



# PISACANO

LEADERSHIP FOUNDATION

# 2025

SPRING BOARD MEETING



PISACANO.ORG

## **Pisacano Leadership Foundation Annual Report to ABFM Board of Directors**

*Submitted by:*

Andrew Bazemore, Robert Cattoi, Jill Endres, Jane Ireland  
on behalf of the PLF Board of Directors

*With a special thanks to:*

ABFM Research Analyst Zachary Morgan  
for his analytic contributions to this report.

# 2025

**SPRING BOARD MEETING**



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# Executive Summary

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2024 was another successful year for the Pisacano Leadership Foundation (PLF), which remains committed to advancing family medicine by fostering leadership development among outstanding medical students committed to careers in family medicine. This report summarizes our work over the past year, including:

## Key Achievements in 2024:

- ✓ **Expanded Scholar Cohort:** After averaging 4-6 scholars per year, the Foundation expanded awards in 2021 with support from the American Board of Family Medicine (ABFM) and welcomed the largest class ever in 2024 (11 Scholars), including the program's first DO scholar.
- ✓ **Governance Enhancements:** Last year, we began a long process of revising PLF bylaws. Significant changes include the introduction of a Pisacano Scholar graduate director seat and emeritus director role to strengthen leadership continuity, and term limits for board members.
- ✓ **Annual Leadership Symposium:** Planned and hosted by PLF Alum Saria Saccocio & a scholar planning committee in Greenville, SC, we had another successful, engaging annual symposium focused on authentic community engagement, active listening, and trust-building. This included new efforts to engage with the local community and also to sponsor a Greenville Community Transit Fare-Free Day.

## Scholarship Program & Diversity Commitment:

The PLF received 83 applications from 33 states and 80+ medical schools, maintaining rigorous selection standards while prioritizing diversity in its selection of Pisacano Scholars.

## Alumni Leadership & Impact:

Pisacano Scholar alumni continue to drive change across academic, clinical, and policy spheres. You can read more about the Alumni Grant Program and its support of projects in health care innovation, health equity, and workforce expansion in the report and on our [website](#).

## Financial Health:

With \$13M in reserves and sustained financial support from ABFM, PLF remains well-positioned to expand its mission.

## Looking Ahead (2026 & Beyond):

- ✓ The 2025 Annual Symposium will be held in Denver, CO, focusing on refining leadership communication.
- ✓ We're already looking ahead to the 2026 Symposium, likely in the Pacific Northwest, with a focus on lessons from Indigenous leadership practices that could inform scholar development.
- ✓ We continued our outreach to underrepresented allopathic and osteopathic medical schools to diversify future cohorts.

Through its unwavering commitment to leadership and advocacy, the Pisacano Leadership Foundation continues to cultivate the next generation of family medicine leaders, ensuring a stronger, more equitable health care system.

# Introduction

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The Pisacano Leadership Foundation is dedicated to advancing the field of family medicine by fostering the development of future leaders committed to excellence in patient care, education, and advocacy. Through its prestigious Pisacano Scholars Leadership Program, the Foundation provides exceptional third-year medical students with scholarship funding and comprehensive career development opportunities.

2024 was a landmark year for the Foundation, marked by the addition of 11 new scholars, a significant revision of the Foundation's bylaws, and a restructuring of the Board of Directors to strengthen governance and long-term impact. Additionally, the Foundation successfully hosted its Annual Leadership Symposium in Greenville, SC, a highly engaging and transformative event for Scholars and alumni alike.

Held on November 8-10, 2024, the symposium brought together 23 scholars, 10 alumni, 2 board members, and 3 staff members. Chaired by PLF Board Chair and Greenville resident, Dr. Saria Saccocio, and facilitated by Dr. Kirsten Naomi Chapman, the event centered on the theme "Leading from Within: Cultivating Authentic Community Engagement." Building on the skills learned in the 2023 community organizing workshop, the symposium featured panel discussions with local community leaders, interactive listening workshops, role-playing exercises, and immersive field trips. Participants deepened their understanding of authentic leadership by developing their unique leadership styles, practicing active listening, fostering trust through transparent communication, and broadening their knowledge of community engagement strategies.

A highlight of the symposium was the sponsorship of a Greenville Community Transit Fare Free Day on November 9, allowing all community members to ride public buses free of charge. Additionally, a poster session provided an opportunity for scholars, alumni, and grant recipients to showcase leadership projects, encouraging further networking and knowledge sharing.

Feedback from the symposium was overwhelmingly positive, with participants expressing a renewed sense of purpose, motivation, and engagement. Reflections included newfound perspectives on leadership, the value of conflict in fostering growth, and the importance of dedicated listening and open dialogue. Scholars and alumni left the symposium feeling empowered to apply these insights in their own communities.

By combining financial support with a robust leadership training curriculum, the Pisacano Leadership Foundation equips its Scholars with the necessary tools to advance the specialty of family medicine, drive innovation, and improve patient care. This annual report highlights the achievements of the Foundation and its Scholars, showcasing their contributions to the field and the broader health care landscape.

# Current Pisacano Scholars

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The current class of Pisacano Scholars continues to progress well through their education and participation in leadership activities. Several of our Scholars have presented papers at regional and national family medicine conferences. While the majority of their time is spent completing their residency requirements, there are a number of notable leadership efforts. These include running for positions on family medicine national committees, creating outreach programs to their local communities, and participating in developing the PLF Annual Symposium.

## Current Scholar comments:

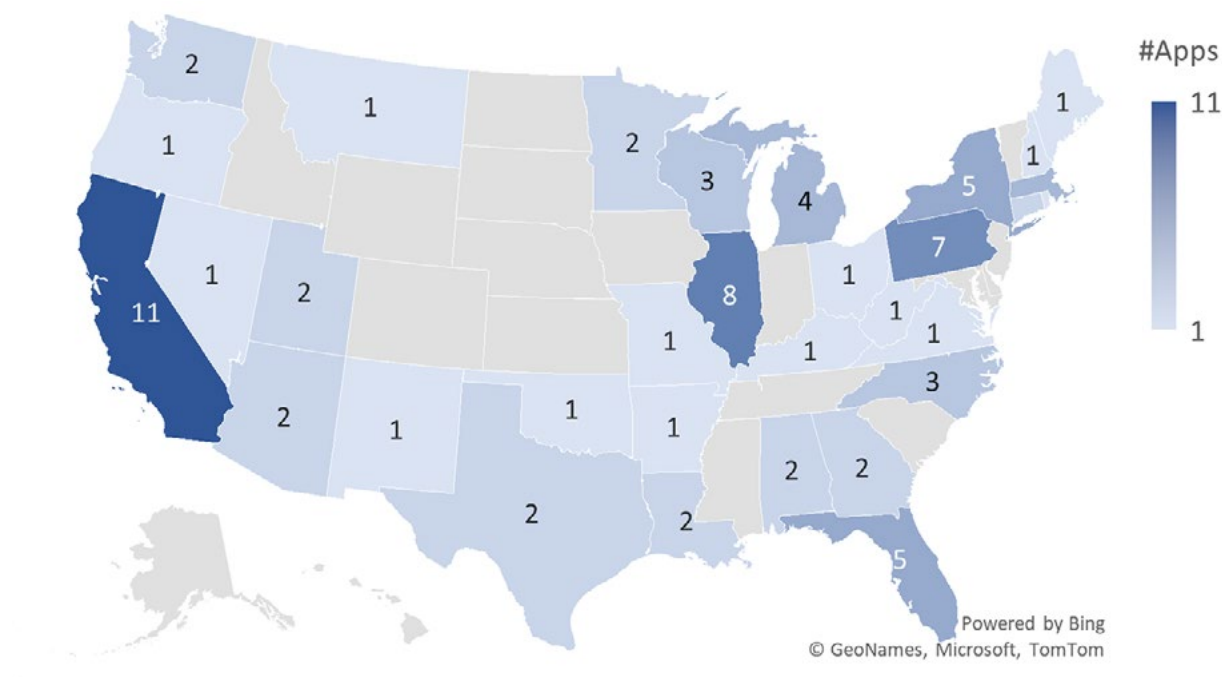
- Being part of the Pisacano Leadership Scholars remains one of the greatest opportunities I have ever had. The ideas and enthusiasm of this group are inspiring and knowing that I will continue to be part of the Pisacano Scholar family after finishing residency reassures me that I will not lose my connection to new ideas, research, and practice updates after (likely) leaving an academic setting. Being part of a group like this pushes me to search for opportunities to make a difference at work and in the community. I look forward to another year as a scholar and the opportunity to be part of such a distinguished group.
- The Pisacano Fellowship has already changed my life and career in numerous ways. Chiefly, by giving me - for lack of a better term - an insanely cool community. While I loved my training at Michigan, I was surrounded by a culture which did not uplift primary care or family medicine. I was routinely encouraged to consider specialty fields. Being surrounded now by a community which uplifts my interests and demonstrates excellence and engagement has made all the difference. I routinely talk with and share ideas with peers in my cohort - future collaborations are blooming.
- The Pisacano scholarship has been a remarkable boon to my family medicine training. I am so grateful to have met incredible individuals in my scholar cohort and the years above, who all provide such wisdom and wealth of individual experience. Each Pisacano email thread contains new speculations and collaborations on how to push forward the frontier of family medicine. Being part of such a group is truly an honor that I do not take lightly.
- Over the past four years, it truly has been an honor to represent the Pisacano Leadership Foundation as a family medicine resident, teacher, researcher, and advocate in the great state of North Carolina. I cannot overstate how much it means to know that such an innovative, compassionate, talented group of family physicians have seen my little corner of the universe and deemed it worthy of such a platform. Your collective support, inspiration, and confidence in my vision have fundamentally altered the course of my career and life. I am forever grateful to be a part of this singular group of people and will spend the rest of my days paying it forward. I remain deeply grateful for the Pisacano Leadership Foundation for recognizing, embracing, and trusting my vision for leadership within the field of Family Medicine. Your support means more than I could possibly express, and I will do everything in my power to continue representing this Foundation as best I can.
- As a Pisacano Scholar, I recognize that I represent the PLF, my mentors, and my community. I pledge to be mindful of this and always hold myself to the highest standards of integrity, professionalism, and service. Thank you for enriching my life by allowing me to be a part of this incredible organization.

# Scholarship Program Updates

In 2021, the ABFM Board of Directors approved increased funding to the Pisacano Leadership Foundation (PLF) to expand the number of scholarships offered from 5 to 10 each year for an initial period of five years. Since then, the Foundation has selected 40 new Pisacano Scholars. The deadline for the 2025 Pisacano Scholarship application is May 1, so we are in the midst of receiving applications and after extensive review by the Foundation Board of Directors, up to 10 new scholars will be chosen at the Foundation Board meeting in August 2025.

We received a total of 83 scholarship applications for 2024, which is similar to the number of applications received the previous few years (average of 82.6/year between 2020-2024). We received applications from 33 different states, representing over 80 medical schools. Each applicant was virtually interviewed by a Pisacano Scholar and then two Foundation Board members reviewed each application, followed by the entire Foundation Board reviewing 22 finalists. The Foundation Board of Directors selected 11 scholars this year. While the Foundation does not require reporting from Pisacano applicants on race/ethnicity or sexual and gender orientation, we have made a commitment to diversity in our selection of new Pisacano Scholars each year.

## Applications per State



## 2024 PISACANO SCHOLARS



**SAMANTHA  
BUSCH**

University of Wisconsin  
School of Medicine and  
Public Health



**CARYSSA  
LIM**

Kaiser Permanente  
Bernard J. Tyson School  
of Medicine



**VIVIANE  
CAHEN**

Oregon Health and Science  
University



**CAROLINE  
MURTAGH**

Stanford University School  
of Medicine



**BREANNA  
CHACHERE**

University of Houston  
College of Medicine



**BHUMIKA  
PATEL**

Western University  
of Health Sciences



**NEIL  
DIXIT**

Medical College of  
Wisconsin



**CLAIRE  
ROMAINE**

ulane University School  
of Medicine



**ELIZABETH  
FLORES**

UCLA David Geffen School  
of Medicine



**PRASANNA  
VANKINA**

University of Minnesota  
Medical School



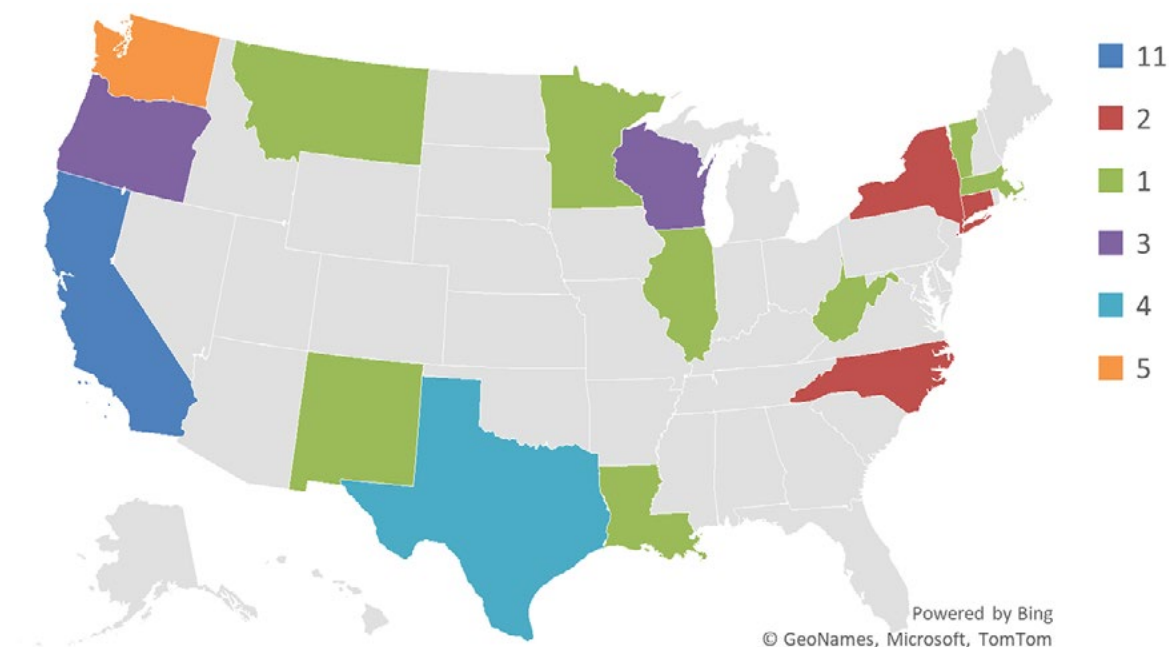
**STEPHEN  
FREEMAN**

Northwestern University  
Feinberg School  
of Medicine



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## Current Pisacano Scholars



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### Match Day:

The 2024 class of Pisacano scholars have also just completed their match in family medicine residency programs, and we are excited to announce their destinations for the next 3 years of training:

**SAMANTHA BUSCH** – UW-Madison

**VIVIANE CAHEN** – Scripps Mercy – Chula Vista

**NEIL DIXIT** – University of Michigan

**ELIZABETH FLORES** – Harbor-UCLA

**STEPHEN FREEMAN** – University of Pennsylvania

**CARYSSA LIM** – USC Keck

**CAROLINE MURTAGH** – Contra Costa

**BHUMIKA PATEL** – University of Connecticut

**CLAIRE ROMAINE** – John Peter Smith

**PRASANNA VANKINA** – Santa Rosa

**BREANNA CHACHERE** – Graduating in 2026.



# Alumni Programs

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The Pisacano Leadership Foundation has been awarding scholarships since 1993 and now counts 151 scholars among its alumni. As you can see in [Table 1], this is a diverse group of community family physicians, educators, and researchers. Together, they foster collaboration, share knowledge, and lead their communities to better health. The practice pattern of the alumni reflects the practice of family physicians across the US. The majority of Pisacano Scholars work in their communities as physicians, medical directors, and directors of large multi-specialty practices. Their leadership skills are evident in the roles they play in their organizations.

As you'll see in [Figure 2], the Pisacano Scholar alumni network spans the country, with graduates practicing in diverse geographic regions, from rural communities to urban academic centers. Alumni serve in a variety of roles, including community-based family physicians, medical directors, educators, researchers, and health policy leaders. While we cannot predict where Scholars will ultimately establish their careers, we remain committed to broadening our outreach to a wider range of medical schools, particularly osteopathic institutions and those with historically low applicant representation in our program. By expanding our recruitment efforts, we aim to ensure that the Pisacano Scholars Leadership Program continues to reflect the full diversity of the future family medicine workforce and reaches those who are most passionate about advancing the specialty in underserved and underrepresented areas.

Figure 2

## Pisacano Scholar Practice Location

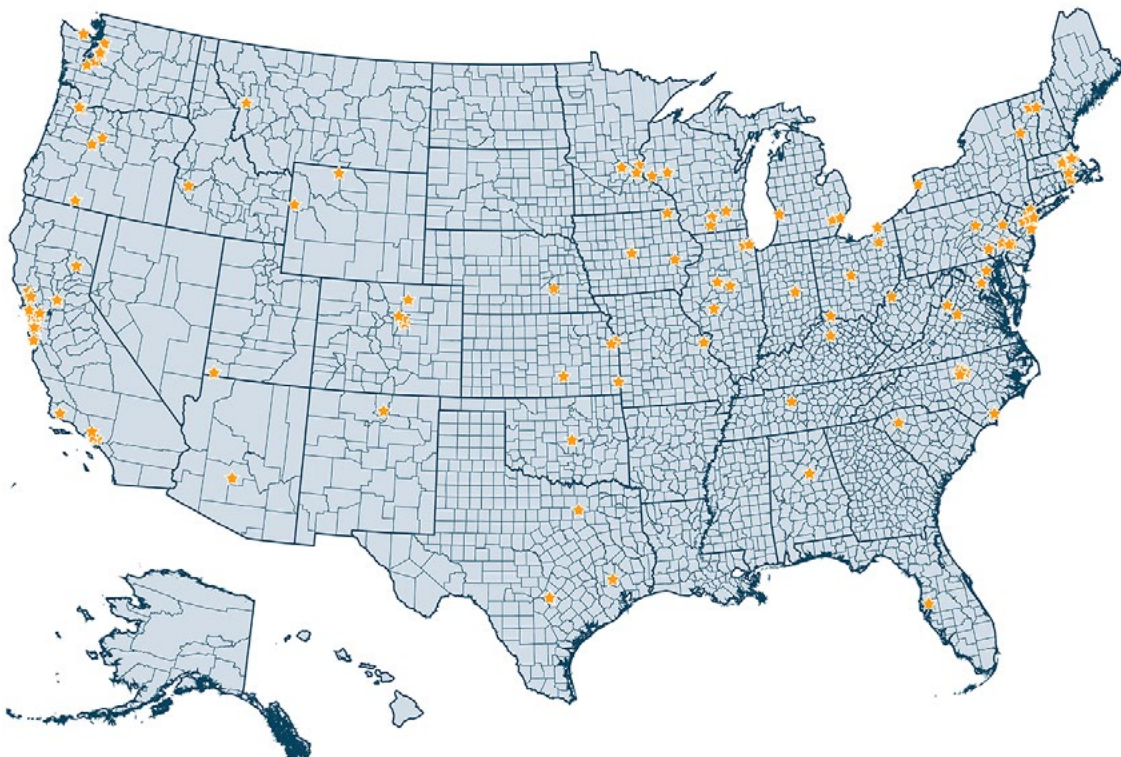


Table 1

Practice Characteristics					
		Pisacano Alumni		Current ABFM Diplomates	
Total		150		106,909	
Direct Patient Care		N = 106		N = 78,995	
		100	94.3%	73,107	92.5%
Outpatient Continuity Care		N = 100		N = 73,047	
		85	85.0%	57,683	79.0%
Principal Practice Site		N = 95		N = 62,233	
	Hospital / health system owned medical practice	15	15.8%	21,742	34.9%
	Independently owned medical practice	18	18.9%	16,038	25.8%
	Managed care / HMO practice	4	4.2%	3,951	6.3%
	Academic health center / faculty practice	19	20.0%	5,408	8.7%
	Federally Qualified Health Center or Look-Alike	26	27.4%	4,680	7.5%
	Rural Health Clinic (federally qualified)	4	4.2%	1,768	2.8%
	Indian Health Service or tribal health clinic			437	0.7%
	Government clinic, Non-Federal	2	2.1%	927	1.5%
	Federal	2	2.1%	2,715	4.4%
	Work site clinic			1,272	2.0%
	Other	5	5.3%	3,295	5.3%
Vulnerable Patients		N = 39		N = 29,429	
	<10%	9	23.1%	10,961	37.2%
	10-49%	14	35.9%	12,411	42.2%
	>50%	16	41.0%	6,057	20.6%
Scope of Practice Score		N = 83		N = 57,082	
	Low (<10)	5	6.0%	11,212	19.6%
	Medium (10-15)	35	42.2%	34,891	61.1%
	High (>15)	43	51.8%	10,979	19.2%
Provides: Adult inpatient medicine		N = 97		N = 71,974	
		31	32.0%	17,598	24.5%
Provides: Delivering babies		N = 97		N = 71,940	
		23	23.7%	4,724	6.6%
Source: ABFM Survey Data - 2017-24 CCQ, 2019-24 PDS, 2016-24 NGS					

The Pisacano Leadership Foundation instituted an Alumni Grant Program in 2015. The purpose of the grant program is to:

- 1) Engage and encourage Pisacano Alums to use their leadership skills to innovate in family medicine to find new processes of health care delivery and/or medical education, improve patient centeredness, promote health equity, and/or expand the family medicine workforce.
- 2) Share innovative ideas and the results (both successes and failures) with each other and with broader audiences in order to continue to build new and better ideas. The applications reviewed by a peer review committee appointed by PLF leadership. Proposals are scored based on the project significance, innovation, approach, and environment.

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## Past recipients and their programs:

### STEVEN LIN

Impact of medical scribes on physician-patient interaction, satisfaction, productivity, and education in a family medicine clinic: the first prospective controlled study

### JENNIFER DEVOE

Social Determinants of Health

### GLENNA MARTIN

Seattle Free Clinic

### LAURA GOTTLIEB

State of the Science: A National Research Meeting on Medical and Social Care Integration

### LARA JIRMANUS

Effect of Immigration Policy Changes on Primary Healthcare Utilization at Two Safety-Net Health Systems in Massachusetts

### KENJI TAYLOR

National Barbershop-Based Hypertension Program Convening

### MARGUERITE DUANE

Fertility Awareness Based Methods for Family Planning

### ANNA FLATTAU

Social Medicine Immersion Month

### CRISTER BRADY

Rural-Track Residency: Innovation in Health Education through Community Advisory Councils

### JENNIFER DEVOE

PRE-work to Determine Implementation support needed for Clinic Transformation (PREDICT)

### NOEMI DOOHAN

Safe Haven Clinic Institute

### ANA COUTINHO

Creating a Community Doula Pipeline Program at an Urban Federally Qualified Health Center

### CHAS SALMEN

Harnessing cross-cultural insights for rural end-of-life care: building capacity in Western Kenya and exploring novel approaches for community-based palliative care



## Annual Symposium

The Pisacano Scholars Annual Symposium was held on November 8-10, 2024, in Greenville, SC. The symposium brought together 23 scholars, 10 alumni, 2 board members, and 3 staff members. Dr. Ben Gilmer, author of *The Other Dr. Gilmer*, was the guest speaker of our reception on Friday, November 8.

Our theme, *Leading from Within: Cultivating Authentic Community Engagement*, was applied and built on the skills learned in our 2023 community organizing skills workshop. The symposium was chaired by PLF Board Chair and Greenville resident, Dr. Saria Saccocio, and facilitated by [Dr. Kirsten Naomi Chapman](#).

Through panel discussions with local community leaders, interactive listening workshops, role playing, and immersive field trips, scholars and alumni:


- ✓ Deepened their understanding of authentic leadership by discovering and developing their own distinct leadership styles.
- ✓ Practiced and enhanced active listening skills to expand their understanding of diverse perspectives.
- ✓ Developed communication skills that foster trust and rapport with community stakeholders through consistent, transparent, and respectful communication.
- ✓ Fostered collaborative learning skills through shared experiences, open dialogue, and idea exchange among Scholars and local community partners.
- ✓ Broadened their understanding of community needs and dynamics and explore diverse perspectives of community engagement strategies.
- ✓ Were empowered to translate practical insights and actionable ideas into meaningful engagement within their own local communities.





In addition to the thematic curricular content, we shared information and encouraged networking through a poster session highlighting projects led by Pisacano Leadership Foundation grant recipients, scholars, and other alumni. Participants were also thrilled to contribute to the community in the sponsorship of a Greenville Community Transit Fare Free Day so that all community members could ride public busses free of charge on November 9.

Feedback from the symposium was overwhelmingly positive, with representative comments and reflections such as:

-  As always, I felt full to over-stuffed on Sunday after a weekend of great conversation with lots of very thoughtful and creative friends (old and new). It's becoming a familiar feeling for me to come back from hanging out with Pisacanos feeling seen and heard, understood, motivated, energized - but also so impressed and excited by the people and ideas that I get to confront my old imposter syndrome. I feel lucky to get to feel that.



**Fare Free Day – Greenville, SC**  
(Sponsored by the Pisacano Leadership Foundation)



-  I will remind myself to analyze what underlying data/presumptions others are using to shape their beliefs and actions when trying to negotiate disagreements in leadership settings. I will utilize the difficult conversation role-playing to prepare for difficult conversations.
-  I have many partners around me who care about the world and their communities, and that gives me hope.
-  The time spent talking with Pisacano scholars/alums was invaluable and enjoyable. I found it most helpful to listen to stories from more experienced physicians to learn how they have navigated challenges in their careers. Their stories were actually more helpful than their more “philosophical” thoughts on leadership.
-  This was one of the most organized and helpful meetings I have been to. Kirsten Naomi’s facilitation and practical insights were extremely valuable.
-  I was truly impressed by the symposium this year. I felt like we were able to get into, and for a brief moment, become part of the Greenville community.
-  I used to think always standing up for what was right mattered more than doing what would create forward movement, and now I think finding real mutual ground can require holding back sometimes.
-  I used to think conflict is scary and now I think conflict is necessary.
-  I used to think conflict is bad, and now I think conflict can signify people care and can lead to growth.
-  I used to think multitasking and half-assed listening was more efficient, and now I know I need dedicated time, space, and support.
-  I used to think my values were consistent, and now I think they’re changing.
-  I used to think there was one right way and now I think there is more than one right way.
-  I used to think I was aware of understanding perspectives on situations and now I think I actually am just in an echo chamber.
-  I used to think I had the best idea, and now I think the best answers come from others.
-  I used to think people in higher education know what a PCP is and had one, and now I think we still have work to do about who we are.

# Policy Updates

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Over the last year, the Foundation has revised its bylaws to align with its mission and priorities. The Foundation Board approved the following amendments at its July 2024:

- ✓ Creation of a Pisacano Scholar Graduate Director seat on the Board of Directors (younger scholar physician who recently graduated from medical school or residency; 1-year term). This position could be a pathway to serve later as an At-Large Director.
  - ✓ Creation of an emeritus director seat on the Board of Directors. This would be an experienced member of the Board eligible for election for up to three 1-year terms and not subject to the at-large term limits, after service as an At-Large Director.
  - ✓ Requirement that at least one At-Large Director who is a Pisacano Scholar alum and has been out of medical school for at least 20 years.
  - ✓ Proposal to impose a term limit of service of six (6) years as an At-Large Director. This would require a phased in implementation. The proposal includes setting a date of implementation.
  - ✓ Creation of a nominating committee to recruit for the Board of Directors.
  - ✓ Notice of annual meetings reduced to 30 days rather than 60 days.
  - ✓ Treasurer function will be rolled into the new officer position of Vice Chair.
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In February, the Board approved the election of Drs. Andrea Banuelos Mota and Seneca Harberger to its Board of Directors. Dr. Edward Bope (27 years) and Dr. David O’Gurek (10 years) rotated off the Board.



**ANDREA BANUELOS MOTA, MD, MPH**  
Northridge, CA



**SENECA HARBERGER, MD**  
Danville, PA



# Looking Ahead

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We welcomed our first osteopathic medical student as a 2024 scholar, and we look forward to continued outreach to osteopathic and allopathic students in the future. We maintain our emphasis on outreach to a diverse applicant pool and continual efforts to minimize bias in our scholar selection process.

Plans are underway for the 2025 Annual Symposium in Denver, CO on November 14-16, 2025. The focus is refining presentation skills for varied audiences and our 2025 symposium planning committee is co-chaired by Pisacano alumnus Dr. Mimi Doohan and Dr. Lauren Hughes.

Three current scholars have proposed a novel workshop theme for our 2026 symposium: *Indigenizing Leadership Practices* and will work on operationalizing this over the next year with Dr. Endres.

After many years of large group dinners on the Friday evening of the symposium, we trialed assigned small group dinners to encourage networking between current scholars and alumni and board members. This was well-received by all and we plan to continue this in future years. In an effort to further increase alumni engagement and attendance, we are piloting a “class reunion” effort this year in which we will extend special invitations and offer two nights of sponsored hotel accommodations to alumni in the classes of 2020, 2015, 2010, 2005, 2000, and 1995. In subsequent years, each class will receive this invitation and sponsorship every fifth year.

## Appendices

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- ✓ Scholar demographic and geographic data tables
- ✓ Comments from scholars and alumni
- ✓ 2024 Posters



## Demographic Information

		Pisacano Alumni		Current ABFM Diplomates	
		N	Percent	N	Percent
Total		150		106,909	
Age (Apr 01 2025)	Under 40	41	27.3%	27,957	26.2%
	40-49	46	30.7%	28,278	26.5%
	50-59	52	34.7%	26,794	25.1%
	60 or Older	11	7.3%	23,880	22.3%
Gender	Female	84	56.0%	51,947	48.6%
	Male	65	43.3%	54,565	51.0%
	Other / prefer not to answer	1	0.7%	397	0.4%
Medical Background	DO, Non-IMG			16,598	15.7%
	MD, IMG			25,660	24.2%
	MD, Non-IMG	150	100.0%	63,614	60.1%
Race/Ethnicity: White		121	81.8%	69,207	64.7%
Race/Ethnicity: Asian		16	10.8%	20,343	19.0%
Race/Ethnicity: Hispanic/Latinx		7	4.7%	7,901	7.4%
Race/Ethnicity: Black or African American		4	2.7%	7,003	6.6%
Race/Ethnicity: Middle Eastern or North African		2	1.4%	1,354	1.3%
Race/Ethnicity: American Indian or Alaska Native		1	0.7%	894	0.8%
Race/Ethnicity: Native Hawaiian or other Pacific Islander		0	0.0%	470	0.4%
Race/Ethnicity: Prefer not to answer		1	0.7%	1,511	1.4%

Source: ABFM Administrative Data

## Geographic Characteristics

		Pisacano Alumni		Current ABFM Diplomates	
Total		150		106,909	
U.S. Census Region		N = 132		N = 88,054	
	Midwest	29	22.0%	21,040	23.9%
	Northeast	25	18.9%	11,903	13.5%
	South	22	16.7%	30,032	34.1%
	West	54	40.9%	23,922	27.2%
	Overseas Military			124	0.1%
	Territories and Associated			229	0.3%
	Not U.S.	2	1.5%	804	0.9%
Rurality (RUCA)		N = 130		N = 87,042	
	Urban	112	86.2%	74,071	85.1%
	Large Rural	6	4.6%	6,980	8.0%
	Small Rural	9	6.9%	4,187	4.8%
	Isolated	3	2.3%	1,804	2.1%
Source: ABFM Administrative Data					
Race/Ethnicity: American Indian or Alaska Native		1	0.7%	894	0.8%
Race/Ethnicity: Native Hawaiian or other Pacific Islander		0	0.0%	470	0.4%
Race/Ethnicity: Prefer not to answer		1	0.7%	1,511	1.4%

Source: ABFM Administrative Data

# Testimonials from Pisacano Scholars

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The Pisacano Fellowship has already changed my life and career in numerous ways. Chiefly, by giving me - for lack of a better term - an insanely cool community. While I loved my training at Michigan, I was surrounded by a culture which did not uplift primary care or family medicine. I was routinely encouraged to consider specialty fields. Being surrounded now by a community which uplifts my interests and demonstrates excellence and engagement has made all the difference. I routinely talk with and share ideas with peers in my cohort - future collaborations are blooming.



My Pisacano scholarship funding has helped reduce my educational debt and enhanced my resident educational opportunities while setting a firm financial foundation that will allow me to better work with and advocate for urban underserved and refugee communities in the future. I look forward to continuing my work toward this goal in the coming year of residency and to seeing many of you at the Pisacano Leadership Foundation conference this fall.



Thank you so much, once again, for the honor of being a Pisacano Scholar and for your continued welcome to this wonderful community. I hope to continue making you proud throughout my career.



I am grateful for the opportunities and support I have received through the Pisacano Scholarship. I am excited to continue to grow and be involved in more leadership activities in the future.



Being part of the Pisacano Leadership Scholars remains one of the greatest opportunities I have ever had. The ideas and enthusiasm of this group are inspiring and knowing that I will continue to be part of the Pisacano Scholar family after finishing residency reassures me that I will not lose my connection to new ideas, research, and practice updates after (likely) leaving an academic setting. Being part of a group like this pushes me to search for opportunities to make a difference at work and in the community. I look forward to another year as a scholar and the opportunity to be part of such a distinguished group.





The Pisacano Leadership Foundation's scholarship support has not only connected me to mentors (at the annual conference and in my local area) who have supported me in this growth journey, but also given me access to additional scholarly materials and experiences to develop my clinical and leadership skills. I express my gratitude to the Pisacano Leadership Foundation for their faith in me upon selection and for their life-changing support since.



Thank you SO much for helping me along in my journey.



I continue to be grateful for the support provided by the Pisacano Scholars program and look forward to continuing in the program throughout residency.



Thank you so much for your continued support. It has been an honor to be connected to this community.



The Pisacano scholarship has been a remarkable boon to my family medicine training. I am so grateful to have met incredible individuals in my scholar cohort and the years above, who all provide such wisdom and wealth of individual experience. Each Pisacano email thread contains new speculations and collaborations on how to push forward the frontier of family medicine. Being part of such a group is truly an honor that I do not take lightly.



I would like to express my deepest gratitude for the receipt of this scholarship and for inclusion in this cohort of radical thinkers and dreamers.



To begin my annual update, I would like to start by thanking the Board for bringing me into the Pisacano family. In the limited time I have had with other scholars and alumni, I have already felt such a wonderful welcome into the Family Medicine community. Conversations and relationships that began at the annual meeting—and discussion that continued since—have made this last year a much less stressful process than it could have been.





This scholarship has had an immense impact both on me and on my career. Because of all the past scholars I met in San Francisco, Mrs. Jane Ireland, Mr. Bob Cattoi, and the Pisacano Board of Directors, I learned so much about the many opportunities available to me as a Family Medicine Resident and Physician. Furthermore, I feel like I've gained invaluable mentors who are always available to answer questions I may have about this career and community involvement. With my career, it has already opened doors that I thought were impossible for me. In every residency interview, I was asked about the Pisacano Leadership Foundation. Program directors were eager to learn about the symposium and resources offered to us scholars. Although I am still quite shocked at being selected as a scholar last year, I was always eager to answer their questions and express my gratitude for the ABFM and PLF for giving me this opportunity. Receiving this scholarship has truly been an honor, and I will continue to uphold the principles and values of the foundation for years to come.



So far, receiving a Pisacano award has had a significant impact on my overall outlook on family medicine. I continue to feel strongly affirmed in my decision to become a family physician. I have also felt privileged to have the opportunity to connect with other Pisacano awardees and be a part of such an amazing community of dedicated students and professionals. Thank you once again for the tremendous honor and privilege of membership in the Pisacano community.



The first year of being a part of the Pisacano family has been incredibly exciting and rewarding. I feel so grateful to be a part of this community. The Annual Symposium in San Francisco was so stimulating and was truly a perfect introduction to the Foundation and its values. I have also been grateful for the support and mentorship of prior Scholars, particularly Seth Koss MD and Jill Endres, MD. I'm looking forward to bringing insights and advancements from Pisacano to my own residency program, and to practice my advocacy skills in a state (Idaho) whose policies do not always align with equity and access.



Pisacano has been instrumental in providing me the resources and support to feel I have the ability to make a difference and that working in clinical practice is something I can do despite its many challenges. Helping to organize the Symposium this past year was incredibly rewarding as I had the opportunity to introduce the Pisacano family to some close friends and organizers and see how we can continue to be visionaries and changemakers in our field when we put our minds together and think outside the box.





I am incredibly grateful for the Pisacano family and really enjoy staying connected through our list-serve. It was such an amazing experience to join at the conference this past year and I sincerely appreciate being part of such an incredible community. I look forward to my continued involvement as I start my career this summer.



Over the past four years, it truly has been an honor to represent the Pisacano Leadership Foundation as a family medicine resident, teacher, researcher, and advocate in the great state of North Carolina. I cannot overstate how much it means to know that such an innovative, compassionate, talented group of family physicians have seen my little corner of the universe and deemed it worthy of such a platform. Your collective support, inspiration, and confidence in my vision have fundamentally altered the course of my career and life. I am forever grateful to be a part of this singular group of people and will spend the rest of my days paying it forward. I remain deeply grateful for the Pisacano Leadership Foundation for recognizing, embracing, and trusting my vision for leadership within the field of Family Medicine. Your support means more than I could possibly express, and I will do everything in my power to continue representing this Foundation as best I can.



I also very much look forward to our training on the east coast in the coming year, one thing with that community meaningfully, and continuing to bring our network of Pisacanos closer in leadership and service. With preparations for board examinations, senioring of services, and applications to fellowships with the ABFM CPV and White House's HHS ahead of me, there is certainly a lot of learning and framing of that knowledge to do in hopes to hit the ground running in Washington D.C come 2025. I look forward to continuing to collaborate with and dream alongside you all in our mutual pursuits in family medicine.



I feel immensely blessed for the opportunity to have been, and continue to be, a Pisacano Scholar... Being a Pisacano scholar fills me with immense pride, and I consistently encourage medical students to apply for this prestigious scholarship. The network of scholars has provided me with incredible support and valuable friendships. From prompt responses to clinical inquiries to sharing job opportunities, the Pisacano community comprises professionals of the highest caliber... The impact of the Pisacano scholarship on my educational journey is immeasurable. I appreciate the support and opportunities it has provided, and I remain committed to representing the Pisacano community with pride. I am determined to continue shaping the future of family medicine by further developing my leadership skills within my community, residency program, and at the state and national level. Thank you for your unwavering support, and I look forward to making the Pisacano community proud.





As I come to the close of my second year of family medicine residency, I am writing with gratitude for the ongoing support of the Pisacano Foundation. It was a real pleasure to attend this past year's conference in San Francisco, and to gather with Pisacanos. It was revitalizing to dig into the core of what motivates us all to pursue our work, and I saw that the conference fortified our collective commitment to continuously transform family medicine... I feel extremely fortunate that the Pisacano Leadership Foundation is invested in my work, my growth, and my future. Your support feels like a hand at my back, encouraging me to train well, complete residency, and continue into my career as an attending and advocate for my communities.



I am excited to dedicate my life to providing quality, low barrier care to rural West Virginia. This scholarship has been instrumental in allowing me to achieve that dream. I am extremely grateful for all the opportunities the Pisacano has afforded me and I would be honored to continue to carry the name of a Pisacano scholar.



Moving to a new region farther away from my family and friends has been difficult. The funds provided by the Pisacano Leadership Foundation made the move much less stressful and eased the financial burden of the gap between medical school and residency before I had income and before my partner found work in his field. I'm grateful for the foundation's support and look forward to seeing you again at the next symposium!



The Annual PLF conference this year was enjoyable and informative, as it has been in the past. The presentations provided dynamic discussions as well as skill building which I really appreciated. The conference continues to be a morale boost in the depths of residency, where I feel more inspired about how to be both a leader for change at the systems level and an effective provider at the individual level. Additionally, I always leave with topics to discuss with colleagues when I return, and ideas for ways to improve our residency and my continuity clinic.

Becoming a compassionate, competent beginning family medicine physician is my main focus in the coming year. I feel supported to transition into this role with my residency program, the Pisacano scholar network, and the Pisacano Leadership Foundation.



I want to extend my sincerest appreciation to the Board of Directors for your support and investment in my professional development. Your generosity has also allowed me to both explore my academic interests and to give back to my community.





Thanks to the generous funding of the scholarship, I was also able to attend the annual Pisacano conference in San Francisco this past year, which was a wonderful opportunity to connect with fellow scholars and discuss how we can bring the principles of community organizing into our physician activism work. Thank you again for your investment in my learning and progress as a family physician.



It is a continued honor to be part of the Pisacano Scholar's community and be amongst a group of such dedicated Family Physicians. Being a Family Physician is an incredible privilege and I have worked diligently in my first year to serve my patients and community to the best of my abilities... I think that having the title of a Pisacano Scholar has given my voice a sense of validity and standing in places that those so early in their careers may not always get.



As a Pisacano Scholar, I recognize that I represent the PLF, my mentors, and my community. I pledge to be mindful of this and always hold myself to the highest standards of integrity, professionalism, and service. Thank you for enriching my life by allowing me to be a part of this incredible organization.



Thank you for reviewing this update letter and for the Pisacano Leadership Foundation's generosity in supporting the scholarship. With the recent loss of Virginia Leigh Pisacano, the foundation's work in upholding the Pisacano legacy is more important than ever and I am privileged to be a part of this work.



The Pisacano scholarship has had a profound impact on my career, most prominently through the community I have built with other scholars. Some have quickly become close friends, and I know that they will continue to inspire and strengthen me through the difficult years ahead.



Thank you for your generous and continued support of my professional development as I aspire to become a leader in the field of family medicine. I look forward to participating in the Pisacano community for many years to come!







The scholarship has already had an effect on my career. When I went to my first conference in 2022, I felt like for the first time I had found a community in Family Medicine where I was accepted and where speaking up was welcome. Financially, the scholarship has allowed me to invest in focused training in family medicine that I wouldn't otherwise have the opportunity to engage in. Thank you for all that the Pisacano Scholarship has given me.



Going to the Pisacano Symposium in San Francisco was such a wonderful experience, and I felt closer to our Pisacano family. I came back refreshed, re-inspired, and humbled to be a part of this group of physicians. Looking forward to future meetings and building on our relationships.





## Precision implementation: Developing and validating predictive models of information technology tool adoption

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<sup>1</sup>Oregon Health & Science University; <sup>2</sup>OCHIN, Inc.

**OCHIN**

### BACKGROUND

- Implementation support strategies can help clinical practices with adoption and maintenance of evidence-based guidelines.
- Which clinics will benefit most from a particular implementation strategy and with how much assistance is unknown.
- New methods are needed to predict which practices will implement targeted changes with less vs. more / different kinds of support.

### STUDY OBJECTIVES

- To develop and validate predictive models that estimate the likelihood of adoption and sustained use of an implementation strategy [electronic health record (EHR)-related tool].

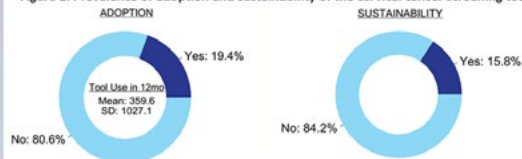
### SETTING

- EHR data from 351 community health centers in the OCHIN research network from 5/1/17 to 6/30/19 (1 year pre-and post-EHR tool implementation).

### MEASURES

- Tool adoption: any instance of tool use within 12 months of rollout.
- Tool sustainability:  $\geq 1$  tool use in the last 4 months of the 12-month follow-up period.
- Cervical Cancer screening and follow-up EHR tool tested:
  - Designed to improve documentation of results
  - Tailors care decision based on results
  - Generate lists of overdue patients

**Figure 1: Prevalence of adoption and sustainability of the cervical cancer screening tool**



**Table 1: Selected clinic characteristics by adoption or sustainability of the tool**

	ADOPTION		SUSTAINABILITY	
	No Mean (SD) / %	Yes Mean (SD) / %	No Mean (SD) / %	Yes Mean (SD) / %
Total # of clinics	250	60	261	49
Years in EHR	4.5 (2.6)	5.0 (2.7)	4.5 (2.6)	5.1 (2.9)
Clinic in state that expanded Medicaid	90.0	90.0	89.3	93.9
Urban Clinic	91.2	96.7	91.2	98.0
Median patient age	30 (15)	36 (10)	31 (15)	36 (9)
% Hispanic patients	28.5 (26.1)	19.7 (20.1)	28.0 (26.0)	20.8 (20.1)
% Non-white patients	27.4 (24.6)	33.9 (30.5)	28.3 (25.5)	31.1 (28.4)
% of patients with 2+ chronic conditions	32.2 (22.1)	38.8 (12.9)	32.3 (21.9)	39.8 (12.2)
Total # of visits	16086 (22781)	384651 (517817)	18126 (25901)	456524 (548080)
% of visits that were ambulatory	61.2 (21.1)	45.5 (15.0)	60.8 (21.0)	43.9 (14.0)

These characteristics are a subset of variables that were included in predictive modeling.

**Table 2: Model performance and predictive variables**

	ADOPTION	SUSTAINABILITY
Model fit AUC, (95% CI)	0.891 (0.801, 0.981)	0.954 (0.889, 1.000)
<b>Predictive variables</b>	<b>Interpretation</b>	<b>Interpretation</b>
Urban clinic	Higher OR	Higher OR
Years in EHR	Higher OR	Higher OR
% female	Higher OR	Higher OR
% Non-white	Higher OR	Higher OR
% Spanish speaking patients	Lower OR	Lower OR
# visits	Higher OR	Higher OR
% uninsured at visit	Higher OR	Higher OR

These characteristics are a subset of variables were predictive.

### METHODOLOGY

- LASSO penalized logistic regression.
- Sample divided into a training sample (70%) and a testing sample (30%).
- Variables/domains in models: type of clinics, geographic variable, # and type of departments/clinic, patient panel, patient panel demographic characteristics, type and # of encounters, payer distribution, provider type, # of encounters with eligibility specialist.
- Predictive performance assessed using area under the ROC curve (AUC): ability to distinguish who used the tool from those who did not.

### RESULTS

- Models for adoption and sustainability show high classification accuracy.
- Out of the 23 variables entered in the model, 18 predicted adoption and 19 predicted sustainability.
- Number of visits was the strongest predictor of both adoption and sustainability.

### LIMITATIONS

- Not tested on other types of HIT tools.
- Limited to one EHR type and CHC settings.

### CONCLUSIONS

- Such models could be applied in future trials to predict which implementation strategies might benefit a clinic with certain characteristics.


### FUNDING/ CONTACT

- Jen DeVoe – [devoej@ohsu.edu](mailto:devoej@ohsu.edu)
- We are grateful to the Pisacano Leadership Foundation for funding this project.

## 2024 Posters

Precision implementation: Developing and validating predictive models for information technology tool adoption

Jennifer DeVoe, MD, DPhil



# PRIORITIZING INDIGENOUS BIRTHING & POSTPARTUM EXPERIENCES IN FAMILY MEDICINE EDUCATION

Cultural Safety Trainings (CST) provided by Healthy Mothers Healthy Babies-MT for the staff, faculty, and resident learners of The Family Medicine Residency of Western Montana. Proposed expansion of CST to the WWAMI Family Medicine Residency Network

## FAMILY MEDICINE RESIDENCY BACKGROUND

The Family Medicine Residency of Western Montana is a 3-year family medicine program sponsored by The University of Montana and affiliated with the University of Washington Family Medicine Residency Network.

We exist to provide superior, comprehensive education in Family Medicine. We are committed to developing family physicians who are compassionate, clinically competent, and motivated to serve patients and communities in the rural and underserved areas of Montana.

## HEALTHY MOTHERS, HEALTHY BABIES-MT BACKGROUND

Healthy Mothers, Healthy Babies-MT (HMH-B) was created based off of the national model to support families in Montana. HMH-B-MT mission is to improve the health, safety, and well-being of Montana families by supporting mothers and babies, age zero to three.

Healthy Mothers, Healthy Babies' newest program- Native American Initiatives (NAI) operates with the goal to continue to build relationships with tribal stakeholders to form strong collaborative partnerships and alliances to support Native mothers, pregnant people, and babies, from pregnancy to age three.

## PROJECT DESCRIPTION

Perinatal care profoundly influences postpartum healing and outcomes for the birthing person, baby, and their family/community. Recently, a groundbreaking series of Cultural Training sessions supported the Family Medicine Residency of Western Montana (FMWRM). Such indigenous-focused perinatal training had never been conducted within a Family Medicine Residency Program in the United States before. These Cultural Safety Trainings were developed based on Dr. Amy Stiffarm's dissertation, "Cultural Safety Practices for Working with Indigenous Birth Givers in Montana." The curriculum covered various topics such as the Montana's access to care (including reservations and birthing hospitals), American Indian health policies, indigenous doula's, indigenous social determinants of health and indigenous perinatal mental health.

The program's distinctive structure featured indigenous-led presenter, organizer/program liaison, and evaluator. A total of 8 hours of training were delivered. The sessions incorporated indigenous stories, experiences, and research to enrich the training materials and discussions. A diverse audience of 16 staff and faculty members, along with 15 resident learners, and new trainees, participated in these sessions, marking a significant step towards deeper understanding of indigenous health to better serve their patients.

## APPROACH/METHODS

This section explores indigenous-led approaches to evaluation in perinatal cultural training, emphasizing the inclusion of indigenous values and goals. It highlights the use of unbiased language, reflective response prompts, consideration of historical and modern impacts, and the invaluable guidance of a local elder with extensive experience in Tribal Health programming.

This groundbreaking training initiative involves assessing and sharing information based on pre-session surveys to gauge participants' knowledge levels, areas of interest, and familiarity with systemic levels of influence.

Faculty and staff were the first group to receive the training and their feedback and questions helped guide the content and discussion prompts during the resident/learner sessions.

Survey Content:

- Likert scale of familiarity
- Likert scale of comfortability
- Reflective open-ended questions
- Feedback sections for presentation topics and presenter
- Section for questions or clarifications

## CULTURAL SAFETY TOOLKIT

Please reach out to Kiley Adams (kiley.a.adams@gmail.com) to receive a free Cultural Safety Toolkit

### Collective work

Dr. Kiley Adams, Family Medicine Residency of Western Montana, Drew Babcock, American Indian Outreach Coordinator, Family Medicine Residency of Western Montana, Chelsea Bellon, Dr. Amy Stiffarm, Native American Initiatives Director, Healthy Mothers Healthy Babies MT, Mary Ellen Lafromboise, Aniskapi Pikuni Elder



### IMPACT/DATA

Employing pre- and post-surveys enhanced our insight into how attendees comprehended the presentation content. Evaluating Dr. Stiffarm's presentation style and her approach to addressing challenging topics necessitated a focus on safety and inclusivity, ensuring all participants felt respected and engaged throughout the sessions.

Faculty and staff expressed that incorporating elders into the training and discussions enriched both the content and the overall experience



Participant's responses for pre-sessions. Question: How familiar/comfortable are you with understanding "cultural safety"?

### SURVEY TAKEAWAYS

Utilizing pre and post surveys supported the understanding of how the attendees understood the presentation content.

"Dr. Stiffarm was an excellent presenter who seamlessly presented content that was both challenging to hear but also empowering at the same time. She led us through the session with such skill and grace. We are so fortunate to have had this presentation!"-Resident or Staff

"We (non-indigenous people) have a lot of work to do to right the wrongs that have been done to indigenous people and fight the systemic injustices that exist, but I'm so thankful to be educated on this topic and want to be an ally!"-Resident learner



Elder, Mary Ellen Lafromboise setting the tone and intention for the faculty and staff training.

Dr. Kiley Adams and team applied for a \$100,000 Macy Foundation Catalyst Grant to expand CST to the entire WWAMI FMRN. If granted, 10 tribal affiliates will be compensated for their work implementing CST with local family medicine residency partners.

### FUTURE

## 2024 Posters

Prioritizing indigenous birthing & postpartum experiences in family medicine education

Kiley Adams, MD



## Advancing Health Professional Understanding of Climate Change and Cardiovascular Disease

Alice Moon, MD<sup>1</sup>, Vennela Avula<sup>2</sup> and Ahmed Sayed, MD<sup>3</sup>, Shady Abohashem, MD<sup>4</sup>, and Bhargavi Chekuri, MD<sup>5</sup>

<sup>1</sup> case study co-writer, poster author; University of Oklahoma College of Medicine <sup>2</sup> case study co-writer, Johns Hopkins School of Medicine <sup>3</sup> case study co-writer, Ain Shams University <sup>4</sup> faculty advisor; Harvard Medical School <sup>5</sup> reviewer; University of Colorado



### Learning Objectives

1. Identify Climate Resources for Health Education (CRHE) as a resource for climate health education and curricula
2. Locate case study on climate change and primary prevention of cardiovascular (CV) disease
3. Appreciate the impact of climate change on CV disease with special attention to population over 65 years of age
4. Describe strategies for health professionals and communities to manage climate-related risk factors of CV and pulmonary illness

### Case Study

#### Introduction

CRHE is a free, publicly accessible repository with evidence-based resources to accelerate the incorporation of climate change and planetary health information into health educational curricula as part of a global student health professional-led initiative

#### Primary Prevention of Cardiac Disease



#### Case Study Goal

Describe the clinical presentation, pathophysiology, and treatment options related to coronary artery disease and heart failure while incorporating climate-related learning objectives.



#### Excerpt of Clinical Vignette

Mr. Chin Lee is a 78-year-old male presenting to the ED with difficulty breathing for three days. As the medical student on this week's rotation, you start taking a history from Mr. Lee.



### Impact of Climate Change on Cardiovascular Disease

#### Heat-mediated

- ▲ Acute exposure can lead to volume depletion and CV or renal stress
- ▲ Chronic exposure can exacerbate systemic inflammation, worsening dyslipidemia, CAD, and CKD. Damage to vascular endothelium via oxidative stress mechanism.
- ▲ Heat worsens air quality and pollution, indirectly leading to adverse CV and respiratory outcomes
- ▲ Extreme heat is associated with morbidity and mortality, while mild increases in temperature and increased temperature variability are also associated with poor health outcomes

#### Air quality-mediated

- ✦ Strong association between acute exposure to high levels of particulate matter and acute CV events
- ✦ Linked to increased risk of hyperlipidemia, obesity, diabetes and cardiometabolic disease
- ✦ Short-term exposure acutely raises blood pressure
- ✦ Long-term exposure leads to the progression of atherosclerosis

#### Cold-mediated

- ✦ Triggers increased sympathetic activity, which can exacerbate preexisting CV conditions and cause CV events

### Selected Strategies for Health Professionals

- Patient education
  - how weather conditions affect health
  - how to adjust medications as needed (e.g. reduction in dose of diuretics on hot days)
  - how to interpret air quality measures
  - how to find available resources
- Letters of medical necessity for items such as air conditioning or air purifiers
  - to housing authorities
  - to Flexible Spending Accounts

### IPCC Framework for Climate Resilience



### Selected Strategies for Communities

1. Global effort to transition to renewable energy sources
2. Global effort to distribute cleaner fuels for cooking that minimize indoor pollution and consequent health-related risks
3. Facilitating the use of alternative transportation methods that minimize air pollution (e.g. public transportation, more walkable landscapes)
4. Constructing housing at a distance from highways
5. Heat action plans tailored to local communities
6. Access to public cooling spaces

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## 2024 Posters

Advancing health professional understanding of  
climate change and cardiovascular disease

Alice Moon, MD



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