



MedStar Health

Connections

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News for the medical and dental staff, residents, and fellows at MedStar Washington Hospital Center



**The 2022 Gold-Headed Cane Award
Recipients embody “character, talent,
and passion to care for patients.”**

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Connections

MedStar Washington Hospital Center *Connections* is managed and published by Communications & Public Affairs for the medical and dental staff, residents and fellows of MedStar Washington Hospital Center.

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CE Conferences

Registration Now Open

Update on Pancreatobiliary Surgery Diseases 2023

February 11, 2023

Ritz-Carlton Washington D.C. | Washington, D.C.

Course Directors: Nadim G. Haddad, MD; Reena C. Jha, MD; Emily R. Winslow, MD

Diabetic Limb Salvage (DLS) 2023

April 26 to 30, 2023

Gaylord National Resort & Convention Center | National Harbor, MD

Conference Chairmen: Christopher E. Attinger, MD; John Steinberg, DPM

Course Directors: Cameron Akbari, MD; Karen Kim Evans, MD; J.P. Hong, MD, PhD

42nd Cherry Blossom Seminar

April 23 to 24, 2023

Park Hyatt | Washington, D.C.

Course Chairman: M. Mike Malek, MD

Course Co-Chairmen: Jeffrey S. Abrams, MD; Colonel Steven J. Svoboda, MD, USA, Retired

Abdominal Wall Reconstruction (AWR) 2023

June 23 to 24, 2023

Grand Hyatt Washington | Washington, D.C.

Conference Chair: Parag Bhanot, MD, FACS

Course Directors: Karen Kim Evans, MD; William W. Hope, MD; Jeffrey E. Janis, MD, FACS

Save The Date

Cultivating Expertise in Practical Principles and Practices of Nurse Wellbeing Programs

March 23 to 24 | Bethesda Marriott

Course Directors: Dan Marchalik, MD; Crystal Morales

XLV Update on Diabetes

April 13 | MedStar Union Memorial Hospital

Course Directors: Issam E. Cheikh, MD, FACP, FACE; Paul A. Sack, MD, FACE

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Holiday Greetings — Wishing You Continued Success in the Year Ahead

With the holiday season upon us, I want to share my thoughts of gratitude for your continued commitment and dedication to those we serve at MedStar Washington Hospital Center.

Our thoughts turn toward our loved ones, families, and friends in this season of thankfulness; it's also the perfect time to reflect on all we have achieved and recharge for the New Year.

Leading remarkable physicians and advanced practice providers who are committed to providing the highest quality, safest care is a tremendous privilege and responsibility. Every day we come to work with the opportunity to better our patients' lives, and I am filled with pride in the many ways I have seen you enhance and transform them. Whether it's creating a treatment plan talking to a patient's family member, or walking a visitor to the cafeteria we are living our culture of compassion where the simplest of gestures feel meaningful.

I believe by giving our best we can achieve great outcomes. Some 2022 firsts to highlight include our *U.S. News & World Report* number

two ranking in the Washington, D.C. metro area – we also ranked “high performing” in three specialties and 12 procedures and conditions – and being named an “LGBTQ+ Healthcare Equality Leader.” MedStar Heart and Vascular Institute achieved a national ranking for Cardiology and Heart Surgery of 28, up from 30 last year, and successfully launched its new robotic cardiac surgery program and performed the region's first leadless pacemaker implant surgery.

We underwent successful Joint Commission Disease Specific recertifications for Ventricular Assist Device (VAD) and for the Advanced Comprehensive Stroke Center.

Also, the Stroke Center of Excellence received the 2022 American Heart Association/American Stroke Association's Get With the Guidelines® – Stroke Gold Plus with Target: Stroke Honor Roll Elite; Advanced Therapy; and Target: Type 2 Diabetes Honor Roll Achievement Award.

By building on our success and thoughtfully managing our resources, we have seen positive developments such as the opening of the OB/GYN Specialty Care Center and the hybrid Vascular ORs. The American College of Surgeons (ACS) again verified us as a Level 1 trauma

center, and the Commission on Cancer, a quality program of the ACS, granted us a three-year accreditation. Additionally, our Breast Center received the National Accreditation Program for Breast Centers, and our nursing colleagues received the Pathway to Excellence® redesignation from the American Nurses Credentialing Center.

We experienced our share of challenges as well, but I continue to be inspired by the way you have adapted to change on your units and departments and have worked diligently to take ownership of your areas, charting new courses for success.

From the excellent care you provide our patients and their families to taking pride in being part of the MedStar Washington family, we have strengthened our organization and reached into new parts of our communities to give people hope for the new year.

Our future is filled with boundless opportunities to transform care as we continue to meet the needs of our surrounding community.

Congratulations and thank you for a tremendous year!



A handwritten signature in black ink that reads "Jeff Dubin". The signature is written in a cursive, flowing style.

Jeffrey S. Dubin, MD, MBA, is Sr. Vice President, Medical Affairs & Chief Medical Officer at MedStar Washington Hospital Center. He can be reached at 202-877-6038, or at jeffrey.s.dubin@medstar.net.

New hybrid vascular ORs at MedStar Washington Hospital Center



Above: **Steven Abramowitz, MD, and President Greg Argyros, MD, cutting the ribbon at the dedication ceremony.** Right: **The Philips Azurion 7 C20 with FlexArm Image-Guided therapy system.**



Two new, state-of-the-art operating rooms have opened at MedStar Washington Hospital Center, allowing for vascular surgery cases to transform from endovascular to open to hybrid at the literal touch of a button.

Patients requiring interventions for deep venous disease, limb salvage, aortic pathology, and more—virtually all vascular-related cases—will benefit from the new technology in the rooms.

These spaces provide improved magnification and better

visualization for surgeons and lower radiation for patients. They also allow for use of cutting-edge imaging, integration or overlay of previous studies, and the ability to perform new CT scans during a case. With these rooms, we are also well-positioned to employ intravascular ultrasound and other future technologies which use fiber optic imaging.

Steven Abramowitz, MD, physician executive director and chair of MedStar Health's Vascular Surgery Program, sees the technology as a means to advance medical innovation, as well.

"As international leaders, we are now better equipped to collaborate more closely with our industry and academic research partners," he says. "The spaces also keep us on the forefront of medical education, with unique recording equipment that makes it possible for certain cases to be shared with other sites, providing educational symposia for our peers and trainees."

"Ultimately, and most importantly," Dr. Abramowitz adds, "these new additions enhance our ability to deliver the greatest quality of care for our patients."

Manning the lines: fellow recognized for central line reduction

Prolonged hospitalizations, higher medical costs, and increased morbidity are all associated with Central Line-Associated Bloodstream Infections (CLABSIs), which occur about 400,000 times each year in the United States, according to the Agency for Healthcare Research and Quality (AHRQ). Syed Nazeer Mahmood, MD, a Pulmonary and Critical Care Medicine fellow, was recently recognized with a MedStar Washington Hospital Center Chief Medical Officer award for his work to promote and support an evidence-based procedure to prevent CLABSIs and remove unnecessary catheters as soon as possible.

“When it first came to light that there were central lines on the floors that were being left unmanned, I said it would be nice to have a team who would look at which lines needed to stay in, which are unnecessary, and to get those removed. From there, the rest is history,” said Chee Chan, MD. “Nazeer created the process, enlisted his own team of residents, wrote the protocol, and educated, guided, and supervised his team to success.”

Sarah Sabo, CRNP, director of advanced practice providers in the Department of Medicine, was involved in that initial conversation that sparked Dr. Mahmood’s initiative: “At some point, we all have a patient with a line. This brings more awareness to the process, and also reminds us of what our mission is – doing what’s best for our patients.”

During the three-month initiative, Dr. Mahmood reviewed more than 1,000 patient charts to identify which lines should be removed.



Left: **Drs. Syed Nazeer Mahmood and Chee Chan; and Sara Sabo, CRNP**

He and his team reached out to providers where lines were no longer needed, resulting in 10 percent of lines being removed throughout the medical/surgical wards. In the first two weeks of the pilot, the team intervened on 16 percent of the charts reviewed, but by the end of the three months, that number had dropped to 7 percent.

“We developed a list of reasons the lines should exist outside of the Intensive Care Unit (ICU) and anything else could be managed without a central line,” said Dr. Mahmood. “At the end of the day, CLABSIs are significant infections that shouldn’t exist. We’re supporting making it a practice and habit to look at lines every day.”

“Some providers didn’t know their patient had a central line when the team called them,” said Dr. Chan. “It took the extra mile because in health care everyone is busy and short-staffed, and oftentimes the focus is on what we need to do to get patients home to their families. Getting a phone call asking ‘would you consider removing the line’

was an educational tool, not just monitoring. After a provider was contacted once or twice, they thought of it more and the number of patients we needed to audit on a week-to-week basis decreased.”

“Taking care of patients is a team effort,” added Jeffrey Dubin, MD, Senior Vice President, Medical Affairs and Chief Medical Officer. “There are so many things that clinicians are asked to focus on, and the reality is that sometimes we need a coach checking in and asking those questions. It never hurts to let someone else have your back; in fact, it raises your game.”

Though the initial project was a pilot, Dr. Mahmood’s initiative to reduce central lines will go forward. “All the kudos go to Nazeer for this, and because of his work, it isn’t going to end,” said Sabo.

“Nazeer’s project was vital to our mission,” added Dr. Chan. “The vision is to give other fellows the opportunity to keep it going through a fellow quality improvement project. It’s too important not to continue.”

Celebrating four decades of ethics support

In 1982, three physicians met, an idea was shared, and John “Jack” Lynch, MD, founded MedStar Washington Hospital Center’s first Bioethics Committee.

“Dr. Harold Hawfield, who was medical director at MedStar Washington at that time, called Jack and me into his office and said the latest and most exciting thing he’d heard of is an Ethics Committee and we should start one in the hospital,” recalled cardiologist Sander Mendelson, MD, who worked alongside Dr.

Lynch to form the original committee, and has served on the committee -for a period of time as chair - for its entire 40 years. “That was very foresighted of him. Jack was an oncologist, and I was a director of the Coronary Care Unit and director of Code Blue. Dr. Hawfield figured that Jack and I both had plenty of experience with very ill patients and death so we could get, as much as anybody, into ethical dilemmas and would be good candidates to start the committee.” Drs. Lynch and Mendelson invited broad representation from across the hospital to join them.



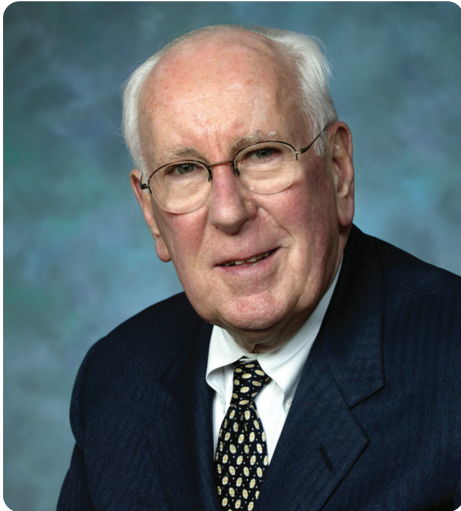
In the Medical Library, Matt Schreiber, MD, chair of the Bioethics Committee, and cardiologist Sander Mendelson, MD, who formed the original committee with John “Jack” Lynch, MD.

“Jack was the key to making it what it became. He carried the ball,” said Dr. Mendelson. “Jack was a very dynamic person who enlightened administrators and the medical staff about the value of bioethics and pushed the committee from where it began until his death a few years ago to improve the status of bioethics within the hospital. We jumped in more seriously than most other hospitals did at the time. The committee started as a subcommittee of the Quality Assurance Committee and we had to prove our worth through our activities, mostly doing consults, and helping patients and medical teams. With the recruitment of full-time bioethicists, bioethics grew in stature and importance.” Eventually, it expanded to the John J. Lynch, MD, Center for Ethics, which still includes the committee, but now also encompasses a consultative section, an academic section, research, and policy development.

Fostering a culture that values ethics

“The John J. Lynch Center for Ethics actually functions more like a ‘Department of Clinical Ethics,’ similar to the Departments of Medicine or Surgery. There are very few settings like this in the entire country or even the world,” said Matthew Schreiber, MD, current chair of the Bioethics Committee. “The committee is but one service the Lynch Center provides, and that committee is extremely unique. Most hospitals maintain an ad hoc committee with a handful of people coming together to answer ethically challenging questions about a particular patient. MedStar Washington supports a 24/7 consultancy service that complements a broad-reaching committee of multispecialty members that contribute to many aspects of the hospital’s mission. Through the committee’s reach, we’ve helped foster a hospital culture that values ethics.”

Though the committee does discuss specific patient situations, it’s more widely used as a steering committee for broader ethical topics



John "Jack" Lynch, MD, founded the Center for Ethics in 1982. He passed away in early 2016.

committee in 1982 was the acorn and the Lynch Center, as it is now, is the oak tree," said Dr. Schreiber. "MedStar Washington is seen as a trailblazer and frontrunner in the wider ethics community. Every year, other hospitals send members of their ethics committees to our immersion program to review what we're doing here and to share what they have learned where they practice."

"Health care is challenging. It's not only physiological medicine that we have to take into consideration; clinicians are frequently faced with multi-faceted dilemmas in a myriad of circumstances. Frankly, I don't know how we could successfully care for our complex patients without the support of the John J. Lynch, MD, Center for Ethics," said Jeffrey Dubin, MD, Senior Vice President, Medical Affairs, and Chief Medical Officer. "With our patients' well-being at the forefront of our minds, the partnership we have with our ethicists allows us to navigate

discussions, seek solutions, and decide how we can provide the most appropriate high-quality, safe patient care. Physicians often get a second opinion from a colleague; our ethics partners are our colleagues."

The committee has continued to include members from diverse backgrounds and specialties throughout its history, such as social workers, chaplains, clinicians, lawyers, community members, and retired physicians, like Dr. Mendelson, who remained on the committee after retiring two years ago. "Everyone has a voice on equal footing," said Dr. Schreiber. "The members are not more ethical people, but they have specialized training to know how to step back and answer ethics questions. We look at what should be done instead of what can be done. Through that effort, we work to make things better for both the current patient and the next one."

to shape education, patient care, and hospital policy. "It's amazing that some hospitals are starting today what began here 40 years ago, and how we've evolved in that time. The

Authors Day in 2018 featured a very special dedication, a donation of a body of ethics works bequeathed to MedStar Washington Hospital Center's Medical Library by the family of John J. "Jack" Lynch, MD, founder of the hospital's Center for Ethics. Dr. Lynch's wife, Ellen Loughran, said the donation of her husband's works is something he would have been very proud of.



Ellen Loughran speaking at the ribbon cutting dedication.



The Moral Courage Awards are presented annually in recognition of physicians, nurses, social workers, non-clinical and other staff throughout the hospital who have exemplified the virtue of courage and acted against difficult and ethically challenging circumstances.

Congratulations to the 2022 Gold-Headed Cane Award recipients

After a three-year hiatus, a larger than usual group of six physicians were honored as recipients of the Gold-Headed Cane Award. In keeping with tradition, Drs. Edward Aulisi, Anna Choi, Mario Golocovsky, Jack Moore, Sal Pindiprolu, and Glenn Wortmann were selected by a group of MedStar Washington Hospital Center's past Gold-Headed Cane Award recipients as this year's esteemed honorees.

The Gold-Headed Cane Award is a long-standing symbol for physicians of outstanding merit. "It's meant to represent physicians who have the character, talent, and passion to care for patients but also to promote medicine as a profession," says David Moore, MD, president of the medical and dental staff at MedStar Washington Hospital Center. "We've carried on the tradition at MedStar Washington for many years, pausing only because of the pandemic. This year was an opportunity to catch up and recognize a deserving group of diverse recipients in the areas of medicine they represent. Their selection illustrates the importance of a team approach—a variety of specialists who come together to care for our patients in a safe, compassionate way."

James Jelinek, MD, chair of the Gold-Headed Cane Committee and chair of the Department of Radiology at MedStar Washington, had the honor of notifying this year's awardees of the recognition. "These physicians are well-respected and distinguished leaders. They are also invaluable

mentors to both young and mid-road physicians. Other physicians model their practices after them," says Dr. Jelinek. "This year's recipients represent a broad spectrum in their specialties, and they are all respected leaders who we hope

will continue to be outstanding educators, researchers, and practitioners."

This year's recipients shared in surprise and gratitude when they were notified of the award.



Above: **Drs. Mario Golocovsky, Edward Aulisi, Anna Choi, Jack Moore, Sal Pindiprolu, and Glenn Wortmann.** Below: **Dr. Glenn Wortmann (center) after receiving his cane from Dr. Stephen Peterson (left) and CMO Jeffrey Dubin.**





Edward Aulisi, MD

“You never imagine yourself on this list until you’re there. I mean, what a ride,” says **Edward Aulisi, MD**. “It’s from your colleagues, which means the most to me that it’s from the people that I work with every day.

“It also makes me think of the people who went before me who were my mentors. It’s kind of cliché, but it’s really true, you stand on the shoulders of the people who came before you. You hope your shoulders are strong enough to support the next generation of people after you. And to stand on the stage with the other five recipients this year, with doctors like them, is amazing.”

Dr. Aulisi is the chair of the Department of Neurosurgery and serves as director of the MedStar Neuroscience Center at MedStar Washington. He is also the medical director of the MedStar Pituitary Center. He is a nationally known expert in spine surgery, and a pioneer in Robotic Image Guided surgery, having performed the first Cirq Robotic spine surgery in the United States.

Dr. Aulisi says he shares this recognition with his family, and particularly his wife: “She’s my best friend and has stood by me through a lot of long and difficult hours. All of our accomplishments we share together.”



Anna Choi, MD

“My first thought, I actually didn’t believe it,” said **Anna Choi, MD**. “To be included with this group of recipients is such an honor. It’s a sign of support from my colleagues.”

She said that recognition like the Gold-Headed Cane Award is powerful. It’s a symbol of appreciation that is not commonplace in our profession. “It makes me feel valued and that I’m doing good work.”

Dr. Choi is director of Breast Imaging and vice chair of the Department of Radiology at MedStar Washington, specializing in mammography, ultrasound, breast MRI, and interventional breast procedures.

“This has been my only job since I finished residency,” she added. “I really think MedStar Washington Hospital Center is a unique place and the physicians who work here are a special group. I find my work rewarding and couldn’t imagine working anywhere else.”



Mario Golocovsky, MD

“For me, the true award is doing the best I can every single day for my patients and their families. The award means responsibility for our actions, for what the institution has given to us, and a sense of pride for knowing that past recipients transfer the award to us,” says **Mario Golocovsky, MD**. “I share this with my entire staff, my residents, my students, my patients, and their families.

Dr. Golocovsky is the medical director of the Surgical Ambulatory Care Clinic, lead senior attending (Orange Team), and senior attending of Surgical Critical Care and Trauma and the Department of Surgery at MedStar Washington.

He says he’s looking forward to passing the Gold-Headed Cane Award along to other recipients in the future. “It’s a sign of respect and an honor from colleagues to colleagues. That is the true tradition, not keeping it yourself, but keeping it in permanent motion.”

“These awardees are motivated to help humanity, they are principled, and have a zeal for the profession,” says Dr. Moore. “I sum it up as character and passion. You have to have the passion for providing high-quality, safe patient care and for moving the profession forward; not everyone has that passion.”



Jack Moore, MD

“It’s a really gratifying surprise. This award has gone to a lot of good people,” says **Jack Moore, MD.** “I don’t know that I’ve ever received an award that meant more than this. You wonder, ‘Did I do a good job? Did I do as good as I could have?’ but this is validating.

“You can’t win an award like this without great colleagues at a great hospital. I know all the other recipients this year and standing with them to be recognized is really wonderful. It adds to it and means, even more, to be selected by people who have been recognized in the past.”

Dr. Moore recently retired as the director of the Section of Nephrology at MedStar Washington, a position he held for more than 25 years. Prior to retiring, he was also the medical director of Kidney and Kidney-Pancreas Transplantation at the Georgetown University Transplant Institute and MedStar Washington.

“I retired last year so I thought I’d never get this award. I was really thrilled when they called me,” added Dr. Moore. “It’s a real cap to my career and my retirement.”

“I remember seeing the photo of the award recipients each year and they were the heroes of the hospital,” recalled **Sal Pindiprolu, MD.**



Sal Pindiprolu, MD

“When I would see their pictures, it was the senior doctors you would go to that had this wisdom about any question you would have for them, whether it was clinical or leadership related. It’s hard to imagine that I’m in that category.

“To know that the past awardees are the individuals that put your name forward and respect you makes it even more special. Peer awards mean the most. They’ve observed you and seen you at your best and worst times and still think you’re worthy.”

Dr. Pindiprolu is associate designated institutional official (DIO) at MedStar Washington. She is also program director of the Internal Medicine Residency Program and associate program director of the Combined Medicine-Dermatology Residency Program at MedStar Georgetown University Hospital and MedStar Washington.

She says it’s especially meaningful to be recognized at MedStar Washington because she came here straight out of training more than 20 years ago and has been here ever since. “I feel like this hospital is in my blood—this is the only place that I’ve worked, and the only place I interviewed. The patients, colleagues, and leadership, it’s the best place to work. I love this place and this recognition makes me feel that much more connected to it.”



Glenn Wortmann, MD

“The people whom I’ve looked up to and are so well recognized and established in their fields and aspire to be like have been recipients in the past. They are my mentors, actually,” says **Glenn Wortmann, MD.** “I was surprised and grateful when I heard I was selected. It’s more personal to have this representation of excellence in your field when given by someone else who has been recognized.

“They don’t have to do it and I don’t personally do something that I love to do for recognition, but it speaks to the institution to take the time and effort to recognize physicians in this way.”

Dr. Wortmann is section director of Infectious Diseases and chair of the Infectious Control Committee at the hospital. He is also medical director for Infectious Disease for MedStar Quality and Safety.

Dr. Wortmann says that the COVID-19 pandemic was a particularly challenging time, which makes receiving this acknowledgment timely given his work in infectious diseases. “The last two years have been exceptionally hard for everybody. It may sound trite, but it truly does take a village. There are so many people who did amazing work over the past two years. I share this with people in the Lab, Human Resources, Occupational Health, Infectious Diseases, Infection Prevention, and every part of the organization that had to pull together.”



Drs. James Jelinek and David Moore together after the ceremony.

“The [recipients] are truly timeless physicians who are always there to support their colleagues and are always available as leaders in their departments. With this award, we have let them know how appreciated they are,” added Dr. Jelinek. “It’s our honor to recognize our most esteemed colleagues for this lifetime achievement at MedStar Washington Hospital Center.”

The tradition of the Gold-Headed Cane Award began in 1689 in England, with the passing down of the same cane to five physicians during a 150-year period. John Radcliffe, personal physician to King William III, distinguished himself as THE royal physician by carrying not just an ordinary gentleman’s cane of the day, but one that had a gold head, adorned by a cross bar on top, instead of the traditional knob. The Gold-Headed Cane Award has been a tradition at MedStar Washington Hospital Center since 1951, originating in one of the three hospitals that merged to become the Hospital Center in 1958.



Esteemed former leader of Cardiovascular Surgery Dr. George Garcia with Dr. Mario Golocovsky.



Greg Argyros, MD, President of MedStar Washington



Together, former and current Gold Headed Cane Award Recipients. Back row left: Drs. James Jelinek, Arthur West, George Garcia, Robert Laureno, Stephen Peterson, Ken Burman, Peter Levitt, George Obeid, and Raymond DiPhillips. Front row left: Drs. Edward Aulisi, Anna Choi, Mario Golocovsky, Jack Moore, Sal Pindiprolu, Glenn Wortmann, and Lowell Satler.

MedStar Heart & Vascular Institute marks the launch of new robotic cardiac surgery program

Brian Cohn of Northwest Washington is returning to his active life after undergoing the first robotic mitral valve surgery performed by Yuji Kawano, MD, at MedStar Washington Hospital Center.

Cohn was diagnosed with mitral valve regurgitation, a common condition in which the heart's two mitral valve leaflets, or flaps, don't function properly, allowing blood to flow backward—in the wrong direction.

"This is such a leap forward and I am so lucky to have met Dr. Kawano and his team," said Cohn. Dr. Yuji Kawano, director of the new robotic cardiac surgery program at MedStar Washington, has extensive experience with the procedure, having previously performed more than 200 robotic heart surgeries and over 2,000 heart and vascular surgeries.

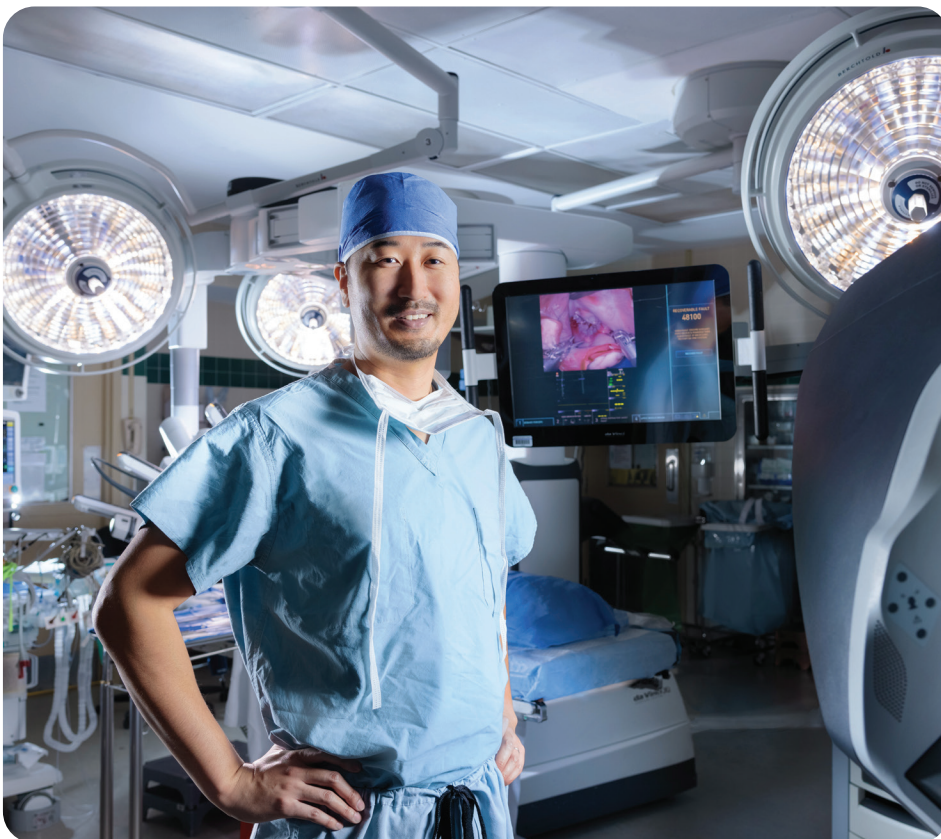
"Combining the precision of robotic instruments with a high-definition 3D camera, we are now able to perform intracardiac procedures through very tiny incisions in the chest using the

da Vinci® surgical system," said Dr. Kawano. "Robotic surgery is an excellent option for patients seeking quicker recovery and less post-surgical pain, without compromising the clinical result of the surgery itself."

The robotic cardiac surgery program at MedStar Washington is the first in the area to serve the southern Maryland, greater Washington, D.C., and northern Virginia region.

With a robotic approach, surgeons slip instruments through five very small incisions, all less than one-inch wide, between the ribs and through the chest wall. These tools have a wider range of motion than the human hand, allowing for more intricate movements and increasing the precision of the surgical technique. The robotic approach reduces the risk of post-surgical complications and shortens hospital stays.

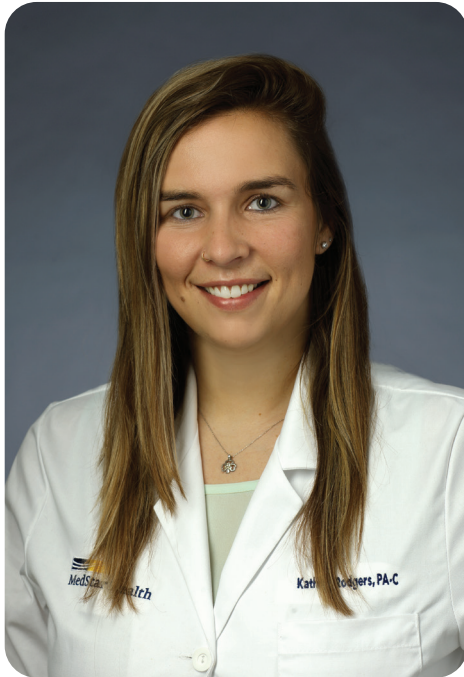
Patients also experience much less pain during their recovery. "Robotic cardiac surgery is an exciting and important next step in the evolution of the MedStar Washington Hospital Center cardiac surgery program," said Christian Shults, MD, interim co-chair of the cardiac surgery program at MedStar Health. "Our cardiac surgery program is already recognized as one of the largest and most experienced in the entire country. Robotic cardiac surgery is the latest example of our ongoing tradition of clinical innovation and excellence."



Yuji Kawano, MD, in the MHVI operating room

Kathryn Rodgers, PA-C

Emergency Medicine



Emergency medicine is a demanding, fast-paced, multi-tasking environment—the kind of place where Kathryn Rodgers, PA-C, feels right at home.

"It's true that you need a certain personality for this kind of work," admits Rodgers, who was named chief advanced practice provider (APP) for the Department of Emergency Medicine (ED) at MedStar Washington Hospital Center in June. "After doing a couple of ED rotations during my physician assistant (PA) training, I knew that's what I wanted to do."

Rodgers, a D.C.-area native, had considered a healthcare career while an undergraduate at Virginia Tech, but was wary of tackling the additional study and training to become a physician.

After graduation, she worked as an office manager and driver for Capital House Calls, a Medicare home-based primary care practice for frail and homebound patients in Montgomery County founded by emergency medicine specialist Amy Schiffman, MD.

"That's where I really got to see some of the many facets of what PAs do, in this case working directly with older patients and their families on their medication, transition of care, and embracing the end of life," Rodgers says. "It was an awesome experience, and it really solidified the kind of career I wanted for myself."

During her PA studies at Lake Erie College near Cleveland, Ohio, Rodgers frequently looked to Dr. Schiffman for guidance in shaping her preparation for work in emergency medicine. Looking to return to D.C. upon graduating in 2017, she jumped at an offer to join the hospital's ED.

"Everyone here—the physicians, the other PAs—are great to work with," she says. "We support each other to get through the day and challenging situations. And as a large tertiary care hospital, we're involved with trials and new protocols that aren't being done anywhere else. We also have some incredible teachers who help remind you why you got in this field, to begin with."

Few experiences better demonstrated the level of that commitment than the coronavirus pandemic, an experience Rodgers calls "surreal," but one that evidenced her team's unwavering

commitment to patients and each other.

"We came to work every day and tried to keep things very light," she recalls. "Early on, of course, there was a lot of uncertainty and, understandably, some fear. But the caliber of people we have in the ED is pretty impressive."

As chief, Rodgers wants to set the same kind of example, serving as an advocate for her team, and ensuring they're getting the most from their jobs. She also looks forward to being involved with the ED's new Observation Unit, designed to help speed the discharge process for admitted patients.

She'd also like to contribute to MedStar Washington's PA residency program. "New graduates often face a long learning curve with emergency medicine, critical care, and other disciplines," Rodgers explains. "It'd be good to find practical ways to help them get up to speed."

Rodgers enjoys spending time with family and friends and taking advantage of the D.C. area's diverse restaurant scene. She's also an avid traveler, having recently made trips to Greece and several national parks.

"Experiencing different cultures is always fun," Rodgers says, "but it also provides valuable perspective about your own life, and reminds you of what's important."

Danny Flautero, MD

Family Medicine

Apart from sharing the same time zone, Bogota, Colombia, and Minneapolis, Minn., would seem to have few similarities. Yet despite being only 9 years old when his immigrant family made that 3,000-mile move, Danny Flautero, MD, successfully navigated that challenging transition, an experience that eventually led him to pursue a career in medicine.

"Growing up, not many physicians looked like me, nor did they speak Spanish," recalls Dr. Flautero, currently MedStar Washington's chief resident for family medicine. He adds that the need to overcome cultural barriers is a reason why he double majored in French and biology at Amherst College, before enrolling at Georgetown University's School of Medicine.

"The science part is obvious," he says, "but humanities is about establishing relationships, and understanding the whole person. In medicine, it can go a long way toward breaking down barriers and opening doors to treating people. That includes LGBTQ patients, another group that is underrepresented in medicine."

It's hardly surprising, then, that Dr. Flautero chose family medicine as his specialty. And Washington, D.C., has provided the ideal location for his residency, given its large, underserved populations.

"Because family medicine physicians get training in everything, we're comfortable with whoever walks in the door," he says. "And once many patients know they can work with a Spanish-speaking physician, they want to keep seeing me."



Dr. Flautero notes that family medicine physicians can also help patients decide whether they truly need specialty care, or if other options are available.

"It's an important role that takes the burden off the rest of the health care system," he says.

In addition to his clinical work, Dr. Flautero is exploring ways to help improve the workflow of treating Spanish-speaking and LGBTQ patients. He's planning a lecture series for support staff on the use of preferred pronouns and avoiding misgendering individuals—

common misunderstandings among healthcare providers that nevertheless can discourage patients and families from seeking treatment.

"We see all kinds of people in family medicine—all ages, all groups," he says. "Unless you can connect with them, you're compounding barriers that are already there."

While his post-residency plans have yet to come into focus, Dr. Flautero and his partner find much to like about the nation's capital. In addition to easy access to a variety of getaway locations, the region offers no shortage of new restaurants and cuisines to experience. Dr. Flautero also enjoys the opportunity to try out his cooking and baking skills with interesting recipes or new dishes.

"In most every culture, food is a foundation for building connections," he says. "It's a sure way to help start and sustain conversations and relationships."

"We see all kinds of people in family medicine. Unless you can connect with them, you're compounding barriers already there."

— Danny Flautero, MD

Irina Veytsman, MD

Section Director: Hematology Oncology



As a child, Dr. Irina Veytsman grew up in a remote and frigid corner of Siberia, in what was then the Soviet Union. Each summer, her parents sent her to her grandmother in Ukraine, in search of the sun.

But the summer Dr. Veytsman turned seven, her world turned upside down: that beloved grandmother was diagnosed with lung cancer. At that time, there were no treatment options available. Dr. Veytsman spent that summer brushing her grandmother's hair to help ease the pain. With each stroke, the young girl could see her grandmother's face relax and release. Her grandmother was gone within five months.

Despite that early trauma, oncology didn't enter Dr. Veytsman's radar in medical school. She attended medical school in Russia, where there was, she says, an air of hopelessness related to cancer. Then she came to the United States for her residency where—by chance—her first clinical rotation was in oncology.

"I completely fell in love with the team," says Dr. Veytsman, now a

board-certified medical oncologist/hematologist at MedStar Georgetown Cancer Institute at MedStar Washington Hospital Center and a Section Director of the Hematology/Oncology Department. "They had a special aura around how they approach patient care, how they relied on each other, how they talked to patients and in the gratitude patients expressed."

"It was all so fascinating. The more I read and the more I took care of patients, it drove me toward the specialty," the oncologist recalls. "After that month, it was the only thing I wanted to do."

Dr. Veytsman joined MedStar Washington in 2008, following a three-year fellowship in hematology and medical oncology at the National Institutes of Health's National Cancer Institute. At the time, the prognosis for lung cancer patients wasn't too much better than when her grandmother was diagnosed thirty years earlier: there were only four conventional chemotherapy drugs for the treatment of lung cancer and one targeted therapy. Only about ten percent of patients were alive after one year.

No one wanted to take on those odds to develop a better lung cancer treatment. But that, Dr. Veytsman says, is where her Siberian origins served her well. "Siberia made me very resilient," she quips.

So, Dr. Veytsman volunteered to lead the work. "In my life, I get attracted to situations where nobody else wants to do it. I become 'Mama Bear' trying to fight the barriers," she says.

Fast forward to 2022: forty drugs are now available and advances in personalized precision medicine have

greatly improved outcomes for patients and life expectancy.

Dr. Veytsman also works with endocrine, and head and neck tumors, bringing her expertise to a multidisciplinary team. "We're seeing excellent results in our efforts to cure recurrent endocrine cancer," she says. We are continuing to build clinical trials to look at resistant pathways in cancer, particularly of immunotherapy drugs to try to understand how to revamp our own immune responses to fight cancer and bypass that resistance." She also has significant interest in addressing racial/ethnic disparities in cancer clinical trials, considering cancer disproportionately impacts minority groups. "We are seeing patients present at more advanced stages with worse prognoses," adds Dr. Veytsman.

When it comes to patient care, Dr. Veytsman will always be that young girl, soothing her grandmother. "When they don't have family, we become their family," she says.

"It takes two villages to take care of cancer patients. I can't make decisions without good surgeons, pathologists, radiologists, nurses, and support staff," Dr. Veytsman says. Recently, a patient completed her treatment and began to cry. Her tears were, surprisingly, not of joy, but sadness: the woman revealed she was crying because she would no longer see her providers every week. Dr. Veytsman was moved by the revelation. "The patient shared that everyone was so kind and nice here; that people genuinely asked about how she was doing. That connection makes me feel so humble and grateful."

Connections

News for the medical & dental staff, residents, and fellows
at MedStar Washington Hospital Center

Physician's Perspective

From the desk of James Street, MD Trauma and Critical Care Surgeon

After more than two decades at MedStar Washington Hospital Center, I remain filled with an overwhelming sense of gratitude. My journey with the hospital started when I was a medical student, searching for a residency. I'd landed interviews with some of the "Big Name," nationally recognized hospitals. MedStar Washington was, at the time, less well-known nationally, but I was drawn to it as a community hospital.

If I'm being honest, my interview with MedStar Washington—the first of my big interviews—was supposed to be my "practice interview." Then I got here, and I was amazed by what I saw: a community hospital with a palpable culture of respect, professionalism, and care.

I went on to those other "Big Name" places—ten interviews in all. But when I sat down and looked at my notes and searched my feelings, there was something about *this* hospital that felt like the place I wanted to learn to be a trauma surgeon. I marked MedStar

Washington at the top of my list. And I feel blessed that the hospital did the same.

Since that moment in 2000, I've seen this hospital grow and expand. I've witnessed changes in surgical chairs and hospital presidents, but what has *not* changed are the core values that made me choose this as my professional home then, and now. For me, those core tenets include our diverse patient population, the learning opportunities as a medical professional that I continue to have, and, of course, the culture.

That team culture permeates from the top down. Every member of our leadership treats every member of our broader team, from doctors to environmental colleagues, with respect. They are approachable and value diversity. We say, "Patient First, Team First," and I don't think those are slogans on a wall. It's something that I can testify to after twenty years as part of this institution.

It's why I chose this place as my first job, and why it's the place from which I plan to retire. My fellow



trauma colleagues are second to none and, after fifteen years or more together, we are family. None of us has ever had to miss a child's baseball game, because we are always willing to step up for each other. And professionally, it's amazing to know each other's patient patterns and how they'd prefer I approach treatment. I've been in other hospitals, and they simply don't feel the same. I felt that from the moment I came here to interview, twenty-two years ago. I have a profound sense of gratitude for my colleagues across departments and roles, and for this initial residency placement that has become home.