

**Baylor College of Medicine
Faculty Awards for Excellence in Patient Care**

Award Category (check one): Early Career Star

GENERAL INFORMATION	
Name	Jane Doe
Degrees Attained	MD, BS (chemistry)
Baylor I.D. Number	00000
Current Faculty Rank and Title	Assistant Professor of Ophthalmology
Date of Initial Appointment at Baylor College of Medicine	July, 2013
Email Address	Jane.doe@bcm.edu
Department	Ophthalmology (Pediatric Ophthalmology section)
Department Chair, Medical Director, Center Director or Section Head	Dr. XYZ, Surgeon-in-Chief
Email Address of Dept. Chair, Medical Director, Center Director or Section Head	XYZ@bcm.edu

DOCUMENTATION OF EXCELLENCE IN PATIENT CARE	
List achievements and provide examples or documentation of clinical excellence.	
1. QUALITATIVE DOCUMENTATION OF ACHIEVEMENT	
CATEGORY OR TYPE OF ACTIVITY <i>Please list qualitative examples of clinical excellence. Include explanations or examples in the space provided. Add lines as needed.</i>	EXAMPLES AND DOCUMENTATION <i>Where applicable, please attach additional evidence.</i>
<p>Clinical Quality Measures Through a grant from Agency for Healthcare and Research Quality (AHRQ), I was able to improve care for members of underserved populations with diabetic retinopathy.</p>	<p>PI of grant from AHRQ of \$645,000 for a quality improvement project to increase access to care for underserved populations for diabetic retinopathy.</p> <p>Outcomes from this funding pointed to a 12% increase in access to care (see appended Abstract).</p>

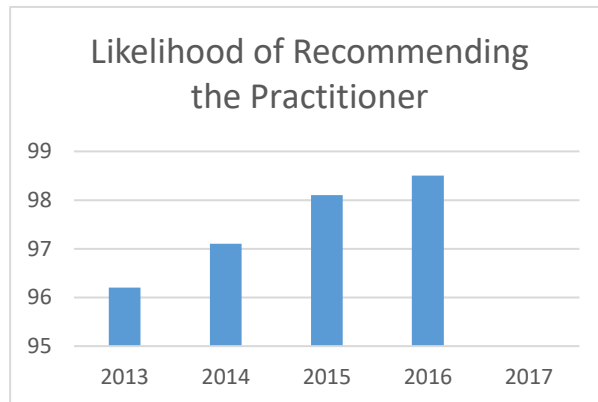
Customer/Patient Satisfaction Surveys

My Press Ganey scores are above the section (average score for ophthalmology was 92.4, national mean was 93.1) reflecting one of the highest scores in the section. My scores consistently have been higher than the section's overall means and national means, additionally the scores reflect a rise between the years of 2013 and 2017.

Press Ganey scores from past three years and patient comments are given below.

Press Ganey Scores TCH Applicant Scores 2016-2017 (Appendix A1)

- Friendliness/courtesy of CP 98.9
 - CP explanations of problem/condition 99.4
 - CP concern for questions/worries 99.3
 - CP efforts to include in decisions 97.7
 - CP information about medications 98.0
 - CP instructions for follow-up care 96.2
 - CP spoke using clear language 98.4
 - Time CP spent with patient 92.9
 - Patients' confidence in CP 96.2
 - Likelihood of recommending CP 98.5
- Between 2013-2017 overall Press Ganey Scores for the applicant



Press Ganey Patient Comments 2013-2017

- *Dr. Doe was fantastic at easing my fears and explaining the age appropriateness of what I was seeing and addressed any concerns that I had. I'll continue to always recommend her, she's fantastic.*
- *Everything is excellent.*
- *Everything was wonderful. Not a problem in and out. Very clear of what was going on.*
- *Keep up the good work.*
- *It's the best hospital we been to and thank you for helping us.*
- *It was just a very good experience.*
- *Everything was really good and very quick.*

<p>Clinical Care Awards or Other Recognition of Excellence</p> <p>I have been recognized for professionalism by an institution-wide award, and by a departmental award for clinical excellence. I was named one of Houston’s Top Doctors in 2018 by H Texas Magazine.</p>	<ul style="list-style-type: none"> – Baylor College of Medicine Power of Professionalism (POP) Award 2016 – Department of Ophthalmology Provider of the Month Award 2017 – Top Doctor Award 2018, <i>H Texas Magazine</i>
<p>Peer Faculty Evaluations</p> <p>My evaluations by my department chair reflect scores in the top 5th percentile or categorization in the areas of clinical practice, service and clinical scholarship. I also have been rated highly by nursing colleagues and by peers (conference presentations).</p>	<p>Performance rating by department chair has been “outstanding,” every year since 2013 (year of my initial appointment as a faculty member).</p> <p>Selected as the Best Provider of the Year in 2017 by nurses and physicians in the section.</p> <p>Clinical Neonatology Newborn Medicine Conference (Appendix A2). Ratings and comments from conference participants related to my presentation are summarized below.</p> <ul style="list-style-type: none"> – Emphasized new concepts 94.1% – Refreshed previous knowledge 100% – Will be useful in clinical practice 100% – Delivered clearly and concisely 100% – Appropriate educational method/format 100% <p>Comments:</p> <ul style="list-style-type: none"> – <i>Excellent speaker and great information!</i> – <i>Phenomenal talk. It finally feels like I'm understanding retinopathy of prematurity. Please come back and give this talk again next year. This truly will improve clinical care.</i> – <i>Great and simple presentation for clinicians.</i> – <i>Awesome, awesome talk! So helpful and informative.</i> – <i>Excellent overview of ROP. Very understandable</i> – <i>Great presentation! Helpful to see pictures and explain staging! Also, helpful to see pre and post treatment pictures. It will improve quality of care.</i>

	<ul style="list-style-type: none"> - <i>Dr. Doe's presentation was one of the best we've had all year! Excellent</i> - <i>explanations and great data presented. She is an excellent clinician and teacher! I am looking forward to her next talk with us.</i> - <i>"He is an excellent clinician and educator ! I am looking forward to her next talk with us!</i> - <i>"Excellent teaching lecture. Thanks Dr. Doe.</i> <p>Cullen Course Comments, 2013-2017</p> <ul style="list-style-type: none"> - <i>I really enjoyed Dr. Jones' lecture on when to prescribe glasses in children, I think it would be very beneficial to have a similar lecture in the future.</i> - <i>Best pedi section in a long time!</i> <p><i>Great pedi section.</i></p>
<p>Learner/Trainee Evaluations</p> <p>My clinical expertise consistently is rated highly by residents and fellows.</p>	<p>Evaluation by residents and fellows for clinical practice (12 resident and 6 fellows, 2016-2018).</p> <p>Clinical knowledge: 9.0 +/- 0.2</p> <p>Clinical skills: 9.0 +/- 0.4</p>
<p>Referring Physician Evaluations or Recommendations</p> <p>I am the only provider in my section with a referral base from outside the Texas State and I am the only BCM ophthalmologist and one of the two ophthalmologists listed among the 250 worldwide pediatric ophthalmologists in the Pediatric Ophthalmology Listserve.</p>	<p>I receive approximately 60-90 referrals from out of state per month for my expertise in ROP . I also receive international referrals (approximately 5-6 per month) due to my participation in a worldwide Pediatric Ophthalmology Listserv. Please see Healthgrades.com online review (Appendix A5).</p>
<p>Citizenship Activities or Recognition</p> <p>I participate in local and international service activities, including clinical committees and Global Orbis International, which gives communities across the world access to quality eye care, transforming lives and restoring vision for those who need it most.</p>	<p>I have served on the following committees:</p> <ul style="list-style-type: none"> - Patient Flow Committee - Reducing length of stay committee - Enhancement of Documentation Strategies for Epic Users Committee (co-Chair) - I am the section liaison for Epic, MACRA and Meaningful Use Implementation

<p>Alignment with Service Line Goals</p> <p>Please see my personal statement and letter from section chief. I always put patients first, and routinely see patients outside of regular clinic hours, including weekend rounding on inpatients when I'm not on call, regardless of my personal free time. My stated goals are given below.</p> <ol style="list-style-type: none"> 1. Always put patients and families first and go out of your way to accommodate. 2. Say yes to any reasonable request and work to facilitate. 3. Provide cutting edge care to all patients 4. Provide a sound learning experience for all learners on the service. 5. Be academically rigorous in all that we do. 	<p>I have volunteered for 9 weekend clinics during 2017 (average weekend clinic coverage requirement is 0-2 in my section).</p> <p>I stayed in the hospital for 4 days and provided coverage during Hurricane Harvey for TCH, BCM clinics when other clinicians could not come to the medical center.</p>
<p>Other Evidence</p>	<p>NA</p>
<p>2. QUANTITATIVE DOCUMENTATION OF ACHIEVEMENT IN PATIENT CARE</p>	
<p style="text-align: center;">CATEGORY OR TYPE OF ACTIVITY</p> <p><i>List quantitative examples of patient care excellence. It is strongly suggested that you provide evidence for at least one metric</i></p>	<p style="text-align: center;">EXAMPLES AND DOCUMENTATION</p> <p><i>Where applicable, please attach additional evidence.</i></p>
<p>A. Dissemination of Knowledge</p>	
<p>Case Reports</p>	<ol style="list-style-type: none"> 1. Doe J, et al. 2014. Decreased Ocular Motility after Facial Trauma. Medscape Interactive Case Series (November 17). 2. Doe J, et al. 2015. A Seemingly Health Girl with a Vesicular Rash. Medscape Interactive Case Series (August 4). 3. Doe J, et al. 2015 A Six-Year Old's Eye is Partially Swollen Shut. Medscape Interactive Case Series (August 14). <p>NOTE TO APPLICANTS: when possible, include links to online resources or publications.</p>

Publications

I have published seven peer-reviewed papers with various groups of colleagues at Baylor and nationally related to my clinical activities. I am the first author on four of the papers.

1. Doe J, et al. 2015. Pharmacokinetics of bevacizumab and its effects on serum VEGF and IGF-1 in infants with retinopathy of prematurity. *Investigative Ophthalmology and Visual Science* 56(2):956-61.
2. Doe J, et al. 2016. Assessment of Plasma Cytokine Profile Changes in Bevacizumab-Treated Retinopathy of Prematurity Infants. *Investigative Ophthalmology and Visual Science* 57(4):1649-54
3. Doe J, et al. 2016. Multimodality Image-Guided Sclerotherapy of Low-Flow Orbital Vascular Malformations: Report of Single-Center Experience. *Journal of Vascular and Interventional Radiology* 27(7):987-995.
4. Doe J, et al. 2016. Pilot study of chronic maternal hyperoxygenation and effect on aortic and mitral valve annular dimensions in fetuses with left heart hypoplasia. *Ultrasound in Obstetrics and Gynecology* 48(3):365-72.
5. Doe J, et al. 2017. Congenital CMV Longitudinal Study Group. Long- term Visual and Ocular Sequelae in Patients with Congenital Cytomegalovirus Infection. *Pediatric Infectious Diseases Journal* 36(9):877-882.
6. Doe J, et al. 2017. Pediatric Eye Disease Investigator Group (PEOIG). Assessment of Lower Doses of Intravitreal Bevacizumab for Retinopathy of Prematurity: A Phase 1 Dosing Study. *JAMA Ophthalmology* 135(6):654-656.
7. Doe J, et al. 2017. Management of a Case of Retinopathy of Prematurity With Poor Visualization of the Retina. *Journal of Pediatric Ophthalmology & Strabismus* 54(5):262-264.

NOTE TO APPLICANTS: These citations are provided only as examples. In your submission, please list all authors (last name and first initial) for each cited publication. Bold your own name. Write out the full name of each journal.

<p>Online or Other Digital Communications</p> <p>I have contributed to two online resources.</p>	<ul style="list-style-type: none"> – Doe J. 2018. Single low-dose bevacizumab for treating type 1 ROP. <i>Healio/Ocular Surgery News</i> (April 8, 2016). www.healio.com – Doe J. 2018. Glaucoma: 10 Things Eye Doctors Want You to Know. <i>Healthgrades.com online slideshow</i> (February 23, 2017). www.healthgrades.com/online_slideshow
<p>Service as a Peer Reviewer</p> <p>I have served as an ad hoc reviewer for three journals, and serve on one Editorial Board.</p>	<ul style="list-style-type: none"> – <i>Journal of Ophthalmology</i> (ad hoc reviewer, 2016) – <i>American Journal of Ophthalmology Case Reports</i> (ad hoc reviewer, 2015-2017) – <i>Journal of Pediatric Ophthalmology and Strabismus Reports</i> (ad hoc reviewer, 2015-2018) – ONE Network, Pediatric Ophthalmology Editorial Board
<p>Other Evidence</p>	<p>NA</p>
<p>B. Quality Improvement and Patient Safety Contributions</p>	
<p>Development of Evidenced-based Medicine Practice</p> <p>In all of my clinical areas, I am continuously analyzing and changing my approach in order to ensure evidence-based practice. I utilize self-review of old and current literature and UpToDate, and engage in discussions with other services, senior faculty within my department, and via a worldwide discussion listserv.</p> <p>I also apply my own research results to improve practice, and provide feedback to residents and fellows on an ongoing basis.</p>	<ul style="list-style-type: none"> – My own research was instrumental in the choice of initial dosing amount for a multicenter NIH study, and review of the literature and participation in this multicenter study led me to alter my own injection site for intraocular injections in premature infants. In fact, I serve as the TCH PI for a multi-center NIH-funded ROPI study on Avastin dosing. – I reviewed my strabismus surgery results and adopted a new surgical table which led to better post-operative outcomes. – I review all resident and fellow notes for accuracy in exam findings as well as thought processes in formulating assessments, give constant feedback via e-mail or personal discussion – I serve as our section's representative for the residency Quality Improvement Morbidity and Mortality conference.

<p>Collaborative Clinical Care</p> <p>A large part of my clinical practice (Pediatric Ophthalmology inpatient/consultation service) involves collaborative care with virtually every hospital subspecialty, as well as Baylor Ophthalmology subspecialists. This occurs on an ongoing basis.</p>	<ul style="list-style-type: none"> – I take part in many coordinated surgical cases. – I am a regular participant and one of the original founding physicians in the Texas Children’s Hospital (TCH) Neonatal Intensive Care Unit “Avoiding Lung Injury” group that involves collaboration between physicians, nurses, and therapists in Neonatology, Pulmonology, and Ophthalmology. – I have participated in the TCH Neuro-oncology Tumor Board conference involving Ophthalmology, Neurosurgery, Oncology, Radiation Oncology, and Radiology, beginning in 2015.
<p>Disease Management Program</p>	<p>As outlined in the above two sections, my own research involving the use of a lower dose intraocular Avastin injection was used as the initial dosing amount for a multicenter NIH study that is currently ongoing. Also, I am actively involved in the ALL group for management of diseases of prematurity as well as a multi- disciplinary management conference of neuro-oncological patients.</p>
<p>Local Care Path Development or Championship</p>	<p>As section representative, I helped with quality improvement and patient access measures that led to \$2.2 million dollars of federal funding for TCH Pediatric Ophthalmology.</p>
<p>Other Evidence</p>	<p>NA</p>
<p>C. Leadership and Service</p>	
<p>Leadership/Active Role in Professional Organizations</p> <p>I am a member in good standing of eight professional organizations, and am a specialty fellow of the American Academy of Pediatrics</p>	<ul style="list-style-type: none"> – American Academy of Ophthalmology (2013-present) – Committee Member American Medical Association (2017-2018) – American Association for Pediatric Ophthalmology and Strabismus (2014-present) – American Academy of Pediatrics, Specialty Fellow – Texas Medical Association (2016-present)

	<ul style="list-style-type: none"> – Texas Ophthalmological Association (2013-present) – Texas Association for Pediatric Ophthalmology and Strabismus (2014- present) – Houston Ophthalmological Society (2013-present) – American Association of Physicians of Indian Origin (2013- present)
<p>Service or Section Leadership</p> <p>I contribute as a member of several departmental committees.</p>	<ul style="list-style-type: none"> – BCM Ophthalmology Residency Clinical Competency Committee Member (2015-present) – BCM Ophthalmology Residency Quality Improvement Committee, Section Member (2016-present) – BCM Ophthalmology Residency Application Reviewer (2017) – BCM Ophthalmology Cullen Course Planning Committee (2015-present) – Pediatric Ophthalmology Office Liaison (2016-present)
<p>Clinical Directorship</p>	<p>Head of TCH Pediatric Ophthalmology inpatient/ER consultation service (2016-present)</p>
<p>Hospital Committees</p>	<p>See roles listed under leadership. These include section representative to a Quality Improvement Committee.</p>
<p>Community Outreach, Work with Underserved or Rural Populations</p> <p>In addition to my work with Global Orbis International, I participate locally and internationally in health-related outreach efforts.</p>	<ul style="list-style-type: none"> – Pediatric surgical mission trip to India in 2016. – High-volume health and vision screening in Jamaica (2015, 2017). – Unite for Sight Community Vision Screening (2014 – present). – Hurricane Harvey relief at George R. Brown Convention Center and NRG Stadium (2017)
<p>Development of a New Line of Care</p> <p>In 2017-2018, I collaborated with Rice University to prototype an innovative system to screen for retinopathy of prematurity (ROP). This work has significance because lack of timely screening for infants continues to be a health challenge in remote areas.</p>	<p>From 2015-2017, I worked with Rice University College of Engineering Design Kitchen to develop a prototype ROP camera system with iPod Touch attachment. This represents a low-cost solution to the screening challenges in medically underserved regions.</p>

Other Evidence	NA																
D. Productivity																	
<p>Patient Care Productivity</p> <p>I have been consistently very clinically productive, with work RVU numbers at the 90th percentile nationally. My clinical work includes all aspects of outpatient pediatric ophthalmology and adult strabismus, with a further focus on retinopathy of prematurity (ROP) and inpatient/emergency consultation work. Many pediatric ophthalmologists refuse this work because of the potential for irregular/long hours, high liability, and the difficult and very systemically ill patients, but I relish the challenge to provide care where others either choose not to or are unable. My wRVU and clinical encounters are above 95% of my section.</p>	<p>Encounters: In 2017, outpatient clinic encounters were (95% percentile of my section). Rounding: 6 months per year (average number of rounding for pediatric ophthalmology attendings 3-4 months).</p> <table border="1"> <thead> <tr> <th></th> <th>2017</th> <th>2016</th> <th>2015</th> </tr> </thead> <tbody> <tr> <td>WRVU's</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Charges</td> <td>XXXXXX</td> <td>XXXXXX</td> <td>XXXXXX</td> </tr> <tr> <td>Payments</td> <td>XXXXXX</td> <td>XXXXXX</td> <td>XXXXXX</td> </tr> </tbody> </table>		2017	2016	2015	WRVU's				Charges	XXXXXX	XXXXXX	XXXXXX	Payments	XXXXXX	XXXXXX	XXXXXX
	2017	2016	2015														
WRVU's																	
Charges	XXXXXX	XXXXXX	XXXXXX														
Payments	XXXXXX	XXXXXX	XXXXXX														
Improvement in Resource Management and Utilization	I always engage in cost effective care. I lead didactic sessions with residents and fellows teaching them about outpatient and inpatient billing and coding, and I review and give feedback regarding their clinical assessments, especially when further testing or consultations are recommended.																
Efficiency	I lead high-volume cases and consultation rounds 4-5 days per week with teams of nurses, medical students, residents, and fellows. Given the high volume of patients and involvement of multiple providers, efficiency is extremely important, as is the ability to strike a balance between finishing the work before team members tire out, but also spending time on teaching activities.																
Business development	NA																
Other Evidence	NA																