Taking Charge of Change

In the Fall 2016 Keats Society Alumni Newsletter, my column on the topic of change was influenced by the book, *Who Moved My Cheese*. In this longtime bestseller, the author, Dr. Spencer Johnson, relays a parable about mice living in a maze in which their cheese is continually being moved by forces beyond their control. His message was that change is inevitable, is often beyond one’s control, requires adaptation, and may necessitate looking for new sources of “cheese.” Building from this message, Harvard Business Professor Deepak Malhotra reshapes the mouse parable in his book, *I Moved Your Cheese*, to convey a more empowering message: that chasing and finding new cheese, especially in someone else’s maze, is not likely to lead to long-term happiness. Rather, Malhotra suggests that we should not only learn how to effectively adapt to change, but also seek to understand why the change has occurred so that we can exert greater control over both our behaviors and our circumstances. In doing so, we can have a greater influence on the changes we will experience and how we experience and respond to them—or, where we find (or make) our cheese.

In the spirit of *I Moved Your Cheese*, our department has developed a number of initiatives to proactively reshape our immediate environment in the midst of larger institutional and national changes in healthcare. Two key strategies involve extending our outreach and creating a more positive patient and workplace environment.

"While often uncertain and uncomfortable, change can also be exciting."

Regarding our physical environment, we have, over the past few years, installed digital monitors throughout the department and created unique content that features and celebrates the incredible staff, trainees, and faculty with whom we work every day. This information also educates patients and their families about the specific talents and training of their team of technologists, nurses, and radiologists who collaborate to optimize their care. Additionally, we have embarked on a department-wide art design project meant to enliven our surroundings and provide patients, families, and department members a much warmer and more welcoming environment in which to receive care and to work. This project should be completed by April 2017.

We have also completely remodeled the Radiology and Medical Imaging reception area and the MRI suite at the Medical Center. The reception area now has a much more open and comfortable feeling, and the digital screens within the space help to familiarize patients with whom we work with our department. The new Medical Center MRI suite features state-of-the-art technology (3T Prisma, 3T Skyra and 1.5T Aera) and was designed for enhanced MRI safety, improved patient flow, and a more positive patient environment.

In terms of expanding our outreach and enhancing our work efficiencies, we have partnered with the Medical Center to design a three-story Educational Resource Center (ERC), which is located across the street from the Medical Center, adjacent to the Emily Couric Cancer Center. The ERC will be operational in...
A Brief History of the Keats Society

One cannot begin to speak of the history of the Keats Society without marveling at the life of Theodore E. Keats himself: "a dedicated teacher, prolific writer and an exceptional role model."\(^1\) His obituary states simply, "A truly remarkable Virginian gentleman."\(^2\) He set the course and tone for the University of Virginia Department of Radiology. It is therefore fitting that our society bears his name.

As a young man, Dr. Keats considered pursuing music and show business but ultimately pursued medicine as his profession. Music was a cherished avocation his entire life. Dr. Keats accepted the position of Chairman at the UVA Department of Radiology in 1964. He served there 28 years, until 1991.

Dr. Keats’ leadership inspired Dr. Hans Riddervold to establish the Keats Society in his honor. With Dr. Hans Riddervold as program chair and Dr. Dan Seale as the first president, the Keats Radiologic Society held its first meeting in April of 1979. The subsequent homecoming weekends were high-spirited with some banquets held in the Rotunda.

After 15 years of progress, the society became inactive in 1994. But though the society lay dormant, its spirit was not dead. In 2004, Dr. John Ciambotti and Dr. Keats combined their efforts and resurrected the society. Karen Barden began serving as Executive Director and has been a driving force since then. The first homecoming weekend since the society’s revival took place in 2005 and was a great success with over 100 attendees, five hours of CME, and a cocktail party at Dr. and Pat Keats’ beautiful home. Since, the society has reunited biennially.

The focus of the Keats Society is to support radiology residency education at UVA. Together, we have raised funds for web-based anatomy apps for PACS workstations, computer upgrades for resident study rooms, educational phone apps, and a highly-rated physics review course residents attend prior to the first part of the board exam. In addition, Dr. Keats and his wife Patt have endowed the Keats Lectureship to bring in visiting professors to speak at our biennial meetings.

In a more recent endeavor, Keats Society members and others have generously provided funding for the Spencer B. Gay International Travel fund to give residents the opportunity to travel to third world countries where they teach and learn from their colleagues there.

Throughout its existence, the Keats Society has been a means for society members to connect and reconnect with each other. For some, this has resulted in a newly hired member of a radiology group or a recommendation for a future hire. The RSNA reception and the biennial meeting is a place to reconnect and remember with old friends and make new ones.

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\(^2\) Originally published by the Royal Australian and New Zealand College of Radiologists.
Dr. Hans Riddervold: On Norway, Radiology, and Golf

Before we discovered antibiotics, Dr. Hans Riddervold had already begun his medical career. Born in 1923, he is now a whip-smart 94 year old with a rich history and strong family ties. With a thick Norwegian accent, he told us his story and showed us pieces he had collected from travelling the world. One clay pot from Korea was over 1,300 years old – just one of many treasured artifacts in his home at the Colonnades in Charlottesville, VA.

In 1938 as a 15-year-old young man, Dr. Riddervold started helping his father process X-ray films, a process much like photographers previously used. "Radiology was a developing and fascinating thing. I saw my dad doing it, and he was the one I wanted to be like," said Dr. Riddervold. He remained in radiology for the rest of his life.

In April 1940, the Germans occupied Norway for over five years. "This was a very hard time that included the closing of the Oslo University," stated Dr. Riddervold. As a young man in 1944-1945, he spent time in the Norwegian forces in both Sweden and Britain. Having completed his medical education in 1951, he later served in the Norwegian Mobile Army Surgical Hospital in Korea. Eight years later, while in Korea at the Scandinavian University Hospital, he met the love of his life, Anna Greta. They have now been married for 53 years.

In 1967, Dr. Riddervold moved from Norway to Virginia, following the footsteps of Dr. Ivar Enge. Dr. Enge was a well-known Norwegian Interventional Radiologist who had a Visiting Professorship at the University of Virginia and went on to develop Special Procedures (known today as Interventional Radiology) at the UVA Department of Radiology. Dr. Riddervold began in much the same way with a Visiting Professorship that eventually turned into a faculty position. He described the rapid transition from Norway to Virginia, saying, "I started applying for a green card one year before I came over here. I got the green card on Friday, and then the plane left the next day on Saturday."

Always sensitive to his roots, Dr. Riddervold saw advantages in connecting Norwegian and Virginian Radiologists. So in 1969, he founded the Virginia/Norwegian Radiological Society. The Society held four meetings in Oslo, Norway from early 1970 – 1994. At the last meeting, the Radiology staff of UVA, Oslo City Hospital, and Oslo University Hospital gave presentations over the three-day meetings.

It was based on this model and the inspiring life of Theodore E. Keats that led Dr. Riddervold to help start the Keats Society.

Aside from his pivotal work with the Keats Society, Dr. Riddervold’s life is colored with other accomplishments. For example, in 1991, he published his book Easily Missed Fractures and Corner Signs in Radiology. On the cover is the signature magnifying glass that defined Dr. Riddervold. "When someone was having difficulty, there was always me with a magnifying glass," he said. The inside cover dedicates the book: "To my father, the late Julius Riddervold, a surgeon of the old school, and to my wife, Anna Greta, who made this book possible."

With all these looming accomplishments, we asked Dr. Riddervold what part of his life was most meaningful to him. Without hesitation, he said, "Family." He has six
I got the global health bug when I travelled to the Middle East as a med student, and it never left. This past December, Dr. Jennifer Pierce and I spent four days at the Mbarara University of Science and Technology (MUST) giving lectures, facilitating ultrasound workshops, attending meetings with administration throughout the hospital, and having case conferences.

Currently, there are two residents in the radiology department at MUST: A first-year resident named Prossy and a second-year resident named Kenneth. Their instructor is Moses, and he’s done a fantastic job training them. However, there is a gap in their education. Prossy and Kenneth don’t get a lot of experience with cross-sectional imaging. The CT scanner they have is currently broken, and they don’t have an MRI.

We were able to supply them with iPads, generously donated by Boston Scientific Corporation, with different apps that have educational materials to supplement their training. One app includes lectures, 15-20 minute talks on almost any topic. Another lets them take board-style quizzes, as they have tests similar to ours. Some are reference materials, such as charts comparing normal measurements to abnormal measurements for different parts of the body. They even received an app on MRI physics, something they haven’t learned about yet but is important for them to know.

This educational experience both for me and the people at MUST was 100% funded by the Spencer B. Gay International Resident Travel Fund. Many of our Keats Society alumni have given financially and we greatly appreciate your support.

Through you, we will be able to continue a presence at MUST so that their residents know us and realize that we are interested and invested in their education. Furthermore, as we maintain a continued presence at MUST, we remain committed to our goals of both teaching the residents and advocating for the role of radiology within the hospital that we serve.

Connor Louden, MD
Third-Year Resident
Greetings,

It has been a great honor to serve as President of the Keats Society for the last two years and work with you toward our mutual goals. I believe that we have accomplished a great deal together.

The Keats Society reception at the 2016 RSNA in Chicago at the Intercontinental Hotel was just great. I really enjoyed visiting with friends and seeing how they are succeeding in so many ways. Several mentioned to me that they felt their time at UVA had been very special for them and that they felt so fortunate to have trained there. I agree. UVA was and continues to be an exceptional place to train, practice and teach. We maintain a collegial atmosphere while providing outstanding education and cutting-edge medical care.

I am especially grateful to all our donors, those Keats Society members, faculty and friends of the Keats Society. In particular, I want to thank those who gave to the Spencer B. Gay International Resident Travel Fund. We have officially met our initial goal of a $250,000 endowment! You supported a growth opportunity for radiologists in remote medical locations as well as our residents. Thanks goes out to Jenni Pierce for stepping up and filling Juliana Bueno’s shoes as faculty leader for this enterprise. As we move forward, we will continue to raise funds to support faculty travel while they accompany our international residents.

Finally, I look forward to seeing as many of you as possible at the 2017 Keats Homecoming Weekend on May 5-6, 2017, where we will induct our incoming president, Dr. John Gaughen. John has helped plan the weekend, which promises to be fun, informative and fulfilling. I sincerely hope to see you there. May in C’ville is lovely, made only better by your presence. Register here: http://bit.ly/2kPstuM

I am proud to have trained at UVA and glad to have stayed connected while in retirement. I continue to make new friends, but my years at UVA were very special—made so by the kind and generous people I worked with. Thanks to you all.

Spencer B. Gay, M.D.

RSNA Alumni and Friends Reception

For the twelfth consecutive year, UVA Radiology staff, alumni, and friends gathered in Chicago during the 2016 RSNA. The reception was held on Tuesday, November 29 at the beautiful Intercontinental Hotel. Dr. Alan Matsumoto welcomed guests and Drs. Gay, Pierce, and Baheti gave an update on the recent trip to Uganda through the Spencer B. Gay Resident International Resident Travel Fund. View pictures of the event here: http://bit.ly/2lvTcKs

Please save the date and plan to join us this on Tuesday, November 28, 2017 in Chicago.
April 2017 and will include an educational and simulation center, an outpatient pharmacy and outpatient imaging services. The ERC imaging facility will house a 3T MRI, a dual-energy CT, and two Ultrasound units, as well as diagnostic X-ray. The architectural design of the ERC is purposely spacious and open, allowing natural sunlight to fully bathe the entrance below street level. We plan to move all appropriate outpatient imaging services from the Medical Center to the ERC to eliminate the less-than-optimal workflow dynamics such as delays caused by emergency room patients and/or inpatients.

Additionally, we have, over the past five years, expanded our outpatient imaging services to the Zion Crossroads (east) and Northridge (west) facilities, moved our Nuclear Medicine operation into the Emily Couric Cancer Center (across the street from the Medical Center), expanded our Pediatric Imaging services to the Battle Building Children’s Center (Main Street) and completely remodeled all of our radiology reading rooms and faculty offices.

In 2006, Interventional Radiology (IR) moved to the first floor of the Medical Center into an expanded area of new space. However, there are already new plans to co-locate IR with all of Interventional Cardiology and Endovascular Surgery on the second floor of a new $386M Bed Tower and Emergency Department (ED) expansion. The benefits of this move include expanding to seven IR suites into an OR environment, including a CT Myabi room, more space for prep and recovery with 24-hour staffing, and better opportunities to collaborate across specialties. The IR move will also allow for much-needed space for venous access and our growing Body Imaging procedural services as well as the creation of a “hub” for transportation services. This expansion project has already broken ground where the old heliport and MRI pavilion were previously located and is scheduled for completion in late 2019.

While often uncertain and uncomfortable, change can also be exciting, as I hope these examples convey. Indeed, the more we can do to affect and control our destiny, the easier it is to adapt and adjust to change—to have a hand in shaping the results, and to know where to find the new cheese.

I invite you to visit Charlottesville this spring for the Keats Alumni Homecoming Weekend, May 5-6, 2017, to share in some quality education, heartfelt cheer and fond memories. While you’re here, come by for a tour to see some of the innovative changes we are implementing in your former department.

All the best,

Alan H. Matsumoto, MD