



Department of Radiology  
and Medical Imaging



# KEATS SOCIETY

SPRING 2020

## AND ALONG CAME COVID-19...

*by Alan Matsumoto, MD,  
Chair*



These uncharted waters and challenging times are very scary and daunting for all of us. Worrying about our own health and the well-being of our loved ones and friends; feeling isolated due to social distancing; and thinking about the financial effects of this crisis are emotionally draining and associated with a sense of a loss of control. Indeed, we are experiencing a crisis in health care of epic proportions.

During times of crisis, leadership must be decisive, and importantly, they must also show that they truly care about the well-being of their team members and acknowledge that it's OK and understandable to feel afraid and alone. By acknowledging that these emotions are normal, members of the team feel safer and reassured that they are not alone in feeling afraid.

Leadership must also listen well and communicate effectively during times of chaos and crisis by providing reliable, timely and consistent information, while also being willing to admit when they do not know the answers. By sharing knowledge, team members become more aware of and better understand the situation and will feel more empowered and engaged to be part

of the solution. To that end, in mid-March, the department implemented daily calls with the chair, division chiefs, vice chairs and non-physician radiology administrative leadership to share information and answer questions. In doing so, the team became more aligned and better able to adapt to the COVID-19 conundrum and make timely, albeit difficult, decisions.

As part of the adaptation process, travel restrictions were implemented before system-wide restrictions occurred. Workstations were rapidly deployed to the homes of faculty to allow work to occur remotely, and procedural team cohorts were created to minimize team member exposures. Standard operating procedures were developed to manage COVID-19 patients and patients under investigation for all modalities and procedural areas and shared with the epidemiologists. Non-critical expenses were frozen as it was becoming evident that revenues were dramatically decreasing. Although painful for all, when staff furloughs and leadership and faculty compensation reductions were mandated, faculty and staff were very understanding, and indeed, provided ideas on how to best manage these difficult financial decisions. In many ways, the COVID-19 conundrum was unifying and brought our teams closer together.

As the reinfection rate index has fallen below 1.0 in the majority of states, "reopening" of many businesses has started and surgical and procedural schedules are ramping up to take

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care of backlogs. Inpatient and operating room censuses are already starting to normalize at UVA, and outpatient imaging volumes are rapidly increasing. To quote UVA Men's Basketball coach Tony Bennett following UVA's first round loss as the overall #1 seed in the 2018 NCAA basketball tournament to #16 seed UMBC: "If you learn to use it right, the adversity, it will buy you a ticket to a place you couldn't have gone any other way." In 2019, UVA came back to win the NCAA National Championship. In the same spirit, our department is looking to adapt our practice to take advantage of the opportunities presented by the new norm of COVID-19, while we also try to account for

the potential of a resurgence of infection rates, significant impact of unemployment, loss of insurance coverage and permanent business closures. In this newsletter, we will be sharing stories about how some of you and your families and practices have been affected by and adjusted to this very challenging period in time. Please be safe and stay well.

All the best,



## AN UPDATE FROM THE PRESIDENT

Hello Keats Society! I am writing to you from my kitchen table... trying to get some work done while helping my 5th and 7th graders complete school work when they would rather immerse themselves in Clash Royale or TikTok! While searching for a "new normal," I am realizing that there is no "normal," at least not for now.

Spring was consumed with finding a new way to work while dealing with the unknown. As a breast imager, we had to stop fighting breast cancer to flatten the curve for COVID-19. Screening mammography completely disappeared. We split into teams and started doing as much work as possible from home. Luckily, our efforts were successful. We saw a low incidence of COVID-19 in our community and achieved a steady state of hospital admissions while PPE was procured. Unfortunately, efforts to flatten the curve came at a huge price, namely, major and unsustainable revenue loss. One of the toughest weeks came when the University and Health System announced furloughs and pay cuts for all. We are now fighting to bring back volumes, bring back the members of our team, and safely reopen so we can get back to caring for patients.

I feel as if I am "driving a car forward while only looking in the rearview mirror." We don't know where we are going but only see the results of our decisions. Not surprisingly, the car feels like

it is going from shoulder to shoulder. National guidelines and consensus statements often lag weeks behind our current situation and are not specific to our exact circumstances. Luckily, I am surrounded by insightful colleagues and thoughtful leadership to navigate through the uncertainty. How are we doing? What is the impact on our patients and staff? Have we reached our peak? We will only know in a few weeks when the effects of our decisions are visible in the rearview mirror.

With any crisis comes opportunity and an emphasis on how we are all connected. We are all susceptible to the virus. We are all being affected in our personal and professional lives. We must rely on each other to get through this together. Karen Barden created a way for alumni to connect to our first department virtual journal club with timely topics related to the pandemic. Current trainees, faculty, and alumni from all over the country joined and shared ideas with new and familiar faculty at UVA. We are looking for additional ways to stay connected and support each other. Please join us in these efforts.

I hope you are all staying well and staying safe. I hope a sense of "normal" returns, with new ways to stay connected and care for patients, perhaps better than we ever expected. All of our journeys are unique, but together we are stronger. Take care of yourselves while driving into the unknown.

Sincerely,

Carrie Rochman, MD



# ALUMNI CHECK-IN

*Across the country, UVA Radiology alumni and former faculty are being affected by COVID-19 in a variety of ways. Though people across the world are sharing, perhaps more than ever before, a common and challenging reality, we also know that the impact of COVID-19 has differed greatly on a local level. Depending on our locations, we have seen widely varying numbers of infections and deaths, differences in the availability of testing, and contrasting plans for lifting social distancing measures.*

*Part of the Keats Society mission is to connect our members, not only with their alma mater, but also with each other. With this in mind, we've reached out to members across the country and asked them to share their first-hand experiences during this pandemic. We wanted to know how our members, their families and their institutions were responding and adapting to this unparalleled challenge. And now we're pleased to share those stories with you. We hope they give you insight on your peers' experiences and help bring us all a little closer together.*

## **C. DOUGLAS PHILLIPS, MD FACR**

**Professor of Radiology, Weill Cornell Medical  
College  
Attending Radiologist, New York - Presbyterian  
Hospital  
New York, New York**

**UVA Residency: 1984 - 1988**

**UVA Fellowship: 1988 - 1990, Neuroradiology**

**UVA Neuroradiology Attending: 1990 - 2009**

### ***What has changed in your professional and personal life because of COVID-19?***

Everything changed in the hospital. Many of our radiology staff at New York-Presbyterian are working from home via PACS, and we all do a few days a week in the hospital to perform procedures and provide consultations.

During a time like this, everyone is reliant on

their health systems to provide them with PPE and other necessities. At New York-Presbyterian, we got to an almost overwhelmed state but the near lockdown kept us from going under. We routinely work in surgical masks and use N95 masks and face shields during procedures. We've all had to get comfortable with donning and doffing gowns and other materials because, of course, it's critical to be safe in the hospital environment.



Beyond the hospital walls, I'm staying in, mostly. And asking everyone else I know to do the same.

### ***What are you most looking forward to when COVID is behind us?***

Going to museums, restaurants and the park. And not wearing masks and washing my hands incessantly.

## **JOIN US FOR THURSDAY'S JOURNAL CLUB!**

You're invited to join us for our monthly journal club. Dr. Ziv Haskal, vice chair of professional and career development and program director of vascular and interventional radiology fellowship, will facilitate the club one Thursday each month via Webex on a variety of topics. Be on the lookout for email invites to join us. Thanks to those of you who have already joined. We look forward to seeing you online!

# JOHN SCHEEL, MD

**Associate Professor, University of Washington  
Seattle, Washington**

**UVA Residency: 2007 - 2011**

**UVA Fellowship: 2012, Breast Imaging**

## ***What has changed in your professional and personal life because of COVID-19?***

Most of the people I've been in touch with from my residency class noted a decrease in patient volumes at their institutions. Some have gone on furlough and all were preparing to be reassigned

to help respond to COVID. Fortunately, COVID levels seem to have stabilized here in the Seattle area and many places elsewhere, so hopefully everything will return to normal at some point. Until then, I'm still enjoying life.

## ***What are you most looking forward to when COVID is behind us?***

Not really looking forward to anything other than today and tomorrow. And maybe the little league baseball season!

***\*The class of 2011 sponsored a lunch for NYC radiology residents who have been reassigned / deployed to cover the ICUs and take care of COVID patients.***

# MARK DIXON, MD

**Commonwealth Radiology  
Richmond, Virginia**

**UVA Residency: 2004 - 2008**

**UVA Fellowship: 2009, Breast Imaging**

## ***What has changed in your professional and personal life because of COVID-19?***

We've all cut back on our hours over the last two months. All but one of our breast centers have been closed and we've been cancelling all breast imaging except diagnostics. Most non-emergent imaging studies (CT, MRI, Ultrasound) have also been postponed, and the number of radiologists working evening and weekend

shifts has been dialed back. Additionally, most partners have taken an extra week off in March and April, as many of our outpatient imaging centers have been temporarily closed and we've only needed a skeleton crew.

All radiologists, staff, and techs are wearing PPE. Of course, it's important to protect yourself and your staff; you can't always rely on hospital leadership or politicians to know what precautions to take.

At home, we're taking lots of family walks, having lots of family movie nights, doing lots of home cooking. These are the things about this moment in time that I will miss.

## ***What are you most looking forward to when COVID is behind us?***

While the extra time off has been nice, I'm looking forward to being busy at work again. I'm looking forward to shaking hands with the patients I'm meeting, and hopefully one day putting away the masks.



## VADEN PADGETT, MD

**Commonwealth Radiology**  
**Richmond, Virginia**

**UVA Residency: 1999 - 2003**  
**UVA Fellowship: 2004, MSK**

### ***What has changed in your professional and personal life because of COVID-19?***

A lot of doctors here in Richmond are really hurting. We haven't seen any kind of surge in COVID patients and the hospitals are ghost towns. There has been a slight pickup in patients since the governor opened up the state to some procedures on May 1st.

Our volumes are down 60-70% especially in MRI, mammography and IR. While our radiologists have the capability to read from home, we decided to stay on-site instead because the rest of our staff have to be here. We're starting to slowly open up outpatient and non-emergent imaging. It's a work in progress. The biggest logistical headache is limiting appointment time slots by 50% to allow for cleaning and to decrease person-to-person interactions.

### ***What are you most looking forward to when COVID is behind us?***

I'm looking forward to my kids being able to go out with their friends again. The emotional toll on children will last far beyond the economic cost the shutdown has incurred.

## RANDY GEHL, MD

**Western Colorado Radiologic Associates and SCL Health**  
**Grand Junction, Colorado**

**UVA Residency: 1996 - 2000**  
**UVA Fellowship: 2001, MSK**

### ***What has changed in your professional and personal life because of COVID-19?***

SCL Health System doesn't allow remote workstation reading, so we've cut back one radiologist per day working the triage position and scaled back the number of patients for urgent imaging at outpatient facilities. We're

performing standard temperature screenings for outpatients and requiring masks for patients and staff. One thing we're taking extra care to do right now is to keep talking to our referring orthopedists and physicians. That communication matters now more than ever.

### ***What are you most looking forward to when COVID is behind us?***

Rafting and planning a Baja motorcycle trip in October 2021. And the Keats Society Homecoming, of course!



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## ALLISON LIPPERT, MD

Carilion Clinic New River Valley Medical Center  
Blacksburg, Virginia

UVA Residency: 2011 - 2015

UVA Fellowship: 2016, Breast Imaging

### ***What has changed in your professional and personal life because of COVID-19?***

Because of the decrease in studies performed, we've redistributed our shifts as needed and consolidated our reading seats. Each radiologist also took one week of vacation time. We have been working more nights and evenings than before and blended our reading lists to cover multiple hospitals within our system. We try to read consistently from just one reading station. Of course, there are also changes to patient protocols including screening before entering, wearing masks, separating patients in waiting rooms, etc.

At home, the kids have all been out of school and we've been trying to be creative with school work. They have also been doing Irish dance classes over Zoom and we've been spending a lot of time outside gardening. We even picked up beekeeping as a new hobby! I just try to stay optimistic and hope that things will get better soon.



### ***What are you most looking forward to when COVID is behind us?***

Getting back to outdoor social activities like music concerts.

# Save the Date

## KEATS SOCIETY HOMECOMING REUNION MAY 7-8, 2021\*

*with Theodore E. Keats Endowed Lecturer  
Dr. Geraldine McGinty*

\*date subject to change based on COVID-19. We will make the best decision for the safety of our alumni, faculty, and trainees.