



Patterson to Join UAMS as Next Chancellor

Cam Patterson, M.D., MBA, will join UAMS on June 1 as its new chancellor.



Patterson is currently senior vice president and chief operating officer at New York-Presbyterian/Weill Cornell Medical Center, where he is seeing a major

construction project through completion before assuming his post at UAMS.

The Board of Trustees of the University of Arkansas selected Patterson in December 2017.

Stephanie F. Gardner, Pharm.D., Ed.D., interim chancellor, senior vice chancellor for academic affairs and provost at UAMS, will continue to lead the institution through the transition.

Patterson has served in his role at New York-Presbyterian/Weill Cornell Medical Center since 2014. A cardiologist, Patterson previously held numerous academic and clinical appointments at the University of North Carolina, including as physician-in-chief at the UNC Center for Heart and Vascular Care and executive director of the UNC McAllister Heart Institute.

More information is available at: UAMS.edu/ChancellorSearch. ■

5 Things You Didn't Know About Developmental Disorders

1

FAMILY MEDICINE PHYSICIANS AND APRN'S ARE THE FRONT LINE.

Developmental screening is recommended to be done by the child's primary care provider. If a delay is suspected, a referral is made for more definitive diagnosis. Many of the evaluations are conducted in Little Rock at the James L. Dennis Developmental Center, part of the UAMS Department of Pediatrics. After a diagnosis, families return to their home community to receive the bulk of their care with the aid of their primary care provider. Providers may not feel adequately trained to advise families.

2

THERE'S A GREAT NEW WEBSITE THAT CAN HELP.

The Community-based Autism Liaison and Treatment Project (CoBALT) has launched a website - **CoBALTAR.org** - that connects families and health care professionals with trustworthy, evidence-based information about autism and other developmental disorders. For providers, the website includes: autism diagnosis criteria and treatment protocols, information on typical developmental milestones, screening guidelines and resources that providers can give to families.

3

FAMILIES DON'T HAVE TO WAIT FOR A DIAGNOSIS TO START INTERVENTIONS.

Many services can begin based on symptoms and do not have to wait for a definitive diagnosis. For example, a child waiting for confirmation of a possible autism diagnosis does not have to wait to start speech therapy. "Quicker services often lead to better outcomes, because when you're dealing with children and developmental disorders - each passing week can mean another missed milestone," said **Jayne Bellando, Ph.D.,** CoBALT co-director and associate professor of pediatric psychology.

(Continued on page 2)

(Continued from page 1)



4

COBALT TEAMS ARE INCREASING ACCESS TO DEVELOPMENTAL SCREENING.

CoBALT teams are health care providers across the state trained to screen children for developmental disorders. CoBALT teams can reduce wait times and travel distances for families – all with the goal of improving outcomes for patients. Today, there are CoBALT teams in Lowell, Fort Smith, Clinton, Forrest City, El Dorado and Little Rock that can conduct screening for developmental disorders/autism. Teams are made up of physicians or advanced nurse practitioners and other health professionals.

5

ECHO WILL FURTHER EXPAND THE KNOWLEDGE-SHARING NETWORK.

The Department of Pediatrics is creating a program for providers of children with special health care needs. ECHO (Extension for Community Health Outcomes) is an innovative program designed to create knowledge networks bringing together primary care providers in rural and underserved areas and specialty care providers at academic medical centers through a telementoring program using educational and case-based presentations. ■

Interested in joining us? Both CoBALT and ECHO are open to applications from providers looking to increase their knowledge base and become part of the solution for improving developmental care in Arkansas. To apply, contact **Eldon Schulz, M.D.**, (SchulzEldon@uams.edu) or Bellando (Bellandojayne@uams.edu).



Dear Colleagues,

In February, I temporarily set aside my role as care provider to become a care receiver. When the tables are turned, what a valuable reminder it is of

just what it means to provide care.

Through a combination of genetics (mother), activity and mileage, I had acquired carpal tunnel syndrome with severe sensory loss in my left hand. Since I had become accustomed to my left hand's ability to tell me what it was up to, **Theresa Wyrick, M.D.**, of the Department of Orthopaedic Surgery kindly agreed to fix things.

This is not an ad for the one-day surgery center on campus, but I must tell you, the facilities and the personnel were first rate. I am still not sure why I had to take my socks and underwear off for wrist surgery, but we will save that for another time. Dr. Wyrick was her typical kind and professional self. As a testimony to her skill, I am typing this (with both hands) on post-op day four.

As we deliver care, let us keep in mind the mindset of the patient. Their minds are swirling with questions – “Will it hurt? Will I have some complication?” – and especially when the diagnosis is unknown – “Is it cancer? Will I die?”

Thankfully, we don't all have to undergo wrist surgery to gain the benefit of this simple reminder: Look away from the computer for just a moment, think like a patient, and see things from the other side.

Sincerely,

Mark T. Jansen, M.D.
Medical Director
UAMS Physician Relations & Strategic Development

Please visit our website for referring providers:

UAMShhealth.com/MD

Content includes:

- 2018 Referring Physician Quick Reference
- CME Outreach - LearnOnDemand
- Consult
- EpicCare Link
- Find a Physician
- Online Appointment Requests
- Physician Call Center
- Physician Recruitment & Provider Placement
- UAMS Library

News to Know: Updates from UAMS

Neurology Adds Neuromuscular, Headache, Hospital Specialists

Betul Gundogdu, M.D.,

has joined the Department of Neurology as a neurologist



specializing in neuromuscular disorders.

She sees patients in the Jackson T. Stephens Spine & Neurosciences Institute's

Neurology Clinic. She provides electromyography, which is used to diagnose amyotrophic lateral sclerosis, myasthenia gravis, muscular dystrophy and other conditions.

Gundogdu completed a fellowship in electromyography/clinical neurophysiology from the University of Chicago Hospitals. She had further training in neuromuscular diseases/muscle and nerve pathology at Mayo Clinic in Rochester, Minnesota, as well as Baylor College of Medicine in Houston, Texas.

Dale M. Carter, M.D., has joined the department as a neurologist specializing in headaches. She sees



patients in the Neurology Clinic.

Carter earned an M.A. in counseling psychology in 1976 at Ball State University in Muncie, Indiana.

She obtained her medical degree in 1984 from Albany Medical College in Albany, New York. She completed her neurology residency at Albany Medical Center.

Nidhi Kapoor, M.D.,



has joined UAMS as its first neurohospitalist, combining advanced training in neurology with a specialized understanding of caring for patients while they are in

the hospital.

Kapoor completed her neurology

residency in the Department of Neurology at the University of Oklahoma Health Sciences Center.

To make a referral, call 866-826-7362 or 501-526-1000.

Family Medicine Intensive Review Course Set May 10-12

The 40th annual Family Medicine Intensive Review Course is May 10-12 at the Jackson T. Stephens Spine & Neurosciences Institute and offers continuing medical education opportunities. May 12 will feature an entire day on orthopedic topics and hands-on workshops. **Additional details will be announced: familymedicine.uams.edu/cme/events.**

Burdine, Bhusal, Sharma Join Transplant Team

Lyle J. Burdine, M.D., Ph.D., has joined UAMS as a kidney, liver and pancreas transplant surgeon, and **Sushma Bhusal, M.D.**, and **Aparna Sharma, M.D.**, have joined as transplant nephrologists, caring for kidney and pancreas transplant



patients before and after surgery.

UAMS is the only center in Arkansas that offers adult liver and kidney transplantation. The pancreas transplant program is expected to open in the next year.



Burdine completed a fellowship in abdominal transplants from the University of California San Francisco. Bhusal completed a fellowship in nephrology at New York University and a fellowship



in transplant nephrology at the University of Pittsburgh Medical Center. Sharma completed a nephrology fellowship at University

(Continued on page 4)

Physician Relations

Physician Relations & Strategic Development

Mark T. Jansen, M.D.
mtjansen@uams.edu

Michael Manley, RN, MNSc
mmanley@uams.edu

Director

Melanie Meyer, M.Ed.
melanie@uams.edu

Manager

Carla Alexander, M.Ed.
carla@uams.edu

Byron Jarrett & Brian Mann
physicianrelations@uams.edu

CONSULT

is produced by the UAMS Office of Communications & Marketing and Physician Relations & Strategic Development.

Editor

Amy Widner

Designer

Norma Edwards

Vice Chancellor for Communications & Marketing

Leslie Taylor



University of Arkansas for Medical Sciences

CONSULT

Quiz of the Month

QUESTION

A 17-year-old Caucasian female presents with a diffuse punctate scaly red rash. You diagnose new onset of guttate psoriasis. What common infectious disease process likely occurred two to three weeks earlier in this patient?

Acute streptococcal pharyngitis

ANSWER

News to Know: Updates from UAMS

(Continued from page 3)

of Chicago Medical Center and a transplant nephrology fellowship at the University of Illinois in Chicago.

UAMS is expanding its living donor program and is spreading the word that more people than ever are candidates for transplants.

"If your patient hasn't qualified for a transplant in the past, it's time to ask again," Burdine said.

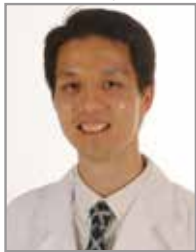
To make a kidney transplant referral, call 800-552-8026 or 501-686-6644.

For liver transplant, call 866-91-LIVER or 501-686-6644.

Glaucoma Specialist Lee Joins Eye Institute

Christopher Lee, M.D., has joined the Harvey & Bernice Jones Eye Institute at UAMS as a glaucoma specialist.

Lee comes to UAMS from the University of Texas Southwestern



Medical Center in Dallas, Texas, where he completed his residency and fellowship, following an internship in internal medicine

at St. Joseph Mercy Hospital in Ann Arbor, Michigan.

To make a referral, call 501-686-5822.

Gynecologic Oncologist Huffman Joins UAMS

Fellowship-trained gynecologic oncologist **Laura B. Huffman, M.D.**, has joined the Division of Gynecologic Oncology. She sees patients at the UAMS Winthrop



P. Rockefeller Cancer Institute.

Huffman completed her fellowship training in gynecologic oncology at the University of

Wisconsin School of Medicine and Public Health.

To make a referral, call 501-526-6990 ext. 8200 or 8203.

UAMS Joins Nationwide Network to Offer Simulation Courses for Anesthesiologists

The Simulation Center at UAMS has been recognized as a program of quality in anesthesiology simulation and approved by the American Society of Anesthesiologists (ASA) to offer educational courses for anesthesiologists to hone their skills and maintain their professional certifications.

More information is available at moca.uams.edu.

Registration Open for Pain Management Symposium

The 2018 Arkansas Pain Management Symposium is April 28 at the Jackson T. Stephens Spine & Neurosciences Institute at UAMS.

The symposium is an interprofessional continuing education event designed to provide primary care providers with the latest research and information on chronic pain management.

Topics include weaning off opiates, alternative treatments for chronic pain, when to refer to a pain specialist, medical marijuana, the newest innovations in neuromodulations, and updates from the Arkansas Department of Health and the CDC.

Register at uams.cloud-cme.com.

New Physicians

- **Clinical Neurophysiology**
Chuong Le, M.D.
- **Emergency Medicine**
Nhan Phan, M.D.
- **Neurophysiology**
Michelle Mora, D.O.
- **Pulmonary Disease**
Harriet Kayanja, M.D.

UAMS PHYSICIAN RECRUITMENT & PROVIDER PLACEMENT PROGRAM

The UAMS Physician Recruitment & Provider Placement Program has a team of placement specialists dedicated to serving the recruitment needs of our partner communities, UAMS Regional Campuses and UAMS faculty. Physician/provider opportunities are available in all specialties throughout Arkansas.

FEATURED JOBS

Family Medicine Faculty Physician: UAMS Northeast in Jonesboro is seeking a fulltime family medicine physician for a faculty position (assistant/associate professor) in the residency program. This is an ideal position for an individual who loves to teach residents and medical students in a clinical setting.

Rural Family Medicine Opportunities: Interested in practicing in rural health? Opportunities are available throughout Arkansas, including Fordyce, Dumas, Lake Village, Green Forest/Holiday Island and Eureka Springs.

Geriatric Opportunities: There is a community hospital opportunity available in El Dorado, a private practice opportunity in Northeast Arkansas and opportunities at UAMS campuses in Little Rock, Pine Bluff and Springdale.

Recruitment services contact:

Carla Alexander: 501-686-7934 or carla@uams.edu

For a complete listing of job descriptions and opportunities, visit: **MedJobArkansas.com**

Follow MedJobArkansas:   

Orthopaedics Researchers Explore Biomechanics From All Angles



How knee replacements affect golf swing is one of several UAMS Department of Orthopaedic Surgery studies at the high-tech gait and motion-detection laboratory at the HipKnee Arkansas Foundation.



Electromyography sensors – to detect muscle activity – is one of several technologies in use at the gait and motion-detection laboratory that allow researchers insight into human movement in a variety of contexts.

Arkansas. Special cameras at strategic points along the walls create a 3D capture zone. The research subject wears markers that are tracked by the cameras and recorded by the computer software.

“We are able to see how nearly every part of the body is moving,” Mannen said. “We can measure how people move using the cameras, how they load their joints using force plates embedded in the ground, and how their muscles are activating using electromyography.”

Mannen’s current work focuses on infants. Some of it is specific, like whether babies with hip dysplasia could be treated by being held by adults in “babywearing” carrier devices. Other studies cast a wide net, filling in the gaps of knowledge about infant motion where existing research is limited.

“We are looking at infant muscle and motion activity in various positions to get a baseline understanding of how infants are using their muscles in common positions. We want to understand optimal positioning to prevent musculoskeletal problems or motor development delays,” Mannen said.

Meanwhile, department Chair **C. Lowry Barnes, M.D.**, is studying how joint replacements affect golf swing in athletes. **Simon Mears, M.D., Ph.D.**, is studying safe yoga practice in hip and knee replacement patients.

“With this technology, we are limited only by our imaginations,” Mannen said. ■

Research is on the move at the UAMS Department of Orthopaedic Surgery.

Researchers are studying biomechanics using the high-tech gait and motion-detection laboratory at the HipKnee Arkansas Foundation. By researching the structure and function of human movement in a variety of contexts, the goal is to improve the development and assessment of orthopaedic interventions and better understand injury prevention.

Erin Mannen, Ph.D., a mechanical engineer from the University of Kansas, joined the UAMS faculty in mid-2017 to lead biomechanical studies of the spine, bone and joints.

To do so, she uses technology that fills an entire room at HipKnee

PHYSICIAN PROFILE

KRISTIN ZORN, M.D.

Associate Professor, Department of Obstetrics and Gynecology and Division of Genetics
Director, Division of Gynecologic Oncology



What inspired you to become a doctor?

I come from a medical family. I was exposed to medicine from childhood and always found the workings of the human body fascinating.

What do you like most about your specialty?

The patients! Gynecologic oncology has the best patients of any field I ever experienced. The work is also fascinating to me. We complete residency in obstetrics and gynecology followed by a gynecologic oncology fellowship. Once a gynecologic cancer diagnosis is made, we perform surgery when necessary, give chemotherapy when needed, and help coordinate radiation if indicated. It is an unusual oncology field in that we operate and give chemo ourselves, which allows us to have a lot of continuity of care with our patients.

What makes you unique among your peers?

I discovered a passion for cancer genetics early in my career because two of the most common inherited cancer syndromes – hereditary breast and ovarian cancer syndrome and Lynch syndrome – involve increased risk for gynecologic cancer. I pursued additional training in genetics and have made it a focus of my clinical practice and research. Identifying families with these syndromes allows us to be proactive about cancer risk and, hopefully, prevent it altogether.

What are your clinical specialties?

I care for women with endometrial, ovarian, fallopian tube, peritoneal, cervical, vaginal and vulvar cancer, along with my three physician partners and three nurse practitioners. In addition, I see patients with a known or suspected hereditary cancer syndrome in conjunction with our genetic counselors. I also coordinate the UAMS clinical trials for gynecologic cancer patients and for a cooperative clinical trial group sponsored by the National Cancer Institute called NRG Oncology.

How can doctors make referrals to you?

New patients: 501-526-6990 ext. 8200 or 8203

MEDICAL CASE STUDY

Colorectal Surgery

INITIAL CONTACT

A 41-year-old male patient presented at an outside hospital with pain in his pelvis and buttocks accompanied by fever and drainage from the perianal skin. He was admitted, and a CT scan showed a large perirectal abscess with air tracking down into the left buttock and thigh with concern for a necrotizing soft tissue infection.

In the operating room, he was debrided and much of the infected and necrotic tissue was cut away. A surgeon crafted a temporary colostomy and stabilized the patient. Doctors were concerned that an underlying malignancy was behind the patient's symptoms, and he was referred to UAMS for a consultation.

At UAMS, surgeons identified an extensive tumor in the distal rectum that had perforated the rectum and was filling most of the patient's pelvis. It caused a fistula into the bilateral ischiorectal fossa on either side of the anus.

ASSESSMENT

During the initial surgery at UAMS, colorectal surgeons **W. Conan Mustain, M.D.**; **Jason S. Mizell, M.D.**; and their team assessed the tumor and debrided additional tissue, covering the wound with a vacuum-assisted dressing. They performed a colonoscopy through his temporary colostomy, taking biopsies that confirmed rectal adenocarcinoma. An MRI of his pelvis revealed the massive size of the tumor, which was growing into his bladder and prostate and perforating into the pelvic sidewall.

The patient needed chemotherapy and radiation before surgery would be possible. Because of increased risk for infection and other complications, chemotherapy and radiation are not typically recommended for



The patient's perineum at presentation, following excisional debridement. The distal sacrum is exposed and there are multiple fistulae



The patient's perineal wound after completion of neoadjuvant chemotherapy and radiation



Staging MRI shows a large tumor filling the pelvis invading the prostate (pr) and the anal sphincter (a). Sagittal view showing bladder (b), sacrum (s), and pubis (p)



Following pelvic exenteration, the patient was flipped prone to debride the presacral wound and suture the VRAM flap in place.

patients with large soft tissue wounds like the patient's, but he had limited alternatives and the medical oncology and radiation oncology teams at UAMS were willing to work with the patient and the colorectal surgery team.

The patient opted to proceed with chemotherapy and radiation in preparation for surgery.

PROCEDURES

The patient underwent five weeks of chemotherapy and radiation with UAMS medical oncologist **Rangaswamy Govindarajan, M.D.**, and radiation oncologist **Loverd Peacock, M.D.**

After the tumor shrank to an operable size, Mustain and Mizell's colorectal surgery team joined forces with urologic oncologist **Rodney Davis, M.D.**, and plastic surgeon **Eric Jason Wright, M.D.**, for an 18-hour series of surgeries. The team performed a complete pelvic exenteration, removing the tumor along with the patient's bladder, prostate, sigmoid colon, rectum, anus, distal sacrum, coccyx and other soft tissue. Mustain and Mizell established a more permanent colostomy on the patient's left side and Davis' team crafted a urinary stoma on the right with an ileal conduit,

(Continued on page 7)



Bilateral gluteal flaps were required to achieve soft-tissue coverage over the sacral wound.



Six months out from surgery. The scar from some dehiscence at the apex of the flaps will be revised in a future surgery.

connecting both ureters from the kidneys to a section of small bowel.

The resection left a large empty space in the patient's pelvis as well as a larger-than-normal soft-tissue defect on the perineum. Wright used a vertical rectus abdominis myocutaneous (VRAM) flap, taking skin and soft tissue connected to the right rectus abdominis muscle, which was flipped and rotated into the pelvis to fill the hole. The patient required additional soft-tissue to cover the presacral wound, so Wright crafted bilateral gluteal flaps from the patient's buttocks to achieve coverage in the middle.

FOLLOW-UPS

The wound-healing time was extensive, but the patient progressed well and had a good outcome. The surgery team

achieved negative margins on the cancer. At a checkup almost a year after initial contact and six months after surgery, the patient was disease free and doing well.

"This is one of the more complex cases I've worked on personally," Mustain said. "With any case this complex, there are bumps in the road and unforeseen circumstances, but all told he had a great outcome. With a tumor this extensive, I think a lot of places would have recommended palliative treatment only. But we pushed and our radiation oncologists and medical oncologists were willing to give him both chemo and radiation despite his open wound, and that gave us the edge we needed."

For a colorectal surgery referral, call 501-686-8211. ■

W. Conan Mustain, M.D.



Assistant professor
Department of Surgery-
Colorectal
UAMS College of Medicine

Education

Medical degree, University of Mississippi School of Medicine, Jackson, Miss.

Residency

General surgery, University of Kentucky Medical Center, Lexington, Ky.

Fellowship

Surgical research fellow, Department of Surgery and Markey Cancer Center, University of Kentucky Medical Center
Colon and rectal surgery, University Hospitals-Case Medical Center, Cleveland, Ohio

Jason S. Mizell, M.D.



Associate professor
Department of Surgery-
Colorectal
UAMS College of Medicine

Education

Medical degree, Louisiana State Health Sciences Center, Shreveport, La.

Residency

General surgery, Louisiana State Health Sciences Center

Fellowship

Colon and rectal surgery, Baylor University Medical Center, Dallas, Texas

2018 Referring Physician Quick Reference

Now available online!

Go to: UAMShealth.com/mdGuide

It contains helpful UAMS resources including:

- Message from Dr. Jansen
- Referral Website
- Appointments/Online Scheduling
- Key Phone Numbers
- EpicCare Link, SHARE, Physician Call Center
- Library
- LearnOnDemand
- Physician Recruitment
- Campus Map

ADDRESS SERVICE REQUESTED



Learn on Demand

A resource of the UAMS Center for Distance Health (CDH), the LearnOnDemand.org web portal offers health care professionals the flexibility of earning continuing education (CE) credits on their own schedule, through an expanded array of teleconferences and online courses.

- Track all educational hours and credits earned inside or outside the program
- Ensure compliance with the CE requirements for the national accrediting organizations for physicians and nurses
- Earn certificates of attendance for a variety of other disciplines

LearnOnDemand.org

For information on LearnOnDemand, contact: cdheducation@uams.edu or 1-855-234-3348.

To request speakers or topics or to learn more about how the UAMS Physician Relations & Strategic Development team can help you, visit UAMHealth.com/MD

All classes now FREE!

APRIL 3

Antimicrobial Stewardship
Tiffany Dickey, Pharm.D.
Department of Pharmacy

APRIL 10

Anticoagulants in Cancer Patients
Elizabeth Ryan Pritchard, Pharm.D., BCOP
Department of Pharmacy

APRIL 17

Infection Management in a Patient Post Solid Organ Transplant
Lyle J. Burdine, M.D., Ph.D.
Department of Surgery

APRIL 24

**Professional Development
How to Manage Anxiety in the Workplace**
Puru Thapa, M.D.
UAMS Student Wellness Program

MAY 1

Sexual Health in the Survivor of Gynecologic Cancer
Laura Huffmann, M.D.
Department of Obstetrics & Gynecology

MAY 8

Chorionic Opioid Guidelines
Lindsey Dayer, Pharm.D., BCACP
Department of Pharmacy

MAY 15

Depression: Diagnosis and Treatment
Erick Messias, M.D., MPH, Ph.D.
UAMS Psychiatric Research Institute

MAY 22

**Professional Development
"Coding for the Future: HCC & Performance-based Payment Models"**
Rana McSpadden, FACMPE, CPC
SVMIC

MAY 29 - CANCELED FOR MEMORIAL DAY

JUNE 5

Care of the LGBT Patient
Sara G. Tariq, M.D., FACP
Department of Internal Medicine

JUNE 12

Adult Sickle Cell Update
Lindsey Dayer, Pharm.D., BCACP
Department of Pharmacy

Adult Sickle Cell - Pharmacy Perspectives
Lindsey Dayer, Pharm.D., BCACP

JUNE 19

Chronic Headaches
Dale M. Carter, M.D.
Department of Neurology

JUNE 26

**Professional Development
HIPAA Hot Topics**
Heather Schmiegelow, J.D.
HIPAA Office