

GME ON-CALL

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Special GME Day Edition - Trainee Spotlight



Wednesday, March 30th, 2022 is our 10th GME Day here at Boston Children's Hospital. Our first GME Day was in 2011 and since then we have celebrated in the spring each year, with a unexpected pause in 2020 due to the pandemic. We look forward to this day each year as a time to reflect on the amazing residency and fellowship training programs at Boston Children's Hospital and to spend time engaged in learning and discussion around topics in GME.

We also take this opportunity to bring you a special edition of the GME On-Call Newsletter. This edition showcases just a few of our amazing residents and clinical fellows here at Boston Children's Hospital. We hope you enjoy reading about their journeys and experiences.



Jonathan Awori, MD

Pediatric Cardiology

Where did you live growing up and before heading off to medical school?

I grew up in Nairobi, Kenya. I chose Theatre as my major when I headed off to McGill University in Montreal, Canada. The acting bug struck deep and I proceeded to pursue a Master of Fine Arts in Theatre (Acting) in Illinois. I then acted professionally in musical theatre and Shakespeare for 10 years while teaching Acting at various colleges and universities in the US taking my family and I from Illinois to Tennessee, Alabama, Kentucky, Michigan, California and eventually Seattle, Washington.

When and how did you decide to go into medicine?

So I should first say it wasn't my idea to go into medicine. I blame my wife and her insightfulness. She noticed how engrossed I was in a special form of Theatre called "Theatre for Development." In this iteration of theatre, narratives are created within communities to help address practices that are contributing to the spread of disease. So even as a thespian, science kept creeping into my work. So one day, my wife said, quite nonchalantly, "Why don't you go to medical school?" I rejected the idea for a long time until I did some soul searching and came to the conclusion she was right: Medicine was the next phase of my life.

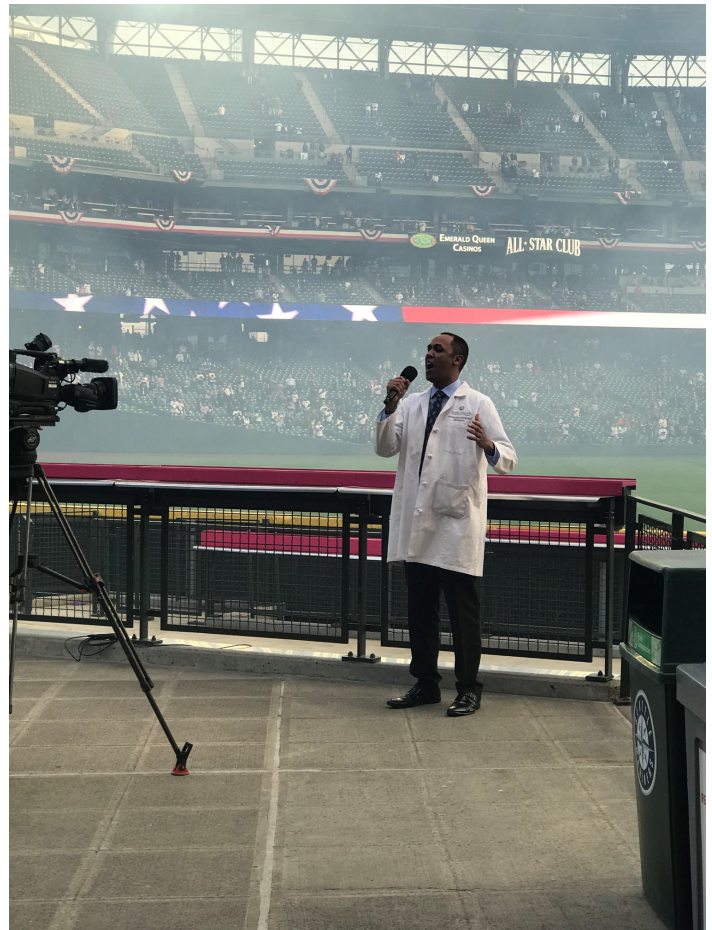
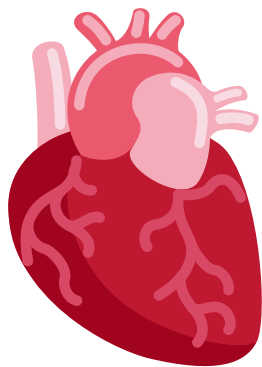


What were you doing before you started your current program?

I was a Chief Resident at the Pediatrics residency program at Seattle Children's Hospital/University of Washington.

What made you choose your current specialty?

I found myself drawn to the history, current practice and future possibilities of Pediatric Cardiology. I enjoy the cerebral challenge of cardiac physiology, the visual puzzle solving of heart imaging and the opportunity for intervention in the subspecialty of catheterization. I also appreciate the close relationship of Pediatric Cardiology with its surgical counterpart.



Jonathan singing the National Anthem at a Seattle Mariners game in 2021!

What is your favorite thing about Boston?

The number of countries represented here. My life's journey has taken me around the world and I feel most energized around global stories, many of which I have now heard right here in Boston.



Tell us a little bit about something you are working on.

I am working on a research project investigating the late outcomes of a sub-set of patients with hypoplastic left heart syndrome (HLHS) along with parallel 3D modeling and computation. I am also working on a medical education project investigating the use of virtual reality (VR) in trainee instruction of congenital heart disease. In the global health space, I am working with my brother, a pediatric cardiac surgeon in Kenya, on facilitating the partnership of his Nairobi heart program with our International Quality Improvement Collaborative (IQIC)..

What do you do for fun?

I play basketball with my two sons, Christian and Cameron (no need to get into recent scorelines . . .) and taking nature walks with my wife, Anne, who is an architect in the Boston area at Studio G.



Alissa D'Gama, MD, PhD

Neonatal Perinatal Medicine

Where did you live growing up and before heading off to medical school?

I was born in Glendale, CA, grew up in North White Plains, NY (I am an East Coaster at heart), and moved to Tucson, AZ when I was in eighth grade. From an early age, my parents instilled in my younger brother and me a joy for learning. My mother was a Montessori teacher and devoted her time to raising us and encouraging our curiosity. My parents immigrated from India to the United States a few years before I was born, and I am grateful for the sacrifices they made so that my brother and I could pursue our dreams. I aim to live my life by the model they set of hard work, kindness, humility, and trust in God's plan.

When and how did you decide to go into medicine?

As a child, I loved my pediatrician Dr. Fisher and wanted to be just like her. I enjoyed reading and learning, especially for my STEM classes, and wanted a career that encouraged life-long learning. In high school, I had the opportunity to volunteer at a local hospital in Tucson and work in a biophysics lab at the University of Arizona. Those experiences were some of my first exposures to medicine and science and had a big impact on me. I was inspired by the physicians and scientists I met and imagined myself one day wearing my own white coat. I also wanted a career dedicated to helping children, so becoming a physician and specifically a pediatrician was a natural fit. I only learned that MD-PhD programs existed when I was in college, and I have a vivid memory of the first time I saw a female MD-PhD in person (while waiting for the Tower Elevators at BWH). I was so excited to realize I could one day be like her and here we are today!



What were you doing before you started your current program, and what made you choose it?

During my senior year of high school, my steel drum teacher's daughter was diagnosed with Rett Syndrome, which sparked my research interests in developmental neuroscience and human genetics and genomics. I went to college at Harvard, where I studied Molecular and Cellular Biology, worked in a developmental neuroscience lab, and unknowingly prepared myself for 24-hour call shifts working for The Harvard Crimson newspaper. I then crossed the Charles River and trained in the Harvard/MIT MD-PhD and Health Sciences and Technology Programs. My PhD training was in the lab of Dr. Chris Walsh, Chief of Genetics and Genomics at BCH, studying the genetics of neurodevelopmental diseases. I completed residency in the Boston Combined Residency Program on the Accelerated Research Pathway, and am currently a second year fellow in the Harvard Neonatal-Perinatal Medicine Fellowship Program. I am thankful for the support network of friends and mentors I have developed during my Boston biomedical journey!

I was introduced to neonatology as a high school freshman when I started volunteering at a local hospital and was assigned to the NICU. I remember feeling like the NICU was a special place as I carefully soothed babies to sleep. In college, I was fortunate to be matched with Dr. Steve Ringer when he was Chief of Newborn Medicine at BWH through a premedical mentoring program, and I fell in love with neonatology as I shadowed BWH NICU rounds and participated in the BCH Newborn Medicine Summer Student Program. Throughout medical school, I was always most excited about experiences related to neonatology. In residency, my first rotation of intern year was in the BMC NICU and I was so happy (and scared) to have the privilege of being a doctor and taking care of babies in the NICU. I love that neonatology gives me the opportunity to resuscitate and take care of sick babies with multidisciplinary teams, to perform procedures, to think about the physiology and pathology of all of the organ systems during development and the fetal to neonatal transition when making clinical decisions, and to form relationships with families to guide and comfort them through their babies NICU journeys.



What are you working on?

I have a wonderful team of mentors—I currently work in the labs of Dr. Ann Poduri in the Department of Neurology and Dr. Tim Yu in the Division of Genetics and Genomics, and collaborate closely with Dr. Pankaj Agrawal in the Division of Newborn Medicine and with my graduate school mentor Dr. Walsh. My research focuses on early onset epilepsy genetics and neonatal genomics. Over the course of my training, I have realized that I am most excited by translational research that allows me to bring discoveries from the bench to the bedside. For one of my projects, I am working on the Gene-STEPS study (Shortening Time to Evaluation in Pediatric Epilepsy Services),



What do you do for fun?

When I'm not in scrubs, I enjoy going on walks with my husband and our dog Hugo, a Great Pyrenees mix who doesn't realize how big he is, exploring New England and traveling, cooking and trying new restaurants, brewing tea, and spending time with my family and friends. I am lucky to have family in Boston who have supported me throughout my training: my husband Adrian and I met in high school (we were partners in a Science Olympiad event) and my younger brother Jonathan is currently an MD-PhD student at Harvard/MIT. Balancing work and life is a work in progress, and I often reflect on one of my favorite quotes by J.R.R. Tolkien: "All we have to decide is what to do with the time that is given us." Time is precious, and I do my best day by day to make that decision and be fully present in what I decide to do.

What is your favorite thing about Boston?

My husband and I have been living here for 15 years and we love Boston (and have become Patriots fans) – it is hard to pick one favorite thing! I enjoy experiencing the four seasons, living in a walkable city with so much history and good food, interacting with an incredible biomedical community, and being close to the ocean and many lovely places in New England.



Nan Du, MD

Pediatric Gastroenterology

Where did you live growing up and before heading off to medical school?

Although I was born in Cambridge, United Kingdom, I actually grew up in Barrington, Rhode Island. My summers were spent playing soccer, eating a lot of Del's lemonade

and enjoying the beautiful coastline of the ocean state. I studied biomedical engineering at Harvard University with my engineering thesis focused on designing an optimized endothelial sprouting assay for angiogenesis.

When and how did you decide to go into medicine?

Since I was 5 years old, I've always said I wanted to be a pediatrician. I think a lot of that came from the amazing care that I received going to my own pediatrician, and the fact that I loved solving problems and listening to people's stories. Since my mother worked as a biochemist at Rhode Island Hospital, I spent a lot of my childhood around the hospital volunteering and chatting with patients. The best advice I received in college as I was deciding whether to actually go into medicine was that if there was anything else you thought you wanted to study or do that you should do it. I was grateful that I had the opportunity to really dive into the engineering world, and hone the skills of teamwork and problem solving. However, in the end, it confirmed to me that medicine was really the path for me.



What were you doing before you started your current program? What made you choose this specialty?

Prior to pediatric gastroenterology fellowship at Boston Children's Hospital, I actually spent a year working as an urgent care attending at Yale-New Haven Hospital. It was a wonderful opportunity to really synthesize all of my pediatric residency training and get incredibly good at suturing and fixing nursemaids. I really appreciated the opportunity to work independently as an attending for a year before starting another three years of training.



Interestingly, I was actually deciding between neonatology and gastroenterology. In the end, I chose GI because of the simultaneous simplicity and complexity of the field as well as the intermix of outpatient, inpatient and procedures.

In the most simple of terms, gastroenterologists are managing one long tube (or plumbing problem we might joke), but what makes it complex is our growing understanding of the role of the microbiome and gut-brain axis. I think what really solidified my decision was that I realized that I always naturally gravitate towards my pediatric gastroenterology colleagues at conferences.

Tell us about something you are working on.

I'm currently working on a project looking at arsenic exposure in children with celiac disease. There has been substantial concern raised amongst families and providers about the exposure of arsenic and other toxic metals in rice because rice plants naturally bioaccumulate arsenic present in the environment. For children with celiac disease, rice is the most common gluten-free substitute grain. Successful treatment of celiac disease requires a strict gluten-free diet (GFD). This involves elimination of wheat, rye, barley and most oats, which is challenging to implement for both practical and social reasons. Hence, children with celiac disease on a gluten-free diet are one of the larger populations consuming rice-enriched diets. At the moment, I'm recruiting patients who are newly diagnosed celiac to see if we do actually see a change in urinary arsenic after they transition onto a gluten free diet.



What do you do for fun?

My partner and I love hiking in New Hampshire to see the fall foliage, and we also enjoy hiking to any kind of waterfall we can find in New England. My other hobbies include catching up on Manchester United and USWNT soccer matches, running along the Charles River and baking chocolate chip cookies.

What is your favorite thing about Boston?

I love the walkability of Boston. During the weekends of the COVID-19 pandemic, I would often spend the day walking across the city through the Emerald Necklace, Esplanade and Charles River area. Also, Boston is absolutely stunning in autumn.



Benjamin Garren, MD Pediatric Critical Care Medicine



Where did you live growing up and before heading off to medical school?

I'm from Concord, North Carolina. I have an identical twin brother and we did everything together growing up. We tried "switching places" one time in high school math class, teacher did not find it funny when the class was giggling the entire time, we both got detention, and we've never tried it ever again. My twin is currently a Navy Urologist at Walter Reed National Military Medical Center, and I'm very excited that I will be joining him there next year to work in the pediatric ICU.

When and how did you decide to go into medicine?

I don't know if there was ever an exact "Aha" moment. I spent years as a summer camp counselor and worked with special needs children. This kind of morphed into a desire to be a small-town pediatrician. Along the way, I found the ICU which I love, but if anyone knows any summer camps with a blob, zipline, and that are looking for a part-time intensivist on staff, please contact me.

What were you doing before you started your current program?

Just prior to critical care fellowship, I was a pediatrics resident at Madigan Army Medical Center in Tacoma, WA. I joined the Army out of college and have been active duty since 2016.



Tell us about something you are working on.

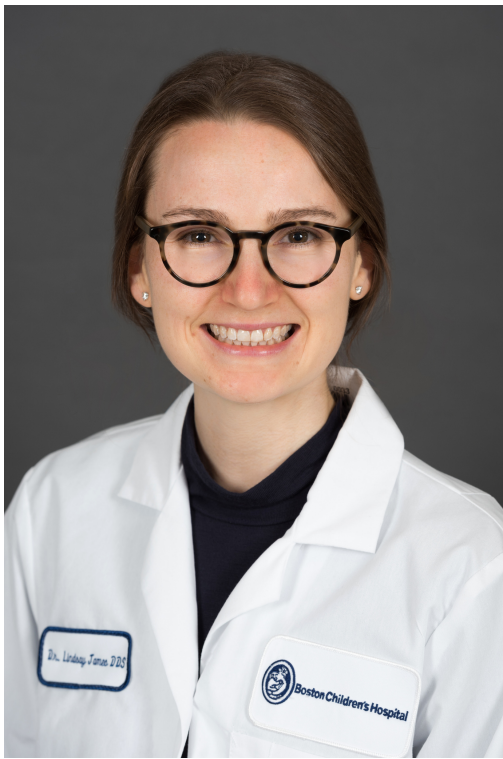
I'm working on health services research, currently focused on children with burn injuries. My recent project is looking at predictors of mechanical ventilation duration in children with burns—an area I feel is very pertinent to a career as an Army pediatric specialist.



What do you do for fun?

You wouldn't know it by looking at me, but I've had a passion for riding motorcycles since I was 16. My happy place is a sunny, crisp morning riding the Blue Ridge Parkway just outside Roanoke, VA (where I went to medical school). Nowadays, I have a wonderful family that I love. My wife (Nikki) is a family medicine doctor and an absolutely amazing mother to our 22-month old son (Eli), who loves blueberries.





Lindsay James, DDS

Pediatric Dentistry

Where did you live growing up and before heading off to medical school?

I was born and raised in Halifax, Nova Scotia, a beautiful, small city on the east coast of Canada. After high school, I moved to an even smaller town in New Brunswick, where I completed my undergraduate degree in Chemistry and Mathematics at Mount Allison University.

During my time at Mount Allison, I also competed as a varsity athlete on the women's hockey team. Upon completion of my BSc, I moved back to Halifax for Dental School at Dalhousie University.

What were you doing before you started your current program?

After graduating from dental school, I completed a one-year pediatric general practice residency program at the Izaak Walton Killam Children's Hospital (IWK) in Halifax, NS. I loved my time at the IWK! I learned a lot and gained valuable clinical experience, which helped prepare me for the fast pace and busy environment at Boston Children's Hospital.

What made you choose your current specialty?

My maternal grandfather was a dentist in a rural part of New Brunswick. To this day, I hear stories about how caring he was as a provider; I always knew that I wanted to follow in his footsteps. In addition, I have a genuine interest in working with children and the special needs population. Combining my personal interest with my professional goals only made sense. I truly enjoy practicing pediatric dentistry, it's rewarding and each day presents a new challenge.



What are you working on?

As a part of our two-year residency program, we complete a graduate level research project on a topic of our choice related to Pediatric Dentistry. My project is a prospective observational study assessing behaviour during procedural sedation. I have thoroughly enjoyed working with my research team and investigating this topic and I am looking forward to presenting our results at the annual AAPD conference in San Diego this May.



What do you do for fun?

Growing up with two brothers, I have always been heavily involved with sports. I started playing hockey when I was five and have not stopped since. I enjoy staying active and have recently become hooked on the Peloton!

What is your favorite thing about Boston?

One of my favourite things about living in Boston is access to all the professional sporting events. Although I am a true Toronto fan at heart, I love heading to TD Garden to catch a Bruins game. I also enjoy exploring the food scene in Boston with my co-residents!



Saad Rahmat, MD

Child/Adolescent Psychiatry



Where did you live growing up and before heading off to medical school?

I've been tremendously fortunate in my life to have lived in so many different places. I was born in Karachi, Pakistan, and spent my childhood in Maputo, Mozambique. Seeking greater opportunities, my family immigrated to Columbia, Missouri when I was a teenager. Upon graduating from high school, I decided to go to New York City for college and attended New York University where I majored in History. Following graduation from college, I worked in the Division of Infectious Disease and Department of Microbiology at the Icahn School of Medicine at Mount Sinai (previously the Mount Sinai School of Medicine) as a clinical research coordinator and associate researcher, respectively.

When and how did you decide to go into medicine?

I came to the decision to study medicine gradually. I spent my undergraduate years swaying between history and medicine. Initially, I found my history courses to be more suited to my temperament and was unenthralled by pre-medicine requirements.

My attraction to medicine grew as I advanced from the basic pre-medicine courses to graduate classes in biochemistry and mathematical modeling of biological functions. I completed a summer research internship at the Icahn School of Medicine in the laboratory of Dr. Mary Klotman studying the immune response to HIV infection. My lackluster grades from my early years in pre-medicine and a lack of knowledge about how to apply to American medical schools resulted in refusal from dozens of schools. These rejections made me question once again whether I wanted to go into medicine.

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Following the completion of my undergraduate degree, Dr. Klotman graciously offered me a position as a clinical research coordinator in her laboratory studying the 2009 H1N1 Swine Flu, in collaboration with the Global Health and Emerging Pathogens Institute led by Dr. Adolfo Garcia-Sastre. After a year of transitioning from clinical research to bench research, I applied for a job as an Associate Researcher at Dr. Nicole Bouvier's laboratory studying influenza and worked there for 2 years. During this experience, I worked with tremendously capable and intelligent individuals. Physician-scientists, particularly Dr. Klotman and Dr. Bouvier, served as role models for me and strengthened my resolve to pursue medicine. I accepted that I would not be able to attend an US medical school. I applied and was accepted to St. George's University in Grenada, West Indies

What were you doing before you started your current program?

I completed 3 years of my General Psychiatry residency at Westchester Medical Center in Valhalla, New York, before "fast-tracking" into my Child and Adolescent Psychiatry fellowship at Boston Children's Hospital.

What made you choose your current specialty?

Combining my love of stories with my passion for medicine made me choose Child and Adolescent Psychiatry. Psychiatry provides me with the opportunity to learn each of my patients' unique histories and, in turn, teaches me more about the human condition than any textbook. Along with this process, I relish being able to educate my patients and their families about mental illness and provide them with treatments so that they can have a better quality of life.



Tell us about something you are working on.

There are multiple projects that I am currently working on at Boston Children's Hospital. Perhaps the easiest to summarize is my work with Dr. Joseph Gonzalez-Heydrich. Previous research has shown that there are stepwise changes in EEG findings for children who are either control subjects, have symptoms consistent with clinical high risk for psychosis, and those with psychosis. We are working to establish whether combining these EEG findings into a singular variable can serve as a predictive factor for a psychotic illness.

What do you do for fun?

I particularly enjoy going on hikes with my wife, Stephanie. If the weather is poor, I enjoy reading Scandinavian novels, playing video games on my computer, and recently have found myself watching copious amounts of Twitch.

What is your favorite thing about Boston?

My favorite thing about Boston is its respect for the past. I love reading all the plaques and learning about those who trod the streets before me.





Ronnye Rutledge, MD Internal Medicine/ Pediatrics

Where did you live before growing up and going off to medical school?

I am a Midwestern transplant from Fort Wayne, Indiana and have fond memories of my time growing up there. Fort Wayne is a fun “Big- little” city with areas of expansive farmland punctuated by suburban neighborhoods and a trendy downtown. My father was a minister so much of my time outside of school was spent within my church community. They have been a great source of support for me throughout my schooling and career. After high school I attended Harvard College then spent a year working in Chelsea, Massachusetts. Finally I switched states and went to medical school at Yale.

When and how did you decide to go into medicine?

I come from a family of educators (Language Arts teachers, Sunday School teachers and ministers) so I always knew that whatever career I chose it would involve serving my community in this role. I am the first doctor in my immediate family and at a young age was always fascinated with the functions of the human body. My hometown pediatrician, Dr. Katie Beaverstad was one of the first people to notice how enthralled I was to visit the doctor’s office and she encouraged my parents to nurture this excitement for medicine. In many ways, I was lucky to have few pre-existing notions regarding what it means to be a doctor. But I had a strong sense that I needed to go into medicine to work towards correcting the disparities that I saw right in my own backyard.

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My hometown like many urban cities has very clear divisions between the haves and the have nots and I often straddled both worlds. Living in a low-income neighborhood while attending an affluent private school in the suburbs, I was acutely aware of the fact that my neighborhood and grade school friends had vastly different experiences in accessing safe housing, healthy food options and equitable healthcare.

Furthermore, as the child of ministers, the Biblical scriptures that resonated the most with me were the ones that spoke to the importance of righting societal wrongs, even if that meant upsetting or disrupting the status quo. I owe so much to the teachers, family, friends and mentors who nurtured both my love of science as well as my desire to improve the health of my local community

What did you do before you started your current program?

Prior to residency, I attended Yale Medical School where I earned an MD/MHS which allowed me to devote time to my research interest in health care disparities. My project focused on evaluating the acceptability of pre-exposure prophylaxis for HIV among women who are involved in the criminal justice system (incarcerated, on probation or on parole). The most impactful part of this experience was getting to engaged with community partners at local healthcare clinics, drug treatment facilities and community organizations around creating impactful health care delivery. In the year prior to medical school, I helped implement a birth education program for young mothers and recent immigrants to the United States. The "Birth Circle" that I created was a program operated through Roca, Inc., a Massachusetts based non-profit, that seeks to prevent recidivism and cyclical poverty.

Tell us about something you are working on.

My current work includes the creation of an elective experience within our Med-Peds teaching clinic that provides upper-level residents with the opportunity to practice serving in the role of a clinical preceptor by helping underclassmen develop an appropriate differential and develop a framework for diagnosing common primary care complaints. Also, resident-preceptors learn how to manage multiple trainees within a teaching clinic and gain experience in providing feedback to guide clinical assessments.



What made you choose your current specialty?

I did not come from a family of doctors so I truly had no idea about the complexities of specialty selection. I knew that I wanted to serve my community as a doctor who was capable of handling a wide range of illness across all age groups. Med-Peds (Combined Internal Medicine and Pediatrics) has been a great fit for me. As a Med-Peds resident I get to do it all. I can take care of critically ill neonates while managing a flood of deliveries and on the same day head to clinic to take care of an octogenarian who needs titration of their heart failure and diabetes medications. The diversity of clinical environments, age groups and clinical scenarios that my training offers has reaffirmed my desire to remain a generalist as a “specialty.” After residency I will be pursuing a career as a Med-Peds hospitalist taking care of pediatric and adult patients at Emory/Grady Hospital and Children’s Healthcare of Atlanta. Hospitalist medicine also allows me the flexibility to balance time between clinical time and pursuing my other interests, specifically medical education.

What do you do for fun?

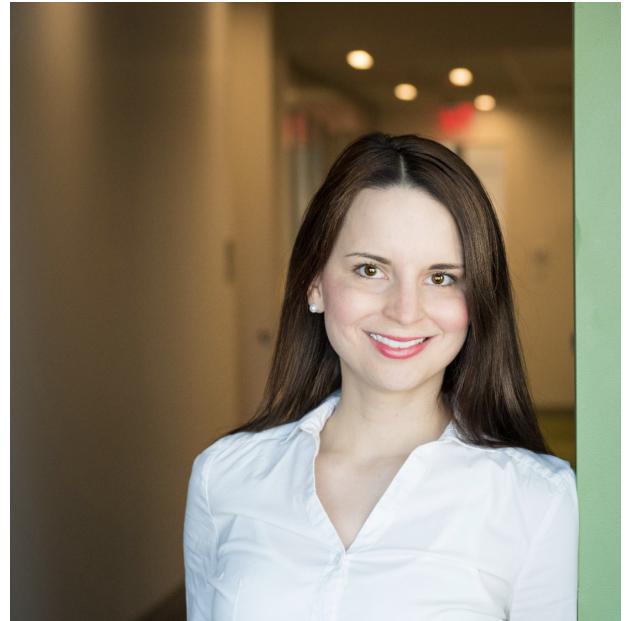
I am an avid reader (currently reading Audre Lorde’s *The Cancer Journals*) and am involved with a book club composed of female healthcare workers of color. Prior to residency (and COVID) I took up Argentine Tango and hope to return to this when the pandemic subsides. I enjoy hiking, cycling and all manner of donut-like treats (especially Whoopie pies).

What is your favorite thing about Boston?

I like that Bostonians have a very strong sense of community and we see this in the way we rally around well-loved sports teams, cultural foods and yearly events. As a transplant from the Midwest, I have always felt very welcomed.



Franziska Wachter, MD Pediatric Hematology/ Oncology



Where did you live before growing up and going off to medical school?

I grew up in Bavaria in Germany – in Munich people truly wear Lederhosen and Dirndl and celebrate Oktoberfest. I went to Ludwig Maximilian University of Munich Medical School and did a research doctorate at Helmholtz Center in Munich.

Why did you go into medicine? And why did you choose this specialty

I have always been interested in molecular mechanism of disease. My passion is the discovery and development of novel therapeutics. Pediatric Oncology is a perfect specialty to combine my clinical and research interest

What were you doing before you started your current program?

I did a postdoc with Loren Walensky at Dana Farber Cancer Institute before I started my clinical training.



Tell us about something you are working on.

I use cutting edge structural biology technologies, like cryo EM to visualize how certain drivers of leukemia bind to chromatin and alter transcription. This structural information will help to better understand how molecular fusions cause abnormal transcription and malignant transformation. My overall goal is to develop novel therapeutics to treat high risk myeloid malignancies.

What do you do for fun?

My family is all in Germany and I try to visit them as much as possible. I like to skiing in the winter and go to the beach in the summer. I like to go out and try new restaurants.

What is your favorite thing about Boston?

The scientific community. Also, the city is very European



TEAM SPOTLIGHT



Quality Improvement

Rachelle El Halou, MD

Rebecca Green, MD

Jheanelle McKay, MD

Introduction

We're Rachelle, Jheanelle and Becca, three of the third year pediatric emergency medicine (PEM) fellows. As part of our PEM fellowship, we partake in a 2-year longitudinal QI curriculum that includes a fellow designed and implemented quality improvement project. Our project is titled: Fill don't spill: reduction in time to pelvic ultrasound (US) for adolescent females with lower abdominal pain in the emergency department.

How we came up with our study

We chose to focus our project on reducing the time to pelvic US for adolescent females with lower abdominal pain in the ED because lower abdominal pain is a very common chief complaint (see about every shift) and most of these young women undergo pelvic US as part of their evaluation. Historically, transabdominal US takes a long time to complete in the ED due to a need for a full bladder for optimal sonographic windows. We wanted to design a project that would help reduce the time to diagnosis for this patient population.

Why it is important:

These adolescents undergo pelvic US to evaluate for ovarian pathology which include many time-sensitive diagnoses related to their reproductive organs! Therefore, any reduction in time to diagnosis is worthwhile. Additionally, both patients and parents enjoy a shorter ED length of stay.

Roadblocks:

This project was designed during the very beginning of the COVID-19 pandemic and is a multidisciplinary study involving physicians, nurses, clinical assistants, ultrasonographers and patients. Over the last two years, we've been experiencing high volumes in the ED and lots of staffing shortages which has made the execution of some of our interventions difficult – as there are many competing priorities in the ED! Despite these barriers, we've been able to implement two rounds of PDSA cycles and will be launching our third in the next month.

Key Takeaways

Implementing change is hard! You need great teamwork and buy-in from all parts of your clinical team as well as patients and families (parent advisory council) in order to be successful. We're lucky to work within a division committed to doing hard work to improve the care of our ED patients – and these efforts wouldn't be successful without them.

Other things to share

We're excited to announce that an abstract related to our project was accepted for a poster presentation at the Pediatric Academic Societies (PAS) Meeting in late April in Denver, CO! We're excited to connect with our colleagues in other EDCs across the country and share our results thus far and get their valuable feedback on how to continue to improve care for this patient population.



Drop us a line!

We love to feature stories about our residents, clinical fellows and faculty both in this newsletter and on our Instagram account. Let us know who you think we should include. Individuals and teams both welcome, as are stories about educational initiatives, research projects, publications, or anything else you want to share with us!

**go to <https://tinyurl.com/2p8f3uzt>
or email gme@childrens.harvard.edu**



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