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UNC RADIOLOGY AT FORE OF UNC HCS ENTERPRISE IMAGING

In April 2014, UNC Hospitals (UNCH)’s successful Epic@UNC “Go Live” brought to eight-affiliate UNC Health Care System (UNC HCS)’s flagship a long-anticipated, electronic medical record (EMR)-driven patient information system. Eighteen+ months later, Epic@UNC has launched at UNC HCS affiliates Chatham Hospital, Rex Healthcare, and UNCH’s Hillsborough campus, as well as 300+ statewide clinics. By the time four more affiliates (Caldwell Memorial Hospital, High Point Regional Health, Johnston Health, and Pardee Hospital) “Go Live” in mid-2016, UNC HCS’ vision of an integrated patient/medical chart/billing system will be almost 100% realized across its entire North Carolina network of hospitals and clinics.

In early-stage preparation for Epic@UNC, UNC HCS focused on simplifying its systems application portfolio to minimize impact on a facility’s workflow and business continuity at “Go Live.” Systems consolidation quickly established that developing a network-wide enterprise imaging solution was crucial, given how integral image archiving and retrieval were across UNC HCS’ clinical service lines. Prior to Epic@UNC, affiliates had maintained autonomy in image storage through using a Picture Archiving and Communication System (PACS) or other platform to synchronize imaging data with the radiology information system (RIS) built into their respective operations. To integrate with Epic@UNC and use its RIS/EMR platform, however, these entities now faced shifting to one of two PACS compatible with Epic’s RIS component (RadiAnt™), or altogether investing in one of two other Epic@UNC-compatible RIS. PACS vendors AGFA Healthcare and Fujifilm currently offer Impax and Synapse, respectively, as the only two PACS integrated with Epic@UNC.

As the first affiliate to migrate to Epic@UNC, UNCH had an extensive pre-“Go Live” timeline to prepare for the conversion in medical records systems at its five-hospital campus. UNC HCS’ Radiology IT/PACS team had used Impax for many years, but with Epic@UNC’s long-planned “Go Live” for April 2014, it had to migrate to RadiAnt™ by early last year. With onsite IT/PACS support at UNCH, the RadiAnt™ migration was relatively smooth. Other affiliates, however, faced multiple conversion challenges without any EPIC@UNC intra-facility support at “Go Live.” Over the past 18+ months, UNCH’s Information Services Division (ISD) has provided remote Radiology IT/PACS support for affiliate systems migrations at “Go Live.” Such support has helped new Epic@UNC users adjust to a RIS/EMR platform, some while using a new PACS, as they try to minimize workflow interruptions and duplicating radiological studies within the network.

Dave Tourville, UNCH’s Radiology IT/PACS Manager, has led an ISD team over this period that provides application and user support to affiliates challenged by interfacing with Epic@UNC’s RIS/EMR platform. As Tourville notes, “UNC Medical Center’s Radiology PACS team has successfully supported two RIS migrations in four years. We stand at the ready to offer ongoing assistance to our imaging co-workers across affiliate sites.”

“As more affiliates integrate their PACS with Epic@UNC, UNC Hospitals can be a resource to them based on our 2014 experience,” adds UNC HCS Associate Vice President of Radiology Administration Mike DeGennaro.

To address Epic@UNC’s evolving, EMR-driven hurdles, UNC HCS tasked imaging services leadership at all affiliates with coming together to devise and carry out a strategy for developing an Epic@UNC-integrated historical image storage system for the network by early 2016. Just months after Epic@UNC’s first “Go Live,” the collaborative UNC Health Care System Imaging Consortium (UNC HCS IC) had formed, holding its first meeting in October 2014.
At the outset, three factors – quality, safety and coordinating capital – were established as critical to the success of the UNC HCS IC. At its inaugural October 2014 meeting, work groups respective to quality and safety were formed, each charged with reporting back on their determinations at the May 2015 meeting. Over this period, the work group addressing quality identified case reporting, sharing critical results, peer review, structured reporting and turnaround time as significant metrics for an eight-facility network allowing universal access to patient imaging data. Led by Department of Radiology Director of Quality and Safety Dr. Richard Semelka, the work group addressing safety identified patient dosage monitoring and contrast media cost-benefit analysis as primary areas for further discussion. As key to unified decision-making, the UNC HCS IC lastly identified coordinating capital on operational/equipment investment, needs-matched technology acquisition and leveraging maintenance, renewal and termination terms in vendor contracts as critical for ensuring an all-affiliate voice advanced the narrative.

Facilitated by Department of Radiology Chairman Dr. Matt Mauro, the UNC HCS IC’s three meetings to date (including May and November 2015) have been driven by the end goal of enabling Epic@UNC-integrated UNC HCS affiliates and clinics to exchange and access imaging data via “one medical imaging repository/one web viewer.” At each meeting, the UNC HCS IC advances an enterprise imaging strategy aimed at preserving operational efficiencies and workflow at “Go Live” through streamlining the multiple PACS, information systems and devices used for imaging data-sharing across the affiliates.

Acquiring a Vendor Neutral Archive (VNA) became UNC HCS’ enterprise imaging solution for establishing a universal image archiving and retrieval repository accessible across all service lines where inability to exchange and access clinically relevant historical images beyond their own systems challenged most service lines, a VNA-driven universal viewer integrated with Epic@UNC’s EMR system would enable sharing of patient data network-wide. Enterprise imaging resolved the issue of disparity amongst multiple PACS imaging systems and devices used for years by the eight affiliates and even UNC HCS-linked community providers would be laterally positioned and able to integrate with Epic@UNC’s “one patient/one chart” via the VNA viewer. In mid-October 2015, UNC HCS announced it had selected VNA vendor Lexmark, citing execution and clinical functionality as the decision driver behind choosing NilRead™ Enterprise Viewer and PACS Scan™ Mobile solutions as its forthcoming VNA.

“Consolidating shared patient imaging data within one repository, instead of separate PACS data silos, is a huge benefit of VNA technology. When a universal viewer facilitates vertical workflow, conferring physicians can pull network-wide, shared images directly to their workstations. Such a process permits more effective dialogue and avoids repeat studies for cross-facility patients,” stated DeGennaro.

At UNC HCS, Radiology and Cardiology are the only two Epic@UNC-compatible service lines able to exchange and access patient imaging data beyond their patient care areas. Just as UNC HCS conducted Radiology systems simplification in early 2014 by integrating with Epic’s RadiAnt™ RIS, two years later, the network is rolling out Epic’s cardiovascular information system (CVIS) CUPID for its Cardiology service line. Given UNC HCS enterprise imaging solution is driven by consolidating multiple PACS, Cardiology will join Radiology in early-2016 as the first two UNC HCS Epic@UNC-integrated service lines using Lexmark’s universal viewer for network-wide image archiving and retrieval.

DeGennaro notes: “When applied to continuity within a healthcare system comprised of multiple entities, imaging is much broader than just ensuring Radiology workflow goes unaffected when a new medical records system is launched. In helping the network establish a universal image repository, the [UNC HCS IC] can lead the way in advising other service lines as they streamline their imaging technology toward the goal of standardized patient data-sharing across the network.”

UNC HCS ISD Manager Jeff Agricola has played a key role in preparing for the network’s CUPID rollout by late fall 2016. As Agricola notes: “CUPID will further our goals of one patient, one chart, and one medical record number. Patient information currently documented and stored in different cardiology systems across [UNC HCS] will be available within Epic@UNC. I feel fortunate to be part of the team that is helping improve the patient care we deliver to the people of North Carolina and want to thank all of our co-workers who are working to make this vision a reality.”

As Mauro concludes: “Our work group’s desired enterprise imaging model instituting a centralized medical image repository is both in the spirit of Epic@UNC’s ‘one patient/one chart’ model and also supports a broader informatics goal at [UNC HCS] of applications portfolio simplification.

Simplifying our imaging systems is separate from [UNC HCS]’s Epic@UNC roadmap, but it is nonetheless invaluable for reducing the number of platforms and vendor relationships that currently challenge the entire network. Portfolio simplification contributes to [UNC HCS]’s efforts to better position itself in terms of disaster recovery planning, business continuity, and cross-facility continuity of care. If we can minimize the disparity in applications used for patient data-sharing network-wide, we help keep systems decision-making totally [UNC HCS]-focused.”
Burke Appointed 2015-2016 NC American College of Radiology President

The Department would like to recognize Associate Professor of Radiology Dr. Charles Burke for his appointment as 2015-2016 President of the NC Radiological Society (NC ACR), effective June 2015. Burke was named NC ACR 2014-2015 President-Elect in February 2014, preceded by serving as NC ACR Vice President (2013-2014). Since 2011, he has also served on NC ACR’s Executive Council.

At the national level, Burke has served in multiple leadership roles within the American College of Radiology (ACR), including: 1) Panelist - ACR's Appropriateness Criteria in Interventional Radiology (2009-2013); 2) Alternate Councilor (2011-2012); 3) Councilor (2012-present); Interventional Radiology Panelist (2011-present); 5) Interventional Radiology Education Committee (2012-present); and 6) Reference Committee member (2013) - ACR’s Annual Meeting & Chapter Leadership Conference (AMCLC).

Regarding his one-year appointment, Burke noted: "I am so grateful to have the opportunity to serve in this role. North Carolina is exceptionally fortunate to have an extremely strong chapter with many of the national leaders in Radiology active in our state chapter. It is such a privilege to work with and learn from these remarkable individuals as I work to ensure the future of our specialty in our state."

Immediate Past President Dr. Catherine J. Everett noted of the transition: "The president of the North Carolina Radiological Society is the spokesperson for all issues which affect radiologists. Important current challenges include the state budget decisions on Medicaid reform and CON laws; breast cancer screening recommendations of the [US Preventive Services Task Force] and [Multiple Procedure Payment Reduction] on the national level; and quality and safety issues which surface frequently from the media. Charles will be an intelligent, thoughtful, and articulate advocate for the radiology consensus."

Li Awarded NIH K01 for Investigator Training in Early Brain Neuroimaging Analysis

The Department would like to congratulate Assistant Research Professor Dr. Gang Li for his August 2015 receipt of National Institutes of Health (NIH) K01 funding ($558,574) for his project entitled, “4D Cortical Surface Analysis Tools for Study of Early Brain Development in Typical and High-Risk Infants.”

Li’s four-year study will develop independent investigator research skills in pediatric neuroimaging through using funding for investigator training in developmental neurobiology and neurodevelopmental disorders, advanced biostatistics, and infant MR imaging techniques. The trained investigator will be able to create a unique suite of infant-specific, 4D cortical surface-based neuroimaging analysis tools that enable accurate characterization of early brain development in both typically developing infants and those at high-risk for schizophrenia. Long-term study aims are to establish a solid foundation for leading research in studying early brain development via advanced infant neuroimaging mapping techniques. Li’s study results will help to identify early life biomarkers of schizophrenia risk in order to design targeted, preemptive intervention strategies. Tools and atlases developed via Li’s investigator training will be released publicly through such online outlets as the Neuroimaging Informatics Tools and Resources Clearinghouse (NITRC).

Previously a five-year post-doctoral fellow, Li has worked with Department of Radiology Professor and UNC IDEA Group Director Dr. Ding-gang Shen since 2010, contributing to the group’s collection of longitudinal MRI data for both typically-developing infants and those at high-risk for schizophrenia in their first two years of life. As a part of Shen’s research team, Li participates in research activities aimed at developing cortical surface-based analysis tools for studying infant brain development. Tools that have been developed for cortical surface-based neuroimaging analysis of adult brains are ill-suited to study those of infants. Li’s infant-dedicated computational tools and important discoveries on early brain development have been highlighted in the National Institute of Mental Health (NIMH)’s 2015-2020 Strategic Plan (http://www.nimh.nih.gov/about/strategic-planning-reports/highlights/highlight-beautiful-convolutions.shtml).

Regarding this new funding’s significance to his area of research, Li noted: “Using this career award, I will significantly extend my research on early brain development. The proposed 4D computational platform will integrate a set of tools for 4D infant cortical surfaces reconstruction, parcellation, measurement, analysis, modeling, and atlas building, which will enable for the first time the efficient and accurate processing and statistical analysis of dynamic brain development in both typical and high-risk infants in large-scale longitudinal studies.”
Jordan Named New Diagnostic Radiology Residency Program Director

The Department is pleased to announce the appointment of Associate Professor Dr. Sheryl (“Sheri”) Jordan as Graduate Medical Education (GME) Program Director, effective July 27, 2015. Dr. Jordan assumes oversight of the Diagnostic Radiology program as Dr. Robert (“Bob”) C. Dixon transitions to Associate Program Director from four years of overseeing it. Dr. Jordan’s long-standing training ties to UNC include medical school, Internal Medicine internship and Breast Imaging fellowship. Beyond UNC, she completed her Diagnostic Radiology residency at Duke University Medical Center, where she served as chief resident, and visiting fellowships at Cleveland Clinics (PET) and University of Pittsburgh (Breast MRI).

Dr. Jordan returned to UNC as faculty in October 2012, immersing herself in medical and graduate medical education roles including: UNC School of Medicine (SOM) Admissions Committee faculty interviewer; UNC SOM Student Promotions Committee and UNC SOM Teaching Scholars program member; UNC SOM faculty mentor for medical and undergraduate students; and NC American College of Radiology (ACR)’s Annual Breast Imaging Course Director. As a member of NC ACR’s Executive Committee, Jordan is also its 2015-2016 Vice President. Beyond institutional- and state-level physician leadership roles, Jordan sustains ongoing certification as a Radiology Coding Certification Board (RCCB) radiology certified coder.

Of her work with our residents, Jordan writes: "Famed radiology educator Benjamin Felson penned, ‘Change is useful (Hawthorne effect). The student thinks you are trying harder, so he likes it, so he learns better.’ I count among academic interests and aptitudes the collaborative implementation of a new breast imaging curriculum, an American Board of Radiology (ABR)- and Mammography Quality Standards Act (MQSA)-centered (and revenue cycle management-friendly) resident and medical student curriculum for breast imaging. Breast Imaging’s block ‘Boot Camp’ blends case-based learning with a four-week, sequential resident curriculum which incorporates assigned homework, educational modules, hands-on procedures, view box teaching sessions, and catalogued formal lectures. All are included by design, to offer varied methods of ensuring the good pupil learns in his or her most effective, efficient manner.

This new GME Director post has been, and will continue to be, a high honor for me. It is a privilege to offer clinical insight and editorial assistance to extraordinary resident young men and women. Collaborating with numerous members of our acclaimed clinical and basic science faculty on educational initiatives has been uncommonly productive and rewarding, and my shared time with other teaching faculty during residency recruitment has also been highly rewarding - Stay tuned!"

Smith and Burke Named to New Vice Chairmanships in Department Administration Restructure

The Department of Radiology would like to recognize Professor of Radiology Dr. Keith Smith and Associate Professor of Radiology Dr. Charles T. Burke for their July 2015 appointments as Vice Chair of Diagnostic Service and Vice Chair of Interventional Service, respectively. Smith has also been appointed Director of Clinical Research. An early 2015 restructuring of the department’s administration roles decreased vice chairmanships to three. In these new roles, Smith and Burke will conduct centralized decision-making tied to all Department of Radiology clinical service divisions under the direction of Executive Vice Chairman and Professor of Radiology Dr. Paul Molina.

Both appointees bring departmental and University-level clinical services leadership experience to these roles. From 2011 to 2015, Smith served as the department’s Vice Chair of Clinical Research. He also held a clinical research advisory role from 2011 to 2014 as Clinical Associate Director and Quality and Safety Officer for UNC’s Biomedical Research Imaging Center (BRIC).

“...I look forward to helping the senior leadership in this new role. I hope to help the diagnostic radiology clinical faculty as we grow and navigate together through the changes to our department, healthcare system, and state and national level healthcare delivery systems.”

Burke has served in multiple leadership roles tied to interventional clinical service within the Department of Radiology. His primary positions of clinical oversight within the Vascular-Interventional Radiology (VIR) division include: 1) Division Chief (2008-present); Fellowship Program Director (2007-present); and Chairman VIR Quality and Safety Committee (2013-present).

“I’m excited to be working in this capacity. We are in a time of tremendous change, and over the past several years, I’ve been working closely with [UNC Hospitals] to make necessary changes to prepare for the shift to a more value-driven healthcare model. Also, the changing healthcare landscape has led to a greater push for integrated practice models, not just locally, but across the entire system. My leadership experience with [UNC Center for Heart & Vascular Care] has enabled me to be significantly involved in discussions of interventional radiology services.”
Abdominal Imaging Leadership Transition: Fielding Appointed at UTSW, Chong Named Interim Chief

The Department would like to recognize a significant Abdominal Imaging division transition in early fall 2015. Effective late September 2015, Associate Professor of Radiology Dr. Wui Chong was named Interim Abdominal Imaging Division Chief, following the departure of long-time Division Chief and Professor of Radiology Dr. Julia Fielding. In late summer 2015, Fielding departed UNC to become Chief of Abdominal Imaging at UT-Southwestern in Dallas, TX. For almost 15 years, she served as teaching faculty and within various departmental and School of Medicine leadership roles at UNC. Shifting to a familiar role as UTSW’s new Abdominal Imaging division chief, within a large, urban healthcare system, Fielding will be overseeing 15 radiologists in UTSW’s Abdominal Imaging division, out of over 100 radiologists in its Department of Radiology.

Regarding her years at UNC, Fielding noted: “As in all career moves, there are pluses and minuses, but I decided that I needed a third act [after first serving as Harvard Medical School faculty]. My new chair has tasked me with making a diverse group of imagers into a single clinical and research team. There will be more time spent on mentoring junior staff and organizing research projects, but I will lose teaching time. This made my decision very difficult. One of the things I have always liked best at UNC was the ability to know and see every radiologist on staff. I will miss that very much. I will always treasure my time at UNC. It was an honor and a lot of fun.”

Within the division, Chong has served as its Chief of Diagnostic Ultrasound and Abdominal Imaging Fellowship Director. Within UNC's Department of Obstetrics and Gynecology, he has a joint Associate Professor appointment. At the national level, Chong’s professional service includes: 1) American Institute of Ultrasound in Medicine (AIUM) Fellow; 2) Journal of Clinical Imaging-Ultrasound Section Editor; and 3) Ultrasound-Editorial Board Member, amongst other roles.

"Julia was an outstanding Division Chief and Vice Chair, much loved by residents and her colleagues. She will be sorely missed. Her replacement has big shoes to fill," he noted.

We would like to recognize four clinical faculty members who have retired in 2015 and shown long-standing commitment to the UNC Department of Radiology and our institution:

* Dr. William ("Bill") H. McCartney (Nuclear Medicine) -- Appointed in 1976, McCartney was tapped to head the Department's fast-growing Imaging division three years later as imaging modernized beyond analog imaging. In the 1990s, he was appointed Chief of the newly formed Nuclear Medicine division, building a strong didactics base of his division's newly created residency and fellowship programs. In 2010, McCartney received the Society of Nuclear Medicine's Southeastern Chapter's highest honor, the Marshall Brucer Award for Distinguished Service.

* Dr. Leonard A. ("Al") Parker (Cardiothoracic Imaging) -- Appointed to faculty in 1985, Parker's tenure at UNC spans 35 years, including medical school, Diagnostic Radiology residency and as an Imaging fellow. For six years, he served as Director of the Department’s newly created Cardiopulmonary Radiology division (1989-2006). Beyond clinical duty, Parker’s on-duty time was characterized by a strong sense of service to teaching medical students and residents. In 2015, he received the Charles A. Bream award for excellence in teaching, as chosen by graduating Diagnostic Radiology residents. As participant in departmental and UNC School of Medicine (SOM) education-oriented committees, he served as Chair for a range, including: 1) UNC SOM -- Academy of Educators Educational Scholarship and Promotions Committees; and 2) UNC Department of Radiology -- Residency and Fellowship Review Committees and Faculty Search Committee.

* Dr. Claire B. Wilcox (Cardiothoracic Imaging) -- Appointed in 1983, Wilcox taught students and residents alike for 30+ years with an enthusiasm that earned her the UNC School of Medicine 2005-2006 Teaching Excellence Award. Since her early 1980s appointment, she also served as the Department's Director of Medical Student Electives, overseeing Radiology electives taught at UNC SOM.

* Dr. David M. Warshauer (Abdominal Imaging) - Appointed in 1989, Warshauer was chosen by the Department's graduating residents as the Charles A. Bream award recipient twice (1994, 2006) for excellence in teaching, also earning the UNC School of Medicine Teaching Excellence Award (2003). During his time on faculty, he facilitated over 35 invited and continuing education lectures, Grand Rounds, and Teaching Rounds, both at UNC and beyond. Warshauer also authored/co-authored 10 textbooks and book chapters and published almost 50+ articles in refereed journals, also serving as Manuscript Reviewer for multiple radiological publications.
To say we've been busy with educational initiatives this academic year is to put it mildly. To date, the residents and faculty have succeeded in the areas of reading resources upfit, formal resident lecture series optimization, subspecialty curricular development, fulfillment of ACGME requirements in overall program evaluation, healthcare economics, per-resident feedback and per-resident quality improvement and scholarly projects.

We have been extraordinarily collaborative in intent, as well as unusually successful in implementation, in all focus areas of our program-dedicated initiatives, including:

### LECTURE INITIATIVE

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### RESIDENCY RECRUITMENT & SELECTION

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The 2015 academic year is well underway, and many students have already rotated through the Department of Radiology, either on a divisional elective or in our introductory course, RAD 401. The RAD 401 format continues to be updated, and the basic lecture series is starting to take shape. The use of a single divisional introductory lecture that can be repeated each block allows for faculty flexibility and continuity of covered material.

At UNC School of Medicine, the first class of Translational Education at Carolina (TEC) students are in the 15th month of the 18-month Foundation Phase, and the new TEC class is in its third month. The Application Phase (AP) of the TEC curriculum will begin in spring 2016. Composed of clinical rotations, the AP is essentially the “third year” of medical school, but its schedule and the grouping of clinical experiences is non-traditional. The radiology “coil” also runs through the AP. Because of the challenging format of the AP, we will have to be creative in how we continue to engage and educate students in radiology.
ALUMNUS PROFILE

When Diagnostic Radiology alumnus Gretchen Foltz (2008-2012) started her Interventional Radiology (IR) fellowship (2012-2013) at Northwestern University, her choice of subspecialty was elevated to a primary specialty just three months later. In September 2012, the American Board of Medical Specialties approved a dual, five-year integrated IR/Diagnostic Radiology residency, as well as a two-year independent IR program. Entering academic radiology less than a year later, Foltz would begin her career in a new educational era of radiological practice.

As Foltz started her medical career at Washington University (Wash U)’s Mallinckrodt Institute of Radiology in St. Louis, MO, in July 2013, she integrated into her everyday clinical practice set the solid foundation of technical and clinical assessment skills she acquired during residency. At UNC, the Department’s teaching faculty had given her a well-rounded, general radiology education during her four-year Diagnostic Radiology training. Looking back, she can link her present-day IR patient procedural evaluation and follow-up practice to the interpretive skills she learned in the diagnostic imaging divisions.

“My first few years in practice has reinforced the numerous ways my diagnostic training taught me to approach a procedure and manage complications. At UNC, Drs. [Matt] Mauro (Department Chairman), [Charles] Burke (VIR Division Chief) and [Jonathan] Lozevski (2008-2009 Vascular IR Fellow) instilled in me the IR tips, tricks and skills that I rely on in daily practice.”

In two+ years at Wash U, Foltz has embraced academic medicine leadership at multiple levels, from departmental – Interventional Radiology Fellowship Program Director and Residency and Fellowship Recruitment Committee member – to institutional – Wash U School of Medicine Admissions Committee member. Foltz also credits Dr. Burke for his influence on taking the initiative post-training to participate in invited publications, as well as society committees at the Radiological Society of North America (RSNA) and the Society of Interventional Radiology (SIR).

Interventional Radiology offers minimally invasive treatment options as an increasingly popular alternative to surgical procedures. At Barnes Jewish Hospital (BJH), Foltz applies her skill set primarily to Interventional Oncology treatment options. She works in multi-disciplinary clinical care year-round in treating thousands of patients with hepatic disease who need combined IR, Hepatology, GI, Medical Oncology, Transplant and Hepatobiliary surgery services at BJH. The collaborative patient care she participates in with these clinical divisions is part of a large referral center at BJH and has made Foltz one of a few in her department’s IR division with dual Wash U School of Medicine appointments in Radiology and Surgery.

“Dually appointed IR faculty are fortunate to have close collaborative ties with surgical colleagues at Wash U who provide a large portion of the patient referrals to our division. I have a great relationship with the very active, multi-disciplinary group here. We review all patients and direct them to the best treatment intervention/clinical trial depending on their cancer, stage and overall performance status. The common goal is to provide the best care from all possible treatment options, not just those in our given specialties.”

Outside of oncologic patients, a significant number of Foltz’s patients are referred for uterine fibroid embolization (UFE, a.k.a. uterine arterial embolization - UAE). As she notes: “I’m pleased when my gynecology colleagues refer patients to me who are leaning toward [UFE]. Patients are doing a lot of self-education and they want to hear more about minimally invasive options for treatment of fibroid symptoms. They are encouraged with the high success rate and faster recovery time of UFE compared to the traditional surgical option of hysterectomy.”

Pursuing an academic radiology career at a renowned school of medicine and radiological institute brought Foltz professional fortune in landing at Wash U and Mallinckrodt, respectively. Beyond her career, the move to St. Louis also personally benefitted both her and husband Michael in relocating them to within a few hours’ of family in Wisconsin on both sides. Amongst the couple’s range of joint interests, they explore St. Louis-area’s extensive biking and hiking trails at home, and on a larger scale, have fit international travel into the schedule in the past few years. Sticking closer to home will be much more routine in the next few years as Gretchen and Michael prepare for the arrival of their first child, a baby girl, due in December.

Looking ahead, when the five-year, integrated IR/Diagnostic Radiology and two-year, independent IR residencies are newly offered as accredited American College of Graduate Medical Education (ACGME) primary specialty programs in July 2017, Foltz’s department plans to appoit her as Program Director of both. As she prepares for these roles, Foltz has relied on UNC faculty mentorship just as she did in her earlier years pursuing her subspecialty. UNC’s four-year Diagnostic Radiology Program Director (now Associate Program Director) Dr. Bob Dixon has invaluable lent Foltz assistance in learning the regulatory ropes of overseeing an ACGME-accredited training program. Given their shared subspecialty, Dixon has also helped her identify prospective challenges ahead for the first class of residents training in newly structured programs.

As Foltz notes: “Dr. Dixon was an early-residency mentor, not just in the IR suite, but also in research and resident education. He highly influenced my decision to stay in academics, and his guidance and encouragement has been particularly invaluable for assuming the role of IR fellowship Assistant Program Director and future IR residency Program Director here at Wash U. There’s no doubt he will continue to be an invaluable mentor as everyone nationwide gears up for the start of the two newly accredited programs.”
Many UNC School of Medicine (SOM) departments and divisions integrate their clinical and basic science activities within the institution's functionality through addressing operations via frequent and streamlined decision-making. The Department of Radiology abides by this practice, most visibly through appointing faculty leaders capable of assisting Chair’s office executive decision-making. Each brings an invaluable level of expertise and/or insight to their assigned advisory role.

In early 2015, a review of our Department’s leadership map led us to conclude restructuring was in our best interests. Over almost nine years, the five vice chairmanships that had comprised the Department’s long-standing, five-member Executive Committee -- Executive Vice Chair; and Vice Chairs of Basic Research, Finance, Clinical Research and Quality and Safety – had met weekly to conduct broad operational decision-making. Effective July 1st (FY 2016), the Executive Committee was dissolved in favor of engagement of the division chiefs, as well as forming smaller Educational, Research, and Quality and Safety advisory groups.

Our restructuring has condensed clinical service and basic science leadership to three vice chairmanships and four new directorships that collectively cover areas previously handled by the Executive Committee. The Department’s new five-member Chairman’s Advisory Committee (CAC) meets weekly and includes top operational leadership – Chairman Dr. Matt Mauro; Executive Vice Chair Dr. Paul Molina and Associate Chair for Administration Bob Collichio – as well as our two newly formed vice-chairmanships -- Vice Chair of Diagnostic Service Dr. Keith Smith and Vice Chair of Interventional Service Dr. Charles Burke.

Separately, departmental areas formerly addressed by the Executive Committee have been modified and reassigned to four directorships – Clinical Research (Dr. Keith Smith); Quality and Safety (Dr. Richard Semelka); Graduate Medical Education (Dr. Sheri Jordan and Associate Director Dr. Bob Dixon); and Faculty Development (TBD). Once all positions are filled, individual monthly meetings between each of these directors and the CAC will focus on imaging care and research issues within these realms that the Department’s advisory leaders can address from an operations standpoint. Vice Chair of Basic Research Dr. Weili Lin and his UNC Biomedical Research Imaging Center (BRIC) team of basic imaging researchers will also meet monthly with the CAC.

UNC Department of Radiology is charged with applying UNC SOM’s core missions of research, clinical care and education to our own practices, amongst those of all other SOM units. By narrowing top operational advisory roles to clinical service and basic science via vice-chairmanships, the Chair’s office can better support broader pursuits (eg, specialty and subspecialty training, growth in faculty) tied to these core missions via newly established directorships. Evaluating overall operations is critical for all SOM divisions and departments. Tapping capable faculty to newly defined leadership posts is a step in the right direction for supporting all sub-units in their efforts to uphold the foremost values of our academic medical center via efficacious operations.
Bryan Ashley
Undergraduate: University of South Carolina (Columbia, SC)
Medical School & Preliminary Year (Medicine): Medical University of South Carolina (Charleston, SC)

“What struck me after interviewing at UNC was how comfortable I felt interacting with the interviewing faculty, especially Dr. Dixon. In conjunction with a sound academic reputation, as well as an enjoyable location, I felt very comfortable with my decision to pursue residency training in Chapel Hill.”

Beyond UNC Hospitals’ hallways, Bryan’s interests include exploring outdoors, trying out new restaurants, and as he puts it, “attempting” to catch fish. He also enjoys celebrating the occasional [USC] Gamecock victory. A medical school rotation piqued Bryan’s interest in interventional radiology, though his choice of subspecialty is hardly set early in residency. The teaching and learning process he’s enjoyed during residency backs Bryan’s wish to pursue academic radiology.

Kelsey Budd
Undergraduate: Northwestern University (Evanston, IL)
Medical School: Ross University (Portsmouth, Dominica)
Preliminary Year (Transitional): Detroit Medical Center Sinai-Grace Hospital (Detroit, MI)

“I was impressed initially with UNC’s reputation among institutions, particularly its strength in so many subspecialties, not only within radiology, but also within other areas of medicine. I chose to do several visiting rotations here as a medical student to maximize my experience, given the vast breadth of pathology that is seen at UNC. I also consider rapport between faculty and residents to be of critical importance, considering who you will be working and training with for four years. I was particularly impressed with the staff’s commitment to excellent care and teaching without sacrificing its collegial atmosphere and rapport.”

As parents of two young children, Kelsey and his wife Nicole spend family time heading to places around the Triangle such as parks, restaurants, and sporting events. Off-hours, Kelsey also enjoys the rapport he quickly found at UNC through joining classmates for resident-organized dinners out, outdoor concerts, pool parties, etc.

Regarding his professional years head, Kelsey notes: “I have learned personally and professionally that there’s a vast gap between what ‘catches your fancy’ in life and what you actually enjoy doing on a daily basis. Interventional Radiology and Neuroradiology certainly appeal to me, but I intentionally set out not to get my heart set on anything until I have ‘been in the trenches.’

Clayton Commander
Undergraduate/Graduate (BS, MS, PhD): University of Florida (Gainesville, FL)
Medical School: UNC-Chapel Hill
Preliminary Year (Surgery): UNC-Chapel Hill

“As a UNC medical student, I’d developed relationships with several Department of Radiology faculty members through research projects and activities sponsored by the Radiology Interest Group. Everyone was welcoming and encouraging, and I thought, ‘why would I want to go anywhere else?’ A strong reputation for research and clinical service combined with the collegiality the Tar Heels are known for is a perfect combination for a successful residency. I am planning on specializing in Vascular-Interventional Radiology. I’ll never forget seeing an angiogram for the first time while shadowing Drs. Dixon and Burke as a medical student. I thought, ‘Wow! He gets paid to do this!’”

Beyond on-duty time, Clayton devotes regular hours early morning to ongoing research projects in leaning toward a career ahead in academic radiology. He and Leah (UNC School of Medicine Class of 2016) stay busy raising two-year-old son Benjamin and their August 2015-born daughter Hannah. A few pastimes include fishing and woodworking.

Kaleigh Burke
Undergraduate: University of South Carolina (Columbia, SC)
Medical School: UNC-Chapel Hill
Preliminary Year (Medicine): UNC-Chapel Hill

“Having attended UNC for medical school, I had the opportunity to interact with several faculty who fostered my interest in Radiology and have served as wonderful mentors. What impressed me the most about UNC were the faculty’s enthusiasm for teaching, the volume and variety of pathology seen here, and UNC’s mission to serve the people of North Carolina. I’ve also been happy to stay in Chapel Hill, which is in close proximity to my family and is a close drive to both the mountains and beaches.”

Burke and her husband Gary, a 1st-year Emergency Medicine resident at UNC, met their first day as UNC medical school classmates. In the Chapel Hill area, the two enjoy trying out area restaurants and breweries and spending time with Gary’s family. They also enjoy going to the mountains to hike, mountain bike and visit Kaleigh’s family. Their dog Jenga gets plenty of only-child attention both at home and when along for road trips.
Malik Mossa-Basha
Undergraduate: University of Michigan (Ann Arbor, MI)
Medical School: Wayne State University (Detroit, MI)
Preliminary Year (Transitional): St. Mary Mercy Hospital (Livonia, MI)

“I placed UNC high on my list because of the reputation of its great training program and faculty. I spoke to previous graduates who highly recommended the program, and the residents were really happy during my interview. I love college towns and Chapel Hill is one of the nicer ones. After living in the Midwest my whole life, I wanted to experience warmer weather, so UNC fit perfectly!”

Beyond work, Malik makes time to play sports, particularly basketball and soccer. His other wide-ranging interests include reading history books and novels, as well as taking on cooking and hiking as new endeavors. Early in residency, Malik leans toward pursuing academic radiology, with time ahead to choose a subspecialty.

Monica Reddy
Undergraduate: University of Oklahoma (Norman, OK)
Medical School & Preliminary Year (Medicine): University of Oklahoma (Oklahoma City, OK)

“As a child, I traveled to [North Carolina’s] Outer Banks every year with my family for vacation and to visit my great grandparents nearby in Pine Knoll Shores. I love this area of the country and have always wanted to move out here. I thought that UNC would be a great place to train.”

Monica and her fiancé, a Neurology-bound intern at Duke University, are both Oklahoma natives and University of Oklahoma graduates. Beyond work, both love cheering on their Sooners during fall football every Saturday and the Oklahoma City Thunder during basketball season. Living near the American Tobacco Trail is ideal for walking the dogs, and the area’s appeal in restaurants easily accommodates when Monica and fellow residents have time for dinner out. Though fellowship is a few years off, Monica has taken a subspecialty liking to Breast Imaging.

Eli Tate
Undergraduate: Princeton University (Princeton, NJ)
Medical School: UNC-Chapel Hill
Preliminary Year (Transitional): Trident Medical Center (Medical University of South Carolina)

“I chose UNC for residency because of my wife’s and my long-standing relationship and roots within the community. I was born at NC Memorial Hospital when it was the largest building on the Hill. I’ve lived in a variety of places around the world in the intervening decades and was lucky enough to come back to the area for medical school at UNC. My time in Chapel Hill and away has given me the opportunity to know that UNC is the right training environment for me and a great community for my family.”

Away from work, Eli and his wife Erin keep busy raising their two- and four-year-old boys. As rabid UNC basketball fans, the couple's courtship was highly influenced by domination of Duke during the [Tyler] Hansbrough years. The foursome frequently spends time with extended family in town, at the beach or in the mountains whenever possible. Eli and Erin are also involved with “Fighting Cancer Below the Belt,” an initiative supporting gynecologic cancer awareness and research in the community.

Josh Wallace
Undergraduate, Medical School & Graduate School (Master of Public Health): UNC-Chapel Hill
Preliminary Year (Surgery): Medical University of South Carolina (MUSC) (Charleston, SC)

“As a UNC medical student, I was influenced to stay here for residency by both the great training environment, as well the well-rounded resident experience I observed. I also saw an opportunity to continue developing relationships with well-known and respected faculty I’d started as a student. My wife and I have enjoyed living in the Triangle, and pursuing residency after medical school at UNC allowed us to stay close to family.”

Extending his years in Chapel Hill was an easy decision for Josh, a self-proclaimed “die-hard” Tarheel. As a UNC undergraduate, he played drums in UNC’s Marching Tarheels (football) and Basketball Bands, and drum- and guitar-playing remain pastimes. At home, Josh and his wife Katrina keep company with two “overfed” cats, enjoy home-brewing beer and take their exercise seriously as CrossFit patrons. Early in residency, Josh is “eager to learn anything and everything” but keeps his background in public health in mind knowing that it would serve him well in academic radiology.
Eduardo Moroni - Abdominal Imaging
Medical School: Universidade Federal de Pernambuco (Recife, Brazil)
Preliminary Year (Medicine): Danbury Hospital (Danbury, CT)
Diagnostic Radiology Residency: University of South Alabama (Mobile, AL)

“I chose UNC for my fellowship year because of its strong teaching faculty in overall Abdominal Imaging and Body MRI, its high volume of oncologic cases, and the friendly atmosphere displayed by the faculty members, residents and staff.”

Beyond work, Eduardo enjoys quality time with his wife Wendy and their four-year-old son, as well as traveling as often as possible, particularly to the beach. After his fellowship year, he looks forward to joining Geisinger Health System in Wilkes-Barre, PA, in July 2016 as a Thoraco-Abdominal and Nuclear Medicine Radiologist.

Kenny Rentas - Musculoskeletal Imaging
Medical School: University of Puerto Rico (San Juan, Puerto Rico)
Preliminary Year & Diagnostic Radiology Residency (Integrated Program): University of Missouri - Kansas City
Fellowship (2014-2015): UNC Department of Radiology (Neuroradiology)

“I chose UNC for my fellowship training for its wide range and complexity of cases, as well as opportunities to expand my knowledge. As a Neuroradiology fellow last year, I came here to subspecialize because of UNC’s strong teaching faculty and institutional reputation. In my second year, the great variety and complexity of cases in my division reminds me of how much I’ve learned at this medical center.”

Apart from work, Kenny's off-hours interests lean both outdoors and active, such as hiking and snowboarding, as well as leisurely, such as watching movies and cooking at home. After living in “the great state of North Carolina” for a year+, Kenny remains highly drawn to the state's scenery and outdoor activities, often trail-hiking and -cycling with his girlfriend, who recently finished her Family Medicine residency in Kansas City, MO.

Andi Senter – Breast Imaging
Medical School: University of Tennessee (Knoxville, TN)
Preliminary Year (Transitional): Harbor Hospital (Baltimore, MD)
Diagnostic Radiology Residency: UNC-Chapel Hill

“I really love the mentorship here at UNC, not to mention the Triangle is a wonderful place to raise a family. Our patients at Chapel Hill are wonderful and generous with their time while persevering through enormous trials. I’ve been incredibly inspired by the range of cases that have enhanced my training in more than four years now as a resident and fellow at UNC Hospitals. I feel fortunate to be learning my future profession at such a strong academic medical center.”

Balancing work and family has been an ingrained routine for Andi since early residency. Her two sons were born during her residency years, and both keep Andi and her husband Matt quite active. Andi enjoys spending her limited free time running, frequently taking her boys along for the jog around South Durham.

Anna Wilson – Breast Imaging
Medical School: Michigan State University College of Osteopathic Medicine (East Lansing, MI)
Preliminary Year (Transitional) & Diagnostic Radiology Residency: Oakwood Southshore Medical Center (Trenton, MI)

“During my fellowship interview, I was very impressed with UNC’s Breast Imaging division because of both its exceptional faculty and its outstanding staff. I knew I wanted to be a part of this team. I believe I will be well-prepared as I leave UNC as a fellowship-trained breast imager.”

Anna, her husband James and their two children, ages three and 18 months, moved here at the end of June and have enjoyed as a family exploring the beauty of the Triangle area and North Carolina for the year. Once Anna completes her fellowship in June 2016, she notes family excitement over heading to Billings, MT, to start their next chapter together as she joins a private practice.
**NEW FELLOWS**

**Christopher Karakasis** – Neuroradiology  
Medical School: Ohio State University College of Medicine (Columbus, OH)  
Preliminary Year (Transitional): Summa Health System (Akron, OH)  
Diagnostic Radiology Residency: Ohio State University Wexner Medical Center (Columbus, OH)

“I chose UNC Neuroradiology for fellowship training for its excellent teaching faculty and broad range of pathology and case volume, as well as to utilize the strong opportunities available for research.”

While his wife Carli has remained in the Midwest for her Pulmonary/Critical Care fellowship at Cleveland Clinic, Chris has enjoyed exploring the Triangle's local hiking trails, golf courses and the range of restaurant options around Chapel Hill and Durham. His American bulldog Baron also keeps Chris good company. When he completes his fellowship year in June 2016, Karakasis plans to pursue academic neuroradiology, possibly returning to the Midwest as an area that would accommodate both subspecialty pursuits in his household.

**Brett Murdock** – Breast Imaging/Cardiothoracic Imaging  
Medical School: Georgetown University School of Medicine  
Preliminary Year (Surgery): Washington Hospital Center (Washington, DC)  
Diagnostic Radiology Residency: UNC-Chapel Hill

“Choosing a fellowship is quite the conundrum given the intriguing options within radiology, so I thought, why not choose two?! I believe Cardiothoracic and Breast Imaging are the perfect marriage of the best aspects of the field. Cardiothoracic Imaging requires careful insight to navigate subtleties and nuance to come to diagnostic conclusions. If Sherlock Holmes were picking a field of study in radiology, he would be immediately drawn to Cardiothoracic Imaging. Also, the procedures in Cardiothoracic Imaging require technical expertise in a high-stakes environment, which I find exhilarating. I have always been drawn to Breast Imaging for the enriching patient interactions. There is no better feeling than providing optimal care and compassionate consultation to patients experiencing one of the most stressful situations of their lives.”

Apart from work, Brett notes his free time is devoted to a “diverse amalgam of excitement and intrigue” that would make the Dos Equis "Most Interesting Man in the World" very jealous.

**Matt Lopez** - Neuroradiology  
Medical School: New York IT College of Osteopathic Medicine (Glen Head, NY)  
Preliminary Year (Transitional) & Diagnostic Radiology: Brookhaven Memorial Hospital (Patchogue, NY)

“UNC's reputation for having a strong neuroradiology fellowship program is what brought me here. My wife and I wanted to be in a place close enough to build connections for future careers, and having her family living two hours north of Chapel Hill definitely influenced our final decision.”

Since moving to North Carolina in July, Matt and his wife Ashley, an elementary school teacher, have enjoyed exploring Chapel Hill- and Triangle-area restaurants, as well as getting acquainted with the Carolinas coastal region in visiting Myrtle Beach and Wrightsville Beach. Once Edward completes his fellowship year, he and Ashley would like to relocate to either the Virginia or North Carolina coastal area, or otherwise to move back to Colorado's Front Range region, an area of long-term residence for both.

**Kwaku Obeng** – Neuroradiology  
Medical School: Stony Brook University School of Medicine (Stony Brook, NY)  
Preliminary Year (Medicine): Danbury Hospital (Danbury, CT)  
Diagnostic Radiology Residency: Monmouth Medical Center (Long Branch, NJ)

“While interviewing at UNC for fellowship, I was impressed with its strong teaching faculty in addition to seeing a patient case volume that would teach me a lot during just a year’s time.”

Having close ties in town has helped Kwaku during his year in North Carolina, particularly through the off-hours time he spends as a congregant at Church of Pentecost Durham Assembly.
Shaun Wagner – Neuroradiology
Medical School: Lake Erie College of Osteopathic Medicine (Bradenton, FL)
Preliminary Year (Transitional): Long Beach Medical Center (Long Beach, NY)
Diagnostic Radiology Residency: St. Barnabas Medical Center (Livingston, NJ)

“When looking at fellowship programs, I wanted to train at a well-respected institution with strong teaching and faculty support, which was well-showcased during my interview at UNC. I was quite impressed by how UNC’s well-rounded curriculum covers all facets of neuroradiology, particularly head and neck radiology. Additionally, I had been looking to move south and was very taken with Chapel Hill while interviewing as well as when visiting on other occasions.”

In time away from work, Shaun stays active with a variety of hobbies, including playing golf, cooking, brewing beer and traveling. Exploring North Carolina’s varied landscapes has allowed him to regularly engage in his love of the outdoors, including frequently hiking and finding new trails whenever possible.

Brian Baigorri – Vascular-Interventional Radiology
Medical School: Ponce School of Medicine & Health Sciences (Ponce, Puerto Rico)
Categorical Diagnostic Radiology Residency (2 Preliminary Surgery Years): Wayne State University (Detroit, MI)

“When interviewing at UNC for fellowship, I made my choice to come here because of the high volume and diversity of cases, the department’s and institution’s well-known faculty, and a great location for getting the most out of a one-year training program.”

Beyond work, Brian and his wife Stephanie, a nursing student at Duke University Medical Center, balance at-home time in the good company of their puppy Harper with weekend travel to explore new terrain around North Carolina in a state that is new to them both.

Adam Yancey - Musculoskeletal Imaging
Medical School & Diagnostic Radiology Residency: UNC-Chapel Hill
Preliminary Year (Transitional): Reading Hospital & Medical Center (West Reading, PA)

“I chose UNC for fellowship because I’d had such a great experience here as a resident. I knew I could get the most out of a fast-moving, 12-month fellowship in already having good relationships with the faculty in my division, as well as within the department.”

A newlywed in September, Adam and his wife Tara, an ultrasonographer at Duke Raleigh Hospital, stay well-fed on Italian home-cooking when joining Tara’s family for their weekly Sunday dinners. At home, they also enjoy the company of their five-year-old beagle, Bailey. Now a private pilot after obtaining his license during residency, Adam enjoys flying during free time when he can, as well as scuba diving, spending time at the shooting range, learning golf from his new father-in-law, and frequent exercise. Directly following fellowship, Adam and Tara will join Radiology Associates, P.A., a private practice serving multiple hospitals and clinics throughout both Northwest and Central Arkansas that also employs other fellowship graduates from UNC Department of Radiology.

Craig Steeds – Vascular-Interventional Radiology
Medical School: Emory University (Atlanta, GA)
Preliminary Year (Surgery) & Diagnostic Radiology Residency: University of Missouri-Kansas City

“I chose UNC for my one-year fellowship because of the volume and variety of cases I would see during training, and also because of Chapel Hill’s great location, given all there is to do in the area.”

An avid cyclist, Craig enjoys exploring trails within the Triangle, as well as around various areas of North Carolina.
NEW FACULTY

The Department was pleased to appoint Dr. Brian Handly in July 2015 as Assistant Professor of Radiology, working in Pediatric Imaging under the direction of Division Chief Dr. Lynn Fordham. Handly most recently subspecialized in Pediatric Imaging at Nationwide Children’s Hospital in Columbus, OH (2014-2015). For residency, he trained in Internal Medicine (2009-2010) and Diagnostic Radiology (2010-2011) at Penn State Hershey Medical Center in Hershey, PA. Handly received his MD from Penn State University College of Medicine in Hershey, PA, in 2009.

"I am honored to be a member of the UNC radiology team. I look forward to working with my colleagues to implement and optimize protocols for pediatric cross-sectional imaging. I am also excited to further the education mission of the department by training the next generation of radiologists, as well as generate medical student interest in radiology."

The Department was pleased to appoint Dr. EJ Langman as Assistant Professor of Radiology in July 2015, working in Breast Imaging under the direction of Division Chief Dr. Cherie Kuzmiak. Langman completed medical school and specialty training at Duke University over nine years: 1) Breast Imaging fellowship training (2014-2015); 2) Diagnostic Radiology residency (2010-2014); and 3) medical school (2005-2009). Apart from Duke, Langman completed her preliminary year at Mount Auburn Hospital (Harvard Medical School) in Cambridge, MA (2009-2010). In her undergraduate years (2000-2004), Langman obtained her dual BS degree from Massachusetts Institute of Technology (MIT) in Biology and Chemical Engineering. Among her honors, she was selected as a NIH-Howard Hughes Medical Research Scholar (2007-2008) in medical school, and during Diagnostic Radiology training, she received her department’s 2014 Resident Teaching Award.

As a new faculty member, Langman is participating in a one-year UNC School of Medicine faculty development program entitled, “Passing the Torch: Fostering Medical Humanism Through Faculty Role Models.” Her transition from Duke fellowship to UNC faculty appointment has also allowed Langman to maintain and pursue joint research efforts in her area of interest -- novel, image-guided therapeutics for breast cancer therapy -- between the institutions. She is currently working on a collaboration with UNC Eshelman School of Pharmacy Associate Professor William Zamboni’s laboratory and Duke University’s Center for In Vivo Microscopy to investigate the efficacy of intra-tumoral chemotherapy in a mouse model of breast cancer. Langman also serves as PI on three IRB-approved projects at UNC and has participated in the breast imaging division’s breast CT and tomosynthesis reader studies.

“I am excited to be a part of such a dynamic and talented group of individuals in the Breast Imaging division. It is a clinically demanding service that first and foremost provides outstanding patient care above all else. I hope that my experiences in resident education and basic science research will complement the existing strengths of our division and its synergy with the School of Medicine and other clinical services at UNC.”

The Department was pleased to appoint Dr. Ertan Pamuklar as Assistant Professor of Radiology in July 2015, working under the direction of Division Chief Dr. Paul Molina in Cardiothoracic Imaging. Pamuklar has worked in both clinical and research capacities with the Department for more than 10 years – Clinical Radiology Research Fellow in Body MRI (2004-2007) and Cardiothoracic Imaging Clinical Fellow (2007-2015) – prior to his faculty appointment.

Prior to his time at UNC, Pamuklar completed his Diagnostic Radiology residency (1997-2001) at Gazi University’s Department of Radiology in Ankara, Turkey. Pamuklar received his MD from Ankara University in Ankara, Turkey, in 1987, directly thereafter completing his Internal Medicine preliminary year and Physiology residency at its hospital through 1997. During his years as a Clinical Research Fellow in the Department, Pamuklar also worked as an Assistant Professor at Medical University of South Carolina (MUSC)’s Department of Radiology in Charleston, SC.

“I have enjoyed working for the Department of Radiology for a long time, and I’m pleased to be appointed as Assistant Professor this year after working within the Cardiothoracic Imaging division for the past eight years. I’m pleased the additional teaching and research opportunities as a faculty member will allow me to get more involved beyond my clinical duties.”
The Department was pleased to appoint **Dr. Troy Maetani** as Assistant Professor of Radiology in July 2015, working under the direction of Division Chief Dr. Daniel Nissman in Musculoskeletal Imaging. Most recently, he completed a fellowship in Musculoskeletal Imaging and Intervention at Brigham and Women’s Hospital in Boston, MA (2014-2015). In 2014, he completed his Diagnostic Radiology residency at Tufts Medical Center. Maetani obtained his MD from State University of New York (SUNY) Downstate College of Medicine in 2009, and a year later, he completed a transitional internship at Lemuel Shattuck Hospital/Tufts University School of Medicine.

Since his July appointment, Maetani has been tapped to serve on the Residency Selection Committee for Diagnostic Radiology recruitment. Regarding his outlook on other ways of getting involved, he notes: “I look forward in the coming months to identifying collaborative opportunities as I get better acquainted with faculty from my own department and division, as well as from across UNC School of Medicine. As I familiarize myself with other clinical disciplines at UNC, I’m hoping my intervention-focused subspecialty training can benefit research collaborations and other cross-disciplinary activities, given interventional medicine’s increasing application in today’s patient care.”

The Department was pleased to appoint **Dr. Carlos Zamora** as Assistant Professor of Radiology in July 2015, working under the direction of Division Chief Dr. Mauricio Castillo in Neuroradiology. Over six years, Zamora both trained and served as physician staff at Johns Hopkins University’s Department of Radiology and Radiological Science: 1) Clinical Instructor (2014-2015); 2) Clinical Fellow (2013-2014); and 3) Diagnostic Radiology residency (2009-2013). Before Hopkins, he completed his Internal Medicine internship at Wyckoff Heights Medical Center in Brooklyn, NY (2008-2009). After obtaining his MD in 2002 from the University of Guatemala in Guatemala City, he completed a PhD in Medical Sciences at Kobe University Graduate School of Medicine in Kobe City, Japan, where he worked in its Department of Radiology.

At UNC, Zamora has started working with Dr. Castillo and UNC Division of Hematology and Oncology Clinical Professor Dr. Frances Collichio on studying the effect of oncolytic virus talimogene laherparepvec (T-VEC) on cervical lymph nodes after injection in patients treated for melanoma. Zamora also has begun collaborating with Associate Professor of Radiology Dr. Benjamin Huang as educational liaison in helping restructure neuroradiology resources and curriculum for the Department’s Diagnostic Radiology residency program.

“I’m delighted to have come to UNC and cannot think of a better place to start my career. In my limited experience within the Division of Neuroradiology, I have been provided with the right balance between teaching and research opportunities, and at the same time have been pleasantly surprised at the breadth of pathology that I have encountered in such a short period of time. I have a particular interest in high-resolution imaging of the skull base and look forward to working with my colleagues in optimizing our MRI protocols for evaluation of the upper cranial nerves. I have also enjoyed working with fellows and residents and anticipate that this will be a rewarding experience both in terms of mentoring and in my own learning from such interactions.”

The Department was pleased to appoint **Dr. Jorge Oldan** as Assistant Professor of Radiology in August 2015, working under the direction of Division Chief Dr. Terry Wong in Nuclear Medicine. Prior to his UNC appointment, Oldan subspecialized in Cardiovascular Imaging at the Cleveland Clinic Foundation (2014-2015) in Cleveland, OH. Beforehand, he completed his Nuclear Medicine residency training (2012-2014) at Duke University Medical Center, where he received the Fellows Teaching Award. After completing his Diagnostic Radiology residency at Tufts Medical Center (2007-2011) and his Internal Medicine internship at Long Island Jewish Medical Center (2006-2007), Oldan worked in pancreatic cancer research at Mayo Clinic in Scottsdale, AZ (2011-2012). Dr. Oldan obtained his MD from State University of New York (SUNY) at Stony Brook Health Sciences Center (2001-2006), including a year of research evaluating reconstruction algorithms for SPECT and developing digital phantoms for breast tomosynthesis. In his new faculty appointment, Oldan will provide Nuclear Medicine clinical coverage within UNC Hospitals.

Jorge has been recruited to serve as a Diagnostic Radiology residency recruitment committee member and is working on a new basic nuclear medicine lecture series to orient residents during every rotation. He is presently evaluating the utility of standardized databases for evaluation of common techniques such as subtraction SPECT, as well as new technologies such as PET/MR, for epilepsy evaluation. Given more time at UNC, he aims to pursue further studies in quantification, nuclear cardiology, as well as to extend the clinical use of contrast-enhanced PET-CT and PET-MR.

“I hope to help expand residents’ knowledge of nuclear medicine within radiology, and to help further the clinical mission of the Nuclear Medicine division by working with specialties such as Neurology, Medical Oncology and Gynecologic Oncology to provide the best possible service. I’m happy to be back in North Carolina!”
The Department was pleased to appoint **Dr. Leon Bacchus** as Assistant Professor of Radiology in August 2015, working under the direction of Division Chief Dr. Paul Molina in Cardiothoracic Imaging. Bacchus completed his Diagnostic Radiology residency (2007-2011) at Lahey Hospital and Medical Center in Burlington, MA, followed by a Cardiothoracic Imaging fellowship at Montefiore Medical Center in Bronx, NY (2011-2012). Post-fellowship, he served as an attending Cardiothoracic Radiologist at Northshore University Hospital in Manhasset, NY (2012-2015). He served as teaching faculty for two of those years (2013-2015) as Assistant Professor of Radiology at Hofstra University School of Medicine. He spent his Internal Medicine preliminary year (2006-2007) at Albert Einstein Medical Center in Philadelphia, PA, and completed medical school at UMDNJ Rutgers Medical School (formerly Robert Wood Medical School), in Piscataway, NJ, (2002-2006).

In his first few months at UNC, Bacchus has been named Educational Liaison for the Division of Cardiothoracic Radiology. Amongst other ways at the departmental, School of Medicine and UNC Hospitals levels to get involved, Bacchus noted: “I am truly excited to be a new member of the UNC Department of Radiology. I personally see myself working very closely with trainees to improve upon the educational initiatives for the division. I certainly look forward to contributing as a member of the multidisciplinary team taking care of patients by providing subspecialty interpretations and being the consultant that is many times needed for complex cases.”

The Department was pleased to appoint **Dr. Niyati Mukherjee** as Assistant Professor of Radiology in September 2015, working under the direction of Division Chief Dr. Wui Chong in Abdominal Imaging. Mukherjee returns to UNC after having trained as a Diagnostic Radiology resident (2010-2014) and Internal Medicine intern (2009-2010) at UNC Hospitals. Beyond UNC, Mukherjee most recently subspecialized in Abdominal Imaging (2014-2015) at Duke University Medical Center. She otherwise obtained her MD from the University of Rochester School of Medicine and Dentistry in Rochester, NY (2005-2009).

“I am just getting into the swing of things as a first-time attending. In the future, I hope to collaborate with physicians in gynecology to pursue research in Women’s Imaging. In the meantime, I am looking forward to working with the residents and teaching. I hope that my experience as a resident in the Diagnostic Radiology program will help me in being a resource for the current residents!”

The Department was pleased to appoint **Dr. Gang Li** as Research Assistant Professor of Radiology in July 2015, as a continuation of his work at UNC’s IDEA Lab as a Post-doctoral Research Associate (2010-2015) under Professor of Radiology Dr. Dinggang Shen. Prior to UNC, Li obtained his PhD and MS (Control Science and Engineering) and BS (Automation) over seven years (2003-2010) from Northwestern Polytechnical University in China’s Shaanxi (Shensi) province.

As faculty, Li will continue his work in neuroimaging analysis and mapping, brain development and modeling, neuroinformatics, computational neuroanatomy and neuroscience, as applied to conducting brain development, aging and disease studies. Over the past five years, his expertise in developing methods for neuroimaging brain structure and function analysis have made notable contributions at the IDEA Lab toward the development of innovative computational tools for mapping dynamic and critical brain development in infants. In August 2015, Li was awarded National Institutes of Health (NIH) K01 funding ($558,574) for a four-year study entitled, “4D Cortical Surface Analysis Tools for Study of Early Brain Development in Typical and High-Risk Infants.”

“I’m pleased that this new faculty position allows me to support my independent research on mapping early brain development. My recently received [NIH] K01 funding provides a foundation for growing my funded research activities, and there are numerous opportunities to pursue. Mentoring as well as assigning graduate students and post-doctoral fellows critical roles in my projects will also be invaluable to my independent research ahead.”

The Department was pleased to appoint **Dr. Li Wang** as Research Instructor of Radiology in July 2015, as a continuation of his work under Professor of Radiology Dr. Dinggang Shen at UNC’s IDEA Lab. After obtaining his PhD in Pattern Recognition and Intelligent System at Nanjing University of Science and Technology in Nanjing, China, Wang joined Shen’s lab at UNC’s Biomedical Research Imaging Center (BRIC) as a post-doctoral fellow that same year. Prior to doctoral training, Wang received his BSc in Town and Country Planning at Nanjing Agricultural University in China.

Wang’s appointment sustains his focus in medical image analysis specific to development of novel methods for brain segmentation in infants in the study of early brain development. In 2014, Wang’s development of novel methodologies for the segmentation of infant brain images and cortical-surface-based analysis was ranked #1 in Medical Image Computing and Computer-Assisted Interventions (MICCAI)’s neonatal brain image segmentation challenge (NeoBrainS12) and MR brain segmentation challenge (MRBrainS13). In 2015, his work was also selected for Medical Physics journal’s cover page, as well as one of its “Editor’s Picks.”

“I am pleased to be a member of UNC’s Department of Radiology, which has accumulated great resources on infant brain image datasets and gathered many intelligent scientists. I am very excited to conduct basic research exploring the early brain development for normal and abnormal infant subjects. I look forward to contributing to the continued success of the Department in early diagnosis and intervention of neurodevelopment disorders.”
The Department welcomed **Laura Yarber Jones** in August 2015 as Project Manager of cancer epidemiology research studies in the Department's Epidemiology Research Division. In this new role with Division Director Dr. Louise Henderson's research group, Jones will be coordinating the lung cancer screening registry and the TEAM (Technologists' Effect on the Accuracy of Mammography) projects.

Jones received her BS in Integrative Biology from the University of Illinois at Urbana-Champaign in 2007 and her Master of Public Health (MPH) in Epidemiology in 2014 from Saint Louis University. From 2007 to 2011, she worked for "Teach for America" in Denver, Colo, as a middle school science teacher. From 2012 to 2014, she was a graduate research assistant at the Prevention Research Center and an epidemiology analyst intern at BJC HealthCare (both in St. Louis, MO). Most recently, Jones served as a medical assistant at Wake Forest Dermatology in Wake Forest, NC.

Though Laura’s previous work experience involved her in study design, survey implementation, and data analysis, the world of cancer research is a new direction for her. As Laura puts it: “I am excited to be working with such a talented team, and I look forward to learning from their expertise. ‘I have past experience working on isolated aspects of research studies, so I’m looking forward to working in-depth on two core projects and seeing how all of those pieces fit together.’"

In her free time, Laura enjoys playing volleyball, cooking, and cheering on her St. Louis Cardinals.

The Department welcomed **Lauren Burroughs** in August 2015 to its Epidemiology Research Division as Social/Clinical Research Assistant, working under Division Director Dr. Louise Henderson for the Carolina Mammography Registry (CMR). In her new role, Lauren will be responsible for the collection and abstraction of breast pathology and advanced imaging data from participating mammography practices into CMR’s database.

Lauren received a dual degree - BA in Biology & Anthropology - from UNC-Chapel Hill in May 2015. During her studies as an undergraduate, she focused primarily on gaining an understanding of human health and genetics from many different perspectives, both broad and specific. This knowledge has served her well thus far in her role at CMR as she strives to understand breast cancer from pathological and epidemiological standpoints. As an intern in the Quality Control Department at Novartis Vaccines & Diagnostics in Holly Springs, NC, during the summer of 2013, Lauren worked on a variety of sample management/organization projects. The skills gained during this experience have been directly translated to her work at CMR.

“I am very excited to have returned to UNC-Chapel Hill as a part of the CMR team. This position has presented many unique challenges, but I have enjoyed working through them and learning as much as possible from the experience. I look forward to continuing my work here with CMR and seeing where it takes me on my professional path in epidemiology research.”

The Department welcomed **Krista Sills** in September 2015 as Administrative Support Supervisor and as a member of its Business Office group. In her new role, Sills will oversee the department's administrative associates while working closely with division chiefs and faculty members to ensure adequate support for their functions within the Department. Sills received her BS in Healthcare Management from Liberty University in Lynchburg, VA, in March 2015, and is currently enrolled in Liberty’s Master of Public Health (MPH - Health Promotion) program. Within the institution, Sills worked previously from 2006-2015 at the UNC Eshelman School of Pharmacy, where she served as the Executive Assistant to the Executive Associate Dean, Executive Assistant within the PACE Division, and lastly the Executive Manager for the Continuing Pharmacy Education Program.

“My time within the School of Pharmacy taught me many lessons that I bring with me to the Department of Radiology. Most significant is my ability to work effectively and efficiently with all members of any department, from the Dean to students, residents, and fellows. Coming from a staff position and moving into a newly created supervisory position, I feel that my firsthand knowledge of staff member needs, faculty needs and expectations will allow me to effectively connect the two in order to create a positive, effective, and productive working environment for the entire department.

I am a positive person who believes that everyone is capable of ‘blooming where they are planted’ and that people can be encouraged to reach beyond their perceived limits to be the best they can be. I encourage and thrive off both positive and negative feedback and am looking forward to helping the Department of Radiology sustain its reputation as one of the strongest departments within UNC’s School of Medicine.”

The Department welcomed **Michele Vickers** as Clinical Research Coordinator in June 2015 to its Clinical Research Division. In her new role, Michele works alongside Director of Clinical Research Dr. Keith Smith, Clinical Research Coordinator Shanah Kirk and Medical Diagnostic Technologist Doreen Steed. A key part of Michele’s new position is establishing research subject support through clearly communicating such information as study purpose and protocols, as well as conducting assessment, screening and informed consent with newly enrolled patients. After completing studies, Michele also oversees data compilation and preparation for analysis.

For four years (2011-2015), Michele worked at UNC Lineberger Comprehensive Cancer Center (LCCC) as a Study Coordinator in the Breast Oncology group, coordinating various Center projects during this time under LCCC Director Dr. Norman Sharpless. In this role, Michele worked directly with Division of Oncology faculty Drs. Lisa Carey, Claire Dees and Carey Anders, assisting them with consent and treatment of (Phase I-III) patients enrolled in two of LCCC’s major funded clinical trials. Michele’s time as a Clinical Research Nurse with UNC Hospitals’ Clinical Transitional Research Center for six years (2005-2011), as well as overall as a nurse (LPN) for the past decade brings an invaluable hands-on skill set to her new role with the Department.

“My hands-on nursing experience around [UNC Health Care System]’s hospital network has allowed me to work in multiple areas already with many UNC physicians I now work with in my new Department of Radiology position. I’m pleased to add my skill set of assessing patients, coordinating, screening and treating patients to the overall dynamics of the clinical research group. My love for patient care has allowed me to experience and accomplish great things in research as part of great team work and dedication. As it’s said in patient care: ‘They may forget your name but they never forget how you made them feel!’”
Multiple UNC Department of Radiology, faculty, trainees and alumni are a part of American College of Radiology (ACR)’s large base of members, all of whom seek to advance the practice, science and professions of radiological practice. During the ACR’s “Crossroads 2015” meeting mid-May in Washington, DC, three Department faculty members – Drs. Charles Burke and Valerie Jewells (delegates for NC) and Sheri Jordan – and two trainees – (then) 2nd-year Diagnostic Radiology resident Dr. Scott Abedi and (June 2015 graduate) Neuroradiology fellow Dr. Melissa Davis – joined a North Carolina ACR delegation of radiologists and a radiation oncologists from across the state who participated in “Capitol Hill Day.”

The ACR’s Commission on Governmental Relations first prepped the North Carolina delegation of private practice and academic radiologists on how to discuss legislative issues impacting radiological practice with North Carolina’s Congressional representatives, U.S. Senators, and their health legislative advisors. The delegation successfully met with both of North Carolina’s U.S. senators and all except one of the state’s House of Representatives members.

During Capitol Hill Day, the delegation centered their dialogue with North Carolina officials around two issues:

1. **Multiple Procedure Payment Reduction (MPPR)** – A Centers for Medicare & Medicaid Services (CMS) billing standard which currently reimburses 25% less for the professional component of advanced imaging referred in the same day. CMS proposed a 50% reduction in 2011, lowering it to 25% in 2012, all without any data backing the reasoning behind either proposed reduction. The ACR has quoted peer-reviewed papers during this time period that refute CMS statements that well-founded data support this reduction in reimbursement. Congress therefore asked for data to substantiate the cuts approximately one year ago, and CMS still has not produced it. The ACR is therefore asking for repeal of the MPPR. In May, the North Carolina delegation lobbied for repealing the MPPR on behalf of the national ACR, as well as for CMS to demonstrate transparency with any further attempts to instate reductions.

2. **U.S. Preventive Services Task Force (USPSTF) mammography recommendations** – The USPSTF has taken a controversial stance on mammogram frequency, recommending an end to mammograms in women 40-49 and 74+, and every other year for women ages 50-74.

   Joined by the American College of Obstetricians and Gynecologists (ACOG), and the American Cancer Society (ACS), the ACR recommends yearly mammograms in women 40+ who remain healthy.

   In May, the North Carolina delegation discussed with elected officials the ACR’s condemnation of the USPSTF’s stance on mammography, as well as the ACR’s support of USPSTF Transparency and Accountability Act of 2015 (H.R. 1151) introduced in [spring 2015 in] the House of Representatives. H.R. 1151 would hold the USPSTF accountable to emerging scientific evidence in evolving its published mammography guidelines.

   North Carolina Radiological Society (NC ACR) President and Associate Professor of Radiology Dr. Charles Burke reflected: “It is critical that all radiologists get involved [in these issues]. Legislation such as the [MPPR] and the operations of important groups such as the [USPSTF] play a major role in our practice and the care of our patients. How can we expect our elected officials to make the right choices for our patients unless we make the effort to educate them on the issues?”

   Dr. Abedi recapped: “Both of the issues we lobbied involve a lack of transparency and have a direct effect on patient access to radiology services. Regarding [MPPR], a 2011 peer-reviewed *JACR* article* has shown that true ‘gains in efficiency’ of reading multiple studies for the same patient are closer to 3-5%, depending on modality. The reductions apply even when multiple radiologists read individual studies. Our delegation believes reducing the reimbursement for the professional component, especially without justification, will result in limiting access for patients who really need to have multiple scans at once.”

   Regarding the controversial USPSTF mammography recommendations, the task force’s own data show that more women will die due to their change in stance, but they rationalize it by claiming that the harms of screening, like anxiety of biopsies, false positives, outweigh the benefits of extra lives saved. On Capitol Hill Day, we were pleased to discuss with North Carolina leaders ACR’s recent backing of H.R. 1151, especially given the influence that USPSTF on clinical care decision-making across the U.S.”

   As Associate Professor of Radiology Dr. Valerie Jewells noted: “When meeting with several congressional members on ‘Hill Day,’ the ACR delegation found no opposition by these members to either of our items. They instead were in full support of the issues I was there to support alongside Drs. Davis and Abedi, as well as Drs. Catherine Everett [of Coastal Radiology Associates] and Dr. James O’Brien [of Mecklenberg Radiology Associates]. In meeting with Representative Patrick McHenry [R – NC 10th District], he affirmed the issues we presented as the kind of bills elected officials like to see to enforce accountability.”

Diane Armao, MD, (Co-Investigator) and Steven J. Gray, PhD, (Principal Investigator; UNC Department of Ophthalmology & Gene Therapy Center) received an NIH R01 last spring (April 2014) for their research entitled, “Giant Axonal Neuropathy Gene Therapy (GAN, OMIM #256850).” Keith Smith, MD, PhD, and Hongyu An, PhD, are serving as quantitative analysis and diagnostic assessment consultants for the small animal research 9T MRI component of this study. This NIH-funded basic science research leveraged a collaborative effort between UNC and National Human Genome Research Institute investigators in spring 2015 to begin an NIH clinical trial employing gene therapy for children with Giant Axonal Neuropathy (GAN). Posted recently on clinicaltrials.gov https://clinicaltrials.gov/ct2/show/NCT02362438?term=giant+axonal+neuropathy&rank=1

Principal Investigators Diane Armao, MD and Keith Smith, MD, PhD, and Co-Investigator Terry Hartman, MPH, MS, CCRC, were recognized and cited in an August 2015 American College of Radiology article – “Imaging 3.0 Case Study: A Community Toolkit (ACR Imaging 3.0)***” – highlighting their recently completed NC TraCS Institute award* entitled, “UNC Department of Radiology and UNC School of Public Health Community Research Partnership Project: A Pilot Study aimed at the Dissemination and Implementation of Best Practice Guidelines in Pediatric CT Scan Radiation Dose Reduction.”

* Dissemination & Implementation Science Award supported by the National Center for Advancing Translational Sciences (NCATS), National Institutes of Health, Grant Award Number 1UL1TR001111


Wui Chong, MD, and co-investigators received a North Carolina Translational and Clinical Sciences (NC TraCS) Institute $100,000 “Improving Human Health” pilot award in July 2015, supporting the team’s 18-month project entitled, “New Approaches to Characterizing Cystic Kidney Lesions in Patients with Chronic Kidney Disease.” Chong’s team was one of two inaugural awardees selected for demonstrating high potential to accelerate the development of novel therapeutics/diagnostics toward the overall goal of improving human health (Authors: Chang E, Chong W, Dayton P, Rathmell K).

Wui Chong, MD, was appointed to the Radiological Society of North America (RSNA)’s “Quantitative Imaging Biomarkers Alliance (QIBA) US Shear Wave Speed Biomarker Committee” in May 2015.

Wui Chong, MD, was appointed to the American College of Radiology (ACR)’s “Commission on Ultrasound” for a one-year, renewable term in May 2015.

Wui Chong, MD, was appointed to the American College of Radiology (ACR)’s “Economics Committee on Ultrasound” for a one-year, renewable term in June 2015.

Lynn Fordham, MD, was appointed to the Pediatric Radiology Subcommittee of the Scientific Program Committee of the Radiological Society of North America (RSNA) for a three-year term in October 2015.

Lynn Fordham, MD, was appointed Operations Committee Vice-Chairperson to the American College of Radiology (ACR)’s Patient- and Family-Centered Care Commission in October 2015.

Lynn Fordham, MD, co-authored a joint UNC/North Carolina State University scientific exhibition – “Repeatability of Fiducial Markers to Define a Joint Coordinate System Using 7T MRI” – presented at the Biomedical Engineering Society’s Annual Meeting in Tampa, FL, in October 2015 (Authors: Cone, S, Rennard, T Fordham L, Fisher M).

Drs. Valerie Jewells and Zibo Li were awarded one-year funding ($39K) in August 2015 by the North Carolina Translational and Clinical Sciences (NC TraCS) $5K - $50K Translational Research Matched Pilot Grant Program for their grant application entitled, “Utilization of [18] F-iNOS for In Vivo Biokinetic and Disease Expression Evaluation in Cuprizone Mice.”

Amir Khandani, MD, served as a Visiting Professor at the Montefiore Medical Center's Department of Radiology at the Albert Einstein College of Medicine in October 2015.

Cherie Kuzmiak, DO, presented, “Update in Breast Cancer Imaging and Molecular Classification” in September 2015 as a part of UNC Lineberger Comprehensive Cancer Center (LCCC)’s Telehealth Medical Lectures series, broadcast periodically to large and small oncology practices across North Carolina.


Cherie Kuzmiak, DO, presented, “Digital Breast Tomosynthesis: Principles & Practice” (resident lecture) and “Molecular Classification of Breast Cancer” (Grand Rounds) as a Visiting Professor at Georgetown University’s Department of Radiology in September 2015.


Dinggang Shen, PhD, received a National Institute on Aging (NIA)-funded R01 award in August 2015 for a five-year, collaborative project with UT-Arlington researchers entitled, “Imaging Genomics based Brain Disease Prediction.”


Terry Wong, MD, PhD, served as the Singapore Ministry of Health’s 2015 Healthcare Manpower Development Plan (HMDP) Visiting Expert in Nuclear Medicine at Singapore General Hospital in August 2015. Wong’s duties as Visiting Expert included weeklong visits to healthcare and research facilities in Singapore, meeting with hospital faculty and residents, and presenting 12 lectures on a range of Nuclear Medicine and Molecular Imaging topics.

Terry Wong, MD, PhD, presented, “Molecular Imaging and Theranostics Using Radiopharmaceuticals” at Duke University’s Center for Molecular and Biomolecular Imaging (themed “Chemistry Meets Imaging: Molecular Routes to Enhance Contrast” at the 2015 Annual Meeting) in Durham, NC, in May 2015.

Drs. Terry Wong, Zibo Li, Hong Yuan and Eric Smith were tapped in September 2015 to lead the new Translational Cancer Imaging (TCI) shared resource at Lineberger Comprehensive Cancer Center. The renovated expansion of the Biomedical Research Imaging Center (BRIC)’s Small Animal Imaging core will facilitate the TCI’s human clinical research with state-of-the-art imaging modalities and radioisotope production.

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UNC Outreach Expands Services to Include Screening Mammography at North Carolina Correctional Institution for Women (NCCIW)

In early September, the UNC Department of Radiology outreach division strengthened what it could offer the State of North Carolina by starting a comprehensive screening program for the NC Correctional Institution for Women (NCCIW), located in Raleigh, NC. Several years ago, the facility purchased a GE Essential Mammography unit. Due to staffing problems and accreditation complexities, however, it had yet to use the machine on any patients. In spring 2015, James Alexander, the NCCIW’s Health Treatment Administrator, approached our outreach group about initiating a turn-key project to enable mammography screening for patients at NCCIW, as well as Eastern Correctional Institute (Maury, NC) and Southern Correctional Institute (Troy, NC).

Led by the Department’s Outreach Coordinator Dixie Aker, RT(R)(M)(BD),CBDT and Breast Imaging Division Chief Dr. Cherie Kuzmiak, the outreach team took over the process of obtaining Food & Drug Administration (FDA) facility accreditation, American College of Radiology (ACR) accreditation (pending), overseeing physicists' testing and acceptance, developing patient tracking procedures, and staffing a Mammography Technologist.

The start-up of a comprehensive screening program at NCCIW has been a great success for all parties involved. The effective utilization of the mammography unit has reduced cost to the State of North Carolina, improved turnaround times, and increased the availability and improved access to screening for a traditionally underserved population. Additionally, follow-up diagnostic exams and procedures are now referred to UNC Health Care for mammography care. In the past six months, the outreach team is pleased to have undertaken an initiative that ensures easier access and continuity of care for a designated North Carolina patient population.