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The Division of Geriatric Medicine’s mission is to enhance the health of older adults by providing superb clinical care, by training others to do the same, and by conducting research to ensure that tomorrow’s care is better than today’s.

The Division of Geriatric Medicine’s mission is to enhance the health of older adults by providing superb clinical care, by training others to do the same, and by conducting research to ensure that tomorrow’s care is better than today’s.

Given the national declines in funding, we are focusing more than ever on innovation as our primary strategy for achieving our goals. Our efforts in FY19 reflect this vision. Clinically, the Division grew our practice by 5% and integrated our ambulatory sites. We launched new programs in Chronic Care Management and Transitional Care Management, utilizing Medicare funding to create the infrastructure needed to improve care of our patients with multiple comorbidity. We enhanced our shared savings program with UPMC’s Health Plan: we added patients, exceeded quality benchmarks, and saved >$550,000.
Educationally, we again filled our fellowship and T32 slots with excellent trainees, including two subspecialty fellows graduating, one in geriatric palliative care and one in geriatric cardiology. Another fellow completed her T32 masters degree in Medical Education, during which she created and evaluated an Interprofessional Dedicated Education Unit (IPDEU), which is now embedded on UPMC Presbyterian’s Neurosurgery ward. Substantial enhancements occurred at the residency level, and we also expanded and enhanced our required interdisciplinary medical school training course which now also comprises >200 students from 10 healthcare disciplines. The course is led by Dr. Rollin Wright who also published her innovative hospitalist and dementia teaching modules in *Annals of Internal Medicine Online*. Finally, our Pepper Center provided a university-wide leadership training program for junior faculty members in aging.

In research, we continued our collaboration with Dr. Toren Finkel and the Aging Institute, expanded our NIH-funded Center of Excellence in Long-Term Care Research, renewed our T32 in Gerontology, and submitted the renewal of our NIH Center of Excellence in Aging (Pepper). We also recruited 2 new faculty (Drs. Makaroun, Rizzo). Finally, faculty members won research awards and continued to serve on editorial boards as well as advisory boards of NIH, CDC, ACIP, AGS, and NOF, and as consultants to CMS, HEDIS and NQF.
Department of Medicine  
Division of Geriatric Medicine

**FACULTY**

**Neil M. Resnick, MD**  
Chief, Division of Geriatric Medicine  
Thomas Detre Professor of Medicine  
Associate Director, Aging Institute  
Director, Hartford Center of Excellence in Geriatrics

**Namita S. Ahuja-Yende, MD**  
Clinical Assistant Professor of Medicine  
Medical Director, UPMC Heritage Shadyside Nursing Center  
Medical Director, UPMC Health Plan I-SNP Program

**Becky D. Clarkson, PhD**  
Research Instructor in Medicine

**Daniel E. Forman, MD**  
Professor of Medicine  
Chair, Section of Geriatric Cardiology

**Amelia S. Gennari, MD**  
Associate Professor of Medicine

**Susan L. Greenspan, MD**  
Professor of Medicine  
Director, Osteoporosis Prevention and Treatment Center

**Aditi U. Gurkar, PhD**  
Assistant Professor of Medicine

**Steven M. Handler, MD, PhD**  
Associate Professor of Medicine, Biomedical Informatics, and Clinical & Translational Research  
Associate Professor of RAND-University of Pittsburgh Health Institute (RUPHI)  
Core Faculty, Center for Critical Care Nephrology  
Director of Geriatric Telemedicine Programs  
Chief Medical Informatics Officer (CMIO), UPMC Community Provider Services

**Joseph T. Hanlon, PharmD, MS**  
Professor of Medicine

**Shuja Hassan, MD**  
Assistant Professor of Medicine  
Medical Director, UPMC Canterbury Place

**Mary P. Kotlarczyk, PhD**  
Research Assistant Professor of Medicine  
Associate Director, Osteoporosis Prevention and Treatment Center

**Elizabeth Metrovich, DO**  
Clinical Assistant Professor of Medicine

**David A. Nace, MD, MPH**  
Associate Professor of Medicine  
Director of Long Term Care & Flu Programs, University of Pittsburgh Institute on Aging, Medical Director

**Neelesh K. Nadkarni, MD, PhD**  
Assistant Professor of Medicine

**John Naumovski, MD**  
Clinical Assistant Professor of Medicine

**Anne B. Newman, MD, MPH**  
Professor of Medicine, Secondary Appointment

**Elizabeth A. O’Keefe, MD**  
Associate Professor of Medicine  
Associate Director, Geriatrics Fellowship program

**David A. Pasquale, DO**  
Clinical Assistant Professor of Medicine
Subashan Perera, PhD
Professor of Medicine and Biostatistics
Core Co-Leader & Senior Statistician, Data Management and Analysis Core of the Pittsburgh Claude D. Pepper Older Americans Independence Center

Beth Porter, MD
Clinical Assistant Professor of Medicine

Sangeeta Rana, MD, MPH
Assistant Professor of Medicine

Eric G. Rodriguez, MD, MPH
Associate Professor of Medicine

Michelle I. Rossi, MD, MPH
Associate Professor of Medicine and Epidemiology
Associate Director of Clinical Care Activities, Geriatric Research Education and Clinical Center (GRECC) VA Pittsburgh Healthcare System
Director, Geriatric Evaluation and Management (GEM) Clinic, VA Pittsburgh Healthcare System

Fred H. Rubin, MD
Professor of Medicine
Chairman, Department of Medicine at UPMC Shadyside

Karen E. Glasser Scandrett, MD, MPH
Assistant Professor of Medicine
Director, Geriatric Fellowship Program

Leslie P. Scheunemann, MD, MPH
Assistant Professor of Medicine

Stasa D. Tadic, MD, MS
Associate Professor of Medicine
Academic Chief, Geriatric Medicine, UPMC Mercy
Physician Leader, Supportive Services, UPMC Health Plan

Adele L. Towers, MD, MPH
Associate Professor of Medicine & Psychiatry
Senior Clinical Advisor, UPMC Enterprises
Director of Risk Adjustment, UPMC Enterprises

Shachi Tyagi, MD, MS
Assistant Professor of Medicine

Adrian Visoiu, MD
Clinical Associate Professor of Medicine

Keisha Ward, MD
Clinical Assistant Professor of Medicine

Debra K. Weiner, MD
Professor of Medicine
Associate Director, Geriatric Fellowship Program

Rollin M. Wright, MD, MA, MPH
Assistant Professor of Medicine
Chair of Education Committee, Division of Geriatric Medicine
CLINICAL ACTIVITIES

The Division developed the 1st NCQA-certified Patient-Centered Medical Home specifically for geriatric patients

We focus on prevention and management of the complex medical and psychosocial problems that afflict older adults. Even excluding our VA efforts, we are responsible for thousands of ambulatory visits and hospital discharges, and nearly 15,000 long term care visits at 13 different facilities.

In FY19, we also built on the success of our telemedicine efforts, which had previously reduced unplanned nursing home transfers, contributed to our two successful $20 million CMS Innovation Center grants, and led UPMC Enterprises in 2017 to create Curavi Health™: in FY19, Curavi acquired a New York telemedicine company and it now serves more than 100 nursing homes in 14 states. To further help UPMC reduce readmissions, we expanded our Geriatric Trauma Service, which provides a proactive approach to >2000 older trauma patients admitted annually to UPMC Presbyterian (PUH); propensity analyses showed that we cut readmissions by 42%. Our delirium prevention (HELP) program at UPMC Shadyside cut readmissions hospital-wide by 17% (JAGS 2018). With radiology, we devised a new program to reinsert PEG tubes in NH patients and avoid ED visits. We initiated a novel transition service for older TAVR and heart failure patients discharged to NHs. With orthopedics, we expanded our Fracture Liaison Service (JBMRI 2017) to ensure that, in addition to fracture repair, older patients receive appropriate therapy for osteoporosis; the service is now the model for the National Osteoporosis Foundation, and we are now working with UPMC Health Plan to scale it. We also grew two novel ambulatory geriatric subspecialty services: one in geriatric cardiology and another in geriatric chronic pain, and we partnered with nursing on two Beckwith awards to create delirium prevention rooms, both at UPMC PUH and Mercy hospitals. In FY19, we were asked to help UPMC Mercy create a Geriatric Center of Excellence. In just a few months, and benefiting from our previous efforts at UPMC Magee, Mercy was able to gain certification as a level 3 Geriatric ED as well as a NICHE site, and is committed to staffing every ward with at least one geriatric nurse specialist. Finally, we just recruited a new Clinical Chief and filled an open clinician position to start in December 2019. And for 2019, U.S. News and World Report ranked us #12 in Geriatrics.

In addition to our clinical volume, which is large for an academic geriatric division, our effort comprises several special features:

- Physician Excellence: 15 of our faculty are now in America’s Top Docs and/or Best Doctors in America. And, of the 73 physicians (of >3000) to receive UPMC’s Award of Excellence in 2019, 4
were from our faculty.

- **Vertically-Integrated Care Across the Entire Health Care Spectrum**

- **Chronic Care Management (CCM):** We were the first NCQA-certified Patient Centered Medical Home designed specifically for geriatric patients (Gennari et al., *Cleveland Clin J Med*, 2012;79:359-66). We have now augmented it by creating a program to manage patients with multiple chronic conditions in compliance with the new CCM billing code. The program is based on patient goals, involves all members of the care team, and is designed to anticipate and avert problems in our most complicated patients.

- **Group Visits:** For >15 years, Dr. Towers has led one of the first such programs in an academic center.

- **Integrated Geriatric Subspecialty Care:** Consultative care is provided by fellowship-trained geriatricians, many of whom have additional training in cardiology, chronic pain, gait/mobility, sarcopenia, falls, osteoporosis, pulmonary/critical care, insomnia, incontinence, rheumatology, depression, dementia, audiology, or palliative care. DXA testing is provided by a dually-trained geriatric endocrinologist (Dr. Greenspan).

- **Geriatric Pharmacists and Social Workers:** Our geriatric pharmacists review medications, provide education, and counsel patients (cf: Gavini, Gennari, Ruby, *Consult Pharm*, 2015;30:153). This service is especially important for patients recently discharged from the hospital or SNF and for those on warfarin. Our social workers serve both inpatients and outpatients. They help with care transitions, family conferences, and end of life/palliative care discussions. They also provide resources to address care deficits and financial issues, and they educate patients and families on a variety of topics including dementia and insurance coverage.

- **Emergency Care:** Both UPMC Magee and UPMC Mercy now screen for delirium in every older patient in the Emergency Room, and pharmacists review the medications of every patient with a positive screening test.

- **Hospitalist and Consult Services:** At Shadyside, we staff a geriatrics hospitalist service and a consult service.

- **HELP Program:** Based on Dr. Inouye’s program and led by Drs. Rubin and Hassan, this service prevents delirium and has saved >$7 million/year since 2008 at UPMC Shadyside (Rubin, JAGS 2011 and JAGS 2018).

- **UPMC Presbyterian (PUH) Geriatric Trauma Service:** Dr. Scandrett initiated this service in 2016 to meet the needs of >2000 older patients admitted annually to our Level 1 trauma hospital. Readmissions were cut 42%.

- **Fracture Liaison Service (UPMC PUH-Shadyside):** Dr. Greenspan created this national model to ensure that, in addition to surgical repair, those with a fracture are evaluated and treated for osteoporosis (*JBMR* 2017).

- **Telemedicine Service** for all of our institutionalized residents, both after hours and on weekends.

- **Transitional Care Management/Readmission Prevention:** Each of our patients is contacted within 48 hours of hospital discharge to review their progress, medications, unanticipated problems, and plans for medical follow-up. Uniquely, we have a similar process for our patients discharged from SNFs. In addition, for each readmission, the clinicians involved (PCP, hospitalist, NH physician, pharmacist, social worker, and/or home care) strive to identify interventions to prevent future readmissions, both at the patient and the system level.

- **Advanced Heart Failure:** A new unit, created at UPMC’s Canterbury SNF, is led by Drs. Hassan and
Mathier and designed to reduce readmissions following discharge of patients with TAVR or advanced heart failure.

- **Program for All-Inclusive Care of the Elderly (PACE):** Directed by one of our adjunct faculty and working closely with the Division, this multisite program allows frail elderly to continue living at home.

- **Nursing Home (NH) and Assisted Living:** We provide care for hundreds of these residents, as well as training and medical leadership to more than a dozen facilities to improve care and reduce unnecessary admissions.

- **Provision of Non-Reimbursable Services:** Our readmission prevention service, an anticoagulation program for frail patients, Lifeline® even for those unable to pay, 55 Alive (to assess driving safety), and respite care.

## CLINICAL QUALITY IMPROVEMENT INITIATIVES

Our initiatives focus on each relevant setting. Some highlights include:

### Ambulatory Care

**Chronic Care Management (CCM).** Focused on frailty and/or multimorbidity, we work with each such patient to develop a care plan in the context of their goals, life expectancy, and current functional status. Because we use this information to develop an action plan and reach out between office visits to assess progress, we qualify for CMS’s chronic care billing code which helps to defray the costs. It also enables us to provide targeted, multidisciplinary care from pharmacists, social workers, and CRNPs to additional patients, and also same day appointments and continuity of care between care settings. These initiatives led to a 97% score on CG CAHPS. Based on our success, other departments have begun to implement the model as well.

**Transitional Care Management.** In FY19, to determine whether Medicare’s new TCM billing code could enable us to further improve our transitional care, we hired a pharmacy technician to identify, track, and coordinate transitions for all of our patients discharged from a hospital, rehabilitation facility, or SNF. She ensures that each patient is called within two business days of discharge to address questions, unexpected problems, and any anticipated difficulty in being seen for follow-up within two weeks. The program has been well received by patients, staff, and physicians, and won the “2019 People’s Choice” award at the UPMC PUH-SHY Quality Fair. By tracking its efficacy and cost, we hope to be able to systematize the program and disseminate it.

**Depression.** We continue our CRNP-led depression screening and management program. Based on the PROSPECT study, which was developed by our geropsychiatrists (JAMA, 2004), we screen each of our patients with the PHQ-2, followed as needed by the PHQ-9. A positive score triggers the provider to evaluate and treat the patient according to an algorithm we adapted with input from our geropsychiatrists. Patients are followed for 6-12 months by an interdisciplinary team that monitors response and assists with problem-solving.

**Annual Wellness Visits.** In FY19, we more than doubled the number of these visits by automatically scheduling patients to see a CRNP before/after their routine PCP visit. During the visit, the focus is on preventive services, immunizations, diet and exercise, and advance directives. We continue to garner top scores for preventive services across UPP.
**Emergency Care**

In 2015, we and our colleagues in the Magee-Women’s Emergency Department became one of just two US programs selected to work with leaders from the American College of Emergency Physicians and the Society of Academic Emergency Physicians to improve care of older emergency patients. Funded by the Hartford Foundation, our first project began with development of a quality improvement program to enhance detection and management of delirium. Repeated QI cycles have improved nurse-administered screening of older adults from 33% to 90% and the rate of physician confirmatory testing to 85%, with a positive screen triggering a pharmacist review of medications. Reliability was enhanced in FY19 by incorporating the tools and process into the EMR, which has also enabled us to help disseminate the program to UPMC Mercy. The Magee team is now developing a standardized care plan for admitted patients and refining educational tools for patients and family. Follow up of patients with a positive score is underway to determine who can be safely discharged from the ED and the support required. A second project recently began to improve pain management for geriatric patients. The goal is to train ED physicians to provide regional anesthesia with femoral blocks for patients with hip fractures.

**Inpatient Care**

**Magee Acute Care and Transitions Program (ACT).** Our program was based on two tenets: optimal geriatric care requires anticipating problems and preventing them, and improved systems can help to do so. Led by Dr. Visoiu, over 8 years we identified new problems in medication reconciliation (Marcum et al., J Am Geriatr Soc, 2015 [2 articles]), expanded and enhanced our Geriatric Consult Service, and worked with orthopedics to improve protocols for all fracture patients. We also sustained our previous advances, maintaining low ALOS, complication rates, and readmissions (10%). More gratifying, improvement in these metrics was sustained across the entire medical service for years. Unfortunately, faced with staff turnover, an unforeseen faculty shortage, and increased demand for our help on the PUH Trauma service, we had to suspend the MWH ACT although we continue to provide inpatient Geriatric consults.

**Delirium Pathway Project.** Led by Dr. Visoiu, we worked with leaders in psychiatry, nursing, ED, and IT to design a Pathway to improve the approach to delirium in older patients. The goal is universal screening, prevention, and enhanced interprofessional management, from the ED to the wards. As described above, we integrated ED screening of all patients >65 years old. Unexpected departures of key faculty and UPMC’s CMIO delayed further intervention, so we switched our focus to reducing nursing documentation, partnering with UPMC’s CNO (Lorenz) and CQO (Minnier). We found that documentation could be substantially streamlined; for instance, we reduced required nurse documentation for a new admission from 36 electronic screens to 8. The hope was to use the freed up time to enable enhanced screening and intervention – not only for delirium, but for other problems as well. Unfortunately, the initiative was suspended owing to UPMC’s new partnership with Microsoft and anticipated changes in the EMR. Fortunately, under Dr. Rubin’s leadership, the successful HELP program continues at Shadyside on 11 wards (JAGS, 2017).

**Supportive Services Program.** Developed in partnership with UPMC’s Health Plan and the Section of Palliative Care, early analyses proved that this program improved care and saved over $500,000/year. Based on its success at UPMC’s PUH, Dr. Tadic launched a new base at UPMC Mercy in FY14 where, over the past 5 years, it has also generated a demand for consults on patients not insured by the Health Plan. Both sites are staffed by a nurse who is backed up by faculty members from geriatrics and palliative care. By identifying and consulting proactively on high risk patients, our goal is to minimize complications, ensure a seamless post-discharge transition, and reduce readmissions.
Inpatient Delirium and Dementia. Since 2016, Dr. Tadic has mentored two nurses in their quality improvement initiatives at UPMC Mercy. One employs delirium screening and prevention for inpatients over age 65 on the 12E medical progressive unit. Another uses a designated space (room 10026 on 10E) to help prevent delirium in patients with a history of dementia. Both projects have reduced use of sedative agents as the incidence of delirium declined.

Geriatric Medicine Trauma Consult Service at PUH. We continue providing geriatric consultation for high risk patients at PUH, in partnership with general medicine. Propensity analyses by the Wolff Center in FY18 documented a 42% reduction in readmissions for such patients despite being selected for increased vulnerability.

Fracture Liaison Service (FLS). As national pressure mounts to decrease length of stay, most fracture patients are now discharged without assessment or treatment of the underlying cause. With extramural funding, Dr. Greenspan designed this novel service, which increased bone density screening in such patients from 9% to 57% and appropriate medical treatment from 4% to 45%. This would have translated into an improved rating in the HEDIS measure from 1 star to 4 stars. More importantly, it was accompanied by reduction in the re-fracture rate from 10% to 1.3%. Based on these results, UPMC has supported the program which is now the model advocated by the National Osteoporosis Foundation.

Home Care
Living at Home (Dr. Rodriguez, Medical Director). This team-based preventive program collaborates with PCPs to provide advanced care coordination for roughly 500 high risk, community-dwelling elderly with evidence of inadequate social support and cognitive and functional compromise. Nurses and social workers make home visits to assist with managing medications, keeping medical appointments, arranging in-home and community services, and defining goals of care. Results have been excellent (Castle, Resnick, et al., J Applied Gerontol, 2014), and participation in the program has been consistently associated with lower rates of emergency department visits and hospitalizations.

Long-Term Care (LTC)
Reducing Unplanned Admissions. Led by Drs. Nace and Handler, in collaboration with the Aging Institute and Senior Communities, we established a comprehensive program to reduce unplanned admissions from nursing homes (NHs) to the hospital. It focuses on four key phases: a) improved understanding of patients’ care goals, b) earlier detection of deterioration, c) improved communication among team members, and d) use of clinical care pathways. The program reduced unplanned admissions across UPMC-owned NHs by 45% (from 4.9/1000 patient days in Jan 2010 to 2.7 in June 2013, with subsequent plateau). Outcomes of this program were responsible for UPMC Community Provider Services receiving a $19 million CMS Innovation Award (“RAVEN”) to implement and evaluate the program in 20 non-UPMC facilities. Based on the success of the new program, which netted savings of $5 million (Health Affairs 2017), CMS awarded us another $20 million to sustain the intervention in the 20 NHs, replicate it in another 20 NHs, and test a new payment model for all 40 NHs that pays both them and their practitioners to provide higher-level care on site.

Telemedicine. Led by Dr. Handler, and in coordination with Curavi, in FY19 we

Drs. Keisha Ward and Rollin Wright were among the many divisional faculty recognized for long term care this year.
expanded our teledmedicine service still further. Acquisition of New York’s TripleCare has enabled us to now cover >100 NHs across 14 states. In addition, we expanded our hours of coverage, from 84 to 108 hours of night and weekend coverage per week. Our combined entity has now conducted more than 25,000 consults resulting in >7,800 avoided hospitalizations.

**Teledementia.** Led by Dr. Rossi, we continued our innovative VA teledementia program (JAGS 2017) and added more VA partners from across the country. Together, they are utilizing national VA and CMS databases to evaluate the novel program’s health impact, as well as its effect on polypharmacy and under-prescribing. In 2017, Dr. Rossi added a new component: telesupport for those who care for these challenging patients. The program has decreased caregiver burden, and she next plans to expand the intervention into patient’s homes.

**Dementia Care Management Initiative.** The Division has led local and state initiatives to reduce unnecessary antipsychotic usage among nursing home residents. During our leadership of the Pennsylvania Dementia Care Partnership, usage declined 30% statewide in the past 7 years. In addition, by emphasizing an interprofessional team approach, usage at Division-affiliated SNFs has declined as well and is now 15.0%—a level below state and national averages.

**Antimicrobial Stewardship.** Under Dr. Nace’s leadership, and funded by AHRQ, the Division is spearheading new approaches to antimicrobial stewardship in long-term care. First, he helped to develop a national antimicrobial toolkit (https://www.ahrq.gov/nhguide/index.html). Second, he and his colleagues completed the Optimizing Antibiotic Stewardship in LTC Settings (OASIS) project, which involved 12 sites in Wisconsin and PA. Employing a systems approach, they compared antibiotic prescribing workflows at each site. Communication and collaboration between nursing staff and prescribers were identified as the highest priority targets. Based on the results, a post-prescribing review (“antibiotic timeout”) was tested and analysis of the results is underway. Third, since suspected UTI is the leading cause of inappropriate antibiotic use in the LTC setting, Dr. Nace launched the “Improving Outcomes of UTI Management (IOU)” project. As part of this study, the first evidence-based guidelines for diagnosis and treatment of uncomplicated cystitis were developed and pilot tested in 25 facilities (12 intervention and 13 control sites). The intervention led to a 27% reduction in inappropriate treatment of asymptomatic bacteriuria, a 17% reduction in overall antibiotic use for UTI, and a 67% reduction in C. difficile infections, all without a change in mortality or hospitalizations. The guidelines and tools have been disseminated to all of the original control sites and to two more dissemination cohorts, thereby reaching >50 homes across the country. Based on this work, Dr. Nace received a 2019 grant from the PA Department of Health to train nurses, prescribers, and pharmacists to use the Modified Medication Appropriateness Index for Uncomplicated Cystitis (MMAI-UC), a modified version of a tool used in the IOU study. In addition to training, the project will determine the reliability of applying the tool across disciplines to test whether the MMAI-UC can be used as an antibiotic quality measure. This work is important because all current antibiotic stewardship measures report utilization, but none report on the more important aspect – appropriateness of antibiotic use. Dr. Nace hopes to develop an automated scoring version of this tool which can be incorporated into the National Healthcare Safety Networks (NHSN) reporting system. Dr. Nace and his team received the 2019 ABIM/AMDA Choosing Wisely Champion award for their work on improving antibiotic stewardship for UTI.

**Optimal Influenza Vaccines for Older Adults.** The Division is collaborating with the Pittsburgh Vaccination Research Group to evaluate the effectiveness of different influenza vaccines in non-frail, pre-frail, and frail older adults. Led by Dr. Nace, this research is also investigating the impact of sarcopenia in vaccine
CLINICAL LOCATIONS

1. University of Pittsburgh Osteoporosis Prevention and Treatment Center
   Kaufmann Medical Building
   3471 Fifth Avenue, Suite 1110
   Pittsburgh (Oakland), PA 15213

2. UPMC Benedum Geriatric Center—UPMC Montefiore
   3459 Fifth Avenue, 4 East
   Pittsburgh (Oakland), PA 15213

3. UPMC Senior Care—UPMC Shadyside
   Shadyside Medical Building
   5200 Centre Avenue, Suite 405
   Pittsburgh (Shadyside), PA 15232
**UPMC Benedum Geriatric Center—UPMC Montefiore**
3459 Fifth Avenue, 4 East
Pittsburgh (Oakland), PA 15213

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Pittsburgh (Oakland), PA 15213
RESEARCH AND OTHER SCHOLARLY ACTIVITIES

The Division of Geriatric Medicine seeks to: (1) conduct cutting-edge research to improve the health of older adults and (2) train the next generation of investigators to do the same. Areas of inquiry include biology of aging, mobility/falls, frailty/sarcopenia, cardiology, chronic pain, osteoporosis, polypharmacy, incontinence, insomnia, rehabilitation, elder abuse, telemedicine, and long term care. Our funding contributed to Pitt’s being among the nation’s top recipients of NIH funding in aging.

Divisional faculty have found that: (1) healthspan can be reliably assessed in mice, which will enable investigators to better focus on interventions most relevant and promising for human testing (Rizzo); (2) response to physiologic DNA damage drives aging rather than the damage itself (Gurkar); (3) a new biomarker index predicts mortality independent of organ-based comorbidity (Newman); (4) in cognitively normal seniors, there appear to be 2 phenotypes of geriatric urge incontinence, one in which the brain plays the dominant role and a behavioral approach is optimal, and another in which the brain’s role is not key and for which medication may be more effective (Clarkson, Resnick); (5) the HELP program reduces not only delirium and falls but also readmissions (Rubin); (6) among incapacitated ICU patients, discussions often fail to include the patient’s own values and preferences (Scheunemann); and (7) nearly 40% of patients discharged from hospital to a nursing home suffer an adverse event, the majority of which could be prevented (Handler).

In the last four years, the Division’s research expenditures have increased steadily, with FY19 totals being nearly 3x more than FY15.

Gerontology: Medical Sciences, and Dr. Nace is Associate Editor of JAMDA. Dr. Greenspan serves as President of the National Osteoporosis Foundation. Dr. Forman acted as protagonist in the AGS Plenary Debate Session on statin use while Dr. Hanlon gave the prestigious Peter Lamy Lecture at the ASCP Annual Meeting and served on the AGS’ “Beers Drugs” Update Panel. In addition, Drs. Greenspan and Newman served on NIA’s Board of Scientific Counselors and External Advisory Council, respectively, while Dr. Greenspan also served on NIA’s Clinical Trials Advisory Panel. And, Dr. Forman served as Chairman of the American Heart Association’s Committee on Older Populations.

This past year, our faculty members were once again recognized for their research. They gave more than 50 presentations at annual meetings of the American Geriatrics Society, Gerontological Society of America, and AMDA. Additionally, both Drs. Scheunemann and Makaroun won AGS Presidential Poster Awards, and Dr. Nace won the ABIM/AMDA Choosing Wisely Award.

Division faculty also served on editorial boards and as visiting professors, committee chairs, and keynote speakers at national and international meetings. For example, Dr. Newman is Editor of the Journal of...
With the departure of 5 investigators to prestigious positions elsewhere, we have spent the past 5 years recruiting and rebuilding. The Research Expenditures graph below reflects funding for which we serve as PI at Pitt, but omits >$2 million of our VA research funding, as well as Dr. Newman’s funding.

**Current Division-led Research**

**NIH Centers/Program Projects:**
- P30 Pepper Older American’s Independence Center (Greenspan)
- T32 to promote training in geriatrics/gerontology (Greenspan)
- Center of Excellence in Chronic Pain (Weiner)
- Leadership K07 to create a Long-term Care Research Network (Greenspan)

**NIH R01/R56/R21s:**
- Nitrite for HFpEF, and a modified approach to geriatric rehab (MACRO; both R01s [Forman])
- CNS mechanisms mediating therapeutic response in overactive bladder (R01 and R56, Resnick)
- Pathophysiology of nocturia and behavioral treatment for nocturia (two R21s, Tyagi)
- CNS mechanisms involved in situational urgency (R21, Clarkson)
- Neural resilience in mobility impairment (Rosano/Hanlon)
- Efficacy of zoledronic acid for osteoporosis in institutionalized elderly (R01, Greenspan, Nace, Resnick)
- Efficacy of denosumab for osteoporosis in long-term care (R01, Greenspan, Nace, Resnick)
- PCORI trial of home vs. center based cardiac rehabilitation (Forman)
- A pragmatic multisite NIH/PCORI-funded trial to prevent injurious falls among high risk elderly (Greenspan/Resnick)
- R00 supplement (Gurkar)

**CMS/CMMI-funded:**
- RAVEN to reduce SNF transfers (Handler, Nace)

**VA funding:**
- Role of hip arthritis in chronic low back pain (Weiner)
- Development and validation of clinical prediction rules in seniors with lumbar spinal stenosis (Weiner)
- Patient-centered vs. image-directed treatment of chronic low back pain (Weiner)
- Teledicine approach to improve care of community-based dementia patients (Rossi)

**Career Development:**
- K23 on Alzheimers (Nadkarni)

**AHRQ grants:**
- Reducing adverse drug events in nursing homes (Handler, Hanlon)
Divisional faculty also frequently collaborate with researchers outside of the division including

**Funded Collaborations**

Divisional faculty also frequently collaborate with researchers outside of the division including

**P01/P50s:**
- Care of Alzheimer’s patients (ADRC, Lopez/Rodriguez and Nadkarni)
- Molecular Transducers of Physical Activity Clinical Centers [MotrPAC, Forman/Jakicik]
- Sarcopenia mechanisms (SOMMA, Forman/Newman)
- Mechanisms of stochastic damage of aging (Robbins, Perera)
- Evaluation of new approaches to lower urinary tract dysfunction due to spinal cord injury (Kanai, Perera)

**R01s:**
- Reduce adverse drug events after discharge to nursing homes (Handler/Kane-Gill)
- Task-specific approach to improving gait and mobility (Brach, Perera)
- Osteoporosis risk in smokers (Greenspan, Bon)
- Activating patients with osteoporosis (Saag, Greenspan)
- Aging’s impact on urothelial function (Resnick, Birder)
- Impact of obesity on body composition, gait, and function in older adults (Cham, Perera)
- Assessing the impact of improved vitamin D status on vascular health and metabolic syndrome risk (Rajakumar, Greenspan)
- Reducing Sedentary Behavior RESET BP (Kline, Perera)

**R56/R21/R24/R18s:**
- Biomarkers to predict lung function decline in physiologically normal smokers (Perera, Sciurba)
- Establishment of the research infrastructure to facilitate analyses of Medicare Advantage plans (Gurwitz, Greenspan)
- Dissemination of a diabetes prevention program in seniors (Venditti, Greenspan)
- A PCORI-funded trial to examine exercise for fracture prevention in community elderly (Greenspan/McTigue) A PCORI-funded trial to devise and evaluate a novel group exercise program to reduce falls in assisted living facilities (Brach, Perera)

**K01:**
- To devise a falls risk monitoring algorithm using a data mining technique (Boyle, Perera)
- 3 VA Merit Reviews: patterns, determinants, and consequences among veterans receiving opiates from VA and non-VA sources (Gellad/Hanlon)
- Improving safety and appropriateness of prescribing for demented veterans who receive drugs within and outside of the VA (Hanlon/Gellad)
• Cumulative CNS drug dosage and serious fall injuries (Hanlon, Thorpe)

Additionally, our research training grants support junior faculty, fellows, and medical students. Our T32, which was recently renewed, now includes collaboration with the Aging Institute. Dr. Studenski’s former NIH K07 Leadership Award created a Concentration in Aging Research for Pitt’s Clinical Research Training Program. Until 2017, our Pepper Center funded an embedded K award through the Research Education Core led by Dr. Greenspan. And, Drs. Nace and Wright collaborate on the university’s HRSA-funded Geriatric Education Center (GWEP).

Faculty Research Interests and Activities

Neil M. Resnick, MD  Division Chief

A Professor of Medicine and Division Chief, Dr. Resnick focuses his research on the pathophysiology and therapy of geriatric syndromes. He serves as PI and Co-I for NIH-funded multidisciplinary studies of urinary incontinence that incorporate physiologic, neuroimaging, clinical, pharmacological and behavioral research aims. In addition, he serves as PI for two foundation-funded initiatives to develop system-based approaches to prevent, detect, and treat delirium in hospitalized patients. He is also a Co-Investigator on Dr. Greenspan’s research in geriatric osteoporosis, including her R01-funded studies in the nursing home and a PCORI-funded study of falls. Finally, he co-directs the Research and Career Development Core of the NIH-funded Pittsburgh Older Americans Independence Center, and he leads the Older Adult Research Network for the Pittsburgh Clinical and Translational Science Institute (CTSI).

**Study Sections**

- Reviewer, Study Section (Ad Hoc), Division of Research Grants, NIH, 1983-present
- Member, Abstract Review Committee, American Geriatrics Society, 1985-present
- Member, Governing Board, Simon Foundation, 1986-present
- Reviewer, Study Section, Gerontology and Geriatrics (Ad Hoc), NIA/NIH, 1988-present
- Reviewer, Gerontological Society of America, 1989-present

**Advisory Committee Memberships and Leadership Positions**

- Member, Scientific Advisory Board, Simon Foundation, 1984-present
- Member, Scientific Advisory Board, American Federation of Aging Research, 1989-present
- Member, Invited Panel, American College of Physician, “Meet the Professor”, 1990-present
- Member, Advisory Committee, Alliance for Aging Research, 1991-present
- Member, Advisory Committee, Geriatric Research Education and Clinical Center (GRECC), Pittsburgh VA Health System, 1999-present
- Member, Long Term Care Committee, University of Pittsburgh, 1999-present
- Member, Board of Directors, Pennsylvania American Geriatrics Society, 2000-present
- Co-Director, Pennsylvania American Geriatrics Society CME course: Clinical Update in Geriatric Medicine, 2000-present
- Co-Chair, Council of State Affiliates, American Geriatrics Society, 2003-present
- Member, National Mentoring Program, American Geriatrics Society, 2005-present
- Member, Board of Directors, Pittsburgh Regional Health Initiative (PRHI), 2012-present
- Member, Board of Directors, Jewish Healthcare Foundation, 2012-present
- Advisor, CMS/Medicare Innovation Advisors Program, 2014-present
- Member, Board of Directors, American Geriatrics Society, 2018-present
**Professional Affiliations and Society Memberships**
- Member, Gerontological Society of America, 1981-present
- Member, Urodynamics Society, 1982-present
- Member, American Urological Association (Affiliate Member), 1985-present

**Editorships**
- Editorial Board, *Current Geriatrics Reports*, 2014-present

**Major Lectureships and Seminars**
- Invited Lecturer, Update in Geriatric Medicine, Pennsylvania American Geriatrics Society, 2000-present
- Lecturer, Governor’s School (University of Pittsburgh Health Scholars Academy), 2000-present
- Lecturer, Meet the Professor Sessions, American College of Physicians Annual Meeting, 2017-present
- Invited Lecturer, International Continence Society Annual Scientific Meeting, Philadelphia, 2018
- Invited Lecturer, Annual Scientific Meeting, Gerontological Society of America (GSA), Boston, MA, 2018

**Honors and Awards**
- Honoree, Best Doctors in America, Best Doctors Inc, 1992-present
- Honoree, Top Doctors in America, Castle Connolly's Guide to America’s Top Physicians, 2000-present
- Honoree, Best Doctors, *Pittsburgh Magazine*, 2002-present

**Becky D. Clarkson, PhD**
Dr. Clarkson is a Research Assistant Professor of Medicine. Originally trained as a medical physicist, she uses her experience of developing clinical tests and diagnostic tools to integrate brain imaging and bladder provocation to understand and treat bladder dysfunction related to higher control mechanisms. Her NIH-funded research focuses on environmental triggers of urinary leakage and using MRI to characterize the central neural control system of the continence mechanism. She is currently using the findings from this research as the basis for developing therapies for urgency incontinence which focus on bladder control, specifically behavioral therapies, and brain stimulation methods.

**Advisory Committee Memberships and Leadership Positions**
- Co-Chair, Brain Bladder Research and Imaging Network, 2016-present
- Co-Chair, Biomedical Engineering section, INTEL ISEF, 2018

**Professional Affiliations and Society Memberships**
- Member, Institute for Physics and Engineering in Medicine, 2004-present
- Member, International Continence Society, 2007-present
- Member, International Consultation on Incontinence Research Society, 2018

**Major Lectureships and Seminars**
- Invited Speaker, Neurogenic Bladder Research Group (NBRG) Meeting, 2019

**Daniel E. Forman, MD**
A Professor of Medicine, Dr. Forman is dually trained in geriatrics and cardiology. He holds appointments in both Divisions at UPMC as well as in both the Geriatrics Research Education and Clinical Center (GRECC) and the Cardiology Division at the Pittsburgh VA. With NIH funding, he is studying the benefit of nitrate capsules...
for fatigue and function in older adults with heart failure and preserved ejection fraction. In two other NIH projects, he is studying the impact of exercise on skeletal muscle gene transcription (Molecular Transducers of Physical Activity in Humans [MoTrPAC]) and the impact of exercise training on cognition (Investigating Gains in Neurocognition in an Intervention Trial of Exercise [IGNITE]). At the VA, he is comparing the impact of different training regimens (strength, aerobic, and inspiratory muscle training) on skeletal muscle morphology, gene expression, and functional capacity. He is also researching the utility of prehabilitation in frail elderly prior to abdominal and cardiothoracic surgery. Finally, Dr. Forman is funded by PCORI to devise novel strategies to improve cardiac rehabilitation, especially methods to improve enrollment, adherence, and value for complex, older cardiovascular patients.

**Study Sections**
- Scientific Reviewer, Increasing Use of Cardiovascular and Pulmonary Rehabilitation in Traditional and Community Settings Study Section (NHLBI RFA-HL-18-019), 2018
- Scientific Reviewer, NHLBI UG3/U24 study section, 2019

**Advisory Committee Memberships and Leadership Positions**
- Chair, Advocacy Workgroup, Geriatric Cardiology Section, American College of Cardiology, 2014-present
- Chair, International Workgroup, Geriatric Cardiology Section, American College of Cardiology, 2014-present
- Member and Representative, Cholesterol Guideline Committee and American Geriatric Society, American College of Cardiology/American Heart Association, 2017-present
- Chair, Geriatric Cardiology Panel, Annual Update in Geriatric Medicine, University of Pittsburgh, 2019

**Professional Affiliations and Society Memberships**
- Member, Geriatric Cardiology Section, American College of Cardiology, 2010-present

**Editorships**
- Editorial Board, *Journal of the American Geriatrics Society*, 2014-present
- Associate Editor-in-Chief, *Journal of Geriatric Cardiology*, 2015-present
- Editorial Board, *Journal of Cardiopulmonary Rehabilitation and Prevention*, 2016-present
- Editorial Board, *Journal of the American Geriatrics Society*, Cardiology, 2016-present
- Editorial Board, *The Journal of Gerontology: Medical Sciences*, 2017-present
- Guest Editor, *Circulation*, 2017-present
- Guest Editor, *Journal of the American College of Cardiology*, 2018-present

**Major Lectureships and Seminars**
- Invited Lecturer, Department of Physical Medicine and Rehabilitation Panther Grand Rounds, University of Pittsburgh, 2018
- Invited Speaker, Plenary Session Debate, American Geriatric Society Annual Meeting, Orlando, FL, 2018
- Invited Speaker, National VA Webinar sponsored by Promising Practices, Office of Rural Health, 2018
- Invited Speaker, American Association of Cardiovascular and Pulmonary Rehabilitation Annual Meeting, Louisville, KY, 2018
• Invited Speaker, Cardiology Grand Rounds, Case Western University School of Medicine, 2018
• Invited Speaker, Update in Internal Medicine 2018, University of Pittsburgh, 2018
• Invited Speaker, American Heart Association Scientific Sessions, Chicago, IL, 2018
• Invited Speaker, Aging and Cancer Brainstorming Workshop, University of Pittsburgh, 2019
• Invited Speaker, Workshop on Embedding/Sustaining a Focus on Function in Specialty Research and Care, NIA U13 conference, Washington, DC, 2019
• Invited Speaker, Annual Update in Geriatric Medicine, University of Pittsburgh, 2019
• Invited Speaker, Delegation from the American Heart Association at the 15th International Congress of Update in Cardiology and Cardiovascular Surgery (UCCVS), Antalya, Turkey, 2019
• Keynote speaker, American Geriatrics Society, Portland, Oregon, 2019
• Invited Speaker, Meyers Visiting Professor of Geriatric Medicine, University of Massachusetts School of Medicine, 2019

Amelia S. Gennari, MD
Dr. Gennari leads the Division’s innovative efforts in developing a Geriatric Patient Centered Medical Home and serves as head of the Division’s Clinical Task Force. Additionally, she has a strong commitment to education and plays an active role in teaching medical students, residents and geriatric fellows in the inpatient, outpatient and long term care settings.

Advisory Committee Memberships and Leadership Positions
• Member, Education Committee, University of Pittsburgh, 2015-present
• Co-Director, New Resident Green Team Configuration, University of Pittsburgh Medical Center, 2018

Honors and Awards
• Honoree, Best Doctors, Pittsburgh Magazine, 2017-present

Susan L. Greenspan, MD
A Professor of Medicine, Dr. Greenspan is dually-trained in Geriatrics and in Endocrinology, and she serves as UPMC’s Director of the Osteoporosis Prevention and Treatment Center and as Director of Bone Health at Magee Women’s Hospital. Her research focuses on geriatric osteoporosis, including its pathophysiology, evaluation, and treatment. Her current R01s focus on osteoporosis in institutionalized elderly, including new treatment modalities and new assessments of bone strength. In addition, she is PI of our NIH-funded Pepper Center, our NIH T32 Pitt Integrated Clinical and Geroscience Research Training Program, and has a K07 that has developed a research registry and network for research in senior communities. A former member of NIH/NIA’s Board of Scientific Counselors, she now serves on NIA’s Clinical Trial Advisory Panel. She is also President of the National Osteoporosis Foundation and a member of its Board of Trustees.

Advisory Committee Memberships and Leadership Positions
• Co-Founder and Core Faculty, International Society of Clinical Densitometry Certification Program, 1997-present
• Core Faculty, National Osteoporosis Foundation (in association with ISO) annual meeting, 2010-present
• Director, T32 training grant, 2014-present
• Member, NIH/NIA Clinical Trials Advisory Program (CTAP), 2014-present
• Team Member, FNIH Sarcopenia Project, 2017-present
• Co-Chair, National Bone Health Alliance, 2018-present
• Member, Steering Committee, American Society of Bone and Mineral Research Secondary Fracture Prevention, 2018-present
• Member, Steering Committee, Fracture Liaison Service Key Outcome Measures, 2018-present

**Editorships**

• Editorial Board, *Journal of Gerontology, Medical Sciences*, 1999-present
• Editorial Board, National Osteoporosis Foundation, 2004-present

**Major Lectureships and Seminars**

• Lecturer, Endocrine Society Fellows Series, 2018-present
• Lecturer, ASBMR Society Fellows Forum, 2018-present

**Aditi U. Gurkar, PhD**

Dr. Gurkar’s interest is in understanding the biology of aging and age-related diseases. Her NIH-funded research focuses on identifying the signaling mechanisms that drive aging in response to endogenous DNA damage. By defining these molecular mechanism(s), she hopes to identify novel therapeutic targets that can be exploited to extend healthspan.

**Advisory Committee Memberships and Leadership Positions**

• Poster judge, Research Day, Department of Medicine, Pittsburgh, April 2019

**Editorships**

• Ad hoc reviewer, *DNA Repair*, 2019

**Major Lectureships and Seminars**

• Invited speaker, The Pittsburgh Institute for Neurodegenerative Diseases, February 2019
• Invited speaker, Geriatric Medicine and Psychiatry Fellowship Integrated Lecture Series on “Biology of Aging,” April 2019
• Invited speaker, Veterans Administration Research Day 2019, May 2019
• Invited speaker, American Aging Association 48th Annual Meeting, San Francisco CA, May 2019
• Invited speaker, 8th Annual University of Pittsburgh and Tsinghua University Joint Symposium, May 2019

**Honors and Awards**

• First prize, Bench Junior Faculty, Aging Institute Research Day, University of Pittsburgh, 2018

**Steven M. Handler, MD, PhD**

An Associate Professor of Geriatrics, Dr. Handler also holds appointments in Biomedical Informatics and in Clinical and Translational Research. In addition to his role as Director of Geriatric Telemedicine Programs, he serves as Medical Director for Telemedicine and Health Information for the RAVEN (Reduce AVoidable hospitalization using Evidence-based interventions for Nursing facilities in Western Pennsylvania) CMS Innovation Award. A practicing geriatrician, Dr. Handler’s primary research focuses on medication and patient safety, telemedicine, and clinical decision support systems for older adults in the post-acute and long-term care setting.

**Advisory Committee Memberships and Leadership Positions**

• Steering Committee Member, Long-Term Care Research Network, American Medical Directors Association (AMDA), 2006-present
• Member, Health Information Technology (HIT) Subcommittee, American Medical Directors Association (AMDA), 2008-present
• Developer, Institute for Healthcare Improvement (IHI), Trigger Tool for Measuring Adverse Drug Events in the Nursing Home, 2009-present
• Technical Expert and Physician Lead, Physician and Patient Safety, Raising Awareness for Reducing Adverse Events in Nursing Homes Campaign, Centers for Medicare and Medicaid Services (CMS), 2014-present
• Safety Expert Panelist, Center for Medicare and Medicaid Services’ (CMS) Innovation Center, F-329 (Unnecessary Drugs) Guidance for State Surveyors Redesign Committee, 2012-present
• Member, Center for Medicare and Medicaid Services’ (CMS) Innovation Center, Enhanced Care and Coordination Provider (ECCP) Medical Director Council, 2013-present
• Member, Executive Committee for Quality Prescribing Campaign, AMDA/Society for Post-Acute and Long-Term Care, 2015-present
• Member, Taskforce on Quality Improvement in Nursing Home Regulation and Oversight, PA Dept. of Health, 2015-present
• Member, Framework Development to Support Measure Development for Telehealth, National Quality Foundation (NQF), 2016-present
• Member, Workgroup, Society for Post-Acute and Long-Term Care (AMDA), Telemedicine 2017-present
• Matter Expert, Subject telemedicine and co-author of Implementing Telehealth in Post-Acute and Long-Term Care Settings (PALTC), West Health Institute, 2019-present

Joseph T. Hanlon, PharmD, MS
An Emeritus Professor of Medicine, Dr. Hanlon is also a geriatric pharmacist and health scientist with both the Center for Health Equity Research and Promotion (CHERP) and the Geriatric Research Education and Clinical Center (GRECC) at the Pittsburgh VA. His research focuses on three themes: 1) drug-related problems, 2) racial disparities in medication use, and 3) drug-induced geriatric syndromes. He serves as a Co-I and Consultant on a number of federally funded grants and on the editorial boards of four journals.

Advisory Committee Memberships and Leadership Positions
• Member, Geriatric Advisory Panel, “Modifying the Impact of ICU-Induced Neurological Dysfunction-USA Study” (MIND-USA), Vanderbilt University, 2009-2018
• Member, “Beers List” Updating Panel, American Geriatrics Society, 2011-present
• Member, Technical Advisory Committee, PACE Program, Harrisburg, PA, 2012-2018
• Consultant, VA funded Patient Safety Center of Inquiry: Safeguarding Ambulatory Care For Veterans With Chronic Kidney Disease, 2016-2018
• Consultant, “Addressing Behavior and Mood in Assisted Living: Organizational Characteristics Related to the Use of Antipsychotic and Psychotropic Medications and Alternative Practices,” University of North Carolina-Chapel Hill, 2016-present
• Consultant, “Reducing High-Risk Geriatric Polypharmacy via EHR Nudges” (NIA funded R21), RAND Boston, 2017-present
• Consultant, “Pilot Study of Standardized Patient-Centered Medication Review (Spectorx) in Home Hospice” (NIA funded R21), UMASS-Worcester, 2018-present
Editorships

- Editorial Board, *Journal of Gerontology: Medical Sciences*, 2014-present
- Editorial Board, *Drugs and Aging*, 2014-present
- Editorial Board, *Journal of American Medical Directors Association*, 2018-present

Shuja Hassan, MD

Dr. Hassan provides primary care and consultative services to older adults at UPMC Senior Care-Shadyside. He is board certified in Internal Medicine and Geriatrics. Dr Hassan is also the Medical Director at UPMC Canterbury Place, a long-term care facility.

Advisory Committee Memberships and Leadership Positions

- Associate Director, Geriatrics Rotation, UPMC Shadyside, 2004-present
- Co-Director, Clinical Update in Geriatric Medicine CME Course, American Geriatrics Society (Pennsylvania Chapter), University of Pittsburgh, 2009-present

Major Lectureships and Seminars

- Presenter, Annual Clinical Update in Geriatric Medicine Conference, Pittsburgh, PA, May 2019

Honors and Awards

- Honoree, Best Doctors, *Pittsburgh Magazine*, 2016-present

Mary P. Kotlarczyk, PhD

Dr. Kotlarczyk is a Research Assistant Professor of Medicine and Associate Director of the Osteoporosis Prevention and Treatment Center. Dr. Kotlarczyk is also a current Scholar of the Pittsburgh Claude D. Pepper Older Americans Independence Center. Her research focuses musculoskeletal health and physical function in older adults, particularly those residing in long-term care communities.

Advisory Committee Memberships and Leadership Positions

- Member, Pittsburgh Claude D. Pepper Center Long-term Care Workgroup, 2015-present
- Co-facilitator, Pittsburgh Claude D. Pepper Center Leadership and Cultural Coaching Workshop Series for Junior Faculty, 2017-present
- Member, Early Career Faculty Workgroup for the Pepper Older Americans Independence Center (OAIC) Coordinating Center, 2018-present
- Member, Pittsburgh Claude D. Pepper Center Muscle Aging Workgroup, 2019-present

Professional Affiliations and Society Memberships

- Member, Osteoporosis Special Interest Group, American Geriatrics Society, 2016-present
- Member, Junior Faculty Research Special Interest Group, American Geriatrics Society, 2017-present

David A. Nace, MD, MPH

Dr. Nace is an Associate Professor of Medicine whose research focuses primarily on infectious disease in long-term care, particularly antimicrobial stewardship, vaccine preventable diseases, and outbreak prevention and response. He is the PI of the Improving Outcomes of UTI Management in LTC Study, an AHRQ funded dissemination and implementation project. As part of the IOU project Dr. Nace’s team developed guidelines for the diagnosis and treatment of uncomplicated cystitis in nursing home residents and is testing the implementation of these guidelines in a national cohort of nursing homes. Dr. Nace’s team received the AMDA/ABIM Choosing Wisely Campaign Award in March 2019 for this work. Dr. Nace is now leading work
to develop a potential antibiotic stewardship quality measure that can be used by facilities and physicians. This would be the first quality measure that describes appropriateness of antibiotic prescribing as opposed to the existing crude utilization measures. This pilot work is being funded by the PA Department of Health. Dr. Nace is Co-PI on a CD-funded study evaluating the humoral and cellular response to the influenza vaccine in a cohort of adults 50 years and older by frailty status. He is also conducting a Pepper Center-funded pilot study to evaluate the impact of sarcopenia on humoral and cellular response among older adults. He serves as Co-Medical Director for our recently-renewed $39 million CMS Innovations Award project (RAVEN), which has developed innovative approaches to reducing unplanned hospital transfers from nursing homes. Finally, he collaborates with other Division researchers on a variety of NIH, AHRQ, and foundation-funded studies of older adults regarding infection control, osteoporosis, adverse drug events, palliative care, interprofessional training, and quality assessment and improvement.

Advisory Committee Memberships and Leadership Positions
- Chair, PMDA Public Policy Committee, 1997-present
- Abstract Reviewer, Gerontological Society of America, 1999-Present
- Member, UPMC Influenza Task Force, 2004-Present
- Member, UPMC Senior Communities Board of Directors, 2004-Present
- Chair, UPMC Senior Communities PT Committee, 2006-Present
- Member, UPMC Health System Infection Control Expert Work Group, 2009-Present
- POLST Champion, PA POLST Coalition, 2010-present
- Chair, Pennsylvania Dementia Care Partnership, 2012-present
- Member, UPMC Health System PT Committee, 2012-Present
- Member, Department of Medicine, Clinical Directors Council, 2012-Present
- Vice Chair, AMDA Public Policy Committee, 2015-present
- Curriculum Developer, AMDA, LTC CME Curriculum, 2015-present
- Vice President, The Society of Post-Acute and LTC Medicine, AMDA, 2018-2019

Editorships
- Manuscript Reviewer, American Journal of Geriatric Pharmacotherapy, 2004-Present
- Manuscript Reviewer, Infection Control and Hospital Epidemiology, 2004-Present
- Manuscript Reviewer, Vaccine, 2010-Present
- Manuscript Reviewer, Annals of Internal Medicine, 2010-Present
- Associate Editor, Journal of the American Medical Directors Association, 2017-present

Major Lectureships and Seminars
- Lecturer, Clinical Update in Geriatric Medicine, Pennsylvania Geriatrics Society, Pittsburgh, PA, 2017-present

Honors and Awards
- Honoree, Best Doctors in America, Best Doctors, Inc, 2009-present
- Honoree, Best Doctors, Pittsburgh Magazine, 2009-present
- Appointee, PA Governors Long-Term Care Council, January 2019

Neelesh K. Nadkarni, MD, PhD
An Assistant Professor of Medicine and of Neurology at the School of Medicine, Dr. Nadkarni is a Principal Investigator of the study that examines the influence of Alzheimer’s disease and cerebral small-vessel disease on walking, thinking, and cognitive-motor interactions in cognitively normal mobility unimpaired older adults.
He is also a PI on two pilot studies, one that examines the effect of cannabis on gait and cognition in older adults with chronic pain, and another on the relationship between cardiac amyloidosis and cerebral amyloidosis in healthy older adults. He is also co-investigator at the Alzheimer’s Disease Research Center involved in several studies in Alzheimer’s disease and actively collaborates with faculty in Neurology, Psychiatry, and Radiology in the School of Medicine, in the School of Rehabilitation Sciences, and in the Graduate School of Public Health at the University of Pittsburgh.

Anne B. Newman, MD, MPH
Dr. Newman is the Distinguished Professor and Chair of the Department of Epidemiology, with a secondary appointment as Professor of Medicine in Geriatrics. A member of NIH/NIA’s National Advisory Council on Aging, she is Principal Investigator for several large population studies and clinical trials and also serves as Director of the Center for Aging and Population Health at the Graduate School of Public Health. In addition, she collaborates with Dr. Greenspan as Co-PI of our Pepper Center, with Dr. Hanlon in the Health ABC Study, and with Dr. Nadkarni on the LIFE Study and the ENRGISE Study. Her research focuses on the factors associated with disability and healthy aging.

Advisory Committee Memberships and Leadership Positions
- Member, Advisory Board, NIH/NIA Baltimore Longitudinal Study of Aging (BLSA), 2005-present
- Member, Scientific Advisory Board, The Irish Longitudinal Study of Aging (TILDA), 2009-present
- Member, External Advisory Committee, ALLHAT (Antihypertensive and Lipid-Lowering Treatment to Prevent Heart Attack Trial), 2011-present
- Member, External Advisory Committee, KURE (Korean Urban Rural Elderly) Study, 2012-present
- Member, National Advisory Council on Aging (NACA), National Institute on Aging, 2014-present

Editorships
- Editorial Board, Journal of Aging and Health, 2010-present
- Editor-in-Chief, Journal of Gerontology: Medical Science, 2016-present

Elizabeth A. O’Keefe, MD
Dr. O’Keefe is an Associate Professor and Clinician-Educator with experience in many fields of Internal Medicine and Geriatrics derived from years of medical practice in the United Kingdom and South Africa. She has several publications relating to functional bowel disease in the elderly and has served as a reviewer for Journal of the American Geriatrics Society.

Advisory Committee Memberships and Leadership Positions
- Organizer, CAMPC Clerkship Geriatrics Workshop, University of Pittsburgh, 2008-present
- Co-Developer, Geriatric Survivor teaching module, Geriatrics (Macy) Course, University of Pittsburgh, 2011-present
- Coordinator, LTC session at Charles Morris, Geriatrics (Macy) Course, University of Pittsburgh, 2011-present
- Member, Education Committee, University of Pittsburgh, 2014-present

Honors and Awards
- Honoree, Best Doctors, Pittsburgh Magazine, 2013-present

David A. Pasquale, DO
Dr. Pasquale provides geriatric primary care and consultative services at the Benedum Geriatric Center
located in UPMC Montefiore Hospital.

Advisory Committee Memberships and Leadership Positions
- Member, Education Committee, University of Pittsburgh, 2018-present

Honors and Awards
- Honoree, Best Doctors, Pittsburgh Magazine, 2016-present

Subashan Perera, PhD
Dr. Perera is a Professor of Medicine and Biostatistics with special interest in clinical trials, aging, time series analysis, item response theory, data mining, and predictive modeling. His work has involved estimating criteria for clinically meaningful change in physical performance measures of the elderly, examining their association with future outcomes using large data sets, and using item response theory to analyze rating scales used in elderly populations. Dr. Perera also co-leads the Data Management, Analysis, and Informatics Core of our Pepper Center, in addition to serving as co-investigator for multiple grants funded by the NIH, AHRQ, and within and outside of the Division.

Study Sections
- Reviewer, Science Foundation Ireland President of Ireland Future Research, 2018

Advisory Committee Memberships and Leadership Positions
- Member, External Data and Safety Monitoring Board Mechanistic Approach to Preventing Atrophy and Restoring Function in Older Adults Trial (PI: Dreyer), 2014-present
- Member, Data and Safety Monitoring Board Long-term effects of weight loss and supplemental protein on physical function R01 AG050656, 2016-present
- Member, Data and Safety Monitoring Board, Sedentary Time and Aging Research (STAR) Program Project (P01 AG052352; PIs: Kerr & La Croix), 2017-present
- Member, Pragmatic Clinical Studies Review Panel, Patient Centered Outcomes Research Institute, 2018
- Member, NIDDK Urology and Nephrology Clinical Small Business Applications Special Emphasis Panel, 2018-2019
- Member, Data and Safety Monitoring Board, Hip Muscle Power, Lateral Balance Function, and Falls in Aging (R01 AG060051; PI: Gray), 2018-2019

Eric G. Rodriguez, MD, MPH
Dr. Rodriguez is an Associate Professor of Medicine who serves as a Co-Investigator on grants related to the study of Alzheimer’s disease.

Advisory Committee Memberships and Leadership Positions
- Rater, McMaster Online Rating of Evidence, 2014-present
- Member, Advisory Committee, NIH Data and Safety Monitoring, Mindfulness, Education, and Exercise for Cognitive Function study, 2016-present

Honors and Awards
- Honoree, Best Doctors, Pittsburgh Magazine, 2014-present
- Honoree, Best Doctors in America, Best Doctors, Inc., 2014-present

Michelle I. Rossi, MD, MPH
Dr. Rossi’s research focuses on appropriate medication use in older adults, chronic pain in older adults, and development and evaluation of new models of care in older adults (i.e., innovative models of dementia care
and driving safety assessment). Her teaching activities include a variety of clinical, didactic, and mentoring interactions with medical students, residents, and fellows, as well as teaching non-physician clinician trainees (nurse practitioner, physician assistant, psychology, pharmacy, speech therapy, occupational therapy, physical therapy, social work, speech therapy, audiology) in geriatric medicine topics. Dr. Rossi is the current Associate Director for Clinical Care with the GRECC of the VA Pittsburgh Healthcare System. She is the Director of the Geriatric Evaluation and Management (GEM) Clinic at the VA Pittsburgh Healthcare System, which is an interdisciplinary outpatient consultative clinic that provides frail older veterans with comprehensive geriatric assessment. She also directs the VA Dementia Clinic and the VA TeleDementia Clinic, which provide care to veterans with dementia and support to their families over the course of their illness. In addition, Dr. Rossi is Medical Director of the VA Geriatric Driving Safety Clinic, which uses an interdisciplinary team to assess driving safety in veterans with cognitive decline.

Advisory Committee Memberships and Leadership Positions

- Director, Geriatrics Rotation, Internal Medicine residents, UPMC Presbyterian/MUH, 2009-present
- Faculty and Planning Committee, VA Webinar Series for Homecare Nurses, other Home-based Primary Care Team Members, 2012-present
- Committee Member, VAPHS IRB, 2017-present

Fred H. Rubin, MD

A Professor of Medicine, Dr. Rubin’s research has focused on evaluating the adaptability, sustainability, and impact of Dr. Sharon Inouye’s Hospital Elder Life Program (HELP). He has shown that it is as effective at preventing delirium at UPMC Shadyside, a large community-based hospital, as it was in the academic setting in which it was first developed and that it can decrease readmissions. By demonstrating both its efficacy and cost-savings, he has convinced hospital management to incorporate the program into its annual budget.

Advisory Committee Memberships and Leadership Positions

- Program Director, Medicine Grand Rounds, UPMC Shadyside, 1992-present
- Planning Committee, Update in Geriatric Medicine CME course, University of Pittsburgh, 1988-present
- Planning Committee, Update in Internal Medicine, University of Pittsburgh, 1999-present
- President, Pennsylvania Geriatrics Society, Western Division, 2010-2018
- Program Co-Director, 16th annual Internal Conference on the Hospital Elder Life Program (HELP), 2018

Major Lectureships and Seminars

- Invited Lecturer, Update in Geriatric Medicine, Pittsburgh, PA, April 2019

Honors and Awards

- Honoree, Top Doctors in America, Castle Connolly’s Guide to America’s Top Physicians, 2017-present
- Honoree, Best Doctors in America, Best Doctors, Inc., 2017-present
- Honoree, Best Doctors in Pittsburgh, Pittsburgh Magazine, 2017-present

Leslie P. Scheunemann, MD, MPH

An Assistant Professor of Medicine with dual training in geriatrics and in pulmonary/critical care, Dr. Scheunemann receives support as a Pepper KL2 Scholar through the Geriatric Division’s NIA Pepper Grant. Her research focuses on developing and testing transitional care interventions to improve health, functioning, and quality of life among older adults who survive critical illness and their family caregivers.
Advisory Committee Memberships and Leadership Positions
- Member, Ethics and Conflicts of Interest Committee, American Thoracic Society, 2016-present
- Member, Aging and Geriatrics Special Interest Committee, American Thoracic Society, 2017-present
- Member, Junior Faculty Research Group, American Geriatrics Society, 2017-present

Major Lectureships and Seminars
- Presenter, Western PA Geriatrics Society Clinical Update, Pittsburgh, PA, 2016-present
- Lecturer, ICU Survivorship Series, University of Pittsburgh Internal Medicine Residency, 2016-present
- Invited Ethics Discusant, New Jersey Thoracic Society Annual Meeting, 2018
- Invited Lecturer, Geriatrics Annual Update, 2018
- Invited Lecturer, Panther Grand Rounds, Department of Physical Medicine and Rehabilitation, University of Pittsburgh, 2018
- Invited Lecturer, Office for Advanced Practice Providers Fall 2018 CME Conference, Pittsburgh, PA, 2018
- Invited Lecturer, Department of Occupational Therapy, University of Pittsburgh, 2018-present

Honors and Awards
- Health Services/Epidemiology Research Award, Department of Medicine Research Day, University of Pittsburgh, April 2019

Stasa D. Tadic, MD, MS
An Associate Professor of Medicine, Dr. Tadic has remained involved in the study of geriatric urinary incontinence. Formerly supported by an NIA K23 Career Development Award, he is a member of the Geriatric Continence Research team (Drs. Resnick, Griffiths, and Clarkson). Although now more focused in the clinical arena, he continues to play a role in the group’s efforts.

Advisory Committee Memberships and Leadership Positions
- Academic Chief, Geriatric Medicine, UPMC Mercy, 2015-present
- Team Member and Co-Author, Delirium Progressive Medical Unit and Dementia Room QI projects, Beckwith Institute, 2016-present

Adele L. Towers, MD, MPH
Dr. Towers's research interests are the study of healthcare financing and dementia prevention and treatment.

Study Sections
- Member, Study Section, AHRQ HSQR, 2017-present

Major Lectureships and Seminars
- Lecturer, Geriatric Medicine Workshops, University of Pittsburgh, 1990-present
- Lecturer, Practicing Medicine, What Awaits You?, University of Pittsburgh, 2011-present
- Preceptor, Benedum Geriatric Clinic, University of Pittsburgh Medical Center, 2018-2019
- Invited Lecturer, Health 2.0 Conference, Panel Discussion, Santa Clara, CA, 2018
- Invited Lecturer, RISE Conference, RISE Risk Adjustment Academy, Palm Springs, CA, 2018
- Invited Lecturer, 11th Annual Risk Adjustment Forum for Medicare Advantage, Medicaid and Commercial Plans, Fairmont Grand Del Mar, San Diego, CA, 2018
- Invited Lecturer, RISE Conference, RISE Risk Adjustment Academy, Nashville, TN, March 2019
- Invited Lecturer, Risk Adjustment Forum, Chicago, IL, 2019
Dr. Towers’s research interests are the study of healthcare financing and dementia prevention and treatment.

Adele L. Towers, MD, MPH

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Stasa D. Tadic, MD, MS

Division of Geriatric Medicine

2019 Annual Report

Major Lectureships and Seminars

• Invited Lecturer, Risk Adjustment Forum, Chicago, IL, 2019
• Invited Lecturer, RISE Conference, RISE Risk Adjustment Academy, Nashville, TN, March 2019
• Invited Lecturer, 11th Annual Risk Adjustment Forum for Medicare Advantage, Medicaid and
• Invited Lecturer, RISE Conference, RISE Risk Adjustment Academy, Palm Springs, CA, 2018
• Invited Lecturer, Health 2.0 Conference, Panel Discussion, Santa Clara, CA, 2018
• Lecturer, Practicing Medicine, What Awaits You?, University of Pittsburgh, 2011-present
• Lecturer, Geriatric Medicine Workshops, University of Pittsburgh, 1990-present

Honors and Awards

• Health Services/Epidemiology Research Award, Department of Medicine Research Day, University
• Invited Lecturer, Department of Occupational Therapy, University of Pittsburgh, 2018-present
• Invited Lecturer, Office for Advanced Practice Providers Fall 2018 CME Conference, Pittsburgh,
• Invited Lecturer, Geriatrics Annual Update, 2018
• Invited Ethics Discussant, New Jersey Thoracic Society Annual Meeting, 2018
• Lecturer, ICU Survivorship Series, University of Pittsburgh Internal Medicine Residency, 2016-
• Member, Junior Faculty Research Group, American Geriatrics Society, 2017-present
• Member, Aging and Geriatrics Special Interest Committee, American Thoracic Society, 2017-
• Member, Ethics and Conflicts of Interest Committee, American Thoracic Society, 2016-present

Advisory Committee Memberships and Leadership Positions

• Team Member and Co-Author, Delirium Progressive Medical Unit and Dementia Room QI
• Academic Chief, Geriatric Medicine, UPMC Mercy, 2015-present
• Member, Long Term Care Committee, Division of Geriatrics, 2016-present
• Member, Professional Advisory Board, American Chronic Pain Association, 2011-present
• Member, Education Committee, Geriatric Medicine Division, UPMC, 2012-present
• Co-Director, Center of Excellence in Pain Education, University of Pittsburgh, 2015-present
• Co-Developer, Chronic Pain Management course, UPMC Houstaff, Internal Medicine, 2017-
• Presenter, Internal Medicine Residency Interns, University of Pittsburgh, 2018-present
• Acting Associate Director, Education and Evaluation, Geriatric Research, Education and Clinical
• Presenter, Internal Medicine Residency Interns, University of Pittsburgh, 2018-present
• Co-Developer, Chronic Pain Management course, UPMC Houstaff, Internal Medicine, 2017-
• Member, American Geriatric Society, 2017-present
• Member, Long Term Care Committee, Divison of Geriatrics, 2017-present

Major Lectureships and Seminars

• Lecturer, VA Scan-ECHO Virtual Pain Care Conference, 2018-present
• Lecturer, VA Pittsburgh GRECC Interprofessional Trainees, 2018-present

Stasha D. Tadic, MD, MS

An Assistant Professor of Medicine, Dr. Tyagi is supported by an NIH-R21 Grant. Her research interests include nocturia and geriatric insomnia, including their causes, treatment, and impact, both on each other and on the risk of falls.

Keisha Ward, MD

Dr. Ward provides geriatric primary care and consultative services at the Benedum Geriatric Center.

Professional Affiliations and Society Memberships

• Member, American Geriatric Society, 2017-present
• Member, Long Term Care Committee, Divison of Geriatrics, 2017-present

Debra K. Weiner, MD

A Professor of Medicine with training in geriatrics, rheumatology, and acupuncture, Dr. Weiner researches chronic pain. She is PI of two VA Merit Review studies: 1) a multisite pilot study designed to improve management of chronic low back pain (CLBP) in older adults and 2) a multisite prospective cohort study to ascertain predictors of outcome in veterans undergoing decompressive laminectomy for lumbar spinal stenosis. She is PI (along with Dr. Neelesh Nadkarni) of a Pepper Center-funded pilot project evaluating the impact of medical marijuana on mobility and cognitive function in older adults. She also collaborates on NIH-funded studies that evaluate the contribution of hip osteoarthritis to pain and function in older adults with CLBP and that develop pain education programs for pre-professional students. Finally, she is Co-Director of the University of Pittsburgh’s NIDA-funded Center of Excellence in Pain Education.

Study Sections

• Ad Hoc Reviewer, Grant Applications, NIH, 2013-present

Advisory Committee Memberships and Leadership Positions

• Member, Professional Advisory Board, American Chronic Pain Association, 2011-present
• Member, Education Committee, Geriatric Medicine Division, UPMC, 2012-present
• Co-Director, Center of Excellence in Pain Education, University of Pittsburgh, 2015-present
• Co-Developer, Chronic Pain Management course, UPMC Houstaff, Internal Medicine, 2017-
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• Editorial Board, Pain Medicine, 2000-present
• Senior Editor, Pain Medicine, 2011-present

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Editorships

• Editorial Board, Pain Medicine, 2000-present
• Senior Editor, Pain Medicine, 2011-present

Major Lectureships and Seminars

• Lecturer, VA Scan-ECHO Virtual Pain Care Conference, 2018-present
• Lecturer, VA Pittsburgh GRECC Interprofessional Trainees, 2018-present
• Presenter, 27th Annual Clinical Update in Geriatric Medicine, Pittsburgh PA, 2018
• Course Director, Pittsburgh Pain Practicum, VA GeriScholars Program, 2018-present
• Presenter, Department of Physical Medicine & Rehabilitation Grand Rounds, University of Texas Southwestern, Dallas TX, 2018

Rollin M. Wright, MD, MA, MPH
An Assistant Professor of Medicine, Dr. Wright’s interests as a clinician educator include curriculum development and evaluation in geriatric medicine, education research, advanced dementia, interprofessional education, terminal decline, and skilled and long-term care. Her education research is funded by a HRSA Geriatric Workforce Enhancement Program (GWEP) grant.

Advisory Committee Memberships and Leadership Positions
• Assistant Chair, American Medical Directors Association Annual Program Planning Committee, 2014-present
• Course Director, Interprofessional Geriatrics Week, October 2015-present
• Project Director, HRSA Geriatric Workforce Enhancement Program Project 3 (Advanced Dementia Communication Competency), 2015-2018
• Chair, Education Committee, Division of Geriatric Medicine, University of Pittsburgh, 2015-present
• Chair, Awards Committee, Pennsylvania Geriatrics Society-Western Division, 2016-Present

Major Lectureships and Seminars
• Invited lecturer, University of Pittsburgh Annual Medical Ethics Conference, University of Pittsburgh, March 2019
• Symposium Speaker, 2019 AMDA-PALTC annual conference, Atlanta, GA, March 2019
• Invited Lecturer, Pennsylvania Medical Society Update in Internal Medicine, Pittsburgh, PA, April 2019
• Invited Lecturer, UPMC Mercy Geriatric Clinical Update, UPMC Mercy Hospital, May 2019

Honors and Awards
• Honoree, Best Doctors, Pittsburgh Magazine, 2016-present
TEACHING ACTIVITIES

Division faculty members teach trainees at every level, from high school student to practicing physician. In addition to the training noted in the research section, we also teach advanced practice providers and trainees in pharmacy, nursing, psychology, chaplaincy, physical/occupational therapy, and social work.

Medical Students
Led by Dr. Wright, we teach an innovative and required week-long interprofessional geriatrics course for more than 200 students from the schools of medicine (MS-3), nursing, dentistry, pharmacy, and allied health (OT, PT, Speech, Social Work, Nutrition & Dietetics, and PAs). Evaluation shows improved knowledge, attitudes, and skills in geriatric medicine and team-based practices. In addition, Drs. Scheunemann and Resnick direct a novel Geriatrics Area of Concentration, which enables medical students to “major” in geriatrics (12 in FY19). In FY19, Drs. Greenspan and Wright mentored three medical students, whose projects resulted in two David Martin awards and five poster presentations at local and national conferences. Finally, we sponsor scholarly projects for three to seven students/year, many of whom are funded by our T32.

Medical Residents
We teach a required month-long geriatrics experience in the clinic, home, hospital, and nursing home settings for all UPMC PUH and Mercy residents in internal medicine. For FY20, the residency agreed to revise the PUH residency program: all interns will spend two weeks on the geriatrics consult service and all PGY2 residents will spend a month with us, split between our geriatric hospitalist service and our outpatient and SNF practices. Led by Dr. Wright, we also offer an innovative Geriatrics Track that allows four to nine residents to “major” in geriatrics; these residents base their continuity clinic in geriatrics and also care for panels of homebound patients. Dr. Wright has also created four advanced geriatrics rotations which attracted three additional Track and non-Track residents. Several of these innovations have been featured at national AGS meetings, including the “Roadmap,” milestones, and pharmacology QI projects, as well as a new curriculum to teach residents how to communicate and work with patients and families living with dementia.

Geriatric Medicine Fellowship
In FY19 we trained four clinical fellows, including a board-certified cardiologist who completed an innovative training track in geriatric cardiology in preparation for an academic career. Our geriatric-palliative care fellow is completing her training program, which includes an integrative scholarly project, and our academic-track fellow completed her Masters in Medical Education and has accepted an academic position. We also recruited four excellent fellows for FY20.
In FY19, the geriatric medicine and psychiatry fellowships embraced and embedded a longitudinal curriculum developed by Dr. Wright to teach fellows how to work with people and families living with dementia and how to lead team-based dementia behavior problem solving in the long-term care setting. Five fellows presented final projects to improve the challenging dementia behaviors of five patients they followed during the fellowship year. Dr. Wright presented this curriculum at the 2019 AMDA-PALTC conference.

Dr. Wright also mentored Rachel Jantea, our first T32 education fellow. Dr. Jantea completed a Masters of Science in Medical Education as well as a research project in which she designed, implemented, and evaluated an innovative curriculum designed to teach interprofessional teamwork to health sciences students rotating through her Interprofessional Dedicated Education Unit (IPDEU) at PUH. She also presented this at two national conferences.

**Advanced Practice Provider Students**

We continue to train both Physician Assistant and CRNP students in acute care geriatrics.

**High School Students (University of Pittsburgh Health Scholars Academy)**

The Division teaches in this highly competitive—and highly rated—summer program on aging; 25 elite high school students from throughout Pennsylvania are selected to participate each year.

**Continuing Medical Education (CME)**

Recognized by a national award from AGS, this year our annual CME course again attracted 400 attendees from more than 20 states. Dr. Greenspan continues to teach programs on osteoporosis which she helped to create for the American Academy of Family Medicine, ISCD, and the National Osteoporosis Foundation. Several faculty led “Meet the Professor” sessions at national meetings (e.g., ACP, AGS).

**Other**

Our faculty author chapters on aging for major textbooks, including Cecil’s (Resnick; Greenspan), UpToDate (Weiner), Braunwald’s The Heart (Forman), and DiPiro’s Pharmacotherapy: A Pathophysiologic Approach (Hanlon). Division faculty have also developed geriatric curricula for surgical subspecialties, including ENT, urology, and gynecology.

**Clinical Fellows, FY2019**

**Current Fellows**

**Nivedita Gunturi, MD**

*Medical School:* Sri Ramachandra University, India  
*Residency:* UPMC

**Departing Fellows**

**Alison O’Donnell, DO, MPH**

*Medical School:* Philadelphia College of Osteopathic Medicine  
*Residency:* Allegheny Health Network, Pittsburgh, PA  
*Current Position:* Private Practice

**Deirdre O’Neill Vailas, MD, MS**
In FY19, the geriatric medicine and psychiatry fellowships embraced and embedded a longitudinal curriculum developed by Dr. Wright to teach fellows how to work with people and families living with dementia and how to lead team-based dementia behavior problem solving in the long-term care setting. Five fellows presented final projects to improve the challenging dementia behaviors of five patients they followed during the fellowship year. Dr. Wright presented this curriculum at the 2019 AMDA-PALTC conference.

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**Clinical Fellows, FY2019**

**Current Fellows**

- **Nivedita Gunturi, MD**
  - Medical School: Sri Ramachandra University, India
  - Residency: UPMC

**Departing Fellows**

- **Alison O’Donnell, DO, MPH**
  - Medical School: Philadelphia College of Osteopathic Medicine
  - Residency: Allegheny Health Network, Pittsburgh, PA
  - Current Position: Private Practice

- **Deirdre O’Neill Vailas, MD, MS**
  - Medical School: University of Alberta
  - Residency: University of Alberta
  - Current Position: Assistant Professor, Department of Medicine, Division of Cardiology, University of Alberta

**Pratik Pandit, MD**

- **Medical School:** Florida State University College of Medicine
- **Residency:** Saint Louis University
- **Current Position:** Physician, Jacksonville, FL

**Fellow Activities**

**Alison O’Donnell, DO, MPH**

**Presentations and Abstracts**

- **O’Donnell A**, Pandit P, Bowers K, Naumovski J, “How often do we have to remind ourselves to use fluoroquinolones more judiciously?,” Department of Medicine Research Day, University of Pittsburgh, Pittsburgh, PA, April 2019

**Deirdre O’Neill Vailas, MD, MS**

**Presentations and Abstracts**


**Awards**

- Detweiler Traveling Fellowship Award, Royal College of Physicians and Surgeons of Canada, July 2018
Pratik Pandit, MD

Presentations and Abstracts

- O’Donnell A, Pandit P, Bowers K, Naumovski J, “How often do we have to remind ourselves to use fluoroquinolones more judiciously?,” Department of Medicine Research Day, University of Pittsburgh, Pittsburgh, PA, April 2019

Postdoctoral Fellows, FY2019

Rachel Jantea, MD

Mentors: Rollin Wright, MD, MA, MPH, and Debra Weiner, MD

Dr. Jantea designed a collaborative-practice curriculum for health profession students and providers caring for older adults on a neurological trauma unit at UPMC. She is studying its impact on educational and healthcare outcomes.
THREE-YEAR BIBLIOGRAPHY

Neil M. Resnick, MD  Division Chief


Namita S. Ahuja-Yende, MD


Becky D. Clarkson, PhD


**Daniel E. Forman, MD**


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Amelia S. Gennari, MD


Susan L. Greenspan, MD


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Aditi U. Gurkar, PhD


Steven M. Handler, MD, PhD


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Joseph T. Hanlon, PharmD, MS


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Mary P. Kotlarczyk, PhD


David A. Nace, MD, MPH


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**Anne B. Newman, MD, MPH**


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Subashan Perera, PhD


Subashan Perera, PhD


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**Eric G. Rodriguez, MD, MPH**


**Michelle I. Rossi, MD, MPH**


**Fred H. Rubin, MD**


**Leslie P. Scheunemann, MD, MPH**


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Stasa D. Tadic, MD, MS

Shachi Tyagi, MD, MS


Debra K. Weiner, MD


Rollin M. Wright, MD, MA, MPH


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EXECUTIVE EDITOR
Nichole Radulovich, MEd, CRA
Executive Administrator

SENIOR EDITOR, FACT-CHECKER, AND GRAPHIC DESIGN
Katie Nauman
Academic Affairs Administrator

PROJECT COORDINATORS
Kristen Bagwell
Web Producer

Jane-Ellen Robinet
Communications Coordinator

GERIATRIC MEDICINE CONTENT MANAGERS
Michelle Ardolino
Administrative Assistant to Dr. Neil Resnick and Lisa Gundel

Vanessa Benkovich
Division Operations Manager

DATABASE DEVELOPMENT AND SUPPORT
Nemanja Tomic
Database Developer

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