



Over the past decade, Shirley McCarthy has observed that tumors that would once have been a death sentence now respond to new chemotherapies.

Physician at Work

A radiologist who enjoys the diagnostic side of medicine

Shirley M. McCarthy, MD, PhD, recently heard from a patient with extensive ovarian cancer whose CT scan McCarthy had read. The patient wanted her to know how happy she was that her tumor had decreased markedly. It was a happy and uncommon experience for McCarthy, who normally sees not the patients themselves, but images of their internal organs.

As an internationally recognized expert in gynecologic MRI, McCarthy is often called upon to interpret CT and MRI scans of the pelvic region. She sees a lot of cancer in the course of her work, but lately she's noticed a promising trend that makes her job more rewarding. "Ten years ago you'd see someone with colon or breast metastases to the liver, and it would be a death sentence," she said. "Over the last decade I've seen these tumors respond to new chemotherapy drugs, so it's very encouraging."

McCarthy, said to have an "eagle eye," enjoys the diagnostic side of medicine, so radiology seemed like a good fit when she was choosing a specialty. "When I was a medical student here and rotated to radiology, the doctors seemed to really enjoy what they were doing," she said. Working with other physicians, both within her field and outside of it, is stimulating, she said. "When I'm consulting with doctors in other specialties, they always bring information about the patient and it educates me and helps me produce a better report," she said, adding that interacting with her fellow radiologists is also an educational and rewarding experience.

Name: Shirley M. McCarthy, MD, PhD

Title: Professor of diagnostic radiology and of obstetrics, gynecology and reproductive sciences

Areas of expertise: gynecologic MRI; body CT/MRI

continued on back

YMG specialists support student-run HAVEN Free Clinic

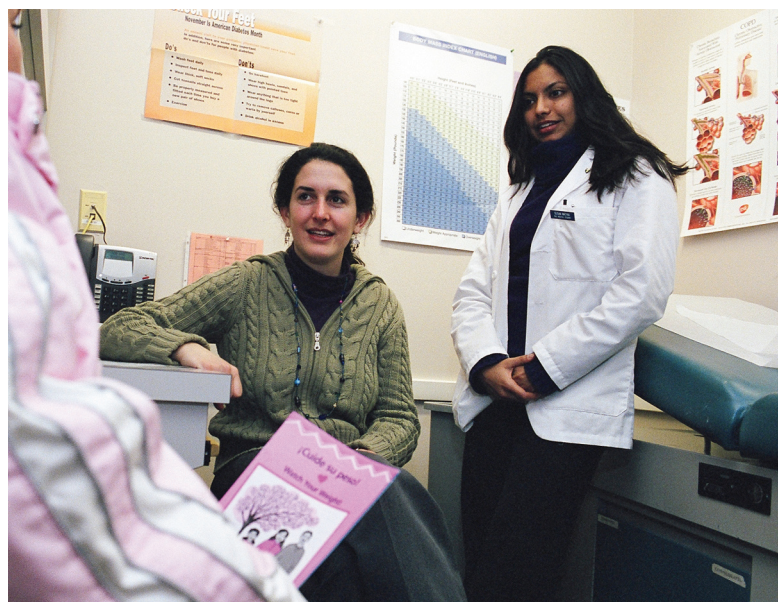
Since the clinic's doors opened in 2004, YMG physicians have provided quality care to uninsured residents of Fair Haven.

When Yale students opened a free clinic in the Fair Haven neighborhood of New Haven in 2004, they got high marks from their teachers.

"From our earliest involvement with this effort, school leadership was impressed by the commitment of the students, and we did what we could do as a clinical practice to match that commitment," said **David J. Leffell, MD**, CEO of Yale Medical Group (YMG).

Students in medicine, nursing and public health and in the Physician Associate program opened the HAVEN Free Clinic five years ago in partnership with the Fair Haven Community Health Center, where the clinic resides. It is the only clinic in the city where health care is always free. Patients simply need to live in Fair Haven's 06513 zip code and to demonstrate they have no medical insurance. The goal of the clinic is to provide comprehensive and consistent primary care. Through partnership with YMG, patients also receive specialty care.

Every Saturday morning, teams of students supervised by attendings from Fair Haven Community Health Center as well as volunteers from the medical school faculty see uninsured patients at HAVEN. The experience goes far beyond the normal office visit. A social service department screens patients to see if they are eligible for any kind of subsidized coverage and will guide them through the paperwork to obtain insurance. Many, however, are undocumented residents and ineligible for most assistance programs. The students also connect patients to a range of services in



Medical students Erica Mintzer and Susan Mathai interviewed a patient at HAVEN, a student-run free clinic in Fair Haven, shortly after it opened five years ago.

the community that deal with broad-based issues such as housing and domestic violence. Health professions students are so enthusiastic about HAVEN that the clinic must turn away volunteers, said **Susan Mathai**, a fourth-year medical student and one of HAVEN's directors.

About 10 percent of the clinic's patients are referred to a specialist and YMG physicians regularly volunteer to provide that care free of charge and forgive past debts incurred by HAVEN patients. **Lauren Graber**, a second-year medical student, spends much of her time working out the details of such referrals. She networks with other free clinics in the state and said that none are able to offer HAVEN's level of specialty referral. A YMG ophthalmologist, she said, cleared a full day just to see HAVEN patients. Patients have been able to get all manner of diagnostic imaging, colonoscopies, hip replacements and other specialty procedures through the arrangement. "It makes a tremendous difference in the lives of our patients," she said.

In addition to serving the community, HAVEN provides an intensive teaching environment. Clinic

continued on back

Place of birth: Cooperstown, NY

Age: 59

College: SUNY Albany

Med School: Yale School of Medicine

Training: Diagnostic radiology residency, Yale-New Haven Hospital; Fellowship in cross-sectional imaging at the University of California, San Francisco

Family: Husband, Johan Gallalee, MD, child psychiatrist; children, Sarah, 17; John, 15

What is most challenging to you in academic medicine? Besides 3 a.m. emergency MRIs, it is having time to teach, do research, cover the service and do administration. But that's also the thing I like about it—the diversity of the practice.

What is most rewarding? Helping clinicians provide good care.

What do you like most about your practice? My colleagues. It's educational for me to go over cases with clinicians, because I learn how to read scans better.

Personal interests or pastimes: Skiing, swimming, environmental activism.

Last book read: *Dreams of My Father*, by Barack Obama

What would you do to improve our clinical environment if you had a magic wand? More restraint in ordering multiple radiologic studies at the end of life. I see a lot of tests ordered in patients that are older and terminal and I wonder if that's the best use of healthcare dollars.

appointments last at least an hour and referrals to specialists allow students to follow cases in even more depth. Most patients are Spanish speakers, so bilingual students serve as interpreters at specialist appointments. "The faculty member is usually really excited to teach in that moment," said Graber.

HAVEN also provides rewarding opportunities for faculty, said **Frederick Haeseler**, MD, associate clinical professor of medicine and HAVEN's faculty advisor. He enjoys the extended teaching time in the clinic and is moved by how appreciative patients are. "The patients themselves are really quite wonderful," he said. He has treated people from Afghanistan, Ethiopia and most of Latin America at the clinic and heard "thank you" in many languages.

YMG INITIATES STUDY OF ELECTRONIC MEDICAL RECORD NEEDS

Marianne Dess-Santoro, chief operating officer at Yale Medical Group (YMG), knows firsthand how important it is for electronic medical systems to communicate. When a family member who had been treated at the Yale Health Plan needed a consultation from a YMG physician, "nothing was electronically interfaced with our system," she said. "I got photocopies of every single thing ... and drove it over here."

Such scenarios happen all the time, since the various Yale electronic medical records systems can't "speak" with each other. The hospital uses Eclipsys on inpatient wards, while some YMG practices use Centricity, as do hospital primary care clinics. The Yale Health Plan uses AllScripts, a third system.

YMG and Yale-New Haven Hospital (YNHH) have reached a milestone agreement on the need for a comprehensive, integrated electronic medical record that operates across the inpatient and ambulatory environments. Ideally, the system will also allow community physicians to integrate their records with the medical center's.

To guide this major effort, YMG, the School of Medicine and YNHH have hired management consultant Deloitte. Dess-Santoro and **Mark Anderson**, chief information officer at YNHH, are co-chairing the steering committee for the engagement.

A key component of the evaluation process is to explore the framework for a clinical research data repository. Clinical research at Yale requires

a substantial investment in information technology infrastructure and electronic medical record and research needs must be integrated seamlessly. The consultants are working with faculty to understand their needs and perspectives, says **Karin Render** of YMG, who is coordinating the engagement. "The level of interest by faculty has been phenomenal," Render says.

Major institutional commitment will be required for this effort to succeed. Once the consultants make their recommendation, implementation could take several years. "It is a big challenge to go from hand-written notes to an electronic record," Dess-Santoro says, "and that [transition] is what we hope to make easier."

Yale Practice

Published by the Yale Medical Group

300 George Street, Suite 773

New Haven, CT 06511

(203) 785-5824 phone

www.yalemedicalgroup.org

Editor: John Curtis

Contributors: Jenny Blair, MD '04; Jill Max; Colleen Shaddox

Photography: Terry Dagradi

Chief Executive Officer: David J. Leffell, MD

Chief Medical Officer: Ronald J. Vender, MD

Chief Operating Officer: Marianne Dess-Santoro

Chief Financial Officer: John Lawler

Director, Strategic Development/Marketing: Mary Hu