

Radical Views... from the Department of Radiology

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MAY 2013



Beth Israel Deaconess
Medical Center



A teaching hospital of
Harvard Medical School



FROM THE CHIEF

Jonathan B. Kruskal, MD PhD
The events of this month have made headlines all over the world and have shown Boston to be resilient and courageous but I am most proud of our department's efforts on the day of the Boston Marathon, efforts that continue to this day. Amidst the tragedy, when BIDMC received more than 20 of those injured, our radiology technologists stepped in to action in the ER and I am pleased to have Diagnostic Radiology Manager Betsy Grady give us the details and thanks also to Nuc Med Tech Matt McMahon for his first hand account of the event from a runner's point of view and what the Boston Marathon means to him.



Elisabeth A. Grady
General Diagnostic
Radiology Manager

Many find holidays a welcome break from the routine and Patriot's Day is one that most staff enjoy as it serves as a harbinger to warmer weather. This year on Marathon Monday at 2:50pm our lives changed.

As the Diagnostic Senior Tech **Jeff Heinrich** was handing-off a pager, it starting beeping an alert: Code Triage + 20 patients, for the Emergency Department. Jeff's reaction was, "Is this real?" He headed for the ED to check out the situation and all too soon realized it was not a drill. Ambulances were lined up deep with a stream of Marathon bombing victims coming into the ED. Quickly the trauma bays filled up with 7 critically injured patients, and the ED "core" became congested with 14 less severely injured patients. The atmosphere was charged, but everyone's triage mode kicked into gear. Jeff quickly assigned all available portable units and staff to the ED. Four digital portable x-ray units arrived to the ED, each staffed with two technologists.

Outside through the chaos many technologists attending the marathon or the Sox game, made their way through the crowd to BIDMC to provide assistance; and staff who had just finished their shifts stayed through to see that all the victims were cared for promptly. All hands were on deck.

With orders for exams coming in quickly, **Mandee Martin** (ED Radiology Practice Assistant), efficiently assigned the paperwork and kept everything running smoothly and orderly. The Tech Assistants tag-teamed to help with paperwork and patients – basically anything they could do to assist, while CT and Ultrasound techs pitched in to provide extra help as well. Many spoke of how everyone from ED staff, physicians and Radiology staff acted as one team which made things run so smoothly as

patients were triaged and examined. **The worst seemed to bring out the best in staff.**

Afterwards, those who responded, physicians and techs, spoke of how valuable it was to have digital technology on the portable x-ray units. Instead of wasting precious time waiting for images to be developed with the former conventional system, the digital images were instantaneous displayed on the portable unit for immediate review by the physicians. The readiness of the imaging allowed for immediate diagnosis while minimizing any patient positioning and movement which was critical as limbs were precariously attached. One patient had a femoral laceration, but the DR image demonstrated an unseen but very large piece of shrapnel imbedded in the area of her femoral artery; within minutes she was on her way to the OR. **In more than one instance our digital systems literally proved to be a life-saver.**

After the initial ED response was met, the next hurdle was staffing coverage for the operating rooms. A quick assessment for equipment and staffing was needed for 9 OR cases. **Again technologists worked together with the OR to ensure all coverage was met.** Some of our newer techs were covering the OR, and they showed experience beyond their years in handling the multiple requests that were coming in for exams and equipment.

I wish the story ended here, but the week continued to be surreal. FBI, bag-searches, media encampments, a presidential visit, a hijacking, a shoot-out, were capped by a week-ending lock-down. More and more it felt like a movie. Again the Radiology staff stepped up for the challenge as many volunteered to ensure coverage through the weekend if the lock-down was extended.

In the end, Marathon Monday events impacted our staff and extended well-beyond the initial ED response. Radiology staff in CT, IR/INR, Ultrasound, Nursing, General Diagnostics and Residents were faced with performing exams not only on victims, but also on the two suspects. Staff experienced many conflicting emotions – anger, sadness, anxiety, helplessness and loss; but along with these feelings, there was a tremendous sense of pride in the work they were doing and hope that their efforts would bring comfort and healing to those who had lost so much. You can't adequately describe the experiences some had in the ED, OR, ICU or morgue, but we can recognize the professionalism and compassion exhibited by staff – it was beyond belief. You can never prepare for such a senseless and tragic event, but you can remember there is good in the world which is demonstrated by our staff every day. **BIDMC Radiology – Stay Strong.**

Matt McMahon's Marathon 2013

I finished the marathon about 30 minutes before the first explosion and my brother was about 10 minutes behind me. I didn't know that we had finished so close together but we both managed to collect our medals and make our way through the finishing area to collect our bags and change into our post race clothes. I was making my way down Clarendon St. answering texts when I heard the first explosion. I and a stranger next to me both turned to each other and wondered what it was (*maybe some new celebratory cannon blast on the river?*) and kept walking. Then the second blast happened, and we saw police officers beginning to sprint towards the finish line. It was at this point that we knew that something had happened, and it was also at this point that my phone died. It turns out my other brother and some of my close friends were sitting in the VIP finish line section directly across from the first blast but after the second blast I still had no idea what had happened, and couldn't get a hold of anyone. ***Luckily we had already established our post race meeting area so I tried to make my way to the Westin.*** Slowly I found out what exactly had happened, and knowing that my brother and friends were in those seats as I finished I began to get frantic. I walked into the Westin and very thankfully saw my brother who had run, and my other brother and my friends. We slowly began to get a hold of everyone we knew that was at the finish and the rest of our teammates and learned that everyone was safe. Those minutes after I found out what happened until I found my brothers were some of the most anxious moments of my life. I feel very blessed and lucky that my loved ones and friends were able to avoid what could have been an even more tragic day. I managed to run what was my fastest and best marathon to date, but my results take a back seat to everything else that happened.



Nuc Med Tech Matt McMahon (left) and his brother at the start of the marathon in Hopkinton, MA Apr. 15, 2013

of my very dear friends makes it that much more difficult to process. This was actually my 3rd marathon and 2nd Boston Marathon. I ran Boston last year in the heat, and then the Philadelphia Marathon this past November. ***This year's Boston Marathon was my fastest and best to date running a 3:33:10.*** My brother has run 11 marathons and this was his 5th consecutive Boston Marathon.

Running the Boston Marathon is something that we both look forward to each and every year. When we begin our training in the middle of December in the harsh New England weather, we look forward to the start in Hopkinton, running past TJ's in Ashland with all the bikers, past our parents and brother at mile 5 in Framingham, through the scream tunnel of Wellesley, making the turn at the Firehouse onto what for our training team is our *home-stretch*, the last 9 miles, the insane crowds that get us up the Hills of Newton, flying through the college kids in BC, hitting Kenmore just as the Red Sox game lets out, and making that final turn onto Boylston in the loudest crowd that you can imagine with the finish line in sight. The Boston Marathon is the greatest race in the world, with the greatest fans and environment in the world. It actually gives me chills right now just thinking about how amazing this race is at every turn. I love this race: 27,000 other Marathoners sharing the moment of last minute preps, snagging some last minute water or Gatorade, fueling up with bagels and bananas, stretching, getting in a little warm up run in Hopkinton. This year I hung out with my brother, and his girlfriend and some of our close friends. We snapped pictures of each other, put fake sharpie tattoos on our arms, just enjoyed one another and celebrated the fact that we were ready. We had all put in the miles and the months of training and were pumped to get started. The weather was perfect (albeit a little chilly at 7:30 am!) but not a cloud in the sky with a forecast for perfect running weather. The feeling of excitement and anticipation could not have been any higher before we all set out towards our goal of crossing that yellow finish line on Boylston in front of all of our friends and family. ***Next year my brother and I will both be back to run what is sure to be the biggest and strongest Boston Marathon ever, without question.***

I am still not sure I have fully processed the days events. My brother and I got out of town Monday evening to Milford as soon as we could but came back the next day to meet our other Marathon teammates, and see one another, and enjoy one another's company for the first time since we had said our goodbyes and good lucks in Hopkinton at the start on Monday. Watching the events unfold on a TV screen from 30 miles away, made it seem as if it were somewhere else, that it hadn't happened where we had just crossed the finish line; but when we drove back into town and saw our beautiful skyline, and then driving down Comm Ave and seeing the turn onto Hereford St. blocked, all access to Boylston St. blocked off, and finally looking back down Boylston from the Common to the finish line made it very, very real again. For someone who has spent hours running that stretch with many

Mon	Tues	Wed	Thurs	Fri
Weekly Mon Section Meetings: 12:00-1:00 MRI (monthly) [Ansin 2] 3:00-4:00 ED section meeting (monthly) [ED annex, WCC]		1 Weekly Wed Section Meetings: 11:00-12:00 MSK clinical conf 12:00-1:00 CardioThoracic, GI/GU Oncology 3:00-4:00 Mammo [TCC-484] 7:30 - 9:00 Board Review - IR (Deborah Levine)	2 Weekly Thurs Section Meetings: 12:00 - 1:30 Abd [WCC-354] 12:00-1:00 MSK 7:30 - 9:00 Board Review (Douglas Teich)	3 7:30 - 9:00 Board Review - Peds (Jen Son) 12:00-1:00 Grand Rounds: Chiefs' Rounds [Sherman Auditorium]
6 7:30 - 9:00 Board Review (TBD) 12:00-1:00 Mentorship Meeting: Radiology: What is it like in the real world? (Peter Gordon) [Shapiro (TCC)-484]	7 7:30 - 9:00 Board Review (TBD)	8 7:30 - 9:00 Board Review - IR (Rabkin)	9 7:30 - 9:00 Board Review (TBD) 2:00-3:00 West MedRads - Body Senior [TCC 484]	10 12:00-1:00 Grand Rounds: Jeffrey Garber [Sherman Auditorium]
13 7:30 - 9:00 Board Review (TBD) 1:00-2:00 Body MRI meeting [Ansin 2]	14 7:30 - 9:00 Board Review (J. Kruskal) 7:15-8:00 US meeting [WCC Gallery 304A] 10:30-11:30 NMMI meeting [GZ-103]	15 7:30 - 9:00 Board Review (TBD) 7:15 - 8:00 US meeting (WCC-304A Gallery)	16 7:30 - 9:00 Board Review - Neuro (H. Bedi)	17 12:00-1:00 Grand Rounds: MR Spectroscopy for Radiation Necrosis vs. Tumor Recurrence Post Gamma Knife Treatment (Frank Minja) [Clouse Conference Rm, WCC-352]
20 7:30 - 9:00 Board Review (TBD)	21 7:30 - 9:00 Board Review - Chest (Trotman) 8:00-9:00 IR Meeting [West Recovery]	22 7:30 - 9:00 Board Review (TBD)	23 7:30 - 9:00 Board Review (TBD) 2:00-3:00 West MedRads - Body Senior [TCC 484]	24 9:00-2:00 Morrison Research Day [Kirstein Living Rm] including Morrison/Grand Rounds: Scott Gazelle (MGH) [Sherman Aud.]
27 Memorial Day	28 7:30 - 9:00 Board Review - Breast (Slanetz) 10:30-11:30 NMMI meeting [GZ-103]	29 7:30 - 9:00 Board Review (TBD)	30 7:30 - 9:00 Board Review (TBD)	31

Mentorship Meetings*: As the end of the academic year approaches, it's good to save the date for the following Mentorship Meetings, all held in Shapiro 484, 12 noon to 1:00pm:

May 6 - Peter Gordon - Radiology: what is it like in the "real world"

June 3 - Mary Hochman - The One Hour MBA for MDs

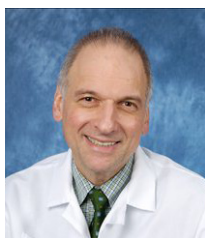
Morrison Research Day Friday, May 24
"Morrison Research Day is a wonderful opportunity for our residents to share their research efforts and for us to let them know how much we value their research efforts and contributions!" - JBK



*Consult the webpage for the most up-to-date schedule:

<http://home.caregroup.org/departments/radiology/residency/scheduling/conferences/displayMonthNew.asp>

DEPARTMENTAL Grand Rounds



Friday, May 10, 2013
12 noon - 1:00 PM • Sherman Auditorium

Thyroid Nodules: The Old and the New

Jeffrey R. Garber, MD - Chief of Endocrinology, Harvard Vanguard Medical Associates, Boston • Associate Professor of Medicine, HMS

Dr. Garber earned his MD from SUNY Stony Brook School of Medicine in New York and completed internship and residency training at the University of Southern California Medical Center, Los Angeles. Between 1978 and 1980, he served as a research fellow in endocrinology at Beth Israel Hospital, Boston where he stayed on as an Instructor in Medicine and staff physician at BIH/BIDMC and Brigham & Women's Hospital before joining Harvard Vanguard Medical Associates as Chief of Endocrinology in 1998. Since 2012, he has served as President of the American College of Endocrinology (ACE) and is a past president of the American Association of Clinical Endocrinologists (AACE). Since 2005 he has chaired a joint AACE and ATA clinical practice guideline committee on hypothyroidism, the most commonly recognized thyroid disorder. Published simultaneously in *Thyroid and Endocrine Practice* in 2012, it has become the most frequently referred to guidelines for the management of thyroid disease.



Friday, May 17, 2013
12 noon - 1:00 PM • Clouse Conference Rm, WCC-352

MR Spectroscopy for Radiation Necrosis vs. Tumor Recurrence Post Gamma Knife Treatment

Frank J. Minja, MD - Assistant Professor of Radiology, Yale University School of Medicine, New Haven, CT

Welcome back Harvard alumnus Frank Minja, MD, who is currently a diagnostic radiologist specializing in neuroradiology and emergency radiology at ten Yale University School of Medicine affiliated centers. A graduate of Harvard College and Harvard Medical School, Dr. Minja completed an internship in internal medicine at Brigham & Women's Hospital, and radiology residency and clinical fellowship training in neuroradiology at Yale-New Haven Hospital before joining the staff in 2009. In 2010 he earned a certificate of added qualification (CAQ) in neuroradiology. His clinical interests include advanced neuroimaging techniques such as functional MRI and DTI tractography for neurosurgical planning; MR spectroscopy in the evaluation of radiation necrosis versus tumor recurrence; and the emerging technique of vessel wall imaging.



Friday, May 31, 2013
12 noon - 1:00 PM • Sherman Auditorium

Threats or opportunities? The Past, Present, and Future of Economics and Regulation in Radiology and Role of ACR.

Sanjay K. Shetty, MD MBA - Vice President of Radiology, Steward Health Care System and Chairman, Radiology, St. Elizabeth's Medical Center

We are also delighted to welcome alumnus Sanjay Shetty back to the Harvard/BIDMC community. Like Dr. Mija above, Dr. Shetty is also a graduate of Harvard College/University and Harvard Medical School. He completed his medical internship at the Lahey Clinic in Burlington, MA and radiology residency and musculoskeletal radiology fellowship training at Massachusetts General Hospital. Between 2006 and 2010, he served as an Associate in Radiology at BIDMC Boston and Needham and in 2008, he earned an MBA in finance from the University of Pennsylvania's Wharton School in Philadelphia as a Palmer Scholar graduating in the top 5% of his class. His major research interests include quality and safety, i.e., peer review, radiation dose reduction, policies and procedures, and operational efficiency.

Morrison Research Day 2013

This year's 18th Morrison Research Day has been scheduled for Friday morning, May 24, 2013 in the Kirstein Living Room and will culminate with the Morrison lecture by Dr. Scott Gazelle in the Sherman Auditorium at noon in lieu of Grand Rounds.

Morrison Research Day is a celebration of research efforts throughout the entire department with presentations made by Residents, Fellows & Students. All trainees engaged in research are invited to present their work as a talk or a paper poster. Morrison Awards will be awarded to the Best Talk/Best Exhibit based on evidence of independence, innovation, impact, planning and execution. **The deadline for submission is Friday, May 3, 2013.**

Send your research project title, including the name of the staff member or mentor who has had the most impact on your research effort to Lois Gilden (lgilden@bidmc.harvard.edu). Talks and posters presented at previous conferences within the last year are welcome.

Depending on the number of participants, presentations will run from approximately 9:00 am to 11:30 am. Exhibits will be mounted in the Kirstein Living Room, Kirstein Building (East Campus) by 9:00 am. A poster viewing session will be held after the oral presentations. The 18th Annual Morrison Lecture, presented by G. Scott Gazelle, MD, PhD, of Massachusetts General Hospital, will be held in the Sherman Auditorium beginning at 12:00 noon.

We look forward to receiving your submissions.

DEPARTMENTAL NEWS, AWARDS & HONORS: 3 BIDMC Radiology Grant Recipients

- Congratulations **Aaron Grant** on being awarded his first NIH R01 research grant; **Bettina Siewert**, on being named the 2013 ARRS Berlin Scholar; and **Diana Litmanovich** on being awarded an STR Seed Grant:



1 R01 CA169470-01A1

1.7 million 2013-2018

Principal Investigator: **Aaron K. Grant**

Project Title: ***Hyperpolarized NMR for Studies of Cancer Therapies Targeting the Warburg Effect***

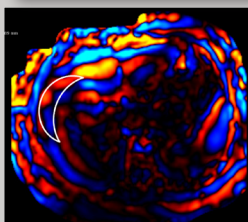
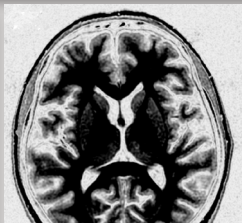
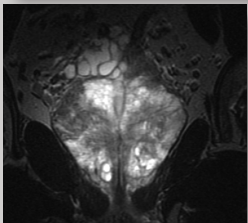
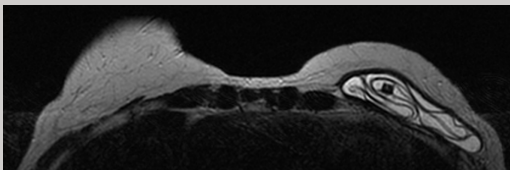
Abstract: There is a pressing need for improved therapies for many types of cancer. Here we propose to investigate cancer metabolism as a target for therapy. Many types of cancer exhibit the Warburg effect, taking up large quantities of glucose and metabolizing it into lactate rather than oxidizing it in the Krebs cycle. The Warburg effect may confer a survival advantage on cancer cells. By inhibiting specific enzymes that are involved in lactate production, it may be possible to reverse the Warburg effect and thereby selectively harm cancer cells.

We will study several drugs that accomplish this by inhibiting lactate dehydrogenase or by up-regulating the activity of pyruvate dehydrogenase. A second major focus of the work is

the use of hyperpolarized ¹³C NMR of pyruvate and its metabolites to non-invasively monitor tumor metabolism. Hyperpolarized NMR will be employed to assess the effects of different interventions, and to design a combination of drugs that brings about a maximal reversal of the Warburg effect. We will investigate the utility of hyperpolarized NMR as a technique for assessing the 'on-target' effects of various metabolic interventions, and determine whether shifts in metabolism measured with hyperpolarization can provide an early predictor of tumor response to therapy. In addition, we will investigate the use of metabolic therapies in conjunction with cisplatin, and compare the utility of hyperpolarized NMR and FDG PET in assessing tumor response.

BIDMC Radiology is proud to present

Best in Practice MRI Lecture Series 2013



Upcoming 2013 Presentations:

Quarterly Lecture

Thursday May 30th (2:30 pm - 3:30 pm)
Shapiro 10 Conference Room, BIDMC

MRI Parallel Imaging Techniques -
Aaron Grant, PhD

*These lecture are pending accreditation by the American Society of Radiologic Technologists (ASRT)
Accreditation: 1 Category A Credit*

Organizing Committee:
Jeremy Stormann B.S. RT (R), (MR); Ines Cabral-Goncalves, RT (R), MR; David Alsop, PhD and Koenraad J. Mortele, MD

For more information, contact Lois Gilden
Tel: 617-667-0299, Email: lgilden@bidmc.harvard.edu



Abdominal & Pelvic Imaging 2013



Monday - Wednesday

June 17 - 19, 2013

Boston Marriott Long Wharf
Boston, MA

Guest Faculty:
Federle • Gore • Levine • Megibow

Course Director
Koenraad J Mortele MD

Earn Up To 22.75 AMA PRA Category 1 Credit(s)[™]

DEPARTMENTAL NEWS, AWARDS & HONORS: 3 BIDMC Radiology Grant Recipients

Introduction of the 2013 ARRS Berlin Scholar: Bettina Siewert

Congratulations Dr. Siewert on being named the 2013-2015 ARRS/Leonard Berlin Scholar in Medical Professionalism. This scholarship program is intended to support study and research related to medical ethics, medico-legal principles, patient accountability, sensitivity to patient diversity and/or other topics encompassing medical professionalism. Dr. Siewert has selected a two-year program that has the possibility of changing the way radiology is practiced. Upon completion, she will provide a course on medical professionalism, author an article for publication in the American Journal of Roentgenology, and/or provide a similar product or service, to be mutually agreed upon by the scholar and the ARRS Research Committee, with the content of designed to educate others in medical professionalism.

As vice chair for quality, safety and performance improvement, Dr. Siewert has seen first hand the value of and the need for improving the training in quality assurance radiologists receive. There is a gap between what is expected of radiologists in terms of quality and the amount of training available to them. The Leonard Berlin Scholarship in Medical Professionalism will allow Dr. Siewert to complete a detailed taxonomy of peer review errors to help radiologists analyze their own reviewed data. She also hopes to develop and present an annual ARRS training course in quality improvement.



Bettina receiving ARRS Berlin Scholarship from ARRS President Charles Kahn Sunday, April 14 at the 2013 Annual ARRS Meeting in Washington, DC.. (Photo courtesy of Jonathan Kruskal)



STR Seed Grant Recipient: Diana Litmanovich

Fulfilling her 2012 Triple Threat Award for Excellence in Clinical, Research and Educational Achievement, **Dr. Diana Litmanovich**, Director of Cardiac Imaging (Division of Cardiothoracic Imaging), has been awarded a seed grant from the Society of Thoracic Radiology (STR) for her proposal: **"Functional MRI assessment as a primary imaging modality for diagnosis, follow-up and guidance of therapy decisions of COPD patients with tracheomalacia."**

Working with collaborators David Alsop, Carl O'Donnell, David Roberts and Phillip Boiselle, Dr. Litmanovich hopes to:



- To develop reliable diagnostic MRI techniques with comparable accuracy to MDCT for detection of tracheomalacia in order to reduce radiation exposure in populations at risk for this condition.
- To determine whether tracheal collapse associated with voluntary or exercise-induced submaximal hyperpnea in COPD patients correlates better with respiratory symptoms than tracheal collapse measured during maximally forced expiration.
- To explore the association of the results of MRI studies with patient management decisions, including treatment options such as tracheoplasty and systemic anti-inflammatory therapy.

KOMMUNITY KORNER: BID-Needham



Jeffrey Bernard, RT
Manager, Community
Radiology Network Services

Recently, I was able to catch up with **Bill Hallett**, Director of Radiology at our affiliate and neighbor to the west, BID-Needham. When I met Bill in his new office, outside the confines of the radiology department, he was quick to point out that he has windows in his office, a rarity given our line of work. However, when I looked around, I realized there was no

natural light to be seen. Bill then confessed they had covered the windows with black plastic, and then later with plywood as they began to pour the foundation for the new Cancer and Surgical Centers on campus. He seems to be adjusting well and right at home to his window-less office.

When we turned our attention from windows to the radiology department itself...he quickly boasted volumes are up 4-5% this year. Given the challenges in healthcare today, this is welcome news. How was this feat accomplished, I asked? The **BIDMC Orthopedic Clinic** has expanded it's services on-site and is always in need of imaging services. **Dr. Jane Fogg's Urgent Care Clinic** was another. The purpose of the Urgent Care Clinic is to divert patients from the Emergency Department to less costly walk-in clinics. The hospital's fairly new affiliation with **Atrius Health** has also provided increased volumes to the radiology department. The expanding **Wellesley-Atrius office** continues to send more patients and with greater, more complex healthcare issues, all, by the way, easily handled by the efficient radiology staff.

Adding to the projected radiology volumes, is the imminent introduction and addition of the **Breast Clinic** spearheaded by **Dr. MaryJane Houlihan** from the Medical Center. Starting April 30th, 2013 the Breast Clinic will provide comprehensive breast care to the Needham and surrounding communities one day per month. **Kerry DeStefano**, Mammography Supervisor is excited with the addition of the Breast Clinic. She has been to the Medical Center to observe diagnostic procedures, workflow, specimen requirements and the

inventory of supplies needed. Breast imagers, **Dr. Tejas Mehta** and **Julie Armada** are also excited and have provided invaluable input into the Needham comprehensive breast program.



Bill Hallett
Director of Radiology, BID-Needham

In keeping up with the new clinics and services provided by BID-Needham, Bill has had to consider new equipment to meet these demands. Approximately one year ago, he replaced a 35-year-old diagnostic room with a new Philips DR room which has led to decreased patient imaging times, greater efficiency and ease for the technologist as well as decreased radiation doses. In May/June 2013, Room 2 a diagnostic radiology room will be replaced with a DR/Fluoro room giving them fluoro capabilities in two radiology rooms. A new PACS workstation in the reading room and two new tech workstations will be installed in the next several months.

When posed the question, "**What is your greatest asset?**" without hesitation Bill said, "**the radiology staff**". He said,

"a blend of long-term veteran employees and new faces with different backgrounds and professional experiences has melded together to create an impressive, support and technical staff".

Many of the technologists often work alone and have developed creative, solid technical skill sets to meet those challenges.



A big win for BID-Needham Radiology is the introduction of **Dottie Amrose, RN**. Dottie hails from the Medical Center as an experienced radiology IR and modality nurse. With the increased number of interventional procedures Dottie will provide the consistent, high-quality care she is known for at BIDMC. She will enhance their comprehensive radiology services with her elaborate knowledge and experience.



Dottie Amrose, RN

With the long awaited and anticipated Surgical and Cancer Centers at BID-Needham, patients will now be able go directly to radiology for procedures on the same day as their cancer treatment. The top floor of the addition will house the expansion of **Peri-Operative services**: a pre-op and post-op holding areas, a patient waiting room and two additional OR rooms.

When asked what is down the road for BID-Needham Radiology, Bill suggests we will have to look beyond the BIDMC and BID-Needham practices. The growing enterprise of hospitals and clinics will challenge us to think about additional resources, employee sharing, introduce technology and patient information sharing to better satisfy Referrers and to that end, better patient care.

Bill also mentioned much of the success has come from the support of the Needham community and surrounding towns. The long history and the size of the hospital has played a big role in the continued growth and advancement of BID-Needham. Similar to the TV show, Cheers, "Where everybody knows your name", you will find a similar camaraderie and community within the BID-Needham walls.



What's on Bill Hallett's wishlist, to start, more new and complex programs from the Medical Center....and well, an office window.

- Jeff

Congratulations to Dorothy (Dotty) Amrose RN, who after over 30 years of dedicated service to the main campus has transferred to the BIDMC Needham group! Dotty will be instrumental in the development of procedural standards and practice guidelines at our Needham affiliate. Well known for her strong work ethic and dedication to quality patient-centered care, Dotty brings with her a vast knowledge base and clinical expertise in Radiologic procedures.

Dotty first came to East Campus Radiology in the 1980's. During her tenure in the Department of Radiology she has weathered many institutional and departmental changes. Well known as a strong patient advocate with a soft heart, Dotty is passionate about her role as a Radiology nurse. She had the opportunity to mentor many new nurses and was often the 'go to' person in challenging situations.

Although we will miss her, we are pleased that Needham will benefit from the excellent clinical skills and dedication to patient care that all of us have had during her many years here at BIDMC.

- Bridget O'Bryan, Radiology Nurse Manager



Administrative Professionals Day



Hosted by Carl Nickerson, Administrative Professionals' Day was celebrated in Radiology on April 24th, 2013 with a catered lunch and cookie pops! As you can see, a good time was had by all.

KUDOS - Each month, we share the positive feedback we receive about staff members and ask you to join us in congratulating them but this month, we are especially proud to acknowledge an unprecedented constellation of staff for providing outstanding care and service!

Support Services



Over the past few months, Support Services has had staffing challenges. Many mornings **Daryl Kilby** has manned the Shapiro 4th floor reception site by himself from 7 to 8:30. This is a time period that is quite busy and usually would have 2 to 3 staff

members manning the desk. Throughout this period Daryl has remained consistent by providing exemplary customer service in a professional and courteous manner. He also has been very effective in motivating and assisting his team during this stressful time. This has allowed Shapiro 4 reception site to operate in an efficient and seamless manner.



Carol Norman is this month's recipient of the Radiology Support Services Quality Spot on for Service Excellence Initiative Program.



Diagnostic

A grateful mother wrote in to praise **Ricardo Stewart's** ability to calm her distressed son by engaging him in conversation about sports, music and other topics they had in common. She wrote: "with such a small thing as a smile he made things a little better for a patient that had never even set foot in a hospital... Seriously if it weren't for him I think my son would have bailed from the ER if he was able. When we were leaving today he turned around and told the doctor that there was one person at the hospital who made a huge difference for him

DEPARTMENTAL NEWS, AWARDS & HONORS: Robin Levenson at ARRS

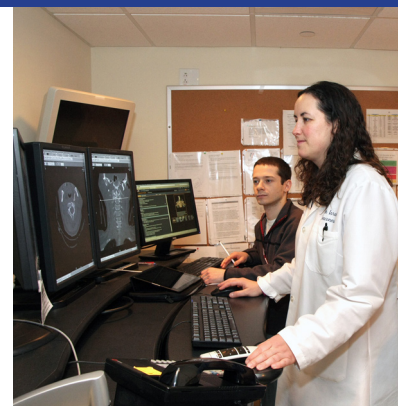
In February 2013, we congratulated Dr. Robin Levenson, Interim Chief of Emergency Radiology, for having been selected (and funded) to attend the 2013 ARRS Clinician Educator Development Program (CEDP) in April as part of the 2013 annual ARRS meeting in Washington, DC. Robin was one of 25 nominees to attend this program and she offers this feedback to inspire fellow faculty to apply for the CEDP next year!



I recently returned from the 2013 Annual Meeting of the American Roentgen Ray Society (ARRS) in Washington, D.C. where I received an educational grant to attend the ARRS Clinician Educator Development Program (CEDP). The CEDP is an excellent opportunity to hone one's teaching skills as

well as learn about up-to-date teaching tools for designing educational activities. Twenty-five junior faculty were selected to attend this two-day interactive workshop led by leaders in the field.

Small group workshop sessions included: **Effective Use of PowerPoint** (I found myself later critiquing PowerPoint slides throughout the ARRS meeting), **Making an Engaging Teaching Event**, **Interactive Case-based teaching without slides**, and **E-publishing**. CEDP was a worthwhile interactive and fun learning experience, as well as an optimal environment for networking with others from around the country. I truly enjoyed participating in the CEDP, found it quite valuable, and am looking forward to applying what I have learned from the program at BIDMC.



2013 BIDMC Radiology Publications [New Citations in Blue*]. We do a monthly PubMed search for new BIDMC publications and may miss those in which your affiliation is not noted. If we miss your paper, please send the reference to dwolfe@bidmc.harvard.edu.

Note that publications do not always appear in Pubmed in the same month they are actually published and publications listing an Epub date may be updated in the new year, thus their paper publication will appear in 2013.

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Ellis RJ, Norton AC, Overy K, Winner E, **Alsop DC**, Schlaug G. Differentiating maturational and training influences on fMRI activation during music processing. **Neuroimage**. 2012 Apr 15;60(3):1902-12.

In case you missed an issue!

2013	2012	2011	2010	2009
March	December	December	December	December
February	November	November	November	November
January	October	October	October	October
	September	September	September	September
	August	August	August	August
	July	July	July	July
	June	June	June	June
	May	May	May	May
	April	April	April	April
	March	March	March	March
	February	February	February	February
	January	January	January	January

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