

Aequanimitas



A twice-yearly newsletter for current and former Johns Hopkins Medicine housestaff and friends

Fall 2018

New Efforts Empower Women in Academic Medicine

In response to a significant, one-time drop in the number of women residents who matched at Johns Hopkins in 2016—from about 50 percent to just 20 percent—the Osler Medical Residency Program has undergone a transformation.

Heather Sateia, named as a new associate residency program director, has championed more diversity and strategies to improve the program's culture. She's working closely with **Gail Berkenblit** (Osler, 1998), director of ambulatory medical education and associate residency program director.

Together, the two physicians have been taking a more targeted approach to recruiting and retaining female Osler trainees. They provide warm welcomes on interview days, send personal emails before and after interviews, and make sure trainees who express an interest in a specialty are put in touch with a female physician in that field.

The school of medicine is doing its part: New benefits include more time off for birth recovery and parental leave (12 weeks and four weeks, respectively), as well as increased financial coverage for infertility treatments.

The Task Force on Women's Academic Careers in Medicine has strengthened critical support for women in academia by providing more networking, mentorship and sponsorship opportunities, in addition to CV review and job negotiation workshops.

Rachel Levine (Osler, 2006) chairs the task force, which identifies career obstacles and provides guidance on gender equity around salary, promotion rates, leadership appointments and family-friendly work practices in the Department of Medicine.

Drawing from residents' feedback, says Sateia, the residency program has offered more opportunities for residents to find mentors

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PHOTO BY SHERIE FORNOFF

MORE SEATS AT THE TABLE: From left, Gail Berkenblit, Rachel Levine and Heather Sateia recently met in the Mary Elizabeth Garrett Boardroom to discuss recruitment efforts and their experiences as women physicians. Garrett (portrait above) was the founding benefactor for the school of medicine, stipulating that admittance of women must be on equal terms as those for men.

“We worked hard to reach out to applicants before they came, to make a personal connection.”

—Heather Sateia



We recently published the outcomes from the iCOMPARE study in *The New England Journal of Medicine*. The data proved informative. First, we learned that interns—regardless of duty hour policy—spend their time in similar ways. It also confirmed what many of us feel: Our interns spend little time at the bedside (12 percent) and too much time with the electronic medical record (40 percent, or more than 10 of 24 hours). Another finding: Duty hour policies do not impact medical knowledge tested by an exam. And, perhaps not surprisingly, we found that interns and program directors experience duty hour policies differently. Interns overwhelmingly preferred standard (more restrictive) hours, while program directors overwhelmingly preferred flexible ones.

Most importantly, we learned that despite finding that most interns and residents under both policies were satisfied with their training, burnout was very high— independent of duty hour policy.

These data shine a brighter light on the urgency to address physician burnout. They also affirm that duty hour policy is not a meaningful factor in this issue. Wellness programs, ours included, have begun to address burnout. But providing healthy snacks and massages will not be enough. We need to search for causes at the program level and well beyond.

Ultimately, iCOMPARE reminds us that the ideal learning environment is not obvious. The best structures rely on close collaboration between trainees and program directors. I'm excited about all the changes we've made to our program, built on this partnership.

Sanjay Desai, Director
Osler Medical Training Program

New Efforts Empower Women in Academic Medicine (from page 1)

through events that highlight female role models. “People have loved that,” she says.

At a recent event, **Redonda Miller** (Osler, 1992), president of The Johns Hopkins Hospital and mother of two daughters, offered suggestions for women who want to pursue leadership roles. “Let others know about your career aspirations,” Miller said. “And, when opportunities arise, be sure to say yes to new projects and apply for new positions. Push yourself past your comfort zone and toward your goals.”

These initiatives may have contributed to a historic change: On Match Day 2018, 62 percent of the residents who matched in the Osler Residency Program were women. And, over the past several years, more than a dozen residents have started families.

“I’m heartened by this progress,” says Berkenblit. During her residency, only 30 percent of trainees were women. She waited until after her residency to have a child—a daughter, now 11.

Things were harder for Levine. In 2003, after an internal medicine residency at Boston University Medical Center, she began a fellowship in general internal medicine at Johns Hopkins, with a focus on medical education. Levine married the following year and had her first child in 2005. She was among only a few women in the program to have given birth during training.

She sought out role models who could tell her how to manage new demands on her time, but found very few, and almost no female doctors were working part time in academic settings at that time.

Some 15 years later, Levine, who has since had two more children, is making sure other women get the support and mentoring she craved, as she leads the task force. Levine, who is also associate vice dean for faculty educational development and the Department of Medicine’s associate vice chair for women’s academic careers, is applauding and supporting the latest strategies created by residency program leaders to attract and retain more women physicians.

After the 2016 precipitous drop, Berkenblit and Sateia met often to build interest during recruitment. “We worked hard to reach out to applicants before they came, to make a personal connection,” says Sateia, mother of three children under

Top Three Areas of Focus to Support Women Trainees



Recruitment



Work-life balance



Mentoring

the age of 7. And, to improve the odds for retention, Sateia collaborated with an organizational psychology expert at the Johns Hopkins Carey School of Business to better understand the culture within the program and identify opportunities for innovation.

Nevertheless, says Levine, barriers persist, “and they can be subtle and unconscious.” Many women report situations where they’re not being heard, she explains: “You might be the only one making a certain comment, and no one says anything until a few minutes later, when a man says basically the same thing and is acknowledged.”

Levine adds that women seated under boardroom portraits of white men may feel intimidated. “You might not feel like you belong there,” she says. “It’s many times worse for women of color.”

That said, Berkenblit points out that the women’s task force was among the first of its kind in the nation and has been championed by **Mark Anderson**, director of the Department of Medicine.

She also credits Osler residency program director **Sanjay Desai** with promoting a work-life balance for both women and men. “Sanjay has spent a lot of time looking at rotations and how duty hours align with family and personal time,” says Berkenblit. “We are still a very rigorous program, but there’s more openness to change.”

The most pleasant surprise amid all these efforts? “The degree of engagement of all members of the program, regardless of whether they are men or women, single or married, with kids or without,” says Sateia. In the end, she observes, this strategy “is really about providing support to help people lead healthy lives and ensure that the program is what every trainee wants it to be—and helps them find joy.” ■

Learn more about women in medicine at Johns Hopkins: bit.ly/jhwmwomeninmedicine

The Office of Women in Science and Medicine recently paid tribute to the 250-plus women who have been promoted to full professor at Johns Hopkins. See list: bit.ly/250womenprof.

Beyond the Dome

Susan Wolfsthal, Associate Chair for Education, University of Maryland School of Medicine

In July 1983, as a new crop of Johns Hopkins interns were about to begin their 36-hour shifts, senior resident Susan Wolfsthal (Osler, 1980) was newly pregnant and “felt like garbage,” she recalls. “In those days, there were no parental leave policies in place, so we were secretive about such things.” When Wolfsthal finally told the assistant chief of staff that she was pregnant, his response was, “What are we going to do with you now?”

At first, Wolfsthal said nothing. Then, she responded that she’d do what **Mary Newman** (Osler, 1980) did six months earlier. In other words, both women—the first in their program to have babies—would work as long as they could and take off only 10 weeks for childbirth and recovery.

The two women had something else in common: Both chose careers in general internal medicine (Newman is a Johns Hopkins internist). “In my heart of hearts,” says Wolfsthal, “I always considered myself a generalist, but people would say, ‘Oh, you’re just doing general internal medicine?’ and I’d respond, ‘Yes—and with pride.’”

That self-assurance—and a passion for graduate medical education—sustained Wolfsthal as she built a career in internal medicine residency education. For the past 26 years, she’s served as residency program director in internal medicine and associate chair for education at the University of Maryland School of Medicine. She’s responsible for the clinical training of more than 130 residents every year and oversees 14 fellowship directors.

Wolfsthal has also been a principal investigator on several national grants to develop innovative programs in medical education. These include competency-based curricula and evaluation, evidence-based medicine and faculty development, among others. In addition, she co-directs the medical student course in physical diagnosis. Her teaching extends to residents’ daily conferences and supervision of trainees on the inpatient services and clinics.

Author of three books and more than 20 articles on graduate medical education, Wolfsthal has won multiple honors, including recognition by the Academy for Educational Excellence. She continues to see patients in her primary care practice and on the medical service at the University of Maryland Medical Center and to mentor trainees and faculty.

A Westchester, New York, native and daughter of European immigrants, Wolfsthal graduated from the University of Rochester in 1976 with a bachelor’s degree in biology. She earned a medical degree at the Johns Hopkins University School of Medicine in 1980 before beginning her Osler residency. Wolfsthal lives in Baltimore with her husband, William Keys, a neurologist. They have two daughters and two grandchildren.

How has your Osler residency shaped your academic career?

There was always a sense of teamwork and a common goal—to be meticulous, never sloppy. It was a wonderful experience, despite those crazy hours. When I wrote two self-study books with internal medicine questions and case studies, I drew from many themes from my Hopkins training and recreated interactions from the Osler service.

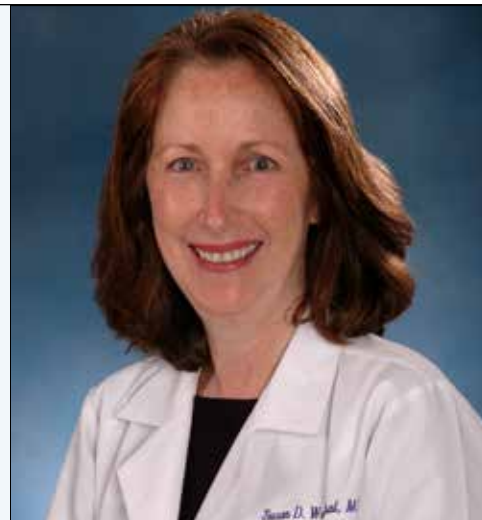
Who were your role models back then?

Carol Johns, my physical diagnosis instructor, taught me how to listen to the lungs and take a history. I loved

cardiologists **Ken Baughman** and **Steve Achuff**; gastroenterologist **Frank Herlong**; cardiologist **Bernadine Healy** and, especially, general internal medicine physician **Philip Tumulty**. He was a rock star. We’d hang on his every word. I also learned a lot about infectious diseases from **John Bartlett**. These people loved to teach, cared about you and reassured you.

How does the internal medicine residency training at University of Maryland differ from Johns Hopkins program?

Our programs are more similar than they are different. We both strive



to provide our residents with rich clinical learning opportunities across the breadth of internal medicine and ensure that we promote their wellness and a work-life balance. We set high academic standards and emphasize the importance of empathy, humanism and cultural sensitivity in the care of our patients. Ultimately, we both want our residents to feel that their training gave them the foundation for their careers as physicians.

How are you grappling with the growing demands on residents’ time?

It’s a struggle: The electronic medical record is a good and bad thing. It’s a matter of getting used to it. The progress notes are more efficient and all the data feeds right in. We used to run after them to complete the chart, but getting people in and out of the hospital quickly doesn’t always work with complex patients.

What are you most proud of?

It’s similar to what we say about our families. I’ve graduated over 800 residents. I’m so proud of what they’re accomplishing, wherever they are. I’m pleased that we’ve transformed this residency to make ambulatory education more modern and creative, with more research, mentoring and a new wellness curriculum. ■



NATIONAL HONORS: The Osler medical training program was recently listed as the top clinical training program for internal medicine in the country. The rankings were made by Doximity, a professional networking tool for physicians and health care professionals—aided by *U.S. News & World Report*.

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MEET THE NEW ASSISTANT CHIEFS OF STAFF: From left: Amit Goyal, Barker; Jacqueline Zimmerman, Longcope; Susan Lin, Thayer; David Furfaro, Janeway.

PHOTO BY SHERIE FORNOFF



Support the Osler Fund for Scholarship

By investing in the future of our young doctors, we continue the legacy of William Osler to prepare and inspire the next generation of leaders. Your contribution supports educational opportunities for current residents to enhance their training—experiences that might not otherwise be possible. If you are interested in supporting our housestaff, contact Carly Frank at 410-550-4098 or cfrank23@jhmi.edu. Thank you for your continued support. To make a gift online, please visit our website at bit.ly/oslerfundforscholarship.

Class Notes

Department of Medicine Annual Awards 2018

Vasanth Sathiyakumar
Daniel Baker Award (as voted by faculty and nursing)

Michael Poku
*Norman Anderson, M.D. Memorial Award
(as voted by faculty and nursing)*

Ramzi Dudum
Norman and Mary Stewart Award

Danielle Robinette
Priya Palagummi Memorial Award

Joseph Murray
American College of Physicians Award

Alexandra Horne
Basic Student Teaching Award—Intern

Vishal Rao
Basic Student Teaching Award—Senior Resident

Victor Nauffal and Alejandra Ellison-Barnes
Frank L. Coulson Jr. Award

Manny Monroy-Trujillo
Full-Time Faculty Member

Charles Locke
Part-Time Faculty Member



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