



## Breast Cancer Team Needs You

### ■ Patient, Primary Care Provider Key Players

It takes teamwork to provide the kind of comprehensive breast cancer care available at the UAMS Winthrop P. Rockefeller Cancer Institute – from screening and diagnosis to treatment and survivorship.

The multidisciplinary breast team includes physicians, nurses and other professionals who specialize in diagnosing and fighting breast cancer. The team is made up of physicians, several of whom are fellowship trained, including surgeons, radiologists, medical, radiation and surgical oncologists, plastic surgeons, geneticists and pathologists. In addition, other health care providers offer patients a full array of services and include genetic counselors, registered nurses and advanced practice registered nurses, behavioral medicine specialists and social workers.

The team approach enables UAMS to offer some of the most advanced breast care treatments and technologies in the country. The Breast Center's imaging services include tomosynthesis (3-D mammography) with same-day results and a risk calculation on every patient.

Women who have been diagnosed with breast cancer may be eligible for clinical trial enrollment and advanced



*A team approach is key to providing the highest level of compassionate breast cancer care available in Arkansas. At the UAMS Winthrop P. Rockefeller Cancer Institute, breast surgeons work alongside medical oncologists, radiation oncologists, radiologists, plastic surgeons, advanced practice nurses, geneticists, pathologists and others.*

surgical procedures, including dual breast reconstruction at the same time as a mastectomy, nipple-sparing surgery and procedures to avoid contour defects after lumpectomies. In addition, the surgical team uses ultrasound technology to ensure clean margins.

The UAMS Radiation Oncology Center is equipped with two Varian TrueBeam STx linear accelerators capable of delivering precision external beam radiation with ultra-high doses rates. The center, which is the only facility in Arkansas to offer radiation therapy for both pediatric

“ If it's being done in the world of breast cancer, it's being done here at UAMS for our patients. ”

**Ronda Henry-Tillman,  
M.D., F.A.C.S.**

## The Breast Team Offers:

- A team of specialists who meets regularly to consult on each patient's unique needs
- Screening, surgery, chemotherapy and radiation therapy provided in one location
- Fellowship-trained physicians
- Clinical trials and therapies unavailable at other facilities
- All forms of breast imaging, including digital 3-D mammography, MRI and ultrasound
- Saturday and after-hours mammogram appointments with 3-D technology and same-day results
- Bilingual physicians

and adult patients, also offers a variety of other treatment techniques unique in Arkansas.

"If it's being done in the world of breast cancer, it's being done



here at UAMS for our patients," said **Ronda Henry-Tillman, M.D., F.A.C.S.**, a breast surgical oncologist and chief of Breast Oncology in the College of

Medicine Department of Surgery. Being recognized as one of only two National Accreditation Programs for Breast Centers in the state, patients can be assured that the Breast Cancer Clinic is held to the highest standards of care for patients with diseases of the breast.

But even a team that extensive isn't complete without the patient and their primary care provider.

Appointments to the Breast Center's imaging services can be made by calling **501-526-6100**. Appointments to the Breast Cancer Clinic can be made at **501-296-1200**. For more information, visit **UAMShealth.com/BreastCancer**.

At UAMS, the breast team recognizes that they can be key – even the most valuable player.

"No matter where you are, if your patient comes here, you become a part of that team," Henry-Tillman said. "There is always an open-door policy. Communication and trust are important to us. Our patients know that because they are face to face,

interacting with us, but we want their primary care physicians to get that message as well."

Referring physicians receive a phone call and a letter outlining the ways in which they can remain involved in their patient's care. They can participate by video, phone or in person when their patient is being presented to the breast team during its multidisciplinary conferences on patient progress. Staff are available for discussions with the patient regarding second opinions or recommendations from their primary care doctor.

"A big part of our approach is recognizing that care is individualized, and there is a lot of discussion that needs to take place both with the patient and their doctor for us to find the path that is tailored to their individual needs," Henry-Tillman said. "You remain a key part of your patient's care throughout the process." ■

## January 2018 Message from Dr. Jansen



Dear Colleagues,

UAMS is pleased to announce that CME Outreach LearnOnDemand courses will be **FREE** beginning in January. These multidisciplinary teleconferences focus on chronic disease, health-care trends and interprofessional collaboration. All disciplines are welcome and encouraged to participate. We have hundreds of activities for continuing education available.

**LearnOnDemand.org** allows health care professionals to access lectures anytime and take classes online to earn continuing education (CE) credits. LearnOnDemand was developed under the UAMS Center for Distance Health and allows users to track their educational hours and credits earned inside or outside the program.

The site is compliant with CE requirements for all three national accrediting organizations: for physicians, nurses and pharmacists. Certificates of attendance are available for all other health-care related disciplines. To request speakers or topics, please contact Melanie Meyer at 501-686-8206 or [melanie@uams.edu](mailto:melanie@uams.edu).

We hope this is a helpful resource for you.

Sincerely,

Mark T. Jansen, M.D.  
Medical Director  
UAMS Physician Relations & Strategic Development

Please visit our website for referring providers:

**UAMShealth.com/MD**

### Content includes:

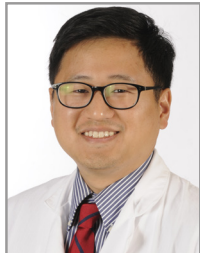
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# News to Know: Updates from UAMS

## Kim Joins Radiation Oncology Center

Radiation oncologist **Thomas Kim, M.D.**, has joined the UAMS Radiation Oncology Center.

Kim's medical and research interests include breast,



gynecologic and gastrointestinal malignancies.

He completed his internship at Boston Medical Center and radiation oncology

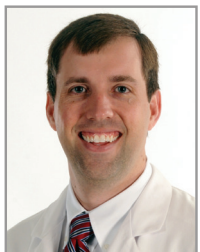
residency at Northwestern Memorial Hospital in Chicago.

*To make a referral, call 501-526-6155.*

## O'Malley Joins Sports Medicine Team

**Lawrence O'Malley, M.D.**, a sports medicine specialist, has joined the UAMS Orthopaedics Clinic at Autumn Road in Little Rock.

He completed his internship



and residency at Greenville Health System's Steadman Hawkins Clinic of the Carolinas in Greenville, South Carolina. O'Malley

completed an orthopaedic sports medicine fellowship at Mississippi Sports Medicine and Tulane University.

*To make a referral, call 501-526-1046.*

## Rodriguez Joins Department of Neurosurgery

**Analiz Rodriguez, M.D., Ph.D.**, has joined the Department of Neurosurgery and sees patients in the UAMS Winthrop P. Rockefeller Cancer Institute.



Her specialties include primary and secondary brain tumors, endoscopy, radiosurgery, laser thermal ablation and spinal tumors.

Rodriguez completed her general surgery internship at the University of Pittsburgh and neurosurgery residency at Wake Forest University Baptist Medical Center in Winston Salem, N.C.

Rodriguez served as an instructor in neurosurgical oncology at City of Hope National Medical Center in Duarte, Calif.

*To make a referral, call 501-686-5270.*

## Thoracic Surgeon Muesse Joins Cancer Institute

Fellowship-trained thoracic surgeon **Jason Muesse, M.D.**, has joined the Surgical Oncology Clinic at the UAMS Winthrop P. Rockefeller Cancer Institute.

Muesse specializes in the surgical treatment of diseases involving the chest, including the lungs, esophagus and chest wall.



Muesse's clinical interests include lung cancer, esophageal cancer, benign esophageal diseases, including achalasia

and paraesophageal hernias, chest wall resection and reconstruction, hyperhidrosis, and mediastinal tumors.

He completed his internship and residency in general surgery at Houston Methodist Hospital.

He completed his fellowship training in thoracic surgery at Emory University in Atlanta. He also completed the American Association for Thoracic Surgery Graham Foundation Surgical Robotics Fellowship in 2017.

*To make a referral, call 501-296-1200.*

## Nalleballe Joins as Stroke Neurologist

**Krishna Nalleballe, M.D.**, has joined the Department of Neurology as a stroke neurologist.

Nalleballe sees emergency stroke patients at UAMS Medical Center and works with recovering patients at the Stroke Services Clinic. Also, Nalleballe serves as

## Physician Relations

### Physician Relations & Strategic Development

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## Quiz of the Month

### Question

A 32-year-old man presents with flushing, a burning sensation and paresthesias after eating canned tuna. What is the diagnosis?

Scorpid fish poisoning is the most common seafood-associated disease in the U.S. and is often mistaken for seafood allergy. Symptoms are caused by a buildup of amines, especially histamine, due to bacterial overgrowth in improperly stored fish.

**Answer**

(Continued on page 4)

# News to Know: Updates from UAMS

(Continued from page 3)



a consulting neurologist with the Arkansas Stroke Assistance through Virtual Emergency Support (AR SAVES) network, hosted at UAMS. AR SAVES assists doctors treating emergency stroke patients across the state via two-way video.

Nalleballe comes to UAMS from Jamaica Hospital Medical Center in New York, where he was a neurologist and director of neurological research, and the New York Institute of Technology College of Osteopathic Medicine in Old Westbury, New York, where he was an assistant professor.

*To make a referral, call 501-526-1000.*

## Howard Added to Sports Medicine Team

**Antonio T. Howard, M.D.,**



has joined the Department of Physical Medicine & Rehabilitation as a board-certified physical medicine and rehab physician specializing in

non-operative orthopaedics in sports medicine.

Howard completed his residency at Montefiore Medical Centre in the Bronx, New York, and his fellowship at Summa Health System in Akron, Ohio.

He specializes in non-operative orthopaedics, electrodiagnostics (EMG), sports-related injuries and concussions, ultrasound-guided injections and musculoskeletal medicine.

*To make a referral, call 501-221-1311.*

## Orthopaedics Opens Clinic on Colonel Glenn Road

UAMS Orthopaedics has opened a clinic at 10815 Colonel Glenn Road in Little Rock offering orthopaedics, physical therapy and occupational therapy.

Orthopaedic trauma patients will continue to be seen at the main UAMS campus. UAMS' other orthopaedics locations – 600 Autumn Road and 2 Shackelford W. Blvd. in Little Rock – will remain open. Some physicians have changed locations, but the referral process remains the same.

*To make a referral, call 501-526-1046.*

## Academic Appointments

Nationally renowned pediatric cardiothoracic surgeon **Brian Reemtsen, M.D.**, has been named



director of the Heart Institute at Arkansas Children's Hospital. He will also serve as professor of surgery in the UAMS College of

Medicine's Department of Surgery. Previously he was with Mattel Children's Hospital and the David Geffen School of Medicine, UCLA.

## New Physicians

- **Cardiology** – Moses Kelley, M.D.; Aristotelis Papayannis, M.D.
- **Nephrology** – Aparna Sharma, M.D.
- **Neurology** – Megan Alcauskas, M.D.; Dale M. Carter, M.D.
- **Neurophysiology** – Romina Shirka, D.O.
- **Orthopaedics** – Kristin Garner, M.D.; Jeffrey Stambough, M.D.
- **Transplant Nephrology** – Lyle Burdine, M.D.
- **Vascular Surgery** – Kyla Shelton, M.D.

## UAMS PHYSICIAN RECRUITMENT & PROVIDER PLACEMENT PROGRAM

**The UAMS Physician Recruitment & Provider Placement Program** has a team of placement specialists dedicated to serving the recruitment needs of our partner communities, UAMS Regional Campuses and UAMS Faculty. Physician/provider opportunities are available in all specialties throughout Arkansas.

### FEATURED JOBS

**Internal Medicine Transition Director:** UAMS is seeking a transition director to facilitate patient care, develop educational materials and refine the tools and practices in which young adults in general/adolescent pediatric and pediatric specialty care are transitioned to the adult-focused health care system.

**Pediatric Opportunities:** Private practice and academic opportunities available in central, north central and south central Arkansas

**Geriatric Opportunities:** Private practice opportunity in northeast Arkansas and opportunities at UAMS campuses in Little Rock, Pine Bluff and Springdale

**Orthopaedic Opportunities:** Orthopaedic spine physician opportunities in Batesville, Jonesboro and Pine Bluff

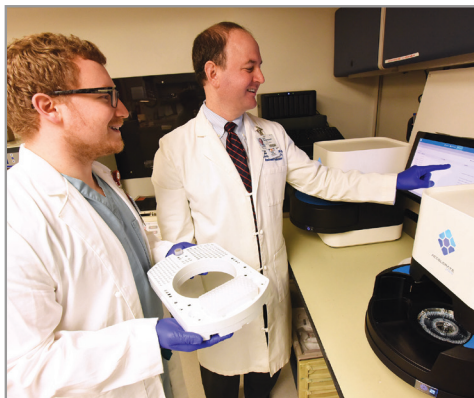
### Recruitment services contacts:

**Carla Alexander: 501-686-7934 or [carla@uams.edu](mailto:carla@uams.edu)** ■ **Wendy Sheridan: 501-686-7831 or [wendy@uams.edu](mailto:wendy@uams.edu)**

For a complete listing of job descriptions and opportunities, visit: [MedJobArkansas.com](http://MedJobArkansas.com)

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## New Technology Significantly Reduces Pathogen Identification Time



Eric Rosenbaum, M.D., M.P.H., (right) shows the Accelerate Pheno to resident Jonathon Gralewski, D.O., in the UAMS Clinical Microbiology Laboratory. The Accelerate Pheno identifies pathogens associated with blood-borne infections and the antibiotics most effective against them.

The Accelerate Pheno™ system is the latest addition to the UAMS Clinical Microbiology Laboratory's array of industry-redefining technologies for the identification and treatment of infectious diseases.

"We are one of the first in the world introducing this technology," said

**Eric Rosenbaum,**

**M.D., M.P.H.**, medical director of the lab. "The way it works is nothing short of revolutionary – part of a wider renaissance in clinical microbiology we are experiencing. But more importantly for our clinicians and patients, what it gives them is time."

The Accelerate Pheno is an FDA-approved system that identifies pathogens associated with life-threatening blood-borne infections – and identifies the antibiotics most effective against them. Conventional methodology generally takes two days to identify a pathogen and about three days for the antibiotic results.

"What makes the Accelerate Pheno groundbreaking is that it can identify a pathogen in one hour and then tell us how to treat it several hours later. For critically ill patients with sepsis, hours compared to days can save lives – this marks a major change in the way UAMS will now approach these complex infections," Rosenbaum said.

Most significant is the ability of the Accelerate Pheno to test a pathogen's susceptibility to various antibiotics and provide a score indicating which antibiotic would be most effective.

"This feature is new and unique," Rosenbaum said. "It means getting patients on the most appropriate antibiotic days faster, off more-expensive broad spectrum antibiotics and on the road to recovery."

The Accelerate Pheno is one of the best examples of "medicine meets the tech world." The instrument records video of a pathogen's growth and uses computer algorithms to compare it to an archive of growth pattern information – this is a first for clinical diagnostics.

The Accelerate Pheno is just one of several technologies recently acquired by UAMS that improve identification of diseases, including tuberculosis, meningitis, methicillin-resistant staphylococcus aureus (MRSA), influenza, clostridium difficile (C. diff) and more.

**For more information, call 501-526-7511 or email [erosenbaum@uams.edu](mailto:erosenbaum@uams.edu).** ■

## PHYSICIAN PROFILE

### **Rachel L. Slotcavage, M.D.**

Assistant Professor, Endocrine and General Surgery, Department of Surgery  
Assistant Professor, Division of Endocrinology, Department of Internal Medicine



#### **What inspired you to become a doctor?**

I loved science from an early age. I also grew up working with my hands – crocheting, quilting and helping with my family's construction business. When I discovered I could not only combine science and

dexterity, but also help people in the process, I knew medicine was for me.

#### **What do you like most about your specialty?**

That's difficult. I love the art of medicine and enjoy the diagnostic process almost as much as the surgical procedures. Most importantly, I can typically assure my patients that they will live a long, full life postoperatively, which is not always true when dealing with tumors of other organs.

#### **What makes you unique among your peers?**

I am the only fellowship-trained endocrine surgeon in Arkansas. I also perform my own lifelong follow-up care for my cancer patients. I am a passionate cyclist and endurance athlete, and I think my dedication to whole-body health translates to my professional care in unique ways.

#### **What are your clinical specialties?**

I am an endocrine surgeon by training. This starts with a general surgery residency, followed by fellowship training with a focus on surgical diseases of the thyroid, parathyroid and adrenal glands, and neuroendocrine pancreas disorders such as insulinoma. I perform a comprehensive neck ultrasound at new patient appointments and can also offer patients thyroid biopsy during that appointment, if clinically indicated. I perform total and partial thyroidectomies, neck dissections for metastatic or recurrent disease, and parathyroid exploration and am happy to take on cases of remedial thyroid and parathyroid surgery. I perform both laparoscopic and retroperitoneoscopic adrenalectomies and can often offer laparoscopic partial pancreatectomy or tumor enucleation.

#### **What number can doctors use to make a referral to you?**

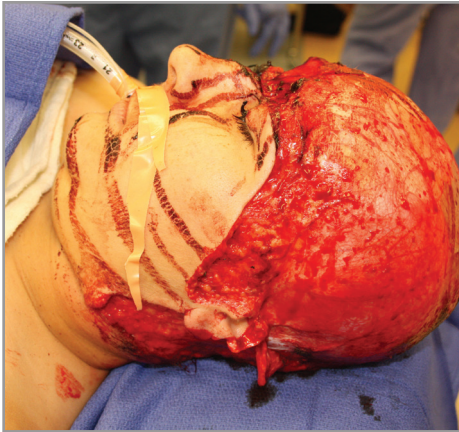
New patients: 501-296-1200

Office: 501-686-6648

[RSlotcavage@uams.edu](mailto:RSlotcavage@uams.edu)

## MEDICAL CASE STUDY

# Scalp Reattachment



*Prepping the patient for surgery*



*The avulsed scalp*

### INITIAL CONTACT

A 21-year-old female patient with a traumatic total scalp avulsion was flown by helicopter from Russellville to UAMS.

She was working in a factory when machinery caught her hair and removed her scalp.

### ASSESSMENT

When head and neck surgeon **Mauricio Moreno, M.D.**, met the patient, her wounds were covered in compressive bandages to prevent further bleeding. She was in shock, but awake and responsive.

Moreno discussed replantation with the patient and family. He explained that such cases are rare, with no guarantees of success. The more common procedure is to replace the scalp with skin graft from the abdomen or thigh.

The advantages of replantation include retaining her hair and the possibility to regain sensation and movement, as well as a better cosmetic outcome.

Challenges include the potential for blood loss, the complexity of the surgery and the potential for rejection or failure of the replantation.

The patient agreed to the replantation attempt and was in the operating room within three hours of the accident, which is

within the acceptable timeframe for tissue replantation.

### PROCEDURES

The surgery lasted from 7 p.m. to 5 a.m. Moreno was assisted by two otolaryngology chief residents.

The affected area of scalp extended from the nape of the neck, up and over to the forehead and included part of one eyelid. Both ears were affected, leaving only the lobes intact. Moreno has been able to find in recent medical literature fewer than 20 cases as complex as this one.

The patient was put under general anesthesia. The team performed a surgical debridement of her face to remove devitalized tissue. The first major task was to explore the temporal area and avulsed scalp to identify the stumps of the superficial temporal vessels. Excessive vascular damage would prevent the restoration of blood supply, making the replantation attempt moot.

Starting with the patient, they cleaned the vessels on both sides, trimming them back to healthy tissue. They moved to the scalp, cleaning and then trimming the hair and aggressively irrigating the tissue, followed by a debridement. They identified, cleaned and trimmed the transected vessels on both sides of the scalp.

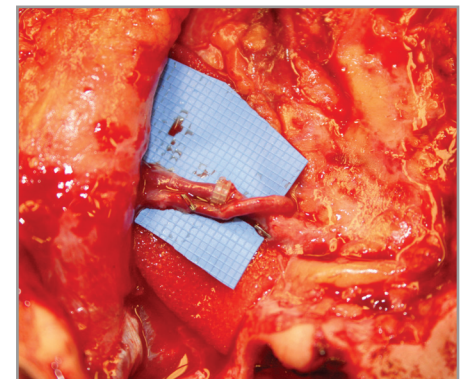
The team proceeded to the next phase: microvascular anastomosis.

The scalp was secured to the patient with a couple of holding stitches. The surgeons isolated the right-side artery on both the patient and the avulsed tissue and used a double Acland clamp to hold the two ends of the vessels together. Using 10-0 nylon suture in an interrupted fashion, they anastomosed the entire perimeter of the artery, which was approximately 2.5 mm in diameter.

Upon release of the clamps, a significant amount of blood flow returned to the scalp. It began to pink up and bleed around the edges, and blood began flowing out of the superficial temporal vein.

Working with the right-side vein, the technique was similar, except the surgeons used a venous coupling device to expedite the process.

Because of the rich vascular



*Completed arterial and venous microanastomosis*

network of the scalp, it is possible to perform a replantation by anastomosing just one set of vessels. However, given the extension of the avulsed tissue, it was decided to proceed with a bilateral anastomosis.

The procedure was then repeated on the left side, bringing the total microsurgical time to about three hours.

The remainder of the surgery



The patient in the immediate days after the scalp replantation

was devoted to a meticulous multi-layered reconnection of muscle, cartilage, lacerated nerves, skin, and scalp components. This painstaking process took about five additional hours, but restoring the anatomic continuity of all these structures was critical to achieve the best outcome.

Regarding the eyelid, **Christopher T. Westfall, M.D.**, director of the Harvey & Bernice Jones Eye Institute, performed multiple subsequent surgeries to restore appearance and function.

**FOLLOW-UPS**

Moreno told the family the reattachment had been successful, but statistically there was a high chance for failure. It was now time to wait and see.

Moreno put the patient on a low dose of heparin as a prophylaxis for thrombosis. The patient was admitted to the progressive head-and-neck floor, a unit with a high nurse-to-patient ratio and where staff are specifically trained in flap care. Because UAMS performs a high volume of microvascular



The patient at about two years after surgery

head-and-neck cases, the structure and staff were in place to care for the patient. Without this support, Moreno said he likely would not have attempted the surgery, because such care is so vital to successful outcomes.

In the days following, a small portion of tissue near the nape of her neck did not thrive. The blood flow to that area was outside of that provided by the reattached vessels.

She remained in the hospital for about a week. After a month, when the surgeons could be sure of the extent of the dead tissue, she returned to have it removed. The affected area was small enough – about 1.5 cm – that Moreno was able to simply join the edges of healthy tissue together. No skin grafting was needed.

The accident occurred in June 2014. By mid-2017, the patient had regained sensation in her forehead and was beginning to regain movement.

**For consult or transfer, call 501-686-6080. To make a referral, call 501-526-1046. ■**

**Mauricio Moreno, M.D.**



Associate professor  
Department of  
Otolaryngology  
- Head and Neck  
Surgery  
UAMS College of  
Medicine

**Education**

Medical degree,  
Pontificia Universidad Católica de Chile School  
of Medicine

**Residency**

General surgery, University of Valparaíso, Chile  
Otolaryngology - head and neck surgery,  
University of Chile, Santiago de Chile

**Fellowship**

Head and neck surgery visiting fellow,  
Department of Otolaryngology, University of  
Pittsburgh  
Head and neck surgical oncology, Department  
of Head and Neck Surgery, the University of  
Texas, M. D. Anderson Cancer Center, Houston  
Microvascular reconstructive surgery,  
Department of Plastic and Reconstructive  
Surgery, the University of Texas, M. D.  
Anderson Cancer Center, Houston  
Surgical endocrinology, Departments of  
Surgical Oncology and Head and Neck  
Surgery, the University of Texas, M. D.  
Anderson Cancer Center, Houston

**Christopher T. Westfall, M.D.**



Professor  
Department of  
Ophthalmology  
UAMS College of  
Medicine  
Director  
Harvey & Bernice  
Jones Eye Institute

**Education**

Medical degree, Ohio State University College  
of Medicine, Columbus

**Residency**

General surgery, Keesler U.S. Air Force  
Medical Center, Biloxi, Mississippi  
Ophthalmology, Wilford Hall U.S. Air Force  
Medical Center, Lackland, Texas

**Fellowship**

Oculoplastic surgery, Massachusetts Eye and  
Ear Infirmary, Harvard Medical School, Boston

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- Complete the form and submit

The Appointment Center will email you within 24-72 hours to assist with your appointment request. You will receive a faxed notification with the day and time once it is scheduled.

ADDRESS SERVICE REQUESTED

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- Earn certificates of attendance for a variety of other disciplines

### LearnOnDemand.org

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To request speakers or topics or to learn more about how the UAMS Physician Relations & Strategic Development team can help you, visit

[UAMShealth.com/MD](http://UAMShealth.com/MD)

## All classes now FREE!

### JANUARY 9

#### Calling the Ortho Consult: 10 Things to Know

Steven Cherney, M.D.  
*Department of Orthopaedics*

### JANUARY 16

#### Infection Management in a Patient Post Solid Organ Transplant

Lyle J. Burdine, M.D., Ph.D.  
*Department of Surgery*

### JANUARY 23

#### Capsule Endoscopy

Shashank Garg, M.D.  
*Department of Internal Medicine*

### JANUARY 30

#### Professional Development Dealing with Difficult Patients

Steve Dickens  
*SVMIC*

### FEBRUARY 6

#### Common Hip Conditions

Lawrence O'Malley, M.D.  
*Departments of Orthopaedics*

### FEBRUARY 13

#### Blunt and Penetrating Neck Trauma

Katherine Kimbrough, M.D.  
*Department of Surgery*

### FEBRUARY 20

#### Advance Care Planning

Masil George, M.D.  
*Department of Geriatrics*

### FEBRUARY 27

#### Professional Development To Text or Not to Text: Social Media Pitfalls in the Digital Age

Mark A. Hagemeyer  
*Office of General Counsel*

### MARCH 6

#### Rx: New Insulin Therapies

Kaci Thiessen, Pharm.D., BCACP  
Christopher Johnson, Pharm.D., M.Ed.  
*UAMS College of Pharmacy*

### MARCH 13

#### Adult Sickle Cell

Megan Davis, M.D.  
*Department of Internal Medicine*

### MARCH 20

#### Glaucoma

Christopher Lee, M.D.  
*Department of Ophthalmology*

### MARCH 27

#### Professional Development Medical Marijuana

Jennifer L. Smith, JD, RN  
*UAMS Associate General Counsel*