

SCARD

**Society of Chairmen of
Academic Radiology Departments**

**NEW AND PROSPECTIVE CHAIR
ORIENTATION**

Sunday, September 29, 2002

**Loews Miami Beach Hotel
Poinciana # 4**

New and Prospective Chair Orientation
2002
Schedule of Events

<u>Time</u>	<u>Event</u>	<u>Presenter</u>
7:00 a.m.	Registration and Continental Breakfast	
7:45 a.m.	Strategic Planning	Stephen Baker, MD
8:15 - 9:15 a.m.	Clinical Services	
	Capital Equipment Acquisition Covering 24/7	N. Reed Dunnick, MD Joseph K.T. Lee, MD
9:15 - 10:15 a.m.	TURF Issues	
	Vascular Radiology ER	Terry Ovitt, MD Joseph K.T. Lee, MD
10:15 - 10:30 a.m.	BREAK	
10:30 - 11:00 a.m.	Recruitment	
	Compensation Bonus Plan?	Ronald L. Arenson, MD
11:00 - 12:00 p.m.	Billing	
	Contracting Front End/Back End	Ronald L. Arenson, MD Robert K. Zeman, MD
12:00 - 1:00 p.m.	LUNCH	
1:00 - 2:00 p.m.	Research	
	Starting from Scratch Clinical Trials NIH Funding	Donald P. Harrington, MD Robert K. Zeman, MD N. Reed Dunnick, M.D.
2:00 - 2:45 p.m.	Faculty Discipline	Stephen Baker, MD
	Sanction Termination	

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<u>Time</u>	<u>Event</u>	<u>Presenter</u>
2:45 - 3:00 p.m.	BREAK	
3:00 - 3:30 p.m.	Finance	
	Creating a Budget	Donald P. Harrington, MD
3:30 - 4:00 p.m.	Governance and Support	
	Medical School	Terry Ovitt, MD
4:00 - 5:00 p.m.	Q&A	Donald P. Harrington, MD Robert K. Zeman, MD N. Reed Dunnick, M.D. Stephen Baker, MD Terry Ovitt, MD
5:00 p.m.	Adjournment	

Stephen Baker, MD
UMDNJ – New Jersey Medical School

Lecture I Strategic Planning

The purpose of this lecture is to acquaint new or prospective chairs with the dynamics and uses to be made of a strategic approach to the direction of a Radiology department. Emphasis will be placed on the specifics of management and leadership in the context of the manipulation of power relationships. Pitfalls and errors which if not avoided can lead to failure as a chair will also be highlighted.

Notes:

CLINICAL SERVICES – COVERING 24/7

Joseph K.T. Lee, M.D.
Professor and Chair
Department of Radiology
The University of North Carolina at Chapel Hill

Although most Radiology Departments are open 24 hours and 7 days a week, few truly have radiologists in-house providing around the clock coverage. However, in recent years, all practices, including academic centers, have faced increasing pressure to have 24/7 in-house coverage.

Whereas private groups can cover the entire hospital with one general radiologist in house at night, most subspecialty-organized academic centers do not have “jack of all trades generalist” among their faculty. Even if they have general radiologists willing to read all cases, subspecialty radiologists such as neuroradiologists and their clinical colleagues (i.e., Neurosurgeons) rarely will trust a generalist’s reading.

During this session, I'll provide some background information of the current situation, share with you my personal experience in dealing with this issue at UNC in the last 11 years and update you on how other academic centers have responded to this need.

Notes:

**Theron W. Ovitt, MD
University of Arizona HSC**

TURF ISSUES – VASCULAR RADIOLOGY

Radiology's practice of angiography and interventional radiology is being pursued by other specialties, primarily cardiology and vascular surgery. The pressures from the other specialties have increased, especially in the climate of declining reimbursement. The traditional approach has been the use of credentialing to solidify radiology's position with respect to angiographic interventional procedures. However, the Society of Interventional Radiology has espoused a new tactic of the independent radiology practitioner. These facets and others will be discussed in this talk.

Notes:

TURF ISSUES: EMERGENCY DEPARTMENT

Joseph K.T. Lee, M.D.
Professor and Chair
Department of Radiology
The University of North Carolina at Chapel Hill

One of the least enjoyable part of a Chair's job is to fight turf battles. However, in this day and age, I don't know any Department Chair who has not been involved in a turf fight during his/her tenure.

The two areas we had conflicts with Emergency Department are plain radiographs and ultrasound.

In the area of plain radiographs, ED questioned the timeliness of our interpretation and used this as an excuse to justify its interest to bill for interpretation of plain films.

In the area of ultrasound, ED was interested in having its own US machine to perform "urgent studies" that they could not wait for our technologist and attendings to complete and interpret (e.g., acutely traumatized patient). ED also claimed its RRC/Board requires its residents to be educated in US. Furthermore, ED tried to convince our trauma surgeons the need to perform US in these patients (look for intraabdominal blood) without waiting for our US tech and attending.

During this presentation, I'll detail the approach I used in solving these problems as well as outline the short-term and long-term strategy that should be considered to prevent and win the turf battles.

Notes:

Ronald Arenson, MD
University of California San Francisco

Compensation Plans

In this presentation, the UCSF Radiology Compensation Plan will be used as an example of an incentive based system to stimulate discussion and exchange of ideas. This compensation plan consists of salary plus bonuses to recognize academic and clinical success. Section Profit and Loss Statements will also be presented, which serve as the basis for much of the comp plan.

Notes:

Ronald L. Arenson, MD
University of California San Francisco

Billing: Contracting

In this presentation, a number of topics will be covered related to contracting: Billing organizational structure, relationships with the Medical Center, patient mix, managed care, methodology for analyzing contracts, pitfalls for Radiology, and joint ventures. Some unique issues concerning Interventional Radiology will also be discussed.

Notes:

Research from Scratch
Donald P. Harrington M.D., M.A.
SUNY HSC

Science by definition in an Academic Radiology Department includes clinical care, teaching and research as part of its mission; the development of some form of research endeavor is important to all senior faculty and Radiology chairman aspirates. My discussion is directed at those situations in which there is little or no research base, but the principles upon which this is based are applicable to all research planning.

The two most important factors are the departmental vision, which in a department with little beginning research, will probably depend on the chairman and the essential resources of people and money to support the vision.

The discussion is focused, to begin with, on developing a departmental vision. The second step is determining the people and money resources available in the Department, the Medical School and the University.

The conceptual development is usually not complex, but implementation is always complex and time consuming. Patience, planning and flexibility are important components of the ultimate success of such a project.

Notes:

Stephen Baker, MD
UMDNJ – New Jersey Medical School

Lecture II Sanction and Termination

The right to hire and to fire is an implicit prerogative of a chair, as supported by common law. Too often, even in the present environment of physician scarcity, a poorly performing or recalcitrant faculty member needs to be removed if no improvement occurs after attempts at remediation. However, a welter of laws and regulations limits a chair's right to fire and sometimes, in fact, places him or her in danger of personal liability for such actions. The purpose of this lecture is to demonstrate how to successfully navigate the processes of termination avoiding the shoals and snags that inevitably get in the way.

Notes:

Budget Basics
Donald P. Harrington M.D., M.A.
SUNY HSC

The main challenge for any Chairman is not in the budget or its development, but in dealing with people. The budget and more importantly the development of the budget are essential tools in dealing with the people who are the source of success or failure of any department.

The discussion will focus on use of the budget as a strategic planning tool followed by ways in which institutions organize the budget process. A discussion of the types of budgets and their expression complete the basics.

Notes:

**Theron W. Ovitt, MD
University of Arizona HSC**

GOVERNANCE AND MEDICAL SCHOOL SUPPORT

The relationship with the Dean of the Medical School is very important. The Dean of the Medical School is in charge and the Chairman of the Department is an administrative position controlled by the Dean. It is important to know the Dean's priorities, position on controversial issues, and commitment to the Department of Radiology. These factors will be addressed in this talk.

Notes:

**New and Prospective Chair Orientation
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