

EMORY RadReport

It's what's on the inside that counts!

January, 2010

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Media Services available exclusively to the Radiology Department include:

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If you would like to discuss a project with Eric Jablonowski, Director of Media Services, you may contact him at 404-778-3743 or through e-mail at eric.jablon@emory.edu.

Taking the Lead

As of January 1, Dr. Michael Cohen has taken the lead as Director of Breast Imaging. Dr. Carl D'Orsi, who has been the Director since 2002, will continue to contribute to the success of the division through clinical service and a strong concentration on research and mentorship.

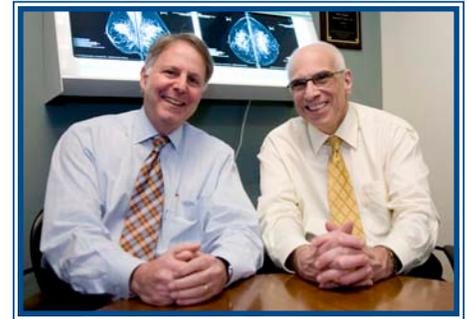
Dr. Cohen joined Emory in September of 2009 and served as Co-Director with Dr. D'Orsi over the transition period. Having been involved during the early years of mammography, Dr. D'Orsi will continue to be a valuable resource for the division as the Emeritus Director of Breast Imaging and Director of Breast Imaging Research. Over the last seven years, Dr. D'Orsi has guided the Breast Imaging faculty and staff to adapt and lead the changes in breast imaging, particularly in creating a more interactive experience for the patients. With a stable course in clinical service, research and education established, Dr. Cohen plans to continue Dr. D'Orsi's legacy of strong leadership with an innovative focus.

Over the transition period, Dr. Cohen has become familiar with the various locations of the Emory Breast Imaging Center (BIC) and needs of those sites. He is eager to lead the large, well-developed and diverse program. This solid foundation allows Dr. Cohen to step in and smoothly continue the upgrades to an all digital Breast Center, explore the possibilities of MR and be responsive to areas of expansion.

The continued increase of breast imaging faculty will allow time for each member to focus on research. Dr. Cohen is especially excited about the possibilities of utilizing MR and collaboration with the MR physicians and researchers. There are many opportunities in this area to develop tools that can further what MR can do for patients. Additional opportunities for development can also be found in the other areas of the Breast Imaging Center. The first collaborative project kicked off on January 1.

With his vast experience and a full career prior to arriving at Emory, Dr. Cohen hopes to inspire less senior faculty to build their careers. He says, "What I think I honestly exist for is to provide my junior faculty with everything they need so that they can advance their careers. I want them to have ample time to teach, create lectures, interface with trainees and have research opportunities." With the added support of Dr. D'Orsi in the area of research, Dr. Cohen is planning to arrange a mentorship program, which will present opportunities for faculty members and the department to be recognized by the broad imaging community for their accomplishments.

By establishing an open door policy, Dr. Cohen hopes to encourage the staff and faculty to come to him with comments, suggestions and opportunities for



Drs. D'Orsi and Cohen have worked towards a smooth transition as Dr. Cohen steps up as Director of Breast Imaging.

improvement. Maintaining an environment where all parties share a common goal of great patient care is particularly important to Dr. Cohen. He has expressed that he will take action to create awareness of the needs of breast imaging and describes himself as "the middle man to make things happen." This is directly in-line with the advice that Dr. D'Orsi has passed on to Dr. Cohen, "Those peripheral areas will fall into place, if you are patient centric and make your needs known." As the middle man, Dr. Cohen is looking forward to getting to know everyone in the department and reach out to form good partnerships for collaboration.

The two have conveyed how much they have enjoyed working together. A special message from Dr. Cohen to Dr. D'Orsi ensures a smooth transition and a continued collaborative vision for success; "I have admired Dr. D'Orsi for decades for what he has accomplished in breast imaging, I have attended his lectures at meetings and now that I get to work with him, Dr. D'Orsi is even nicer and easier to work with than I could have imagined."

- Monica Salama, Communications Manager

Letter from the Chair

Dear Colleagues,

Happy 2010 to all!

This past year is one characterized by the challenges of severe fiscal constraints balanced by opportunity and much success. Together, we continue to make great strides toward building the Destination Department we envision for ourselves, our patients and our trainees.

Clinical excellence is our mainstay, and we have seen our services grow and refine particularly at Emory University Hospital Midtown (rebranded this year from its original Emory Crawford-Long Hospital), Emory Johns Creek Hospital, and the new Emory Orthopaedic and Spine Hospital. We reached a key milestone in our strategic plan –

that of attaining top-20 ranking in NIH funding among radiology departments nationally. As we celebrate this achievement, we realize the translation of our discoveries to improving patient care is our most important metric of research success. Our training programs are rightfully a source of enormous pride. Applications to our Diagnostic Radiology Residency continue to exponentially increase in number and we have added a research track. Our Adopt-a-Resident program has further enhanced the quality of our residents' experience.

Sixteen new faculty members joined the department in 2009,

including two division directors, Drs. Saltz (Community Radiology) and Cohen (Breast Imaging). We have two new vice chairs, Drs. Applegate (Quality and Safety) and Votaw (Research). In accord with our collective commitment to leadership and career development, the Radiology Leadership Academy was born.

Physical plant upgrades have accompanied our growth, with a new PPCA, new angiography suites, MR and CT scanners, and the arrival of the unique MR/PET prototype. PACS expansion has been successful at Grady; while at our main Emory Healthcare sites, bumps in the road of smoothing through our new RIS system has delayed

implementation of the GE PACS. All eyes are now focused on a 2010 rollout. Our strengthened emphasis on patient and family-focused care is changing the way we work. All for the better.

Many of our faculty and staff have been recognized for their many contributions to Emory, the region, and the field on the national and international arena over the past year. Congratulations to all and happy new year.

Best to all,

Carolyn C. Meltzer, MD, FACR
Chair of Radiology



AWARDS & RECOGNITION



Laura Champagne, RDMS

Ultrasound Technologist

The American Registry for Diagnostic Medical Sonography (ARDMS)

Laura recently passed the comprehensive Sonography Principles and Instrumentation (SPI) examination administered by the

ARDMS, which officially certifies her as a Registered Diagnostic Medical Sonographer (RDMS). The SPI examination tests the basic physical principles and instrumentation knowledge required for all Sonography professionals and students.

GRANTS AWARD



Sonia Parra Zuña, MBA

Financial Analyst - EUH

The President's Commission on Race and Ethnicity (PCORE) Grant Award

The 2009 President's Commission on Race and Ethnicity (PCORE) awarded Sonia Parra Zuña, Finance Analyst, a grant to alleviate some of the expenses associated with attending the National Hispanic Leadership Institute (NHLI) 2009 Executive Leadership Training Conference and Mujer Awards in Albuquerque, New Mexico. The PCORE grant can be awarded to faculty or staff to assist with paying "the costs to attend a training class, a conference, and/or professional meeting that could enhance the applicant's skills and possibilities for advancement."

(<http://www.pcore.emory.edu/professionaldevelopmentfund.htm>)

Virtual MRI Biopsy of Diffuse Liver Disease: Non-Invasive Correlation with Histology and Measurement of Hepatocytes Dysfunction

Principal Investigator:
Diego Martin, MD, PhD

Co-Investigator:
Gaye Raye, MS, RN, NP-C

Funding Organization: Bayer HealthCare Pharmaceuticals, Inc.

Significance: Liver disease resulting in hepatitis is next to cardiovascular and tumor as causes of mortality in the US. Hepatitis mostly occurs due to abnormal accumulation of hepatic lipids, viral hepatitis, alcohol and hepatotoxic drugs. Clinical management and clinical research depends on having the ability to determine the presence and degree of hepatitis. The only method currently considered accurate is liver biopsy, which is associated with the risk of pain, bleeding and death. One of the major areas of development in our Body MR Imaging Sciences Program has been reducing dependency on invasive biopsies with non-invasive virtual biopsy using safe, fast and relatively cost-effective MR-based techniques. We have established ourselves as leaders in the application of MR for evaluation

of liver diseases. We have an ongoing investigation of macrovascular flow changes in hepatitis using computational flow dynamic modeling and development of clinically practical methods for quantification of hepatic fat and iron; where liver disease and progression to hepatitis and fibrosis is amongst the most common diffuse liver disease in the US. Methods for non-invasive evaluation of liver disease that correlates to histopathological changes of inflammation and fibrosis would be a major clinical advancement and could facilitate research and therapy monitoring of current and new treatments. This research will develop a statistical modeling and classification framework that uses MR images to perform automated noninvasive biopsies, as surrogates for invasive liver biopsies, to detect and quantify hepatitis.

MESSAGE FROM THE VICE CHAIR FOR RESEARCH

Happy New Year!

As this is the first of the year, I will succumb to the tradition of looking back, looking forward, and wishing everyone in the Emory Community a happy and prosperous new year.

Looking back, 2009 was a very good year for the research mission of the Department. I was very happy to accept the Vice Chair for Research position and provide a dedicated voice at the executive table for research interests. In this role, I continue to promote open communication. Please feel free to contact me with any concern regarding research and scholarship within our department. If you have a research idea, please come see me so that I can make sure you have every advantage possible for implementing your studies. I will be receptive and work with you because I understand that by making research easier for you, by helping you refine your ideas, and by improving your manuscripts and grants, I will be helping you, myself, and the entire Department.

We achieved a milestone by reaching the top 20 in NIH ranking for Radiology

and Radiation Oncology Departments. Congratulations to everyone in the Department. Please see the December Rad Report for more details. In a year that was difficult for many people, I'm very proud to say that we improved our position.

Looking forward, we are committed to continuing our rise in research funding. The School of Medicine (SOM), as a whole, achieved a NIH ranking of 15. I would like to see our department reach a state where we are pulling the SOM average up. I am working with our grants administration, nursing, and IT support teams to make the process even easier to submit grants and perform research studies. I also think it is important to increase the mentoring of our junior faculty. By taking these steps we can expect to see our star continue to rise.

The SOM is shifting focus in its new strategic plan from simply securing grants to valuing the impact for the work supported by the grants. We want to make a difference in the health of our nation's citizens and in

how we understand both normal physiology and disease. To realize this goal, it is critical to deepen the interaction between our clinical and research faculty. Our clinical faculty is the best source to know where improvements in our understanding of disease will have the greatest impact. Our research faculty is among the best qualified to investigate these areas. By working together, I am confident that we can continue to improve our position, and that Emory will continue to be an exciting and vibrant place to work.

Time honored traditions have become so for a reason. This New Year's ritual of putting the past in perspective and making plans for the future helps give focus and meaning to our lives. Looking back, I am proud of the work we have done. Looking forward, I am very optimistic. Working together we can indeed have a positive impact on each other and our society. Working together we can be successful and enjoy what we are doing. My best wishes to you, and us, for a joyous and prosperous new year.

- John Votaw, PhD, Vice Chair for Research



CHECK IT OUT

Coursey CA, Nelson RC, Weber PW, Howle LE, Nichols EB, Marin D, DeLong D. [Contrast Material Administration Protocols for 64-MDCT Angiography: Altering Volume and Rate and Use of a Saline Chaser to Better Match the Imaging Window—Physiologic Phantom Study.](#) *Am. J. Roentgenol.* Dec 2009; 193: 1568 - 1575.

Coursey CA, Hollingsworth CL, Wriston C, Beam C, Rice H, Bisset G. [Radiographic Predictors of Disease Severity in Neonates and Infants with Necrotizing Enterocolitis.](#) *Am. J. Roentgenol.* Nov 2009; 193: 1408 - 1413.

Weber PW, **Coursey CA**, Howle LE, Nelson RC, Nichols EB, Schindera ST. [Modifying Peripheral IV Catheters with Side Holes and Side Slits Results in Favorable Changes in Fluid Dynamic Properties During the Injection of Iodinated Contrast Material.](#) *Am. J. Roentgenol.* Oct 2009; 193: 970 - 977.

• Dr. Kimberly Applegate led the efforts to respond to the article [Exposure to Low-Dose Ionizing Radiation from Medical Imaging Procedures](#), which appeared in the August issue of the *New England Journal of Medicine (NEJM)*. In the December issue of *NEJM* the following response was published:

[Radiation Exposure from Medical Imaging Procedures](#)

• **To the Editor:** In the August 27 issue, the article by Fazel et al. and the accompanying perspective article by Lauer create an opportunity for the medical community to learn more about the work of radiation protection professionals: medical physicists and diagnostic radiologists. Radiologists are the only physicians who receive substantive training in radiation biology and safety that is linked to their board certification. Radiologists are most knowledgeable in managing and minimizing radiation exposures associated with medical imaging, and they can recommend sonography and magnetic resonance imaging (MRI) as alternatives to ionizing imaging. In a 2009 report, the National Council on Radiation Protection and Measurements, which was chartered by Congress, provided a comprehensive analysis of medical and all other sources of ionizing radiation to which the American public was exposed. The medical community should work together across disciplines to use existing knowledge about radiation protection to ensure that imaging is warranted and optimized. When patients do need imaging, they should ask if the imaging center is accredited, the imaging personnel are credentialed, and the protocols used are weight-based and indication-based, to ensure quality.

• Applegate KE, Amis ES Jr, Schauer DA. [Radiation Exposure from Medical Imaging Procedures.](#) *N Engl J Med.* Dec 2009 3;361(23):2289; author reply 2291-2.

DEPARTMENT GROWTH

Opening of the New EUH PPCA

The transformation of the first floor of Radiology at EUH continues to progress. On November 30, 2009, the new Pre-Procedure Care Area (PPCA) opened for patients. This updated area helps Radiology continue to improve the patient experience with more privacy, individual TVs and the ability to monitor patients from the nursing station.



Perlita Kitt, Nurse Shift Manager, explains that "the new space has lowered the number of complaints we get from the patients." The increase from 11 to 17 rooms has also helped the workflow in the PPCA, with the majority of the rooms having three walls and a fourth of glass doors. The increased privacy eases the minds of our patients, as well as the staff.

NEW FELLOWSHIP

Molecular Imaging - Sr. Associate

Emory University Department of Radiology is accepting applications for a Molecular Imaging Research Fellowship. The term of the fellowship may be for one year to two years, depending on the training objectives of the fellow. The fellow will spend 100% of his or her time dedicated to research and academic pursuits to advance molecular imaging in a vibrant teaching environment.

The fellow will have an opportunity to work with advanced technology including dedicated MR-PET, high field strength MR, optical imaging devices and a full nanotechnology infrastructure in cooperation with the Georgia Institute of Technology. State-of-the-art equipment also includes cyclotron and animal facilities and imaging devices. The successful MD level candidate will either have completed or is in good standing in an ACGME radiology residency or fellowship.

Consideration will be given to those candidates who have strong research backgrounds, such as MD/PhDs. The fellow will report to a thesis board composed of four mentors from the following areas: Optical Imaging and Phototherapy, MR, Nanotechnology and NanoMedicine, and Nuclear Medicine. The selected fellow will plan and execute one to two research projects utilizing resources at Emory with the specific goal of bridging established clinical modalities, such as PET and/or MR with emerging fields such as optical imaging and/or nanotechnology. The fellow will benefit from attending didactic lectures and seminars offered through the Division of Nuclear Medicine and Molecular Imaging, the Division of Magnetic Resonance Imaging, the Winship Cancer Institute, Georgia Institute of Technology, as well as other internal and external speakers.

Please send CV and cover letter to Dr. Baowei Fei.
Emory Center for Systems Imaging, Dept. of Radiology
1841 Clifton Rd, N.E., Atlanta, GA 30329.
baowei.fe@emoryhealthcare.org

Updates from Imaging Application Service (IAS)

New PACS

Our transition to the new GE PACS project is on track, with the following items in progress:

- Walkthroughs have been conducted at all sites in order to evaluate and analyze workflows, modality integrations, necessary facility construction, as well as training needs.
 - Data Migration of historical images into the database continues, as well as integration initiatives and testing for the interface of the GE PACS system with eEMR.
 - In order to ensure a seamless transition for clinicians, Magic Web will continue to be the source for image viewing until all imaging acquisition sites are live. Once this is completed, we will begin the rollout of a GE web viewing product, which will contain an embedded, training module. Additionally, all images will then be available via Power Chart.
- Watch for more detailed announcements regarding the implementation. This will include information regarding relevant timelines and training opportunities.

- Stacey Gordon
Radiology Applications Trainer

Current Production Updates

- RadNet was upgraded with the new Millennium Code and is now on the 2007.19 version. There were several changes in the new code, some visible and some that will be implemented in the future. The Millennium analyst, Daria Miller, will be working with Radiology leadership to prioritize the enhancement list, so there will be some new features still to come.
- Siemens PACS - Thanks to all for your patience and cooperation. With rapid communication and close alignment with the on-site Siemens engineer, we have minimized the time that the Siemens PACS query service is unavailable. We will continue to closely monitor the system.
- Data Warehouse - A team of folks is working to create a report library and a process for requesting reports and data. More to follow as our work progresses.

- Karen Boles
Manager, Clinical Applications

IN THE KNOW

HR Tip

Important Benefit Numbers and Websites

It is a new year and with that brings new information for the benefit plan vendors. Below is a list of important benefit numbers and websites for 2010. Keep this list handy in case you need to contact a vendor for general information, to replace a card, request assistance with finding a provider or file a claim.

Emory University Benefits 404-727-7613
www.hr.emory.edu/benefits

Aetna 800-847-9026
www.aetna.com/docfind/custom/emory
 • Medical — HDHP, HealthFund (HRA), POS Plus and POS Value plans
 • Pharmacy — HDHP, HealthFund (HRA) plans
 • Behavioral Health — HDHP, HealthFund (HRA), POS Plus and POS Value plans

Aetna Dental 877-238-6200
www.aetna.com/docfind/custom/emory
 • Dental Choice DMO and Traditional PPO

Medco 800-939-3758
www.medco.com
 • Pharmacy — Aetna POS Plus and Aetna POS Value plans

The Standard 866-756-8118
www.standard.com
 • Life Insurance

UMR 866-226-8084
www.umar.com
 Flexible Spending Accounts

UNUM 800-227-4165
www.unum.com
 Long-Term Care

UNUM 800-858-6843 (Customer Service)
 866-765-8490 (Claims)
www.unum.com
 • Short-Term Disability
 • Long-Term Disability
 • Supplemental LTD

Quality Corner

In the new era of GE PACS, standardization of workflow is a vital element of success. This past year Emory has made many changes to standardize the healthcare system. We have changed our name to reflect a more unified enterprise – Emory Crawford Long Hospital became Emory University Hospital Midtown. We opened Emory University Orthopaedic and Spine Hospital – all a reflection of what Emory University has... a reputation of excellence. So, how do we maintain that reputation while organizing a system and incorporating new technology? Standardization is the key.

Standardization has proven its worth in the airline industry by providing a baseline of necessary elements and removing the need to for a pilot to “remember” everything. They simply follow the checklist. Dr. Peter Pronovost has proven the same standardiation for healthcare. He initiated the use of a simple checklist at Johns Hopkins and was able to decrease line infection rates to zero! Who knew something so simple could have such a dramatic impact.

Radiology has undergone many changes this year. We left IDXRAD to implement RadNet. We have already

upgraded that system once. We converted clinic to hospital and we are now about to implement a new PACS system. With all this technical change comes a necessary change in workflow. Checklists and standardization is what we will need to keep our new technology running smoothly and ensure efficient and safe care for our patients; all while providing our staff with the ability to focus on solutions for those unexpected changes that occur in radiology rather than focusing on daily workflow tasks.

New GE PACS creates a different workflow and in order to hardwire it we will be utilizing standardized workflow and checklists. Dr. Pronovost says checklists provide two functions: they make explicit the minimum, expected steps in a complex process and establish a standard of baseline performance, and they help with memory recall of those tasks that can be mundane and possibly overlooked when things get busy and emergent. With our new system, doing processes in a consistent and standardized method will help us do them correctly. “Prevention is more effective than correction.” Our goal is prevention!

- Starla Longfellow
 Asst. Director, Imaging Services

GETTING TO KNOW YOU

Nuclear Medicine Technologists

Just as radiologic technologists play an important role in the department, Nuclear Medicine (NM) technologists are also responsible for working with hundreds of patients each year. These technologists perform a variety of nuclear medicine exams while caring for the patient's health and safety, and handling radioactive isotopes. NM technologists are unique because of their education, and focus on the physiological versus the anatomical imaging of the body.

With more than 100 accredited nuclear medicine programs, there are a range of options in becoming a certified NM technologist. Programs range from one to four years, depending on the degree you choose to pursue. The certification exams administered by the American Registry of Radiologic Technologists (ARRT) or the Nuclear Medicine Technology Certification Board (NMTCB) are comprehensive of physical science, mathematics, radiation biological effects, exposure and procedural methods, radiation protection, imaging techniques, technology and patient care.

The use of radiopharmaceuticals for diagnostic or treatment purposes creates a higher risk for radiation exposure for these technologists. The exposure to radiation is not directly related to the equipment, as is the case in other

radiologic technologist positions, but is a result of exposure to highly concentrated radioisotopes that are either injected into the patient or administered orally. The NM technologist works closely with the NM physician and, in some cases, the Radiation Safety Officer when handling these radiopharmaceuticals. The NM technologist also prepares the patients for the exams, arranges and administers the radiopharmaceuticals, performs imaging procedures and processes the acquired data for the NM physician to interpret the exam. NM technologists perform various studies



Nuclear Medicine Technologists work closely with the physicians to ensure all information is available for interpretation of the study.

for patients undergoing treatment for a variety of diseases, such as cancer. NM physicians use these results to stage and restage different types of cancers, which aid in determining the best treatment plan.

After completing any examination, the technologist works closely with the physician to ensure information is available for the physician to interpret the study. Some examinations can take anywhere from 20 minutes to four hours or even may extend over a period of several days depending on the exam that is ordered.

As educational differences, involvement with radiopharmaceuticals, and the types of studies performed on patients may set NM technologists apart from other radiologic technologists' positions, both positions are extremely vital for our department's success.

-Alaina Shapiro, Communications Coordinator

STRIVING FOR EXCELLENCE

Change Management

It is the time of year when we reflect on the past year and look forward to the new one. 2009 brought a lot of change to Radiology in the way of informatics. We have implemented a new RIS system and a new mammography reporting system and in 2010 we are going to implement a new PACS system. These necessary changes to keep up with the unprecedented growth of this department do not come without challenges. There were many lessons learned over this past year as we all struggled to adapt the way we perform our daily duties.

With the new PACS coming and yet another round of work flow changes for the department, I thought it would be worthwhile to talk about change management and some of the tools we can use to help during this transition.

- **Crucial Conversations** - There is a lot of literature on this topic. The central theme revolves around communication, and more specifically, open and frank conversations. Staff and management need to be willing to have open dialogue about the issues and concerns regarding

departmental changes that impact their professional lives. This should be without fear of alienation or that their concerns will not be heard. In this way, as a training plan is developed, these concerns can be considered and addressed. It should be noted that not all concerns can be addressed or resolved but at least they will be heard.

- **Training** - This is a vital step in the success of any transition. For a department to embrace change, to grow and succeed, it will take a clear vision of the steps required to get there. These steps are mapped out in the training plan. Even with a great training program it is only one step to a successful transition. To make a lasting impact we have to make cultural and behavioral changes as well.
- **Behavior and Cultural change** - Even the best training programs often don't achieve the desired results of a lasting change. With any change comes challenges that may not be related to achieving the end result. Often leaders and staff don't understand or evaluate the

fundamental barriers to those changes and focus on training alone. Barriers to the desired outcomes can include current departmental rules, procedures, technology, locations, bureaucracies and our social networks. These barriers should be part of the "crucial discussions". There are also behavioral barriers as well. As an organization, we need to evaluate the staff's skills and willingness to embrace these changes and meet them head on.

It is important to understand the function of change management in order to achieve the desired outcome, which is a lasting change at a behavioral/cultural level. Once these barriers/behaviors have been identified, we must reinforce the positive changes and find ways to minimize or eliminate the negative ones. We all, management and staff, need to support each other as we transition



to another system that will add another brick in the foundation for growth and success. It is also an important cornerstone for this department to achieve our goals to provide the highest quality of care for our patients.

- Dan Crawley, Assoc. Clinical Administrator

GET INVOLVED

A Season of Celebration

Despite the current economic environment, Emory Radiology hosted two receptions to celebrate the holidays and our department's accomplishments over the past year. Holiday cake, cookies and festive punch were enjoyed by faculty and staff at the Emory University Hospital Midtown (EUHM) and Emory University Hospital (EUM) locations.



The Emory University Hospital Midtown reception, held in the employee lounge, allowed co-workers time to mingle while enjoying refreshments.



On Thursday, December 17, EUHM held their holiday reception

in the employee lounge. During this time, employees were able to drop in and mingle with co-workers in addition to enjoying the refreshments. Radiology Manager, Jason Parks felt the event was "very nice and we are glad to be able to do something special like this for everyone." Randy Barber, Radiologic Technologist, expressed his gratitude for the opportunity to spend time with co-workers and is "very appreciative for all the department does".



The Emory University Hospital reception was held in the Winship Ballroom in the DUC.

the festivities on Friday, December 18 at EUH's reception held in the Winship Ballroom. As Max delivered chocolate treats to faculty and staff, Dr. Meltzer enjoyed this time and observed how "there is never enough opportunity to talk with folks and see how they are doing professionally and personally. I cherish these moments."



Holiday music was playing softly in the background at both locations as employees reflected on our success in 2009. Dr. Ernest Garcia expressed it best with his hopes for "a prosperous 2010 for all".

- Alaina Shapiro, Communications Coordinator

Radiology Calendar

Week of January 11, 2010

Wed., Jan. 13 –
Grand Rounds -
Shella Keilholz, PhD
Mapping the Spatiotemporal Dynamics of Spontaneous Brain Activity with fMRI

Thurs., Jan. 14 –
Research In Progress Series (RIPS) -
Aizhi Zhu, PhD
Development of F-18 labeled small molecule CXCR4 imaging agents - From drug development to radiolabelling

Week of January 18, 2010

Wed., Jan 20 –
Grand Rounds -
Diego Martin, MD, PhD
Clinically Applied Research Body MRI Program: Updates on functional imaging and the virtual biopsy

Thurs., Jan 21 –
RIPS -
Nivedita Candade Raghunath, MS
PET Motion Quality Control

Week of January 25, 2010

Wed., Jan 27 –
Grand Rounds -
Doug Mattox, MD
Evaluation and Management of Pulsatile Tinnitus

Thurs., Jan 28 –
RIPS -
Marijn Brummer, PhD
Risk Factors in Congenital Heart Disease by 4-D Flow MRI

Week of February 1, 2010

Wed., Feb. 3 –
Grand Rounds -
Benoit Desjardins, MD, PhD
Imaging in Cardiac Electrophysiology

Thurs., Feb. 4 –
No RIPS Conference

**For times & locations visit the website:
www.radiology.emory.edu**

GET INVOLVED

Be Inspired - Radiology Fit Club

As the New Year arrives, many of us take the time to set resolutions and realize a few months later how difficult they can be to achieve. Adam Brown, Nuclear Medicine Technologist, decided last year that he wanted to complete the ING Half-Marathon without stopping. Not only did he accomplish his resolution, but during his process he lost an amazing 80 pounds, gained a healthier lifestyle and finished the second race 45 minutes ahead of his goal. This year, Adam wants to help other Radiology staff and faculty members to set and surpass their New Year's resolutions.

The "Radiology Fit Club" is the perfect opportunity for anyone, at any level of fitness, to start incorporating exercise and healthy eating into their daily regimen. Organized by Adam, a group of individuals will meet

after work at Emory University Hospital to run or walk and encourage each other to get into shape. On the weekends, groups can arrange to meet at off campus locations, such as Stone Mountain or Piedmont Park. Times and locations will be based on convenience and availability of all group members.

Current activities for the fit club include running that incorporates speed, long distance and all-terrain exercises. This benefit is offered free to any faculty or staff members in the Radiology Department. Adam is also looking for other dedicated and motivated individuals



Adam Before: He has lost a total of 80 pounds.



Adam After: His new personal goal is to run the full ING Marathon.

to volunteer as mentor or co-leader for this fitness club. In the future, he plans to expand the club to include weight training, other methods of exercise and nutritional workshops.

Adam hopes to inspire with his story by training and educating others on how to set realistic and achievable goals that will result in a healthier lifestyle. For more information about joining the Radiology Fit Club, you can contact Adam at adam.brown@emoryhealthcare.org.

-Alaina Shapiro, Communications Coordinator

NEW FACES & APPOINTMENTS



Ryan Christie, MD

Assistant Professor
Emergency Radiology

Dr. Christie completed an Internship and Residency at the University of Tennessee Health Science Center/Methodist Healthcare before continuing his education with a Musculoskeletal Fellowship at Emory University. He then joined Summit Radiology Services, in Cartersville,

Georgia to gain valuable experience before coming back to Emory University as an Assistant Professor of Radiology with the division of Emergency Radiology. Some of his research interests include "PET/CT in the Evaluation of Childhood Sarcomas" which is accepted for publication by the *American Journal of Roentgenology*. Dr. Christie is active in the radiology community as a member of the American College of Radiology, Radiological Society of North America and the American Roentgen Ray Society.



Fucang Jia, MSc, PhD

Visiting Scholar
Research - WCI

Dr. Jia's research career began as a Research Engineer at Shenzhen Anke High-Tech Co., where he focused on research on stereotactic neurosurgery planning software system in the Surgical Department. He then advanced to an Enterprise Postdoctoral Fellow in Biomedical Engineering at Zhejiang University, where he

concentrated on research involving image-guided neurosurgery and surgery planning system. Dr. Jia most recently worked at the Shenzhen Institute of Advanced Technology as an Associate Research Fellow before joining the Emory Department of Radiology in research as a Visiting Scholar working with Dr. Xiangyang Tang. Dr. Jia is well published with collaborations on 27 journal papers, 20 conference papers and two books. He received his MSc and PhD from the Chinese Academy of Sciences.



Peter Weiland

Quality Analyst - EUH

Pete was previously with Delta Air Lines, where he had responsibilities for process improvement, strategic planning and lean operations in the Airport Customer Service division. Pete received his MS in Industrial Engineering and Bachelor of Industrial Engineering from GA Tech. He is a Certified Six Sigma Black Belt.



Zhengjia "Nelson" Chen, PhD

Statistical Consultant

Dr. Chen is a Research Assistant Professor in the Department of Biostatistics and Bioinformatics, and will be available to the Radiology Department for statistical consulting. He brings extensive statistical expertise suitable for planning experiments, collaborating on grants, and analyzing data. Dr. Chen received his PhD and MS in Biostatistics from the University of South Carolina.

Look for a new issue of
the Rad Report
the first full week of February.