



Celebrate Education

In this edition of the Department of Medicine newsletter we celebrate our 2011 graduates who have completed various courses of study ranging from bachelor to doctor of philosophy degrees. Kudos to all for reaching these milestones. We wish them all success as they embark on the next phase of their education/careers.

Education is one of the cornerstones of any academic department and especially a department of medicine. Often we get caught up in our day-to-day responsibilities, whether it be patient care, grant preparation, or the business of medical practice, and it can be easy to lose sight of this vital part of our mission. We should celebrate the achievement of our graduates.

I hope that next year the faculty of our department will have a larger presence at the graduation ceremonies, not only to show our students how much we have enjoyed teaching them, but also to re-enforce that indeed education is our *raison d'etre*.

*Richard M. Silver, MD.
Distinguished University Professor
and Interim Chairman*

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On the Calendar:

Independence Day
Holiday - July 4th

Save the Date!

Faculty Convocation
August 23rd at 4:30 pm
Basic Science Bldg #100

2011 Graduates

Whether enrolled in a degree seeking program, attending continuing medical education lectures, or reading journals, we are all constantly engaged in learning and re-learning as much as we can in order to best serve our patients. We are pleased to announce that a number of faculty and staff have earned new academic credentials this year. They include:

Medical University of South Carolina

Doctor of Philosophy in Biomedical Sciences (PhD):

Emily Van Meter – August 2010 (biostatistics)

Mary Shotwell – December 2010 (biostatistics)

Matthew Shotwell – December 2010 (biostatistics)

Jody Ciolino – May 2011 (biostatistics)

Leslie Hart – May 2011 (epidemiology)

Molecular Cellular Biology & Pathobiology Program (PhD):

Philip Moschella

MD and Masters of Science in Clinical Research

Brandi Eastman Stevens

David Gray

Amanda Williams

Bachelors in Health Sciences:

Rebekah Walton

American Military University

Masters in Public Health (with honors):

Stephanie Youngerman

The Citadel

Masters of Arts in Biology

May Amria

Medical College of Wisconsin:

Master of Arts in Bioethics

Walter Limehouse, MD

Strayer University

Bachelors in Business Mgmt/Human Resources

Tyebna Taylor



June Watson, Student Services Program Coordinator from Biostatistics & Epidemiology shared this photo of **Mary and Matt Shotwell** (the same couple featured on the second page of the Catalyst last week).

The Drs. Shotwell met as students here, both working on Dr. Elizabeth Slate's training grant, married, and finished in December 2010 with Baby Luke born on Good Friday. It is a special story to the Division of Biostatistics & Epidemiology, and they were all excited to get to meet the young man when mom and dad returned for the commencement activities.

Yanqiu Weng wins Travel Award



Yanqiu Weng, a PhD student in the Division of Biostatistics & Epidemiology won a travel award to the Southern Regional Council on Statistics (SRCOS) Summer Conference in June 2011. The title of his presentation for the conference is "Impact of safety monitoring on type I error and power of efficacy analysis in phase III group sequential clinical trial with binary endpoints."



Shown above (front row left to right) Dr. Kim Davis, Dr. Rogers Kyle, Dr. Leah Clanton
(Back row left to right) Dr. Andrew Schreiner, Dr. David Walsh, Dr. Bruce Usher

Internal Medicine Residency Awards

The Internal Medicine Residency Program held their Annual Award Ceremony on June 1st to recognize outstanding educators and trainees. The awards given out were:

Resident of the Year: **Andrew Schreiner**

Intern of the Year: **David Walsh**

Fellow of the Year: **Matthew DiVietro**

Michael E. Assey Attending of the Year: **Rogers Kyle**

Ambulatory Teacher of the Year: **Kim Davis**

Division of the Year: **General Internal Medicine and Cardiology**

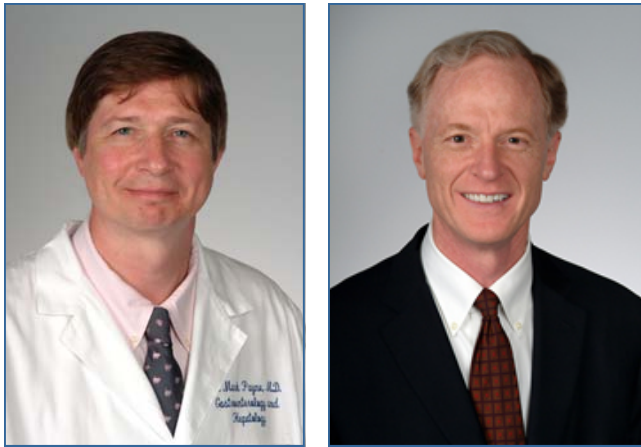
Inpatient Resident of the Year: **Sam McNulty**

Outpatient Resident of the Year: **Andrew Schreiner**

Aging Q3 Resident of the Year: **Leah Clanton**

Aging Q3 Resident of the Year: **Lauren Angotti**

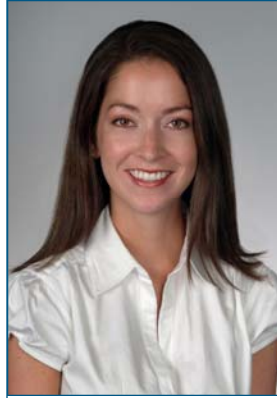
Drs. Payne and Adams to be DDC Co-Medical Directors



Patrick Cawley, MD, MBA, Executive Director of the Medical Center recently announced that **Dr. Mark Payne and Dr. David Adams** have been appointed Co-Medical Directors of the Digestive Disease Center Service Line at MUSC. In their new positions, Dr. Adams and Dr. Payne will assume strategic leadership and planning roles for the Digestive Disease Center, working closely with MUSC, MUHA and UMA leadership.

Dr. Adams is Chief of the Division of Gastrointestinal and Laparoscopic Surgery and Professor of Surgery. Since arriving at MUSC in 1986, he also has served as Medical Director, One West Trauma Center, Program Director in the General Surgery Residency training program, and is currently Course Director of the MUSC Annual Postgraduate Course in Surgery.

Dr. Payne is Chief of the Division of Gastroenterology and Hepatology, Director of the Gastrointestinal Endoscopy Service and Professor of Gastroenterology at MUSC. Dr. Payne is a member of MUSC's Mission-Based Management Committee, the Department of Medicine Compliance Committee, and the Conscious Sedation Committee. Dr. Payne's clinical interests include advanced endoscopy, pancreatobiliary endoscopy, hepatology and clinical service management and administration.



Inpatient Consults Attending's Need to Document the Date & Time of Exam

The date of your face-to-face inpatient consult visit will soon be a required field in the "Inpatient Consult-Attending Comments" attestation in Practice Partner. Please use this template attestation for your inpatient consults. This is important so that the correct date of service is extracted by your coder. It is also important for the attending to authenticate the Practice Partner consult note within 24 hours of the resident to insure appropriate billing.

The attending must also write a note in the inpatient chart to reflect that the patient has been seen including the date and time as well as preliminary recommendations for the patient's care.

There will be periodic auditing to help the physicians understand their performance and to ensure compliance and accurate billing. Please make it a habit to include the date of your visit on your inpatient consults in Practice Partner.

Annie Lee Sallee 792-3945
Clinical Revenue Mgr, Department of Medicine

Reminder - Faculty Evaluations and Contracts:

Department of Medicine Faculty should be meeting with their respective Division Directors to complete annual performance evaluations and sign their annual contracts. Deadline for submitting completed packages to the Department of Medicine is July 7th.



Molecular and Cellular Biology and Pathobiology Program Update

Message from Donald Menick, PhD
Director, MCBP Program, Professor, Cardiology

One of our students in the MCBP Graduate Program, **Phillip Moschella**, graduated this May. His mentor was Dr. Dhandapani Kuppaswamy in Cardiology. Philip was also one of our Pre-Doctoral Fellows on the NIH T-32 Cardiovascular Training Grant. Phillip will be leaving after graduation to accept a position in Emergency Medicine at the University of Cincinnati in Cincinnati, Ohio.

Secondly, **Dr. Mona Shirlin Li**, a Post-Doctoral Fellow on the NIH T32 Cardiovascular Training Grant, will be leaving the Training Grant at the end of May to accept a position as Assistant Professor of Surgery, Department of Surgery, Division of Vascular Surgery, at the University of Cincinnati in Cincinnati, Ohio. Dr. Li has been a Post-Doctoral Fellow in my laboratory.



National ACC Meeting

Eric Powers, MD, Professor and Director of the Heart and Vascular Service Line, represented South Carolina at the National American College of Cardiology meeting on

STEMI care "Emergency Cardiovascular Care 2011" in Chicago on May 20 and 21.

Dr. Carr earns AMIA 10x10 Certification



Dr. Christine Carr, Assistant Professor in Emergency Medicine, has earned the AMIA 10x10 Certification in medical informatics from the American Medical Informatics Association. The 10x10 program was started when former AMIA President Dr. Charles Safran asserted that the United States needs one physician and one nurse trained in medical informatics in each of the 6,000 hospitals in the United States. Dr. William Hersh of Oregon Health & Science University (OHSU) operationalized this definition by working with AMIA to launch the 10x10 program that aims to train 10,000 health care and related professionals in biomedical and health informatics by the year 2010. The needs are equally strong outside the United States in the rest of the world.

The 10x10 program aims to provide introductory training to build the workforce that will enable information technology to improve the quality, safety, and cost-effectiveness of healthcare and public health. Since the program was launched in 2005, over 900 people, mostly from the US but also from a variety of international locations, have completed the course. About 15% of those graduating have gone on to advanced study in the field.

The goal of the AMIA-OHSU 10x10 course is to provide a detailed overview of informatics to those who will work at the interface of healthcare and information technology. It also aims to provide an entry point for those wishing further study (and career development) in the field. The course provides a broad understanding of the field from the vantage point of those who implement, lead, and develop IT solutions for improving health, healthcare, public health, and biomedical research. It provides up-to-date details on current events in the field, including the "meaningful use" of electronic health records specified by the Health Information Technology for Economic and Clinical Health (HITECH) Act of the American Recovery and Reinvestment Act (ARRA, also known as the economic stimulus package).

Aging Q3 Focuses on Resident Education in Geriatrics



Aging Q3 is a 4 year project in the Division of General Internal Medicine and Geriatrics funded by the D.W. Reynolds Foundation. In any month, University Internal Medicine residents in Rutledge Tower see over 800 patients 65 years of age or older, more than a quarter of all patients seen by Medicine residents. Results from an internal 2008 educational survey suggested a moderately low level of confidence from our Internal Medicine residents in addressing common geriatric syndromes and aging-related conditions. The Aging Q3 program utilizes these results to identify 16 geriatric topics to target for the education-based program. Although the primary intervention of Aging Q3 is focused on improving resident education in geriatrics, the end result is better quality care provided to our older patients.

Every 3 months, the faculty introduces a new geriatric module, using lectures and clinical educational experiences. Residents attend a lecture on the geriatric topic during a noon conference. Those residents who miss the lecture can view it on Tegrity via the Aging Q3 website at <http://mcintranet.musc.edu/agingq3>. The faculty and nursing staff also attend lectures to learn about key points of geriatric care and their own professional role in the educational process. Following the initial resident education stage of the module, the clinical care process for the module topic is implemented.

The topic-specific clinical process, developed and implemented in UIM, has older adult patients identified by registration staff. Medical assistants then ask these patients questions regarding the specific geriatric module topic to potentially cue a resident to address during the office visit. If cued, the resident discusses the patient's evaluation and management and whether any treatment is planned, with the faculty member. Thus, Aging Q3 is a team-driven, multidisciplinary program, with close collaboration required for success. Registration staff members initiate the process, medical assistants and nurses support the residents in evaluation and management, and pharmacists work closely with residents to assure safe medication management and minimized side effects. Practice Partner analysts provide technical support with the EMR template design, and research faculty perform data management educational evaluation. Actual time involved for this fast paced educational and clinical process is less than 10 minutes. The resident evaluation and management plan is recorded in Practice Partner.

The most recent modules have included medication safety, preventive care, hospital to home care transitions, and end of life care. Future modules include osteoporosis, acute and chronic pain management in older adults, and osteoarthritis. In fact, you may see UIM patients carrying Aging Q3 labeled materials such as a medication bag, pill box, or exercise stretch band, all of which remind patients of Aging Q3 interventions.

The GIM faculty, staff, and residents have been successfully engaged in Aging Q3. When asked for their comments about Aging Q3's impact on their clinical practice, one resident said that Aging Q3 has prompted him to more closely consider the different physiological changes older adults experience. Another hopes to be able to carry forward principles learned during the project in their own practice. Dr. Ben Clyburn says Aging Q3 has a positive impact on education in geriatrics. "...Aging Q3 has put important geriatric issues on the resident's radar and has facilitated the faculty in conducting direct observations of resident performance on skills such as the Timed Up and Go and fundoscopic exams."

A 2011 follow-up resident survey shows an increased level of confidence in geriatric care. Aging Q3 is having a positive impact on resident training and older patients clinical experience at MUSC, and we think MUSC Medicine residents will be better prepared to provide high quality care to the increasing number of older adults they will see in practice.

For more information about Aging Q3, please visit our website at <http://mcintranet.musc.edu/agingq3> or contact Dr. Bill Moran, moranw@musc.edu or Patty Iverson, Project Director at Iverson@musc.edu.

Ingenious Med – A New Way to Capture Your Inpatient Effort



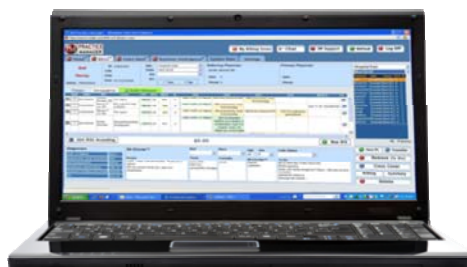
“How are my inpatient services really captured?” “What are the outcomes of my last two weeks’ effort?” “How do I know they bill for my inpatient services?” These are questions often asked, and the answer currently is very complicated to say the least. There is finally a solution. The Department of Medicine has decided to step out of the box in order to improve the inpatient outcomes not only to instill confidence in what the administrative staff is doing on behalf of the provider to ensure appropriate reimbursement, but to allow the physician to select their level of service, even instantly, and have proof that all inpatient effort is captured.

Ingenious Med is an internet-based inpatient charge capture system that was developed by physicians, for physicians. Each physician can choose to either enter their daily charges at their own desktops, nursing unit stations, or with their portable hand-held device such as the iPhone or iPad while on inpatient rounds.

Ingenious Med is scheduled to go-live initially with only the General Internal Medicine and Pulmonary physicians on August 1st. All other divisions will begin use shortly thereafter. Small work-groups will be scheduled for all to receive training. Ingenious Med representatives will be immediately available to ensure a smooth transition. With any change, there may be some challenges, but this system has proven its value in other institutions like Emory, Louisiana State University, University of Tennessee, as well as our Charleston neighbor, Roper St. Francis. In fact, Emory realized a \$45,000 net revenue increase per physician FTE after implementation, and we expect the same successful outcome for the DOM. Ingenious Med is our answer to inpatient revenue enhancement and improving the outcomes for the work that you are already doing.

Current Situation	Ingenious Med as a Solution
Paper-based charge capture & entry with no true tracking mechanism for missed services	Convenient, real-time electronic charge capture
Coder extraction and selection of level of service rendered	Physician selection of level of service rendered; IM provides quick, user-friendly tools to ensure compliance and accurate billing
100% reliance on coder’s due diligence in finding the work physicians are doing	The coder no longer will be shuffling papers, but will be focusing effort on monitoring charges and providing real-time feedback

If you have any questions please contact the Project Lead, Annie Lee Sallee at logue@muscd.edu or 792-3945.



Scheduling a Meeting via Outlook Calendar

Many of our administrative staff are finding it is more efficient to schedule on campus meetings via the Outlook Calendar tool than the "old way" of asking invitees to indicate the times and days they are available ... and then trying to find a common date and time.

To schedule a meeting:

In Calendar, on the Actions menu, click Plan a Meeting. Click Add Others, then click Add from Address Book.

In the Type name or select from list box, enter the name of a person or resource (conference room) you want at the meeting. For each name entered, click Required, Optional, or Resources. (The Required and Optional attendees appear in the To box on the Appointment tab, and Resources appear in the Location box. To get details on a conference room, click it in the Resources list, and then click Properties.) Click OK.

Click a time when all invitees are available (indicated above by gray column with a green stripe on one side and red on the other). You can use **AutoPick Next** to find the next available free time for all invitees. (The purple blocks above indicate when an invitee has another appointment on their calendar.)

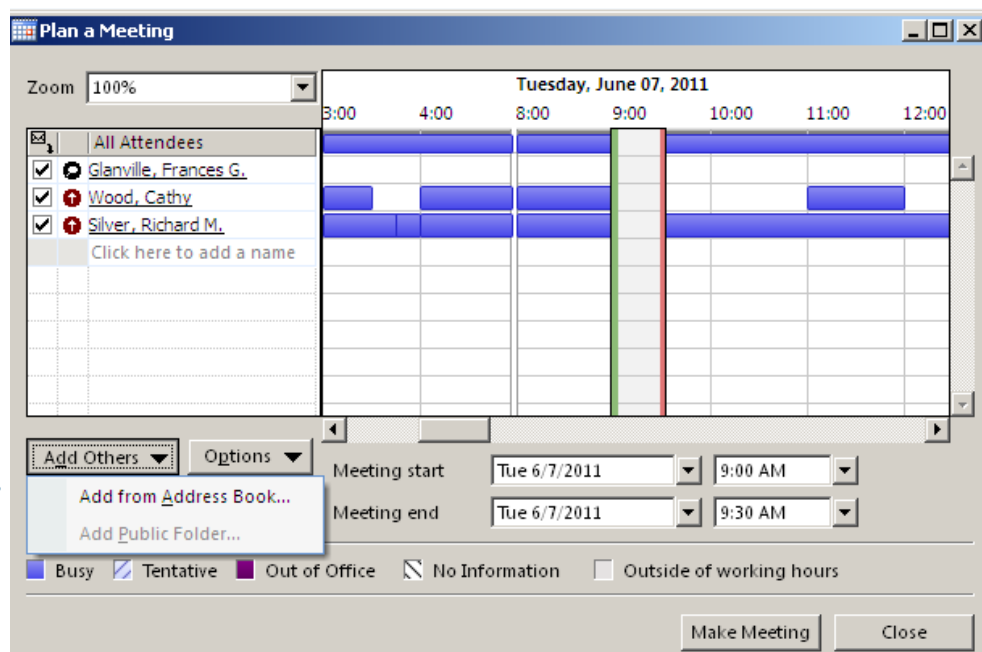
Click Make Meeting. In the Subject box, type a description. If you did not schedule a room, enter the location in the Location box. If you want to make the meeting recurring, click Recurrence, and then select the recurrence pattern. Select any other options you want. Click Send.

Recipients will receive an email inviting them to attend the meeting, when they open the email they will be given options to accept, tentatively accept or reject the meeting request. These replies are sent to the individual who initiated the invitation. The coordinator can also open the meeting on their calendar to view a list of responses to confirm who is planning to be in attendance.

Alternatives:

Doodle - is a free on-line tool that helps schedule meetings and other appointments involving a group of participants. Doodle is especially useful for coordinating the availability of **participants outside MUSC** or those who do not use Outlook's Calendar feature, because it allows participants to indicate their availability from a choice of dates/times established by the meeting scheduler.

Survey Monkey. Is a free online tool that allows users to create their own Web-based surveys that can be distributed to participants via email. The survey responses are then easily consolidated for all responders.



Join us in saying YES!



YES Campaign 2011: “Every Gift Counts”

The 2011 YES Campaign is underway and will continue through June 30th. The theme of this year's YES Campaign is “Every Gift Counts.” We hope you will join us in saying YES this year!

Funds raised through the YES Campaign directly support the University and its programs. The goal of this year's campaign is to raise \$300,000. We are encouraging faculty and staff within the Department of Medicine to give back this year. Gifts can be made online at <http://alumni.musc.edu/yes/>.

A list of our Departmental funds and descriptions can be found online at <http://clinicaldepartments.musc.edu/medicine/giving/yes.htm>

UMA employees will have the opportunity to designate their gift to any MUSC fund and gifts of \$250 - \$500 will be matched dollar for dollar.

For any questions or for more information on this year's YES Campaign please contact Jane McCullough, 792.4280 or mcculloj@musc.edu, or Melissa Hughes, 792.4851 or hugh@musc.edu in the Department of Medicine, Development Office.

CARTA & Tri-county Link - Alternatives to high gas prices

While many of our employees are aware of the benefits of using CARTA to get around the Charleston area, they may not be aware of the services of the Tri-county Link bus system - a separate transportation system that **extends the ability to ride public transportation into downtown Charleston from Summerville, Ridgeville, Moncks Corner, Hollywood, and other parts of the surrounding area.** The Buses (and parking areas) on both systems are clean and safe - and the drivers and other riders are professional, friendly and helpful.

For example, to get to MUSC from Summerville: take the Tri-County Link (<http://www.ridetricountylink.com>) #2 Dorchester route - park at Berlin G Meyers & 78 in the old Kmart parking lot. Cost for MUSC riders (don't forget your badge!) to go from Summerville to the N. Charleston CARTA hub on Rivers Ave is \$1.25. The 'Link runs about every 30 minutes from 5:45 am to 7:35 am then again they run 4:40 pm - 6:55 pm about every 30 minutes. (The “Link” will also arrange alternate pick-up and drop-off points at most locations along their routes for individual passengers!)

In N. Charleston switch to the CARTA #1 express to Calhoun at Jonathan Lucas Street. All rides on CARTA (<http://www.ridecarta.com/home/default.aspx>) are free with an MUSC badge. The expresses also run about every 30 minutes from 5:19 am - 8:19 am for the morning run and then resume again at 3:50 pm until 6:50 pm every 30 minutes. (You can also park at the CARTA hub if you want to.) This particular express route circles out to James Island, another goes to Citadel Mall and Mt. Pleasant.

Coming home...do it all in reverse, but the thing to know is that when you get on CARTA at MUSC you need to ask for a transfer slip - they cost 30 cents. Take the transfer slip and give it to the Tri-county Link driver when you transfer to the 'Link in North Charleston - that is all you need to get you back to Summerville.

Round trip Summerville to MUSC and back - \$1.55! Exact bus times and the other available CARTA and Tri-County Link routes are available on the sites mentioned above. Check them out! You'll be amazed at how far you can go around the tri-county area!



These photos are of the “**Huff the Magic Dragon**” team - one of the teams consisting primarily of individuals from MUSC.

Dragon Boat Festival 2011

The third annual Dragon Boat Festival was held in Charleston on May 14th with proceeds supporting cancer survivor programs (www.dragonboatcharleston.org). Sixty-three teams paddled 41-foot-long Chinese dragon boats in 250-meter races on a choppy Ashley River. Dragon Boat Charleston Director Sterling Hannah said the event raised nearly \$72,000 for local cancer survivor programs.

According to Dr. Robert Fenning from our Hematology/Oncology Division, “The initial group was called Dragon Boat Charleston, started in 2003 by Sterling Hannah, Dr. Cindy Carter and Janet Bloch, for breast cancer survivors. The group started with 18 members including Leslie Kendall from administration, her husband Rob Dunlap from NOAA, with great boat skills, myself and 15 cancer survivors. We now have close to 140 members and have sent teams all throughout the USA, Canada and Prague.”

The teams from MUSC included:

Dragon Assets (This team consisted mainly of personnel from Facilities and Engineering, plus Dr. Brandon Craft, Dr. Robert Fenning and Joe Gough from the Department of Medicine.)

Huff the Magic Dragon (This team consisted of mainly personnel from Hematology/Oncology & HCC, and Pamela Ferguson from Biostatistics. Jessica Lynn Shaw was captain.)

Marketing (This team consisted primarily of personnel from hospital marketing.)

ReSurge (This team consisted primarily of personnel from the Provost Office.)

Megan Hicks Research Specialist II Nephrology



What do you like about working at MUSC?

I like the autonomy. I'm given the time and space to perform my job. I appreciate the trust given to me to run entire studies from start to finish.

What's your job?

I'm an animal surgeon that also processes samples, works a multitude of complex spreadsheets, orders lab supplies, cleans the lab, etc. I have even been known to sort the division's mail when I have a down moment.

Any outside of work interests you'd like to share?

I'm a crazy animal lover (despite what my duties at work have me do).

If you could have any career, what would it be?

Veterinarian

Favorite book?

I'll Always Love You By Hans Wilhelm

Strangest day you've had on the job at MUSC?

Considering what I do on a daily basis I'd say every day is strange. Almost no one outside MUSC can quite handle me telling them what I do and even a few within.

Employee of the Quarter Nominations for this quarter are due June 30th



Nominations can be submitted on line at:

<http://clinicaldepartments.musc.edu/medicine/administration/admintoolkit/serpform/serpform.htm> or via email to medcomm@musc.edu

Carla Huggins Administrative Specialist II General Internal Medicine & Geriatrics



What do you like about working at MUSC?

I like meeting people from different backgrounds and cultures. My co-workers are especially fun and pleasant people to work with. My supervisor is very understanding. My most rewarding experience is helping patients understand the process of obtaining their medical records.

What's your job?

My job duties include retaining medical records for daily clinic appointments, processing release of information requests and scanning medical records from outside sources.

Any outside of work interests you'd like to share?

I also enjoyed singing with CSO Gospel Choir. Love visiting Royal Missionary Baptist Church where Rev. Holt is the pastor. Love old black and white movies.

If you could have any career, what would it be?

My career choice would be working in the Human Resources Office as a Manager.

Tea, Coffee, Soda or Water?

Sweet Tea tasty with a southern twist.

Strangest day you've had on the job at MUSC?

My strangest day is when I printed a patient lab and went the copier to pick-up and it was gone. Walked back to my desk and printed another one, went back to the copier and the first copy appeared!

Anything else you'd like to tell us?

I am presently attending Virginia College. I'm a mother and grandmother.

Excellent Comments



I have never met a more friendly or caring staff. I am so impressed with the service we received I told everybody. We are from Spartanburg, SC, but it's worth the drive. I've never felt such a personal touch. **Dr. Judson** is a wonderful doctor and saw us thru the diagnosis and **Heidi Grund**, his nurse (left), has been so accommodating and his admin assistant **Rebecca Strickland** (right) has been great.

Dr. Corey Hatfield was very informative & explained the treatment & disease well to me.

I have to say that **Dr. Edwin Smith** is one of the neatest doctors I've ever met. I liked him immediately and felt completely safe and that I had his complete attention. He is very easy to talk to and he also has a very calming presence about him. I am completely and truly blessed to have found Dr. Ed Smith. I hope that he will read this.



He has already helped me a lot!! The ladies at the front check in are the most sincere and friendly greeters I've run into. They are a hoot and I am always happy to see them. Kudos to you all.

I was extremely pleased with my referral to **Dr. Wharton and his staff**.

I can say only for me, MUSC is the best that South Carolina has. Keep up the good work that you have with nursing and doctors. Also, the rest of the departments work so well. [**Cardiology**]

Dr. Kwon is excellent as is the office and staff.

My oncologist is the superior in his field. MUSC Charleston did well to employ **Neil Christianson**, my oncologist.



Have been going to this group since 2004. The **nurses, chemo nurses, office staff** have all been wonderful to me, as well as the **pharmacist**. The doctors have changed over the years but now I am under **Dr. Neil Christianson's** care. I find him very knowledgeable and confident. I am glad he is my doctor

Dr. Vogt is an excellent doctor as is the staff and office. We love MUSC Specialty office.

I have not been feeling well for over 2 years. During my last hospital stay in June 2010, I was transferred from Trident in North Charleston to MUSC after 4 days because Trident did not have a gastro doc to look after me. The one available wasn't taking new patients. After being transferred to MUSC and getting the best in hospital medical care I've ever had, I decided to start getting all of my health care (except DCM) through MUSC. My PCM referred me to a hematologist that practiced out of Trident - I switched the referral to MUSC. That's when I met **Dr. Afrin and Kathy**, his nurse. I was in tears after my first visit with Dr. Afrin. He actually listened to me and understood my case and the frustration that I had with going to doctors and either being misdiagnosed or not diagnosed at all. I've been seeing him and Kathy for months now and I have to tell you that I haven't felt this good in over 3 years. Dr. Afrin and I together are treating me. I feel very, very fortunate to have him as my doctor and Kathy as my nurse. They are a great team who really know their medicine and care about their patients.

Medicine Grand Rounds

*All lectures are held in the IOP Auditorium
each Tuesday at 8:00am
CME credit applies if you have
signed/swiped in by 8:15 am.*

June 7 **"What's In the News?
The Top 8 Questions Asked
by Patients About Bone Health"**



Marcy B. Bolster, MD
Professor
Rheumatology & Immunology
MUSC

June 14 **"Vitamin D - What's new in 2011"**



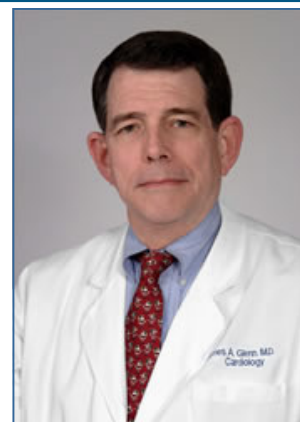
Diane Kamen, MD
Assistant Professor
Rheumatology & Immunology
MUSC

June 21 **"To be announced"**



Thomas M. Todoran, MD
Assistant Professor
Interventional Cardiology
Director of Vascular Medicine
MUSC

Thank you Dr. Glenn!



Dear Dr. Powers,

I am the Supervisor of the Referral Call Center, MEDULINE, and when rounding with our Customer Service Representatives, **Dr. James Glenn** is recognized every time for exemplifying MUSC Excellence in his interactions with our Call Center. He is always kind, friendly, and respectful to the staff. We all enjoy taking his calls and feel that he is one of MUSC's most admired physicians. It's no wonder that his patients think so highly of him.

Sincerely,

Susan Lucas

Susan R. Lucas, Supervisor
Referral Call Center
Medical University of South Carolina

MISSION

*To improve the health of those we serve
through the highest quality patient care, excellence in
education, and innovative research*

VISION

*To be a leader of academic internal medicine
in South Carolina and the Nation*
MUSC Department of Medicine

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