

Issue 6, January 2022



**Edward T. Yeh, M.D.**

## Message from the Chairman

As we herald in the new year, I would like to thank all of you for your contribution to our missions in the last year.

Arkansas is in the midst of the omicron pandemic, but just like the waves of corona viral infections in the last two years, this surge will also pass. Let's continue to do the best we can and stay safe. A happy new year will come!

This month, we celebrate Dr. King's legacy, and we will continue to emphasize our commitment to Diversity, Equality, and Inclusiveness. Dr. Larry Johnson is leading the department's effort in this important initiative. The next issue of IMPact will cover our efforts in more detail.

In this issue, we will feature two different career pathways for our faculty: Implementation Science and Hospital Administration. We have created mentorship hubs to guide faculty through their career development. For this purpose, Dr. Schootman is appointed as the inaugural vice-chairman of mentorship and innovation.



**Mario Schootman, Ph.D.**

## Dr. Mario Schootman, Vice-Chair of Mentorship and Innovation

A social and clinical epidemiologist recognized for his years of research and clinical studies, Dr. Mario Schootman joined UAMS in late December of 2021.

He brings extensive experience with data science regarding quality of cancer care and patient safety.

Dr. Schootman will be focusing on the quality aspect of outcomes for cancer patients as well as going to the urban and rural communities to investigate how to improve medical access for cancer patients.

He has been involved with cancer research for most of his professional life. A senior directorship at SSM Health in St. Louis Missouri and two previous professorships in epidemiology at Saint Louis University and Washington University School of Medicine have all contributed to his understanding of patient care quality, clinical interventions, and cancer health disparities.

One of Dr. Schootman's main responsibilities will be to assist junior faculty in writing and applying for grants. As the Vice-Chair of Mentorship and Innovation, he would be mentoring these junior faculty in a career-development program for the Department of Internal Medicine.

Additionally, Dr. Schootman will be returning to his personal research for which he is well-known. He has published over 250 peer-reviewed manuscripts and he hopes to explore using EPIC to look at cancer health disparities and, developing predictive models to identify high-risk cancer patients.

We're grateful that Dr. Schootman has joined the team and we look forward to his work with our junior faculty and his research to improve patient care!

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## Implementation Science Scholar

The Implementation Science Scholar Program funds faculty interested in learning more about how to implement new practice guidelines and/or other implementation or de-implementation approaches that will improve medical care.

Using the principles of implementation science, the program includes 10 didactic sessions per year, as well as oversight and mentoring for experiential implementation science projects.

The two-year program will provide 20% salary support and prepare faculty to publish the results of their implementation science projects. Scholars who want to pursue research grants to expand their accomplishments will receive assistance from the UAMS Center for Implementation Research.

Four of our faculty have been appointed as scholars of implementation science. Their aspirations and goals are illustrated below.



**Emily G. Kocurek, M.D.**

### **Emily G. Kocurek, M.D.**

One of the inaugural 2019 scholars, Dr. Kocurek is now in the final months of her research within the program.

When she became an attending physician, she considered what contribution she could make to UAMS, what change she could help bring about. She had many ideas about clinical methods to change or address but no mechanisms through which to implement them. After seeing the announcement for the scholars program, Dr. Kocurek recognized the opportunity in front of her.

The Implementation Science Scholars Program enables physicians to put into practice things that work and that are right for patients, but in a rigorous, scientific way.

Born and raised in Little Rock, Dr. Kocurek wanted to do something tangible for patients and for her hometown. Through the scholars program, she researched ways to implement the ICU Liberation Bundle at UAMS, wanting that evidence-based practice to help improve the lives of critically ill patients and put them on the road to recovery outside the hospital. She wants to give them back the quality of life they desire after a serious illness.

Through her studies in implementation science, Dr. Kocurek has been exploring the psychology, sociology, and behavioral science that drive provider decisions--all of the things in the background that physicians may not think of. Understanding these barriers and being thoughtful about pre-implementation are part of the process, but also being open and communicative with colleagues has provided some universal lessons.

Dr. Kocurek appreciates the value of what implementation science offers because a lot of money is spent on research, but it needs to make it to the patient; if research findings and clinical studies don't translate to better patient care, then they're not being put into practice effectively. The Implementation Science Scholar Program works toward that goal.



**Riley Lipschitz, M.D.**

## **Riley Lipschitz, M.D.**

After finishing her medical residency in Pennsylvania, Dr. Lipschitz returned to Arkansas as a general internist practicing primary care and focusing on medical care for vulnerable patient populations.

This passion for patients with critical needs led to her research interests and ultimately her 2020 application to the Implementation Science Scholar Program. Her area of study is pre-exposure prophylaxis (PrEP) for HIV patients, and the goal was to develop a methodology to remove barriers or logistical elements between HIV patients, TelePrEP, as well as other factors in patient care regarding HIV and its treatment.

Arkansas is one of the key focus states for ending the HIV epidemic. The medical imperative lies mostly in the South because that's where the nexus of cases is. In the state, Helena, Texarkana, and the Delta are three regions with a concentration of HIV cases. Part of Dr. Lipschitz's research within the implementation science program involves determining the problems that are preventing these people from taking PrEP initially or from continuing their medication. Naturally, this evidence-based intervention is telemedicine-focused, but it's important to understand the lack of access that these key populations have to this medicine.

One of the biggest challenges is initial uptake with PrEP; there exists a disconnect between the perception of risk on the part of the patients and the actual risk. Dr. Lipschitz works to encourage the use of the TelePrEP program and examines the efficacy of telemedicine for delivery of PrEP.

Dr. Lipschitz is passionate about population health and health equity. In caring for the population of the entire state, some patient populations need different services to get to the same state of health. And medical care doesn't always do the best job of altering the way services are provided to accommodate these divergent patient populations.

The implementation science program helps physicians to evaluate everything in the context of how medical methodologies become successful. The understanding of what needs to be done doesn't guarantee an understanding of how it needs to be done. That mentality is what Dr. Lipschitz appreciates about her research, as it encourages physicians to be inquisitive and to connect with all of the stakeholders--nurses, pharmacists, social workers, etc.--who help with patient care. To move the needle, we need to be more curious how everything is working within the health care system.



**Spyridoula Maraka, M.D.**

## **Spyridoula Maraka, M.D.**

Dr. Maraka joined UAMS in 2016 as an endocrinologist and clinical scientist; from the clinical standpoint, she covers the inpatient endocrine consult service and is also the program director of the endocrinology fellowship program, but she is heavily invested in research as well.

The areas of study which interest her the most focus on clinical and translational research, further characterized as outcomes and health services research.

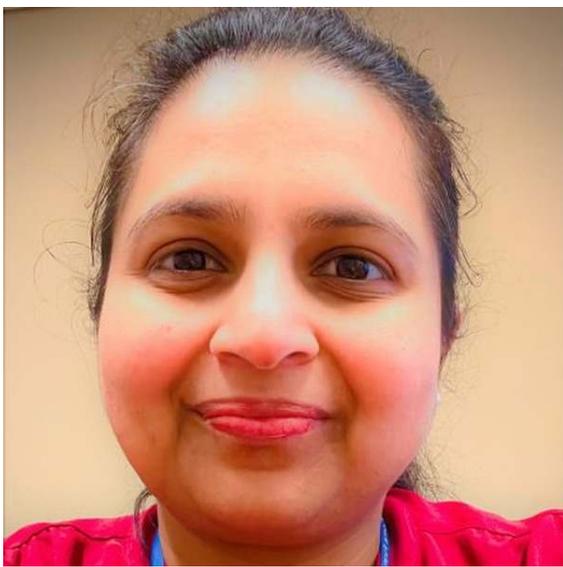
Her research work on subclinical hypothyroidism has made her widely known. The overall theme of her research in the Implementation Science Scholar Program is to advance patient-centered, evidence-based care for patients with thyroid disorders.

Dr. Maraka has been involved with this research since her fellowship at the Mayo Clinic and now, as a full-time employee at the VA, her studies are supported by the Arkansas Biosciences Institute (ABI) and the VA Health Services Research and Development.

In endocrinology, Dr. Maraka believes that a lot of recommendations offered to patients are not supported by strong evidence, so early in career she identified some knowledge gaps. This inspired her to develop research in order to address these gaps and to promote evidence-based care for patients.

She saw at UAMS the opportunity to collaborate with investigators from the institution and to expand on her research skills. She is currently leading a clinical trial to assess outcomes of discontinuing levothyroxine (a form of thyroid hormone replacement) in patients with mild subclinical hypothyroidism. With the recent selection for the Implementation Science Scholar Program, Dr. Maraka will build the knowledge base necessary to address the national levothyroxine overuse by developing strategies for implementation of evidence-based interventions in the clinical practice.

In delivering patient care, Dr. Maraka wants to highlight the importance of shared decision making between clinicians and patients that incorporates not only effectiveness of a certain intervention, but also treatment burden, and makes sense to patients and their families based on their values, context, and preferences. Understanding the best practices for patient-centered care will help to bring evidence-based medicine to the forefront and ultimately improve quality of care.



**Deepa Raghavan, M.D.**

## **Deepa Raghavan, M.D.**

In 2015, Dr. Raghavan joined UAMS and the VA hospital as a clinical educator following her fellowship stint at UT Southwestern in Dallas, Texas. She is an Assistant Professor in the Pulmonary Division with a primary position at the VA, where she serves as the Medical Director of the ICU.

Since the beginning of her time in medicine, Dr. Raghavan has been focused on quality improvement initiatives and system-based practices that amplify benefits to patient care. Her research typically centers on cystic fibrosis, but the specific topic Dr. Raghavan is investigating in the implementation science program addresses bridging gaps in chronic obstructive pulmonary disease (COPD) care.

Chronic obstructive pulmonary disease is the most prevalent pulmonary disease among veterans, so any advancement in the treatment of this disease can lead to dramatically improved outcomes for veteran patients. The problem with COPD is multi-dimensional, though. Gaps start in the accuracy of diagnosis and continue into the use of appropriate pharmacotherapy and non-pharmacotherapy interventions.

Dr. Raghavan wants to use implementation facilitation as an overarching background to develop strategies to address each of these gaps. Her goal is to improve uptake of COPD clinical practice guidelines by addressing barriers in each of the categories- diagnosis, pharmacotherapy and non-pharmacotherapy. Two key aspects she wants to focus on include development of a pathway for inhaler technique education/assessment and pulmonary rehabilitation referral. Currently, there is almost no education or assessment of technique for COPD inhalers, so she wants to develop a packet for initial education and continued improvement because even patients who use inhalers for years still use them ineffectively.

To address non-pharmacologic interventions, Dr. Raghavan hopes to establish an education program for patients and improve the referral rate for pulmonary rehabilitation for veteran patients; this would be a boon for COPD patients as only 30% of eligible patients are referred to pulmonary rehab therapy.

While she is just starting the two-year tenure of the Implementation Science Scholar Program, Dr. Raghavan is relying on her experience with quality improvement projects to spur on her research. When examining system-wide projects like this, it's necessary to be open to seeing 'opportunities for improvement' instead of just 'problems'. Implementation science and quality improvement can help make a better system, which will function as a better safety net for vulnerable patients. That's her mission and her intent while in the implementation science program.



**Ahmed Y. Abuabdou, M.D.**

## Charting a Path to Hospital Leadership

Dr. Ahmed Abuabdou wears several hats at UAMS. His current clinical appointment is an Associate Professor of Medicine in the Division of Hospital Medicine, but he also operates as Associate Chief Medical Officer and the Lead Physician Advisor in two administrative appointments.

It was in 2012 when he joined the organization as a faculty member in Hospital Medicine, but in late 2016, he determined that he could not sustain a solely clinical care appointment for the entirety of his career.

So he crafted a 10-year strategy to become involved in hospital leadership and to discover solutions to the challenges that face physicians when dealing with patient care. The anticipated outcome of this 10-year strategy is to become a CEO of a hospital or health care system where he can drive change at larger scale.

Since 2016, Dr. Abuabdou has been taking gradual, measured steps as part of that strategy. He completed a certification in Health Care Quality Management and Utilization Review; he engaged in a brainstorming session with an existing Associate Chief Medical Officer (CMO) on how can UAMS develop physician advisory service since part of this service used to be delivered by a third-party vendor. Physician Advisory is a specialty resourced with peer-respected physicians who display broad-based clinical experience and knowledge in clinical medicine and the business of medicine (status determination, clinical documentation, revenue cycle, and compliance); these physicians serve as a liaison between the hospital executives and the faculty members.

This career pathway led to Dr. Abuabdou becoming a member of the American College of Physician Advisors, of which he is now the Vice President of Operations. His experience with that organization at the national stage has enabled him to improve the physician advisory program at UAMS.

Through professional mentors and expanded networking opportunities, Dr. Abuabdou focused on growing his knowledge base and skillset. In 2019, he completed his Master of Business Administration degree and he started his role as Associate Chief Medical Officer. He has been honing his management skills and developing traits of both transformational leadership, that implements new ideas and alters the status quo, as well as transactional leadership, that focuses on the managerial responsibilities necessary to keep an organization running.

From his current position, Dr. Abuabdou anticipates a progression to the role of Chief Medical Officer in the future and then a subsequent push for Chief Executive Officer position at a hospital or health care system. His advice to other faculty members and physicians interested in hospital leadership is to devise a strategy on how to achieve your desired goal. Learn the culture of the place where you work. Identify mentors who can help guide you toward success. Build a network of professional colleagues and get involved to better contribute toward solutions. All of those steps are essential in an effective plan for professional growth.



**Jerry Adam, Edward Yeh, Cam Patterson,  
Asa Hutchinson**

## Arkansas Research Alliance Press Conference

Dr. Edward Yeh was honored in the Arkansas Research Alliance (ARA) press conference held in the governor's mansion on December 9, 2021. The ARA Scholars program was begun in 2010 to help Arkansas research universities recruit superior research talent to the state.

The ARA Fellows program, created in 2015, is a companion to the ARA Scholars program and was created to recognize distinguished university research leaders who are *currently* working in the state – and already making a difference on our research campuses.

The programs were conceived and vetted with the guidance of the ARA board of trustees, along with oversight and input from academic leaders from the five research universities in Arkansas. Collectively, the ARA Scholars and Fellows comprise the ARA Academy of Scholars and Fellows, now 32 members strong. Dr. Yeh was nominated by Chancellor Patterson as the 2021 ARA scholar in recognition of [his research contributions](#).

## Castle Connolly Top Doctors in Arkansas

Out of the 76 UAMS physicians who made the Top Doctors list in Arkansas, eight of those were from the Internal Medicine department and its associated divisions. You can find the full list [here](#). Please join us in congratulating these outstanding members of our team!



**Seth M. Berney, M.D.**



**Ryan K. Dare, M.D.**



**William E. Golden, M.D.**



**Robert H. Hopkins Jr.,  
M.D.**



**Issam Makhoul, M.D.**



**Allison M. Shaw-Devine,  
M.D.**



**Sara G. Tariq, M.D.**



**Robert S. Weinstein,  
M.D.**

Hopefully, you had a wonderful end to 2021, and we look forward to all that's possible in the new year. Thank you for being a part of the IM family!

The Department of Internal Medicine is the largest department in the College of Medicine at the University of Arkansas for Medical Sciences. The department is home to approximately 150 full-time faculty members, 81 residents, and 68 fellows serving two residency programs and twelve fellowship programs. Dr. Edward T.H. Yeh, a cardiologist and physician/scientist, is a pioneer in the field of onco-cardiology.

**Questions, comments, or suggestions for future newsletters? Email Devon Norris at [DLNorris2@uams.edu](mailto:DLNorris2@uams.edu), Natalie Moore at [NMoore@uams.edu](mailto:NMoore@uams.edu), or Gloria Townsend at [TownsendGloriaJ@uams.edu](mailto:TownsendGloriaJ@uams.edu).**

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