support to Drs. Li and Hauck's ongoing projects.

We hope to further engage our faculty in scholarly pursuits in the year ahead by developing structured educational seminars and a Research Committee to provide ongoing advice and support of new study ideas.



Curtis G. Hames Research Award

Dr. Fern R. Hauck was the 2020 recipient of the Curtis G Hames Research Award. This award, "honors those individuals whose careers over the years exemplify dedication to research in family medicine," and is a joint award of the Society of Teachers of Family Medicine, the American Academy of Family Physicians, and the North American Primary Care Research Group. The award was bestowed virtually to Dr. Hauck during the Annual STFM Conference Awards Program in August, 2020. She also presented a lecture in conjunction with the award entitled, "Finding Your Passion in Research: Advancing the Discipline of Family Medicine Research."



Dr. Hauck giving her virtual acceptance speech, with the award statue to her left

Dr. Hauck's research career began at Case Western Reserve University in Cleveland, Ohio where she earned a Master's Degree in Family Medicine and studied with Drs. Jack Medalie and Stephen Zyzanski, two nationally recognized family medicine leaders in research who became treasured mentors. At Case Western, she also participated in the Robert Wood Johnson Family Practice Faculty Development and Research Fellowship, where she conducted research on humanism in physicians.

While spending a year on the Thai-Cambodian border caring for Cambodian refugees, Dr. Hauck's passion for refugee health care was ignited. Upon returning, she was selected to be an Epidemic Intelligence Service Officer for the Centers for Disease Control and Prevention (CDC) in Atlanta, Georgia, where she obtained additional research and epidemiologic training. Her work there focused on childhood nutrition issues, including a study of obesity trends among the Mescalero Apache Tribe in New Mexico.

Dr. Hauck's passion for research led her to Loyola University Chicago's Department of Preventive Medicine and Epidemiology, where she obtained her first large NIH grant to study racial-ethnic disparities in SIDS in Chicago. She founded the Loyola Department of Family Medicine after securing funding through a HRSA grant, and became its first Chair. Dr. Sim Galazka, a former colleague from Case Western who became Chair of Family Medicine at UVA, brought her to Charlottesville to grow UVA Family Medicine's research activities.

Dr. Hauck is grateful for the opportunities she has had and the colleagues and collaborators with whom she works. She is currently a Principal Investigator or Co-Investigator on three NIH-funded projects: 1) Social Confounders for Health Outcomes Linked to Education (SCHOOL), 2) Social Media and Risk Reduction Teaching Enhanced Reach (SMARTER), and 3) Using Integrative Omics as Biomarkers and Diagnostic Tools for SIDS. She recently co-edited (with former resident and fellow, Dr. Carina Brown) a volume on Immigrant and Refugee Health for *Primary Care: Clinics in Office Practice* and she has authored or co-authored close to 100 peer-reviewed and invited articles and book chapters. In reflecting on her career, she appreciates the power of mentorship and collaboration, and looks forward to working with budding researchers in the days to come.

Dr. Li Li Appointed to the United States Preventive Services Task Force (USPSTF)

By Eric Swensen

Public Information Officer, UVA Health

UVA Health's Li Li, MD, PhD, MPH, has been appointed to the U.S. Preventive Services Task Force. The USPSTF makes important recommendations on screenings and other preventive healthcare measures to help Americans live healthier lives.

We are fortunate to have some of the world's foremost medical experts at UVA Health, and Dr. Li represents our very best," said K. Craig Kent, MD, Executive Vice President for Health Affairs. "I'm confident that his expertise in primary care, population health, and clinical translational research will be invaluable to this prestigious group, which sets standards for clinicians around the country."

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine. Preventive measures reviewed and recommended by the Task Force have included colorectal cancer screening for patients ages 50-75 and mammograms to screen for breast cancer for women ages 50-74.

Members come from primary care and prevention-related fields, including internal medicine family medicine, pediatrics, behavioral health, obstetrics/gynecology and nursing. Members serve four-year terms.

"On behalf of my fellow Task Force members, I am happy to welcome Dr. Li to the Task Force," said Task Force Chair Alex H. Krist, MD, MPH. "His clinical and research expertise in cancer prevention and evidence-based medicine, specifically his commitment to addressing health disparities in cancer care, will serve the Task Force well."

Li is a board-certified family physician and the Walter M. Seward professor and Chair of Family Medicine at the University of Virginia School of Medicine. He is also Director of Population Health at UVA Health and leader of the Cancer Control and Population Health program at UVA Cancer Center. Li's research integrates genomic discoveries and population studies with a focus on colorectal cancer causes, risk assessment, early detection and prevention, along with cancer health disparities. His research has received funding from the Damon-Runyon Cancer Research Foundation, the National Cancer Institute and the American Cancer Society.

To learn more about Li and all members of the Task Force, visit the U.S. Preventative Services Task Force website: <https://uspreventiveservicestaskforce.org/uspstf/>



Li Li, MD, PhD, MPH

Faculty Publications

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Rollins LK. Enhancing Your Scholarship as a Family Medicine Junior Faculty Member. *Family Medicine and Community Health*. 2020; **8**:e000426. Doi:10.1136/fmch-2020-000426.

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Myerholtz L, Baker HM, **Rollins LK**, Page CP. Utilizing the F3App to Capture Learner Feedback about Faculty Teaching. *Family Medicine*. April 2020; 52(4): 262-269.

Legrand F, Herrick J, Makiya M, Ramanathan R, **Thompson R**, Rampertaap S, Stoddard J, Ware JA, Fay M, Holland-Thomas N, Nutman T, Klion A. A randomized, placebo-controlled, double-blind pilot study of single-dose humanized anti-IL5 antibody (reslizumab) for the reduction of eosinophilia following diethylcarbamazine treatment of Loa loa infection. *Clinical Infectious Diseases*. 2020 Sep 10:ciaa1365. doi: 10.1093/cid/ciaa1365. Epub ahead of print. PMID: 32910141.

Active Research Grants

Hauck – 1 R01 HD101518-01 “Using Integrative Omics as Biomarkers and Diagnostic Tools for SIDS” 09/2020-08/2024

Li – P20CA233216-03 (MPIs: Berger, Li); “Case Comprehensive Cancer Center (Case CCC) Cancer Health Disparities SPORE Planning Grant” - 09/01/2020-08/31/2021

Li—P20 CA233216 (MPIs Berger,Li); **Project 1** (Li, Coulton): “Epigenetic age acceleration, neighborhood disadvantage, and racial disparities in risk of colon neoplasia.” 09/13/2018—08/12/2021

Li—2P50 CA150964-06A1 (Markowitz); NIH/NCI; 09/01/2017—08/31/2022—*Case Special Program of Research Excellence of GI Malignancy (GI SPORE)*; **Project 1** (PDs: Markowitz, Li, Berger): “Targeting 15-PGDH in colon cancer risk, prevention and treatment.”

Li— RSG-16-049-01 – MPC (Xu); American Society (Li—Co-I); 01/01/2021—12/31/2021—Human Gut Microbiome and Cancer

Li—P30 CA044579-28S3 NIH/NCI (PI: Loughran; PD: Li); 09/01/2020—08/30/2021— CCSG supplement for new interdisciplinary research leading to NCI P01 applications

Li – UVACC Pilot Project (MPI), “Epigenetic aging of R vs L colon: racial disparities and sugar-sweetened beverages” – 09/01/2020-09/10/2021

Honors and Awards

New Fellows in Professional Organizations

Sharon Diamond Myrsten

2020 Named a Fellow of the American Academy of Family Physicians (FAAFP)

Fern Hauck

2020 Named a Fellow of the American Academy of Family Physicians (FAAFP)

Siobhan Statuta

2020 Named a Fellow of the American College of Sports Medicine (FACSM)

Selected for: The American Medical Society for Sports Medicine (AMSSM) Junior Traveling Fellowship to New Zealand (postponed due to COVID)

Other Honors and Awards

Claudia Allen

2019 Steven A. Meixel, MD Award for Excellence in Teaching (Awarded by residents in UVA Family Medicine)

2020 Dean's Award for Clinical Excellence, UVA School of Medicine

Catherine Casey

2020 Virginia Family Physician of the Year

2020 John T. Casteen III Diversity, Equity and Inclusion Leadership Award, UVA

Sarah Dalrymple

2020 Resident Teaching Award, UVA Family Medicine

Honors and Awards (continued)

Kate DeGeorge

- 2020 American Family Physician (journal) Number 1 top viewed review for 2019 Treatment of the Common Cold
- 2019 “Best of C-Ville” Winner, General Practitioner, as voted in C’Ville Weekly Magazine
- 2019 Named to “Best Doctors in America”

Sharon Diamond Myrsten

- 2019 Accepted to participate in the AAMC Early Career Leadership Development Seminar

John Gazewood

Alcohol Screening and Brief Intervention Office Champions Project (AAFP)

Fern Hauck

- 2020 Curtis G. Hames Research Award (see description on P. 23)
- 2019 Distinguished Dozen Awardee, Daily Progress (Newspaper), Charlottesville, VA
- 2019 Named to “Best Doctors in America”

Li Li

- 2020 Appointed to the USPSTF for a four-year term (see description on P. 24)

Andy Lockman

- 2019 Named to “Best Doctors in America”
Virginia Living’s “Top Doctors”

Four of our physician providers and 2 of our NP providers were recognized by the UVA Medical Center as Outstanding Providers for Patient Experience (90th percentile):

Catherine Casey, MD (Crozet)

Steve Heim, MD, MSPH (Stoney Creek)

Kristine Shannon, FNP, MSN, RN (Stoney Creek)

Andy Lockman, MD (Crossroads)

Kate DeGeorge, MD, MS (Crossroads)

Carolyn Friedman, FNP, MSN (Primary Care Ctr.)