Dear Alumni,

I am thrilled to be able to communicate with you again through our annual newsletter. We have heard from more and more of you on a consistent basis and I continue to marvel at all of your accomplishments and of the proud legacy you have created for Penn Emergency Medicine. I also want to thank those of you who have provided advice or have served as a contact for a graduating resident who is looking for employment. I refer many of them to many of you and I have appreciated the spirit and enthusiasm with which you have embraced this role.

So much is happening in our Department that I can hardly do it justice in a brief column. I’ll pick out a few highlights to share with you. This year will bring more structural changes to the Department than any of us could have imagined with the transfer of our Level I trauma designation from HUP to Penn Presbyterian Medical Center (PMC). This move means that our relationship with PMC is closer than ever so that our entire program – clinical, education and research is now fully distributed across two sites! Our residents and faculty will be enjoying two site clinical assignments and we are building a multidisciplinary acute care research program with several other departments. The trauma relocation process represents huge opportunities for us. The new emergency department and acute care pavilion at PMC are gorgeous and spacious. We are all excited for the opening scheduled for February 5th, 2015.

We are also busy getting ready for our electronic medical record conversion to EPIC in the first three months of 2015! The health system is moving to an integrated EPIC EMR to be known as “PennChart.” One of our stellar former residents and current faculty member, Chris Edwards, is serving as physician lead for the project and doing a fantastic job. We are one of the first UPHS hospital based services to convert to PennChart illustrating that Penn EM continues to be techno savvy and forward thinking.

In July we welcomed many new faculty and fellows into the Department. One of our exciting new recruits, Dr. Trish Henwood, is our inaugural Director of Global Emergency Medicine and already she is off to Rwanda this month to continue building relationships and creating educational opportunities for our trainees. We have been exploring global sites in Guatemala, Peru, and Botswana as well. Our faculty recruitment has been a real success story with a huge talent pool entering the faculty ranks to complement our existing areas of excellence. Our Center for Emergency Care Policy Research ably led by Karin Rhodes is growing in activity by leaps and bounds and our Center for Resuscitation Science with Lance Becker and Ben Abella at the helm continues to be internationally recognized for its work.

If you haven’t already done so, go ahead and make plans to join us at ACEP this year for our second alumni reception event. This will take place on Tuesday evening October 28th. Details will be forthcoming in an official invitation. We want to stay in close touch with all of you and so I will close by saying that we are in the process of creating an on-line alumni community for graduates of Penn EM. I think it will be a great resource for alumni and the Department alike.

(Continued on page 5)
Hello to all the UPenn EM residency alumni. We’ve just celebrated the graduation of our 16th class and this group, like their predecessors, helped shape us into the outstanding training program we are today. As usual, this year was filled with changes.

Clinically, the patient population remains as diverse as ever and, if you can believe it, they are increasingly sicker and more complex. We have hired more midlevel providers and created a ‘doc in triage’ shift for the faculty to help facilitate the ‘stable but not fast track appropriate’ patients care.

Mira and Lauren continue to bring their energy and creative talents to our didactics sessions with prescreened podcast listening assignments to energetic debate sessions. This year we will have our own airway cadaver course for all the residents. This has been developed by Nancy Vinca (class of 2005) who, after EM residency, did an anesthesiology residency, and is now dual appointed in both departments at Penn. We’re all really excited about this new learning session and plan to integrate rare procedures into it as well.

In addition, thanks largely to the chief residents, Cindy Hsu, Nick Johnson, and Kevin Scott, we’ve got a tremendous social media presence and have become one of the national leaders in this. Follow us on Twitter@UPennEM.

We are now performing daily ‘end of shift’ evaluations on residents to provide an opportunity for immediate, formative feedback and, starting this year, will be having one on one observation feedback for the sub-interns and interns by the faculty and senior residents. All these changes are an attempt to align the ever-growing list of requirements and metrics with sound, and hopefully evidence based, learning theory and teaching concepts.

And finally our 20th residency class has joined us, which now numbers 11 strong. They’ve just finished intern survival series and have begun their first clinical rotations.

Thanks to all of you who were kind enough to send in donations. The residents greatly appreciate it. The funds will be used to offset the cadaver lab costs as well as supplement resident fun day. Please keep in touch and let us know how you’re doing.
Dear Fellow Alumni,

It’s great to hear how incredibly well the HUP ED residency is doing, in addition to the tremendous popularity of our relatively young specialty. Here at Kaiser Permanente (KP), we’ve benefited nicely from our growth in Emergency Medicine, and I’m proud to work among hundreds of EM-trained physicians in the nation’s largest private medical group.

I am the Physician-in-Chief (PIC) and Chief of Staff for a new hospital in San Leandro, CA, just south of Oakland and almost immediately across the Bay from SFO. With our sister facility in Fremont (closer to San Jose), we comprise the Greater Southern Alameda Area (GSAA), where we employ over 500 physicians and provide care for approximately 300,000 members, with approximately 250 ED visits/day. In my capacity and working with another PIC, we direct operations, strategy and finances for the GSAA. I also participate as a member of the Board of Directors of The Permanente Medical Group, where we formulate strategy not just for the provision care to 3.5 million members in Northern California but also - in partnership with the Mid-Atlantic Permanente Medical Group - for another 600k members from Southern MD through Northern VA.

One of the most engaging parts of this role comes from the daily interaction with caregivers from all fields of practice, from hospital to outpatient offices to our own departments of lab, pharmacy and home health. This also means that I unfortunately don’t spend as much time as I’d like working in the ED. When not inundated by hospital operations, specialty care access or primary care recruitment, among others, I thoroughly enjoy getting to participate in the Bay Area’s rich cultural offerings and natural surroundings. With my vicious furball of a puppy, Pippin (see picture), I’m often out on the weekends participating in any number of doggie playdates, hiking in the Sierras or foothills (closer to home) or just enjoying some of the many culinary offerings for which SF, Oakland and Napa are famous.

Even though we have great food – we still don’t have food trucks to rival the ones at HUP! In addition to that, though, the educational opportunities in West Philadelphia are among the most robust in the U.S. I hope you all get a chance to take advantage of these while also mastering both the art and science of EM from some of the greatest teachers, mentors and role models. Keep in mind that as the country (hopefully) advances from a tremendously fragmented system of care delivery to a more technologically-sophisticated and integrated model, like KP’s, Emergency Physicians bring a tremendous breadth of understanding, spanning the realms of primary and specialty care, OR’s, ICU’s and everything in between. The experiences you garner at Penn can be incredibly powerful.

Don’t be afraid to emerge from your residency with approaches to improving healthcare for everyone, based on the lessons you gleaned from HUP.

In addition to myself, there are two other HUP EM-trained physicians (Drs. Jay Goldman and Sun Lin) and countless other HUP graduates across any number of specialties in the GSAA. We’re not quite numerous enough to call ourselves HUP-West but are still aspiring to such heights! We’d love to get more of you out to the Bay Area. Please don’t hesitate to contact me when you’re engaging in your job search.

Best,

Rob

Personal Email: rob.greenberg@sbcglobal.net
Work Email: robert.x.greenberg@kp.org
Dear Fellow Alumni

A few years ago, I emailed Brendan Carr to ask for a career advice meeting. In his reply, he mentioned he was very busy, as “K is due in a few weeks”. My rookie-researcher interpretation was to assume his wife (whose first name I didn’t know) was pregnant, and I congratulated him. In his reply, he explained that his K Grant application was due, but quipped that both involve long, sleepless nights, and lots of crying.

Five years after completing my residency at Penn, I’ve actually had the interesting experience of simultaneously gestating both a baby and a K grant, and later a second baby and a second, non-NIH grant, and I can attest – Brendan was right, the similarities are striking, though only one kicks you in the bladder repeatedly.

Since leaving Philly after graduation, I’ve relocated to Atlanta (my husband – an internist who I met while admitting a patient to him one fateful night on the Low Side – works as a Medical Epidemiologist at the Centers for Disease Control). I am currently part-time as a researcher and clinician. My part-time status means that I work less than I full clinical load, reduced further by my grant buy-down. Thus, I have time to manage the research project that I am Principal Investigator on – an ED-based routine HIV testing and linkage to care program. I have time to write manuscripts and grant applications, and that time does not have to be in the middle of the night. I also have the time to spend several days each week with my two very little kids, Eliana, age 4 and Isaiah, age 4 months. Time with them is a fun, entertaining break from research and clinical medicine, and time at work is a refreshing break after a day or two with the little ones.

My academic path has brought me to something that I love and am passionate about – HIV and the ED population. After 1 year of testing in the Grady ED, we have tested over 15,000 patients, with a 1% new-positive rate. We have found that over 50% patients diagnosed through ED testing have a CD4 count < 200 at the time of diagnosis. This stunning statistic underscores the fact that our patients won’t get tested elsewhere, and reinforces the importance of seeing Emergency Medicine in the context of public health, rather than focusing only on the interaction with an individual patient.

Each time I look back at my training at Penn, I feel gratitude for the fantastic role models I was exposed to, and the high standard to which I was held, ethically, clinically, and professionally. I continue to work to uphold those standards, and I try every day to be a role model in the lives of the medical students and residents with whom I work.

Team Teal Forever!

Abigail

Work Email: ahankin@emory.edu

“My academic path has brought me to something that I love and am passionate about – HIV and ED population”.

Abigail Hankin-Wei

Abigail Hankin—Wei Class of 2009

Letters from Alumni: Abigail Hankin—Wei Class of 2009
PENN EM Alumni Giving

The department appreciates the generosity of our Penn EM alums and faculty whose donations fund unique programs that we would otherwise not be able to offer. The descriptions below are meant to give you an idea of how your donations will be used, but you can direct your gift in any way you want. Our Alumni Committee decides how donations will be spent in conjunction with the donor when specified.

**BIG THANKS** to everyone - alums and faculty- who have graciously contributed to the alumni fund!

**The Welcome Club:**

$10 - 100 – enables us to offer welcome gifts for incoming interns; lunch at resident research meetings; graduation gifts; etc.

**The Meeting Club:**

$101 - 999 – allows one or more residents to attend a national meeting; hire a short term research assistant; etc.

**The Rotation Club:**

$1000 - 4,999 – allows a resident to have an exciting rotation in an international location… or here in the US in an underserved area or unique environment; funds innovative research partnerships or collaborations; etc.

**The Innovation Club:**

$5,000 - 24,999 – funds special projects; teaching equipment; new technology; courses for residents to learn new procedures; advanced skills, etc.

**The Building Club:**

$25,000 - 999,999 – help us create an advanced critical care room, geriatric room, women’s pregnancy room; social service center… or any number of new ideas that can help create the Emergency Department of the future; create a high tech computer center or a new teaching video-center, etc. Give us your ideas!

**The Legacy Club:**

$1,000,000 and up – name a wing or new emergency department!

*[If you would like to make a contribution online please use the link provided below:]*

https://medley.isc-seo.upenn.edu/giving/jsp/fast.do?program=MED&fund=840515

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**Chairs update continued...**

(Continued from page 1)

be a wonderful forum and create more abilities to connect. I can’t wait to see you in Chicago.

Sincerely,

**Jill Baren**

Jill Baren
Professor and Chair, Department of Emergency Medicine, Perelman School of Medicine
Chief, Emergency Services, University of Pennsylvania Health System

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Back view of the New Trauma Center scheduled to open
Feb 2015 at Penn Presbyterian Hospital