ON MAY 6, Nick and Amanda Johnas had finished their first dance as a married couple when Amanda’s father stepped onto the dance floor for the father-daughter dance. As Bob Mulkern held Amanda close, Nick watched, knowing the moment could have been vastly different.

In November 2015, Mulkern was rushed to the emergency room with what he thought was an allergic reaction after his tongue swelled up. Instead, Mulkern was shocked to learn he had liver disease and liver cancer. While he initially underwent radiation treatments, it became clear that Mulkern’s only hope was a living-donor liver transplant.

Unfortunately, none of Mulkern’s immediate family members – his wife, two sons or his daughter – were a match. That’s when Nick, Amanda’s then-fiancé, was tested as a potential donor.

Nick was a match. “There was no question, and I never had a doubt,” says Nick. “I couldn’t live with myself knowing that I could have helped and hadn’t done anything about it.”

On Feb. 21, 2017, Parsia Vagefi, MD, a surgeon in the MGH Transplant Center, removed 60 percent of Nick’s liver for transplantation into Mulkern. Both surgeries – which involved a large team of nurses, doctors, surgeons and coordinators – were a success.

(Continued on page 4)

Home Base raises record-breaking $1.7 million for veterans, military families

ON OCT. 5, HOME BASE, a Red Sox Foundation and MGH program, hosted the fifth annual Mission: Gratitude gala, raising a record-breaking $1.7 million to support its mission to heal the invisible wounds of war for veterans of all eras and their families. Nearly 600 guests attended the event, which was hosted by Randy Price, a U.S. Air Force veteran and WCVB-TV NewsCenter 5 anchor.

As Boston’s Zakim Bridge was illuminated in red, white and blue to commemorate the event, guests enjoyed a reception and dinner aboard the USS Constitution and live performances by Sal Gonzalez, an Iraq veteran, and Kristin Chenoweth, Emmy and Tony Award-winning actress and singer. Home Base’s impact on the veteran community was personified through a powerful testimonial by Greg Vaillancourt, a U.S. Army veteran and former Home Base patient, who shared the struggles he faced transitioning back into civilian life and how Home Base helped him heal.


“Over the past eight years, Home Base has provided hope to the hopeless, and served as a bridge from the darkness of despair into the light of a bright future,” Hammond said. (Continued on page 3)
 Profiles in Education: Devin Oller, MD

This profile is part of a series designed to highlight the importance and impact of the hospital’s teaching mission and the work of the MGH Executive Committee on Teaching & Education (ECOTE).

Devin Oller, MD, is the chief resident of Internal Medicine.

WHO DO YOU TEACH AND WHAT DO YOU HOPE THEY LEARN FROM YOU? We have more than 150 interns and residents in the Department of Medicine, and the majority of their time here at the MGH is spent delivering care to patients on our inpatient wards. When they rotate off an inpatient service and onto an ambulatory rotation, I’m tasked with creating and delivering content that will make them better outpatient doctors. Even if a resident doesn’t plan to practice primary care, almost all residents will go into a specialty that is mostly office-based, and I hope that our ambulatory didactics expand what residents believe can be accomplished in the outpatient setting. I also teach medical students through the Crimson Care Collaborative clinics at Chelsea Health Center and the Nashua Street Jail.

WHEN DID YOU START TEACHING? HOW HAS YOUR TEACHING STYLE CHANGED OVER TIME? During medical school, I taught Saturday nutrition classes to middle schoolers in Philadelphia. I quickly learned the only thing to keep kids in their seats during Saturday school was crafting lessons that surprise them and keep them guessing what would come next. The level of content creation this required wasn’t sustainable during residency, so my style shifted. I started to use clinical cases to teach my co-residents and interns, focusing on crafting questions that probe not just what the learner understands but also what the field of medicine does or doesn’t understand.

WHAT MAKES YOU MOST PROUD OF YOUR WORK AS AN EDUCATOR? I’m most proud when I see residents wanting to create their own content and make the curriculum their own. They understand that part of professional development is being humble enough to oscillate between the teacher and learner roles. I do a lot of teaching on motivational interviewing with medical students – a technique that helps providers engage patients around behavior change. I often watch students use motivational interviewing tools for the first time with patients and see them stunned and humbled by how much patients are willing to share with them. It’s that point where the learner stops trying to acquire knowledge like it’s some currency that can be exchanged and banked and realizes that the experience is teaching them a lot more.

HOW ARE YOU EVOLVING THE WAY TEACHING IS DONE WITHIN YOUR AREA? The internal medicine ambulatory curriculum is moving away from traditional lectures delivered by content experts to peer-facilitated, case-based discussions, simulation sessions, roundtables, debates and panel coaching. For the 2017-18 academic year, all residents rotate through six two-week blocks, each with a central theme – Foundations, Substance Use Disorders and Behavioral Health, Metabolism, Cardiovascular Disease, Geriatrics and Palliative Care, and Hematology Oncology. Residents also will be exposed to issues within each theme – for example, bringing residents into conversation with local organizations working with people in recovery during the Substance Use Disorder block. We believe a peer-led and community-facing ambulatory curriculum is critical in preparing residents to be leaders and innovators in care delivery.

HOW DO YOU BENEFIT BY TEACHING OTHERS? HOW DO PATIENTS BENEFIT WHEN YOU TEACH OTHERS? Teaching others, and specifically developing a new curriculum, forces me to think first about what I don’t know and how I want to collaborate with the brilliant colleagues I have around me. It’s really been these collaborations that have been the most gratifying. From the patient perspective, they benefit greatly from residents understanding how to intervene and change the course of a disease across the care continuum. By really grounding our new ambulatory curriculum in the importance of transitions and team-based care, I think we’re going to see residents grow as team leaders in the outpatient setting – something patients will undoubtedly feel.

General Store goes green by going blu

Blue Sterile Wrap is a polypropylene plastic used in operating rooms and hospitals throughout the country to protect patient gowns, toiletries, medical devices and surgical instruments from contamination. Now, in an effort to reduce waste, the blue wrap is being recycled and used to create reusable MGH tote bags.

Though the plastic is instrumental in hospital cleanliness, it also contributes to hospital waste – 20-30 percent of which comes from operating rooms. Of that, 19 percent is blue wrap that ends up in landfills. To date, Circular Blu has diverted more than 100,000 pounds of blue wrap from landfills.

The reusable bags are created by Circular Blu – a company based in Medford, Massachusetts – that “up-cycles” blue wrap to create the bags. In support of this green effort, the MGH General Store now carries two styles of the Circular Blu bags, one in solid blue and the other featuring blue and white stripes.

“When Monica Nakielski, Partners HealthCare project manager for sustainability, approached me about carrying the bags, I was skeptical,” says Shannon Babbitt Hoyt, Ladies Visiting Committee buyer for the MGH General Store. “I was pleasantly surprised by the quality and strength of the bag. I think our customers will enjoy the bags and like the customized MGH logo.”
Information Security and Privacy Awareness Week

FROM OCT. 16 – OCT. 20, the Partners HealthCare community will celebrate the fifth annual Information Security and Privacy Awareness Week. During this time, employees can further learn how to secure confidential data and protect their privacy in the new mobile world.

Staff can schedule a Workplace Security Review, explore the Awareness Week website, take the online survey or visit the awareness table by Coffee Central on Oct. 20. Visitors will earn an entry in a special gift card raffle each time they stop by.

For more information and a full schedule of events, visit https://pulse.partners.org/ispo_awareness_week.

— Home Base

(Continued from page 1)

“With your support, Home Base will build a state-of-the-art facility that will provide us with the space and resources we need to double the size of our existing programs and significantly expand the care we provide for mental health, brain injuries and wellness.”

For more information, visit www.missiongratitude.org.

Ready, set, Apollo!

SINCE ITS LAUNCH six months ago, Apollo – the MGH’s newly redesigned intranet – has continued to grow. New departments and committees are continually being added and hospitalwide events and news items are updated daily and featured on the home page and calendar.

Apollo’s latest addition is its expanded reach. Staff now can access the site from an encrypted mobile phone or home computer with their Partners username and password. Also new to the home page are a Just the Vitals feature and a Photo of the Day highlight – two great ways to learn more about the employees who work at the MGH and the many community happenings offered at the hospital.

To view these new features visit apollo.massgeneral.org. To submit a Photo of the Day or Vitals questionnaire, email apollo@partners.org.

FIVE TIPS TO STAY SAFE & SECURE IN THE MOBILE WORLD

1. Keep your anti-virus up to date to protect your device against malicious software infections.
2. Protect your data by encrypting mobile devices which are easily lost or stolen.
3. Use long and strong passwords to protect against unauthorized access.
4. Safeguard PHI and confidential data when transporting it from one Partners site to another.
5. Use a VPN to securely connect to the Partners network when offsite.
Liver transplant
(Continued from page 1)

“A living-donor transplant was Bob’s only real chance at survival,” says Vagefi. “Surgery for both the donor and recipient carry their own risks, but Nick truly felt like this was something he had to do and that he wanted to do.”

For Mulkern, the surgery was a step toward a new life. “The surgery didn’t rattle me because I knew it had to be done,” he says. “I was confident in the hands I was in as well. Dr. Vagefi was so professional and kept things light.”

Now, Mulkern shows no signs of liver cancer or liver disease and he says his liver and Nick’s liver are both regenerating at the correct size and rate.

“The father-daughter dance and the walk down the aisle were my motivations,” says Nick of his decision to donate. “The father-daughter dance was really when everything settled in. It was just so perfect to see my beautiful wife coming down the aisle with her father, knowing that he is healthy and has a new chance at life.”

For Amanda, her wedding day was nothing short of perfect. “It was like a fairytale – pure bliss and happiness. Here are the two men I love more than anything – one who I’ve spent all of my life with and the other who I will spend the rest of my life with. Now that Nick and I are married and my dad is healthy, I have everything I need. Now it’s just continued health and happiness.”

Bowditch Prize call for nominations

NOMINATIONS ARE NOW being accepted for the 2018 Nathaniel Bowditch Prize. The $5,000 prize is awarded each year by the MGH Board of Trustees to any person or team (clinical or nonclinical) who has made a significant contribution to improving quality of care at the MGH while reducing the cost of such care. All nominations for the Bowditch Prize should be submitted by Nov. 15 to Andrew Warshaw, MD, chairman of the selection committee, in Bulfinch 360. The nomination form can be found on apollo.massgeneral.org.