Introducing members of the Wellness Committee at MedStar Washington Hospital Center. The Committee can connect members of the medical and dental staff with wellness resources and opportunities offered by the hospital and MedStar Health.

From left to right: Wellness Committee co-chair Jennifer Abramson, resilience coaches Luis Bernal and Allison Chan, radiologist Arnold Raizon, MD, committee co-chair Laura Dutzman, and Director of advanced practice providers, surgery, Maria Leber, PA-C.
Upcoming continuing professional education conferences

MEDSTAR 2022 MEETINGS

41st Annual Cherry Blossom Seminar
July 25 to July 27 | Park Hyatt Hotel | Washington, D.C.
Course Chairman: M. Mike Malek, MD
Course Co-Chairmen: Jeffrey S. Abrams, MD; Col Steven J. Svoboda, MD, USA (Ret.)

Breast Cancer Coordinated Care (BC3): An Interdisciplinary Conference
September 15 to 17 | Renaissance Washington DC Downtown | Washington, D.C.
Course Directors: Lucy De La Cruz, MD; Kenneth Fan, MD; Ian T. Greenwalt, MD; David H. Song, MD, MBA, FACS
MedStar Associates use promotion code BC3100 for $100 registration fee!

9th Annual Gastric and Soft Tissue Neoplasms
September 24 | A Virtual Conference
Course Directors: Waddah B. Al-Refaie, MD, FACS; Sosipatros A, Boikos, MD; Nadim G. Haddad, MD; Dennis A. Priebat, MD, FACP; Mark A. Steves, MD, FACS
MedStar Associates use promotion code GSTNM22 for complimentary registration!

SAVE THE DATE

Melanoma and Other Skin Cancers
October 29 | Bethesda North Marriott Hotel & Conference Center | Bethesda, MD
Course Directors: Michael B. Atkins, MD; Waddah B. Al-Refaie, MD, FACS; Geoffrey T. Gibney, MD; Allison R. Larson, MD

Lung Cancer 2022: Progress and Future Directions
October 29 | Bethesda Marriott | Bethesda, MD
Course Director: Stephen V. Liu, MD

International Osteotomy Conference
November 4 to 5 | Westin City Center | Washington, D.C.
Course Directors: Wiemi A. Douoguih, MD | Adrian Wilson, MBBS, BSc, FRCS

For more information regarding MedStar Health conferences, please visit MedStar.Cloud-CME.com.

If you have a story idea for Connections magazine, please contact Managing Editor Maureen McEvoy by calling 202-877-8366 or email her at maureen.e.mcevoy@medstar.net.
Congratulations, graduates!
You’re on your way

“The doctor of the future will give no medicine but will instruct his patient in the care of the human frame, in diet, in cause and prevention of disease.” – Thomas A. Edison

When I was an intern, smoking in American hospitals was not uncommon. In fact, in 1998, ulcerative colitis (UC) studies determined that smokers had better outcomes than non-smokers and UC patients on our GI medicine ward had smoking privileges. While the hospital smoking situation quickly changed, it didn’t change as quickly as medical education did for our current class of graduates.

For our residents who just completed Post-Graduate Year-3, your education is unique in medical training history.

You came in July 2019, medical school graduates who had gone through the interview process and matched with a specialty program. At MedStar Washington Hospital Center, you found a challenging training platform, one that would provide growth and learning, and opportunities to prepare you for your life after residency, whether that life would mean entering private practice, taking on a fellowship, delving into research, or something else entirely.

In March 2020, we were all faced with a new disease, one that no one knew how to prevent or treat. We had questions about how to correctly use all forms of PPE, physical distancing, life outside of our shifts, and how we could best protect others.

During your PGY-2, based on the developing science, we all got used to the constantly evolving methods to ensure proper PPE while caring for patients and to keep each other safe. In December 2020, we got the first doses of the COVID vaccine and, six months later, were beginning rounds of second doses. COVID dominated our lives, professionally and personally.

Your PGY-3 included vaccine boosters and ongoing precautions, as the numbers of hospitalized patients grew again. The 2021 holidays were a surprise to many, as our COVID numbers grew yet again, past the peak 2020 levels.

Honestly, it’s been a challenging three years, and we know training programs will now have to develop in different ways to meet healthcare changes. But during your training, you gained incredible insight about your field. You took on leadership positions, and supervised new and younger physicians. You explored your individual career paths and learned how to be doctors who are resourceful, agile, and committed to providing the best care to all your patients.

For those of you completing three-year programs, as you graduate, I’d like to quote another famous doctor – Dr. Seuss – from his book that’s given to many graduates, Oh, the Places You’ll Go, for some final thoughts for those of you who are leaving MedStar Washington:

And will you succeed?
Yes! You will, indeed!
(98 and 3/4 percent guaranteed.)
KID, YOU’LL MOVE MOUNTAINS!
So...
be your name Buxbaum or Bixby or Bray

or

Mordecai Ali Van Allen O’Shea,
you’re off to Great Places!
Today is your day!
Your mountain is waiting.
So...get on your way!

Jeffrey S. Dubin, MD, MBA, is Sr. Vice President, Medical Affairs & Chief Medical Officer at MedStar Washington Hospital Center. He can be reached at 202-877-6038, or via email at jeffrey.s.dubin@medstar.net.
Second-year residents reflect on their year

Connections has followed four residents, now entering their third year, who kindly agreed to an annual interview to share their insights, goals, progress, COVID experiences, and a bit about their lives outside the hospital.

Matthew Chavarria, DDS
Oral and Maxillofacial Surgery

“My second year has been great,” says Matthew Chavarria, DDS. “It’s been an opportunity to solidify my skills and further the relationships I’ve made here. I’ve really enjoyed helping the new interns, and find I learn more as I teach.” He advises interns: Be humble, not only to your patients, but to your peers.

About COVID he says, “Just when we thought things were letting up, Omicron slapped us back into crisis mode for a while. But we seem to be headed in the right direction now.”

On a more pleasant note, he and his wife, Abby, went to see a movie for the first time in more than two years. “We saw Batman. We really didn’t care what we saw, just wanted to do it. Luckily, the theater was only half full.”

Dr. Chavarria says in his third year he will primarily rotate through the Washington VA Medical Center, the Surgical ICU, Trauma, Plastic Surgery, and ENT. He’s looking forward to building his medical knowledge and cross training.

He and Abby will travel to Portugal this spring. And last fall Dr. Chavarria traveled home to Alaska for the first time since COVID. He saw his family and hunted, fished, and camped, restocking his cooler here with halibut, venison, and salmon.

By July, “it will be my halfway mark through residency,” he says. “I’ll see where I’ve been and how far I have to go. There’s light at the end of the tunnel.”

Rebecca Breed, MD
Emergency Medicine

While Rebecca Breed, MD, says it’s been a good year for her, she’s glad she’s back in the Emergency department (ED). Year two involved rotations through critical care. The pediatric Intensive Care Unit (ICU) at MedStar Georgetown and the medical ICU were especially hard. “We saw a lot of COVID, and it’s so hard to see such sick patients who couldn’t see their loved ones. Trying to explain their progress over the phone to relatives was difficult.”

Year three will be entirely in the ED. “We have shifts called Blue Seniors, which means we will work with the new interns and help acclimate them to the flow of the department.” Now that COVID restrictions have eased, Dr. Breed is pleased that her fellow residents can gather outside of work. “It’s so nice to see people’s faces not behind masks!”

In her free time, she’s still interested in social medicine and writes for Journal Feed, an emergency medicine email listserv that summarizes emergency medicine articles delivered nationally. She is also a member of the Social Medicine & Health Equity Track Program piloted last year by Phillipa Soskin, MD, which spans multiple MedStar Health hospitals and various residency programs. “We have speakers who address health equality and social justice in medicine. We are the first group to be involved.”

Two years ago, as an intern, she said part of her interest in emergency medicine was being the first person a patient saw when coming to the ED. “And I still get a kick out of that,” she says.
Fred Bien-Aime, MD
Internal Medicine

Fred Bien-Aime, MD, says his second year has meant “more responsibility and more stress, but it’s been a great year of growth and reflection. I just finished five weeks in the Medical Intensive Care Unit (MICU) and loved it. I saw a variety of different pathologies and worked as a team with the nurses, residents, and fellows to manage critically ill patients. We placed central catheters and arterial lines that provided lifesaving therapies. The ICU was a challenging time of learning but increased my love for Internal Medicine.”

He says time management has improved. Through the apps, like Trello, and setting realistic goals, he’s learned to be more efficient. As he transitions to his third year, he and his wife, Emily, are adding another precious piece of the puzzle to their lives. Baby Bien-Aime is expected to join the frenzy this summer.

His advice to the first- and second-year residents he helps supervise: “Be patient. It’s easy to be hard on yourself. And it’s frustrating because there are things you don’t know yet. But remember, you are wanted here, and you work with some of the best people in the world. Take your time, ask for help and be humble. All of us are in this journey together!! The rest will come to you over time.”

David Schlee, MD
Obstetrics and Gynecology

“Second year brought more high-risk cases—some bad situations,” says David Schlee, MD. “Just yesterday I had to tell a patient she miscarried, which was especially hard, because she lost a baby a year ago, too. I cried with her.” He says he tries to be their strength and emotional support during times like this, but sometimes his empathy takes over.

One lesson he’s learned: to be careful when offering support to a patient going through a traumatic experience. A social worker once cautioned him to never say, “You can always have another baby,” because it belittles their pain. He tries to strike a balance between acknowledging their feelings with wanting to give them hope. “I wrestle with this,” he says. “But I really enjoy the opportunity to connect with my patients.”

Going into his third year, Dr. Schlee will perform more major gynecologic surgeries, and will spend most of his time at MedStar Washington. But he also will do a couple of blocks at MedStar Georgetown in obstetrics, where he will be the chief resident supervising interns. He laughs and recalls his first rotation when he was on the gynecology service but had to do a weekend call shift on labor and delivery. “When I was called in to deliver a baby, the third-year resident supervising me asked, ‘So how many of these have you done?’ ‘None,’ I replied. The resident said, ‘Okay, this is going to be a learning experience.’ I hope to remember that moment as I supervise the new interns.”

His advice to them: “You won’t know what you’re doing. It’s new and foreign. Just go with the flow. Be confident. You need a healthy respect and actually some trepidation. Respect what you’re doing, but don’t be scared.”

At home, Dr. Schlee sometimes unwinds with video games, but this spring particularly enjoyed the national basketball tournament, as his med school alma mater, Kansas, won the championship. “After the first 15 minutes,” he says, “I thought we were going down. Then I dozed off in the second half and woke with buzzer going off and we’d won! I didn’t know how we did it!”

He’s looking forward to his third year, doing minimally invasive surgeries and a chance to work with his housemate, Abbi Davenport, MD, a uro-gyn fellow. “Who knows,” he says, “I may fall in love with uro-gyn, though I still have a dream to follow patients from the time they get pregnant, throughout their lives.”
The MedStar Health Center for Wellbeing is a central resource hub to a myriad of wellness offerings; and MedStar Washington’s Wellness Committee is here to support you and your team

MedStar Health Center for Wellbeing
In the past two years, the COVID-19 pandemic has placed an extraordinary amount of strain on physicians, nurses, and associates, and has exposed and increased the amount of stress and post-traumatic stress that people in health care are experiencing. In response, MedStar Health launched the MedStar Health Center for Wellbeing website, MedStarHealth.org/Wellbeing in February.

To keep provider support efforts in step with changing demands and needs, MedStar Health has coordinated systemwide wellbeing programs, and developed a Physician Wellbeing team, led by Daniel Marchalik, MD, executive director of the new Center. This initiative is supported, throughout the system, by hundreds of individuals who are contributing their time and input on a volunteer basis. Some of those individuals are here at MedStar Washington.

“Wellness can mean different things to different people,” says Laura Dutzman, co-chair of the hospital's Wellness Committee, “and supporting our providers and associates throughout the organization is a priority not only for our executive leadership team, but for the system as well. That’s why MedStar Health established the Center for Wellbeing—a central resource hub to showcase a myriad of wellness offerings – and the Wellness Committee.”

MedStar Washington Wellness Committee
“The Wellness Committee is composed of associates who are advanced practice providers, nurses, communicators, human resource and operations representatives and is committed to sharing wellness initiatives on units and departments,” says Jennifer Abramson, committee co-chair. “The members are well-versed in what wellness resources are available to you and your team, and to leading 15-minute rounds when requested by leaders.

Associates are invited to join the hospital’s meditation group hosted by Arnold Raizon, MD, or to contact one of our two resilience coaches, Allison Chan and Luis Bernal, who are available for emotional support. Also, Maria Leber, PA-C, director for Surgical advanced practice providers, is focused on APP Wellness at a system level and is the chair of the MedStar Medical Group (MMG) Wellness Committee.”

Meet Resilience Coaches Allison Chan and Luis Bernal
Allison Chan, LICSW, serves as the Behavioral Health and Peer Support Program manager with the MedStar Health Center for Wellbeing. In this role, she provides support for the Care for the Caregiver and other peer support programs across the system. Additionally, Allison offers resilience coaching services to all MedStar Health associates in the Washington, D.C., Southern Maryland, and Montgomery County regions. Allison is a licensed clinical social worker, and she comes to the system with a significant background in providing mental health and wellness support for first responders, children, and families involved with the child welfare system.

Maria Leber, PA-C, Laura Dutzman, Arnold Raizon, MD, and Jennifer Abramson are versed in the initiatives available to providers.

Throughout the year, the Committee offers friendly competitions to encourage associates and clinicians to participate in activities outside of their responsibilities,” says Ms. Dutzman. “Overall, we are here to guide and offer suggestions on how to best meet the needs of your team and can be reached at wellnessrounds@medstar.net.”

“If you are interested in joining the Wellness Committee, please contact Laura Dutzman or myself,” says Ms. Abramson. “We are planning to launch new initiatives in FY23. With a focus on gratitude, we want as many providers as possible to participate.”

Maria Leber, PA-C, Laura Dutzman, Arnold Raizon, MD, and Jennifer Abramson are versed in the initiatives available to providers.
In addition to her clinical experience, Allison has extensive experience in management, team building, and program development, and a passion for teamwork and collaboration. She believes that we must “take care to give care” and is committed to expanding education about traumatic stress and promoting health and wellness through professional training programs, professional consultation, program development, and direct clinical services. For a confidential and free session with Allison, you can email her directly at allison.s.chan@medstar.net or call 202-384-6955.

Luis Bernal, LCSWC, is a licensed social worker, and a regional resilience coach assigned to assist physicians and advanced practice providers at MedStar Washington. Following stints in Baltimore as a community worker and BHS counselor (MedStar Health’s Employee Assistance Program partner), Luis decided he wanted to create and influence positive changes in the workplace. For five years, he focused on understanding and helping individuals overcome depression, anxiety, and trauma, and now he wants to advocate for the importance of associate wellness and assist in developing wellness initiatives. For a confidential and free session with Luis, you can email him directly at luis.f.bernalgonzalez@medstar.net or call 202-695-9808.

The Wellness resources can also be used by physicians and advanced practice providers who have been involved in a serious medical outcome or if they have been named in a medical professional liability lawsuit.

Visit MedStarHealth.org/Wellbeing to find more details about:

**The Provider Concierge Program**
The Provider Concierge Program connects providers directly with a personalized assistant who can help them navigate various resources. It’s designed to remove friction from your day-to-day life. To schedule an appointment, call 800-554-1399 and press 1.

**Expedited Mental Health Appointment Program**
Through this initiative with the MedStar Georgetown University Hospital’s Department of Psychiatry, providers can establish contact with a mental health clinician within 1-2 business days of the initial call. The mental health clinician will identify the issues and either provide individual support immediately or, if deemed helpful, will refer the associate to a mental health provider within Georgetown Psychiatry. To set up an appointment, call 202-944-5400 and choose option 2.

**Care for the Caregiver | Peer to Peer Support**
The Care for the Caregiver team is composed of physicians; nurses; quality, safety, and risk associates; chaplains; social workers; and peers who are here to support providers and their units in times of need. The team provides free, confidential 24/7 care to all. When you call 866-674-9355 (866-MSH-WELL) or email c4c@medstar.net, you can expect to receive real-time attention from a nonjudgmental presence, who is focused on listening and understanding.

**Meditation Group—EYCBO (Everything You Can’t Buy Online)**
EYCBO is a MedStar Washington-based meditation group hosted by Arnold Raizon, MD. The group meets via MSTeams every morning at 8 a.m. Dr. Raizon opens the 30-minute session with 10 minutes of quiet meditation and gentle breathing. The rest of the time is spent in conversation, ending with a “sticky note” thought to carry participants through the rest of their day. If you wish to join, please email Dr. Raizon at arnold.raizon@medstar.net.

**Meditation tablets available in medical library**
Tablets with meditation videos and apps can be checked out of the medical library (Main Hospital, 2nd floor, 2A-43). The tablets are loaded with features provided by the MTO Tamarkoz Association’s Caring for Our Caregivers initiative, designed with healthcare workers in mind, and includes videos and mindfulness exercises of varying lengths and intensity.

Allison Chan and Luis Bernal would like to meet your team to talk about resilience.
“When we are no longer able to change a situation, we are challenged to change ourselves.”

Author and Holocaust survivor Viktor Frankl from his memoir *Man’s Search for Meaning*.

**MedStar Washington Hospital Center** Emergency Medicine physician Elizabeth Pontius, MD, has joined an elite club of runners. Last October, she completed her first marathon—The Flying Pig Marathon—in Cincinnati, Ohio.

Like most of us, in July 2020, at the height of the COVID-19 pandemic, Dr. Pontius found herself muddling through life and hoping things would get back to normal soon. “My general coping mechanism for three months was eating a lot of brownies and cookies, and splitting pints of Ben and Jerry’s ice cream with my husband, Andrew.”

Around this time, Dr. Pontius’s sister Pam was getting ready to start a new position in Tokyo. The sisters came up with a plan to help Pam pass the time in quarantine. Pam decided to take online yoga classes and Dr. Pontius felt inspired to get back on her Peloton. Together, both agreed to work out every day.

**Starting again**

For 10 years, Dr. Pontius had trained in spurts for half-marathons and for the District’s annual Cherry Blossom Ten Mile Run. So, she began mixing in some short runs with riding her bike.

“I couldn’t believe how slow I was. I was disappointed because I had run all these other races. Fortunately, Peloton has an app with training classes and coaches to guide you on your run. I started listening to the app while running in Rock Creek Park, and the more I ran, the faster I got. It was so empowering.”

By the fall, she was ready to give herself a goal of completing a virtual half marathon in the spring of 2021, and she did!

**Making the decision**

“Once I had run the virtual half marathon, I didn’t have anything else to focus on or look forward to,” said Dr. Pontius. Her success completing the virtual half gave her the confidence to believe she should try a marathon. “I said to myself, ‘People like you can do this.’”

Cincinnati Marathon, Inc., a nonprofit organization that raises money for charity, announced it would host its annual Flying Pig Marathon, in person, that Halloween. With six months to prepare, Dr. Pontius decided to sign up. After sharing her plans with her family, Dr. Pontius’s brother-in-law, Erinn, who lives in Kentucky, decided he wanted to train for the marathon as well. “We ended up being on the same training schedule for short and long runs, so we would text each other and encourage one another to keep going.”

**Training schedule**

Dr. Pontius trained around her work schedule. There were days when she ran 15 miles before starting her 3 p.m. shift in the Emergency department. “One thing I did underestimate is how much time I would have to dedicate to training. Having done a couple of half marathons, I thought a marathon is only twice the distance, it can’t be too hard.” Knowing her brother-in-law was committed to training was a huge motivation. “Erinn and I are both competitive. I knew if he’s going to do it, I’m going to figure out a way.”

**Marathon day**

On a day with perfect weather conditions, Dr. Pontius completed her first marathon challenge in under six hours. “I did really well up until mile 12. I think some of the hills started to catch up with me, and by mile 18, I was really tired. I decided I was going to finish the race even if I had to walk the last six miles. It was awesome to cross the finish line and have my husband, Erinn, and my family be there to congratulate me,” said Dr. Pontius.

**Resilience in challenging times**

According to the website RunRepeat.com, in 2018, 1.1 million runners participated in a marathon in the United States for psychological and health-related reasons. “I think the whole process of training for the marathon began with achieving small goals and believing in myself,” said Dr. Pontius. “Marathons teach you a lot about yourself and how to endure. I would encourage everyone to take time for themselves; it can seem selfish at first, but it really helped me. I feel physically stronger, and completing the marathon has helped me be a better doctor, wife, friend, and sister.” Dr. Pontius has already set her sights on her next challenge—the 2023 Walt Disney World Marathon in Orlando.
Years ago, as a young doctor in the specialty of infectious diseases, Maria Elena Ruiz, MD, was interviewed by a reporter. It did not go well.

“It felt like the reporter really wanted to sensationalize the topic, which was MRSA,” Dr. Ruiz recalls. “I didn’t like the way she was trying to spin it and make the topic sound scary.”

Dr. Ruiz felt flustered and unprepared. When that same reporter reached out for a second interview, Dr. Ruiz was a bit wiser. She asked for the questions ahead of time and, in doing so, saw the story’s proposed title: “Sins of the Flesh.”

(The article was on a skin-eating bacteria.)

Dr. Ruiz swiftly declined the interview. “I remember thinking: ‘I don’t want my name in that!’ Ever since, I’ve sworn: ‘I will never do media again.’”

And she kept her word, until the COVID-19 pandemic swept the globe. “Every one of us needed to get out there and get the message out. I knew I had a mission: I wanted people to hear about the vaccine, not just from researchers, but from clinicians.”

So, Dr. Ruiz faced her fears and, along the way, gained media savvy. Below are her best tips to help other medical professionals take the plunge:

• **Before you talk to a journalist** or media representative, please contact Director of Media Relations So Young Pak for approval and advice. She can be reached at 202-877-2748.

• **Pretend you’re talking to a patient.** Remember the adage about public speaking in front of a naked audience? Instead, Dr. Ruiz advises you to picture one of your patients: “All of us as healthcare workers do this daily. I am talking to my patient through ABC news. So, it really informs the language I use. Simplify, it’s not a dissertation.”

• **Make it personal:** “I use a lot of examples. ‘This is the decision I would make for my loved ones.’ I can be a person and a doctor, so I’ll speak about my own kids. When given the question about getting loved ones to comply with mask wearing at Thanksgiving comes up, I can share how stressful it is to have my mother over! Everyone has that person in the group that wants to be the life of the party that you have to keep your eye on.”

• **Prepare, prepare, prepare:** “If there’s a chance to review questions and think about how you want to answer them, that’s helpful. Rely on our public relations partners! If you’ve never done an interview before, ask to practice with them, get comfortable speaking.”

• **Rate my office:** “I always take a few minutes to look at my background and place some personal items to make sure it looks warm. From the perspective of a patient, they want to see and understand who you are, and to trust you.”

• **Keep calm and carry on (the message):** “Speak slowly and paraphrase the question. You don’t have to jump right in with a response. Sometimes there’s a sense of ‘Here is a chance to say everything I ever wanted to say!’ but a clear, repeated short message may be more effective. What are the three main points I want people to remember?”

• **Don’t be afraid to try it:** “The more I’ve done it, the easier it’s gotten. It can also be fun! I’d always considered myself a shy person, but when I think about it, most interviews feel like the same types of questions my patients have. So just be present. They could be a potential patient. And someone listening could definitely be a potential patient.”
It’s anyone’s guess how many footsteps James P. Girolami, DPM, logged walking the corridors of MedStar Washington during his more than 30 years practicing podiatric medicine. What’s more important to him is what he left in his path—a multi-service Podiatric Surgery division with a thriving residency program and, of course, hundreds of grateful patients.

Dr. Girolami, who retired on April 1, is particularly proud that he was able to practice in his hometown. His only experience living in another place came when he attended the Ohio College of Podiatric Medicine. “I always knew I wanted to be a physician,” he recalls. “As I followed various doctors around as an undergraduate, I found podiatry was the most interesting—the variety of patients, types of surgery and treatments were all to my liking.”

After returning home to complete the Maryland Podiatry Residency Program, Dr. Girolami worked in private practice with several community hospitals before joining MedStar Washington. Being part of the area’s largest and most advanced hospital for foot and ankle surgery exposed him to a particularly eclectic mix of patients. “You can have diplomats and other VIPs in one room, then go down the hall and there’s a patient who’s homeless,” he says. “It doesn’t matter who they are; they all get the same treatment.”

Perhaps the most appealing aspect of Dr. Girolami’s career has been the opportunity to teach and work with residents. “I’m proud to see it grow from two people at the old Capitol Hill Hospital to a larger program that spans MedStar Washington, MedStar Georgetown, and beyond,” he says. “Its growth and success are a tribute to MedStar Health’s theory of practice.”

Sustaining the program has also challenged Dr. Girolami to stay abreast of podiatric surgery’s continually evolving tools, techniques, and other facets that he says, “makes it such an exciting field to be in.”

“He’s been a great resource for residents and very committed to teaching,” says John S. Steinberg, DPM, FACFAS, who figuratively followed Dr. Girolami’s footsteps into the role of division chief in 2016. “Graduates often speak highly of him and note that he was truly a great influence on their career.”

Dr. Girolami responds that working with residents has been “a two-way exchange that’s benefited me as well.” He likes to remind young physicians that learning is a career-long process. “I urge them to be a sponge and soak up all the knowledge they can,” he says. “I also advise them to have an open mind, treat people the way you want to be treated, and be empathetic to your staff.”

Dr. Girolami will soon be joined in retirement by his wife, Nancy, a social worker who was also a member of the hospital’s Burn Center staff that treated patients after a hijacked airliner crashed into the Pentagon on September 11, 2001.

The couple’s plans include a lot of travel in the coming years, though specific destinations are still in the works. “Because of COVID and other things, it may be a while before we do anything internationally,” he says. “That’s fine, because there’s a lot in this country that I’ve never seen. We can’t wait to get started.”
As a member of a family of podiatrists, John Steinberg, DPM, FACFAS, didn’t have to look far to find inspiration for his chosen profession. His grandfather, Marvin Steinberg, DPM, is known as the “Father of Modern Podiatric Medicine,” having pioneered many treatments, medicines, and instruments. Brother Paul now leads a large south Florida podiatric medicine practice built over decades by their father, Lloyd, who passed away in 2020. Three cousins on Long Island are also podiatrists.

But while Dr. Steinberg is justifiably proud of his profession and his family’s contributions, he stresses that the Podiatric Surgery division he now heads is fundamentally about teamwork, particularly when it comes to the program’s signature limb salvage and wound healing services.

“We take full advantage of MedStar’s multidisciplinary resources to collaborate with plastic surgeons, vascular surgeons, infectious disease specialists, and other experts on a full range of cases,” he says. “That creates more opportunities to treat infections early, restore blood flow, and prevent amputation. We’ve also focused on reconstruction, including a significant amount of research on Charcot foot treatments and complex foot deformity correction.”

The teamwork theme also underscores MedStar’s annual Diabetic Limb Salvage (DLS) Conference. Regarded as one of the world’s top events of its kind, DLS regularly attracted over one thousand participants in pre-pandemic times. “We’re conducting it online again this year, unfortunately,” Dr. Steinberg says, “but the quality of presentations will be as good as it’s ever been, and we look forward to a full return in 2023.”

Dr. Steinberg began his training close to his Florida roots, graduating from Barry University’s School of Podiatric Medicine in 1995. He completed a three-year surgical residency at the Inova Fairfax Podiatric Residency Program, followed by a Diabetic Foot/Limb Salvage Fellowship with the University of Texas at San Antonio where he stayed to work in the Orthopaedic department for several years.

After almost 10 years practicing and teaching at MedStar Georgetown, he added the role of program director for MedStar Health’s Podiatric Surgery residency, now one of the largest in the country with 18 residents accepted every three years. At the recent conference of the American College of Foot and Ankle Surgeons in Austin, MedStar Health’s residents swept the poster presentation awards, a feat that Dr. Steinberg says, “shows the vitality of our research on a broad variety of foot and ankle surgery topics.”

Dr. Steinberg is also proud of how MedStar Health’s clinical practice in Podiatric Surgery has grown to encompass the full gamut of foot and ankle issues.

“Each member of our staff has fellowship training—an uncommon attribute in podiatric surgery,” he says. “We do a lot of speaking nationally and look forward to gaining an even higher profile in the profession.”

To unwind from his busy schedule, Dr. Steinberg enjoys playing tennis and pickleball, “my new favorite sport,” he says. Baseball—especially the Washington Nationals—and travel are also popular pastimes for the Steinberg family. Dr. Steinberg’s wife, Jamie, is an audiologist specializing in cochlear implants. Son Reid is set to begin college at the University of Virginia this fall, while daughter Emery, a high school junior, will begin her college search this fall.
Erin Felger, MD, and Ripley Rawlings had been planning a family vacation for a while. Both had been working long hours and were ready for a getaway with their children. Now, the time away they were so looking forward to, and had scheduled for early March, would have to wait.

While watching a news broadcast on February 24, Dr. Felger learned, along with the rest of the world, that Russia had invaded Ukraine. “We both felt like we wouldn’t enjoy the cruise if we didn’t go over there to try and help,” she said, “so we ended up going during the first week of the conflict.”

After serving for three years in the United States Navy as a lieutenant commander, Dr. Felger joined MedStar Washington’s One Team as an endocrine surgery specialist in 2009. She and her husband, “Rip” to family and friends, met when they both served in Iraq, she as a surgeon and he as an infantry and reconnaissance officer in the Marine Corps.

The decision to go
Five days before their scheduled cruise, Dr. Felger booked two flights to Europe. “Obviously, our service backgrounds influenced our decision, but we were spurred on to volunteer because Ukrainian citizens had democratically elected a president and a government. From our perspective, the invasion was a violation of that country’s citizens’ rights. My husband and I feel very strongly about the concept of democracy and being able to have it. It’s important and shouldn’t be taken away or destroyed,” said Dr. Felger.

Leaving their children, Isabelle and Jack, with their grandparents, they flew into Warsaw, Poland’s capital, stayed overnight, and hired a rental car the next morning. From there they drove to the small town of Hrebenne, located next to the border between Poland and Ukraine. “I didn’t physically put a foot inside Ukraine for a variety of reasons, mainly for my personal safety and because of my children,” said Dr. Felger.

Refugee border camp
In those early weeks, every couple of hours, hundreds of Ukrainians crossed the border into Poland. They only stayed at the camp for an hour or two to rest, eat a meal, receive medical attention, and wait for a ride. The refugee camp organizers, a chapter of the Knights of Columbus from Oklahoma, had matched the refugees with European citizens from Belgium, Holland, and Germany and, before long, they were transported safely to those countries. “The camps weren’t fancy, and it didn’t matter because as the refugees arrived, they were warmly welcomed by Polish citizens who truly opened their hearts to receive them,” she said.

Providing medical aid
Due to the short time the Ukrainian refugees were at the camp, Dr. Felger provided basic medical treatment. “My background is in combat surgery, and when I arrived at the camp I expected to be operating on patients. That didn’t pan out, so I did all sorts of general medicine types of stuff. I took blood pressures and treated people with bad burns and coughs. I treated two premature newborns whose mothers had taken them out of the hospital in Ukraine on the day they were born and brought them to Poland.”

At the camp, medical supplies arrived from Germany, France, and Great Britain. “The camp was so well run and organized it only took one day to get an airway kit, so I could intubate a patient.” But there were some wounds Dr. Felger couldn’t treat. “One woman sat in a chair and cried the entire time, until she left. I couldn’t do anything to help her. I tried, but she kept crying and crying and crying. That was the hardest part. I’m a caregiver. My goal is always to try to fix somebody. I realized there were some things I couldn’t fix.”

Coming home
Dr. Felger left after nine days, returning to Washington before the medical supplies donated by MedStar Health arrived. Rip stayed on at the border, volunteering at the refugee camp for two more weeks, one by himself, and the other with his high school-aged daughter, Cecily. Currently, they do not have plans to return.

“l couldn’t stay longer, because I needed to check on my children, and I had patients scheduled for surgery,” Dr. Felger said. “I think, for both of us, it was exceedingly heartbreaking to watch these people come across the border. Somewhere in their hearts they know they will probably never go back home. Or if they do, it won’t be the home they had, because it will be gone. I watched women and children come across the border with no husbands, sons, brothers, or uncles because they were all in Ukraine fighting. It really broke my heart.”

Lives intersecting on borderlines

Dr. Felger (left) with other volunteers.
Like all new mothers, Chinwe Mueller’s life changed when she gave birth to her first child. But the event proved pivotal in other ways as well. “The nurses took such great care of me that I decided I wanted to go into nursing myself,” explains Mueller. After graduating from Mount Carmel College of Nursing in Columbus, Ohio, she set her sights on furthering her career in cardiology. “The heart is such an amazing organ,” she says. “As an RN, I enjoyed accompanying the doctors on rounds and learning as much as I could about each patient’s condition.”

To become more involved with patient diagnosis, Mueller earned a Nurse Practitioner degree at Ohio State University. After graduating in 2012, she came to MedStar Washington, where she worked in heart failure services before moving to Cardiac Electrophysiology, where she has been the department’s chief advanced practice advisor (APP) for the past several years.

Along with applying her training and leadership skills, Mueller enjoys being a part of the discipline’s continually growing range of treatment options, from WATCHMAN devices and leadless pacemakers that manage heart rhythm to a recently launched trial to evaluate a new method for treating atrial fibrillation. “Electrophysiology has all this cool stuff, and there’s always something new coming along to improve the quality and efficiency of patient care,” Mueller says.

Mueller also has high praise for her “work family” of physicians and fellow APPs. “If you’re going to be at work 50-plus hours a week,” she says, “it’s nice to be with people you enjoy being around. It’s just a great place to be.”

As with other MedStar Washington departments, Mueller’s team was challenged by the coronavirus pandemic, pulling night shifts, and working in other areas of medicine. She says the experience reinforced an understanding of the need for flexibility and mutual reliance. “We went through it together, and we’re a stronger team because of it,” she says. “It also made us appreciative of the job we do and the opportunity we have to do it.”

Mueller doesn’t slow down when she’s away from work. Her love of exercise means she can be found on her Peloton bike, running, at the gym, hiking, and pretty much anything else involving activity. With two adult children on their own—her son is an EMT, and her daughter works for the Chesapeake Bay Foundation—Mueller is looking forward to a newly purchased house in D.C. to provide additional ways to stay busy.

“I think it’s important to take care of yourself as you get older, whether it’s exercise or eating right, and avoiding the temptation to slow down,” she says.
Helene Cook, DPM
Podiatric Surgery Chief Resident

Helene Cook, DPM, has lots of ways to refer to the residents and attendings that make up the podiatric surgery team at MedStar Washington Hospital Center, but it is notable that all of them feature words like team, squad, and family.

Her favorite? “I’m on the ‘Pod Squad,’” she says.

Whatever the term, Dr. Cook’s approach to her role as chief resident of Podiatric Surgery is infused with that sense of team, camaraderie, and dedication embedded in MedStar Washington’s Podiatric Surgery department.

“I know that my co-residents will be there to support each other for the rest of our lives,” Dr. Cook says with confidence.

Yet the strong connection forged by these doctors is balanced by a department that prides itself on preparing its doctors to go out into the world as confident surgeons.

“One of the beauties of our program is the independence,” Dr. Cook says. “There is no hand holding. The default is: Go out there and get it.”

And they do: As a member of the MedStar Health family, Dr. Cook notes the residents have access to all MedStar Health facilities in the Maryland and Virginia network. The attendings have also established relationships with Kaiser Permanente Hospitals and the University of Maryland Medical Center.

“We are all over the place,” Dr. Cook says. “It allows us to work with people who have trained across the country. We’re learning to see procedures many different ways.”

One of Dr. Cook’s biggest priorities—and proudest achievements—as Chief Resident was helping to re-establishing and expanding new rotations after COVID shuttered them. She helped forge new alliances in Baltimore but was most excited about the elective rotation this year at Marine Corps Base Camp LeJeune—under the direction of MedStar Washington 2019 podiatric alum Colin Mizuo, MD.

This year’s graduating class of residents was able to experience that off-site rotation.

An avid runner in college, Dr. Cook had always presumed she’d go to medical school and pursue a surgical specialty. But her priorities shifted when, as a college student studying abroad, she had the opportunity to spend time with her grandmother in her father’s native England. Dr. Cook’s grandmother had lived with lower extremity wounds since suffering a stroke fifteen years earlier. It was Dr. Cook’s first experience with wound care and limb salvage. When she returned home, a family friend introduced her to the field of podiatry.

She shadowed it, fell in love and never looked back.

And while much of her research as a resident has focused on limb salvage—taking advantage of MedStar Washington’s premiere status as a leader in that specialty—her next step will be a yearlong fellowship that focuses on advanced foot and ankle reconstructive surgery.

Dr. Cook will return to her home state of California, where she’ll complete the orthopaedic practice-based Northern California Reconstructive Foot and Ankle Fellowship. Ultimately, she hopes to settle with a group practice or hospital with the intention of teaching residents and fellows.

After all, when it comes to the “pod squad,” it’s all about the “team.”
If Ben Plotz, MD, were to play a doctor on television, he knows which one he’d want to be. The show *House*, which aired for eight seasons on Fox, featured episode after episode of mysterious medical cases, each one eventually solved by the maverick doctor Gregory House.

It’s not that Dr. Plotz, an attending rheumatologist at MedStar Washington Hospital Center, fancies himself a Hugh Laurie type, but rather there was a particular trend about the majority of those highly complex and initially misdiagnosed cases: Most of them ended up having a rheumatological diagnosis. “They were always difficult to diagnose,” Dr. Plotz recalls. He thought often of that show during his internal medicine training. “I found the most interesting cases, the medical mystery cases, tended to be rheumatology cases.”

“In rheumatology, you’re always on your feet and in this grey area,” says Dr. Plotz. “You have to develop enough expertise to work with a constellation of often bizarre symptoms.”

Medical television dramas aside, Dr. Plotz had real-life beacons within the specialty to serve as inspiration. He hails from a lineage of rheumatologists, noting he may be one of the few third-generation doctors who exist within that specialty. His grandfather, Charles Plotz, MD, was the chair of the Rheumatology Department at SUNY Downstate Medical Center, and his cousin, Paul Plotz, MD, served as chief scientific director and deputy director of the Arthritis and Rheumatism Branch at the National Institutes of Health.

While those may be two big pairs of shoes to fill, he keeps their medical legacy at the forefront of his work. “My grandfather passed away right when I began applying to fellowships, but he knew my plan was to pursue rheumatology and I was fortunate to discuss some cases with him,” Dr. Plotz says. Now, when a particularly tricky case comes up, the attending can’t help but tease out what that conversation would have looked like. “I often think, I’m curious what he’d have to say about it,” he says.

Dr. Plotz joined MedStar Washington in 2021 after completing a two-year rheumatology fellowship at NYU Langone Health. He initially completed research on hand osteoarthritis, which, despite being the most common arthritis in the country, is typically undertreated. As he settles into his role, Dr. Plotz plans to continue to produce meaningful research, but also wants to tailor his interests based on the population at the hospital.

“MedStar Washington has such a powerhouse cardiology department,” Dr. Plotz explains, “one exciting area of interest is putting together a gout and heart failure clinic.” Gout, a form of arthritis, is often underappreciated and under-treated, and disproportionately affects people with cardiac diseases, making a collaboration between those two specialties an opportunity for maximum impact. He is hopeful creating a partnership between the departments will offer improved care and innovative treatments for patients. And, perhaps, a chance to uncover a medical mystery or two.
From the desk of Jennifer Ayscue, MD
Director, Colon & Rectal Surgery

It’s been five years since MedStar Washington Hospital Center received a grant from the Carlynn and Lawrence Silverman Family Foundation to enhance colorectal cancer screening services. Over that period, the program has made remarkable strides in raising awareness in our community about the prevention and treatment for what is the third most commonly diagnosed cancer, and the second most common cause of cancer deaths in the U.S., for men and women combined.

We started on this journey with one physician and one nurse navigator, and we’ve expanded our staff to include two nurse navigators and an administrative assistant. We’ve developed valuable partnerships with MedStar Washington’s gastroenterology department and with the Community of Hope—a local organization that assists uninsured families with healthcare needs—and with D.C. Health and primary care practices, to help increase colorectal screening.

This success is particularly gratifying, as some of the country’s highest rates of colorectal cancer are found in the wards adjacent to the MedStar Washington campus. Hospital systems across the country regularly consult us on how they, too, can establish similar programs in their communities.

Another Silverman Family Foundation grant will allow us to maintain and build on these accomplishments, including expanding our program to other MedStar Health hospitals. We also hope to develop research protocols around the program and increase awareness among primary care providers that we’re available to help their patients with screening and follow-up needs.

The magnitude, precision, and quality of our colorectal cancer screening program is a testament to our nurse navigators, who work directly with patients to ensure they are properly prepared for the tests and procedures, and help address other issues and concerns they may have.

Additionally, we have expanded our program to help patients who are diagnosed with colorectal cancer to navigate through their workup, evaluation, and treatment plan. In keeping with our dedication to this program, we are currently in the process of becoming accredited by the National Accreditation Program for Rectal Cancer (NAPRC) for our multidisciplinary approach to providing rectal cancer patients with appropriate care. That recognition will formalize a concept all of us already know and embrace—that providing the highest quality patient care requires a team approach at every stage, from initial screening and diagnosis, to post-procedure support and guidance.

For more information about MedStar Washington’s colorectal screening program, members of the medical and dental staff can contact us at 202-839-1822. To schedule an appointment for your patient, please call 202-877-0721.