It’s amazing what a difference one family can make. The Miller-Coulson family – Mrs. Anne G. Miller, G. Thomas Miller, Richard B. Worley, Leslie Anne Miller, Sarah Miller Coulson, and the late Frank L. Coulson, Jr. – has made possible some of our finest initiatives. It started nine years ago, with the Miller Lecture. Actually, it started before that, when Mrs. Anne G. Miller asked Vice Dean David Hellmann, M.D., why there weren’t more clinically gifted, compassionate physicians like the great Johns Hopkins internist, Phil Tumulty.

That led to many discussions about what makes an outstanding clinician – which, in turn, led in 2004 to the first annual Miller Lecture, an important event throughout Johns Hopkins that focuses on clinical excellence and how treating the whole person can improve the lives of our patients (for a list of the distinguished speakers who have graced this podium over the years, see side story). This year’s Miller Lecturer was Edward D. Miller, M.D., The Frances Watt Baker, M.D., and Lenox D. Baker, Jr., M.D., Dean of the Medical Faculty at the Johns Hopkins University School of Medicine, and Chief Executive Officer of Johns Hopkins Medicine (see side story).

But the family’s contribution didn’t stop there: There’s an endowed professorship, The Sarah Miller Coulson and Frank L. Coulson, Jr., Professorship, which helps support the work of one of our outstanding clinicians and teachers, Roy Ziegelstein, M.D., a cardiologist who is also the Miller Scholar. There are four Miller Coulson Scholars: Colleen Christmas, M.D., Steven Kravet, M.D., S. Chris Durso, M.D., and Scott Wright, M.D., – a team whose diligent work in defining what comprises clinical mastery laid the groundwork for The Miller-Coulson Academy of Clinical Excellence, an initiative sponsored by the Center for Innovative Medicine.

The Academy’s mission is to recognize master clinicians. Academic medicine traditionally has tended to reward its scientific researchers, those whose contributions are measured by publications and grants. But great teaching? Being a caring, astute physician? It’s often a case of “we know it when we see it,” but hard to define and measure objectively. This was the task that the Miller Coulson Scholars accomplished with such success: Based on their efforts, the Academy developed a rigorous process to identify exceptional clinicians, a clinical portfolio that assesses clinical accomplishment. The portfolio of each candidate nominated for membership in the Academy is reviewed and scored by an external committee of respected physicians at top academic medical centers, and then by an internal selection committee. “Through the acknowledgment of our most clinically excellent physicians, the Academy hopes to celebrate the significance and accomplishment of these individuals and provide inspiration to all clinicians,” says Wright, the Academy’s director.
For four years now, the Academy has sponsored an annual symposium devoted to excellence in patient care. This year, it inducted four new members (see page 22). Members in the Academy contribute to a blog, “Reflections on Clinical Excellence,” which draws readers from around the world into discussions and sharing of perspectives on being a better doctor and taking care of the whole patient. The Academy offers a curriculum to help physicians move toward clinical excellence; an elective for Johns Hopkins medical students; an “oath development program” to help medical residents crystallize their commitment to humanism in medicine (see side story); Academy-hosted Medical Ground Rounds; and journal articles related to medical excellence.

“Their friendship and generosity have been of extraordinary importance, and I will never be able to adequately thank you.”

This year, the Miller-Coulson family and the Academy have created a new annual award for young doctors who have shown clinical excellence. Frank Coulson died last year after a battle with cancer, and The Frank L. Coulson, Jr. Award for Clinical Excellence honors his life, his personal commitment to professional excellence, and his great interest in clinically excellent physicians. (For a list of the winners, see side story.)

In early May, the Miller-Coulson family was present at the program marking the 4th Annual Miller-Coulson Academy Excellence in Patient Care Symposium and the 9th Annual Miller Lecture. In his opening remarks, David Hellmann said to them: “Your exceptional and sustained generosity have given us the opportunity to try to be a better Public Trust, and many of the things that you have helped support are the things that we most care about. Your questions have guided us, your friendship and generosity have been of extraordinary importance, and I will never be able to adequately thank you.”

Ed Miller, M.D., has led Johns Hopkins Medicine since 1997. Under his tenure, working with Ron Peterson, M.D., President of the Johns Hopkins Hospital, both the Hospital and the School of Medicine have been ranked among the very best in the nation by U.S. News & World Report, and the school continues to rank at the top in NIH research funding. John Hopkins Medicine has developed a regional, integrated health care delivery system, incorporating several hospitals in the area and All Children’s Hospital in St. Petersburg, Florida. It has also broadened its international presence to include relationships with medical centers in the Americas, Europe, the Middle East and Asia, including a partnership to help Malaysia develop its first fully integrated, private four-year graduate medical school and teaching hospital. Miller has also led a massive rebuilding and renovation effort that has transformed both the Broadway campus and Johns Hopkins Bayview.

Miller credits several reasons why Johns Hopkins Medicine has enjoyed such success:

• Excellence. “If you don’t like excellence, you shouldn’t be here.”
• Integrity.
• Respect for the individual. “How we treat the people we work with on an everyday basis is critical.”
• Diversity, “which strengthens us.”
• A culture of innovation.
• The belief (and motto of the Center for Innovative Medicine) that “Medicine is a Public Trust.”
• Balance, of research, education, and clinical care.
• Centers of Excellence, in Aging, Sleep, Wound Healing, Memory, Bariatric Surgery, Addiction, the Aliki Initiative, Arthritis, the Miller-Coulson Academy, Vasculitis.

“Clinical excellence will occur if there is a rich infrastructure that supports the research and educational mission of the institution,” Miller says. “Clinical excellence will only occur if the patient is the center of our attention.”
“As a physician, my primary motivation...was to get her the knowledge and scientific breakthroughs for which Hopkins is legendary,” he told the audience. “In retrospect, I’ve come to understand that my motivation was not the lack of medical expertise in New Jersey, where she was – one-half of what I now realize is truly a part of medical excellence – but rather the other half, which is empathy, humanism, and wisdom... We came to Hopkins seeking the former, but an unexpected turn of events showed us that we desperately needed and received the latter. When we arrived, I felt secure because we had now entered the Mecca for scientific-based oncology therapy. Unfortunately, my mother suffered a devastating hemorrhagic stroke after less than 24 hours at Bayview. And it was only then that we were able to appreciate and participate in the other half of the clinical excellence balance, the patient-centered approach to care.

Every year, the symposium includes someone who represents the patient’s perspective. Dr. Martin Rusinowitz, is a neurologist. Recently, his mother was hospitalized in New Jersey, and Rusinowitz arranged for her to be transferred to Johns Hopkins Bayview.
"I knew instantly as a neurologist, upon seeing my mother’s CT scan of the brain, that she had suffered an irreversible neurologic deficit, for which death was not the enemy, but rather the most reasonable sequel to a horrible event.” Although he had faced this situation hundreds of times as a doctor, “it was very different when my mother was the patient,” he says. The Neuroscience Critical Care Unit fellow was a blessing for Rusinowitz. “His ability to provide a patient-centered approach to a dying patient’s family was handled so well that those last few hours of my mother’s life will always be positively remembered... We also felt supported by the doctor and nurses, and knew that we were being held tightly in their arms, and that they were going to be there with us until and after my mother’s last breath.

“When my mother got sick and died, I thanked God for the wonderful, humanistic, patient- and family-centered approach to her care, and thought, ‘Thank God, this is Hopkins.’”

“We heal the Arnold P. Gold Foundation, which supports humanism in medicine, recently named the Academy as a pilot site to create an oath and an image – an opportunity for residents “to think about the kind of doctor that they’re striving to become,” says Academy director Scott Wright. At the symposium, two second-year medical residents shared what their class created: A poster with the words, “We Heal.”

“It’s a simple oath,” says Panagis Galiatsatos, M.D., “but it embraces our outlook of what a physician should be – a healer – and our promise to our patients.” To show the universal goal of their oath, the class translated it into some of the world’s languages they have encountered within the walls of Johns Hopkins Bayview.

“The image hangs where our residents can see it and be reminded of the pledge daily,” adds Erin Reeves, M.D. In the background is the labyrinth (a meditation labyrinth is located outside the hospital). “It’s a symbol of transformation seen throughout history for many cultures in the world. During our residency training, we are working diligently to undergo a transformation ourselves, from brand new doctors to clinically excellent healers like the role models in the Miller-Coulson Academy.”
Michele F. Bellantoni, M.D., associate professor and Clinical Director in the Division of Geriatric Medicine and Gerontology, and Medical Director of the Johns Hopkins Bayview Care Center.

In the Division of Geriatric medicine, she says, “we are like a family. We share the burden of chronic disease. But to us it is not a disease, it is an opportunity. Our skills as clinicians are needed for every patient we serve,” patients who often have multiple conditions, and whom they treat in the clinic, the hospital, and in the patients’ homes. “With our care of these multiply complex older adults comes a great deal of optimism and hope.” The bottom line for the Care Center, she adds, “is, we care. And that’s our real family secret for clinical excellence.”

Giorgio Galetto, M.D., assistant professor of Emergency Medicine at the Johns Hopkins University School of Medicine and attending physician in the Emergency Department at Johns Hopkins Bayview.

Two decades ago, when Galetto decided to specialize in emergency medicine, a friend told him that he would be “sacrificing the all-important patient-doctor relationship for a succession of one-night stands.” Although it’s true that “we tend to treat people episodically,” he notes, what he and his colleagues see instead is an opportunity to reach out to people who are often “marginalized, poor, neglected, those in greatest need, for whom the Emergency Department at times is the only salvation, the only way they will get the therapy they need. How we talk to our patients, how we communicate – in essence, how we connect with the souls behind – is one of our most important missions. And it is the weaving of practice, teaching and public service with which we are shaped day after day that keeps my mind alive and keeps me here.”

Stephen Milner, M.D., F.A.C.S., professor of plastic surgery at the Johns Hopkins University School of Medicine and Director of the Johns Hopkins Burn Center, Surgical Director of the Johns Hopkins Would Healing Center, Director of the Michael D. Hendrix Burn Research Center, and Honorary Civilian Consultant Advisor to the British Army in Plastic Surgery and Burns.

“Patient care should embrace three things,” Milner says: “Comfort, compassion, and collaboration. Our prime goal in the unit has always been to prevent premature death and alleviate unnecessary suffering, bearing in mind that many of our patients have to undergo protracted, painful therapies and repetitive surgeries, often for months on end. So the ultimate decision to continue treatment is based on whether the quality of life is acceptable. And this is as judged by the personal values of the patients themselves. Now, we hear a lot about compassion and we teach compassion. But compassion alone without a sound medical knowledge will never be appreciated by any patient.” Milner is grateful for his daily opportunities to collaborate with outstanding people: “If you want to return a patient to the quality that they enjoyed before they sustained their trauma, you need as many ideas as you can get.”

E. James Wright, M.D., associate professor of urology and Director of Urology at Johns Hopkins Bayview. He is a co-developer of the Johns Hopkins Center for Women’s Pelvic Health.

Wright believes that we are the summation of all that we touch, interconnected at all levels, and “each of our interactions shapes who we are and how we practice.” Clinical excellence, he adds, “requires a willingness to be part of and to contribute to something bigger than one’s self, and I see it here every day. We build on an incredible legacy of science and discovery. We pass what we know to the next generation of doctors. And we are witness at times to incredible joy, stunning fear, and crushing sadness, and we are able to make a difference for others where no one else can. How great is that?” There remain many things “that defy explanation. We may eventually understand everything there is to understand, but for now, there is plenty of room for uncertainty. Why do outcomes still vary when all things are allegedly equal? Science is a powerful tool, but so is human interaction. We have the benefit of large data sets and unending statistics. But medicine still happens one patient at a time. How you have the conversation matters.”
The Frank L. Coulson, Jr. Award for Clinical Excellence

Frank Coulson, says David Hellmann, M.D., “was extraordinarily talented, extremely funny, and my dear friend. The outpouring of memorial gifts in Frank’s name allowed us to create another important award in clinical excellence to recognize outstanding residents at all of the programs at Johns Hopkins Hospital and Johns Hopkins Bayview.” Adds Scott Wright: “The nominating letters were all wonderful, and they all spoke to the incredible humanism, professionalism, and the fact that these doctors are wise beyond their years and rising stars in clinical excellence.”

At the symposium, Roy Ziegelstein, the Sarah Miller Coulson and Frank L. Coulson, Jr., Professor, told the recipients: “An award to people like you who are early in their career is an absolutely fitting tribute to Mr. Coulson. Frank was the leading bond salesman for Goldman Sachs for four decades. But I think the part of his work that he enjoyed the most was mentoring young people. He really would have loved to have met each of you. He would have greeted you with warm enthusiasm, a broad smile, and he probably would have told you a joke. He then would have given you a pat on the back as you accepted this award. For all of you, please feel Mr. Coulson’s presence with a pat on your back as you accept the award.”

Modupe Agueh, M.D.
Gynecology and Obstetrics

Hans Bjornsson, M.D.
Genetics

Philippines Cabahug, M.D.
Physical Medicine & Rehabilitation

Jason Chan, M.D.
Otolaryngology-Head & Neck Surgery

Linda Chu, M.D.
Radiology

Mary Cutler, M.D.
Child Psychiatry

Amena Deluca, M.D.
Dermatology

Latonya Hendricks, M.D.
Emergency Medicine

Marc Larochelle, M.D.
Medicine- JHBMC

Bonnie Lonzé, M.D.
Surgery

Matthew Nayor, M.D.
Medicine- JHH

Phillip Pierorazio, M.D.
Urology

John Probasco, M.D.
Neurology

Owen Thomas, M.D.
Radiation Oncology

Matthew Tilson, M.D.
Pathology

Lia Tron, M.D.
Anesthesiology and Critical Care Medicine

The Miller Lecture

It’s where the rubber meets the road – where the art and science of medicine come together, in a holistic, humanistic approach. This is clinical excellence, and you don’t have to be a physician to have something important to say about it. In fact, past Miller Lecturers have included a poet, an economist, noted authors – and a few doctors, too. Here’s the list of previous speakers, which is a veritable “Who’s Who” of influential thinkers:

2004 – Stephen J. McPhee, M.D.
Professor of Medicine; University of California, San Francisco

2005 – John H. Stone, M.D. (deceased)
Professor of Medicine, Emory University
Author, On Doctoring: Stories, Poems, Essays

2006 – Stephen J. McPhee, M.D.
Professor of Medicine; University of California, San Francisco

2007 – William R. Brody, M.D., Ph.D.
President: Salk Institute for Biological Studies former President, The Johns Hopkins University

2008 – Holly J. Humphrey, M.D., F.A.C.P.
Professor of Medicine, Dean for Medical Education Founding Dean, Academy of Distinguished Medical Educators
The University of Chicago Pritzker School of Medicine

2009 – Mr. David Wessel
Pulitzer Prize winning Economics Editor, The Wall Street Journal
Author, In FED We Trust and Prosperity

2010 – Abraham Verghese, M.D., M.A.C.P.
Professor and Senior Associate Chair for the Theory and Practice of Medicine; Stanford University School of Medicine Award-winning Author, Cutting for Stone and The Tennis Partner

2011 – Peter J. Pronovost, M.D., Ph.D., F.C.C.M.
Professor, Departments of: Anesthesiology, Surgery, Health Policy and Management, and Nursing; Johns Hopkins University