Changing the World

The Better World Project (BWP) has identified Dr. Ernest Garcia for his leadership role in starting a successful company, spun off from academic research that has changed the world.

In the 2008 release of the publication The Better World Project: Part One, the work of Dr. Garcia and his colleagues is recognized in Chapter 16 for the company that evolved into Syntermed, Inc. and the advances he has influenced in Nuclear Medicine with the Emory Cardiac Toolbox™.

In 2005, the BWP was launched to create an understanding of how academic research and technology transfer has altered our way of life and made the world a better place. In 2008, the BWP focused on sharing the stories of 25 companies that work to bring “the results of research into use for the benefit of the general public, our institutions and the communities we serve.”

Far before the realization of Syntermed, Inc. and before being given the name of Emory Cardiac Toolbox™, the early versions of cardiac diagnosis software were distributed by Dr. Garcia for free. Though he started with dreams of becoming an astrophysicist for NASA, Dr. Garcia found that his career in medicine has “turned out to be more fulfilling work than predicting what galaxies would do.” He notes, “In medicine, you get to know your results a lot faster — and save lives.”

A degree in Physics with a focus on nuclear medicine from the University of Miami was enhanced by computer training he received at Florida Power & Light. Early in his career, Dr. Garcia began to network, collaborating with other scientists and doctors across the country. After giving away the software focused on measuring hypoperfusion in the 1970s, the 1980s proved to be time to require financial investments from the users in order to provide better service. Partnering with New England Nuclear, Dr. Garcia was able to create a user-friendly interface to help launch the first commercial software to quantify myocardial perfusion.

In 1985, Dr. Garcia relocated from Cedars-Sinai Medical Center in California, to Emory. The continued development of the software was licensed through Emory until 1990 when the company Syntermed, Inc. was formed and the Emory Cardiac Toolbox™ became a trademarked product. This step was necessary to continue the evolution of the software. Emory and Georgia Tech remain shareholders in the privately held firm, in which Dr. Garcia serves as the Chief Scientific Advisor.

Developments from Dr. Garcia’s lab at Emory continue to be commercialized through Syntermed, Inc. The toolbox continues to grow, with the most recent addition of the “SyncTool” implemented by Dr. Ji Chen. The SyncTool utilizes multiharmonic phase analysis (MHPA) to quickly and accurately determine which heart failure patients will benefit from cardiac resynchronization therapy (CRT). This addition will enhance the toolbox, which has now been available for more than 20 years and is used by more than 20,000 clinicians worldwide.

These details and more were chronicled in the article by the BWP to recognize the time and innovation that has been invested to make Syntermed, Inc. one of the top 25 companies spun off from academic research that have changed the world. The BWP is organized by the Association of University Technology Managers (AUTM) and is a well recognized organization and resource used as a reference throughout the global medical community. You can access the Better World Project online to use their searchable database to help you find stories of interest to you: http://www.betterworldproject.net/products/index.cfm

- Monica Salama
  Communications Manager

Perry Sprawls, PhD, FACR
Professor Emeritus
2009 Southeastern American Association of Physists in Medicine (SEAAPM) Best Paper Award

Dr. Sprawls was presented with the Best Paper Award for his article “Evolving Models for Medical Physics Education and Training: a Global Perspective” during the 2009 SEAAPM Annual Scientific Meeting in March. In honor of his award winning work, Dr. Sprawls was asked to give a presentation detailing his findings.
Dear Colleagues,

Together, we have indeed made great progress on our journey toward becoming a truly world-class, destination department. Our collective focus, through our strategic plan, on people, quality patient care, our research mission, and support for our teaching programs has provided the foundation for our forward momentum.

The month of January was one filled with change: A new administration in Washington. A new division director (Dr. Saltz, who joined us to lead Community Radiology). A new workflow in most of our clinical sites.

These are indeed interesting and challenging times. We face them with a sense of responsibility and the collaborative spirit that is the bedrock of our department.

Our EUH site continues to undergo additional changes, and new instruments and capabilities are filling in. The first of the new GE angio suites is operational and the 3T Siemens scanner has been installed.

Over at Wesley Woods, the Center for Systems Imaging is gearing up for human research studies. This center will allow us to further build on our growth in interdisciplinary imaging science that has fueled our climb in NIH ranking of Radiology Departments from #27 in 2007 to #22 in 2008.

Only two years into our 5-year strategic plan, we have leaped ahead toward our goal of reaching into the “top-20”.

Congratulations to our residents Drs. John Chenevey and Ali Tahvildari on being selected for support through our unique Adopt-A-Resident Program! This program is a terrific way for Radiology faculty, alumni and friends to simultaneously give back and invest in our field’s future.

As we move forward in this changing time, a focus on excellence and quality must continue to be our guide. We also must continue to celebrate the successes that have brought us this far. I am inspired by you -- the faculty, staff, and trainees of this department -- each day.

I anticipate that the current fiscal challenge will require us to simply stretch out the timeline for some - not all - of our remaining goals, yet clearly not to compromise on our vision.

Best to all,
Carolyn C. Meltzer, MD, FACR
Chair of Radiology

Department of Radiology

#22 National Institutes of Health (NIH) Funding

Two years ago, our Radiology Faculty Leadership began the process of developing a strategic plan to create a map for our department goals. While there are many initiatives of the radiology department, five key goals were selected and individually developed with an action plan. With the achievement of ranking 22 in NIH funding, we have made significant progress on our goal of achieving Top-20 NIH ranking.

When the goal was established, Emory Radiology was ranked 31, with the promotion to 27 in the fall of 2007. This move was a large achievement, for this took place during the time when NIH began to restrict its funding. The other factor to take into account is the sheer quantity of funding it takes to move up in the NIH Funding Ranking.

The latest achievement of moving five additional increments to the ranking of 22 is a credit to the department as a whole. The achievements of our department are interwoven by our strength as a triple-threat department. Our clinical excellence attracts patients, talented staff and physicians, which stimulate the highest level of education and both of these entities, foster the ambition of our researchers to stretch the limits with innovative research.

- Monica Salama, Communications Manager
Continuing a Celebrated Career

William Casarella, MD, former Chair of Radiology and current Executive Associate Dean for Clinical Affairs at Emory University School of Medicine, has been awarded the 2009 Gold Medal by the American College of Radiology (ACR). This is the highest recognition bestowed by the ACR and Dr. Casarella’s third Gold Medal, having received Gold Medals from the Society of Interventional Radiology (SIR) in 2003 and the American Roentgen Ray Society (ARRS) in 2005.

Dr. Casarella is one of three 2009 recipients chosen for this prestigious honor. Each year the ACR Board of Chancellors takes on the daunting task of reviewing outstanding contributors and base their selection on participation in the ACR and in the field of radiology. Evaluators take into account professional contributions to teaching, basic research, clinical investigation, radiologic statesmanship and achievements in service to various medical societies, government agencies and other related organizations.

The path to radiology began after Dr. Casarella received his Bachelors degree from Yale University and continued with his medical degree from Harvard Medical School. Upon finishing a rotating internship at the University of Pennsylvania, he became a flight surgeon in the US Army and a Unit Commander in Korea. When he returned to the US, Dr. Casarella searched for a way to take his medical experience to a new level in a direction that would provide mental stimulation for many years. With this goal in mind, he found the specialty of Radiology.

He completed a year of residency at Boston City Hospital in Internal Medicine and residency training in radiology at Columbia-Presbyterian Medical Center. Following his Radiology residency, he joined the faculty and took on the duties as chief of the cardiovascular section of radiology at Columbia-Presbyterian Medical Center for 11 years. During this time, Dr. Casarella participated in the early development of Interventional Radiology by contributing to the understanding of GI bleeding, hepatic tumors and angioplasty. The findings on GI bleeding were published in a 1972 issue of the New England Journal of Medicine, and is still frequently referenced today. In 1981, Dr. Casarella was recruited to Emory to serve as Professor and Chair of the Department of Radiology.

Dr. Casarella was the successor to Dr. Heinz Weens, the first Chair of Radiology. He held that position for 24 years. Throughout his career, Dr. Casarella was involved in many organizations, including serving as President of the American Board of Radiology. In this role, he was a driving force to achieve specialty certification for radiologists by the Accreditation Council for Graduate Medical Education (ACGME) and American Board of Medical Specialties (ABMS). Prior to this regulation, all radiologists were “general diagnostic radiologists”, regardless of their additional training. Other highlights of his tenure include recruiting outstanding scientists and clinicians who were leaders in the field of radiology; building one of the premier residency training programs in the country; creating a high-tech, advanced outpatient radiology clinic; and developing a filmless radiology system.

In addition to duties as the Executive Associate Dean for Clinical Affairs, Dr. Casarella has served Emory as Professor and Interim Chair of Rehabilitation Medicine, and is the Executive Director for Continuing Medical Education.

Dr. Casarella has been involved in numerous radiology societies throughout the years. In 2000, he served as President of the ARRS. He was also a founding member and President of the Society of Cardiovascular Radiology, which started with 12 members in the 1970s. Today, the organization is called the Society of Interventional Radiology (SIR) and is nearly 4,500 members strong.

When reflecting on his career in radiology, Dr. Casarella stresses, “I am very lucky. You have to be in the right place at the right time. I was able to get involved at a time of change and become a part of the wave at the core of the growth and innovation.”

The contributions and influences Dr. Casarella has had on the field of radiology are clearly worthy of the Gold Medal. Carolyn Cidis Meltzer, MD, FACR, current Chair of Emory Radiology, summarized Dr. Casarella’s career in her letter of nomination as follows:

“Dr. Casarella’s distinguished career is characterized by tireless service to advance undergraduate and postgraduate medical education, evaluate advanced imaging technologies, and support the career development of numerous radiologists and researchers.”

- Monica Salama, Communications Manager
Keep your Eye on the Prize

Here we are mid-point into our 2009 fiscal year and we are in the throes of very challenging times that will define the next decade for our university, our healthcare system and our department. Following are some accomplishments over the last six months and some of our thoughts and plans over the next six months to stay on our trajectory of success:

People and the workplace

Listening to our staff is one of the most important things we should do as leaders. In our last employee engagement survey, our staff told us that we are falling short on recognition of their contributions. We heard their calling and we are taking concrete steps to improve on that. We realize and appreciate that, on their arms and with their sweat, they carry the department to its successes. Now saying thank you or greeting another in the hallway is recognition.

Although those help, we must realize that recognition does not stop at mere gestures; recognition is, in fact, a complete culture. By definition, culture is a set of values and practices shared by a group of people. The Latin origin of the word actually means to cultivate. It brings to mind a picture of a labor of love, a relationship that demands a lot of caring and results in a continued cycle of sowing and reaping. We must therefore understand and appreciate what it takes to build a culture of recognition. I call on each of you, starting with myself, to foster and promote such values and practices.

When we think of the reason for which we come to work as healthcare professionals, we all agree that it is to care for our patients. Although we have done well over the years, and our patients have given us good ratings, we have not compared favorably with our peers across the country. Patients actually take for granted that they will receive world class medical care here at Emory. What they look for; however, is how we make them feel and what they experience while they are under our care. Caring for our patients is what we do but we must also care about them. Keeping our patients informed of our progress with their tests and treatments, responding to their concerns and resolving any complaints are things that we can easily do to keep their experience positive. We will be discussing our patients' feedback during our huddles and staff meetings to keep the stories of harm and the stories of charm real and vivid in our minds.

Our workplace is constantly evolving with remodeling and expanding our facilities. We finished moving the two MRI units at EUH from the ground floor to the first floor. This should help provide our patients with good care and easier wayfinding. We now have an operational 3T MRI at EUH alongside a 1.5T MRI for more routine work. We will be piloting the 32-channel capabilities as one of the few sites in the world to do so. We also replaced a SPECT/CT at EUH, finished the replacement of the first Interventional Radiology suite and completed the plans for replacing the 1.5T MRI at EUHM.

Quality

We were successful in recruiting a Chief Quality Officer for the department. This move emphasizes our renewed focus on quality and the serious investments that we plan to make to improve outcomes. Dr. Kimberly Applegate will start in May. With her arrival, we plan to improve our practice quality efforts and have some discipline in our performance improvement projects.

Knowledge and Information

In March, we embarked on the lengthy journey of modernizing and re-inventing our imaging informatics infrastructure. This is one of the boldest and most comprehensive endeavors that will undoubtedly carry its impact for years to come. Radnet Go-Live was initiated on January 30th. As we have stressed in our kick-off communiqué, this is a process not an event. As it continues to unfold, we are starting to see the merits of the new system, such as, an online worklist for real time access to completed studies, integration with the electronic medical record and interconnectivity with other relevant applications. Radiology Information Systems typically last 15 to 20 years. Our last one lasted 18 years. As with any new application, we anticipated running into challenges that would not manifest in a test environment. We continue to work through these with our partners in IS and the vendors of the related applications. Please stay tuned for specific communications related to this project.

I want to take a moment and recognize those who led this transition and made it go smoother than it would have without their contributions: Mo Salama, Jane Vitali, Chrystal Barnes, Willie Arnold, Pia Haynes, Trecia Wertz, Randy Bethea, Erick Peehler, Jeff Fullerson, Regina Dunkley, Cory Ivins, Linda Smith, Dr. Small, Dr. Mittal, Joe Medley, Tanya Cossett, Kesia McGlathery, Tim Mulvey, Daria Fluker, April Carter, Malcolm Barnes, Melanie Brun, Taylor Williams, Eric Dukes and the RAS team. We will recognize more people in a future communication with more detail around the immense contributions that they have made.

We should keep in mind that these transitions are arduous and time consuming so we must maintain our composure and fortitude in approaching the challenges. We must stay focused on bringing issues to resolution with a positive tone in our communications and interactions. Let's always remind ourselves of the ultimate goal to help us surmount the obstacles that inevitably present themselves during such complex and far reaching implementations.

Financial Strength

Emory University has seen the impact of the tough economic times on the value of its endowment which is reduced by 25% just in last few months. We have heard from the executive staff some of the cost-cutting measures they anticipate undertaking. The Healthcare industry has finally caught up with other industries in carrying the brunt of the continued decline in the state of our national economy. Emory Healthcare is in turn considering measure of its own to weather these difficult times. Worthy of note is the strategic approach that EHC is taking in that effort. Instead of broad brush strokes in job cuts, the executive team is considering surgical trimming of costs in benefits and operational costs that minimize impact on staff and maximizes improvement in bottom line. The approach is inclusive in nature and the team is seeking input from management and staff, and validating its assumption prior to executing them. This is a refreshing departure from the traditional corporate way of dealing with such change.

As a department, we must take an active role in delivering these cost savings by exercising fiscal discipline. A month ago, I asked the senior leadership in the department for some ideas that will improve efficiency, increase market share, or decrease operational costs. Today I ask

(continued on page 5)
AWARDS & RECOGNITION

Mark Goodman, PhD, FARC
Director of Radiopharmaceutical Discovery Research
Georgia Cancer Coalition 2009 Cancer Research Award
Dr. Goodman has received this award to fund his work to develop a more effective nuclear imaging procedure for diagnosing prostate cancer. An internationally recognized radiopharmaceutical scientist, Dr. Goodman is the Director of the Radiopharmaceutical Discovery Lab and a Program Director for the Emory Center for Systems Imaging (CSI). He is the Scientific Founder and Chief Scientific Officer of Royal Radiopharmaceuticals in Atlanta.

This award is made possible by Georgians who contribute to the Georgia Cancer Research Fund on their state income tax returns. Four of the eight recipients are from Emory University School of Medicine.

Patricia Hudgins, MD
Professor of Radiology
Director of Head and Neck Radiology
1st Place Poster
At the 42nd Meeting of the American Society of Head and Neck Radiology (ASHNR), Dr. Hudgins received first place award for her scientific poster Failed Endoscopic Sinus Surgery in the Frontal Recess Spectrum of CT Imaging Findings. Other contributors to the poster include Benjamin Huang (UNC), Kristen Lloyd (Emory), John DelGaudio (Emory Otolaryngology) and Eric Jablonowski (Emory).

Jack E. Peterson, PhD, Remembered
Professor Emeritus Jack E. Peterson, PhD, passed away on November 9, 2008. Dr. Peterson retired in 1997 after a twenty-five-year affiliation with Emory University. Before coming to Emory, Jack worked in technical publications in the aerospace industry. When such work declined in the early 1970s, he came to Emory as part of a special program designed to help former aerospace workers apply their talents in the medical sciences.

At Emory, he completed the Master of Medical Science degree with a specialization in Nuclear Medicine and then went to Memorial Hospital in Sarasota, Florida as the Director of the Nuclear Medicine Department and Instructor in Nuclear Medicine at nearby Hillsborough Community College. In 1975, he returned to Emory as the Coordinator of Continuing Medical Education in the Physician Associate Program. His PhD from Georgia State University in Educational Administration with specialization in higher education provided the opportunity for him to contribute to many educational programs, especially within the Department of Radiology. He served as Program Director for the Nuclear Medicine Technology Program, Coordinator of the Nuclear Medicine Learning Center, Operations Manager of the Magnetic Resonance Education Center, and most recently as the Coordinator of the Medical Student Education Program in Radiology and the Radiologic Technology Continuing Education Program.

In the classroom he was a talented teacher who combined knowledge, wit, and excellent presentations to help his students understand many of the complexities of the sciences associated with medical imaging.

Within the Department of Radiology, Jack was probably best recognized as a unique source of information on a variety of topics, given his broad knowledge of the sciences and his interest in modern technology. He helped many people understand computers and develop computer applications. He has used his knowledge of statistics to be a valuable collaborator with other investigators.

Jack lived with his wife Mary in Decatur, Ga.
— Perry Sprawls, PhD, Professor Emeritus
RISING RESIDENTS

Newly Appointed Chief Residents

Over the last year, Chief Residents Sarah Erickson, MD, Dan Karolyi, MD, PhD and Milan Mehta, MD have contributed a great deal to the success of our program. They have helped innumerable residents and faculty, including myself, in countless ways. As they move toward the end of their residency here at Emory, three new chief residents have been selected to lead our program: Michael Naumann MD, William Slater, MD and David Wicker, MD. On behalf of Deborah Baumgarten, MD, MPH, and Bruce Baumgartner, MD, I want to say thank you and congratulations to all of them.

- Mark Mullins, MD, PhD
  Vice Chair of Education
  Director of Radiology Residency Program

Dr. Mike Naumann, MD
Chief Resident

After receiving a BS from Notre Dame and his MD from Baylor College of Medicine, Dr. Naumann came to Emory for his transitional year internship. Continuing his career at Emory in the Radiology Residency Program, he helped design the pre-call exam for 1st-year residents. He also participates in the education of others through Medical Student lectures. Dr. Naumann is on the Resident and Fellow Section (RFS) membership committee for ACR and a member of the Atlanta Angio Club.

Dr. William Slater, MD
Chief Resident

As a Graduate Medical Education Committee (GMEC) representative for radiology over the past year, Dr. Slater is staying active with the department. Outside of Emory, he is a member of ACR and RSNA. He is an advocate of education and currently teaches some of the medical students through the lecture series. Ideally, he would love to continue his education at Emory with a Fellowship in either IR or Neuroradiology.

Dr. David Wicker, MD
Chief Resident

Dr. Wicker received his undergraduate degree from Cornell University and then continued his education at Medical College of Georgia where he received his MD. In the future, he is planning to do an MSK fellowship. Dr. Wicker is interested in technology that helps to streamline workflow and increase efficiency. He is involved in the Radiology community as an active member of RSNA, ARRS and ACR.
Two New Residents Adopted

This year’s “Adopted” Residents have set their sights on changing the world. Drs. John Chenevey and Ali Tahvildari have been selected as the next two “adopted” residents based on their proposals. As part of the Radiology Development Program, a giving opportunity was created for donors called “Adopt-A-Resident.” This program is designed to advance the educational opportunities of one or more residents. The generosity of the two additional donors has ensured the continuation of this program.

During their first year of residency, residents are given the opportunity (provided funds are available) to submit proposals outlining how they would invest $10,000 to enrich their residency experience, as well as contribute to the growth of the residency program. You may recall our first adopted resident, Dr. Jay Patel, who is developing a virtual library of radiology conferences, lectures and case studies in a portable, podcast format. Our recent recipients of the Adopt-A-Resident Program are planning to affect the radiology community on a national and international level.

Dr. Chenevey’s proposal expresses the importance of awareness to the political and business influences that shape the way radiology is practiced in the United States. He has outlined how he will become involved in various radiology organizations and then share that knowledge with the greater radiology community through lectures and articles in publications. Ultimately, he is laying the foundation to grow into a radiology leadership role that will help shape the parameters of how we function in the national healthcare system.

Through personal experience of assisting those in need following Hurricane Katrina during his third year of medical school, Dr. Tahvildari’s passion for humanitarian medicine was sparked. Having chosen a career in Radiology, he quickly noticed the lack of opportunities available for radiologists to become involved in global health work. In fact, he discovered that organizations are requesting monetary involvement, but not personal involvement from the radiology community. Dr. Tahvildari pointed out in his proposal that “As the gap between technology and production costs closes, the major resource left to provide is human expertise”. For these reasons, among many others, Dr. Tahvildari has proposed to lead the development of the first radiology residency elective focused on international humanitarianism.

Donors that would like to support this program may make their commitment at any point of the year and have the option to mentor the “adopted” resident. Dr. Bruce Baumgartner, Emeritus Program Director, has played a vital role in the development of this program. He emphasizes the originality of this program through its added value to the residents, the promise it creates for continual educational advancements, and the allure it provides for future recruits.

In the future, Dr. Chenevey will be contributing articles to this newsletter and giving presentations to create awareness of changes in healthcare and how they affect radiology. If enough interest exists, he would also like to found a group within our department to meet and discuss current issues as they arise in the political and business aspects of radiology. If you are interested in working with Dr. Chenevey, please contact him at jchenev@emory.edu.

Dr. Tahvildari will begin his elective endeavor by working with the Emory University Departments of Emergency Medicine and Internal Medicine, that have already developed resident electives that participate in an exchange in Ethiopia and Zimbabwe. He will invest a portion of his time to apply for grants from other organizations to supplement the funding to take on an initiative of this size. During his planning phase, he will also be searching for one or more faculty advisors. Dr. Tahvildari plans to make this elective available to third and fourth year residents and hopes to have this option available by 2011. If Dr. Tahvildari’s cause has inspired you, please contact him at atahvil@emory.edu to become involved.

Though these adopted residents do not know their beneficiaries, they would like to express their gratitude. Dr. Tahvildari would like to send this special message, “Thank you for supporting this novel, essential experience to the residency program. Your donation will be used to broaden residents’ horizons and promote volunteerism in our field, affirming radiology’s place in global health.”

While this program is awarded to first-year residents, the residual effects will be felt throughout the Emory Radiology Department and the greater radiology community. As the years progress, this program will cultivate motivated residents with new ideas and ways of learning. In turn, motivated residents will inspire the attendings, and through this collaboration of teaching and learning, innovation will radiate from the Emory campus to enhance the greater radiology community.

- Monica Salama
Communications Manager

Adopt-A-Resident

Personalize the giving experience when you fund a resident’s scholarship. Your generosity will enable a resident to attend a national radiology conference and ultimately will shape the next generation of radiologists.

You can participate in the Adopt-A-Resident Program through a $2,500 annual commitment over the span of four years. If you would like to explore this, or other giving opportunities that will benefit Emory Imaging, please contact:

Brook Brown
404.727.3989
brook.brown@emory.edu

Visit www.radiology.emory.edu/events-and-lectures for up-to-date event information.
American College of Radiology: Working for Us

The ACR celebrated its 85th anniversary this year, yet many of us don’t quite understand what it is or does for us. I recently checked with several senior leaders in the department and was surprised to find that they were not ACR members. I believe this stems from a lack of awareness of the broad mission of the ACR and its effectiveness, particularly in recent years.

One aspect of the ACR’s goal toward enhancing the value of radiology in patient care is advocacy through governmental relations. ACR staff, councilors, and members work on legislative agendas important to healthcare economics, quality and safety, and education both at the state level (e.g., through our own active Georgia Radiological Society) and the national level. Some of the relevant current issues include legislation to curb self-referral and overutilization, define the role of the Radiologist Assistant (RA), and provide a moratorium on further reimbursement cuts for imaging studies due to the Deficit Reduction Act (DRA). I have very much enjoyed visits to Capital Hill with the ACR and would encourage others to join me.

Another important initiative the ACR has taken on is that of bringing radiologists out from the shadows. The ACR branding campaign “Face of Radiology” educates the public, payers, and policy-makers about who radiologists are, how they are trained, what they do, and why they are critical to the quality of patient care. A website MyPatientConnection.com aids radiologists in interacting with patients (asking us to interact directly with 5 patients per day) and MyRadiologist.com informs the public about our field.

In June 2008, the ACR Education Center opened its doors in Virginia to offer hands-on learning in an interactive, innovative state-of-the-art facility. The ACR is also committed to the continued education of radiologists through its online resources and sponsorship of courses such as Dr. Diego Martin’s Annual Body MRI Update.

Quality and safety are core elements of the ACR mission. Our clinical practice relies on the ACR RADPEER system for peer review of imaging studies. The ACR Appropriateness Criteria are evidence-based guidelines that help to guide referring clinicians on which imaging studies to optimally order in which clinical settings. The ACR Commission on Breast Imaging provides accreditation in mammography, stereotactic breast biopsy, and breast ultrasound and biopsy, a prestigious designation held by our own Emory Breast Imaging Center.

This Spring’s Annual Meeting and Chapter Leadership affords us another opportun-ity to support the ACR and recognize its role in our field’s success. At this meeting, Dr. William Casarella will be honored with the distinguished ACR Gold Medal.

- Carolyn C. Meltzer, MD, FACR
Chair of Radiology

EMORY IMPACT

Predictive Medicine Saves Lives

Richard L. Verch, 68, of Alpharetta, underwent a coronary screening CT exam at The Emory Clinic on April 30. The report wasn’t due to be sent to Verch for two weeks. The next morning, Arthur E. Stillman, MD, PhD, Director of Cardiothoracic Imaging, recommended immediate surgery.

“The images demonstrated a 5.6cm ascending aortic aneurysm,” says Dr. Stillman. “Rupture of an ascending aortic aneurysm could be catastrophic. In his case, the coronary arteries had mild calcification and so his risk was from aortic rupture, not a near-term heart attack. It certainly is possible that this test led to life-saving surgical correction of the problem.” Verch left his office, at Strong Environmental, Inc. in Norcross, Georgia where he serves as CEO. His doctor, Emory physician Andrew Huber, was able to set up an appointment for surgery with Robert A. Guyton, MD, Chief of Cardiothoracic Surgery at Emory. Guyton performed a valve-sparing ascending aorta and hemiarch replacement at Emory University Hospital on May 16. Verch was in surgery for more than five hours.

To read Mr. Verch’s complete story of how predictive medicine saved his life, visit www.emoryheartscan.com
**NEW GRANTS**

**MR Imaging of Ventricular Dyssynchrony**

**Principal Investigator:** John Oshinski, PhD

**Co-Investigators:**
- Jana Delfino, PhD
- Brandon Fornwalt, PhD
- Angel Leon, MD
- David Delurgio, MD

**Funding Organization:** Phillips Medical Systems, INC

**Significance:** Develop MRI as a complete tool for evaluation of patients before Cardiac Resynchronization Therapy (CRT) with biventricular pacemakers.

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**Functional and Molecular Magnetic Resonance Imaging**

**Principal Investigator:** Diego Martin, MD, PhD

**Funding Organization:** Siemens

**Significance:** Whole-body-MRI can be considered as a new promising application of MRI to assess tumor and vascular diseases. Early detection of tumor disease or arteriosclerosis plays a key role for further treatment of disease.

- Optimization of sequence protocols for MR Imaging
- Acquisition of clinical data in cancer and vascular patients determining the accuracy of the Whole-body-MRI
- Improving Image post processing
- Evaluating image fusion of whole-body-MRI and whole-body-PET data optimization of image evaluation methods

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**Pretreatment staging of oral cavity SCC: Role of dual phase contrast-enhanced computed tomography vs MRI**

**Principal Investigator:** Patricia Hudgins, MD

**Co-Investigators:**
- William Grist, MD
- Amy Chen, MD
- Susan Muller, DMD
- Jonathan Beitler, MD
- Amanda Corey, MD
- Diego Martin, MD

**Funding Organization:** WCI, SPORE in Head and Neck Center

**Significance:** Imaging plays a critical role in staging oral cavity (OC) squamous cell carcinoma (SCCa), but the choice of contrast-enhanced computed tomography (CECT) or magnetic resonance imaging (MRI) is clinician dependent. To date, no clear advantage of one modality over the other has been proven. Imaging is primarily an anatomic study, but faster CT and MR scanners, and positron emission tomography (PET) offer physiologic capability, and the fusion of anatomic and physiologic information will be necessary and desirable as treatment options change and become individualized. CECT and dynamic perfusion CECT, MRI intraoperative and pathologic staging will be prospectively compared to determine the most accurate method.

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**CHECK IT OUT**

Dr. De Leon, a Nuclear Medicine Fellow, presented an article titled “F-18 FDG PET Evaluation of Opportunistic Infections in Renal Transplant Recipients” at the meeting of the Association of Latin Americana de Sociedades de Biologia y Medicina Nuclear, which is now published.


**Manvar AM, Kamireddi A, Bhalani SM, Major NM. Clinical Significance of Intramuscular Cysts in the Rotator Cuff and Their Relationship to Full- and Partial-Thickness Rotator Cuff Tears. Am. J. Roentgenol., Mar 2009; 192: 719 - 724.**


GETTING TO KNOW YOU

FOR A Cause

The Flight of Angels

The sky is filled with airplanes transporting cargo, animals and people. Some of these planes are earning their halos as volunteers for the organization Angel Flight. Dr. Scott Bartley, Assistant Professor of Radiology in the division of Nuclear Medicine and Molecular Imaging, is the pilot of one of these planes.

Angel Flight is a non-profit organization that provides free air transportation for people with a medical need that can't be filled in their local area. Angel Flight primarily serves patients who are traveling from, to or through the states of Georgia, Alabama, Mississippi, Tennessee, and the Carolinas. This organization is devoted to ensuring that the cost of transportation does not prevent someone from receiving medical care.

As a member of this organization, Dr. Bartley uses his plane (and fuel) to transport medically stable patients to a facility that best meets their needs. Having gained his pilot's license in 2005 and his instrumentation certification in 2006, Dr. Bartley became interested in the group after they presented at one of his aviation meetings. Shortly after this meeting, he ran his first Angel Flight in the spring of 2007. While flying to Cincinnati, Ohio, he learned his first lesson of taking on passengers - always carry air sick bags in your plane.

Being a member of Angel Flight does not require that the pilot be a doctor. Yet Dr. Bartley has found that his medical knowledge has helped to soothe the minds of his passengers. In one case, the father of the patient was more at ease after discussing his child's condition with Dr. Bartley during the flight.

In addition to his work with Angel Flight, Dr. Bartley is very involved with the Radiology Department. During a stay in Chicago, he participated in a Residency Review Committee (RRC), that worked with the ACGME to establish the new residency regulations in 1999. When he arrived at Emory, Dr. Bartley was armed with the tools to transform the existing Nuclear Medicine residency program into a clinical competency base, updated program to follow changing ACGME regulations. His dedication to education has been rewarded with the achievement of Teacher of the Year, awarded by the Nuclear Medicine Residents in June of 2007. Dr. Bartley considers this the highlight of his Emory career stating, "I always wanted people to feel like I was providing them with something useful."

Based out of DeKalb Peachtree (PDK) Airport, Angel Flight is open to any pilot who is willing to volunteer the time, plane and fuel. Some corporate jets also participate in this program. The organization is open to anyone who would like to volunteer to fulfill such duties as fundraising, loading freight (as they did for hurricane Katrina relief) and also make flight plans. You can sign up on-line, by e-mail - earthangel@angelflightsoars.org - or call 770-452-7958.

- Monica Salama
Communications Manager

Physician Liaison

As an advocate for referring physicians and an avid supporter of patient care and quality, Greg Pennington represents Emory Radiology as he promotes our advanced technology and skilled Radiologists. Greg's role as our Physician Liaison requires that he maintains and builds a rapport with our referring physicians. He manages relationships with over 200 referring physicians in the Atlanta area and conducts at least 20 meetings per week to promote Emory Radiology and Emory Healthcare.

An element of Greg's work is to handle any challenges that may arise for our referral sources, and advises the Radiology Department so we can work to promptly resolve issues and assure patient and physician satisfaction. Greg cannot do this job alone. He works closely with our department administrators and managers to resolve issues as they arise. By functioning as a productive team, Emory Radiology is focused on obtaining the highest quality of care for our patients.

A large portion of Greg's time is dedicated to staying current with advancements in medicine that Emory Healthcare and Emory Radiology provide to the community. For a physician liaison to be effective, he or she must be able to provide timely and accurate information to the physicians they support. In addition to being knowledgeable about Emory Healthcare, Greg goes through annual compliance training focused on maintaining professional and ethical relationships with the medical community.

Greg is passionate about his position and what our Radiology Department has to offer our community. Greg mentioned that he "believes in the mission and vision of Emory Healthcare and Emory Radiology. I cannot go out and sell something I do not believe in."

I enjoy what I do because I believe in the organization and its purpose. I like helping patients find their way to Emory."

With eight years of health care knowledge and five years of health care sales and business development experience, Greg is well qualified for his position that he has held with us for almost two years. He received his MBA and Bachelors of Business Administration (BBA) in Management from Georgia Southern University.

For additional information regarding Emory Healthcare’s Physician Liaisons program, please feel free to contact Greg Pennington at 404-778-7735 or by e-mail at greg.pennington@emoryhealthcare.org.

- Alaina Shapiro
Communications Coordinator
New INNOVATIONS

Innovation of the Year

Mark Goodman, PhD, has been awarded “Innovation of the Year” by the Emory Office of Technology Transfer (OTT) for the development of the PET tumor imaging agent 2-FACBC/2-FACPC.

When informing Dr. Goodman’s affiliated laboratories, including the Center for Systems Imaging (CSI), of the award, Dr. Cale Lennon, OTT’s manager of Dr. Goodman’s technologies, stated “I am very excited and feel that the selection of his PET imaging agents as the winner is well deserved. We have received a considerable amount of positive feedback and commercial interest around Mark’s research and development program to create and also validate novel PET imaging agents.”

The key element of this award-winning research is the development of the non-natural amino acids 2-FACBC/2-FACPC that avidly accumulate in different types of human cancer cells such as brain, prostate, pancreas, ovarian, breast, and lung. The 2-FACBC/2-FACPC enter cancer cells via transport across cell membranes assisted by amino acid transporters that are more highly expressed on tumor cells relative to most normal tissues. Through the use of PET/CT imaging, the positron-emitting radionuclide fluorine-18 labeled 2-FACBC/2-FACPC is visible, having exchanged places with natural amino acids within the tumor cells. Concentrated areas of fluorine-18 distinguish the tumor from the healthy tissue. When factoring this development into his other successes, Dr. Goodman states “A principle mission of my laboratory is the translation of PET and SPECT imaging agents from bench to bedside. My lab has translated six radiopharmaceuticals to human use. We anticipate that 2-FACBC/2-FACPC will be the seventh.”

Having always had an interest in medicinal chemistry, Dr. Goodman found a passion for the application of synthetic organic chemistry for drug discovery. During a fellowship at Harvard University School of Medicine, Massachusetts General Hospital (MGH) in the Division of Physics Research of the Department of Radiology, he was introduced to radiology research. At that time there were relatively few research programs devoted to the discovery of PET radiopharmaceuticals. While at MGH, Dr. Goodman had the privilege of participating in the preparation of new radiopharmaceuticals labeled with carbon-11 and fluorine-18. He quickly appreciated the power of the synergism of radiopharmaceuticals and PET for delineating the pathogenesis of disease.

Throughout his career Dr. Goodman has had strong influence in all areas of academic medicine. He has contributed to the invention and proof-of-principle of fluorine-18 labeled 1-amino-3-fluorocyclobutyl-1-carboxylic acid (3-FACBC) for imaging brain and prostate cancer in humans. On the educational front, he takes great pride in the mentoring of 17 graduate students and postdoctoral fellows at Emory, as well as, radiopharmaceutical scientists. Clinically, he is responsible for the invention of I-123 BMIPP for nuclear cardiology applications and F-18 3-FACBC for the diagnosis, and management, of brain and prostate cancer.

Dr. Goodman joined Emory University in 1993 from the Department of Radiology, University of Tennessee Medical Center. Dr. Goodman is the Director of the Radiopharmaceutical Drug Discovery lab, CSI Program Director for Tracer Development, and he serves on the following Committees at Emory: Radiology Research leadership Council, PET Research, the Brain Tumor Executive Committee, Resource Advisory Committee and Radiation Safety Committee. His bibliography includes 144 articles, 25 book chapters, 21 patents and 165 abstracts. Dr. Goodman’s research interests encompass PET and SPECT radiotracer development of oncology, brain and heart agents. His explorations in these areas have resulted in the translation of the first reported synthetic amino alicyclic acid radiolabeled with the PET radionuclide fluorine-18 for imaging both intracranial tumors and prostate cancer in patients. In the neuroscience arena, he has translated fluorine-18, carbon-11 and iodine-123 cocaine analogs for in vivo study of the dopamine and serotonin reuptake sites in neurodegenerative disease, psychiatric and addictive disorders. In applied research, Dr. Goodman’s interests include the development of automated devices to facilitate the use of new radiotracers in clinical medicine. He has been an invited speaker at several national and international symposiums including Vanderbilt University, the International Isotope Society, the International Radiohalogen Conference and MD Anderson Cancer Center.

Clearly, the possibilities that this tumor tracking amino acid offers is worthy of the “Innovation of the Year” award. With Dr. Goodman’s leadership and ambition to advance medicine, his research continues to strive to meet the expectations of hope.

- Monica Salama, Communications Manager

Advancing Brain Tumor Evaluation

A new workstation has been added to the radiology reading room in the Winship Cancer Institute (WCI). This new station is equipped with software called Dynacad, which allows advanced evaluation of brain tumors. This program utilizes advanced processing of MR perfusion, diffusion tensor imaging (DTI) and fMRI/MR spectroscopy data. This application will also be used to enhance the performance of the 3T and 1.5T MR units in EUH.
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The Rad Report is the perfect opportunity to involve Emory Radiology Alumni in our current radiology happenings. Within the department there is a new issue of the Rad Report available each month. This has proven to be a great vehicle to communicate across our divisions and help everyone to have a better understanding of how each of us contributes to the department as a whole.

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