



KEATS SOCIETY

DEPARTMENT OF RADIOLOGY
AND MEDICAL IMAGING
ALUMNI SOCIETY



CHAIR'S CORNER

R-E-S-P-E-C-T: It's better for patient care

As the President of the Society of Interventional Radiology (SIR), I wrote a brief column that I thought I would share with the Keats Society (1). To those of you who are members of the SIR, I apologize for the redundancy.

Several years ago, someone gave me the two-part article by Leape et al. on a culture of respect (2, 3). Perhaps the articles were for my own interest or directed specifically to benefit me. Who knows, but the message conveyed in the articles did resonate with me. Upon reading the articles, I realized that over the years, I could have been a better mentor and colleague and contributed more to the creation of a culture of respect. I have also come to recognize that the actions and interactions of physicians can either empower or disrupt teamwork and collaboration. Unfortunately, as physicians, we can become so focused on our own wants, desires, anxieties, frustrations, and insecurities, that we fail to remember the common courtesy of treating the members of our team with dignity and respect.



Dr. Leape, a professor of health policy at the Harvard School of Public Health, and his co-authors outlined numerous acts of disrespect that, unfortunately, may be accepted as a way of life in medicine. They showed how these acts can result in harm to patients. "A substantial barrier to progress in patient safety is a dysfunctional culture rooted in widespread disrespect," they detailed. "Disrespect is a threat to patient safety because it inhibits collegiality and cooperation essential to teamwork, cuts off communication, undermines morale and inhibits compliance with and implementation of new practices." "A single physician can poison the atmosphere" through disruptive and dismissive behavior, humiliating or intimidating colleagues or staff in front of others, not acknowledging personal boundaries, outbursts of anger, lack of cooperation, demonstrating an unwillingness to compromise, poor communication or hand-off of care, or insensitive comments about gender, race, appearances or socioeconomic or educational status.

Physicians are leaders and should hold themselves to the highest bar of professional conduct and model the way by inspiring and motivating those around us through positive interactions and by demonstrating respectful behaviors. We should be the drivers of collaborations and team-oriented efforts that value every member of the patient care team. Each member of the team, no matter how large or small their perceived role may be, wants to contribute to patient care. They desire and deserve to be treated with respect. Indeed, many of us have experienced disruptive and disrespectful behaviors during our training

R-E-S-P-E-C-T: It's better for patient care (continued)

or in our workplace and have witnessed the resultant tensions, dissatisfaction, absence of teamwork, and reduced quality of patient care.

Educating physicians and staff on appropriate behaviors; identifying those individuals who may need constructive feedback via personal conversations, annual performance evaluations, or specific counseling and training; holding individuals accountable for their actions and interactions; and developing team building sessions (often with help from a professional facilitator) are tactics employed to help establish better interpersonal communications, more trust and a culture of respect. Creating programs that recognize the efforts of team members also helps to develop mutual respect. Just the act of saying a sincere "thank you" to your team will help. Ultimately, the goal is to have a supportive and respectful atmosphere in an effort to optimize patient care and enhance the professional satisfaction of all health care providers.

I encourage all of you to read these two articles by Leape et al., and then take time to self-reflect. I wish I had been given advice on this simple but critical message or had access to these articles earlier in my career. Use some of your own ideas and some of the suggestions in the articles to help create a culture of respect in your workplace. Your patients and colleagues will benefit from your leadership. It is also likely that your own personal and professional gratification will increase, and, perhaps, even positively influence your interactions outside of the workplace.

Best wishes, Alan



References

1. Matsumoto AH. RESPECT: It's better for patient care. IR News Quarterly 2015; 3: 4.
2. Leape LL, et al. Perspective: A Culture of Respect, Part 1: The Nature and Causes of Disrespectful Behavior by Physicians. Academic Medicine 2012; 87: 845-852.
3. Leape LL, et al. Perspective: A Culture of Respect, Part 2: Creating a Culture of Respect. Academic Medicine 2012; 87: 853-858.

WELCOME

Dan Wassilchalk, MHSA

Chief Operating Officer

The Department of Radiology and Medical Imaging is pleased to introduce Dan Wassilchalk as our new Chief Operating Officer. Dan joined our department on February 29, coming from the University of Pittsburgh Medical Center, where he most recently served as Executive Administrator for the Department of Radiology Physician Services Division.

Prior to his 10 years with UPMC, Dan held leadership positions including:

- Director, Departments of Performance Improvement/Utilization Management and Admitting/Registration at The John Hopkins Hospital.
- Executive Director of Quality Services and Risk Manager at Holy Cross Hospital, Ft. Lauderdale, FL.

Dan holds a B.S. in Health Records Administration from the University of Pittsburgh and a Master's degree in Health Administration from George Washington University. He is currently a PhD candidate at the Johns Hopkins University Bloomberg School of Public Health.



Dan and his wife, Maria, have two grown daughters – Emily and Anna.

Please join us in welcoming Dan to the department.

PRESIDENT'S CORNER

I hope that 2016 has started out to be, and will continue to be, a great year for you and yours. The Keats Society is here for you like a family, to be there when we need each other.

The Radiology Department at UVa is a special place, and I was fortunate to have both trained there and stayed on the faculty thus being in a position to help patients and teach residents. In my experience, it was the people in our department, from the Chairman to the housekeeping staff, who were so supportive and friendly that it made for very pleasant work and it made innovation possible.

We had a great time at the RSNA reception in Chicago this past November, connecting with many old friends. It was wonderful to hear that some are excelling in private practice, some are directing Radiology departments, some are directing Radiology residencies and all are doing what they can to improve the quality of our medical care. It makes me very happy to think of the difference that our Department and members of the Keats Society have made for patients over the years.

One of my goals as President has been to tidy up our database so we can stay in touch with our members more effectively. Given that email seems to be the easiest and simplest way to stay in touch, and knowing that we want to keep you informed about the developments in our department, it would be great if everyone who has an email address would forward it to Karen Barden at karen.barden@virginia.edu

I am very grateful for the generous gifts from Keats Society members, faculty and friends of the Keats Society to the SBG International Resident Travel Fund. These gifts totaled over \$25,000 in December 2015 alone. My goal is to complete the fundraising for this endowment. Our first team of residents was very successful in Uganda, and we are currently reviewing the applications from our residents for the next team. Thanks to Dr. Juliana Bueno for her steadfast work as leader and **Special Thanks** to all of you who have contributed. I am pleased to say that in a relatively short period, the fund has achieved over two-thirds of our goal. I continue to donate to this fund because I believe that it will make a difference in our residents, our residency program and in the lives of Radiologists and patients in Uganda.

Please join me in this support and contact me if I can provide any information about the fund or the department. I may have retired, but I haven't forgotten. SBG2D@hscmail.mcc.virginia.edu



RESIDENT CORNER

Boards season is upon us! The second week of June each of our third year residents will travel to Chicago to take the ABR's Core Exam. Between now and then many evening and weekend hours will be spent pouring over review books, grinding through question banks, and learning physics. No time is more appropriate to thank the donors who support the Keats educational mission and enable our residents to have the very best opportunities.

This year a significant amount of your generous donations will be used to pay the registration fee for a new innovative physics review course offered in Boston for our third year residents. In addition, our subscription to RadPrimer gives us access to over 6,000 questions which we will all use to prepare for the Core Exam. Not only third years benefit from the Keats donations. Every day residents at all levels use the e-Anatomy website at the workstation as a quick anatomy reference. They also have great interactive physics tutorials. In addition, this year a small amount will be allotted to each resident in order to purchase a radiology themed app for their smart phone.

These are **just a few of the highlights of how your donations help to make the UVA residency one of the best in the country.** I want to take this opportunity to say 'thank you' on behalf of all of the residents. Your generosity truly makes a difference!

Zachary Roeder, MD
Academic Chief Resident



INTERNATIONAL HEALTH TRACK



No one can live happily who has regard to himself alone and transforms everything into a question of his own utility; you must live for your neighbor, if you would live for yourself.

Lucius Annaeus Seneca, MD



Almost two years ago I made my first trip to Mbarara, Uganda, not knowing the new route that my professional life was going to take after visiting this place. As the director of the RAD AIDs chapter at UVA, an institution that oversees radiology programs in international health, I wanted to explore opportunities for our Department to extend a collaboration program and primarily look for a place where our residents could have the opportunity to learn and practice in a resource limited setting. Hosting additional collaboration programs with our Institution, the Mbarara University of Science and Technology and its Radiology Department were the perfect setting to start our activities.

Two years later, I am proud to say we are now part of one of a small number of programs in the country that has a radiology global health leadership track incorporated in the residency. After recently returning from the first trip with our two residents in this track, where we spent hours teaching the radiology staff and interacting with other clinical groups in the hospital to increase the visibility of Radiology as a specialty, I realized the magnitude of our activities, the many opportunities we have to make a difference, and the invaluable opportunity for this experience that our radiology residents now have.

We are blessed to count on the endowment fund Dr. Spencer Gay started, and I am proud to be able to help grow the seeds he planted for international health activities in our Department. On behalf of our colleagues in Uganda, I want to **thank the Keats Society members** who by their contributions have helped make this program possible. It is because of your support that our residents can now count on this opportunity and our Department can reach out to communities with limited resources and help spread knowledge; after all, knowledge changes fate.

SAVE THE DATE

RSNA Alumni & Friends Reception

Tuesday, November 29, 2016 | 6:30 - 8:30 pm
Intercontinental Hotel, Chicago, IL

Keats Society Homecoming Reunion Weekend

May 5-6, 2017

Mark your calendar and plan to join us!