

Third Annual Donor Symposium

Friday, April 25, 2014

12:30–5:00 p.m.

Center for Care and Discovery

7th Floor Sky Lobby

Conference Center Boardroom



**THE UNIVERSITY OF
CHICAGO MEDICINE**

Bucksbaum Institute
for Clinical Excellence

Welcome

The Bucksbaum Institute for Clinical Excellence welcomes you to the Third Annual Bucksbaum Institute Donor Symposium. The Keynote Lecture entitled Talking to Patients “when less is more” will be given by Dr. Wendy Levinson, the Sir John and Lady Eaton Professor and Chair of the Department of Medicine at the University of Toronto. Later in the symposium, you will meet Bucksbaum Scholars—students and faculty—who will present their work on the doctor patient relationship.

The Bucksbaum Institute is growing and thriving. Now in its third year, we have appointed more than 90 active faculty, medical school students and undergraduate pre-medical students dedicated to research, teaching and developing clinical programs aimed at providing compassionate, humanistic medical care by improving communication in health care and by studying the Doctor-Patient Relationship.

Thank you for joining us at the symposium and for supporting the goals and mission of the Bucksbaum Institute.



Mark Siegler, MD
Executive Director



Matt Sorrentino, MD
Associate Director

About the Bucksbaum Institute

Mission

The Bucksbaum Institute for Clinical Excellence will improve patient care, strengthen the doctor-patient relationship and enhance communication and decision-making through research and teaching programs for medical students, junior faculty and master clinicians.

Achievements

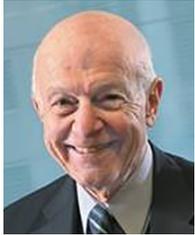
The Bucksbaum Institute for Clinical Excellence at the University of Chicago was created in September 2011 with a \$42 million endowment gift from the Matthew and Carolyn Bucksbaum Family Foundation. To achieve its mission, the Institute has appointed more than 90 Institute scholars including faculty, medical students, and undergraduate pre-medical students. The Bucksbaum Institute is currently operating 18 programs, which include:

- The five scholar programs (Master Clinician, Senior Faculty, Junior Faculty, Associate Junior Faculty, and Medical Student),
- A pilot grant program,
- An annual program of lectures, seminars, and scholar lab meetings,
- An elective course for Pritzker School of Medicine students,
- Bucksbaum Interest Group (BIG) for Pritzker students,
- An undergraduate clinical excellence program,
- An undergraduate faculty shadowing program, and
- Public lectures and programs co-sponsored with the Institute of Politics.

Additionally, the Bucksbaum Institute is pleased to announce that it has recently joined forces with the Schwartz Center and the Gold Humanism Foundation as a co-sponsor of the first national conference on “Advancing Compassionate, Patient- and Family Centered Care through Interprofessional Education for Collaborative Practice.” This pioneering conference will meet from October 30 to November 1, 2014 in Atlanta, Georgia.

In Memoriam

Matthew Bucksbaum (1926–2013)



Matthew Bucksbaum, co-founder of General Growth Properties, died November 24, 2013, of respiratory failure. Before his retirement as CEO in 1999, and as Chairman in 2006, the publicly held company was one of the largest owners and developers of shopping centers in the world, numbering over 200 malls and 200 million square feet of space.

The company was the outgrowth of a family-owned grocery business in Marshalltown, Iowa, where Mr. Bucksbaum grew up and attended school. He was the first in his family to graduate from college with a four-year degree from the University of Iowa. He majored in economics, graduated cum laude, and was elected to the Phi Beta Kappa honor society. He was a member of the Phi Epsilon Pi social fraternity. The University honored him as one of its outstanding alumni.

The real estate development company was founded in 1954 under the leadership of Matthew Bucksbaum and his brothers Maurice and Martin. The Bucksbaum brothers were among a handful of families who are recognized today as the pioneers of the shopping center industry. Matthew became a member of the board of the International Council of Shopping Centers in 1986, and was named the organization's worldwide chairman in 1992. Generally soft-spoken and thoughtful, he lived by the principal "My good name is the most precious thing I have" and was known for his integrity.

From 1959 to 2000, he lived with his family in Des Moines, Iowa. The family also lived in Cedar Rapids, Iowa, where they built the state's first shopping center, and their second center, in Bettendorf, Iowa, was the first to feature a department store anchor at a time of rapid expansion in the shopping mall industry. After building malls in other Iowa communities in which Younkers, an Iowa department store chain, was the anchor tenant,

the board chairman of Younkers asked the Bucksbaums to move to Des Moines in 1964 to assume the management of a publicly held real estate firm. The public listing of its stock broadened the company's financial base and permitted it rapid expansion, taking the name General Growth Properties in 1970.

The Bucksbaums became part-time residents of Aspen, Colorado, in the early 1970s, drawn there by both the winter and the summer beauty, as well as the Aspen Music Festival. After years of regularly enjoying summer concerts there, Mr. Bucksbaum was invited to become a trustee of the Festival and later served two terms as the chairman of its board. He oversaw the building of a new concert tent during his chairmanship. It provided a concert hall-like summer venue for Festival events. After moving to Chicago, he was asked to join the board of the Chicago Symphony Association that was in the midst of renovating Symphony Hall. He became deeply interested in the medical school of the University of Chicago and with his wife co-founded the Bucksbaum Institute for Clinical Excellence. Additional interests have included providing scholarship opportunities for young people in the varied fields of music and higher education, and initiatives to increase diversity within the shopping center-related industry.

He is survived by his wife of 61 years, Carolyn Swartz Bucksbaum, and children, John Bucksbaum (Jacolyn) and Ann B. Friedman (Thomas L.) as well as grandchildren Orly D. Friedman and Natalie F. Winston (Daniel) and Max and Eli Bucksbaum, and his brother, Maurice Bucksbaum (Dorothy).

Preceding him in death was his brother Martin. The family is also deeply indebted to Robert Schrieffer, John Rhea Zurbano, Anita Ocampo, Emilita Cielos, Griselda Henderson, and Celia Manulus for their years of loving care, Pat Gessmann, who for decades provided invaluable service to Matthew as his Administrative Assistant, and to the family's devoted doctor, Mark Siegler.

In Memoriam

Joel Schwab (1945–2013)



Joel Schwab, born July 27, 1945, inspired 20 years of medical students and pediatric residents at the Pritzker School of Medicine and Comer Children's Hospital through his passion for pediatrics and his unwavering dedication to the welfare and success of others. In 1997, he began more than a decade of service as the Director of the Pediatric Clerkship; he also served on the Pritzker School of Medicine's curriculum and admissions committees. He was best known, however, as a role model for budding pediatricians and colleagues, for his considerable clinical talents and an even bigger heart. With his trademark "Big Bird" stethoscope around his neck, students, residents and colleagues alike would seek his advice on difficult diagnoses. Students and colleagues recognized his teaching excellence with eight teaching awards and celebrated his humanism and compassion with the American Association of Medical Colleges Humanism in Medicine Award and the Leonard Tow Humanism in Medicine Award. His deep commitment to children's health is evidenced in his leadership roles with the Washington Park Children's Free Clinic and the Health Leads Project at the University of Chicago.

Joel became an early and enthusiastic participant in the new Bucksbaum Institute. His interests in medical education and in improving patient care aligned closely with the mission of the Bucksbaum Institute. Joel was one of the first Senior Faculty scholars appointed to the Bucksbaum Institute under the auspices under the Bucksbaum Institute Joel developed programs directed to medical students and under graduate students. Joel's commitment to helping young pre-medical students on their journey toward medical school resulted in a robust program called the Clinical Excellence Scholars Track. One component of the program is the "On Being a Doctor" series. This series was envisioned entirely by Joel, which hosts a monthly physician lecture on a topic cultivating clinical excellent and developing an understanding of the

doctor-patient relationship. In recognition of his significant dedication not only to this program but also to the overall development of undergraduate students, we renamed the series "The Joel Schwab, M.D. Program On Being a Doctor."

He grew up in Brooklyn, N.Y., encouraged to pursue his interest in medicine by an uncle who was a general practitioner. He graduated in 1967 with a B.A. in Zoology from the University of Michigan, received his M.D. from New York Medical College, and moved to Chicago to complete his residency at Northwestern School of Medicine. He came to the University of Chicago in 1986, where he spent a decade building a robust clinical practice in Homewood-Flossmoor. In 1997, teaching became a bigger priority and he took on greater responsibilities in the medical school and residency programs, including Clerkship Director. His commitment to encouraging and advancing the careers of young physicians led in 2011 to becoming Director of the Medical Student Evaluation Program. In this role, he prepared the letters that would represent the strengths and achievements of each graduating medical student as they applied to residency. He spent time with each student identifying their goals, their strengths, and their unique talents, and then, with tremendous enthusiasm, he became their advocate and biggest fan.

His scholarly contributions include 19 articles, one book chapter, and founding the Pritzker School of Medicine pediatric clerkship education website. Throughout his career at the medical school, he shared his clinical acumen and insights through frequent lectures to medical students, rounding, and monthly multi-disciplinary Pediatric Attending Case Conferences. At every weekly small preceptor group session, he also shared his bottom-less supply of Swedish Fish.

Dr. Schwab was admired and loved for his common-sense, practical problem-solving approach and for his overwhelming commitment to making people—his students, his colleagues, and his patients and their families—the highest priority in all of his endeavors.

Agenda

12:30 p.m. Registration and lunch

12:50-1:00 p.m. Introductions

Kenneth Polonsky, MD
*Richard T. Crane Distinguished Service Professor
Dean of the Division of the Biological Sciences
and the Pritzker School of Medicine
Executive Vice President of Medical Affairs*

Mark Siegler, MD
*Lindy Bergman Distinguished Service Professor
of Medicine and Surgery and Executive Director,
Bucksbaum Institute for Clinical Excellence*

**1:00-1:55 p.m. Keynote Lecture
Talking to Patients “when less is more”**

Wendy Levinson, MD
*Sir John and Lady Eaton Professor and Chair of the
Department of Medicine at the University of Toronto*

**2:00-4:00 p.m. Research Presentations by Bucksbaum Faculty
and Student Scholars**

**2:00-2:15 p.m. “Patient Education in Hematopoietic
Stem Cell Transplantation”**
Michael R. Bishop, MD (Department of Medicine)

**2:15-2:30 p.m. “Bone Health and Fragility Fractures:
The Role of Patient Communication”**
Douglas Dirschl, MD (Department of Orthopaedic
Surgery and Rehabilitative Medicine)

**2:30-2:45 p.m. “Biologically targeted therapy for children with
vascular anomalies: Conversations with families
about how to use new information”**
Jessica Kandel, MD (Department of Surgery)

2:45-3:00 p.m. “UCIHP Clinical Excellence Scholar Program”
Ross Milner, MD (Department of Surgery)

**3:00-3:15 p.m. “Enhancing the provider-patient relationship
at sites beyond the University of Chicago”**
John Schneider, MD (Department of Medicine)
Ashley Tsang, MS2 (Pritzker School of Medicine)

**3:15-3:30 p.m. “The North American Thyroid Cancer Survivorship
Study: Changing Survivorship Care Through
Improved Doctor-Patient Communication”**
Ray Grogan, MD (Department of Surgery)

**3:30-3:45 p.m. “A Missed Opportunity to Improve Patient
Satisfaction? Patient Perceptions of Inpatient
Communication with Their Primary Care Physician”**
Dara Adams, MS2 (Pritzker School of Medicine)

**3:45-4:00 p.m. Surgeon-Family Perioperative Communication:
Surgeons’ Self-Reported Approaches**
Aubrey Jordan, MS2 (Pritzker School of Medicine)

4:00-4:30 p.m. Advisory Board Panel Discussion

Jordan Cohen, MD
*Professor of Medicine and Public Health, George
Washington University; President Emeritus, American
Association of Medical Colleges; Chairman of the Board,
Gold Humanism Foundation*

Laura Roberts, MD
*Katharine Dexter McCormick and Stanley McCormick
Memorial Professor; Chairman, Department of Psychiatry
and Behavioral Sciences, Stanford University*

Arthur Rubenstein, MBBCh
*Professor of Medicine; Former Dean and EVP for the
Health System (2001-2011); Raymond and Ruth
Perelman School of Medicine, University of Pennsylvania*

4:30-5:00 p.m. 2014 Pritzker Poetry Contest Awards Presentation

5:00 p.m. Adjourn

Speaker Biography and Abstract

Wendy Levinson, MD



Dr. Levinson is the Sir John and Lady Eaton Professor and Chair of the Department of Medicine at the University of Toronto. She is past-Chair of the American Board of Internal Medicine (ABIM) Board of Directors and a member of the ABIM Foundation Board of Trustees. Dr. Levinson is past-Chair of the Canadian Association of Professors of Medicine (CAPM) and is presently Chair of the Association of Professors of Medicine (APM) in the United States.

Dr. Levinson is a national and international expert in the field of physician-patient communication and, in particular, on the disclosure of medical errors to patients. Dr. Levinson has led efforts to educate and engage residents and faculty members in patient safety, quality improvement and the stewardship of finite resources. She has led many innovative projects to improve the organization of care including Building Bridges to Integrate Care (BRIDGES), an initiative to develop and test new models of care which link hospitals, primary care clinics and community services to provide comprehensive care to people with complex chronic disease. Most recently, she is leading Choosing Wisely Canada, a campaign to help physicians and patients engage in conversations about the overuse of tests and procedures and support physician efforts to help patients make smart and effective choices to ensure high quality care.

Abstract: Talking with patients about “when less is more”

Physicians have historically not seen the stewardship of finite health resources as their professional responsibility, but that is changing. I will trace the history of “rationing at the bedside” to the present day campaign of “Choosing Wisely.” I will discuss the implications of this change for the physician-patient relationship and consider the communication skills physicians need to talk with patients about when less is more.

Research Presentations by Bucksbaum Faculty and Student Scholars

Michael R. Bishop, MD (Department of Medicine)

Bucksbaum Institute Master Clinician

Patient Education in Hematopoietic Stem Cell Transplantation

(See page 10)

Douglas Dirschl, MD (Department of Orthopaedic Surgery and Rehabilitative Medicine)

Bucksbaum Institute Master Clinician

Bone Health and Fragility Fractures: The Role of Patient

Communication (See page 11)

Jessica Kandel, MD (Department of Surgery)

Bucksbaum Institute Master Clinician

Biologically targeted therapy for children with vascular anomalies:

Conversations with families about how to use new information

(See page 12)

Ross Milner, MD (Department of Surgery)

Bucksbaum Institute Master Clinician

UCIHP Clinical Excellence Scholar Program (See page 13)

John Schneider, MD (Department of Medicine)

Bucksbaum Institute Junior Faculty Scholar

Ashley Tsang, MS2 ((Pritzker School of Medicine)

Bucksbaum Institute Medical Student Scholar

Enhancing the provider-patient relationship at sites beyond the

University of Chicago (See page 14)

Raymon Grogan, MD (Department of Surgery)

Bucksbaum Institute Junior Faculty Scholar

The North American Thyroid Cancer Survivorship Study: Changing

Survivorship Care Through Improved Doctor-Patient Communication

(See page 15)

Dara Adams, MS2 (Pritzker School of Medicine)

Bucksbaum Institute Medical Student Scholar

A Missed Opportunity to Improve Patient Satisfaction?

Patient Perceptions of Inpatient Communication with Their Primary Care Physician (See page 16)

Aubrey Jordan, MS2 (Pritzker School of Medicine)

Bucksbaum Institute Summer Research Grant Recipient

Alexander Langerman, MD (Department of Surgery)

Bucksbaum Institute Junior Faculty Scholar

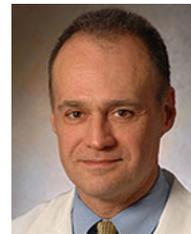
Surgeon-Family Perioperative Communication: Surgeons'

Self-Reported Approaches (See page 18)

Patient Education in Hematopoietic Stem Cell Transplantation

Michael R. Bishop, M.D. (Department of Medicine)

Bucksbaum Institute Master Clinician



ABSTRACT: Hematopoietic stem cell (a.k.a. bone marrow) transplantation (HSCT) can provide long-term survival and potentially cure to patients with advanced hematologic malignancies such as acute leukemia and lymphoma. However, this procedure can be associated with life-threatening complications. Therefore, clear and open patient-doctor communication and detailed yet understandable education relative to their disease-status and treatment options are imperative in order to assist in the decision-making process. Once the decision to move forward to HSCT is made, further communication and education continues through the entire transplant, and such efforts have been demonstrated to result in improved patient outcomes. My presentation will focus on the education of the HSCT patient and efforts being taken at the University of Chicago to improve this process.

Bone Health and Fragility Fractures: The Role of Patient Communication

Douglas R. Dirschl, MD (Department of Orthopaedic Surgery and Rehabilitative Medicine)

Bucksbaum Institute Master Clinician



ABSTRACT: Fragility fractures in the US occur with almost epidemic frequency—over 2 million occur each year, which is nearly 10 times the number of heart attacks and more than 11 times the number of cases of breast cancer. After a patient sustains the first fragility fracture, the risk of a second fracture increases 6- to 12-fold. While there is much that can be done to prevent the second fracture, only 20% of fragility fracture patients in the US receive the evaluation or care that could do so. This occurs fundamentally because physicians do not stress the importance of this evaluation to patients who have fractured and patients are in denial that their fracture may have been caused by poor bone quality. This presentation will discuss the factors that relate to this gap in communication/understanding and will introduce a strategy for improving this key patient communication, increasing the rate of evaluation and treatment, and enhancing the quality of life for these high-risk patients.

Biologically targeted therapy for children with vascular anomalies: Conversations with families about how to use new information

Jessica Kandel, MD (Department of Surgery)

Bucksbaum Institute Master Clinician

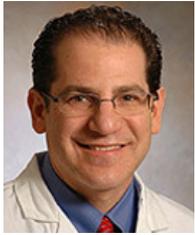


ABSTRACT: Vascular anomalies are among the most common congenital malformations. In their most severe form, these lesions can result in significant morbidities for children, including compromise of vital functions. Previously, the molecular mechanisms of vascular anomalies were poorly understood, limiting treatments to the purely empiric. However, in the past two years new biologic information has emerged, allowing the identification of potential targets for treatment. These discoveries have altered the conversations between treating physicians and families. With the development of new therapeutic options, the risks and benefits of targeted treatment are now part of the discussion around the care of each affected child.

“UCIHP Clinical Excellence Scholar Program”

Ross Milner, MD (Department of Surgery)

Bucksbaum Institute Master Clinician



ABSTRACT: The Clinical Excellence (CE) Track at the University of Chicago is a collaborative program between the University of Chicago Careers in Health Professions and The Bucksbaum Institute for Clinical Excellence. The program began last year with the selection of 24 scholars entering their second year of undergraduate studies. The students are asked to participate in a variety of activities that expose them to careers in medicine. These activities include shadowing physicians who have been selected as Bucksbaum Master Clinicians, Senior Scholars, and Junior Scholars. The students also volunteer in the hospital, attend lectures (Joel Schwab “On Becoming a Doctor” Lecture Series), and are required to complete specific undergraduate coursework.

The program has been a success in its first year and we are in the process of selecting the second class of scholars. The success of the CE track has been expanded to the 3rd and 4th year classes of the undergraduate school with an extended shadowing program. Over 80 physicians from the University of Chicago Medicine have volunteered to allow University of Chicago undergraduate students to shadow and learn from them.

Enhancing the provider-patient relationship at sites beyond the University of Chicago

John Schneider, MD (Department of Medicine)

Bucksbaum Institute Junior Faculty Scholar

Ashley Tsang, MS2 (Pritzker School of Medicine)

Bucksbaum Institute Medical Student Scholar



ABSTRACT: Delivering compassionate, patient-centered care in resource-restricted settings requires an interdisciplinary team approach. To better understand provider-patient relationships within these settings, we explored the provision of care in non-hospital contexts: community clinics and a county jail.

Dr. John Schneider will present some of his work that is at the core of the physician patient relationship: adherence to medications. He will cover the role that physicians have in resource restricted settings such as South Chicago and South India. This has several cross-cutting themes including the complexity of care in resource restricted settings including non-physicians, provision of novel medications such as pre-exposure prophylaxis and finally the provision of such care to sexual minorities.

Ashley Tsang will present her overdose prevention work with detainees at Cook County Jail. The project aims to address the increased risk of overdose in individuals leaving incarceration. Participants learn how to prevent, recognize and respond to overdoses. Ashley will discuss how exploring overdose history and empowering patients to prevent future overdoses can enrich provider-patient relationships. Addressing these issues can have a profound impact as patients see how their systems of care value life above other outcomes.

The North American Thyroid Cancer Survivorship Study: Changing Survivorship Care Through Improved Doctor-Patient Communication

Raymon Grogan, MD (Department of Surgery)

Bucksbaum Institute Junior Faculty Scholar



ABSTRACT: The incidence of thyroid cancer has been steadily rising for decades worldwide, and is predicted to be the third most common cancer in women of all ages by the year 2019. These high incidence rates combined with high survival rates have resulted in a large population of thyroid cancer survivors. Like all cancer treatments, thyroid cancer treatment leaves patients with a unique set of complications and hurdles to overcome once their treatment is complete. Also many of these patients will live for decades with constant, yearly follow-up for their cancer. Unfortunately, thyroid cancer survivorship care is an understudied, often overlooked field of medicine. Because of this, there are little data on the psychological aspects of thyroid cancer survivorship, thus physicians are poorly equipped to understand and help treat issues that arise for this distinct group of patients. Dr. Grogan and his team are leading a multi-institutional prospective study called the North American Thyroid Cancer Survivorship Study to better understand this phenomenon. Dr. Grogan's group hopes to improve the overall survivorship care of thyroid cancer survivors by improving communication between these patients and their physicians. This study is the largest of its kind ever undertaken, and Dr. Grogan will be presenting preliminary findings of the study.

A Missed Opportunity to Improve Patient Satisfaction? Patient Perceptions of Inpatient Communication with Their Primary Care Physician

Dara Adams, MS2 (Pritzker School of Medicine)

Bucksbaum Institute Medical Student Scholar

Co-authors: Andrea Flores, MA; Ainoa Coltri, MA; David O. Meltzer, MD, PhD; and Vineet M. Arora, MD



BACKGROUND: Improving patient satisfaction is a major focus of hospitals and is a widely reported, public hospital quality measure. Satisfaction could be driven by many factors, including patient perceptions of communication and continuity of care with their primary care physician (PCP). Hospitalists play a key role in this communication. This study aims to characterize patient perceptions of hospital team-PCP communication and their relationship to overall patient satisfaction with their hospital care.

METHODS: From 2003–2013 we surveyed eligible hospitalized patients and their PCPs at an academic medical center, oversampling frail elders as defined by the Vulnerable Elders Survey (VES-13). Telephone interviews of discharged patients were conducted 4 weeks after discharge to elicit overall patient satisfaction and perceptions of communication between the hospital team and PCP. Satisfaction was defined as Excellent or Very Good on a scale that included Good, Fair or Poor. Each patient's PCP was faxed a survey two weeks after discharge to assess communication with the hospital team. Descriptive statistics were used to summarize satisfaction and communication outcomes. To test the association between patient satisfaction and perceptions of inpatient-PCP communication, we used the non-parametric Kruskal-Wallis Test.

RESULTS: 804/1058 patients were included in our sample (mean age 72 ± 16 years). 62.3% of patients were satisfied with their hospital care and 50.0% were satisfied with the coordination and teamwork between their hospital team and PCP. More PCPs reported communicating with the hospital team than patients perceived, with 80.7% of PCPs reporting communication compared with 64.8% of patients ($p < 0.001$). Among patients whose PCP did not report communication, 51.6% believed that communication had occurred. Patient perceptions of hospital team-PCP communication were positively correlated with overall patient satisfaction, while PCP reports of communication were not. Patients who perceived communication were more satisfied than those who did not (69.0% vs. 50.0%, $p < 0.001$); there was no difference between patients whose PCPs did or did not report communication (63.1% vs. 59.4%, $p = 0.676$). Neither patient perceptions of communication nor PCP reports of communication were correlated with acute care events within 30 days after discharge, including readmissions or Emergency Department visits ($p = 0.627$).

CONCLUSIONS: Patients over-estimated hospital team-PCP communication when it did not occur, implying a lack of patient awareness that discontinuity of care had occurred. This lack of patient awareness could impede patient safety. Further, patient perception of hospital team-PCP communication is positively correlated with satisfaction. Therefore, it is possible that hospitals could improve both patient safety and overall satisfaction by seizing a missed opportunity to improve patient awareness of hospital team-PCP communication. Hospitalists play a key role in this communication and should be aware of the need to communicate with the PCP and to relay the results of that communication to the patient as a way to boost satisfaction.

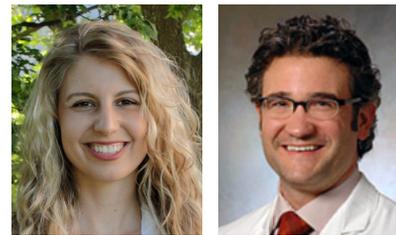
Surgeon-Family Perioperative Communication: Surgeons' Self-Reported Approaches

Aubrey L. Jordan, MHS (Pritzker School of Medicine)

Bucksbaum Institute Summer Research Grant Recipient

Alexander Langerman, MD (Department of Surgery)

Bucksbaum Institute Junior Faculty Scholar



BACKGROUND: Family members are important in the perioperative care of surgical patients. During the perioperative period, communication regarding the patient's operative status and care occurs between surgeons and

family members. However, surgeon-family perioperative communication remains unexplored in the literature.

STUDY DESIGN: Surgeons were recruited from the surgical faculty of an academic hospital to participate in an interview regarding their approach to speaking with family members during and immediately following a procedure. An iterative process of transcription and theme development amongst three researchers was utilized to compile a well-defined set of qualitative themes.

RESULTS: Thirteen surgeons participated. Interviewees were reflective of the surgical faculty sampled. Surgeons described what informs their communication, how they practice surgeon-family perioperative communication, and how the skills integral to perioperative communication are taught. Surgeons saw perioperative communication with family members as having a unique role of support and anxiety alleviation that is distinct from the role of communication during clinic or postoperative visits. Wide variability

Bucksbaum Institute Pilot Grant Program

exists in how interviewed surgeons practice perioperative communication, including communication avenue, frequency, and content. Surgeons universally reported that residents' instruction in perioperative communication with families was largely absent for lack of opportunity.

CONCLUSIONS: Surgeons understand perioperative communication with family members as a part of their role and responsibility to the patient. However, during the perioperative period, they also acknowledge an independent responsibility to alleviate family members' anxieties. This independent responsibility denotes the existence of a distinct 'surgeon-family relationship'.

In 2012, the Bucksbaum Institute started a new research pilot grant program Associate Junior Faculty Scholars. The program was designed to advance research, teaching, and clinical programs relating to the doctor-patient relationship and clinical decision-making. The pilot grant program continues to expand and after two years has awarded 25 grants totaling nearly \$150,000.

2013 Grants

Name	Department	Title or Project Focus
Peter Angelos, MD, PhD With: Ross Milner, MD Raymon Grogan, MD	Surgery	"A Formal Curriculum in Surgical Professionalism and Ethics": To enhance and encourage the professionalism of surgical residents and their understanding of the central concepts of surgical ethics
Sarah Collins, MD With: Sandra Culbertson, MD Nita Lee, MD	OB/GYN	Predictors of satisfaction with surgical decision-making in elderly women undergoing gynecologic surgery
Jonas de Souza, MD With: Michael Bishop, MD Lauren Kirby, LCSW Christopher Daugherty, MD	Medicine	A Pilot Program of Cost Communication in Hematologic Malignancies
Allen Gustin, MD	Anesthesia	An Acute Pain Patient with Advanced Stage Cancer AND A Hospice Patient with Respiratory Distress in the ER: Improving Resident Physician Communications with Patients at the End of Life Utilizing Simulation Training

Continued

Emily Landon, MD Jessica Curley, MD	Medicine Pediatrics	Quality Improvement vs. Research: Controversies and Confusion
Alexander Langerman, MD With: John Alverdy, MD David Song, MD Marko Rojnica, MD (resd)	Surgery	Dynamic Operational Mapping— Annotation for Patient and Family Education
Wei Wei Lee, MD	Medicine	Improving Patient-Centered Technology (iPaCT) Use
Ross Milner, MD With: Jerome Klafta, MD Baddr Shaksheer (resd)	Surgery	Improving Professionalism for Physicians in Training: A Curriculum based Approach.
John Schneider, MD, MPH	Medicine	Provider training to improve patient medication adherence in Federally Qualified Health Center settings: The Case of Pre-Exposure Prophylaxis

2012 Grants

Name	Department	Title or Project Focus
Gina Dudley, MD	Medicine	University of Chicago Adult Sickle Cell Care Team—"Patient-centered Self Management Tools"
Raymon Grogan, MD	Surgery	Understanding the Psychology of Thyroid Cancer in an Era of Increasing Incidence
Allen Gustin, MD	Anesthesia	Improving Patient Perception During Disclosure Conversations of Unanticipated Outcomes Utilizing Disclosure Training for Anesthesiology Residents and Critical Care Medicine Fellows: A Novel Approach

Olwen Hahn, MD	Medicine	Communication Skills Training Program for Oncology Trainees: Small Group Skills Practice
Jennifer Hofer, MD	Anesthesia	Physicians as First Line Responders Against Human Trafficking
Neda Laiteerapong, MD	Medicine	Patient Beliefs Regarding How the Timing of A1Ca & BP Control Affects Diabetes Outcomes
Nita Lee, MD	OB/GYN	Endometrial cancer survivorship in African American women*
Diana Mitchell, MD Alisa McQueen, MD	Pediatrics	Communication during Pediatric Resuscitation: a pilot simulation training program for pediatric critical care and emergency medicine fellows
Peter H O'Donnell, MD	Medicine	"The 1200 Patients Project: Evaluating How Results Delivery in the Genomic Era Might Promote Communication in the Doctor-Patient Relationship"
Amber Pincavage, MD	Medicine	Engineering Patient-Oriented Clinic Handoffs (EPOCH)
Neethi Pinto, MD	Pediatrics	The Power of Daily Prognostication of Outcome in the Pediatric Intensive Care Unit
Tao Xie, MD, PhD	Neurology	Enhancing the patient satisfaction and patient-doctor relationship through various ways of education
John Yoon, MD	Medicine	Operationalizing the Virtues for Good Doctor-Patient Relationships

Bucksbaum Student Scholar Research and Bucksbaum Supported Pritzker School of Medicine Summer Research Grants

Cancer Disparities in Genome Wide Association Studies

Steven Bhutra, MS2 (Pritzker School of Medicine)

Bucksbaum Institute Medical Student Scholar

Jonas De Souza, MD (Department of Medicine)

Bucksbaum Institute Associate Junior Faculty Scholar



There has been an effort to reveal the common variants associated with cancer risk and therapy success through genome wide association studies (GWAS). We hypothesize that these studies have been completed in a

selected ethnical population sample. Methods: the National Human Genome Research Institute (NHGRI) catalog for disparities was reviewed and data on number of individuals, number studies, specific ethnicity from January 2007 to August 2013 were compiled. Results: 199 cancer GWAS have been published, and a total of 321931 individuals have been sequenced, of which 74% were European, 22.4% were Asian and 3.2% were of African descent. Only 16 (8.0%) of all these cancer studies have attempted to replicate their genetic findings in different ethnical populations than the original study. These studies reveal a 0.62 ($p < 0.001$) less risk association compared to more homogenous counterparts. Conclusion: there are clear disparities in GWAS studies, with over 95% of studies individuals in two ethnicities: European and Asian. In addition, these finding suggests that variants associated in GWAS studies may not be generalizable in broader and more heterogeneous populations.

Analyzing the Costs of Improving Diabetes Care and Outcomes on the South Side of Chicago.

Brenna Hughes, MS2 (Pritzker School of Medicine)

Bucksbaum Institute Medical Student Scholar



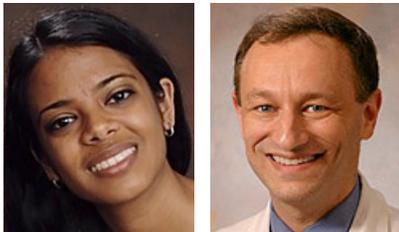
The cost of diabetes in the United States is skyrocketing, with total costs of diagnosed diabetes reaching \$245 billion in 2012. Deep racial and ethnic disparities have come with the cost realities and many studies and policymakers have stressed a need not only to minimize costs, but also to improve the quality of and access to diabetes care. Quality improvement collaboratives (QICs), which leverage collective learning, are one promising intervention that brings together multiple healthcare systems to improve a specific healthcare service. While real clinical improvements of lowering hemoglobin A1c levels and encourage shared-decision making have been recognized, the exact financial and non-financial cost of creating a successful QIC is still unclear. The objective of this study was to create a business case for QICs from an outpatient clinic perspective. We conducted case studies of two urban clinics in a diabetes QIC to understand the financial costs of participating in the initiative. The clinics studied were located on the South Side of Chicago and began participating in the multifaceted QIC in June 2009. Administrative data was collected for a period of 48 months from January 2009 to December 2012 from internal data systems and was acquired at the individual clinic, outpatient service, and overall hospital level. Our findings suggest that the upfront costs of participating in a QIC are large and often force the profits for clinics to be on a long-term continuum. The numerous losses that both clinics faced illustrate that it is common for clinics to see losses before they begin to break-even or profit. The results also suggest that participating in a QIC may increase the utilization of diabetes care over time,

increasing both the number of diabetes patients and diabetes-related medical encounters, and that revenues of diabetes-related care may follow. In addition to the financial realities of participating in a QIC, the results suggest that clinic characteristics such as patient race, payer mix and the number of diabetes patients and medical encounters may shift with participation in a QIC. While benefit accrual may be delayed and costs to individual clinics may be high, this preliminary analysis helps to inform a conversation about the real cost of QICs, and other practice transformations models, and who should bear these costs. Future work is warranted to explore the business case of QICs and to inform policy-makers and grant agencies about the practical costs for an outpatient clinic and create funding structures and policy that support the adoption and sustainability of QICs.

The Effect of Pictures on Informed Consent in Clinical Research: A Preliminary Report on A Randomized Controlled Trial.

Amrita Mukhopadhyay, MS2 (Pritzker School of Medicine)

Dr. David Meltzer, MD PhD (Department of Medicine)



BACKGROUND: Informed consent for clinical research must ensure patient comprehension of abstract concepts, such as randomization, placebo, and follow-up. Current guidelines recommend “teach-back,” which

requires patients to relay back key information. Pictures have been hypothesized to enhance the teach-back process.

METHODS: We sought to assess the effect of a pictorial representation of a clinical trial on patient comprehension for informed consent. Recommendations from literature informed picture design, and a randomized study was conducted among participants enrolling for a larger, ongoing clinical trial involving models of care. Outcomes compared between the “Picture Consent” and “Non-Picture Consent” arms were: patient ability to successfully teach-back, number of attempts needed for teach-back, and demonstration of additional knowledge not prompted by teach-back.

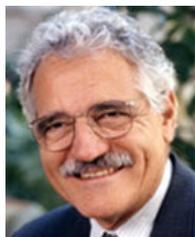
RESULTS: This is the second month of an eleven-month study, with 18 patients in “Picture Consent” and 26 in “Non-Picture Consent” (n=44). Five patients were unable to successfully teach-back key information, three with the picture and two without. Of those able to teach-back, a slightly higher proportion in “Picture Consent” could do so on the first try (67% (10/15) vs. 54% (13/24), p=0.77). Approximately a third of patients in both arms attempted to explain information not directly prompted by teach-back, with a higher proportion of “Picture Consent” patients doing this incorrectly (22% (4/18) vs. 4% (1/26), p=0.14).

CONCLUSIONS: Preliminary findings showed that the picture produced only a weak trend towards improved teach-back and possibly some erroneous comprehension. These findings highlight the need to for continued study of picture efficacy in this context.

Bucksbaum Institute Advisory Board Panel Discussion Biographies

Jordan Cohen, MD

*Professor of Medicine and Public Health, George Washington University
President Emeritus, American Association of Medical Colleges
Chairman, Academic Affairs, Morehouse School of Medicine
Chairman of the Board, Gold Humanism Foundation*



Jordan J. Cohen, M.D. is president emeritus of the Association of American Medical Colleges (AAMC). He also serves as chairman of the board of the Arnold P. Gold Foundation for Humanism in Medicine.

As President and Chief Executive Officer of the Association of American Medical Colleges (AAMC) from 1994 to 2006, Jordan J. Cohen, M.D. led the Association's support and service to the nation's medical schools and teaching hospitals. He launched new initiatives in each of the association's mission areas of education, research and patient care; and established many initiatives for improving medical education and clinical care. As the voice of academic medicine for more than a decade, Dr. Cohen also spoke extensively on the need to promote greater racial and ethnic diversity in medicine, to uphold professional and scientific values, and to transform the nation's health care system.

Dr. Cohen has worked and taught at the State University of New York at Stony Brook, the University of Chicago, the Michael Reese Hospital and Medical Center and George Washington University.

Dr. Cohen currently serves on the board of the Morehouse School of Medicine, the Accreditation Council for Graduate Medical Education, and the Sidra Medical and Research Center in Doha. He also serves on the Editorial Board of the Journal of the American Medical Association (JAMA). He chairs the VA's National Academic Affiliation Council and is co-chair of the Institute of Medicine's Global Forum on Innovations in Health Professional Education.

Dr. Cohen is a graduate of Yale University and Harvard Medical School and completed his postgraduate training in internal medicine on the Harvard service at the Boston City Hospital.

Laura Roberts, MD

*Katharine Dexter McCormick and Stanley McCormick Memorial Professor
Chairman, Department of Psychiatry and Behavioral Sciences, Stanford University*



Dr. Roberts serves as Chairman and the Katharine Dexter McCormick and Stanley McCormick Memorial Professor in the Department of Psychiatry and Behavioral Sciences at the Stanford University School of Medicine. She is an internationally recognized scholar in bioethics, psychiatry, medicine, and medical education, and is identified as the foremost psychiatric ethicist in the United States. Dr. Roberts has performed a series of studies on the ethics of research and clinical care in the context of serious mental illness, focusing particularly on schizophrenia. Her work has led to advances in our understanding of ethical aspects of physical and mental illness research, societal implications for genetic innovation, the role of stigma in health disparities, the impact of medical student and physician health issues, and optimal approaches to fostering professionalism in medicine.

Dr. Roberts has written hundreds of peer-reviewed articles and other scholarly works, and she has written or edited several books in the areas of professionalism and ethics in medicine, psychiatric research, professional development for physicians, and clinical psychiatry. Dr. Roberts has been the Editor-in-Chief for the journal *Academic Psychiatry* since 2002 and serves as an editorial board member and peer reviewer for many scientific and education journals. Dr. Roberts has received numerous awards for leadership, teaching, and science, including the Lifetime Achievement Award from the Association for Academic Psychiatry in 2010.

Having received her Bachelor of Arts in History and Master of Arts in the Conceptual Foundations of Science from the University of Chicago, Dr. Roberts then completed her medical degree and a fellowship in clinical medical ethics at the University of Chicago Pritzker School of Medicine.

Arthur Rubenstein, MBBCh

Professor of Medicine, Former Dean and EVP for the Health System (2001–11), Raymond and Ruth Perelman School of Medicine, University of Pennsylvania



Dr. Arthur H. Rubenstein is Professor, Department of Medicine, Division of Endocrinology at the Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania.

Previously, Dr. Rubenstein was the Executive Vice President of the University of Pennsylvania for the Health

System and Dean of the Raymond and Ruth Perelman School of Medicine. These entities make up Penn Medicine, a \$3.6 billion enterprise, dedicated to the related missions of medical education, biomedical research, and excellence in patient care.

Dr. Rubenstein is an internationally-prominent endocrinologist recognized for clinical expertise and groundbreaking research in diabetes. Well-known for his inspired teaching, Dr. Rubenstein has served in numerous academic leadership positions during his career including the Lowell T. Coggeshall Distinguished Service Professor of Medical Sciences and Chairman of the Department of Medicine at the University of Chicago Pritzker School of Medicine.

Author of more than 350 publications, Dr. Rubenstein is the recipient of many awards and prizes, including the highest honor of the Association of American Physicians (AAP), the George M. Kober Medal, and the highest honor from the Association of Professors of Medicine, the Robert H. Williams Distinguished Chair of Medicine Award. Among his other honors are the John Phillips Memorial Award from the American College of Physicians; the Banting Medal from the American Diabetes Association; and the David Rumbough Scientific Award from the Juvenile Diabetes Association. In 2009, Dr. Rubenstein was awarded the prestigious Abraham Flexner Award for Distinguished Service to Medical Education from the Association of American Medical Colleges.

Born in South Africa, Dr. Rubenstein received his medical degree from the University of the Witwatersrand in Johannesburg.

Master Clinicians

Douglas Dirschl, MD	Orthopaedics	(2013–16)
Jessica Kandel, MD	Surgery	(2013–16)
Michael Bishop, MD	Medicine	(2012–15)
Ross Milner, MD	Surgery	(2012–15)

Junior Faculty Scholars

Raymon Grogan, MD	Surgery	(2013–15)
Olwen Hahn, MD	Medicine	(2013–15)
John Schneider, MD	Medicine	(2013–15)
Nita Lee, MD	OB/GYN	(2012–14)
John Yoon, MD	Medicine	(2012–14)
Alexander Langerman, MD	Surgery	(2011–13)
Monica Peek, MD, MPH	Medicine	(2011–13)

Medical Student Scholars

Dara Catherine Richer Adams	MS2	(2013–16)
Steven Bhutra	MS2	(2013–16)
Brenna Hughes	MS2	(2013–16)
Ashley M. Tsang	MS2	(2013–16)
Annie Lauer	MS3	(2012–15)
Elizabeth Rhinesmith	MS3	(2012–15)
Robert Sanchez	MS3	(2012–15)
Liese Pruitt	MS4	(2011–14)
Alexander Ruby	MS4	(2011–14)
Jasmine Taylor	MS4	(2011–14)

Associate Junior Faculty Scholar

Danielle Anderson, MD	Psychiatry	(2011–)
Andrew Aronsohn, MD	Medicine	(2011–)
Leslie Caldarelli, MD	Pediatrics	(2011–)
Woojin James Chon, MD	Medicine	(2011–)
Sarah Collins, MD	OB/GYN	(2013–)
Jessica Curley, MD, PhD	Pediatrics	(2011–)
Jonas de Souza, MD	Medicine	(2013–)
Gina Dudley, MD	Medicine	(2011–)
Allen Gustin, MD	Anesthesia	(2011–)
Jennifer Hofer, MD	Anesthesia	(2011–)
Jonathan Kohler, MD	Surgery	(2013–)
Neda Laiteerapong, MD	Medicine	(2011–)
Emily Landon, MD	Medicine	(2013–)
Wei Wei Lee, MD, MPH	Medicine	(2012–)
Stacie Levine, MD	Medicine	(2012–)
Alisa McQueen, MD	Pediatrics	(2011–)
Pamela McShane, MD	Medicine	(2012–)
Diana L. Mitchell, MD	Pediatrics	(2011–)
Peter O'Donnell, MD	Medicine	(2011–)
Amber Pincavage, MD	Medicine	(2011–)
Neethi Pinto, MD	Pediatrics	(2011–)
Jason Poston, MD	Medicine	(2011–)
Tipu Puri, MD, PhD	Medicine	(2012–)
Yasmin Sacro, MD	Medicine	(2013–)
Robert Sargis, MD, PhD	Medicine	(2013–)
Sachin Shah, MD	Medicine	(2013–)
Tao Xie, MD, PhD	Neurology	(2011–)

Senior Faculty Scholars

John C. Alverdy, MD	Surgery	(2012–)
Allen Anderson, MD	Medicine	(2012–) Northwestern University
Peter Angelos, MD, PhD	Surgery	(2012–)
Halina Brukner, MD	Medicine	(2013–)
Sandra Culbertson, MD	OB/GYN	(2012–)
Linda Druelinger, MD	Medicine	(2013–)
Scott Eggener, MD	Surgery	(2013–)
Savitri Fedson, MD	Medicine	(2013–)
Jeffrey I. Frank, MD	Neurology	(2012–)
H. Barrett Fromme, MD	Pediatrics	(2013–)
Melissa Gilliam, MD, MPH	OB/GYN	(2013–)
Daniel J. Haraf, MD	Radiation-Onc	(2012–)
Philip C. Hoffman, MD	Medicine	(2012–)
Nora Jaskowiak, MD	Surgery	(2013–)
Jerome Klafta, MD	Anesthesia	(2012–)
William McDade, MD, PhD	Anesthesia	(2013–)
David T. Rubin, MD	Medicine	(2012–)
Joel Schwab, MD	Pediatrics	(2012–) Deceased
Sonali Smith, MD	Medicine	(2013–)
David Song, MD	Surgery	(2013–)
Christopher Straus, MD	Radiology	(2013–)
Marie Tobin, MD	Psychiatry	(2012–)
Monica Vela, MD	Medicine	(2013–)
Lisa M. Vinci, MD	Medicine	(2012–)

2014 Pritzker Poetry Contest

The mission of the Pritzker Poetry Contest is to foster compassionate care for our patients and to enhance the therapeutic caregiver-patient relationship throughout our medical center.

Third annual Pritzker Poetry Contest winners

Open Poem Category

FIRST PLACE: *A Name*

Alexandra Garnett, third year medical student (\$1,000 award)

SECOND PLACE: *This is just to say*

Wei Wei Lee, MD, Assistant Professor of Medicine (\$500 award)

Six Word Poem Category

FIRST PLACE: *Dropped Beats*

Jasmine Dowell, MD, Pediatric Resident (\$500 award)

SECOND PLACE: *Solace*

Marc Robinson, MD, Medicine Resident (\$250 award)

A Name

by Alexandra Garnett

I ask her for her full name and the year that she was born,
I ask her where she lives and who resides at home,
I ask about her current health, of aching joints and belly pains,
I ask about her diet and the food that fuels her veins.
I ask of juvenile ailments, though she struggles to recall,
I ask about her parents' death: At what age? And how?
I ask of sordid details from a youth gone past—
Times long ago forgotten, buried and forgiven, by most but not us.
I ask her of her travels, her employment, and her sleep,
And bit-by-bit she offers up these pieces of her life
Because a body's secrets are no longer hers to keep,
Now portions of a record, scribed by a stranger's pen.
I smile politely and turn to leave, our encounter at its end,
But at the door I take pause, as something in me stirs.
I catch her eye and offer up one brief beholden look,
For it seems strange that in exchange for everything I took,
The only thing I've shared with her, is a name she'd not quite heard.

This is just to say

by Wei Wei Lee

I have felt
the thrill
that flutters in
your chest
and which
you were probably
hoping
was just nerves
Forgive me
my voice trembles
unsteady as
I start to speak

*(This poem is based on the William
Carlos Williams poem of the same
title, "This is just to say")*

Dropped Beats

by Jasmine Dowell

A broken heart divided,
leaves two.

*(A pediatric resident observes the
mourning parents of an infant with
congenital heart defect)*

Solace

by Marc Robinson

Falling snow blankets her
heart's ruins.

*(Snow began to fall as a patient passed in
the ICU, providing a beautiful moment
for the patient's devastated wife)*

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Leadership

Executive Director

Dr. Mark Siegler

Associate Director

Dr. Matthew Sorrentino

Advisory Board

Mrs. Kay Bucksbaum

Mr. John Bucksbaum

Dr. Jordan Cohen

Dr. Holly Humphrey

Dr. Kenneth Polonsky

Dr. Laura Roberts

Dr. Arthur Rubenstein

For more information

For more information about the Bucksbaum Institute or upcoming programs please contact: Ms. Angela Pace-Moody, Executive Administrator, 773-702-3906