Table of Contents

Message from the Chair 1
About the Department of Medicine 2
Department Leadership 4
Department Mission, Vision, and Values 5
Strengths and Challenges 6
Goals: 2017–2021 7
Clinical Care: Goals and Initiatives 8
Quality: Goals and Initiatives 9
Education: Goals and Initiatives 12
Research: Goals and Initiatives 13
People: Goals and Initiatives 14
Administrative Ecosystem: Goals and Initiatives 15
Division Goals 16
New Strategic Initiatives 18
Strategic Partners 20
Message from the Chair

David S. Stephens, MD

The Department of Medicine (DOM) is composed of more than 1,250 faculty, trainees, and staff doing extraordinary things every day—often under challenging circumstances. I appreciate and applaud our achievements in discovery, in patient care, in training and education, and in service.

With this plan, we are challenging ourselves to do more, go farther, be better. We want to be recognized as leaders in each area of our mission. We plan to contribute more to the many communities we serve, to achieve more scientific breakthroughs, to provide more excellent clinical services in new ways and at new sites, and to train more effectively. This plan—to grow our programs, focus on quality, nurture our people, and provide outstanding support—includes our areas of focus for the next five years. We will measure our progress in each of the outlined initiatives as we move toward the achievement of our goals. We will face many challenges, and we will focus on working together to be more effective.

In pursuing our mission to advance human health through innovation in research, education, and clinical care, we work to have a significant positive impact on our communities and the world.
About the Department of Medicine

The DOM is composed of 630 faculty, 201 residents, 131 fellows, and 307 staff working at more than 20 clinical and research sites. Through the work of its nine divisions and numerous centers and institutes, the department has pioneered advances in medicine, education, basic and clinical investigation, and clinical care.

Emory Department of Medicine faculty practice medicine at hospitals across the city of Atlanta including Emory University Hospital on Clifton Road.

Clinical research is a major focus of the department, particularly in the divisions of Cardiology; Infectious Diseases; Endocrinology, Metabolism and Lipids; Renal Medicine; and Pulmonary, Allergy, Critical Care and Sleep Medicine. Since 2011, DOM investigators have enrolled patients in 364 active studies, with 22,310 patients enrolled.

Emory's access to a large and varied patient population provides residents and fellows with unique training opportunities. DOM faculty are responsible for helping to teach all Emory medical students and for training 201 residents and 131 fellows in competitive clinical and research fellowship programs.
Graduate education activity in the DOM includes 24 faculty members who are members of seven different programs within the Graduate Division of Basic and Biological Sciences (GDBBS).

The clinical activity of the DOM continues to experience growth in service. Total volumes have increased by 19% since 2013 to more than 1.16 million patient encounters in FY15, including the Atlanta VA Medical Center (VA) and Grady Memorial Hospital.

Driven by large increases in cardiology and hospital medicine, inpatient volumes grew by 15% between FY13 and FY15.

Outpatient encounters by DOM physicians increased by 22% to more than 700,000 individual visits in FY15.
Department Leadership
Responsible for driving DOM missions

The department is structured into nine divisions, each responsible for delivering care, nurturing discovery, and training new physicians.

Department of Medicine Leadership Team

**Division Directors**

- **W. Robert Taylor, MD, PhD**, Cardiology
- **Frank A. Anania, MD**, Digestive Diseases
- **Roberto Pacifici, MD**, Endocrinology, Metabolism & Lipids
- **Theodore M. Johnson II, MD, MPH**, General Medicine & Geriatrics
- **Daniel P. Hunt, MD, FACP**, Hospital Medicine
- **Monica M. Farley, MD**, Infectious Diseases
- **David M. Guidot, MD**, Pulmonary, Allergy, Critical Care & Sleep Medicine
- **Jeff M. Sands, MD**, Renal Medicine
- **Ignacio Sanz, MD**, Rheumatology
Values
Integrity, Respect, Trust, Compassion, Innovation, Collaboration, Inclusion, Quality, Accountability, Excellence

Our Mission
Advancing health through discovery, education, and care.

Vision
To become a destination academic community that promotes innovation in discovery, education, and health care.
Strengths and Challenges

Department leadership discussions and faculty focus groups held at all major sites led to the development of this summary of the current strengths and challenges of the department.

By consensus, the scope, size, breadth, and diversity of the department and its faculty are the greatest strength; this, however, is also considered a source of challenges, including the need for improved internal communication and connection.

The increasing demands of clinical care and access through clinical expansion are seen as the department’s greatest challenges. With the DOM representing a significant percentage of total School of Medicine clinical faculty, participation in clinical planning strategies is seen as paramount.

Another major challenge is the deteriorating research infrastructure of the Woodruff Memorial Research Building, where several divisions have significant research activity.

**Strengths**
- Scope/size/diversity of the department, its faculty, and its resources
- Breadth/depth of research activities; integration of basic and clinical sciences
- Service to the underserved (especially VA, Grady)
- National leadership activities
- Focus on the quality of clinical care
- Strong culture of faculty development
- Support for education mission
- Strong fellowship programs
- Key strategic partners (e.g., Grady, VA, CDC)

**Challenges**
- Clinical expansion – planning with SOM, EHC, and other health care partners for strategic growth to achieve quality, meet patient demand, and accomplish organizational goals
- Developing appropriate faculty models to support clinical expansion
- Research space and aging infrastructure – impact on recruitment and research growth
- Providing academic opportunities and rewards to clinical faculty
- Finding a strong voice in clinical operations decisions
- Inadequate IT systems and tools
- Expanding the department’s role in primary care and integrating this with research and teaching
- Maintaining and expanding research funding in a challenging national environment
- Increasing philanthropic support
Department of Medicine Goals 2017-2021

CLINICAL CARE
- Actively seek to improve the health of 1 million people in metro Atlanta (local network) by expanding strategically within the current clinical footprint, with the DOM having a clinical presence at major sites
- Serve as the tertiary and quaternary provider of choice for patients in Georgia and surrounding areas (regional network)
- Serve as the leading resource for specialized care in the national and international markets
- Continue to expand the footprint of primary care
- Improve efficiency and effectiveness of use of Advanced Practice Professionals
- Establish the framework to provide input for clinical marketing planning
- Ensure adequate DOM physician leadership structure to appropriately represent priorities with EHC executive leadership

QUALITY
- Optimize care by reducing unnecessary variation
- Increase/enhance performance improvement capacity
- Assess population health

EDUCATION
- Enhance the quality and reputation of the internal medicine residency program, with the goal of becoming a top-15-ranked program in the next three to five years
- Increase interest among medical students in careers in internal medicine
- Enhance the culture of teaching across the Department of Medicine
- Enhance collaboration within and beyond the DOM
- Expand opportunities and mentorship for career development in academic medical education

RESEARCH
- Maintain and expand our extramural funding base through innovative discovery
- Improve our research and clinical trials administrative infrastructure
- Enhance health services research
- Enhance collaboration and interdisciplinary research

PEOPLE
- Increase faculty engagement through development opportunities and mentoring/coaching
- Build relationships and sense of community across all divisions and sites
- Enhance academic advancement by aligning clinical expectations with academic priorities
- Improve communication among leadership and faculty
- Provide mentoring and career development resources for staff
- Improve hiring processes for staff recruitment
- Develop a staff feedback program

ADMINISTRATIVE ECOSYSTEM
- Strengthen the DOM administrative team to facilitate financial performance and infrastructure operations
- Position the DOM as a powerful influencer of IT infrastructure decisions and investments regarding research and other faculty IT needs
- Maximize productivity of research space
- Increase philanthropic support of the Department of Medicine
- Develop a structure to better support the innovation activities of our faculty
- Staff the implementation process for the strategic plan

Douglas Morris, MD, Associate Vice Chair of Education
Clinical Care

**GOALS AND INITIATIVES**

1. Actively seek to improve the health of 1 million people in metro Atlanta (local network) by expanding strategically within the current clinical (EHC, VA, and Grady) footprint, with DOM having a clinical presence at major sites
   1.1 Establish a working group of DOM clinical leaders to develop vision for the deployment of DOM clinical resources that is consistent with the EHC Local Network Strategic Planning Process
   1.2 Develop template and process for service expansion
   1.3 Recruit and develop faculty to support an expanded clinical and population health mission

2. Serve as the tertiary and quaternary provider of choice for patients in Georgia and surrounding areas (regional network)
   2.1 Develop partnerships with local health care systems
   2.2 Expand strategically beyond metro Atlanta to new sites in Georgia and surrounding areas within driving distance
   2.3 Pursue opportunities for “destination” services – be the health care provider of choice for our diverse communities, payers, and employers

3. Serve as the leading resource for specialized care in the national and international markets
   3.1 Emphasize distinguishing programs

4. Continue to expand the footprint of primary care
   4.1 Consistent with the Primary Care Continuum Strategic Plan, widen our base and enhance access
   4.2 Evaluate benefit of embedding primary care into specialty practices

5. Improve efficiency and effectiveness of use of Advanced Practice Professionals
   5.1 Analyze the divisions’ utilization of APPs and “right-size” where appropriate
   5.2 Develop guidance for the use of and interaction with APPs

6. Establish framework to provide input for clinical marketing plan
   6.1 Ensure adequate DOM representation in EHC marketing committees/agendas
   6.2 Partner with EHC Market Services to develop comprehensive marketing strategies for DOM service lines

7. Ensure adequate DOM physician leadership structure to appropriately represent priorities with EHC executive leadership
   7.1 Establish internal forums for DOM clinical leadership to obtain feedback from local physician and administrative leadership
   7.2 Ensure adequate DOM representation in EJCH strategic planning groups

For additional information, see Implementation Plan for Action Steps, Timelines, Milestones, and Implementation Leaders (in separate document)
Quality
GOALS AND INITIATIVES

1. Optimize care by reducing unnecessary variation
   1.1 Identify and prioritize areas of opportunity; engage faculty to develop projects
   1.2 Implement action plans to measurably reduce variation and improve care

2. Increase/enhance performance improvement capacity
   2.1 Continue to develop leadership in quality improvement among faculty
   2.2 Identify physician leaders among faculty in each division (or at each site, including Grady and the VA) and determine time commitments
   2.3 Develop project management capabilities
   2.4 Leverage system capabilities to seek quality improvement (QI) opportunities through data analysis

3. Assess population health
   3.1 Determine data, IT, and resources needed to support QI projects
   3.2 Analyze bundled payment program features germane to the Department of Medicine
   3.3 Work with the clinical network to implement Medical Home model

Quality initiative leads to better care for AMI patients
An interdisciplinary team anchored by DOM cardiologists has diligently improved care over several years. For the vast majority of Emory hospital patients, taking the patient from first medical contact to an open coronary artery now takes less than 90 minutes. (Figure courtesy of Dr. Abhi Goyal)

For additional information, see Implementation Plan for Action Steps, Timelines, Milestones, and Implementation Leaders (in separate document)
Ebola patient Kent Brantley, MD thanks Emory faculty and staff.
Education
GOALS AND INITIATIVES

1. Enhance the quality and reputation of our residency program, with the goal of becoming a top-15-ranked program in the next three to five years
   1.1 Improve recruitment efforts
   1.2 Increase faculty engagement in the residency program
   1.3 Evaluate and improve the current residency teaching program and environment
   1.4 Cultivate innovative programs which maximize our strengths
   1.5 Develop a financial plan with short- and long-term goals

2. Increase interest among medical students in careers in internal medicine (IM)
   2.1 Strengthen the core electives to attract more Emory medical students to IM residencies
   2.2 Invigorate the IM interest group to provide medical students with more opportunities to explore careers in IM
   2.3 Enhance career mentorship programs and contact with DOM leadership
   2.4 Expand second-year electives, Discovery project offerings

3. Enhance the culture of teaching across the Department of Medicine
   3.1 Develop incentives to reinforce value of teaching efforts and minimize disincentives
   3.2 Enhance the visibility of educational efforts and recognition of the value of teaching activities across the department including at EHC
   3.3 Develop expected practices that optimize teaching activities to serve as standards
   3.4 Improve Medicine Grand Rounds as a teaching conference for all faculty

4. Enhance education collaboration within and beyond the DOM
   4.1 Develop common educational goals and efforts across the SOM with departmental educational leadership and medical school leadership
   4.2 Enhance interprofessional educational efforts
   4.3 Expand educational opportunities across cross-cutting themes (e.g., global health, technology, innovation, health services) in collaboration with other schools and regional institutions

5. Expand opportunities and mentorship for career development in academic medical education
   5.1. Expand opportunities for career development in teaching

For additional information, see Implementation Plan for Action Steps, Timelines, Milestones, and Implementation Leaders (in separate document)
Research

GOALS AND INITIATIVES

1. Maintain and expand the extramural funding base through innovative discovery
   1.1 Increase recruitment and retention of faculty (Goals 3.5 & 4.5)
   1.2 Improve responsiveness to funding opportunities
   1.3 Develop infrastructure and educational programs for crowd-sourced funding
   1.4 Increase industry sponsorships and technology-transfer efforts

2. Improve the research and clinical trials administrative infrastructure
   2.1 Partner with support units (RAS and OCR) to improve research administrative infrastructure
   2.2 Develop resources to encourage and support faculty engagement in clinical trials
   2.3 Develop big data infrastructure and faculty training/consultation programs

Due to advances in **personalized metabolomics**, in the future, we will have the potential to track our own metabolomes for personalized drugs and improved medical treatment strategies. Metabolomics is the study of “chemical fingerprints” left behind by cellular processes in the human body. Because metabolomics is non-invasive, it is a helpful tool for the preventive health care and pharmaceutical industries. Biomarker discovery and drug-safety screenings are two examples in which metabolomics have already enabled informed decision-making. Leading Emory’s efforts in this area is the Emory Clinical Biomarkers Laboratory and its director, Dean P. Jones, PhD (Division of Pulmonary, Allergy, Critical Care and Sleep Medicine).

3. Enhance Health Services Research (HSR)
   3.1 Increase departmental activities in HSR
   3.2 Create a working group to develop an HSR-specific strategic plan
   3.3 Develop quality and HSR as academic pursuits by creating career paths and education programs
   3.4 Provide data analytics, bioinformatics, and other services
   3.5 Increase HSR faculty recruitment (Goals 1.1 & 4.5)

4. Enhance collaboration and interdisciplinary research
   4.1 Enhance the DOM’s national profile
   4.2 Increase collaborations between the DOM and other areas of excellence
   4.3 Fund one to two seed grants annually to promote new collaborations among DOM faculty
   4.4 Engage faculty in Emory FIRST
   4.5 Participate in joint faculty recruitments (Goals 1.1 & 3.5)

For additional information, see Implementation Plan for Action Steps, Timelines, Milestones, and Implementation Leaders (in separate document)
People
GOALS AND INITIATIVES

1. Increase faculty engagement through career development opportunities and mentoring/coaching
   1.1 Engage clinical faculty on the breadth of academic opportunities and provide information on how to find time for academic pursuits
   1.2 Weave faculty development opportunities into DOM Communities
   1.3 Partner with the Research Advisory Team (RAT) to create programs to help sustain research programs
   1.4 Identify barriers to faculty engagement and develop system for valuing academics
   1.5 Enhance leadership development – create faculty development programs as pathways to leadership

2. Build relationships and sense of community across all divisions and sites
   2.1 Launch and maintain momentum of DOM Communities
   2.2 Develop longitudinal opportunities
   2.3 Improve cross-divisional/departmental collaboration

3. Enhance academic advancement by aligning clinical expectations with academic priorities
   3.1 Increase recognitions throughout the department
   3.2 Define types of scholarship
   3.3 Revise guidelines for promotion on the SOM level – define pathways/timelines for progress with various academic paths
   3.4 Expand and communicate opportunities for academic engagement

4. Improve communication among leadership and faculty
   4.1 Enhance communication to and from divisional leadership
   4.2 Create a strategic communication plan for mission areas, starting with faculty development
   4.3 Initiate newsletters to build awareness in Communities (see 2.1)
   4.4 Train leaders with messaging techniques

5. Provide mentoring and career development resources to staff
   5.1 Form a project group to create a staff development program
   5.2 Create a formal staff awards and recognition program on departmental level
   5.3 Update the staff development Web page with resources for staff career development
   5.4 Initiate a formal leadership development program for staff

6. Improve hiring processes for faculty and staff recruitment
   6.1 Provide better structure for hiring-manager input in staff recruitment – potentially through a shared services model
   6.2 Develop department/division content/program for on-boarding of faculty and staff
   6.3 Develop a multidisciplinary recruiting framework

7. Develop communication process for staff feedback program
   7.1 Develop a better understanding of new processes, including upward feedback
   7.2 Provide training to all staff and supervisors

For additional information, see Implementation Plan for Action Steps, Timelines, Milestones, and Implementation Leaders (in separate document)
1. Strengthen the department’s administrative team to facilitate financial performance and infrastructure operations
   1.1 Develop staffing plan for the next three to five years
   1.2 Focus on integration – establish structures and tools for clinical and academic administrative teams to work more closely and share information

2. Position the DOM as a powerful influencer of IT infrastructure decisions and investments regarding research and other faculty IT needs
   2.1 Utilize the DOM IT steering committee to identify and implement annual goals for IT service and infrastructure
   2.2 Ensure appropriate DOM representation in key SOM, WHSC, and EHC IT-related committees
   2.3 Regularly identify and address the IT needs of faculty and staff by partnering with university and IT services (key personnel: IT steering committee)

3. Maximize productivity of research space
   3.1 Work with School of Medicine initiative to drive effective management of research space

4. Increase philanthropic support of the department
   4.1 Develop strong divisional and departmental fundraising plans to support education and research programs
   4.2 Create marketing messaging for programs that is consistent with fundraising plans
   4.3 Provide education to faculty to encourage participation in fundraising activities

5. Develop a structure to better support the innovation of DOM faculty
   5.1 Assist faculty in leveraging new innovation funding
   5.2 Support faculty in seeking external funding to develop potential intellectual property

6. Staff the implementation process for the Strategic Plan
   6.1 Produce standard reporting with metrics regarding progress to facilitate a quarterly review by leadership
# Division Goals

Division-specific goals are linked to department goals and support the accomplishment of the overall goals of the department.

<table>
<thead>
<tr>
<th>Division</th>
<th>Clinical/Quality</th>
<th>DOM GOAL</th>
<th>Research</th>
<th>DOM GOAL</th>
<th>Education</th>
<th>DOM GOAL</th>
<th>People</th>
<th>DOM GOAL</th>
<th>Admin Infrastructure</th>
<th>DOM GOAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiology</td>
<td>Expand clinical footprint in alignment with WHSC strategic plan</td>
<td>(C1)</td>
<td>Senior hire (Heart Failure)</td>
<td>(R1)</td>
<td>Develop support to increase the number of trainees in fellowships for a) advanced heart failure, b) adult congenital heart</td>
<td>(P3)</td>
<td>Define a career path for staff scientists</td>
<td></td>
<td>Space issues - WMB challenges/co-location/ space management</td>
<td>(A3)</td>
</tr>
<tr>
<td></td>
<td>Enhance scholarship related to quality and health services research</td>
<td>(Q2)</td>
<td>At least two additional basic science hires</td>
<td>(R1)</td>
<td>Make Hurst/Logue/ Wenger Society financially self-sufficient</td>
<td></td>
<td></td>
<td></td>
<td>Form cohesive CV Institute</td>
<td>(R1, R4)</td>
</tr>
<tr>
<td></td>
<td>Enhance efficiency of clinical operations at TEC</td>
<td>(C1)</td>
<td>Use philanthropic sources to support mid-career research faculty</td>
<td>(A4)</td>
<td>Increase the distribution and impact of our online Cardiovascular Grand Rounds services</td>
<td></td>
<td></td>
<td></td>
<td>Philanthropy/development</td>
<td>(A4)</td>
</tr>
<tr>
<td>Digestive Diseases</td>
<td>Continue to establish full services at Emory Saint Joseph’s Hospital</td>
<td>(C1)</td>
<td>Hire investigators, in particular a senior investigator with experience in inflammatory bowel diseases</td>
<td>(R1)</td>
<td>Recruit fellow physicians for new training grant for MPH and health outcomes research</td>
<td>(E2)</td>
<td>Recruiting young investigators/deal with loan disincentives</td>
<td>(R1)</td>
<td>Remote meeting/conferencing tools due to geographic separation</td>
<td>(A2)</td>
</tr>
<tr>
<td></td>
<td>Expand interventional endoscopy services across all sites</td>
<td>(C1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Establish full-time clinical practice faculty at Emory Johns Creek Hospital and Clinic</td>
<td>(C1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Endocrinology, Metabolism and Lipids</td>
<td>Expand clinical footprint</td>
<td>(C1)</td>
<td>Invest in and manage cores</td>
<td>(R2)</td>
<td>Expand fellowship to address potential shortage of endocrinologists</td>
<td>(E3)</td>
<td></td>
<td></td>
<td>Streamline administrative functions</td>
<td>(A1)</td>
</tr>
<tr>
<td></td>
<td>State-of-the-art clinical technology/tele-data monitoring capability</td>
<td>(C1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Need robust remote meeting tools due to geographic separation</td>
<td>(A2)</td>
</tr>
<tr>
<td>General Medicine and Geriatrics</td>
<td>Emory University Hospital Midtown – Implement Family Medicine/Ambulatory care sites</td>
<td>(C2)</td>
<td>Health services research (VA and Grady)</td>
<td>(R3)</td>
<td>Rebuild preventive medicine residency</td>
<td>(E3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Geriatrics and Gerontology at VA</td>
<td>(C2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Senior research hires (mentors with funding)</td>
<td>(R1)</td>
<td>Increase primary care teaching faculty from 8 to 16</td>
<td>(E1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>HIV, Hep C, social determinants (Grady)</td>
<td>(C2)</td>
<td></td>
<td>(E3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(E3)</td>
<td>IPE teams into ambulatory care sites</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DOM Goal</td>
<td>Clinical/Quality</td>
<td>Research</td>
<td>Education</td>
<td>People</td>
<td>Admin Infrastructure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------</td>
<td>-----------------</td>
<td>----------</td>
<td>-----------</td>
<td>--------</td>
<td>----------------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospital Medicine</td>
<td>Determine optimal workload</td>
<td>(Q1)</td>
<td>Build health services research program</td>
<td>(R3)</td>
<td>Expand opportunities for teaching</td>
<td>(E3)</td>
<td>Diversity in leadership/development</td>
<td>(P1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Create senior advisor role to coach junior faculty in clinical care</td>
<td>(Q2)</td>
<td>HSR senior hire</td>
<td>(R3)</td>
<td>Develop teaching skills</td>
<td>(E5)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Communication between primary care and hospital medicine</td>
<td>(C2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infectious Diseases</td>
<td>Improve billing/Improve economics</td>
<td>(C3)</td>
<td>Antibiotic Resistance Center (senior hire)</td>
<td></td>
<td>Support department efforts to elevate internal medicine residency</td>
<td>(E2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Analysis of effort/fees</td>
<td>(R1)</td>
<td>Strengthen HIV work</td>
<td></td>
<td>Increase infectious diseases content in UME curriculum</td>
<td>(E1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Leverage Ebola prominence and resources</td>
<td>(R1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pulmonary, Allergy, Critical Care and Sleep Medicine</td>
<td>Continue to establish full services at Emory Saint Joseph’s Hospital</td>
<td>(C1)</td>
<td>Strengthen focus on academic mission (also at Grady and VA)</td>
<td>(R2, R3)</td>
<td>Develop educational leadership in the division</td>
<td>(E3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Integrate pulmonary service across sites</td>
<td>(C1)</td>
<td>Focus on clinical/quality improvement</td>
<td>(Q1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Develop Executive Park location</td>
<td>(C1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Become destination for advanced lung disease</td>
<td>(C3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Renal Medicine</td>
<td>Add an additional consult service at EUH to accommodate additional demand due to J-wing</td>
<td>(C1)</td>
<td>Senior hire to serve as a foundation for a research program that adds breadth to our current areas of expertise</td>
<td>(R1)</td>
<td>Continually review renal fellowship program to ensure that we remain competitive for fellows</td>
<td>Recognize faculty time for mentoring junior researchers</td>
<td>(P3)</td>
<td>Add administrative support within the division to fill gaps created by RAS unit structure</td>
<td>(A1)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Consider building a fourth Emory dialysis unit</td>
<td>(C1)</td>
<td>Strengthen basic science research</td>
<td>(R1)</td>
<td>Continue our research training programs for fellows (T32) and undergraduates (R25)</td>
<td>Recognition of MD clinical activity</td>
<td>(P3)</td>
<td>Work with TEC to improve call center functioning</td>
<td>(C1)</td>
<td></td>
</tr>
<tr>
<td>Rheumatology</td>
<td>Build specialized “destination” programs, including Lupus, Scleroderma, Rheumatoid Arthritis, IGG4 disorder, Vasculitis</td>
<td>(C3)</td>
<td>Special programs will have clinical research (e.g., Lupus, IGG4, Rheumatoid programs in place)</td>
<td>(R1, C3)</td>
<td>Secure T32 training grant</td>
<td>(E5)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Recruit physician-scientists with patient-based research in the rheumatic diseases</td>
<td>(R1)</td>
<td>Recruit fellows with commitment to academic rheumatology and research</td>
<td>(R1)</td>
<td></td>
<td>Nurse navigator and proper structuring of appointment process at TEC</td>
<td>(A1)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
New Strategic Initiatives
Working with other departments and schools, the Department of Medicine is driving a number of new key multi-mission strategic initiatives to advance research, education, and clinical care. Examples include:

The **Center for Diabetes and Metabolism Research** will strengthen Emory’s expertise in the areas of basic and translational research in diabetes, obesity, and metabolism. This new center will work with the Rollins School of Public Health’s Global Diabetes Research Center to build a collaborative team of research faculty to support strong clinical and Health Services Research in diabetes and metabolism, leveraging Emory’s research and expertise in molecular genetics, physiology, biochemistry, epidemiology, clinical research, sociology, behavioral sciences, public health, and policy.

The **Emory Women’s Heart Center** is a unique program dedicated to the diagnosis, screening, treatment, and prevention of heart disease among women. Led by women’s heart specialist Gina Lundberg, MD, the center provides comprehensive heart screenings to patients at risk of cardiovascular disease as well as a full range of treatment options for those already diagnosed with heart disease.

The **Emory Antibiotic Resistance Center** (Emory ARC) was created to combat the crisis represented by the increase in bacteria resistant to all currently available antibiotics. It is a new and critical component in the fight against antibiotic resistance. Clinicians and basic scientists work side by side to learn how antibiotic resistance develops, optimize the way antibiotics are used to preserve their power, and discover novel therapeutics and vaccines to directly combat antibiotic-resistant pathogens.
The DOM’s plan supports School of Medicine and Woodruff Health Sciences Center strategic initiatives

The Department of Medicine Goals and Initiatives outlined in this plan are consistent with and support the strategic initiatives of the Emory University School of Medicine and Woodruff Health Sciences Center. In addition, DOM faculty and staff play a major role in the action plans for these initiatives.
Using DNA to “decode” lupus

A team of Emory scientists led by researcher Dr. Ignacio Sanz—Georgia Research Alliance Eminent Scholar, director of the Lowance Center for Human Immunology, and director of the Department of Medicine’s Division of Rheumatology—has been exploring several questions about lupus. In patients with lupus, the immune system becomes confused and produces antibodies that are directed against the body itself. The researchers are working to determine where the cells that produce the self-reactive antibodies come from, and whether they are all the same. Their findings could guide drug development, because they define the subsets of antibody-producing cells that are most harmful to lupus patients. With next-generation sequencing technology, scientists can use this genetic information to identify and track the cells, like reading a bar code on an item in a supermarket. Together with his colleagues, Dr. Sanz has been using these “DNA bar codes” to deepen our understanding of immune responses in lupus.

Gender differences in heart disease

A team of Division of Cardiology investigators is evaluating methods used to diagnose coronary disease, including cardiovascular imaging modalities. The research, led by Dr. Leslee Shaw, has focused on gender differences in risk factors and diagnostic strategies for heart disease and has demonstrated that heart disease differs between women and men and should be managed accordingly.

Distinguished teachers

In 1993, the Evangeline T. Papageorge Distinguished Teaching Award was established by the Emory Medical Alumni Association. This award recognizes excellence in the teaching of medical education and honors the legacy of Dr. Papageorge, beloved teacher and administrator who served Emory for many decades. Each year, the award and honorarium are given to a faculty member whose intellectual luminosity has generated the greatest excitement about learning among medical students and colleagues. DOM recent awardees include Dr. Stacy Higgins (2016) and Dr. Wendy Armstrong (2015).
Strategic Partners
Mission-critical activities of the Department of Medicine engage Emory partnerships with Grady Memorial Hospital, the Atlanta VA Medical Center, and other local partners.

ATLANTA VA MEDICAL CENTER
The VA funded $9.3 million of research in the Department of Medicine in 2015, and 135 VA physicians are Department of Medicine faculty. 62 residents and fellows also train in programs at the VA.

GRADY HEALTH SYSTEM
Grady-Emory faculty and residents provide 85% of the care at the publicly funded Grady Memorial Hospital, including 198 Department of Medicine faculty and 108 Department of Medicine residents and fellows. As vital as Grady is to the Department of Medicine’s education mission, important Department of Medicine research programs also take place at Grady, including the HIV/AIDS research at the Ponce de Leon Center as well as diabetes, general medicine, and pulmonary research.

ATLANTA PARTNERS
Department of Medicine faculty collaborate with colleagues at Georgia Tech, the Center for Disease Control and Prevention, and Children’s Healthcare of Atlanta (CHOA) to research stem cells, infectious diseases, cystic fibrosis, congenital heart disease, asthma, and sickle cell disease.

EMORY RESEARCH PARTNERS include Rollins School of Public Health, Winship Cancer Institute of Emory University, and Yerkes Primate Center. Department of Medicine faculty partner with Rollins School of Public Health in the Center for AIDS Research. We partner with Yerkes in SIV, malaria, and tuberculosis. The Department of Medicine team is also working on molecular mechanisms of colon cancer with Winship researchers.