

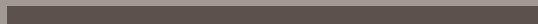
Research & Teaching AWARDS



2015 **Morris F. Collen** Research Awards
Teaching Awards for Excellence



The TPMG Research and
Teaching Awards were
established in 2003
to acknowledge the
extraordinary
accomplishments
of practicing clinicians
who also excel in
research and teaching.



Morris F. Collen, MD



In 1948, Morris F. Collen, MD, became one of the seven founding physicians of The Permanente Medical Group. As a clinician, researcher and teacher, Dr. Collen made significant contributions to Medical Group colleagues and Kaiser Permanente members. Today, he is recognized internationally for his pioneering work in applying computer technology to medicine.

From 1953 to 1961, Dr. Collen served as Physician-in-Chief in San Francisco. He became Director of Medical Methods Research (now the Division of Research) in 1961, ending his tenure in 1979 when he became Director of Division of Technology Assessment.

Dr. Collen's work in medical computing attracted national attention. He was elected to the Institute of Medicine of the National Academy of Science in 1981 and served as Chair of the Library of Medicine's Board of Scientific Counselors from 1985 to 1987. As a Scholar-in-Residence from 1987 to 1993, he wrote a history of medical applications of the computer.

Since 1983, Dr. Collen has served as a Consultant with the Division of Research, and he remains an enthusiastic supporter of research and teaching in TPMG.

"To be a good physician, you have to keep up with what is new, which means you have to be involved in research and training. Patient care is our first obligation, and to maintain a good quality of care, we must also research and teach. And we do."

~ Morris F. Collen, MD



MORRIS F. COLLEN
RESEARCH
AWARD

"The main driver behind this study is to find out if we can do better at detecting colon cancer," said Dr. Corley.
"We learned that yes, even when you're meeting quality standards, it's possible to do better."

Douglas Corley, MD, PhD

ADENOMA DETECTION RATE AND RISK OF COLORECTAL CANCER AND DEATH

Gastroenterology, San Francisco

Douglas Corley, MD, PhD, led a team that evaluated the association between physician adenoma detection rate (ADR) and colorectal cancer, the second leading cause of cancer death. Adenomas are precancerous polyps found at colonoscopy. "ADRs vary widely between physicians, even among those meeting national standards," said Dr. Corley. "We evaluated if this variation makes a difference in patients' subsequent cancer risk."

It does. In their study, Adenoma Detection Rate and Risk of Colorectal Cancer and Death, published in the New England Journal of Medicine (April 2014), patients of physicians with higher ADRs were at lower risk of developing future colorectal cancers. Each 1% increase in ADR predicted a 3% decrease in future colorectal cancer risk—and a 5% decrease in fatal cancers.

"Our findings validate ADR as an important quality metric for colonoscopy and suggest that increasing ADRs may even further improve the effectiveness of colorectal cancer screening," said Dr. Corley. In accordance with his and other research, the American Society for Gastrointestinal Endoscopy increased its ADR thresholds for quality assurance.

As the largest study of its kind and the first US study to validate the link between adenoma detection and colorectal cancer risk, Dr. Corley's efforts promise to improve care for Kaiser Permanente members and patients across the country.



MORRIS F. COLLEN
RESEARCH
AWARD

"Our shared goal is to spare women unnecessary surgery while identifying cancers more promptly," said Dr. Suh-Burgmann. "We all want to practice in a way that maximizes benefits and minimizes harm."

Elizabeth Suh-Burgmann, MD

ULTRASOUND FOLLOW-UP OF SMALL ADNEXAL MASSES

Ob/Gyn, Diablo Service Area

Elizabeth Suh-Burgmann, MD, conducted a study to help clinicians everywhere better manage care for postmenopausal women with small adnexal masses.

Adnexal, or ovarian, masses in older women often trigger concerns about cancer. However, cancer is uncommon while benign masses are common. Masses are also increasingly detected as incidental findings. Dr. Suh-Burgmann wanted to know how many of these masses actually turned out to be cancer—in other words, was surgery really necessary? Furthermore, how long did a mass need to be monitored to exclude malignancy? No prior study had studied these questions in a real-world cohort.

Her study, published in the American Journal of Obstetrics & Gynecology (December 2014), found that among approximately 1400 women in the study, only 7 had cancer (0.5%). There were 11 borderline tumors which can, in rare cases, progress to cancer. Including borderline tumors, the rate was 1.3%. All malignancies demonstrated growth on ultrasound within 7 months.

The study led to the development of new radiology templates to help clinicians better interpret ultrasound findings, and new practice recommendations for when to choose surgery versus monitoring.



TEACHING AWARD FOR EXCELLENCE IN GME

"I love that 'aha' moment when people grasp a concept," said Dr. Minikel. "I want our residents to be excellent clinicians with a passion for what they do."

Laura Minikel, MD

GRADUATE MEDICAL EDUCATION

Ob/Gyn, East Bay Area

Laura Minikel, MD, has earned numerous teaching awards as a faculty member from UCSF and the American College of Obstetrics and Gynecology. Listening to her residents, it's easy to see why the accolades are so well deserved.

"She has mastered the balance of being approachable and nurturing, while at the same time, challenging us to grow," said a second year resident. Another resident adds: "She works longer and harder than anyone else to ensure that each person is well supported."

As a KP residency program director in the East Bay Area, Dr. Minikel has been exceptional at incorporating resident feedback to enhance the program. She is highly regarded as an excellent role model for developing physicians at a critical stage of their training. She seizes every opportunity to expose residents to as many challenges, medical problems and specialties as possible.

She takes great pleasure in teaching, mentoring and nurturing the next generation. "I want my residents to be better surgeons, better obstetricians than I am," she said. "It's wonderful when you have people who come into residency and don't know how to hold a scalpel, and four years later, they're the person you want next to you in an emergency."



TEACHING AWARD FOR EXCELLENCE IN CME

"Our whole profession is based on constant learning, training and teaching," said Dr. Kumar. "So every opportunity I have to teach, I seize it!"

Ruma Kumar, MD

CLINICAL MEDICAL EDUCATION

Palliative Care, San Jose

Ruma Kumar, MD, discovered early in her career that, in her words, "I get an amazing thrill from teaching my colleagues." But as far as she's concerned, the very best teaching has less to do with delivering a well-honed lecture than with getting her audiences up and moving, acting and interacting.

"I try to make my teaching sessions as engaging and interactive as possible to get the audience to participate," she said. "We all have our experience and our expertise to share and when we bring those into the conversation, it becomes a much richer learning environment."

Dr. Kumar teaches a broad spectrum of topics on the local, regional and national levels, including: life care planning, palliative care, communication skills, and cultural competency. She helped organize the region's first palliative care symposium. She uses a variety of formats to engage her colleagues, such as role play, computer-based learning, panel discussions, market place sharing of best practices and game formats. She regularly invites patients to join her presentations to make sure their voices are heard and their needs met by those who care for them.