

Word on the Striet

The Department of Medicine Newsletter



The First Word

Robert M. Strieter, MD, Chairman



Spring has finally come to Charlottesville. This also means that numerous deadlines are approaching for several programs and funding opportunities that include: NIH grants, Research Day Abstracts, and Effort Reports. As additional funding becomes available due to the economic stimulus plan, it remains important to pursue applications for continuation of existing grants and new grants. In addition, the first Annual Resident Health Policy Symposium will be held this May. This symposium will allow our Residents to give presentations regarding their work on Health Policy initiatives.

In this month's issue the Enterprise Reporting System (ERS) group is continuing to refine their

reports to allow greater access to information. ERS will also have a publication announcement early next month of a new dashboard, which will allow easier access to reports and implement new design changes.

The Office of Clinical Affairs continues to showcase our divisions throughout the department, highlighting Nephrology for this month's article. Highlights in the article include Nephrology's numerous inpatient and outpatient clinics, which utilize the latest technological advances. In addition to the excellence in clinical activity, the article highlights the numerous clinical trials that place the division at the forefront of outstanding innovative care.

Reminders

- All Effort Reports are due NLT April 30, 2009. See attached memos at the end of the newsletter.
- It's time to start planning for End of Year encounter form processing. Please be sure all encounter forms and consult cards are completed and submitted to the billing office daily, including MR#, DOS, Physician name, Referring name, CPT, Diagnosis and signature of the provider for processing. All incomplete encounter forms/consult cards returned to you should be corrected and submitted to us as quickly as possible to receive credit/RVU's in this fiscal year. Your help with this process is greatly appreciated!

Save the Date

- April 24th is the deadline for Research Day Abstracts. Registration may be completed at: <http://www.healthsystem.virginia.edu/internet/internal/research/researchday/rd2009.cfm>
- On May 20th, the First Annual Resident Health Policy Symposium will be held at 1:30 in Jordan G1/G2. Residents who participated in the Health Policy elective during the year will give presentations about their topic papers written during their rotation.

Medical Grand Rounds

- April 28th, Atuk lecturer Nephrology
- May 5th, John P. Cooke (Stanford), Cardiovascular Medicine
- May 12th, Chiefs' Grand Rounds
- May 19th, Brian Uthlaut, General Medicine

[View Full Schedule](#)

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School of Medicine

Undergraduate Medical Education

Mulholland Award: We are delighted to announce that the Department of Internal Medicine is the recipient of the Mulholland Award bestowed by the graduating class of 2009. On behalf of the Department of Medicine, we would like to thank each of our faculty and housestaff teachers for a job well done.

Medical Student Awards: We are also proud to announce the recipients of the 2009 Gratton Alexander Litz and Herbert R. Farber Awards.

Dr. Herbert R. Farber graduated from the University of Virginia School of Medicine in 1940. His outside interests included accomplishments in both sports and the fine arts. This award is presented in his name to a student who excels on the Internal Medicine clerkship and also demonstrates

excellence in athletics or in the fine or performing arts. This year's recipient is Mathew Meeneghan. Mathew was outstanding in Internal Medicine and is an accomplished musician and triathlete.

Gratton Alexander Litz, III, known as Alex, graduated from the University of Virginia School of Medicine in 1983. He continued his training in Internal Medicine at the University of Alabama, where he won the award for outstanding medical resident. He had been selected to become Chief resident in that program, when his career and life were tragically cut short by cancer, which resulted in his death on November 2, 1986.

Criteria for the Litz Award include excellent clinical skills, outstanding ability to interact with patients on a personal level, zest and enthusiasm for the clerkship, an eagerness to learn, a good sense of humor, and evidence of being a well rounded person.

Finance & Administration

Billing Operations

We understand that these are difficult times and appreciate all of your efforts to review your monthly billing reports and bring discrepancies to our attention. I would like to remind you of the importance of documenting your work thoroughly and including as much detail as possible to support the level of service you wish to bill. Don't forget your time when billing for Critical Care. Please be sure to include your physical presence when working with a resident/fellow and always submit your billing to the DOM for processing as quickly as possible.

- When you are on the inpatient service, please review your blue billing sheet daily for any commu-

nication from the coders regarding your documentation, if you have questions, please don't hesitate to contact the billing office or one of the coders (Lori Taylor and Tammy Rutherford @ 2-3201 or Stephanie Griffith and Lucinda Veney @ 2-3203) We are here to help!

- When you are on the consult service always complete your billing cards and submit them for processing as quickly as possible. Please be sure that your documentation is done within 24hrs.
- The DOM billing staff and HSF educators are happy to schedule additional training if needed.

Required information for processing charges: MRN#, DOS, Attending name, Referring name, CPT, Diagnosis and signature of the provider

Your help with this process

The winner of this year's award is James Click. James had an infectious enthusiasm for Medicine, approached patients with extraordinary warmth and compassion, and was a clinical all-star.

Congratulations Matt and James.

Match Day

Match day for students graduating in 2009 was March 19th. Our students who went on to do Internal Medicine residencies or preliminary years in Medicine had an outstanding match. We had students match at some of the best institutions in the country.

Among those institutions represented were Johns Hopkins, Hospital of the University of Pennsylvania, Duke, UCSF, UT Houston, Vanderbilt, UT Dallas, Wisconsin, Thomas Jefferson University, NYU, Maryland, Georgetown, University of Pittsburg, George Washington, Einstein/Montefiore, Carolinas, Johns Hopkins Bay View, UC Irvine, and University of Illinois.

is greatly appreciated

ERS Report *Russ Dinsmore*

We have been busy refining our reports and adding new features in preparation for the new dashboard roll out. You should see something in the coming weeks announcing its publication, followed closely by a whole new dashboard. We hope you'll find it easier to follow and more user friendly. We look forward to hearing your feedback.

Finance & Administration

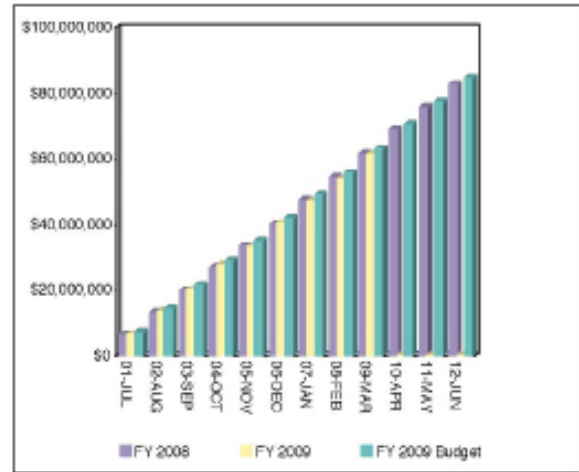
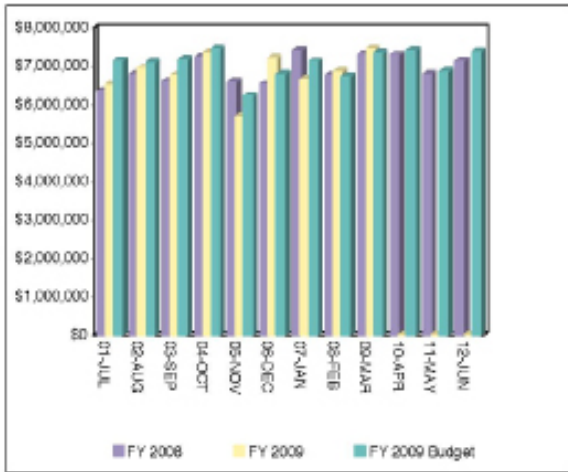
Department of Medicine Monthly Gross Charges

MONTHLY COMPARISON

	FY 2008	FY 2009	% Var	FY 2009 Budget	Variance to Budget	% Var
01-JUL	\$6,335,051	\$6,585,015	3%	\$7,145,463	(\$560,447)	-8%
02-AUG	\$6,775,394	\$6,946,705	2%	\$7,088,622	(\$141,916)	-2%
03-SEP	\$6,067,788	\$6,752,862	2%	\$7,102,622	(\$349,760)	-5%
04-OCT	\$7,299,651	\$7,337,855	2%	\$7,485,941	(\$146,086)	-2%
05-NOV	\$6,365,883	\$3,678,559	-10%	\$6,215,103	(\$536,544)	-9%
06-DEC	\$6,327,033	\$7,208,404	10%	\$6,786,783	\$421,621	6%
07-JAN	\$7,391,410	\$4,666,014	-10%	\$7,112,622	(\$446,608)	-6%
08-FEB	\$4,750,799	\$4,843,353	1%	\$4,716,786	\$126,567	3%
09-MAR	\$7,500,125	\$7,153,183	2%	\$7,515,941	(\$162,758)	-2%
10-APR	\$7,287,490	\$0	0%	\$7,480,941	\$0	0%
11-MAY	\$6,792,182	\$0	0%	\$6,931,783	\$0	0%
12-JUN	\$7,116,055	\$0	0%	\$7,375,461	\$0	0%

YEAR-TO-DATE COMPARISON

	FY 2008	FY 2009	% Var	FY 2009 Budget	Variance to Budget	% Var
01-JUL	\$6,335,051	\$6,585,015	3%	\$7,145,463	(\$560,447)	-8%
02-AUG	\$13,110,405	\$13,446,710	2%	\$14,232,084	(\$785,374)	-6%
03-SEP	\$19,786,100	\$20,198,511	2%	\$21,318,706	(\$1,120,195)	-5%
04-OCT	\$26,801,842	\$27,586,365	2%	\$28,803,647	(\$1,217,282)	-4%
05-NOV	\$33,494,707	\$30,215,355	-4%	\$33,020,111	(\$2,804,756)	-9%
06-DEC	\$40,823,762	\$46,424,055	15%	\$41,523,694	\$4,899,361	12%
07-JAN	\$47,415,171	\$47,084,000	-1%	\$49,342,617	(\$2,258,617)	-5%
08-FEB	\$54,165,960	\$53,699,348	0%	\$55,659,348	(\$1,959,999)	-4%
09-MAR	\$61,448,339	\$61,536,785	0%	\$63,915,941	(\$2,379,156)	-4%
10-APR	\$68,733,728	\$0	0%	\$70,496,222	\$0	0%
11-MAY	\$75,445,855	\$0	0%	\$77,238,006	\$0	0%
12-JUN	\$82,662,518	\$0	0%	\$84,613,467	\$0	0%



Run by rd2h on April 16, 2009

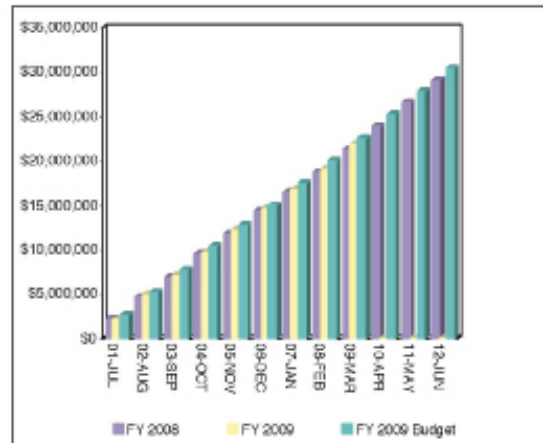
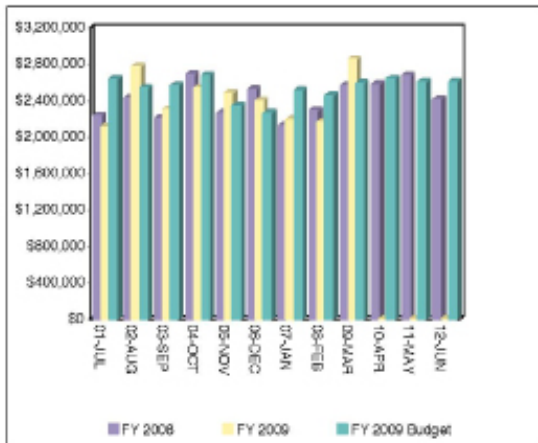
Monthly Gross Charges and Net Collections 4-in-1 Department of Medicine Monthly Net Collections

MONTHLY COMPARISON

	FY 2008	FY 2009	% Var	FY 2009 Budget	Variance to Budget	% Var
01-JUL	\$2,281,277	\$2,186,491	-4%	\$2,027,291	(\$159,199)	-8%
02-AUG	\$2,455,349	\$2,789,255	14%	\$2,300,989	\$488,266	21%
03-SEP	\$2,208,259	\$2,388,200	8%	\$2,300,639	(\$112,439)	-5%
04-OCT	\$2,989,744	\$3,335,037	11%	\$2,989,618	(\$345,781)	-12%
05-NOV	\$2,352,035	\$2,184,273	-7%	\$2,510,779	(\$326,506)	-13%
06-DEC	\$2,521,981	\$2,381,116	-5%	\$2,563,744	(\$181,628)	-7%
07-JAN	\$2,125,490	\$2,180,080	3%	\$2,504,599	(\$324,519)	-13%
08-FEB	\$2,985,888	\$3,165,491	6%	\$2,455,189	(\$710,298)	-29%
09-MAR	\$2,567,150	\$2,847,856	11%	\$2,589,157	(\$251,701)	-10%
10-APR	\$2,577,892	\$0	0%	\$2,684,334	\$0	0%
11-MAY	\$2,070,980	\$0	0%	\$2,055,897	\$0	0%
12-JUN	\$2,316,319	\$0	0%	\$2,588,744	\$0	0%

YEAR-TO-DATE COMPARISON

	FY 2008	FY 2009	% Var	FY 2009 Budget	Variance to Budget	% Var
01-JUL	\$2,281,277	\$2,186,491	-4%	\$2,027,291	(\$159,199)	-8%
02-AUG	\$4,696,624	\$4,875,745	2%	\$4,328,280	(\$547,464)	-13%
03-SEP	\$6,894,873	\$7,174,945	2%	\$7,213,923	(\$38,978)	-1%
04-OCT	\$9,527,810	\$10,510,042	11%	\$10,203,542	(\$306,500)	-3%
05-NOV	\$11,816,245	\$10,156,000	-8%	\$12,714,321	(\$2,558,321)	-20%
06-DEC	\$14,332,204	\$14,537,116	2%	\$14,983,758	(\$446,642)	-3%
07-JAN	\$16,463,894	\$16,737,196	2%	\$17,487,920	(\$750,724)	-4%
08-FEB	\$19,741,081	\$19,902,175	1%	\$19,947,186	(\$45,011)	-0%
09-MAR	\$21,938,732	\$21,900,011	0%	\$22,567,147	(\$667,135)	-3%
10-APR	\$24,886,284	\$0	0%	\$25,174,576	\$0	0%
11-MAY	\$26,957,264	\$0	0%	\$27,771,573	\$0	0%
12-JUN	\$28,973,008	\$0	0%	\$30,378,418	\$0	0%



Run by rd2h on April 16, 2009

Nephrology

Mitch Rosner

The Division of Nephrology has a very active clinical enterprise that consists of several elements: (1) out-patient clinics in the West Complex, Augusta Medical Center and Orange, (2) an active in-patient consult service at UVA Medical Center as well as Augusta Medical Center, (3) an active out-patient and in-patient transplantation service, and (4) seven out-patient hemodialysis units as well as a growing peritoneal and home dialysis program. Through these various venues, the Division provides state-of-the-art care utilizing the newest technological advances.

The Kidney Center Clinic at the UVA Medical Center and at the Augusta Medical Center serves as the cornerstones for our outpatient endeavors. Through these clinics we offer consultative services to our community in all areas of nephrology. For semi-urgent referrals we have a new service (Rapid Access Kidney Service: RAKS) in which patients are seen within 24-48 hrs. These clinics also offer access to erythropoietin-stimulating agents, intravenous iron and other intravenous infusions such as rituximab, cytoxan and intravenous immunoglobulin. Within the clinic, clinicians have specialized areas of focus. Dr. Kline Bolton is an internationally recognized expert in the diagnosis and therapy of glomerulonephritis. Dr. Mark Okusa is an internationally recognized expert in the therapy of acute kidney injury. Dr. Mitchell Rosner leads a regional referral clinic for polycystic kidney disease and Dr. Kambiz Kalantarinia has a focus on diabetic kidney disease. Recently, we have also begun to offer 24-hour ambulatory blood pressure studies utilizing a state-of-the-art recording device. This service is available through consultation with our clinic. Dr. Kalantarinia also offers on-site ultrasound service for the diagnosis of kidney disorders (this service is available through consultation with Dr. Kalantarinia). An important aspect of our clinic is providing access to clinical trials across the spectrum of kidney diseases. Active trials in diabetic nephropathy, polycystic kidney disease, hyponatremia, and chronic kidney disease are currently enrolling, and our research coordinators screen and interview patients for inclusion to these studies.

Our outpatient clinic at Augusta Medical Center has seen tremendous growth under the direction of Dr. Emaad Abdel-Rahman. Currently, three physicians (Dr. Abdel-Rahman, Dr. Harry Brooks and Dr. Uta Erdbrugger) and one nurse practitioner (Kathy Powers) see patients at this clinic. Dr. Adam Campbell will be the newest addition to this clinic beginning in July. At this clinic, the full-range of nephrol-

ogy services are offered.

The division maintains a very active in-patient service that performs over 200 in-patient hemodialysis treatments and over 100 continuous dialysis treatments every month. Under the direction of Dr. Rasheed Balogun, the plasmapheresis program within the division has also grown, and now nearly 100 plasmapheresis treatments are performed monthly across a broad range of conditions ranging from thrombotic thrombocytopenic purpura to neurological disorders. Dr. Balogun is recognized as an expert in the field of plasmapheresis and also runs a national conference instructing physicians in this technique. The consultation service has received high grades from referring physicians for its rapid responsiveness and attention to patient care issues. Consults are seen and staffed in less than 24 hours.

Drs. Peter Lobo and Douglas Keith lead the kidney transplantation team. Nearly 100 kidney transplants are performed every year, and Drs. Lobo and Keith are highly regarded as outstanding transplant nephrologists who provide local and regional care to patients across the mid-Atlantic region. Both Drs. Lobo and Keith are active in the American Society of Transplantation. Dr. Lobo serves as the medical director of the tissue-typing laboratory and utilizes the latest technologies to identify humoral and cellular issues that impact graft survival in kidney transplantation.

The Division of Nephrology has a long history in providing outstanding dialysis care. The first dialysis in the Commonwealth of Virginia was performed here by Dr. Nuzhet Atuk, and since then, the Division has led the way in innovation and outstanding patient care. The Division supports 7 outpatient dialysis units with over 700 patients receiving their dialysis care under this umbrella. Furthermore, we also offer peritoneal dialysis and this program has grown at a rapid pace (over 50% in the last year). We also offer two forms of home hemodialysis. Under the direction of Dr. Robert Lockridge in Lynchburg, we provide home nocturnal hemodialysis, which allows patients to perform their own dialysis in the privacy of their home while they sleep. Dr. Lockridge's program is the largest in the country. We also offer patients the alternative of performing shorter daily home dialysis utilizing a new dialysis machine recently approved by the FDA. The division is very active in clinical trials investigating the outcomes of these newer modalities. Clinical trials in other areas of chronic end-stage renal disease are also available to our patients.

News & Publications

Cardiovascular Medicine

News:

- Scott Lim and Michael Ragosta of Cardiovascular Medicine, along with Irving Kron, John Kern, and Gorav Ailawadi of Surgery, are enrolling patients with aortic valve disease for the FDA-approved study, named PARTNER, which is evaluating the safety and effectiveness of a new transcatheter Aortic Valve replacement system for high-risk patients.

Publications:

- Hlatky MA, Greenland P, Arnett DK, Ballantyne CM, Criqui MH, Elkind MS, Go AS, Harrell FE Jr, Howard BV, Howard VJ, Hsue PY, Kramer CM, McConnell JP, Normand SL, O'Donnell CJ, Smith SC Jr, Wilson PW; on behalf of the American Heart Association Expert Panel on Subclinical Atherosclerotic Diseases and Emerging Risk Factors and the Stroke Council. Criteria for Evaluation of Novel Markers of Cardiovascular Risk. A Scientific Statement From the American Heart Association. *Circulation*. 2009 Apr 13.
- Keeley EC, Mehrad B, Strieter RM. The role of circulating mesenchymal progenitor cells (fibrocytes) in the pathogenesis of fibrotic disorders. *Thromb Haemost*. 2009 Apr;101(4):613-8. PubMed PMID: 19350102.
- Helms AS, West JJ, Patel A, Lipinski MJ, Mangrum JM, Mounsey JP, Dimarco JP, Ferguson JD. Relation of left atrial volume from three-dimensional computed tomography to atrial fibrillation recurrence following ablation. *Am J Cardiol*. 2009 Apr 1;103(7):989-93.
- Beller GA. A dilemma in teaching bedside cardiology. *J Nucl Cardiol*. 2009 Mar-Apr;16(2):167-9. Epub 2009 Feb 18.

Gastroenterology and Hepatology:

Publications:

- Carol Rees Parrish, MS, RD
1/16/09 - Nutrition and Dysmotility Disorders at the American Gastroenterology Association/ American Neurogastroenterology and Motility Society's Gastroparesis and Functional Dyspepsia Conference, Orlando, FL.
- Nora Decher, MS, RD, CNSD
Decher, NR. Bile Reinfusion: A strategy for optimizing nutrition support. *Today's Dietitian*. 2009;11:16-20.
- Tumor necrosis factor-alpha-induced IL-8 expression in gastric epithelial cells: Role of reactive oxygen species and AP endonuclease-1/redox factor (Ref)-1. Ann M O'Hara, Asima Bhattacharyya, Jie Bai, Randy C Mifflin, Peter B Ernst, Sankar Mitra, Sheila E Crowe. *Cytokine*, in press, 2009.

Hematology/Oncology

News:

- Dr. Rommel Lu is presenting a poster entitled "Striking a balance between bleeding and thrombotic tendencies for surgery", at the annual Hemophilia and Thrombosis Research Society meeting in Chicago April 16-18, 2009.
- Michael E. Williams, MD chaired the 5th Annual Mantle Cell Lymphoma Consortium Workshop March 29-31 in Atlanta, an international meeting of lymphoma investigators. Dr. Williams continues as Chair of the MCLC, which is now in its 4th year as a program under the Lymphoma Research Foundation.
- Four Hematology Oncology faculty have been named to America's Top Doctors, eighth edition and a sister publication, American's Top Doctors for Cancer, fourth edition. They are Drs: Paula M. Fracasso, William W. Grosh, Geoffrey R. Weiss, and Michael E. Williams.
- Dr. Tom Harris is completing a UVA Hematology/Oncology fellowship in June with a focus on Solid Tumor Malignancies and is scheduled to join the UVA faculty in July. He decided to remain at UVA because of his positive experience with UVA's multidisciplinary cancer team and his interest in combining patient care with innovative clinical trials.

Publications:

- Aregawi D, Lopez D, Wick M, Scheld WM, Schiff D. Disseminated strongyloidiasis complicating glioblastoma therapy: a case report. *J Neuro-Oncology* 2009 March 31 (epub ahead of print).

News & Publications

- Pullido JS, Vierkant R, Olson JE, Abrey L, Schiff D, O'Neill BP. Racial/ethnic differences in primary central nervous system lymphoma; Incidence and survival rates. *Neuro-Oncology* 2009 March 9 (epub ahead of print).

Infectious Diseases and International Health

News:

- Dr. Glynis Kolling has been selected (from among a list of 26 applicants from Harvard, Stanford, UNC, etc) as the #1 awarded for the Young Investigator Grant in Probiotics. This 2-year award will enable Dr. Kolling to work on "The influence of novel oligopeptides produced by transgenic bacteria on intestinal injury due to *C. difficile* infection," and stems from collaborations with Dr. Michael Timko in the Biology Dept.
- Ms. Sarah Delgado, UVA SON, and Dr. Rebecca Dillingham will be presenting their paper, "Promoting Adherence to HIV Care in Rural Virginia Using an Individualized Short Message Service (SMS) Delivery Application," at the International Association
- Dr. Christopher Moore participated in the World Health Organization (WHO) Clinical Network/Global Outbreak Alert and Response Sepsis Working Group Meeting held at the WHO in Geneva, Switzerland, 30-21 March 2009.
- Dr. Janine Jagger: "EPINet: A Global Tool for Preventing Sharps Injuries and Blood Exposures." Tenth National Conference of the Hospital Infection Society of India. Pune, Maharashtra, India; January 22-25, 2009.
- Dr. Janine Jagger: "Global Perspective: Surveillance of Healthcare Workers' Blood Exposures - Foundation for Prevention." Safe Injection Global Network, World Health Organization. Moscow, Russia; October 13, 2008.
- Decision in OSHA Case: Jane Perry served as an expert witness for OSHA in a suit (*Metwest v. U.S. Secretary of Labor* in US Court of Appeals, DC Circuit) by Metwest, subsidiary of Quest Diagnostics, which challenged OSHA on the requirement to use blood tube holders as single-use devices, a measure intended to reduce needlestick risk. A decision in April 2009 ruled in favor of OSHA/DOL, upholding the single-use requirement.
- Jane Perry: "Preventing Sharps Injuries in the U.S.: Successes and Challenges." Seminar: Sharps Injury Prevention and Compliance in Canada (sponsored by Daniels SharpSmart Canada). Montreal, Quebec; Feb. 27, 2009.
- Elayne Phillips and Jane Perry: "Sharps Injuries and Bloodborne Pathogen Infection Risk to Housekeeping and Laundry Workers." National Summit of Clinicians for Healthcare Justice. Washington, DC, October 2008.
- Dr. William Petri has been appointed to the Editorial Board of *Faculty of 1000 (F1000) Biology Reports* and was a visiting professor at the Department of Parasitology of New York University, and the Department of Microbiology, Medical College of Wisconsin in March 2009.
- Dr. Michael Scheld is a member of the steering committee for the Accordia Global Health Foundation's Infectious Diseases Summit "Building Health Care Leadership in Africa" which will focus on development of best practices for fostering health care leadership in Africa at the individual, institutional, and network levels. He will attend the summit, to be held in Kampala Uganda April 20-22, 2009, serve as a speaker/panelist, and will serve on the group responsible for publication of the proceedings and worldwide dissemination.

Publications:

- Mintz Ed and Guerant RL. A Lion in Our Village – The Unconscionable Tragedy of Cholera in Africa. *NEJM* 369;11, pp. 1969-1063, 2009.
- Haque R, Mondal D, Karim A, Molla IH, Rahim MA, Faruque ASG, Ahmed N, Kirkpatrick BD, Houpt E, Snider C, Petri WA Jr. Association of common enteric protozoan parasites with severe diarrhea in Bangladesh: a prospective case-control study. *Clin Infect Dis* 2009; 9:1191-1197.
- Richman DD, Whitley RJ & Hayden FG, editors. *Clinical Virology*, 3rd edition, , 2009.
- Jagger J. Fine points about safety syringes and level of risk [letter]. *American Journal of Infection Control* 2008;36(7):501-2./
- Jagger J, Goma AE, Phillips EK. Safety of surgical personnel: a global concern [letter]. *Lancet* 2008;372(9644):1149.
- Matthews R, Leiss JK, Lyden JT, Sousa S, Ratcliffe JM, Jagger J. Provision and use of personal protective equipment and safety devices in the National Study to Prevent Blood Exposure in Paramedics. *American Journal of Infection Control* 2008;36:743-9.
- Mondal D, Haque R, Sack B, Kirkpatrick BD, Petri WA Jr. Attribution of malnutrition to cause-specific diarrheal illness: Evidence from a prospective study of preschool children in Mirpur, Dhaka, Bangladesh. *Am J Trop Med Hyg* 2009; AJTMH-08-0506, in press.
- Linford AS, Moreno H, Good KR, Zhang H, Singh U, Petri WA Jr. Short hairpin RNA-mediated knockdown of protein expression in *Entamoeba histolytica*. *BMC Microbiology* 2009, 9:38.
- Petri WA Jr. Tularemia. *BMJ Point of Care* (web-published) 2009.

News & Publications

- Warren CA. Cyclosporiasis: an update. *Curr Infect Dis Rep.* 2009, Mar;11(2):108-12. PubMed PMID: 19239800.

Grants:

- Petri, W.A.: Accelerated Molecular Probe Pipeline. 4/1/09 – 3/31/14; Annual Direct Costs: \$530,924; Total Award: \$804,335. National Institutes of Health. The major goal of this grant is to develop novel yeast display-based methods for generating high-affinity molecular probes (antibody-like scFv particles) for diagnosis of diverse diseases.

Nephrology and The Center for Immunity, Inflammation, and Regenerative Medicine:

News:

- Lauren Barret, Fiscal Tech earned her Business Professional Certificate in March 2009.
- Congratulations to Gilbert (Bert) Kinsey for winning First Place at DOM Scholar's Day
- Rasheed A Balogun has been appointed to the Apheresis Residents and Fellows Training Ad Hoc Committee of the American Society for Apheresis. This Committee is responsible for multidisciplinary Graduate Apheresis Medical Education Sessions, establishing and updating recommendations for training in donor and therapeutic apheresis medicine.
- Rasheed A Balogun organized and directed the 2009 Professional Education Symposium of the National Kidney Foundation of the Virginias on Thursday April 2 in Glen Allen, Virginia. This conference included sessions on a wide variety of topics pertaining to kidney diseases and treatment and was attended by MDs, RNs, Dieticians and social workers from all around Virginia and West Virginia.
- Rasheed A Balogun organized and led a team of volunteer MDs, RNs, Dieticians and medical students to offer free kidney health screenings to the community in and around Charlottesville at the Carver Recreation Center on March 14, 2009. This is the third-annual screening co-sponsored by the Division of Nephrology and the NKF VAs in conjunction with National Kidney Month and World Kidney Day.
http://www.dailyprogress.com/cdp/news/local/article/screening_results_alarm_local_doctor/37830/

Publications:

- The W. Kline Bolton Festschrift September 13, 2008, Jordan Conference Center, University of Virginia, Guest Ed. Mark Okusa and Mildred Lam. *Va Nephron Physiology*, in press 2009

Pulmonary and Critical Care:

News:

- The Chronic Obstructive Pulmonary Disease (COPD) program (part of the pulmonary clinic) is the first academic medical center in the United States to receive certification by the Joint Commission. The Joint Commission's disease-specific care certification is designed to evaluate disease management programs. The evaluation and resulting certification decision is based on an assessment of compliance with a consensus-based national standard, effective use of established clinical practice guidelines to manage and optimize care, and an organized approach to performance metric and improvement activities. The COPD program at UVa pulmonary clinic is comprised of Drs. Truwit, Shim, Brown, and Vinayak as well as Peggie Donowitz and Michelle Dumont.

Publications:

- Strieter RM, Keeley EC, Burdick MD, Mehrad B. 2009. The role of circulating mesenchymal progenitor cells, fibrocytes, in promoting pulmonary fibrosis. *Trans Am Clin Climatol Assoc* (in press).
- Crawford MA, Zhu Y, Green CS, Burdick MD, Sanz P, Alem F, O'Brien AD, Mehrad B, Strieter RM, Hughes MA. 2009. Antimicrobial effects of interferon-inducible CXC chemokines against *Bacillus anthracis* spores and bacilli. *Infect Immun* (in press).
- Saprito PM, Bunyan DA, Shim YM. 2009 HPLC quantification of 5-hydroxyeicosatetraenoic acid in human lung cancer tissues. *Biomed Chromatogr.* [Epub ahead of print]
- Enfield K, Gammon S, Floyd J, Falt C, Patrie J, Platts-Mills TA, Truwit JD, Shim YM. 2009 Six Minute Walk Distance in Severe End-Stage COPD Patients: Association with Survival after Inpatient Pulmonary Rehabilitation. *Journal of Cardiopulmonary Rehabilitation and Prevention.* (in press)

News & Publications

[School Of Medicine](#)

[News:](#)

- Dr. Mohan Nadkarni was recognized as an outstanding professor by UVA Today in 2009.
http://www.virginia.edu/uvatoday/outstanding_teachers_2009/nadkarni.html

Effort Report

Memorandum:

To: Division Administrators
From: DOM administration/David Thomas
Re: Effort reports
Date: March 16, 2009

Medical and Clinical Faculty, Classified, and Medical Center Professional reports have been emailed in pdf format. These will serve as the original effort reports. Please print these reports and have them certified by the Principal Investigator and return the original to David Thomas, Private Clinics, Room 6507, ext 3-7186. These are due back to me at DOM Admin by April 30, 2009.

Please note the following changes:

*We can no longer accept copies or faxes – ALL COMPLETED AND SIGNED REPORTS MUST BE ORIGINALS.

*In the case of corrections to reports previously submitted, the revisions may be made on a copy, but then that page itself (not a copy or fax) will need to be forwarded to DOM.

*The Dean's Office will be sending out delinquency notices to department chairs for any reports not received back by their due date.

We have attached guidelines to assist with the effort reporting process; however, these are not a substitute for University procedures related to effort reporting (see footnotes on final page of guidelines for a link to the procedure).

Attached to the email is the list of clinic codes relevant to Section VD "Clinical Administration and Management". Please be sure it is made available to your clinical faculty.

If any administrator or faculty member desires one-on-one assistance with completion of the effort report, we will be happy to provide that for you.

As always, please let me know any questions.

Effort Reporting Guidelines

PAGE 1

I. Section I - SPONSORED PROGRAMS-Sponsored Research

This is where you account for your time spent in research

- This section lists the percent of your total salary paid from each sponsored project, or "G" award. Your effort must be recorded for each project-award combination shown on which you expended effort. Please record your ACTUAL EFFORT percentage for the period in the actual effort column. This must be done even if the payroll percent column reflects your actual effort (leave no blank lines in this section).

- Cost Share

Numbers under the "cost share" column indicate effort that was included in the program proposal, but that was to be paid from institutional, NOT sponsor funds.

Whenever you are expending effort that is not sponsor-reimbursed, you are in a cost share situation, regardless

Effort Report

of whether you committed it on the proposal, or voluntarily contributed additional effort after the proposal was awarded

- Example 1: if a Sponsored Program award shows 10% cost share effort in Section I (for an award upon which effort is expended but for which no sponsored research funds have been charged), then another award in Section II should absorb that cost with a corresponding downward adjustment in the effort on that award (typically a state or local award).
- Example 2: Dr. Smith committed 15% effort and asked for 15% salary on a proposal. S/he is, however, devoting 20% of his/her time to the project and writes 20% on the line after that project. The additional 5% is cost share, but will NOT appear in the cost share column, as it wasn't committed in the original proposal.

- **Salary Cap**

Faculty members who received salary support under at least one NIH award and whose TOTAL University compensation (i.e., both UVA and HSF) exceeds the NIH salary cap limitation should pay special attention to the completion of their effort report. On the effort report, the value listed under "Payroll %" is that portion of Total compensation (both UVA and HSF) that was paid by an award. Therefore, for all NIH awards, an entry in the "Actual Effort %" column that is less than or equal to the value under "Payroll %" implies that you have been paid at a rate that exceeds the salary cap limitation. The following example clarifies this situation:

- Dr. Smith commits 20% of his/her time toward work on a particular NIH award. Dr. Smith's annual compensation is \$300,000, but the salary cap for the Fiscal Year in question is \$200,000. Therefore, \$40,000 (20% of 200,000) is the maximum allowed salary that can be charged to the NIH award. The pre-printed percentage on the Effort Report from will be 13% ($\$40,000/\$300,000$), even though Dr. Smith contributed 20% of his/her effort to that project. In this case, the correct percentage of ACTUAL effort to enter on the effort report would be "20%", assuming that 20% effort was the reasonable estimate of his/her time spent on the project.

For 2008, the NIH salary cap is \$191,300. Therefore, for the six-month period of June December 2008, the figure to be used will be 95,650.

SECTIONS II and III – ACADEMIC ACTIVITY – Classroom instruction and University Admin.
This is where you account for your time spent in academic areas.

II. UNIVERSITY INSTRUCTION AND OTHER

Enter the actual percent of your total effort devoted to classroom instruction or non-sponsored research.

III. UNIVERSITY ADMINISTRATION

Only faculty with administrative appointments (e.g. deans, department chairpersons and center directors) should record effort in this section.

****NON-CLINICAL FACULTY, SKIP TO "VI. CERTIFICATION"****

SECTIONS IV and V - CLINICAL ACTIVITY - Direct Patient Care and Hospital Related Activities

This is where you account for your time spent in clinical areas.

Clinical effort reports contain two unique sections: Section IV, referring to Direct Patient Care, and Section V, referring to Hospital and Related Activities. Clinical activity generally refers to duties undertaken by MDs who see patients (Section IV) and/or who participate in other hospital-related activities (Section V).

Section IV, Direct Patient Care, refers to all patient services paid through the Health Services Foundation and the School of Medicine. Actual effort in this section should accurately reflect the percentage of time expended on direct patient care. Report all effort in whole percentages.

PAGE 2

Section V, Hospital and Related Activities, refers to School of Medicine faculty who provide professional services to the U.Va. Medical Center. This includes the training of House staff and administration of such activities, as well as other Hospital committee and administrative responsibilities. Actual effort in this section should accurately reflect the percentage of time expended on hospital and related activities. Report effort in whole percentages for EACH area, and then total at the bottom of the section. Important note: If you have effort that falls under section V-D, you must also write in clinic code using the list in Appendix 1, or the name of relevant committee.

Effort Report

The total number of hours worked per week should include ALL of your Institutional Effort (research, academic and clinical). This should be a reasonable estimate of your average weekly hours over the effort reporting period, i.e., six months. This is NOT limited to a 40 hour work week.

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VI. CERTIFICATION

- Before certifying, please ensure that the Actual Effort GRAND TOTAL Column equals 100%. Certification is accomplished by entering the appropriate percentages and signing the report at the bottom left hand side of the report. This is the only signature required.
- If an Effort Certification Form is received for an individual who is either unavailable (e.g., out of town/country) or no longer employed by the University of Virginia, the supervisor or department chair should complete the form indicating, to the best of their knowledge, the effort that the individual contributed to the program. The supervisor or department chair should then sign the form at the bottom right hand side of the report only.
- Please sign in ink, preferably blue ink to better distinguish originals from copies.

If you have questions, please contact David Thomas, dgt3h@virginia.edu 3-7186.

For additional background on Effort Report Certification, please refer to the below references linked below.

[University of Virginia Procedures 8-31](#)

[OMB Circular A-21 "Cost Principles for Educational Institutions"](#)

[OMB Circular A-133 "Audits of Institutions of Higher Education and Other Non-Profit Organizations"](#).

Memorandum:

To: Division administrators

From: DOM administration/David Thomas

Re: Wage Employees Effort reports

Date: March 16, 2009

Wage Employees Effort reports have been emailed in pdf format. These will serve as the original effort reports. Please print these reports and have them certified by the Principal Investigator and return the original to David Thomas at DOM Admin.

Effort Reports are due back to the DOM by April 30, 2009.

Please note the following:

*We do not accept copies or faxes – ALL COMPLETED AND SIGNED REPORTS MUST BE ORIGINALS.

*In the case of corrections to reports previously submitted, the revisions may be made on a copy, but then that page itself (not a copy or fax) will need to be forwarded to DOM.

*The Dean's Office will be sending out delinquency notices to department chairs for any reports not received back by their due date.

*Please use whole percentage numbers for effort; do not use decimals, e.g., 10% rather than 10.5%.

*Please use ink in completing the reports, not pencil.

Please let me know if there are any questions. My extension is 3-7186.