# Midwifery: A Modern-Day Look at a Centuries-Old Practice

A Look at Magee's Program

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# A Message from Dr. Robert Edwards

It is quite humbling, and one of the biggest highlights of my life, to be named the Milton Lawrence McCall Chair of Magee's Department of Obstetrics, Gynecology & Reproductive Sciences.

As many of you know, in addition to being a former Pitt medical student (class of '84), I completed a four-year residency at Magee in 1989, and returned in 1993 to reestablish the academic Division of Gynecologic Oncology, along with Dr. Joe Kelley.

Like many of you, I have enjoyed the history and traditions that make Magee unique as a health care institution. As a junior faculty member under Dr. Richard Sweet, I had the opportunity to watch the metamorphosis of Magee from a very strong clinical program with a small prestigious academic faculty into a top-flight clinical research and basic science center for women's health.

Dr. Sweet and Dr. Jim Roberts deserve a tremendous amount of credit for the culture change that occurred in the 1990s converting Magee into one of the premier institutions for clinical care and research in the field of women's health in the country. I also had the pleasure of being here after the transition to Dr. W. Allen Hogge, and watched him take his considerable experience in community relationships to build the clinical network that represents the largest OB/GYN department in the country with 240 faculty and fellows, and more than 3,500 employees.

Following the merger with UPMC, Dr. Hogge and Magee president, Leslie Davis, expanded Magee's clinical footprint and instilled the integration so necessary in today's health care climate. This 20-year period of unprecedented academic and clinical growth is the legacy we inherit at Magee today.

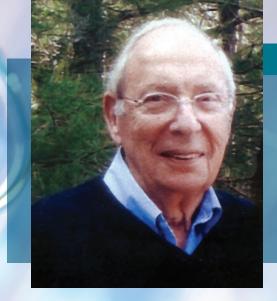
Looking forward over the course of the next 10 years, the Department's challenges and opportunities will be different than the challenges of my predecessors.

Our charge will be to reformulate how we deliver health care. We must embrace new models of care and develop approaches that reduce morbidity through population-based health. The process has already begun. We are well on our way with advanced information analytics, physician performance benchmarks, and advanced care clinical pathways that target the creation of equal and effective care not only at Magee, but also across the western Pennsylvania/ UPMC network. That is to say, the right care at the right place at the right time.

The role of Magee-Womens Research Institute in such a model becomes more important as the translational science center for our spoke and hub women's health network. As part of this, we are in the process of expanding our database capabilities for measuring outcomes, service line analytics, biorepository capacity, and adding new members to the department in the fields of epidemiology, populationbased health, and health services research to complement our outstanding basic scientists who are already performing cutting edge research in the lab, and in the clinic.

I want to thank all of our alumni for your continued support and interest in Magee. I look forward to strengthening my relationships

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#### **RESIDENT ALUMNI SPOTLIGHT**

# A Legacy of Continuing Education

Marvin C. Rulin, MD, always knew that he wanted to be a doctor. "I had always known I was going to be one since about first grade," he says, even though there were no immediate family members he knew working in medicine. "There were a few distant cousins."

Even more surprising was Dr. Rulin's decision to go into obstetrics and gynecology. During medical school and his internship at the Cook County Hospital in Chicago, Dr. Rulin found that he enjoyed obstetrics and gynecology and took to it naturally. "It all made sense to me. There was a product to it, and it's a nice combination of medicine and surgery." After finishing his medical degree at the Chicago Medical School and following a two-year stint in the U.S. Air Force, Dr. Rulin had a choice between going to Cleveland or Pittsburgh for his residency. He ended up choosing Magee for its clinically-oriented medical program and graduated in 1960. "I really didn't see myself as an academic," Dr. Rulin explains.

But after spending 11 years as a private practitioner and voluntary faculty member at Magee, Dr. Rulin was given another surprising choice. When he asked the then-head of the department, Dr. Donald Hutchinson, to rent an office at Magee, Dr. Hutchinson made a different offer. "He asked me if I would join the fulltime faculty staff instead," said Dr. Rulin, "He thought that I'd be good to teach it because I knew what students and residents would need to learn in the field." The concept of continuing education was just being formed at Magee, and while he was worried about his lack of an academic background, Dr. Rulin was intrigued by the opportunity. "I had a lot of experience in clinical and surgical skills, but little academic training. I thought I would give it a try for a year or two. Turns out it was one of the best decisions I've ever made."

#### According to Dr. Rulin, the most rewarding part of the job was interaction with the residents and the bonds he formed with them.

It is because of those bonds that Dr. Rulin was inspired to help form the Alumni Honor Association, in the 1970s. At the time, there were three lectureships dedicated to past chairmen given at different times of the year. Dr. Rulin had the idea to combine them into what is now known as Alumni Day. Following this tradition, Drs. Daniel Edelstone and W. Allen Hogge created the legacy lectureship, which Dr. Rulin recently endowed in honor of his colleagues, Drs. Hutchinson and Terry Hayashi. Through the lectureship, Dr. Rulin maintains the link of education and leadership that he originally learned under Dr. Hutchinson and Dr. Hayashi. "I feel a sense of obligation to [them]," he said, "They gave me opportunities to further my career at Magee." Dr. Rulin had always wanted to give back to Magee, and felt that this was the best way to give back not only to the hospital, but to also honor their legacy.

When he retired from Magee in 2000, Dr. Rulin began splitting his time between Pittsburgh and his Florida home. Two of his four children still live in the Pittsburgh area, with the other two in Cambridge and Providence. Dr. Rulin's oldest daughter followed in her father's footsteps, currently working as the chief medical officer for United Health's Medicaid program in Rhode Island. Having to give up golf 15

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#### DR. ROBERT EDWARDS

# A New Era is Born at Magee Meet Our New Chair and

Champion of Women's Health



What inspires us to become leaders in our field? For Dr. Robert Edwards, it goes back to when he was a child and the close relationship he had with his grandmother, a strong role model who had a big influence on how he felt about women and the world.

"I would say she was my mentor. She was a very hard-working lady who lived through the Great Depression and raised her family without a lot of resources. What an inspiration," says Dr. Edwards, the new chair, Department of Obstetrics, Gynecology & Reproductive Sciences at Magee.

Having a supportive wife and three daughters at home also fuels Dr. Edwards' passion for women's health and gives him a close-up perspective of what goes on with women as they grow and mature. Edwards follows in the footsteps of Dr. W. Allen Hogge, who, in over nearly a decade of leadership, brought a focus on patient care and academic research to Magee. This shift in thinking is what brought Dr. Edwards to Magee – or, rather, back to Magee.

### The First Magee Experience

From 1985-1989, Dr. Edwards performed his residency at Magee. "I really liked OB/GYN. It seemed to fit with my personality," he says. Although he felt it was a competitive program, Dr. Edwards also lamented the lack of research in the 1980s. "In those four years at Magee, I was thinking this is a very good program with a lot of clinical volume, but it doesn't have a big research reputation. I always said when I was training that the place would be so great if it had more research."

During his first nine years on faculty, Edwards built an oncology program at the hospital, but it was difficult to get the financial support needed to sustain the program. "We were always financially strapped before Magee became a part of UPMC. I felt like my research career was floundering." Dr. Edwards left for an endowed chair position at the University of Louisville, where he remained for five years.

During that time Dr. Hogge became chair of the Department at Magee, and UPMC merged with the hospital to create an organization focused on patient care and research. Dr. Edwards remarks, "It changed the culture of the institution and brought in a lot more research capacity. In my last year at Louisville, Magee offered me a position to come back. They wanted me to rebuild the oncology program I had started."

### The Inspiration to Return

"Within three years of returning, the Division of Gynecologic Oncology grew from a division of one, with Dr. Joe Kelley, to a division of nine. The program grew exponentially over the first four to five years, and the patient volume grew as well," says Dr. Edwards. "I personally led the effort to go out into the community and develop cancer outreach sites in community settings. Our market share skyrocketed. Once we had a large market share, we could begin to build the research program in earnest."

Dr. Edwards was instrumental in the development of the gynecologic portion of the Women's Cancer Research Center at Magee-Womens Research Institute with the help of some impressive talent, beginning with the recruitment of Dr. Anda Vlad. "Dr. Vlad helped us develop a mouse model of ovarian cancer. We'd been looking at comparisons between our human model repository and our mouse model, comparing the biology between the two systems. We used the mouse model for ovarian cancer to define mechanisms, and then we confirmed the relevance of the findings in our large ovarian cancer bio-repository. We had more than 6,000 patient specimens from our various clinical studies to use for this work. We also acquired many specimens from former investigative trials at Magee. We used those bio-specimens and our tissue bank to generate numerous papers."

Dr. Edwards believes that, in this age of big data, the transformation in data analytics will make a huge difference in women's health care. "I'm hoping that we can match our robust data banks that we're developing on patient outcomes with biospecimens from our various banks to answer important questions about prevention, prevalence, and causes of diseases in women. Using this model, which we used in our own program, I hope to be able to address more issues. We have a network of more than 100 community providers to go with our large academic faculty, as well as our attending physicians who work out of Magee. It's a rich, robust group of women's health care providers. Overlaying research architecture and infrastructure on top of the clinical operation enables us to do some really important work."

### A Vision for the Future

Throughout the department, Dr. Edwards envisions implementing this model of practicing clinicians interacting with translational scientists to answer important questions about patients. "We've been dedicated to developing bio-repositories both for our own research and as a resource for other investigators to explore new ideas and concepts." He adds, "As I've become a mature clinician, I've realized the power of this more and more. With large repositories of specimens and very detailed data associated with the outcomes of the patients that those specimens were procured from, we're able to answer some very basic and intrinsic questions. And because the technology for doing these types of inquiries has gotten so advanced, we don't necessarily need the specialized bio-bank specimens we've used for 30 years or the tissue blocks that have to be frozen. Much of what we do now can be done in paraffin blocks, the standard blocks used in any clinical pathology lab. This makes possible a whole other source of biomedical collection of bio-specimens from patient care that's commonly collected available for inquiry."

Dr. Edwards' passion for clinical care and translating research into meaningful ways to help women makes him a perfect match for Magee. And that's something he appreciates. "At Magee, there's a total devotion to women's health and the health of the newborn. There's a commitment to the importance of women in society, and recognition that the health of women is important to the health of society as a whole. Women's health

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## Dr. Edwards: At-A-Glance

- Graduated from the University of Pittsburgh School of Medicine in 1984
- Completed a four-year residency at Magee in 1989
- Completed two fellowship programs at the University of Alabama at Birmingham (UAB) in immunology and oncology
- Returned to Magee in 1993 to establish the Division of Gynecologic Oncology
- Research interests
  include cervical and
  ovarian malignancies
- Serves as the principal investigator of the Gynecologic Oncology Group for the University of Pittsburgh and for a number of pharmaceutical sponsored studies
- Participates on the GOG Vaccine Committee, which experiments with novel therapeutic approaches to gynecologic malignancies, as well as translational research

# Midwifery: A Modern-Day Look at a Centuries-Old Practice



The word "midwife" often conjures up the image of a backwoods rural area and a birth presided over by a local woman because a physician is not readily available.

But today's midwife is a certified health care provider trained to address a woman's total care during pregnancy and beyond. Midwifery is a philosophy of care that affects the whole woman. It is not just the physicality of pregnancy and birth, but how it affects the whole woman, her family, her emotional state, as well as her physical well-being. That is why some women choose midwifery care over a traditional medical model of care.

"The midwife is a partner to the pregnant woman, helping to answer her questions, understand the tests which are offered, and spending time with her to establish a relationship," says Suzanne Shores, director, Magee's Division of Midwifery.

In the event of complications due to diabetes or hypertension,

physicians are available for consultation 24 hours a day/seven days a week at Magee. Patients who develop complications during pregnancy can choose to continue their care with the Midwives at Magee, in collaboration with physicians, or a patient can chose to have their care completely transferred to a physician practice.

Midwives do not perform C-sections; they only preside over vaginal births. While midwives are the experts in natural childbirth they do make the all of the same options available to the expectant mother for pain management in labor as those women being cared for by physicians – whether it be to have an epidural injection, utilizing Lamaze or Bradley methods, or hypnosis during labor, Shores says. Pennsylvania requires that midwives be licensed by the state. These midwives are registered nurses who are specially trained in midwifery. Most nurse midwives also hold master's degrees in nursing, midwifery, or public health

"The Midwives Program offers a unique opportunity for physicians and midwives to work together and is an example of how Magee continues to lead the way in innovative and progressive care," says Dr. Robert Edwards, chair, Department of Obstetrics, Gynecology & Reproductive Sciences.

Magee also has an excellent collaborative relationship with The Midwife Center in Pittsburgh's Strip District, Shores explains. The Midwife Center focuses on caring for very low-risk women during pregnancy and offers out of hospital birth in the comfort and safety of a licensed and accredited free-standing birth center in the strip district.

During prenatal care with the Midwives at Magee, patients are seen every four to six weeks for the first 28 weeks of pregnancy. After that they are seen every two to three weeks until week 36, at which time they are seen every one to two weeks until delivery. Patients are offered all testing and monitoring recommended by the American College of Obstetricians and Gynecologists and the American College of Nurse Midwives.

Tina London, who also is a certified nurse midwife and who

has been with the Magee program since 2001, says she became a midwife after attending an appointment with a friend. "I went with a friend during her neonatal appointment with a midwife and it was my 'Aha' moment. I was impressed with the care and concern. It seemed like the perfect combination of excellent health care and meeting the needs of the individual patient in a way that other programs don't."

#### The Magee team was started in 2001 with only three midwives and 200 births. Now there are 10 certified midwives on staff, and last year there were more than 800 births.

"The Midwives at Magee group strives for cohesive and consistent care, so that any of the midwives can step in to attend a patient's delivery," London explains. The Midwives at Magee also provide annual checkups, health screenings, family planning services, STD screening and counseling, and referrals to a gynecologist if necessary.

The midwives at Magee see patients at four locations.

## Magee-Womens Hospital of UPMC

300 Halket St., Suite 0610 Pittsburgh, PA 15213 Magee-Women's Health Specialties 9000 Brooktree Rd., Suite 400 Wexford, PA 15090

## Magee Womancare Center South Hills

1300 Oxford Drive, Suite 2D Bethel Park, PA 15120

#### **UPMC Oxford Drive**

400 Oxford Drive, Suite 100 Monroeville, PA 15146

Office hours vary by location. For more information or to refer a patient, call 412-641-6361.



Studies have shown that nurse midwives have an outstanding record of safe care with fewer medical interventions. Many women who have birthed with the midwives continue their well-woman care with them.

# The Midwives at Magee:

Suzanne Shores, MSN, CNM, FNP, Director, Division of Midwifery Meredith Annon, MSN, CNM, WHNP-BC

Pamela Lee, MSN, CNM Tina London, CNM, MSN Carol Manspeaker, CNM Shannon McCabe, RN, MSN, CNM Gretchen McCool, CNM Pamela Shirey, CNM, CRNP Tracey Vendilli, MSN, CRNP Tanya Walter, CNM, MSN Laura Wunderly, CNM, MSN

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## Message from Dr. Edwards

with the alumni group and to keeping you connected to the exciting work being done at Magee.

I invite you to join us on Alumni Day. Let us share with you the wonderful traditional qualities and values we are preserving and the new innovations and integration that will enable us to remain at the forefront of women's health care in western Pennsylvania and across the country.

At Magee, we remain committed to keeping women at the forefront of our mission, as we know it is this commitment that makes Magee special to all of us who have trained here.

Calit /

Robert P. Edwards Milton Lawrence McCall Professor & Chair Department of Obstetrics, Gynecology & Reproductive Sciences

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### Resident Alumni Spotlight

years ago, Dr. Rulin spends a lot of his time playing duplicate bridge, and regularly attends a variety of adult learning classes at Carnegie-Mellon University. After the passing of his wife, Steffi, in 2008, Dr. Rulin has managed to find companionship again. "I have a significant other these days," he says, "We have a great relationship." Looking back, Dr. Rulin recognizes the vital force his training at Magee played in his career. "Magee is a unique place to train – it offers a great deal in caring for patients, has a huge impact on the community, and it continues to further education and research across the entire field of obstetrics and gynecology. I'm proud to have been a part of program and it is important for me to maintain a link to the program and to support the education of residents for generations to come."

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## A New Era is Born at Magee

is really underappreciated, and understanding how women are affected by diseases has not been well-studied. In fact, it's been avoided.

I see that as key to addressing many of the medical problems we currently have with society. Improve the health of women, and you improve the health of society as a whole."

He also recognizes what a unique opportunity working here presents. "Seventy percent of women in Allegheny County deliver at Magee," says Dr. Edwards. "That means several generations of women interact with the hospital from birth until a time when they might need help for a disease. I see this as an opportunity to take basic and translational findings and validate them across a population of women from several generations."

Working here is special from another standpoint, as well. "One of the beautiful things about working in western Pennsylvania is the patients are so appreciative. "I always tell the specialists it's hard to go out and provide care in the local community, but that's how you make a difference. When you go out into the community and develop relationships with the patients and their primary care physicians, you become part of their community process. That's how you change outcomes for entire populations in a region."

# Stepping into a Leadership Role

Dr. Edwards admits it's an intimidating job. There are more than 240 physicians and researchers. There is a staff of more than 4,000 people. "Basically I'm the CEO of a clinical corporation," says Dr. Edwards. Fortunately, he has some wonderful role models, helpful coworkers, and a supportive family.

As former chair, Dr. Hogge was a mentor to Dr. Edwards, and he hopes to continue Dr. Hogge's legacy of life-changing research and patient care. Dr. Edwards remarks, "Dr. Hogge developed an infrastructure with experienced administrators. They all have kept me on point and been extremely helpful in the transition. He also took me under his wing during his last few months to help me understand the depth and breadth of the position and what's required.

It's a lot of responsibility but I see it as an opportunity to make change and improve the health of women. I'm very excited about the possibility."

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# Residency Program UPDATE

# Awards and Accomplishments

Doximity's Residency Navigator

ranked Magee's Obstetrics and Gynecology Residency third among more than 240 OB/ GYN residencies in the United States! The ranking placed UPMC eighth in the country as a site for residency and fellowship education. These national rankings reinforce the superlative quality of physician education at our institution. We are grateful to the incredible faculty, talented residents and fellows, supportive alumni, and generous institution that make this possible. **Dr. Nicole Donnellan**, class of '10 & '12, a minimally invasive surgery faculty member, was selected to participate in the American Professors of Gynecology and Obstetrics (APGO) Surgical Education Scholars career development program. This is a competitive 18-month professional development program to build education and leadership skills among surgeons in obstetrics and gynecology.

The residency program achieved grant funding to start a Ryan Residency Training Program. Dr. Audrey Lance will direct this education program, which bolsters didactic and experience-based training in family planning and abortion among OB/GYN residents at Magee.

#### First-year resident, Dr. Carly

Werner, published an influential article on contraception counseling in the dermatology setting. To read the press release, visit http://www.upmc.com/ media and search "Contraceptive Counseling at Dermatologist's Office."

### **Education Changes**

December 2014 marked the first time that the residency used the new Accreditation Council for Graduate Medical Education (ACGME) Milestones to score each resident's progress in the current academic year.

Milestones use a developmental scale (like those used for child development) to track the learning process in all the specialties of resident training.

The program has formed a Clinical Competency Committee of faculty members to review resident evaluations and advise the program on each resident's progress.

Milestones scores will be updated every six months by this group. An example milestone is depicted below.

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of basic abdominal and pelvic anatomy	Demonstrates knowledge of: • relevant surgical anatomy • common procedural indications • comorbidities relevant to gynecologic surgery • prophylactic strategies to reduce post-operative complications	Demonstrates knowledge about the management of: • medical comorbidities relevant to gynecologic surgery • appropriate procedural options for the relevant gynecological condition	Demonstrates advanced knowledge necessary for management of medically complex patients Demonstrates the ability to recognize and manage peri- operative complications Effectively supervises and educates lower -level residents regarding peri- operative care Collaborates and provides consultation to other members of the team regarding peri-operative care Manages or co-manages critically-ill patients requiring care in an intensive care unit	Applies innovative approaches to complex an atypical peri-operative can and implements treatment plans based on emerging evidence

# Upcoming Events

## ACOG

Monday, May 4 San Francisco, CA

If you are planning to attend ACOG, please let us know. Magee will be hosting an invite-only reception on Monday, May 4.

## Online CME Available

Magee-Womens Hospital and the Department of Obstetrics, Gynecology & Reproductive Sciences offer a library of free online CME courses featuring our experts. Find out more at UPMCPhysicianResources.com/Gynecology.

## Join Our E-mail List

Help us keep you informed! Please join our e-mail list to stay up-to-date on the great things happening at Magee. It's easy. Just e-mail Yvette Yescas at yescasy@mwri.magee.edu with the subject line "Add me."

## SAVE THE DATE

Department of Obstetrics, Gynecology & Reproductive Sciences Awards Ceremony Friday, June 5 By invitation only

Alumni Reception Thursday, Oct. 8

## 40th Annual Alumni Day

*Friday, Oct. 9* Magee-Womens Hospital of UPMC



For more information about happenings, please contact Colleen Gaughan, Magee-Womens Foundation, at cgaughan@magee.edu or 412-641-8978.

## www.mwrif.org

The combined format of the Research Day program showcases the newest data from faculty researchers, as well as select publications by our clinical fellows, residents, and graduate trainees in the Department of Obstetrics, Gynecology & Reproductive Sciences and postdoctoral fellows at Magee-Womens Research Institute.

We also will be honored to host two nationally-known guest lecturers.

### **Guest Lecturers**

Margaret Prine Joy Lecture in Reproductive Sciences John Schimenti, PhD Professor of Genetics and Director, Center for Vertebrate Genomics Weil Cornell Medical College, New York

Celebration of Life: A Lecture Honoring Mothers Jason Wright, MD Sol Goldman Associate Professor of OB/GYN and Division Chief of Gynecologic Oncology Columbia University, New York

# Research Day in Reproductive Biology & Women's Health Friday, May 29

# News

# Magee Offering Test to Predict Possibility of Breast Cancer Recurrence

Magee-Womens Hospital of UPMC will be the first hospital in the tri-state area to offer the only FDAcleared breast cancer test assessing a woman's risk of cancer recurrence. The Prosigna test assesses a woman's probability of recurring breast cancer over a 10-year period, and adds significantly more information to guide treatment than just relying on clinical factors. The test is currently designed for post-menopausal women with hormone receptor positive breast cancer.

# New Hires

Department of Obstetrics, Gynecology & Reproductive Sciences

Sheila Ramgopal, MD	1/1/15
Keith Wharton, MD	2/1/15



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## National Rankings. JefiqsoH snamoW-aapeM

- האnecology ללא
- Orthopaedics 49th
- surgery, geriatrics, and urology endocrinology, gastroenterology and GI performing in cancer, diabetes and Magee also is recognized as high-

hospitals. ALL groome einevlysnn99 ni 3# bne eare Magee is ranked #2 in the Pittsburgh Metro



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