

April, 2013

## Launching a New Strategic Plan

The Emory Department of Radiology and Imaging Sciences possesses many strengths, including outstanding people talent, substantial physical resources, a collaborative environment, high quality teaching programs, an ethos of innovation and discovery, and a shared commitment to excellence. Our 2007 - 2012 strategic plan propelled us further forward by focusing our efforts on:

- Recruitment and retention of an outstanding and diverse faculty and staff
- Building the needed infrastructure for practice quality improvement
- Establishing our unique Adopt-a-Resident and other development programs
- Growing our renowned imaging research to the elite top-20 ranked NIH-funded Radiology departments

The strategic plan has been an enormous and rewarding "labor of love" yet still there is more ground to cover in our destination journey.

As we embark on a new strategic plan (2013 – 2017), we face a more challenging health care and economic environment with added uncertainties and hurdles to overcome. Yet we are well prepared to take on this task by building on our record of progress, and critically examining both our successes and vulnerabilities. Through a series of monthly strategic planning meetings, focused retreats, and input from department members and field experts (including The Advisory Board™), we have examined our mission and vision and arrived at prioritized goals for the new plan.

The mission of the Department of Radiology and Imaging Sciences remains unchanged from 2007:

*The Emory Department of Radiology and Imaging Sciences serves the community through advanced innovation, translational research and clinical application of imaging sciences. The department is committed to excellence in scholarship and to the training of the next generation of radiologists, technologists, and imaging scientists. The department's goal is to provide the highest quality patient care with predictive, diagnostic and therapeutic imaging-based approaches.*



There is a total of 49 members on the Strategic Planning Committee. These members make up six teams comprising faculty and staff to address the six new goals.

Our vision statement has been distilled down to a simple, meaningful statement that sums up our collective target:

*Emory Radiology will lead excellence in imaging sciences, education, and care delivery.*

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### Do You Need Media Services?

Media Services available exclusively to the Radiology Department include:

- Medical Illustration and Animation
- Publication Preparatory Needs
- Photography
- Diagram Design
- PowerPoint and Poster Presentations
- Scanning Images, Documents or Slides
- Burning Data to Discs (CD or DVD)
- Editing AVI and MPEG Movie Files
- Digitizing Films

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](mailto:eric.jablon@emory.edu).

## MESSAGE FROM THE VICE CHAIR FOR RESEARCH

### Do You Understand?

I recently had a conversation with a friend of mine who deeply understands real estate law. He found a foreclosure notice that didn't make sense and he was telling me about his efforts to obtain the property at a discounted price. It was a fascinating story that involved 13 liens, the real estate bust, bundling of mortgage assets, the Sheriff's Department, weapons carry permits and eviction procedures. It was full of suspense and intrigue but more of that later. Many times during his regaling my friend asked me, "Do you understand?" It got me thinking, 'what was he really asking (or saying) with that question?'

A scientist understands something when he can use it to predict future events. For example, when I drop a book, it falls to the ground. After enough observations a general principle emerges – in this case the theory of gravity. The theory lets anyone make predictions about future events such as what happens if I drop a pencil, how long before a comet returns or what is the maximum possible height of a mountain.

How does this apply to Radiology? The referring physician requests a radiologic consult to help make a prediction about the future state of his patient (determine their prognosis). Radiology practitioners add value to the process by knowing what observation is needed to make the prediction. Implicitly assumed is that the radiologist has an understanding of the disease and potential procedures. That is, if the patient has condition X, then scan Y will show Z with probability P. (BTV, support your researchers – it is they who collect the evidence to back the previous statement.) With this understanding the test can be performed with high likelihood of improving the welfare of the patient.

The value of a Radiologist who knows what tests to perform will increase as we move from the fee for service to accountable care model for reimbursement. It seems counterintuitive but it will become more valuable to know when an exam is unnecessary. If a patient can be treated just as effectively without doing an exam, then we will gain for two reasons: 1) we

will save the expense of doing the exam, and 2) we will have freed a scan slot to help another patient where imaging will make a difference – we (Emory) will be able to treat more patients. Since the accountable care model pays per patient, we come out ahead by not doing the study!

My friend was letting me know that understanding is critical to advancement – be it taking advantage of current economic conditions, understanding how satellites orbit to permit GPS navigation (gravity), or planning future practices. The deeper our understanding the further we advance. By the way, my friend recognized that the first lien was invalid, bought the second \$1.3M lien from the bank for \$15k, foreclosed on the other 11 liens, encouraged the Sheriff to evict the squatters by threatening to make a citizen's arrest using his carry permit, and ended up with a \$3M property for \$20k plus back taxes. Now that's the level of understanding I'm talking about.



- John Votaw, PhD  
Vice Chair for Research

## AWARDS & RECOGNITION



### Faisal Khosa, MD

Assistant Professor  
Radiology and Imaging Sciences

### American Roentgen Ray Society (ARRS) Annual Scholarship Program

Dr. Khosa is the 2013 ARRS Scholarship recipient. The ARRS Scholarship is intended to support study in a field selected by the scholar that will enable the scholar to attain his or her professional career goal. By giving both recognition and financial support to the activities and studies of young investigators, educators and administrators, the ARRS helps to prepare them for positions of leadership in academic radiology.

Dr. Khosa's research interests include the study of phenomenon of accelerated atherosclerosis in vulnerable populations, including cancer survivors. The ARRS/Elio Bracco Scholarship will allow Dr. Khosa to study the phenomenon of accelerated atherosclerosis in cancer survivors, employing a multidisciplinary approach. He proposes to use MRI for the evaluation of vulnerable plaque in vulnerable populations. He also intends to correlate the plaque characteristics (morphology & inflammation) with markers of inflammation in the blood both pre and post treatment with statins.



### Merrill's Award

The Merrill's Committee would like to acknowledge Jason Smitherman for earning the Merrill's Award for the month of February! Jason works in the diagnostic department at Executive Park. He earned the award based on the submission of a foot exam that featured excellent visualization of the sesamoid bones. Please join us in congratulating Jason for his outstanding commitment to image quality.

Remember: you can't be the next Merrill's winner without submitting an image. Be sure to recognize your own or others' stellar work by submitting a nomination for the Merrill's Award. Blue Merrill's Committee folders are located in each diagnostic work area.

# AWARDS & RECOGNITION

## Caught in the Act... of Service Excellence

In February 2013, a small pilot program for employee recognition was launched in General Diagnostic Radiology at Emory University Hospital. The program, "Caught in the Act of Service Excellence," is designed to recognize noticeable acts of service excellence for which an individual or a team goes beyond the scope of duties to exceed the expectations of a customer (such as a patient or their family member,

referring physician, student or faculty/staff member). Anyone who notices someone else exhibiting an act of service excellence can quickly and easily submit the story via an [online submission form](#). During the month of February, a total of five accounts of service excellence were submitted. Two of them were selected for a special surprise recognition by their peers and leaders on March 5<sup>th</sup>, 2012. The "Caught

in the Act" pilot will continue through the spring, with plans to expand the program to department-wide by summer 2013.

drinking the tea would cause a delay in his examination. The patient and his wife were so grateful and impressed that Deborah was looking out for them so they reported the act of service excellence to the front desk supervisor. We recognize Deborah for applying the Service Excellence Standards, specifically Care Delivery, Courtesy and for anticipating the needs of one of our patients.

In a time when transportation was short staffed and there was no lead transporter on duty, **Kasha Howard** (Transportation) stepped up and took on the role of the lead without being asked and without expecting anything in return. Kasha even postponed her lunch break because the patient load was heavy and she did not want the patients to wait. Her colleague wrote that Kasha "definitely understands the meaning of team work, hard work and dedication... Thank you Kasha for being an excellent team player!" We want to recognize and thank Kasha for her excellence in care delivery while applying many of the concepts from our Service Excellence Institute, especially Active Engagement and Communication.

- Deb Smith  
Director of Strategic Integration



From left to right: Carolyn Meltzer, MD, Chair of Radiology & Imaging Sciences; Deborah Harris-Copeland, Front Desk Rep at EUH; Kasha Howard, Transportation at EUH; Linda Gunsby, Manager at EUH

in the Act" pilot will continue through the spring, with plans to expand the program to department-wide by summer 2013.

**Deborah Harris-Copeland** (Front Desk Patient Account Representative at EUH) noticed a patient at the coffee station preparing some hot tea, and recognized that the patient was not supposed to eat or drink before his exam. She quickly informed the patient that

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Our new strategic plan is also inspired by a commitment to our tri-partite nature (focused on clinical care, research, and teaching) and the department's Service Excellence Standards (Safety, Courtesy, Care Delivery, Efficiency and Innovation). Teams comprised of faculty, staff and residents are leading the development of initiatives that create value within each of six goal themes. These goals provide the backbone of the plan:

**1. Culture** (team leads: Courtney Moreno and Jane Vitali)  
We will build on our Service Excellence Institute to enhance and sustain a culture of engagement.

**2. The Patient Experience** (team leads: Will Parrish and Steve Simoneaux)

We will significantly improve the patient and family experience with access to the right care.

**3. Radiology Informatics:** (team leads: Willie Arnold, Anh Duong)  
We will develop the structure and strategy for leadership in Radiology Informatics, a key competency for our future.

**4. Partnerships:** (team leads: Mike Armstrong, John Oshinski)  
We will build strategic internal and external partnerships and alliances that add value.

**5. Distribution of Resources:** (team leads: Deb Baumgarten and Pamela Wimberly)  
We will optimize Radiology resources within a distributed system across Emory and partner institutions.

**6. Standardization:** (team leads: Mimi Newell and Vivian Smith)  
We will drive standardization of processes in Radiology, which will decrease error risk and enhance outcomes.

Over the coming weeks, we will further hone detailed assessments of scope, specific initiatives, needed resources for implementation, metrics of success, and stakeholder accountability. A draft of the full plan will be distributed to every member of the department to ensure broad input. Please share your impressions, comments, and questions!

I look forward to this new leg of our journey together.

- Carolyn C. Meltzer, MD, FACR  
Chair of Radiology and Imaging Sciences

# IN THE KNOW

## Quality Corner

### As Low As Reasonably Achievable (ALARA)

The sentinel event alert issued by The Joint Commission in August 2011 reported that the total exposure to ionizing radiation in the United States has almost doubled over the past 20 years. The per capita effective dose from the medical exposure for the U.S. is nearly five times (3.0 mSv) higher compared to the global population (0.64 mSv).

These alarming statistics prompted a national dose reduction initiative whereby medical imaging professionals together share the responsibility to reduce patient exposures to “as low as reasonably achievable” (ALARA). Such reduction can be achieved through appropriate use of imaging, education and standardization of practice.

In the Neuroradiology division, we set out to review our current practice of fluoroscopy guided lumbar puncture, and found no published guidelines for the expected or acceptable range of fluoroscopic time (“fluoro time”) for the procedure. Thus, we aimed to obtain baseline fluoro time ranges for lumbar puncture and to assess procedure time variability based on body mass index (BMI). We also tested the hypothesis that fluoro time of lumbar puncture increases with rise in BMI.

Retrospective review of all patients who underwent fluoroscopy guided lumbar puncture at EUH, EUHM, EP and Grady during July 2011 - June 2012 was performed. Patients were categorized as normal (BMI 18.5 - 24.9), overweight (BMI 25 - 29.9), obese (BMI 30 - 39.9) or extremely obese (BMI  $\geq$  40) based on the federal obesity guidelines. Identified patient subgroups based on the clinical indication were: infection, inflammation, neoplasm, cognitive decline, hemorrhage and idiopathic intracranial hypertension.

A total of 315 fluoroscopy guided lumbar procedures were evaluated. The mean patient age was 47.6 years (range 18-92, 35% male). The mean BMI was higher in female patients (33.8 kg/ m; range: 21.6 - 69.4) than males (30.2 kg/m<sup>2</sup>; range: 19 - 51.8). Fourteen neuroradiologists and 25 residents and fellows participated. Mean fluoro time for lumbar puncture in our study population was 1.18 minutes (standard deviation 0.94).

As we hypothesized, the fluoro time for lumbar puncture increased with the increase in patient BMI. Fluoro times are significantly higher among the obese ( $p = 0.002$ ) and extremely obese ( $p = 0.0001$ ) when compared to patients with normal BMI. Idiopathic intracranial hypertension is the independent clinical indication with highest fluoro time, related to the maximum mean BMI of this subgroup.

This study contributes new evidence to the field by providing single center experience of baseline fluoro times for lumbar puncture with statistically significant variation based on BMI and clinical indication. We suggest that these data are used as an initial benchmark in the evaluation of individual and department performance with a goal to reduce and maintain fluoro times to as low as possible within the 2-standard deviation range. The data may be used in several other ways, for example: to provide performance feedback to faculty and trainees; to identify individual trends in fluoro times; and to identify provider-level outliers that may prompt education or intervention. The project has also sparked an interest in the development of a practice quality improvement (PQI) module on the subject of fluoroscopic lumbar puncture for diagnostic and therapeutic purposes. The overarching goal is to provide the best possible patient care while minimizing radiation exposure (ALARA).

- Srikanth Boddu, *Neuroradiology Fellow*  
- Amanda Corey, *Assistant Professor in Neuroradiology*

## CHECK IT OUT

**Carpenter WA, Datir A, Kitajima H, Monson DK, Nour SC, Powell TE, Terk MR.** MRI-Guided Percutaneous Biopsy of Occult Musculoskeletal Lesions: Initial Assessment of Feasibility, Safety and Diagnostic Yield. *Society of Skeletal Radiology Program.* 2013 March 17; 49.

**Jaffan AA, Prince EA, Hampson CO, Murphy TP.** The Preclose Technique in Percutaneous Endovascular Aortic Repair: A Systematic Literature Review and Meta-analysis. *Cardiovasc Intervent Radiol.* 2013 Mar 13.

**Lubarsky M, Kalb B, Sharma P, Keim SM, Martin DR.** Magnetic Resonance Imaging of Acute Non-Traumatic Abdominal-Pelvic Pain: Practical, methodological and interpretive considerations. *Radiographics.* 2013 March-April 33:2 313-337

# RADIOLOGY UPDATE

## Radiology & Imaging Sciences Mid-year Update

The first half of this fiscal year has been marked by many accomplishments. We are seeing a real synergy between all staff in our invasive procedure areas such as nurses, physicians, secretaries, and technologists – which results in timely and effective care. We have entered into external partnerships with Alliance Imaging and Southern Orthopedics in LaGrange, Ga. Also, Emory University Hospital is innovatively placing a CT within the Emergency Department, currently new MRIs are being installed at Winship and the EUHM medical office tower, and Neuro-Interventional Radiology has been standardized to one imaging platform. Our efforts continue to digitize our x-ray equipment across the system. Just recently, all our teleradiology clients were moved to NovaRad, a consolidated RIS/PACS system. Head & Neck Radiology expanded operations to the Midtown campus and lastly, the department research practices have been

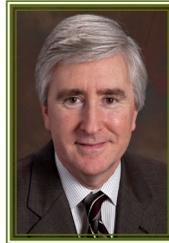
selected as an exemplar to help other University departments.

Even with all of our hard and effective work, we have entered into an era that will be unlike any we have known before. Medicine is beginning to see the effects of a new reimbursement landscape. Medicare has reduced physician payments by 2%. Technical payments have been cut and research funding is likely to be reduced as well. We anticipate more cuts both from government and private payors. Furthermore, a massive shift from fee per service to outcome based reimbursement is projected. What this means is that we face a transition from a payment system that rewards volume to a model that rewards value.

For us to continue to thrive, we must adapt

to this world of great and continuous change. This is where the challenges, triumphs, and failures of past years can greatly aid us, because we have developed skills and a resilience that enable us to creatively meet any task. Given an uncertain future, we are going to have to make the best use of our strengths and partnerships. Positively supporting one another and willingly engaging in the pursuits of common purpose (patient care, education and research) will lead to continued success. We will not have the time or energy to spend on prolonged conflict. Rather, we should resolve and prevent differences so that we can turn our collective focus towards optimization of current services and new opportunities. Finally, we must leverage technology, either by fully utilizing current applications like RadNet and GE PACS or implementing new applications such as Powerscribe 360, RadPrimer and Qgenda.

- Chuck Powell, Administrator



## ENGAGE IN EDUCATION

### Resident Match Completed

With 660 applicants eager to become an Emory Radiology Resident, our program continues to remain one of the top picks. This year 164 were interviewed and, ultimately, the 16 people listed below will become Emory Radiology Residents beginning in July 2014.

The National Resident Matching Program (NRMP) explains “the Match uses a computer algorithm designed to produce favorable results for students, that aligns the preferences of applicants with the preferences of residency programs in order to fill the thousands of training positions available at U.S. teaching hospitals.”

### 2014 1<sup>st</sup> Year Emory Radiology Residents

Tadeusz Cizak  
~ University of Alabama School of Medicine

Nicholas Gallagher  
~ Medical University of South Carolina

Navdeep Gogia  
~ Creighton University School of Medicine

Jacqueline Junn  
~ New York Medical College

Rohini Komaria  
~ University of South Florida College of Medicine

Michael Lawrence  
~ University of South Alabama College of Medicine

Dexter Mendoza  
~ University of South Florida College of Medicine

Dr. Mark Mullins, Vice Chair for Education, shares “We are extremely happy with our Match results and expect that this Radiology Resident class will be a wonderful group and in the great tradition of very smart, well-trained, team-oriented Emory Radiology Residents. We would like to thank everyone involved with making this process an incredible success again this year. Please welcome them to our family.”

- Monica Salama, Sr. Associate Director of Programs

Kiet Nguyen  
~ Medical College of Georgia

John O’Keefe  
~ Georgetown University School of Medicine

Shane Oberoi  
~ Medical University of South Carolina

Stanislav Poliashenko  
~ Emory University School of Medicine

Karina Rodriguez  
~ Ponce School of Medicine, Puerto Rico

Constantinos Spyri  
~ Icahn SOM at Mount Sinai

Matthew Uriell  
~ University of North Dakota SOM

Philip Wong  
~ University of Florida College of Medicine

Karen Zheng  
~ Weill Cornell Medical College

# GETTING TO KNOW YOU

The “Getting to Know You” section is devoted to sharing how contributions of individuals and teams impact each other and our department. This month we are featuring an **Imaging Workflow Specialist**, a **Intervention Radiology Supervisor** and a **Nurse Practitioner**.

**Name:**

Inez Dupree

**Position:**

Imaging Workflow Specialist, Nuclear Medicine, EUH



**Years with the Emory:**

10 years with Emory and nine with the department.

**What are some of your position’s daily duties:**

I communicate and act as a liaison between the radiologists, technologists and referring physicians. I facilitate resolution on hardware related issues in Powerscribe, Radnet and the Novarad System.

**Other job responsibilities:**

Contact general nuclear medicine and PET/CT patients for EUH and Emory Clinic daily. I review volumes, gather patient information and upload images into mimvista system for weekly GI Tumor board.

**How does your position impact and make a difference for the department:**

I make sure that things run as smoothly as possible in the Nuclear Medicine reading room allowing the physicians to read each patients scan with ease.

**How does your position contribute to Service Excellence in our department:**

I am able to take time to listen to patient concerns, show compassion and direct them to the appropriate source to make their experience here at Emory Healthcare as trouble free as possible.

**What do you enjoy most about working for our department:**

I enjoy working with a team that is always approachable and willing to make sure that our patients receive the best care possible.

**Name:**

Edwin Herrod, RT (R)(VI)

**Position:**

IR Supervisor, EUHM



**Years with the Emory:**

I have worked at Emory and the department for eight years.

**What are some of your position’s daily duties:**

I provide leadership and guidance for the Interventional Radiology practice at EUHM.

**Other job responsibilities:**

Manage inventory for the Vascular and Neuro Supplies. Managing daily workflow, staffing, budgets and Technologist coverage for the Hybrid OR Suite.

**How does your position impact and make a difference for the department:**

When you become a leader, you’re actually a servant for your staff. My staff works hard in providing exceptional patient care. My goal is to make sure they have all the necessary tools available to continue great work. I’m very fortunate to have such a great team!

**How does your position contribute to Service Excellence in our department:**

Encouraging and empowering my staff to always put the patient and family first when providing care. Also being a role model and building working relationships.

**What do you enjoy most about working for our department:**

Its a great place to work. Everyone in Radiology comes to work everyday to make a difference in someone’s life.

**Name:**

Michael Bowen, NP

**Position:**

Nurse Practitioner, Abdominal Radiology-Lead Advanced Practice Provider, EUH



**Years with the Emory:**

16 years with Emory and 11 years with the Department.

**What are some of your position’s daily duties:**

I currently coordinate and perform Abdominal Procedures. Abdominal procedures included CT guided biopsies and drains, ultrasound guided biopsies, drains, paracentesis and thoracentesis.

**Other job responsibilities:**

I also manage other advanced practice providers within the Department of Radiology and help define the tasks and responsibilities of the NPs and PAs.

**How does your position impact and make a difference for the department:**

I provide direct patient care and try to minimize patient waits and delays within the abdominal division.

**How does your position contribute to Service Excellence in our department:**

Service Excellence has assisted me by providing reasonable expectations for patients and families. It also has given me skills to understand how to provide service recovery when those expectations are not met.

**What do you enjoy most about working for our department:**

The new challenges that are presented each day. No two days ever seems to be the same.

# GET INVOLVED

## Stories of Charm and Service Excellence

Transportation dropped off an elderly patient for a delayed MRI and left the patient. By the time the patient finished, transportation had stopped running and the patient did not have a ride back to the nursing home. When my shift ended the patient was still waiting with no ride. I decided to take the patient home and he was very grateful.

-Anonymous

I saw PET Supervisor, Delicia votaw go out of her way to push a patient from WCI to EUH in her wheelchair. Delicia saw the patient's family having trouble with the wheelchair and she volunteered her service. This was a great deed on Delicia's part.

-Anonymous, EUH

I'm extremely proud of our Radiology team here at EUOSH. We work together as a team to accommodate the needs of our patients and our coworkers. Flexibility and consideration are key for a successful department. The patient/tech interaction is phenomenal. Every day I witness our staff taking their time to listen, be patient, explain and ease the anxiety of our patients. I am proud to be a part of this great Emory team.

- Anonymous, EUOSH

A few months ago, I was a patient at the Radiology Department (Emory Clinic) and had a CT done. I had the pleasure of meeting Glenroy (Technician) who was assigned to me. He took the time to explain each step of what he was about to do, which had never happened before. I have had numerous exams at Emory, but this time I was not as nervous. He was very courteous, respectful and mannerly. It was a great experience.

-Anonymous, EUH

We would love to hear your stories of Charm/Harm or Service Excellence success. Please submit your story and receive a brand new ID badge. Stories can be short and anonymous. Please send your story by email to Camille Dingle at [cdingle@emory.edu](mailto:cdingle@emory.edu).



## Radiology Calendar

### **Week of April 8, 2013**

Wed., April 10 –  
Grand Rounds -  
AUR- NO GRAND ROUNDS

Research In Progress Series (RIPS) -  
Nashwa Jarkas, PhD  
Fluorinated Diphenylsulfides for  
In Vivo Study of SERT in Psychiatric Disorders

### **Week of April 15, 2013**

Wed., April 17 –  
ARRS - NO GRAND ROUNDS

Research In Progress Series (RIPS) -  
Ji Chen, PhD  
Cardiac SPECT Imaging for Predicting  
Ventricular Arrhythmia in Patients Post  
Myocardial Infarction

### **Week of April 22, 2013**

Wed., April 24 –  
Grand Rounds -  
Polly Price, JD  
Recent Developments in  
Medical Malpractice Law

Research In Progress Series (RIPS) -  
Aizhi Zhu, PhD  
The study of small molecules with  
different scaffolds for tumor metastatic  
PET imaging targeting CXCR4.

### **Week of April 29, 2013**

Wed., May 1 -  
Grand Rounds -  
Cooper Lecturer  
Michael Lev, MD, MGH  
Advanced Stroke Imaging:  
What is Necessary? What is Sufficient?

Research In Progress Series (RIPS) -  
Wone Woo Seo, PhD  
Preparation of a <sup>18</sup>F-labeled Hoechst  
analog using copper-free click  
chemistry and progress in development  
of <sup>64</sup>Cu-labeled SPIO for  
atherosclerotic plaque detection

### **Week of May 6, 2013**

Wed., May 8-  
Grand Rounds -  
Courtney Moreno, MD

For times & locations visit the website:  
[www.radiology.emory.edu](http://www.radiology.emory.edu)

# NEW FACES & APPOINTMENTS



**Zenisha Bain**  
Senior Medical Secretary- IR  
Zenisha currently is a Biology Major at Georgia Perimeter College. Prior to joining Emory she was a Medical Assistant at Children's Healthcare of Atlanta. Zenisha's area of focus is in the Public Health field. She also has interest in Epidemiology.



**Jessica Gibbs, RT (R)**  
CT- Technologist- EUHM  
Jessica is a CT Technologist for EUHM. Prior to joining Emory she graduated from Emory University's Medical Imaging Program, and was a member of the Gamma Sigma Sigma sorority. Jessica earned the President's Volunteer Service Award for helping to restore FEMA trailers into livable homes for migrant workers in South Florida. She has a great interest in Forensic Radiology.



**Venkatgiri Krishnamurthy, PhD**  
Post- Doctoral Fellow- CSI  
Venkatgiri earned his PhD from the joint program of Bioengineering at University of Texas (UT) Arlington and UT Southwestern Medical Center at Dallas. At UT his dissertation was selected for book publication by Lambert Academic Publishing. Venkatgiri was a Graduate Research Assistant in the Department of Bioengineering at the UT at Arlington.



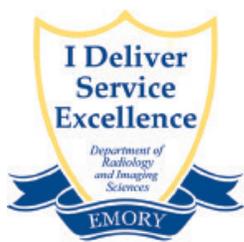
**Adam Pippin, PhD**  
Post- Doctoral Fellow- CSI  
Adam earned his PhD in Organic Chemistry at the University of Tennessee, where he worked as a Research Assistant and Teaching Assistant for Dr. George Kabalka. He co-authored several publications and helped develop novel organic chemistry reactions using boron trichloride. Adam's area of focus is in PET tracer development for imaging.



**Latina Vereen**  
Senior Insurance Specialist- Decatur Plaza  
Latina joins Emory with eight years of health care experience. Prior to Emory she worked as a Medical Billing Specialist and an Insurance Coordinator. Latina is focused on providing reimbursement services to the radiology department at Grady Memorial Hospital.

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

- • • • •
- **Service Excellence**
- **Town Hall Update**  
Town Halls have been changed to twice a year. The next Town Hall is:
- Thursday, April 4
- Thursday, November 7
- Please note that the **Thursday, July 18 Town Hall is cancelled**
- **Service Excellence Institute**  
SEI will be available for new employees and for faculty and staff who would like a refresher.
- **Save the Dates for SEI:**  
(7:30 am- 4:30 pm)
- Monday, April 29
- Wednesday, July 3 - Residents and Fellows
- Friday, August 16
- Friday, September 13
- Thursday, November 14
- **DiSC Workshops**  
Over 300 people in our department have already gone through the four hour DiSC workshop. This communication tool has been used as a basis for developing communication skills throughout the last four years of our Radiology Leadership Academy (RLA). DiSC is a behavioral model based to examine the behavior of individuals in their environment. DiSC is non-judgmental and helps people discuss their behavioral differences. You will learn how you identify with each of the DiSC styles
- **Save the Date for DiSC workshops:**  
Monday, June 10 – 8:00 am - Noon  
Tuesday, June 11 – 12:30- 4:30 pm



**HR Tip**

**2012 Benefit Statements**

Please be aware that 2012 Benefit Statements are being mailed to the home addresses of all non-physician faculty and staff. These statements reflect earnings and benefits as of 12/31/2012 and provide an overview of total compensation.

Questions should be referred to the benefits department at 404-727-7613.

- Pam Wimberly, HR Manager