

# Pathology Newsletter

University of Colorado Anschutz Medical Campus



## Words from the PD/APD

**Dr. Von Samedi and Dr. Mary Berg**

For residency training programs, the transition between spring and summer is one of the most bittersweet times of the year. In a very short period, we celebrate our graduating residents and we quickly welcome new incoming trainees who often are recently minted physicians. It is slightly bitter because we part ways with learners that have in so many ways become colleagues. In reality, it is mostly sweet since these residents are now pathologists that have successfully traversed the bridge between medical school and early autonomous clinical practice in pathology. Here at the University of Colorado, the department of pathology is extremely proud of our graduates. In this issue, learn more about these graduating extraordinary new pathologists and their accomplishments thus far.

Graduation, a cyclical academic ritual, further fuels our enthusiasm to repeat the cycle with new eager learners. In the last issue, you were introduced to our matched applicants. They have finally arrived on campus, and they are working hard to integrate into the department. As they rotate in your clinical setting, take the time to welcome them. We are very confident that each one of them will enrich the program in their own unique ways. In addition, many of our faculty members and residents, through our introductory immersion block, have been facilitating the transition of the incoming residents into their new work roles by providing them tools to successfully assimilate.

Graduation is equally a celebration of everyone that has contributed in both small and big ways to the professional development of our learners. In this issue, we would like to highlight one of these contributors, Dr. Stephanie Bates. Although relatively new to the department, she is an amazing teacher working on the professional transformation of our pathologists-in-training.

Lastly, summer is in full swing! You do not need to be reminded that is the warmest season of the year, in the Northern Hemisphere. So, enjoy all the outdoor opportunities that come with the season and set aside some time for self-care and relaxation.

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# GRADUATION & AWARDS

JUNE 6, 2022



## Graduating Residents 2022

Left to right:

Von Samedi (PD), Katie Hall, Lynelle Smith, My-Linh Ho, Suguna Narayan, Amy Young (not pictured)



## Intern Certificate

Left to right: Chike Nwabuo, Vic Rea-Wilson, Allison Martin, Elyssa Glassheim, Askia Dunnon, Deyze Badarane, Von Samedi (PD), David Coates (not present)



## Medical Student Teaching Certificate

Left to right: Silvia Crapo, Beth Doughty, Brandi Davis, Visesh Ravikumar, Lynelle Smith, Dr. Nicole Draper



## Chief Residents 2021

My-Linh Ho and Lynelle Smith





# GRADUATION & AWARDS

JUNE 6, 2022



The Robert L. Low Award for Educational Excellence in the Foundations of Pathology recipient **Dr. Carrie Marshall**



The Robert H. Fennel Jr. Award For Excellence of Performance as a Pathology Resident recipient **Dr. My-Linh Ho**



William S. Hammond Excellence in Teaching Award recipient **Dr. Michael Clay**



Pathologist of the Year Award, **Dr. Carol Dittmann**



Summit Award Winners: Dara Aisner, Edward Ashwood, Mary Berg, Amber Berning, Jennifer Black, Jenna Bodmer, Billie Carstens, James Caruso, Michael Clay, Carlyne Cool, Kurtis Davies, Meghan Driscoll, Meredith Frank, Mary Haag, Louise Helander, Bala Kandasamy, Jefferey Kaplan, Kaleigh Lindholm, Mark Lovell, Samantha Mack, Sterling McLaren, Ian Puffenberger, Christina Roark, Von Samedi, Sharon Sams, Jamie Sheren, Stephen Wicks, Nick Willard, Josh Wisell, Rebecca Wolsky

# Faculty Spotlight

**University of degree**

Doctorate of Medicine from The University of Texas Health Science Center Houston and undergraduate degrees from The University of Texas

**Where did you grow up?**

The very musical and weird Austin, TX!

**What are you most proud of?**

Having the privilege of being a physician. It may sound cheesy to phrase it that way, but once I started practicing I fully understood what an honor it is to get to treat patients.

**Favorite thing to do in Colorado?** Anything outside: walk through the Arsenal, swim, lay in the grass.

**Best place you've ever traveled?** Costa Rica to see all the biodiversity that would come out of hiding.

**Something you're passionate about.** Working with other clinicians and hospital staff on quality and process improvement projects. These concepts seemed very dry in residency, but being a part of improving health care delivery is actually super fun and incredibly rewarding. I think I've learned more about being a good doctor from these projects than I did anywhere else.

**Who had the greatest influence on your education and/or career path?**

Dr. Barbara Bryant, who taught me there are infinite paths to being the doctor you want to be and for finding solutions to difficult problems.

**Most impactful part of your job?** Being part of the clinical team. Nothing beats being in the room and adding your ideas to patient care in real time.

**What advice would you give to your younger self or someone still pursuing their education?**

Time off from working or being 'less productive' than you may want to be has tremendous intrinsic value. Don't feel bad about enjoying the now because you never know when the party will end!



Stephanie Bates,  
MD

Assistant  
Professor



# The cytopathology workforce through a DEI lens

Von G. Samedí, MD, PhD

The ineffectiveness of the U.S. health care system is well documented. The United States consistently allocates more resources for health care compared with other industrialized countries, while not holding the top spots for desired outcomes. A significant percentage of Americans is underinsured or uninsured, and access to quality care is widely asymmetrical among different racial and ethnic groups. Early in the pandemic, COVID-19 highlighted these health inequities in which Blacks, Hispanics, Native Americans, and immigrants were the populations to disproportionately experience disparities related to burden of disease and mortality.

In addition to the pandemic, in 2020, the video of the killing of George Floyd was a vivid symbolic reminder that inequities were not isolated to health care but pervasive throughout American society. These two events led numerous organizations and institutions, including in the health care industry, to enact policies and strategies aimed at broadly increasing ethnic representations in their respective fields. One frequently made argu-

ment for a diverse workforce among physicians is that the providers should look like their patients. This would presumably allow for empathy—advocacy among the former and trust from the latter.

As a mostly diagnostic medical specialty, pathology does not provide many opportunities for pathologists to interact with patients, so here equitable diagnosis seems to be more relevant than a diverse workforce. This would be incorrect, however, because providing equitable health care goes beyond patient contact. The pathologist can have an impact on health equity through education, research, establishment of reference ranges, the overall use of laboratory data, and broad advocacy. The CAP Foundation See, Test & Treat program is an excellent example of how pathologists can advocate for their patients. Many U.S. pathology professional societies, including the CAP, have long recognized the contribution and impact pathologists can make. While efforts to create a multicultural workforce and to address diversity in the workplace existed before 2020 in the pathology societies, these professional

organizations have further invested resources in their existing and new initiatives related to diversity, equity, and inclusion (DEI). So how diverse, equitable, and inclusive is the field of cytopathology?

A 2021 study showed that fewer Black, Hispanic, Native American, or Alaska Native men and women are being admitted proportionally to medical schools than they were 40 years ago. While women are now entering pathology residency and fellowship training at rates equivalent to the percentage of women in the U.S. population, women make up less than 40 percent of practicing pathologists. The overall numbers and proportions of underrepresented populations in training, practice, or academia in pathology have remained essentially unchanged over 22 years, at less than five percent. According to the Department of Education, slightly more than half of Black and Latino (51.5 percent) students earned an undergraduate degree after six years, compared with nearly 70 percent of white students. This is a graduation rate gap of roughly 18 percentage points. Limited data are available on

diversity among cytopathologists and cytotechnologists specifically. However, the overall pipeline for these two professional groups would suggest we are not where we want to be.

So where do we need to be? Diversity has many sides, including age, gender identity, sexual orientation, race, ethnicity, culture, religion, geography, disability, socioeconomic status, area of expertise, training philosophy, and personality types. The future and vitality of cytopathology depend on a workforce composed of diverse people, thriving in an inclusive environment, who can ensure creativity and innovation. The benefits of diversity go beyond fairness. There is overwhelming evidence that teams that include different kinds of thinkers outperform homogeneous groups on complex tasks, including problem-solving, innovating, and making accurate predictions. Furthermore, cytopathology, like transfusion medicine, is unique among other pathology subspecialties in that the diagnostic impression is provided by pathologists and cytotechnologists who have access to patients regularly. This makes it

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more urgent to curate a workforce that reflects the people it serves.

The events of the past few years have renewed questions about whether medicine is making progress in reflecting the full diversity of communities that physicians are called on to serve. Unfortunately, the data are clearly suggesting we are regressing, with a longstanding diversity gap that is widening. There is no quick recipe to reverse the trend, but we can take dedicated and purposeful actions to create a diverse workforce for the betterment of health care.

The flow in the pipeline for our field is critically low. Every year fewer and fewer U.S. medical school graduates are entering pathology. Multiple factors may be leading to the declining interest in pathology, but the decrease in pathology materials in the medical school curriculum has surely contributed. The CAP Pathology Pipeline Champions initiative (<https://tinyurl.com/PathPipeline>), one of four priorities of the CAP Pathologist Pipeline Ad Hoc Committee, is a wonderful way to reach out to prospective pathology trainees. The American Society of Clinical Pathology mentorship program is another platform to use to educate students in middle schools, high

schools, and undergraduate colleges about career opportunities in pathology, including cytotechnology. Underrepresented communities should be the intended audience, regardless of the preferred outreach program.

The recruiting process can be a hurdle in reaching diversity if it is not designed to prevent implicit and explicit biases. Once a workforce is diverse, retention is best achieved through mentorship and sponsorship. The crucial glue to keep a diverse group of people working collaboratively are equity and inclusion for all. All these ideas are likely not new to most readers. In fact, many readers may be supportive of the vision of DEI, but perhaps fewer know how to move from a being a supporter to an advocate and an ally.

In recent years, most academic centers have begun to offer DEI classes or certificates. Many academic and non-academic departments have created committees tasked to promote DEI. As a member of the profession, one should take advantage of these opportunities by signing up for a class or by joining one of these committees. The most important characteristic of a DEI advocate and ally is not his or her background, race, or ethnicity. It is the

willingness to be open-minded and proactive in promoting DEI.

The inequities in our society go beyond the health care system, and it would be naïve to think we can reverse them with a few strategies. However, it would be irresponsible not to create strategies that could begin to do so. Over time, our involvement and engagement in DEI initiatives would bear fruit. Reaching DEI is more than about fairness; it is essential for our profession, for medicine, and above all for our patients. □

1. Swartz TH, Palermo AS, Masur SK, Aberg JA. The science and value of diversity: closing the gaps in our understanding of inclusion and diversity. *J Infect Dis.* 2019;220(suppl 2):S33–S41.

2. Morris DB, Gruppuso PA, McGee HA, Murillo AL, Grover A, Adashi EY. Diversity of the national

medical study body—four decades of inequities. *N Engl J Med.* 2021;384(17):1661–1668.

3. White MJ, Wyse RJ, Ware AD, Deville C. Current and historical trends in diversity by race, ethnicity, and sex within the US pathology physician workforce. *Am J Clin Pathol.* 2020;154(4):450–458.

4. Krouse HJ. COVID-19 and the widening gap in health inequity. *Otolaryngol Head Neck Surg.* 2020;163(1):65–66.

5. Lett E, Orji WU, Sebros R. Declining racial and ethnic representation in clinical academic medicine: a longitudinal study of 16 US medical specialties. *PLoS One.* 2018;13(11):e0207274.

6. Bailey ZD, Krieger N, Agénor M, Graves J, Linos N, Bassett MT. Structural racism and health inequities in the USA: evidence and interventions. *Lancet.* 2017;389(10077):1453–1463.

Dr. Samedí, a member of the CAP Cytopathology Committee, is associate professor of pathology, University of Colorado Anschutz Medical Campus School of Medicine, Aurora.





# UPCOMING EVENTS

## JULY 28TH, 2022

### MARC IN THE PARK

Washington Park, 6:30pm

## AUGUST 6-7TH, 2022

### RESIDENTS GETAWAY

Colorado Springs (8/6) & Larkspur, CO (8/7)

## AUGUST 20TH, 2022

### BOTANIC GARDENS WELCOME EVENT

Denver Botanic Gardens

## AUGUST 22-23TH, 2022

### CHIEF RESIDENTS RETREAT

Hilton Iverness Hotel, Englewood, CO





## Recharge Room

The university has opened a wellness room in the Anschutz Outpatient Pavillion for staff, faculty, and students to use to rest and take time for yourself. There will be massage chairs, a VR experience, nature-filled projection space, reading materials, and more. Hours vary - contact [Jennifer.Ricklefs@uchhealth.org](mailto:Jennifer.Ricklefs@uchhealth.org) with questions. Located in AOP 2005 alcove, east of the AOP elevator C, 2nd floor.

## Social Media



@CU\_Pathology

contact

[hannah.quackenbush@cuanschutz.edu](mailto:hannah.quackenbush@cuanschutz.edu)

with newsletter contributions

## Did you know?

### APC Conference Important Lectures

Click the links below to view the research and advocacy! (if you're having trouble accessing the links, please reach out and I can resend them via email)



Andrea Deyrup, M.D.,  
Ph.D, Professor at Duke  
University Medical  
Center

Health disparities in Pathology

Racial Biology and Medical  
Misconceptions

Pathology Central Race in Medicine:  
Keloids

But Now We See Presentation

LGBTQ+ Considerations

Interpreting Laboratory Results in  
Gender Diverse People

Transgender Medicine & the  
Management of LGBTQ+ Patients



Dina Greene, Ph.D,  
Clinical Associate  
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