

Caring

Headlines

December 19, 2019

Sullivan first holder of MGH Trustees Endowed Chair in Physical and Occupational Therapy

(See story on page 4)

“Just think what this department will look like in twenty years. Imagine the possibilities.”

—Michael Sullivan, PT, director of Physical & Occupational Therapy, inaugural holder of the MGH Trustees Endowed Chair in Physical and Occupational Therapy.



The DAISY Awards

a 'thank-you' to nurses everywhere!

During our Nurse Week celebration this year, I announced that MGH would join thousands of healthcare organizations around the world in adopting the DAISY Award program. DAISY Awards were created in 1999 by the family of Patrick Barnes as a way of thanking the nurses who cared for him in the weeks leading up to his death. The award recognizes skillful, compassionate care and the 'super-human work nurses do for patients and families every day.'

Under the oversight of Lore Innamorati, RN, and Marianne Ditomassi, RN, we have created a DAISY Award Selection Committee comprised of nurses from inpatient and ambulatory settings throughout the hospital.

The Selection Committee includes: co-chairs, Trang Vo, RN; and Cath-

erine Chittick, RN; and members, Christina Alexander, RN; Brandi Bonica, RN; Virginia Clarke, RN; Barbara Gallagher, RN; Elizabeth Mover, RN; Patricia Mullen, RN; Caitlin Nagle, RN; Melissa Roddie, RN; and Rai Singh, RN.

The committee will meet in early 2020 to begin to determine eligibility criteria, develop scoring guidelines, and discuss other logistics.

But I can tell you that six recipients will be chosen each quarter, culminating with a surprise celebration on their units. Recipients will receive a certificate of recognition, a hand-crafted healer's touch sculpture, and a DAISY Award pin.

Initially, the award will focus on clinical nurses (as prescribed by the DAISY Foundation) but we plan to expand the scope of recognition to



Debbie Burke, RN
senior vice president for Nursing & Patient Care Services and chief nurse

include other disciplines, teams, and leadership.

I'm excited to implement this new recognition program at MGH. The challenge will be limiting ourselves to just six recipients per quarter!

For more information, e-mail MGH DAISYAward@partners.org or go to: www.mghpcs.org/eed/daisy.

Debbie
Debbie Burke

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Debbie's Photo Gallery

(At right): It's always a pleasure and a learning experience when I have an opportunity to meet with our Patient and Family Advisory Council, as I did earlier this month.



(At left): White 8 Medical Unit observes Thanksgiving with decorative hats and a fun-loving attitude.

(Above and at right): as featured in the November 29, 2019, issue of *The New York Times*, staff of the Lunder 9 Oncology Unit, like so many other dedicated individuals, celebrated Thanksgiving at work. Said Olivia Marshall, RN, "It doesn't seem like I'm spending time away from my family. It's like I'm with another part of my family!"



(At left): I had the pleasure of attending a staff meeting with our great team in the Neonatal ICU.

(Below): what a fun day at this fund-raiser organized by the O'Halloran family and friends to raise money for breast-cancer research at MGH. And wonderful support from our PACU nurses.



The Continuum Project: *living well with serious illness*

—by Liza Nyeko, program director, Office of Patient Experience, MGH Center for Quality & Safety

Only 35% of Massachusetts patients with serious health conditions have had a conversation with a clinician about their goals for care should their health worsen. Such conversations are crucial as they:

- encourage patients to think about what matters to them
- ensure the care team knows what's important to patients so care can be aligned with patients' goals and values
- allow patients and families to cope better and thrive with serious illness

MGH is committed to enhancing the culture around serious-illness care by encouraging patients, families, and caregivers to have these conversations sooner, more frequently, and with meaningful input from all involved. This work is taking place through the Continuum Project, which encompasses many services, departments, and role groups throughout the organization.

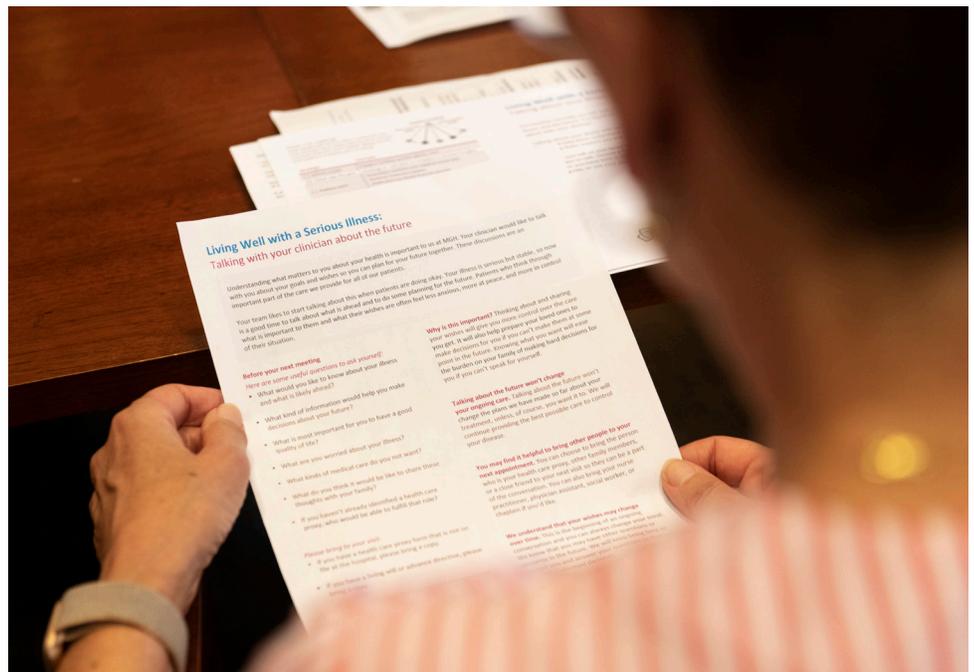
- Clinicians are being trained in how to use the *Serious Illness Conversation Guide* and how to document their conversations

- The *Serious Illness Conversation Guide* helps prepare clinicians to facilitate conversations with patients about their hopes, worries, and goals
- The electronic medical record provides a centralized location for clinicians to document these conversations, allowing for better coordination and continuity of care
- Materials are being shared to help patients and families begin conversations with their care team and loved ones
- Champions supporting this work have been integrated into many clinical services

Since 2017, more than 1,100 nurses, social workers, doctors, medical students, and others have been trained, and thousands of conversations have been documented in the medical record.

In the words of one family member, “It’s going to be a difficult conversation. But families aren’t looking for someone to have all the answers. We need to put aside notions of awkwardness or dread and understand that families just want someone to listen to them.”

For more information, contact Kelly Spinelli, project manager, at 617-643-2880.



Observances



Nurse Practitioner Week at MGH

Presenting at NP forum (l-r; top to bottom): Inga Lennes, MD, senior vice president of Service Excellence and Practice Improvement; and nurse practitioners, Julie Marden, NP; Sue McDermott, NP; Kelly Ann Jeffries, NP; Darlene Sawicki, NP; and Marden presenting flowers to long-time MGH nurse and first nurse practitioner at MGH, Barbara Chase, NP, who is retiring this year

In honor of National Nurse Practitioner Week, November 10–16, 2019, and in recognition of the exceptional practice of MGH nurse practitioners, a special NP forum was held, November 14th, to give nurse practitioners an opportunity to share their expert practice. Speakers, Inga Lennes, MD, senior vice president of Service Excellence and Practice Improvement; and nurse practitioners, Julie Marden, NP; Sue McDermott, NP; Kelly Ann Jeffries, NP, spoke about professional development, building a cohesive NP collective at MGH, and using their influence to lead change.

Nurse Practitioner Week is also an opportunity to remind the public about the importance of allowing nurse practitioners to practice to the full extent of their license and education. For more information, contact Darlene Sawicki, NP, at 617-726-6190.

Recognition



The new Norman Knight Advanced Practice Nurse Award

On November 19, 2019, in a small ceremony in the Knight Nursing Center for Clinical & Professional Development, Sara Stevens, RN, nurse practitioner for the Thoracic Oncology Team, received the inaugural Norman Knight Advanced Practice Nurse Award. The Award recognizes exceptional care provided to patients and families by an advanced practice nurse. The ceremony was attended by family, friends, and colleagues. For more information, contact Darlene Sawicki, NP, at 617-726-6190.

(Clockwise from top left): award recipient, Sara Stevens, RN; Stevens and her family; and Stevens with Scott Knight and senior vice president for Patient Care, Debbie Burke, RN.

Transgender Day of Remembrance

—by Alice Cabotaje, director, Spiritual Care & Education

On November 20, 2019, members of Spiritual Care, Social Service, Patient Access Services, the Transgender Health Program, and HAVEN held a vigil in the MGH Chapel to commemorate the Transgender Day of Remembrance.

The MGH community gathered to acknowledge and mourn more than 300 transgender and non-binary individuals who were murdered around the world this past year, and those who took their own lives due to violence, bigotry, trans misogyny, and racism.

In his comments, Asher Bruskin, LICSW, social worker with the MGH Transgender Health Program, noted that remembering our transgender brethren is an act of resistance to the narratives that contin-

ually assault transgender people's lives and dignity. Said Bruskin, "We are here to affirm that the lives of transgender and non-binary people will be honored in the fullest sense, both for the living and those who have died."

Bruskin condemned systematic racism and the white supremacist attitude that is still so prevalent in America today.



Palliative care chaplain, Sarah Byrne-Martelli; music therapist, Hannah Shefsky; spiritual care provider, Erica Long; and Hebrew College associate director, Tom Reid, delivered a searing rendition of *You will be Found* from the Tony-Award-winning play, *Dear Evan Hansen*.

Emotions in the MGH Chapel were palpable as they sang:
*Even when the dark comes crashing through...
When you need a friend to carry you...
And when you're broken on the ground...
You will be found...*

For more information, call Alice Cabotaje, director of Spiritual Care, at 617-724-3227.



(L-r): at Transgender Day of Remembrance, Asher Bruskin, LICSW, social worker; Alice Cabotaje, director, Spiritual Care & Education; Hannah Shefsky, music therapist; Erica Long, spiritual care provider; and Tom Reid, Hebrew College associate director.

(Photos by Paul Batista)

Clinical Pastoral Education marks 85 years at MGH

—by Alice Cabotaje, director, Spiritual Care & Education

On December 17, 2019, the Clinical Pastoral Education program celebrated its 85 anniversary at MGH. Clinical Pastoral Education (CPE) along with the creation of our hospital-based chaplaincy department was the brainchild of MGH physician, Richard Cabot, MD. Cabot and MGH chaplain, Reverend Russell Dicks, supervised the first CPE course at MGH in 1934, the first program of its kind in a general hospital.

Clinical pastoral education is an inter-faith, professional education program for theological students, clergy, healthcare professionals, and qualified laypeople who want to

learn to minister to individuals in crisis situations. CPE students learn spiritual care through seminars, simulation labs, joint visits, inter-disciplinary rounds, and most especially, from pastoral encounters with patients, family members, and staff.

CPE residents and interns gain insight and understanding of spiritual care by viewing complex life situations from different points of view. They develop increased awareness of themselves and the needs of patients, families and staff. In working as part of inter-disciplinary teams, CPE residents and interns hone their skills in building interpersonal and inter-professional relationships.

Throughout the program, they're able to reflect as they integrate theology and spiritual practice with life experience, as they practice living out and embodying their faith and spiritual beliefs in their clinical pastoral care.

Reverend Alice Cabotaje, MDiv, and Rabbi Shulamit Izen, MAHL, are ACPE-certified educators at MGH. A 12-month CPE residency, a 12-week intensive summer unit and a 19-week part-time unit are currently being offered.

For more information, call Alice Cabotaje, director of Spiritual Care, at 617-724-3227.



(Photo by Jillrey Andree)

Earlier this year, Rabbi Shulamit Izen (red blazer), Reverend Alice Cabotaje (striped shirt), and Carmen Vega-Barachowitz, administrative director of Spiritual Care (center back), with CPE educators and this year's class of Clinical Pastoral Education graduates.

Worldwide Pressure Injury Prevention Day

—by Virginia Capasso, RN, clinical nurse specialist

On Thursday, November 21, 2019, the Clinical Nurse Specialist Wound Care Task Force hosted a display in the Main Corridor in observance of Worldwide Pressure Injury Prevention Day. Pressure injuries are, “localized damage to the skin or underlying tissue as a result of pressure or pressure in combination with shear (stress).” In the past, pressure injuries have been called bedsores, decubitus ulcers, or pressure ulcers.

The CNS Wound Care Task Force encourages staff, patients, and family members to adopt the following strategies to ‘Save our SKIN’:

- S Skin Assessment—inspect/feel for temperature; Risk Assessment (Braden Scale)
Staging—differentiate cause of wound, accurately stage only the pressure injury
Safety Report
- Support Surfaces—select appropriate beds, mattresses, chairs, and pads
- K Keep moving/turning (bed/chair)
- I Incontinence care
- N Nutrition (protein, calories, zinc supplements)

Approximately 2.5 million pressure injuries are reported each year and are associated with \$26.8 million in cost of care and 60,000 deaths due to complications. In 2008, the Centers for Medicare and Medicaid Services (CMS) discontinued reim-

bursement to hospitals for care of Stage 3, Stage 4, and unstageable hospital-acquired pressure injuries. In 2014, CMS added financial penalties for hospitals with hospital-acquired conditions in the bottom 25th percentile. Between 2014 and 2017, the rate of hospital-acquired conditions decreased, with the exception of hospital-acquired pressure injuries, which rose 6%.

The following changes proposed by the National Quality Forum and CMS heighten the importance of adhering to pressure-injury prevention strategies:

- Non-payment will be extended to Stage 2 pressure injuries, the

- most frequently occurring hospital-acquired pressure injuries
- Documentation of pressure injuries present upon admission must be declared within 24 hours, though many pressure injuries are not visible for three days
- Data about hospital-acquired pressure injuries will be accessed directly from the electronic health record, reinforcing the critical need for complete and accurate documentation

For more information, contact your CNS or nursing practice specialist, or call Jacquie Holmberg (617-724-5220); Jean Stewart, RN, (617-726-6988); or Virginia Capasso, RN, (617-726-3836).



Staffing the Pressure-Injury Prevention display table in the Main Corridor are (l-r): Virginia Capasso, RN; Jacquie Holmberg, RN; and Jean Stewart, RN.

14th annual Cardiac Nursing Visiting Scholar

promoting moral resiliency through knowledge and reflection

—by Carolyn Velez, RN, clinical nurse specialist

On November 1, 2019, cardiac nursing visiting scholar, Melissa Uveges, RN, joined cardiac nurses for a day of discussions that focused on moral distress and resiliency. Uveges, a research fellow in Global Health and Social Medicine at Harvard Medical School, has a background in Nursing and Religion with a concentration in Ethics in caring for adult and pediatric patients. Her research focuses primarily on decision-making among families of pediatric patients.

Uveges had an opportunity to hear narratives by staff nurses, Rebecca Faulks, RN; Emily Clarke, RN; and Elizabeth Trearchis, RN. Narratives

described medically and ethically complex patients and the challenges they encountered in providing compassionate, empathetic care. In discussions facilitated by Uveges, nurses spoke about the importance of building rapport with patients and families, thoughtful communication, and advocacy. They shared reflections, lessons learned, and interventions being employed on their units to address and mitigate moral distress.

Staff nurses had an opportunity to discuss Uveges' article, "Moral distress: a catalyst in building moral resilience," that speaks about re-framing our attitude toward moral dis-

tress into something more positive—an opportunity to grow, build moral resiliency, and feel empowered.

Uveges' presentation, "Building resiliency while caring for ethically complex cardiac patients," highlighted strategies for building resilience, such as ways to discuss spirituality and religion, how to disclose difficult news, and ways to manage professional grief and bereavement.

For more information about the Cardiac Nursing Visiting Scholar Program, contact Nicole Bezreh, RN, at 617-724-3886.



(L-r): cardiac nursing visiting scholar, Melissa Uveges, RN; staff nurses, Emily Clarke, RN; Rebecca Faulks, RN; and Elizabeth Trearchis, RN; and nurse ethicist, Ellen Robinson, RN.

(Photos by Michelle Rose)

MGH Clinical Research Nurse Steering Committee

building a community of practice

—by Mallory Hillard, NP; Catriona Grant, RN; Mary Larkin, RN; and Catherine Griffith, RN

Clinical research nursing came into existence in the early 1900s, and since the beginning, clinical research nurses (CRNs) have made invaluable contributions to the field. The role has evolved into a recognized, ever-growing nursing specialty. The primary responsibility of CRNs is ensuring high-quality care and coordination of research participants while maintaining the compliance and integrity of the research protocol.

As the largest hospital-based research institution in the country, MGH is home to many CRNs who work in many practice settings and specialties. The MGH Clinical Research Nurse Steering Committee was established to connect and empower CRNs and facilitate collaboration throughout the greater MGH community. Led by experienced CRNs in collaboration with Nursing and the Munn Center for Nursing Research, the committee seeks to nurture the partnership between research and clinical care through mentorship, collaboration, and education for research nurses, research nurse practitioners, staff nurses, and others.

One of the committee's primary goals is to unify and strengthen the community of CRNs at MGH and raise awareness of professional organizations such as the International Association of Clinical Research Nurses (IARN).

On March 5, 2020, from 5:30 to 7:00pm, the CRN Steering Committee, in collaboration with the Munn Center and the Boston chapter of

the IARN, will host its second annual CRN reception, which will include a panel discussion, updates on issues such as CRN certification, and opportunities to network.

If you'd like to attend the reception or receive updates about other upcoming events, contact Stacianne Goodridge at 617-643-0431 or by e-mail.



Members of the MGH Clinical Research Nurse Steering Committee (l-r): Shawna Butler, RN; Nopporn Thangthaeng, RN; Mallory Hillard, NP; Catherine Griffith, RN; Mary Larkin, RN; Gaurdia Banister, RN; Catriona Grant, RN; Diane Cocca-Spofford, RN; and Stacianne Goodridge.

The MGH food donation program

helping others always leaves a good taste in your mouth

—story provided by MGH Hotline

MGH has teamed up with the Cambridge-based, Food for Free program, to donate excess food from our cafeterias to help feed people in the Boston area in need of healthy meals.

Due to a variety of factors, such as inclement weather, reduced foot traffic on the main campus, or simply having more leftovers than expected, we often have a surplus of food at the end of the day.

According to Joan Shea, director, Nutrition & Food Services, “We’re always looking for ways to help the hospital’s sustainability efforts. So we were thrilled to partner with Food for Free this past November.”

Says Sara Swiatlowski, manager of Retail and Revenue Operations for Eat Street Café, “The program has the added benefit of being easy to participate in.”

Food for Free sends a refrigerated truck to pick up left-over food from MGH and other participating businesses and transport it to their kitchen in Cambridge where it’s processed and transformed into nutritious, new dishes.

Says Shea, “It’s been extremely rewarding to see staff of Nutrition & Food Services so enthusiastic about this program.”

Our collaboration with Food for Free is just one way MGH is advancing its sustainability efforts. Nutrition & Food Services has long worked with Agri-Cycle, a food-waste collection service, to compost excess food into clean energy. An ADA-compliant water bottle filler has been installed in Eat Street Café, and more stations will be added in the coming months.

Says Shea, “Sustainability has quickly become part of our culture. People are proud to be part of a program as noble as Food for Free.”

For more information, contact Joan Shea at 617-643-0993.



Practice UPDATE

Change in Powered Air Purifying Respirators (PAPRs)

On Monday December 2nd, the hospital will be transitioning from the Bullard PAPRs to *new* ILC Dover PAPRs.

PAPRs are used by clinicians and staff who cannot be fit-tested for an N95 respirator due to facial structure or facial hair that interferes with the seal. PAPRs and N95 respirators are used when caring for patients requiring Airborne Infection Isolation.









Staff who need to use a PAPR must complete the HealthStream, MGH Environmental Health and Safety PAPR Training each year. This training has been updated to reflect the new model.

- Staff needing a PAPR should contact Materials Management Customer Service at ext. 6-9144 to have one delivered.
- Each PAPR can support one staff member for one shift & should then be returned to Materials Management.
- Each PAPR kit is delivered with necessary supplies and instructions for use and return.
- Respiratory Therapy is available to support any just-in-time training needs, page the Respiratory Therapist assigned to your area.

Return remaining Bullard PAPRs to Materials Management—they will no longer be supported.

Please contact Environmental Health and Safety at 6-2425 with any questions or concerns.



MASSACHUSETTS
GENERAL HOSPITAL
PCS QUALITY & SAFETY

December 2019

For more information about individual practice updates or alerts, contact the PCS Office of Quality & Safety, or go to the Excellence Every Day portal page at: <http://intranet.massgeneral.org/pcs/EED/EED-Alerts.asp>.

Periodically, the PCS Office of Quality & Safety issues practice alerts and updates to communicate new information or changes to policies, procedures, or practices. Alerts and updates are generated by trends identified in safety reports, feedback from staff and leadership, or changes in regulatory requirements.

Practice UPDATE

New Flexi-Seal Stool Management System

Effective December 2, MGH will transition to a new Flexi-Seal internal stool management system.

Change from previous model: In response to previous safety events, Flexi-Seal is now equipped with a retention balloon indicator.



Inflate the balloon by slowly depressing syringe plunger. The green dome will indicate once the balloon has reached the patient's optimal fill volume.*



The red dome will indicate if the balloon is overfilled. Overinflation beyond the optimal fit for individual patient may lead to complications.

Key Elements:

- **NEVER INFLATE RETENTION BALLOON WITH > 45 ML OF FLUID.**
- **ALWAYS** obtain a provider order and have provider perform a rectal exam prior to insertion.
- Assess the catheter position and peri-catheter skin for signs of bleeding or breakdown.
- Assess the need for continued use with multidisciplinary team at least once per day. Discontinue catheter if stool is no longer liquid or there is no output for 24 hours.

Contact Nicole Bezreh or Jamie Ronin with questions



MASSACHUSETTS
GENERAL HOSPITAL
PCS QUALITY & SAFETY

December 2019

Announcements

New hours for outpatient Pharmacy

Beginning January 2, 2020, the outpatient Pharmacy in the Wang Building will extend its hours to:

**Monday through Friday
8:30am–7:00pm**

The extended hours will make filling prescriptions more convenient for early-morning, early-evening, same-day-surgery, and ED discharges.

Reminder that staff can use the dedicated professional phone line (617-643-4276) to contact the Pharmacy, Monday through Friday.

Weekend hours will remain the same:

**Saturday 9:00am–3:00pm
Sunday 9:00am–12:30pm**

For more information, call 617-724-3100.

Yawkey Family Waiting Area

The new Yawkey Family Waiting Area, located above the Riverside Café, is expanding its hours: it is now open 8:00am–7:30pm, Monday through Friday. After 7:30pm, families can wait in the Blum Patient & Family Learning Center on White I.

For more information, call 617-724-1753.

Blum Center Events

**Thursday, December 19, 2019
12:30–1:30pm**

“Adult congenital heart disease and pregnancy: supporting healthy moms and babies,” presented by Doreen DeFaria Yeh, MD.

Program is free and open to MGH staff and patients. All sessions held in the Blum Patient & Family Learning Center.

For more information, call 617-724-3823.

Vidscrip videos move to YouTube

Since MGH/MGHfC’s relationship with Vidscrip ended last month, the Patient Education Video Team has been working to move videos to YouTube channels. The team is communicating with creators as videos are moved to the new platform. Given the large number of videos, the transition is expected to continue through the end of the year.

For information about adult videos, contact Chrisanne Sikora at csikora@partners.org.

For pediatric videos, contact Briana Beckvold at bbeckvold@partners.org.

Conversations with Caregivers

for families, caregivers, patients, and staff

an educational series sponsored by the Dementia Caregiver Support Program

**January 21, 2020
5:30–7:00pm**

O’Keeffe Auditorium

“Looking to the future: creating supportive communities for people with dementia and their caregivers,” presented by Alice Bonner, RN, director of Strategic Partnerships for CAPABLE, Johns Hopkins University School of Nursing, senior advisor for Aging, Institute for Healthcare Improvement

**February 18th
5:30–7:00pm**

O’Keeffe Auditorium

“Dance for Connection,” presented by dance and movement therapist, Donna Newman-Bluestein

Admission is free; seating is limited; light refreshments; parking vouchers available.

RSVP to: 617-724-0406, or email: dementiacaregiver.support@mgh.harvard.edu.

For more information, call 617-643-8809.

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For more information, call: 617-724-1746

Next Publication

January 23, 2020

Nadel named this year's disability champion



On Monday, November 25, 2019, Eric Nadel, MD, received the MGH Employee Disability Resource Group's Disability Champion Award for his support and commitment to employees of the Emergency Medicine Residency Training Program. Nadel has supported residents with mental and physical issues, including one resident who was injured in a motorcycle accident that resulted in paraplegia. Nadel was nominated by David Brown, MD, chief of Emergency Medicine.

This year's disability champion, Eric Nadel, MD (center) with (l-r): David Brown, MD, chief of Emergency Medicine; Jovita Thomas-Williams, senior vice president for Human Resources; Joseph Betancourt, MD, vice president, chief equity and inclusion officer; and MGH president, Peter Slavin, MD.



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