Awards Program
MARCH 13-15, 2019
Hotel Chaco and Hotel Albuquerque
Convention Center at Old Town
Albuquerque, New Mexico

Network. Learn. Implement.
Honoring Excellence in Pulmonary and/or Critical Care Medicine Education

2019 AWARDS PROGRAM
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Darlene Buczak Abstract Award for Educational Excellence

The Darlene Buczak Abstract Award for Educational Excellence recognizes Pulmonary Medicine, Critical Care Medicine, and Pulmonary Critical Care Medicine training program Directors, Associate Program Directors, faculty, and fellows-in-training for their outstanding contributions and commitment to medical education and training. The recipient is selected for success in applying an innovative educational method in his/her training program.

Congratulations to the 2019 awardee:

Stephen T. Doyle, DO, MBA
The Ohio State University

The APCCMPD would like to honor the contributions of all 2019 applicants:

Boning Li, MD
Rutgers Robert Wood Johnson Medical School

2019 Awardee

Mentorship During Training: Development of a Trainee Centered Mentorship Program

Authors:

Stephen T. Doyle, DO, MBA
Jennifer McCallister, MD
The Ohio State University

ABSTRACT PRESENTATION

We created a fellow-centered mentorship program to aide in the fellows’ career development by focusing on three key aspects: scholarship, clinical interests, and professional/career development. In July of the first-year of fellowship (F-1), the fellows are introduced to key concepts for successful mentoring in small-group discussions. Each F-1 is assigned a transition mentor during the first quarter of fellowship to assist with the transition to fellowship. Meetings are scheduled quarterly throughout the first year, but are encouraged as often as beneficial. Topics for initial meetings focus on clinical skills development and early career interests, but evolve to focus on research and scholarship interests. Meetings with the transition mentor continue through the end of the F-3 year as needed to focus on development of clinical skills and career planning. In the winter of the F-1 year, each fellow identifies an area of interest for scholarship and research, and identifies a primary scholarship mentor. Meetings are scheduled monthly throughout the F-2 and F-3 year, but are encouraged as often as needed for success. During each meeting with the scholarship mentor, the fellow and mentor review and update a mentorship timeline that includes clinical service schedules, important dates, and SMART (specific, measurable, achievable, reasonable, timely) goals. For fellows who need additional resources for exploration, an external mentor is provided from a database of recent graduates of the program. This provides an opportunity for the fellow to get mentorship from those who have geographical areas or career paths to which they are applying (i.e., private practice). See Table 1 for complete timeline. Mentors and mentees complete evaluations on the effectiveness of the mentoring relationship quarterly.

This data and the scholarly activity timeline are reviewed with program directors at the semi-annual review to monitor fellow progress and to provide feedback on the effectiveness of the relationship.

INTRODUCTION

Mentorship can be defined as a formal or informal relationship between a more experienced (mentor) and a less experienced (mentee) person, with the unified purpose of furthering the mentee’s professional career. This relationship is paramount in medical training, as physicians embark upon a career of lifelong learning. Studies show mentorship is associated with career success, greater career satisfaction, better career performance, and faculty retention in academic medical centers. Despite these known benefits, not all pulmonary/critical care medicine (PCCM) fellowships have an established mentorship program. In 2017, we surveyed PCCM fellows nationally and found that 49% of respondents lacked a formal mentorship program, 30% did not have an established mentor, and 40% were dissatisfied with the state of mentorship during their training. Only 27% of those with formal programs were provided the opportunity to evaluate their mentors. These responses mirrored those at our own institution, thus we developed a new mentorship program to address this.

DISCUSSION

In order for a trainee to be successful, it is important to pick the right mentor, take an active role in the relationship, evaluate the relationship, and develop a mentorship network. Having an effective mentorship program in place helps foster this mentor-mentee relationship. Effective programs should be structured but dynamic, have outlined expectations, and offer opportunities for evaluation. Our program includes each of these, as well as educational opportunities for fellows on the mentor-mentee relationship and creating a mentorship network. Early feedback from this program has been overwhelmingly positive.

CONCLUSION

Our new mentorship program builds a mentorship network through connecting the fellow with three different mentors (transition, scholarship, external). It encourages the development of the trainee as a whole (scholarly, clinically, professionally), as well as providing a structured timeline to hold themselves accountable and help trainees succeed.

REFERENCES


TABLE 1. Mentorship Program Developmental Timeline

<table>
<thead>
<tr>
<th>Component</th>
<th>F-1 Year</th>
<th>F-2 Year</th>
<th>F-3 Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scholarship</td>
<td>1. Match the Fellow with a Scholarship Mentor</td>
<td>2. Mentor identifies and develops a formal and informal mentorship relationship</td>
<td>3. Mentor identifies and develops a formal and informal mentorship relationship</td>
</tr>
<tr>
<td>Professional and career</td>
<td>1. Match the Fellow with a Professional and Career Development Mentor</td>
<td>2. Mentor identifies and develops a formal and informal mentorship relationship</td>
<td>3. Mentor identifies and develops a formal and informal mentorship relationship</td>
</tr>
<tr>
<td>1. Match the Fellow with a Clinical Mentor</td>
<td>2. Mentor identifies and develops a formal and informal mentorship relationship</td>
<td>3. Mentor identifies and develops a formal and informal mentorship relationship</td>
<td></td>
</tr>
</tbody>
</table>

The Mentorship Program Developmental Timeline is designed to provide a structured framework for fellows to work with their mentors throughout their fellowship years. The timeline includes meetings with mentors during each fellowship year (F-1, F-2, and F-3) and emphasizes the importance of regularly scheduled mentorship sessions to support the mentee’s professional and career development goals.
It Matters! Teaching Social Determinants of Health in the Intensive Care Unit to Healthcare Providers

Bonig Li, MD
Romala Surendran, MD
Pallak Agarwal, MD
Michaela Domaratsky, BA
Janis Li, HSD
Sabiha Hussain, MD
Rutgers Robert Wood Johnson Medical School

INTRODUCTION
Social determinants of health (SDOH) are factors such as transportation, housing, food, safety, economics, utilities, and social support that contribute to a person’s health. When these factors are not addressed, the US healthcare system fails to achieve targets for health outcomes and fails to eliminate disparities in healthcare (1). It is important for healthcare providers to not only be aware and understand the SDOH in their patients but also be able to recognize the importance of addressing this in hospital settings such as the intensive care unit (ICU). It is important to address the social determinants of health in the ICU because this will impact readmission to ICU and mortality. Readmitted patients to the ICU have a mortality rate that is six times higher than those who are not readmitted (2).

ABSTRACT PRESENTATION
We developed a comprehensive education conference curriculum to teach about the social determinants of health. The curriculum included didactics, case-based discussion, and a panelist session with the goal to develop critical thinking and problem solving as it relates to SDOH. Our target population was healthcare providers from a wide range of healthcare areas. We used pre-survey and post-survey to assess the perception and knowledge of the social determinants of health to healthcare providers in the ICU.

DISCUSSION
After the education conference, more healthcare providers felt that the social determinants of health was not adequately addressed at present in the hospital. In addition, more healthcare providers believed that addressing SDOH in the ICU will make a difference. Healthcare providers felt more confident and prepared in recognizing SDOH (16.6% vs. 44.7%, p<0.05). Healthcare providers felt less inadequate in helping and directing their patients to meet their social needs (14.6% vs 2.13%, P<0.05).

CONCLUSION
We conclude that our education curriculum was successful in not only increasing awareness but also improving knowledge regarding the social determinants of health to healthcare providers in the ICU.

REFERENCES
The Good, The Bad, And The Ugly: Personal Statements From A Program Director’s Perspective

Laura Hinkle, MD  
William G. Carlos, MD  
Gabriel Bostiett, MD  
Indiana University School of Medicine

BACKGROUND
All candidates for residency or fellowship write a personal statement (PS). Writing the PS is often anxiety provoking and more often than not results in a product that is rather impersonal. (1,2) Despite the universal nature of this requirement, little has been written about what postgraduate medical education program directors (PD) seek when evaluating the PS, although it has been demonstrated that certain features are common in the PS, which can create ambiguities for PDs who read them. (3). We sought to gain a better understanding of how Pulmonary and Critical Care Medicine PDs view and interpret personal statements.

METHODS
We surveyed the membership of the Association of Pulmonary and Critical Care Medicine Program Directors (APCCMPD) via their listserv. Quantitative data was collected regarding the importance of the PS in the candidate selection process. Qualitative, open-ended questions explored characteristics of good and bad PS, what the PS reveals about applicants, and advice for writing them. The data was collected via REDCap and the qualitative data was managed and analyzed using QSR International’s NVivo 12. Grounded theory was utilized for coding and analysis of qualitative data.

RESULTS
Surveys were completed by 144/344 (33%) of PDs and Associate PDs. The Good, The Bad, And The Ugly: Personal Statements From A Program Director’s Perspective

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RESULTS
Surveys were completed by 144/344 (33%) of PDs and Associate PDs.
An online video-based curriculum was successful at teaching basic bedside echocardiography to internal medicine trainees. This virtual teaching tool also showed a statistically significant increase: anatomy knowledge increased by 13.9% (78.9% to 92.8%; 95% CI 4.7-23.0, p=0.006), and image quality by 22.7% (88.6% to 92.0%; 95% CI 6.7-23.6, p=0.006). Of the 10 PGY-2 trainees enrolled, 8 were internal medicine residents and 2 were combined medicine-pediatrics residents. Their baseline mean total score was 73.0%. This score increased by 19.3% to 92.3% (95% CI 12.7-25.9, p=0.001) after 2 weeks. The medium number of views obtained increased from 3 to 5 (p=0.001). Total scanning time to obtain the 5 views was similar before and after the video-based curriculum (10.9 ± 11.0 minutes; 95% CI 5.3 ± 9.2, p=0.678).

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CONCLUSIONS
Our principle aim was to determine the feasibility of using social media to implement an adjunct critical care ultrasound curriculum. Among a heterogeneous group of fellows at different years of training, the overall responses from the post-intervention survey were positive. Most of the fellows that participated would join a similar group again if given the choice again in the future and a small majority believed that the medium was an effective learning tool. We did not find a significant improvement in knowledge based on our pre and post test assessment in our intervention group. Those who chose to participate in the Facebook group had a higher baseline mean score compared to those that did not join. This self-selected group that participated in the Facebook intervention may have had more interest in critical care ultrasound to begin with as reflected in their higher baseline scores. This could also suggest that there was less overall knowledge to gain from the adjunct curriculum compared to those who did not join the Facebook group. Despite the test date, we do believe that a social media may be an acceptable platform to deliver an adjunct critical care ultrasound curriculum, however, we do not believe curriculum delivery via social media should replace a traditional curriculum. For learners, social media is easily accessible, widely available, has a potential broad reach, and may motivate increased interest in learning and its potential uses warrants further study.

REFERENCES
3. Chester CC, Flickinger TE, and Chisolm MS. Social Media Use in Medical Education: A Systematic Review Academic Medicine, 2018. 8(6)893-901.

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REFERENCES
3. Chester CC, Flickinger TE, and Chisolm MS. Social Media Use in Medical Education: A Systematic Review Academic Medicine, 2018. 8(6)893-901.
APCCMPD members work diligently to foster excellence in education through the training and mentoring of the next generation of educators in Pulmonary Medicine, Critical Care Medicine, and/or Pulmonary Critical Care Medicine. The annual Outstanding Educator Award recognizes clinicians who are exemplary clinician educators. The recipient is chosen by his/her peers for demonstrating excellence in the development of future physicians.

Congratulations to the 2019 awardee:

David Schulman, MD, MPH
Professor of Medicine
Emory University

In 2001, David joined the faculty of Emory as a clinician educator. While his clinical practice initially incorporated components of both pulmonary disease and critical care medicine, his current clinical focus is on the diagnosis and management of sleep disorders as part of the Emory Sleep Center. From the beginning of his career, he has taken an active role in the training of pulmonary and critical care medicine fellows, having served as Fellowship Program Director since 2006, and the Associate Division Director for Education since 2009. Dr. Schulman directs courses for undergraduate medical students in both evidence-based medicine and pulmonary disease, and created a new three-week-long course in 2017 focused on developing leadership skills in medical trainees. He also serves on a number of institutional committees related to education, including the Progress and Promotions Committee and the Executive Curriculum Committee of the School of Medicine.

Dr. Schulman has received numerous institutional teaching awards, including the Fellows Teaching Award from the Division of Pulmonary, Allergy, Critical Care and Sleep Medicine, Golden Apple Awards from the Emory internal medicine residency program, the Educator Impact Award from the Department of Medicine, and the Dean’s Teaching Award from the School of Medicine. He currently serves as Chair of the Emory Department of Medicine’s Academy of Medical Educators. Extramurally, his work in education has been recognized with a Fellowship Education Award from the American Thoracic Society, and the Palmer J. Palmer Courage to Teach Award from the Accreditation Council for Graduate Medical Education.

Dr. Schulman has served on a number of national committees. He served as President of the Association of Pulmonary and Critical Care Medicine Program Directors in 2013-2014. He is actively involved in the American College of Chest Physicians, where he serves on the Board of Regents, the Governance Committee and the Strategic Planning Committee; he has previously served on the Education Committee, the Training and Transitions Committee, and the Nominating Committee. He is an active member of both the Pulmonary and Sleep SEEK Editorial Boards. He was Program Chair for the CHEST 2016 International meeting in San Antonio, Texas, will chair the upcoming 2019 CHEST Congress in Bangkok, Thailand, and currently serves as Editor-in-Chief for CHEST Physician.

On a personal note, David is very appreciative of the support of his wife of twenty years, Kim, and his two children, Patrick and William, as well as the dozens of trainees with whom he has the chance to work. The opportunities to mentor (and be mentored by) program director colleagues from around the country have been the best parts of his career as an academic clinician educator.

The APCCMPD Mid-Career Educator Award honors mid-career individuals who are actively engaged in enhancing the practice and profession of Pulmonary Medicine, Critical Care Medicine and/or Pulmonary Critical Care Medicine through education. The medical educator selected for this award is actively making significant and innovative contributions to education in pulmonary and or critical care medicine.

The APCCMPD honors the contributions of all 2019 nominees:

Tisha Wang, MD
Associate Clinical Professor, Program Director
UCLA Department of Pulmonary and Critical Care Medicine

Congratulations to the 2019 awardee:

Paru Patrawalla, MD
Assistant Professor of Medicine
Icahn School of Medicine at Mount Sinai
Paru Patrawalla, MD is an Assistant Professor of Medicine at Icahn School of Medicine at Mount Sinai, Program Director of the Pulmonary and Critical Care Medicine Fellowship at Mount Sinai St. Luke’s-West-Beth Israel and Director of Simulation and Ultrasound for the Department of Medicine at Mount Sinai Beth Israel. Dr. Patrawalla has been a committed clinical educator and is nationally recognized as an expert in critical care ultrasonography training with a focus on competency-based education.
The APCCMPD Emerging Educator Award honors an up-and-coming clinician educator. The recipient is selected for his/her work in delivering and promoting medical education in Pulmonary Medicine, Critical Care Medicine and/or Pulmonary Critical Care Medicine through various means at the local and regional level.

Congratulations to the 2019 awardee:

**Jared Chiarchiaro, MD, MS**
Assistant Professor of Medicine
University of Pittsburgh

Jared Chiarchiaro is an Assistant Professor of Medicine in the Division of Pulmonary, Allergy, and Critical Care Medicine at the University of Pittsburgh. He received his medical degree with honors from the University of Texas Medical Branch, completed his internal medicine residency at Duke University Hospital and his Pulmonary and Critical Care fellowship training at the University of Pittsburgh. During his time as a fellow, he received a Masters in Clinical Research. He joined the faculty at the University of Pittsburgh in 2015 and currently serves as the Associate Program Director for the fellowship program in Pulmonary and Critical Care Medicine where he helped to design a dedicated fellowship track for medical educators. His educational focus is in communication and he works to develop and deliver novel programs in high stakes communication skills, feedback, and evaluation. He also serves as the course director for the University of Pittsburgh School of Medicine Pulmonary Pathophysiology course and as the Director for the second year Organ System Block where he works to innovate for undergraduate medical education.

The APCCMPD honors the contributions of all 2019 nominees:

**Stacey Kassutto, MD**
Assistant Professor of Clinical Medicine
University of Pennsylvania

**Brooks Kuhn, MD**
Assistant Professor of Clinical Medicine
UC Davis Medical Center

The APCCMPD, CHEST and ATS Medical Education Research Award is a monetary grant awarded to fellows-in-training, junior faculty within 5 years of program completion, associate program directors, and/or program directors, for research projects that further adult pulmonary, critical care and pulmonary critical care graduate medical education.

Congratulations to the 2019 awardees:

**Lekshmi Santhosh, MD**
University of California - San Francisco
Improving ICU-to-Ward Patient Safety Through Design Thinking and Documentation Evaluation

**Sahar Ahmad, MD**
Stony Brook University Hospital
A Novel Paradigm for Ultrasound Education in Pulmonary and Critical Care Medicine Fellowship

**Asha Anandaiah, MD**
Harvard Pulmonary and Critical Care Fellowship at Massachusetts General Hospital and Beth Israel Deaconess Medical Center
Development and Evaluation of a Novel Task-oriented Formative Feedback Tool for Pulmonary and Critical Care Fellows

**Ernest DiNino, MD**
Bay State Medical Center
Use of Specially Prepared Cadavers to Enhance Airway Training

**Abdulghani Sankari, MD**
Wayne State University
A Novel Simulation-based Curriculum for MV and Shock Management in Pulmonary and Critical Care Medicine (PCCM) Fellowship Training Program

**Rebecca Sternschein, MD**
Brigham and Women’s Hospital
Understanding the Teaching Environment in the Medical ICU: Motivations and Challenges of ICU Fellows as Educators

The APCCMPD honors the contributions of all 2019 applicants:

**Sahar Ahmad, MD**
Stony Brook University Hospital
A Novel Paradigm for Ultrasound Education in Pulmonary and Critical Care Medicine Fellowship

**Asha Anandaiah, MD**
Harvard Pulmonary and Critical Care Fellowship at Massachusetts General Hospital and Beth Israel Deaconess Medical Center
Development and Evaluation of a Novel Task-oriented Formative Feedback Tool for Pulmonary and Critical Care Fellows

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