Mr. Chairman, Ranking Member Burr, and Members of the Committee, thank you for the opportunity to discuss the results of the Office of Inspector General’s (OIG) extensive work at the Phoenix VA Health Care System (PVAHCS), as outlined in our report, *Review of Alleged Patient Deaths, Patient Wait Times, and Scheduling Practices at the Phoenix VA Health Care System* (August 26, 2014). I am accompanied by John D. Daigh, Jr., M.D., Assistant Inspector General for Healthcare Inspections; Ms. Linda A. Halliday, Assistant Inspector General for Audits and Evaluations; Ms. Maureen T. Regan, Counselor to the Inspector General; and Mr. Larry Reinkemeyer, Director, OIG Kansas City Audit Operations Office.

**BACKGROUND**

The OIG reviewed allegations at the Phoenix VA Health Care System (PVAHCS) that included gross mismanagement of VA resources, systemic patient safety issues, possible wrongful deaths, and we are continuing to review possible criminal misconduct by VA senior hospital leadership. We initiated this review in response to allegations first reported through the OIG Hotline. We expanded our work at the request of the former VA Secretary and the Chairman of the House Committee on Veterans’ Affairs (HVAC) following an HVAC hearing on April 9, 2014, on delays in VA medical care and preventable veteran deaths. We also received requests from this Committee, as well as individual Members of Congress.

On May 28, 2014, we published our report, *Review of Patient Wait Times, Scheduling Practices, and Alleged Patient Deaths at the Phoenix Health Care System – Interim Report*, substantiating serious conditions at the PVAHCS. We provided VA leadership with recommendations for immediate implementation to ensure all veterans receive appropriate care.

Our August 26, 2014, report provides more extensive information previously provided in the interim report to reflect the results of our review and includes information on the reviews by OIG clinical staff of patient medical records. We addressed the following questions in our August report:

- Were there clinically significant delays in care?
- Did PVAHCS omit the names of veterans waiting for care from its Electronic Wait List (EWL)?
Were PVAHCS personnel following established scheduling procedures?

Did the PVAHCS culture emphasize goals at the expense of patient care?

Are scheduling deficiencies systemic throughout VHA?

### SCOPE OF REVIEW

Due to the multitude and broad range of issues, a multidisciplinary team comprising board-certified physicians, nurses, health care inspectors along with special agents and auditors evaluated the many allegations to determine their validity and assign individual accountability if appropriate. The team interviewed numerous individuals to include the principal complainants: Dr. Samuel Foote, a retired PVAHCS physician, and Dr. Katherine Mitchell, the Medical Director of the PVAHCS Operation Enduring Freedom/Operation Iraqi Freedom/and Operation New Dawn (OEF/OIF/OND) clinic. In addition:

- We obtained and reviewed VA and non-VA medical records of patients who died while on a wait list or whose deaths were alleged to be related to delays in care.
- We reviewed two statistical samples of completed primary care appointments to determine the accuracy of patient wait times based on our assessment of the earliest indication a patient desired care.
- We reviewed over 1 million email messages, approximately 190,000 files from 11 encrypted computers and/or devices, and over 80,000 converted messages from Veterans Health Information Systems and Technology Architecture emails.

### Patient Care Reviews

Board-certified physicians and nurses in the OIG Office of Healthcare Inspections conducted a review of VA medical records for 3,409 veterans to identify delays and/or lapses in providing quality care. We also requested death certificates for 166 veterans and subpoenaed medical records from non-VA facilities for three veterans. We reviewed Medicare and other records to determine whether these veterans received care by non-VA providers.

The delays described in the report show that access barriers resulted in delays in providing quality primary and specialty care at the PVAHCS. In the course of patient case reviews, we also identified other quality of care issues unrelated to delays. These delays and lapses in care may have had or could have had a negative impact on the health and welfare of the veteran. However, we did not conclusively assert that the absence of timely quality care caused the deaths of these veterans.

In conducting our reviews, we did not apply the medical negligence standard applicable to care provided in the State of Arizona. The OIG has no authority or responsibility to make determinations as to whether acts or omissions by VA constitute medical negligence under the laws of any state or to compensate veterans or their families if the veteran suffered an injury as the result of the provision of health care. Making such determinations is a Department program function and the OIG is prohibited by statute from making program decisions to preserve its independence to conduct oversight of
VA’s programs and operations. Decisions regarding VA’s liability in these matters lie with the Department and the judicial system under the Federal Tort Claims Act.

Dr. Foote first contacted the OIG in September 2013 and met with OIG representatives in December 2013. In February 2014, Dr. Foote alleged that potentially 40 veterans died waiting for an appointment, and these alleged deaths were widely reported in the media. We pursued this allegation and interviewed Dr. Foote, but he was unable to provide us a list identifying by name 40 specific patients. He provided HVAC the names of 17 deceased patients, which we received from the Committee and reviewed. Based on our own review of PVAHCS electronic records, we were able to identify 40 veterans who died while on the EWL during the period April 2013 through April 2014. These veterans were included in the review of records for 3,409 patients derived from multiple sources, which included 293 deaths.

During our review, we were provided with numerous lists of PVAHCS patients. These patient lists were obtained by OIG staff while onsite at PVAHCS; obtained from the PVAHCS Quality Management office and other similar offices; submitted to the OIG Hotline; and obtained from external sources such as the HVAC, other congressional sources, and media reports. In all, OIG Office of Healthcare Inspections physicians and clinical staff examined the electronic health records (EHR) and other information for 3,409 veteran patients on the following lists:

- Veterans Health Administration (VHA) EWL – The EWL was used to list patients waiting to be scheduled for an appointment. It is a VHA-sanctioned list described in a June 9, 2010, Under Secretary for Health Directive. Patients on PVAHCS’s EWL could be waiting for scheduling for either primary or specialty care.
- PVAHCS Physician List – Two PVAHCS physicians provided the names of patients for whom substandard care due to scheduling delays was alleged.
- HVAC – On April 9, 2014, the HVAC provided to the OIG a list of 17 PVAHCS patients, all deceased, who allegedly had both excessive and harmful waiting times.
- Hotline List – OIG’s Hotline received numerous contacts concerning PVAHCS. Many alleged poor quality of care or harm to individual patients.
- Media – Print and electronic media reported allegations of substandard care at PVAHCS. Many reports identified and described individual patients’ issues.
- Schedule an Appointment Consult List – Clinical staff at PVAHCS wanted to ensure that inpatients who did not have a primary care physician (PCP) would have primary care follow-up post-discharge. They began using the system’s “Schedule an Appointment” consult function to accomplish this. Usually a clinical consult request is for an additional opinion, advice, or expertise. Emergency Room clinicians and some specialty services staff also adopted this practice.
- Institutional Disclosure List – PVAHCS patients for whom institutional disclosures had been made to patients or their families for any care-related reason. Institutional disclosures include discussions of events not associated with substantial harm. For example, PVAHCS would disclose that a patient’s temperature was taken using an oral probe without a protective cover, a minor
surgical procedure had to be interrupted because of a power failure, or an x-ray was performed on the wrong patient.

- **Newly Enrolled/Appointment Requested (NEAR) List** – During the enrollment application process, a veteran may indicate on the enrollment form that he/she would like to be contacted to schedule an initial appointment. The NEAR list is a tool used by enrollment staff to tell schedulers that a newly enrolled veteran has requested an appointment. The NEAR list is used for initial appointments only.
- **Suicides** – PVAHCS patients known by either the facility or the Maricopa County, Arizona, Medical Examiner’s Office to have committed suicide.
- **Backlog Never Completed** – 544 patients who were to be scheduled through the new patient backlog redistribution process but who never received an appointment.
- **Urology Service** – Partial list of patients from the closed consult and paper lists.
- **Helpline Paper Printouts** – From March–April 2014, patients who called the PVAHCS’s Helpline requesting an appointment were placed on a paper screenshot.
- **Helpline Paper Printouts** – Paper screenshots found by an employee in June 2014.

The OIG examined the EHRs and other information for the 3,409 veteran patients, including the 40 patients we found on the EWL who were deceased, and identified 28 instances of clinically significant delays in care associated with access or scheduling. Of these 28 patients, 6 were deceased. In addition, we identified 17 cases of care deficiencies that were unrelated to access or scheduling. Of these 17 patients, 14 were deceased. During our review of EHRs, we considered the responsibilities and delivery of medical services by PCPs versus specialty care providers (such as urologists, endocrinologists, and cardiologists). Our analysis found that the majority of the patients were on official or unofficial wait lists and experienced delays accessing primary care, although in some cases, patients were receiving specialty care through VA or non-VA providers for pressing clinical issues. For example, a patient was being seen by a VA cardiologist, but was also on the wait list to see a PCP at the time of death. The 45 cases discussed in the report reflect unacceptable and troubling lapses in follow-up, coordination, quality, or continuity of care.

The review process included an evaluation of the medical records of 3,409 patients from the sources discussed above. The OIG staff who conducted the reviews are physicians and clinicians. Reviewers used clinical judgment to determine whether, in their professional opinion, an identified delay resulted in a harmful outcome or a potentially harmful outcome. OIG physicians reviewed 743 patients. If a physician’s review of the records identified deficiencies in the quality of care provided to the patient, the case was reviewed by a second OIG physician. If the two physicians agreed, the case was included in the report. Information on the qualifications of the OIG physicians who conducted these reviews can be found in the attached curricula vitae.

Several patients in cases reviewed opted for non-VA care at critical junctures. As needed, but not in all cases, we obtained and reviewed the relevant private sector
medical records. For 166 deceased patients reviewed in a second-level physician review, we requested death certificates from Maricopa County and the State of Arizona, whom we would like to acknowledge for their cooperation and expedience in meeting our requests. Supplemeting the data gathered from the EHR, we also analyzed information, when available, from sources that included Medicare, non-VA health records, death certificates, media reports, and interviews with VA staff. Approximately 23 percent of the patients we reviewed received private sector medical care funded by Medicare or Medicaid, and 35 percent had insurance coverage beyond VA.

OBSTACLES TO CARE
We identified several patterns of obstacles to care that resulted in a negative impact on the quality of care provided by PVAHCS. Patients recently hospitalized, treated in the emergency department, attempting to establish care, or seeking care while traveling or temporarily living in Phoenix often had difficulty obtaining appointments. Furthermore, although we found that PVAHCS had a process to provide access to a mental health assessment, triage, and stabilization, we identified problems with continuity of mental health care and care transitions, delays in assignment to a dedicated health care provider, and limited access to psychotherapy services.

Panel Size
Primary care was one important medical service that was not able to keep up with demand. A primary care provider’s target panel size is locally determined as it is dependent on such factors as disease complexity, number of support staff, number of clinic rooms available for a provider’s use, whether a provider is a new hire, and time available for direct patient care versus other activities. When a provider’s panel size exceeds a clinic’s target panel size, the capacity to add new patients becomes limited. Constrained panel capacity can lead to increases in the length of time it takes new patients to get an appointment. While onsite, we obtained individual provider appointment grids and panel assignments and the targeted panel capacities for April 2014. The target panel size at the PVAHCS is 1,260 patients. For the PVAHCS as a whole, the aggregate primary care panel capacity used was 98 percent. When PCPs left VA employment and their unassigned patients were factored in, aggregate panel capacity used was greater than 100 percent.

The number of unassigned patients represents a demand for established clinic spaces and panel capacity that is masked when these patients remain unassigned for extended periods. If a new provider has been hired and is known to be coming on-board within a tenable time frame, this may be practical. However, in situations where recruiting is difficult and on-boarding fairly lengthy, or for other reasons (e.g., a series of provider medical illnesses) primary care clinics routinely have substantial numbers of unassigned patients, access and continuity of patient care suffer.

Actions that can be taken to increase primary care access include increasing the number of providers, increasing target panel size, optimizing the match between variations in appointment demand and supply, expanding clinic hours, and increasing the use of non-VA purchased care. Increases in staff or panel size may be contingent
on having necessary space, the ability for providers to simultaneously use multiple
exam rooms, efficient scheduling processes, sufficient support staff, or other process
changes such as support for streamlining medical record documentation. For example,
in several primary care clinics, available space at the PVAHCS is only able to support 1
room per clinician while the VHA recommended target panel size (1,200) assumes the
availability of 3 rooms per provider.

Urology Service
Urology Service was also unable to keep up with the demand for services. During our
review, it became clear that the Urology Service at PVAHCS was in turmoil during the
2012 to 2014 timeframe. There were a number of urology physician staffing changes,
delays in the procurement of non-VA purchased care consults for urology, and
difficulties coordinating urologic care. The OIG is currently working from a list of 3,526
patients who may be at risk for having received poor quality urologic care. As a result,
urology services at PVAHCS is the subject of an ongoing review. In addition, non-
urology cases whose evaluation could not be completed within the time constraints of
the August 2014 report will be included in the upcoming final review.

Mental Health Services
We found that PVAHCS had a process to provide access to a mental health
assessment, triage, and stabilization. However, we identified problems with continuity
of mental health care and care transitions, delays in assignment to a dedicated health
care provider, and limited access to psychotherapy services. When a facility becomes
reliant on a walk-in clinic structure to increasingly provide daily routine or ongoing
mental health services because of diminished access to the regular outpatient mental
health clinic, issues with provider continuity, care transitions, and provider assignment
arise. Since coming to PVAHCS in October 2013 from outside the VA system, the Chief
of Psychiatry has taken several steps to address these issues. Thirteen additional
mental health prescribing clinicians were recently hired to provide the ability to assign
patients to a mental health provider and increase the availability of new and established
patient appointments. The mental health clinic has recently been re-organized to help
improve both access to and continuity of care.

We identified prolonged waits for access to types of individual psychotherapies. In April
2014, 105 patients were waiting to be seen by a non-VA provider; as of September 4,
2014, 24 patients are waiting to be seen.

Patients Waiting for Care
As of April 22, 2014, we identified about 1,400 veterans waiting to receive a scheduled
primary care appointment who were appropriately included on the PVAHCS EWL.
However, as our work progressed, we identified over 3,500 additional veterans, many of
whom were on what we determined to be unofficial wait lists, waiting to be scheduled for
appointments but not on PVAHCS’s official EWL. These veterans were at risk of never
obtaining their requested or necessary appointments. PVAHCS senior administrative
and clinical leadership were aware of unofficial wait lists and that access delays existed
but did not effectively address these issues. Throughout the course of our review, we
promptly provided PVAHCS leadership the names of all veterans we identified as being on an unofficial wait list to enable them to take the necessary actions to get veterans the care they needed.

Inappropriate Scheduling Practices in Use at PVAHCS
From interviews of 79 PVAHCS employees involved in the scheduling process, we identified the following types of scheduling practices not in compliance with VHA policy. Some schedulers identified multiple inappropriate scheduling practices.

- Thirty staff stated they used the wrong desired date of care, resulting in appointments showing a false 0-day wait time.
- Eleven staff stated they “fixed” or were instructed to “fix” appointments with wait times greater than 14 days. They did this by rescheduling the appointment for the same date and time but with a later desired date.
- Twenty-eight staff stated they either printed out or received printouts of patient information for scheduling purposes. Staff said they kept the printouts in their desks for days or sometimes weeks before the veterans were scheduled an appointment or placed on the EWL.

PVAHCS executives and senior clinical staff were aware that their subordinate staff were using inappropriate scheduling practices. In January 2012 and later in May 2013, the Veterans Integrated Service Network (VISN) 18 Director issued two reports that found PVAHCS did not comply with VHA’s scheduling policy. Our review also determined PVAHCS still did not comply with VHA’s scheduling policy. Specifically, according to VISN 18 staff, PVHCS had not completely trained their clerks or established EWLs in the clinics. As a result of using inappropriate scheduling practices, reported wait times were unreliable, and we could not obtain reasonable assurance that all veterans seeking care received the care they needed.

The emphasis by Ms. Sharon Helman, the Director of PVAHCS, on her “Wildly Important Goal” (WIG) effort to improve access to primary care resulted in a misleading portrayal of veterans’ access to patient care. Despite her claimed improvements in access measures during fiscal year (FY) 2013, we found her accomplishments related to primary care wait times and the third-next available appointment were inaccurate or unsupported. After we published our interim report, the Acting VA Secretary removed the 14-day scheduling goal from employee performance contracts.

HISTORY OF VHA SCHEDULING AND DATA RELIABILITY PROBLEMS
Since July 2005, OIG published 20 oversight reports on VA patient wait times and access to care yet VHA did not effectively address its access to care issues or stop the use of inappropriate scheduling procedures.

When VHA concurred with our recommendations and submitted an action plan, VA medical facility directors did not take the necessary actions to comply with VHA’s program directives and policy changes.
In April 2010, in a memorandum to all VISN Directors, the then-Deputy Under Secretary for Health for Operations and Management (DUSHOM) called for immediate action to review schedule practices and eliminate all inappropriate practices. The memorandum stated that in order to improve scores on assorted access measures, certain facilities have adopted the use of inappropriate scheduling practices that were not in line with patient-centered care.

In May 2013, the then-DUSHOM waived the FY 2013 annual requirement for facility directors to certify compliance with the VHA scheduling directive, further reducing accountability over wait time data integrity and compliance with appropriate scheduling practices. This annual certification requirement was initiated in January 2011. Additionally, the breakdown of the ethics system within VHA contributed significantly to the questioning of the reliability of VHA’s reported wait time data.

NATIONWIDE SYSTEMIC PROBLEM
Inappropriate scheduling practices were a nationwide systemic problem. We identified multiple types of scheduling practices in use that did not comply with VHA’s scheduling policy. These practices became systemic because VHA did not hold senior headquarters and facility leadership responsible and accountable for implementing action plans that addressed compliance with scheduling procedures.

Since the PVAHCS story first appeared in the national media, we received approximately 225 allegations regarding PVAHCS and approximately 445 allegations regarding manipulated wait times at other VA medical facilities through the OIG Hotline, from Members of Congress, VA employees, veterans and their families, and the media.

The OIG Office of Investigations opened investigations at 93 sites of care in response to allegations of wait time manipulations. The investigations focused on whether management ordered schedulers to falsify wait times and EWL records or attempted to obstruct OIG or other investigative efforts. Investigations continue, in coordination with the Department of Justice and the Federal Bureau of Investigation. While most are still ongoing, these investigations are confirming that wait time manipulations were prevalent throughout VHA.

As of August 2014, among the variations of wait time manipulations, our ongoing investigations at the 93 sites have, thus far, found many medical facilities were:

- Using the next available date as the desired date to “0-out” appointment wait times.
- Canceling appointments and rescheduling appointments to make wait times appear to be less than they actually were. We substantiated that management at one facility directed schedulers to do this.
- Using paper wait lists rather than official EWLs.
- Canceling consultations (consults) without appropriate clinical review.
- Altering clinic utilization rates to make it appear the clinic was meeting utilization goals.
Wherever we confirm potential criminal violations, we will present our findings to the appropriate Federal prosecutor. If prosecution is declined, we will provide documented results of our investigation to VA for appropriate administrative action. We will do the same if our investigations substantiate manipulation of wait times but do not find evidence of any possible criminal intent. Finally, we have also kept the U.S. Office of Special Counsel apprised of our active criminal investigations as they relate to their numerous referrals to VA of whistleblower disclosures of allegations relating to wait times and scheduling issues.

Prior to our work at PVAHCS, we initiated an audit of the Health Eligibility Center. Soon after, the OIG Hotline received complaints that the Health Eligibility Center purged over 10,000 veterans’ health care applications to improve performance metrics. The same complaint also identified that VHA had a backlog of over 600,000 unprocessed enrollment applications. We have expanded our work to assess the merits of these allegations, as processing veterans’ applications for enrollment in VA health care is a first and important step to ensuring access to care is available and meeting veterans’ needs.

**CONCLUSION**

The VA Secretary has acknowledged the Department is in the midst of a serious crisis and has stated VA must work to get veterans off wait lists, address cultural and accountability issues, and use their resources to consistently deliver timely health care. The VA Secretary concurred with all 24 recommendations and submitted acceptable corrective action plans.

Our findings and conclusions provide VA a major impetus to re-examine the entire process of setting performance expectations for its leaders and managers. Along with a rigorous follow up to ensure full implementation of all corrective actions, we plan on initiating a series of reviews based upon allegations received of appointment scheduling irregularities, barriers to access to care, and other issues that affect medical care, quality, and productivity. These reviews will provide us the opportunity to determine whether senior VA medical facility officials have implemented the Secretary’s action plan.

If headquarters and facility leadership are held accountable for fully implementing VA's action plans, VA can begin to regain the trust of veterans and the American public. Employee commitment and morale can be rebuilt, and most importantly, VA can move forward to provide timely access to the high-quality health care veterans have earned—when and where they need it.

Mr. Chairman, this concludes our statement and we would happy to answer any questions you or other Members of the Committee may have.
CURRICULUM VITAE

NAME:
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EDUCATION:

NON MEDICAL:
United States Military Academy
West Point, NY
B.S. 1974

University of Maryland, University College
B.S. (Accounting) 1998

American University
Masters in Taxation, 2000

MEDICAL:
University of Texas Health Science Center
Southwestern Medical School
Dallas, Texas
MD 1978

POSTGRADUATE EDUCATION:

PEDIATRIC INTERNSHIP:
Fitzsimons Army Medical Center
Denver, Colorado
1978-79

PEDIATRIC RESIDENCY:
Fitzsimons Army Medical Center
Denver, Colorado
1979-80

CHILD NEUROLOGY FELLOWSHIP:
Daigh, JD
University of Texas - Dallas, Southwestern Medical School
Parkland and Dallas Children’s Hospitals
Dallas, Texas
1980-83

BOARD CERTIFICATION:
American Board of Pediatrics 1984
American Board of Psychiatry and Neurology 1986

LICENSE:
Physician Maryland D30048
CPA Maryland # I026445

PROFESSIONAL EXPERIENCE:
Assistant Inspector General For Healthcare Inspections, Office of the Inspector General, Department of Veterans Affairs 1/04 to present

Associate Director, Medical Consultation and Review, Department of Veterans Affairs, Office of the Inspector General 02/02 to 1/04

Director, Program Budget & Execution, TRICARE Management Activity 12/99 to 02/02

Senior Budget Analyst, TRICARE Management Activity 12/98-12/99

Chief, Department of Neurology, Walter Reed Army Medical Center 8/96-12/98
Chief Child Neurology, WRAMC 7/94 to 8/96
Assistant Chief of Child Neurology 7/93 to 7/94
Assistant Chief Neurology, Walter Reed Army Medical Center 7/92 to 8/96

Staff Neurologist Fitzsimons Army Medical Center 7/91 to 7/92

Assistant Chief Child Neurology WRAMC 1983 to 7/1991

Assistant Professor of Neurology
Assistant Professor of Pediatrics

Daigh, JD
Uniformed Services University of the Health Sciences, Bethesda, Maryland 1984 to 02/02

Assistant Program Director, Neurology Residency WRAMC 8/93 to 12/98

MILITARY SERVICE:
Retired from Active duty 02/02

EXAMINER

COMMITTEES
American Academy of Neurology Committee on Government Affairs 1993-1997

National Tuberous Sclerosis Society, Professional Advisory Board Member, 1994-1996

AWARDS
Presidential Rank Award for Meritorious Service 2007

PUBLICATIONS:


Daigh, JD


PRESENTATIONS:
1. Cook JD, Henderson-Tilton AC, Daigh JD, Oliver YP: Beneficial response to a Ca channel antagonist in myotonic syndromes. American Academy of Neurology, April 1984


5. Director, Conference on Tuberous Sclerosis, Fall 1993, Washington, DC


Daigh, JD
August 2014

CURRICULUM VITAE

Jerome E. Herbers, Jr., MD, MBA, FACP

EDUCATION

Primary and Secondary, Memphis, Tennessee
B.A., Johns Hopkins University, Baltimore, MD 1975
M.D., University of Tennessee, Memphis, TN 1979
M.B.A., Johns Hopkins University, Baltimore, MD 2006

POSTGRADUATE TRAINING

Internship, Categorical Diversified in Psychiatry, 1979-1980
Walter Reed Army Medical Center, Washington, DC
Residency, Internal Medicine, Walter Reed 1980-1982
Fellowship, General Internal Medicine, 1985-1987
Walter Reed and Uniformed Services University of the Health Sciences (USUHS), Bethesda, MD

BOARD CERTIFICATION

American Board of Internal Medicine (# 85441) 1982
Added Qualifications in Geriatric Medicine (# 085441) 1994
Renewed 2004
Meeting Maintenance of Certification Requirements

MEDICAL LICENSURE

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PROFESSIONAL POSITIONS

Staff Internist, Walter Reed Army Medical Center, Washington DC 1985-1995
Chief, Internal Medicine Clinic 1990-1992
Chief, General Medicine Service 1992-1995
Associate Professor of Clinical Medicine, USUHS 1993-1998
Assistant Chief, Medical Service, Department of Veterans Affairs Medical Center (VAMC), Washington DC 1995-2004
Associate Professor of Medicine, Georgetown University, Washington DC 1996-2004
Adjunct Associate Professor of Medicine, Howard University 2001-2004
Curriculum vitae: Jerome E. Herbers, Jr., M.D.

Adjunct Associate Professor of Clinical Medicine, USUHS 1998-present
Associate Director, Medical Consultation and Review 2004-present
  VA Office of the Inspector General, Washington DC
          (Senior Executive Service)
Volunteer physician, Mobile Medical Care, Inc., Bethesda, MD 2007-present

CLINICAL TEACHING (most recent)
Preceptor and Attending, 3rd year clinical clerkship, USUHS 1986-2006, 2009-present

SOCIETY MEMBERSHIPS
Association of Program Directors in Internal Medicine 1996-2004
Society of General Internal Medicine 1985-2012
American College of Physicians (ACP) Fellow, 1992 1984-present
American Geriatrics Society 2014-present

PUBLICATIONS IN CRITICALLY REFEREED JOURNALS; INVITED CHAPTERS


SELECTED REPORTS, VA OFFICE OF INSPECTOR GENERAL


This was a review of care provided for a marine who was seriously wounded in Iraq, treated initially in military facilities, and died after transfer to a VA hospital for rehabilitation.


Curriculum Vitae
Thomas W. Jamieson, MD

CURRENT POSITION:

Senior Physician, Medical Consultation and Review, United States Department of Veterans Affairs, Office of Inspector General, Office of Healthcare Inspections, Washington, DC; [January 2011 to present]

Prior Position:

Director, Medical Student Ambulatory Education, VA Boston Healthcare System (Medicine), Boston, MA; Hospitalist Ward Attending, Medicine Consult Attending, and Primary Care Outpatient Medicine; [April 2008 to January 2011]

ACADEMIC TRAINING:

1972 B.S. University of Notre Dame, South Bend, IN
1976 M.D. St. Louis University School of Medicine, St. Louis, MO
1998 J.D. American University Washington College of Law, Washington, DC

POSTDOCTORAL TRAINING:

1976-77 Intern, University of Missouri/Kansas City, Kansas City, MO
1977-79 Resident (Medicine), Cleveland Clinic Foundation, Cleveland, OH
1982-84 Fellow in Rheumatology, University of Kansas, Kansas City, KS

ACADEMIC APPOINTMENTS:

2006-08 Clinical Assistant Professor of Medicine,
Brown Medical School, Providence, RI
1992-2005 Associate Professor of Medicine,
Uniformed Services University School of Health Sciences,
Bethesda, MD
1986-92 Assistant Professor of Medicine,
Uniformed Services University School of Health Sciences,
Bethesda, MD
1984-85 Assistant Professor of Medicine,
University of Kansas School of Medicine,
Kansas City, KS
HOSPITAL APPOINTMENTS:

2008  Staff Physician/Attending,
Veterans’ Affairs Boston Healthcare System, Boston, MA
2006-08 Staff Physician/ Hospitalist/Attending,
Veterans’ Affairs Medical Center, Providence, RI
2003-06 Staff Physician/ Hospitalist,
Newport Hospital, Newport, RI
1985-2003 Staff Physician/Attending,
National Naval medical Center, Bethesda, MD
1984-85 Staff Physician/Attending,
University of Kansas Medical Center, Kansas City, KS
1979-82 Staff Physician/Attending,
Naval Medical Center, Portsmouth, VA

HONORS:

2006  U.S. Navy Commendation Medal (Second Award)
Naval Health Care New England
2005  Global War on Terrorism Expeditionary Medal/ Operation Iraqi Freedom
U.S. Military Hospital, Kuwait
2005  Global War on Terrorism Service Medal/Operation Iraqi Freedom
2004  Meritorious Unit Commendation (Second Award)
National Naval Medical Center
2003  Defense Meritorious Service Medal
Uniformed Services University of Health Sciences, Bethesda, MD
2000  Customer Service “Hero” Award for Patient Care
National Naval Medical Center, Bethesda, MD
1995  Naval Unit Commendation, for service aboard USS Lasalle, Persian Gulf
1992  Kuwait Liberation Medal
1992  U.S. Navy Commendation Medal, Force Medical Officer
U.S. Navy Central Command (forward deployed), Persian Gulf
1992  U.S. Navy Marksman Ribbon
1992  U.S. Navy Sea Service Ribbon, USS LaSalle
1992  Southwest Asia Service Medal,
U.S. Navy Central Command, Persian Gulf
1991  Meritorious Unit Commendation
National Naval Medical Center/Desert Storm
1991  National Defense Service Medal
1988  Letter of Commendation
U.S. Naval Hospital, Naples, Italy
1983  Fellows Award for Clinical Research (Total Lymphoid Irradiation
Intervention in Experimental Collagen-Induced Arthritis in Rats)
American Rheumatism Association, Central Region, Chicago, IL
1981  Teacher-of-the-Year Award for General Internal Medicine
LICENSSES and CERTIFICATION:

1979  Commonwealth of Virginia, License #0101030880
1976  National Board of Medical Examiners, #172347
1980  American Board of Internal Medicine, #77322
1986  Subspecialty Certification in Rheumatology, #77322

DEPARTMENTAL and UNIVERSITY COMMITTEES:

2009  Narcotic Review Committee, VA Boston Healthcare System
2008  Education Leadership Group, VA Boston Healthcare System
2008  Patient Safety Committee, VA Boston Healthcare System
1992-2003 Chair, Committee for the Evaluation of Competence of Internal Medicine
       House Officers, National Naval Medical Center, Bethesda, MD
1992-2003 Education Committee, Uniformed Services University of
       Health Sciences, Bethesda, MD

TEACHING EXPERIENCE and RESPONSIBILITIES:

2008-09  VA Boston Healthcare System (affiliations: Harvard Medical School,
         Boston University School of Medicine), 3 months inpatient ward
         attending, 3 months inpatient consult attending;
         Group Leader-Introduction to Clinical Medicine,
2006-08  VA Providence, RI (affiliation: Brown Medical School) Monthly lectures
         (noon conference format, topics: general medicine, rheumatic diseases,
         legal issues);
         6-8 months/year as inpatient ward attending for Brown Medical School
         teaching team;
1985-2003 National Naval Medical Center, Bethesda, MD, Bi-monthly lectures for
         housestaff, semi-monthly moderator for Medicine morning report;
         2 months/year as ward attending for National Naval Medical Center
         teaching team, also precepting students, residents in outpatient clinic
         setting;
1984-85  University of Kansas Medical Center, 2 months ward attending, 3 months
         consult attending (rheumatic diseases);
1979-82  Naval Medical Center, Portsmouth, Virginia, 4 months/year as ward
         attending teaching team;

MAJOR ADMINISTRATIVE RESPONSIBILITIES:

2008-2011  Director, Ambulatory Medical Student Education,
           VA Boston Healthcare System, Boston, MA;
1999-2003  Clerkship Director, Third-Year Medicine Clerkship, Uniformed Services University of Health Sciences, Bethesda, MD;
1992-99  Assistant Clerkship Director, Third-Year Medicine Clerkship, Uniformed Services University of Health Sciences, Bethesda, MD;

OTHER PROFESSIONAL ACTIVITIES:

MILITARY SERVICE/RANK CHRONOLOGY:

1991   Captain, United States Navy  
1986   Commander, United States Navy  
1980   Lieutenant Commander, United States Navy  
1976   Lieutenant, United States Navy  
1972   Ensign, United States Naval Reserve

OPERATIONAL MILITARY SERVICE:

2004  Deployed, U.S. Military Hospital Kuwait/environs, in support of Operation Iraqi Freedom  
2003  Operational Platform, USNS Comfort (Hospital Ship)  
1992  Force Medical Officer for Commander, United States Naval Forces Central Command (Fifth Fleet), USS LaSalle, Persian Gulf  
1991-92  Mobile Medical Augmentation Readiness Team, National Naval Medical Center, Bethesda, MD  
1988-92  Consultant to the White House, Washington, DC, for Rheumatic Diseases  
1988  Staff Internist, Naval Hospital, Naples, Italy

PROFESSIONAL SOCIETIES:

2009-current  Physicians Committee for Responsible Medicine  
1992-2003  Clerkship Directors in Internal Medicine  
1995-2008  American Medical Association  
1995-2003  American College of Rheumatology

INVITED REVIEWER:

1999-2003  Academic Medicine

MAJOR COMMITTEE ASSIGNMENTS:

Federal Government

1993-98  NIH Advisory Board on Musculoskeletal Diseases
INVITED LECTURES and PRESENTATIONS

2003  Grand Rounds (Polymyalgia Rheumatica)
       Newport Hospital, Newport, Rhode Island

2002  Teaching and Evaluation of Medical Students: A New Look
       Ottawa Meeting on Medical Education, Ottawa, Ontario

2002  Grading Responsibility, The First Amendment and the Essential Freedoms of the
       Public University in the United States
       Ottawa Meeting on Medical Education (Poster Presentation), Ottawa, Ontario

2002  Legal Issues in Medical Education, Presentation for Graduate Medical Education
       Committee
       Madigan Army Medical Center, Fort Lewis, Washington

2002  National Capital Consortium for Program Directors (Legal Issues)
       Uniformed Services University of Health Sciences, Bethesda, Maryland

2001  Navigating the Legal Waters: What Every Clerkship Director Needs to Know
       Clerkship Directors in Internal Medicine, National Meeting, Tucson, Arizona

2001  Legal Theories of Recourse for Failed Medical Students in the United States
       Association for Medical Education in Europe International Mtg., Berlin, Germany

2000  Medical Educators Due Process Obligations to Students (Poster Presentation)
       Clerkship Directors in Internal Medicine, National Meeting, Washington, DC

1998  Post-Course on Problem Students (Legal Issues)
       Clerkship Directors in Internal Medicine, National Meeting, Denver, Colorado

1995  Lecture Series: Inflammatory Arthritis; Serology in Rheumatic Diseases;
       Shoulder/Knee Syndromes;
       U.S. Army 18th Medical Command Health Education Conference, Seoul, Korea

1993  Navy Medicine in the Middle East
       Grand Rounds, Department of Medicine
       National Naval Medical Center, Bethesda, Maryland

1989  Complications of Necrotizing Vasculitis
       Grand Rounds, Department of Medicine
       National Naval medical Center, Bethesda, Maryland
1988  Pulmonary Hypertension in Systemic Lupus Erythematosus
American Rheumatism Association Central Region Meeting, Chicago, Illinois

1987  Rheumatoid Arthritis Diagnosis and Management; Spondyloarthropathies;
United States Medical-Surgical Congress Postgraduate Seminar
Garmisch, Germany

Bibliography:

Original, Peer Reviewed Articles:

1. Chute J, Hoffmeister K, Cotelingam J, Davis T, Frame J, Jamieson T. Aplastic
   Anemia As the Sole Presentation of Systemic Lupus Erythematosus. Amer J Hem.
   1996

2. Lindsley HB, Jamieson TW, Desmet AA, Kimler BF, Cremer MA, Hassanein K.
   Total Lymphoid Irradiation Retards Evolution of Articular Erosions in Collagen-
   Induced Arthritis. J Rheum 1988

   Postgrad Med 1986

4. Jamieson TW. Corticosteroids in Rheumatic Diseases-Pharmacology and

5. Jamieson TW, Desmet AA, Cremer MA, Kage KL, Lindsley HB. Collagen-
   Induced Arthritis in Rats: A Radiographic Analysis. Investigative Radiol 1985

Case Reports, Reviews, Chapters and Editorials/Letters

Letters

1. Hemmer PA, Jamieson TW, Pangaro LN. Reliable, Valid, and Educational

2. Jamieson TW. Medical Students Need More Medicolegal Education. Acad Med
   1999

Reviews

1. Jamieson TW, Desmet AA, Stechschulte DJ. Erosive Arthritis in
   Scleromyxedema. Skeletal Radiol 1985
Textbook Chapters

1. Jamieson TW, Hemmer PA, Pangaro LN. Legal Aspects of Failing Grades. Guidebook For Clerkship Directors, 3rd edition, Alliance for Clinical Education University of Nebraska Press 2005


Case Reports


4. Jamieson TW. Adult Still’s Disease Complicated by Cardiac Tamponade. JAMA 1983

FORENSIC CONSULTING:

Personal injury/medical malpractice/product liability (plaintiff/defense)
Julie Kroviak, M.D.

EDUCATION:
1991-1995 BS Spanish Language and Literature, Georgetown University, Washington D.C.
1996-2000 MD, University of Alabama School of Medicine, Birmingham, AL

POST-GRADUATE EDUCATION:
2000-2001 Intern, Internal Medicine, Georgetown University Medical Center, Washington, DC
2001-2003 Resident, Internal Medicine, Georgetown University Medical Center, Washington, DC

BOARD CERTIFICATION: Internal Medicine 2003

ACTIVE LICENSES: Virginia

PRACTICE:
Feb 2014- present:
Senior Physician, Office of the Inspector General, Veterans Affairs, Office of Healthcare Inspections

2003- 2014:
Medical Team Leader, Department of Veterans Affairs, Washington DC and Fort Belvoir Community Clinic

I directly supervised a staff of four physicians, two NP’s, 1 PA as well as directing the operations of seven subspecialty clinics with which we were co-located.

During my ten + years with the VA I worked to transform a small community based clinic serving under 400 veterans into one of the three DOD/VA cooperative arrangements in the nation that serves over 6,000 veterans. Beyond managing clinical staff, and serving as the lead liaison with DOD, I was also responsible for maintaining standards to meet JCAHO and JTF standards of accreditation. As the medical director of this clinic, I also organized and led weekly team management meetings, directly handled all patient complaints and congressional inquiries, and worked closely with hospital administration to ensure that patient care needs continued to be met despite limited resources.

References available upon request
CURRICULUM VITAE

BIOGRAPHICAL

NAME: Alan Gary Mallinger

BUSINESS ADDRESS: DVA Office of Inspector General
Office of Healthcare Inspections
801 I Street, NW
Washington, DC 20001

BUSINESS PHONE: 202-461-4684   FAX: 202-495-5858

EDUCATION AND TRAINING

Undergraduate:

Dates:       Institution:              Degree:            Major:
1965-1969   College of Arts and Sciences
            University of Pittsburgh
            Pittsburgh, Pennsylvania
            Bachelor of Science, 1969
            Biophysics and Microbiology

Graduate:

Dates:       Institution:              Degree:            Discipline:
1969-1973   School of Medicine
            University of Pittsburgh
            Pittsburgh, Pennsylvania
            Doctor of Medicine, 1973

Post-Graduate:

Dates:       Institution:              Program:            Discipline:
1973-1974   Western Psychiatric
            Institute & Clinic
            University of Pittsburgh
            Pittsburgh, Pennsylvania
            Internship-Residency
            Medicine-Psychiatry

1974-1975   Western Psychiatric
            Institute & Clinic
            University of Pittsburgh
            Pittsburgh, Pennsylvania
            Residency
            Psychiatry
### APPOINTMENTS AND POSITIONS

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<tr>
<td>2014-present</td>
<td>School of Medicine, Uniformed Services University of the Health Sciences, Bethesda, Maryland</td>
<td>Clinical Professor in Psychiatry</td>
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<tr>
<td>2012-present</td>
<td>School of Medicine, University of Pittsburgh, Pittsburgh, Pennsylvania</td>
<td>Adjunct Professor of Psychiatry</td>
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<tr>
<td>2011-2012</td>
<td>Division of Intramural Research Programs, National Institute of Mental Health, Bethesda, Maryland</td>
<td>Special Volunteer, Experimental Therapeutics and Pathophysiology Branch</td>
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<tr>
<td>2003-2012</td>
<td>School of Medicine, University of Pittsburgh, Pittsburgh, Pennsylvania</td>
<td>Clinical Professor of Psychiatry</td>
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<tr>
<td>2010-2011</td>
<td>Division of Intramural Research Programs, National Institute of Mental Health, Bethesda, Maryland</td>
<td>Research Psychiatrist, Experimental Therapeutics and Pathophysiology Branch</td>
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<tr>
<td>2006-2010</td>
<td>Division of Intramural Research Programs, National Institute of Mental Health, Bethesda, Maryland</td>
<td>Unit Chief, Outpatient Research Clinic, Mood and Anxiety Disorders Program</td>
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<td>2007-2008</td>
<td>School of Medicine, Johns Hopkins University, Baltimore, Maryland</td>
<td>Visiting Scientist in Psychiatry</td>
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<td>School of Medicine, University of Pittsburgh, Pittsburgh, Pennsylvania</td>
<td>Professor of Psychiatry and Pharmacology</td>
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<td>1987-1999</td>
<td>School of Medicine, University of Pittsburgh, Pittsburgh, Pennsylvania</td>
<td>Associate Professor of Psychiatry and Pharmacology</td>
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<td>1985-1987</td>
<td>School of Medicine, University of Pittsburgh, Pittsburgh, Pennsylvania</td>
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### APPOINTMENTS AND POSITIONS (continued)

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<tr>
<td>1979-2003</td>
<td>School of Medicine</td>
<td>Member of the Graduate Faculty</td>
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<td>1976-1985</td>
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<td>1975-1976</td>
<td>School of Medicine</td>
<td>Instructor in Psychiatry and Pharmacology</td>
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#### Non-Academic:

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<tr>
<td>May, 2014-present</td>
<td>Office of Inspector General</td>
<td>Senior Physician (Senior Level)</td>
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<td>Department of Veterans Affairs</td>
<td>Medical Consultation and Review</td>
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<td>Department of Veterans Affairs</td>
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<td>July, 2010-May, 2011</td>
<td>Division of Intramural Research Programs</td>
<td>Staff Clinician</td>
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<td>July, 2006-July, 2010</td>
<td>Division of Intramural Research Programs</td>
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<td>National Institute of Mental Health</td>
<td>Mood and Anxiety Disorders Program</td>
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<tr>
<td>July, 2003-December, 2006</td>
<td>Private Practice (full time)</td>
<td>Psychiatrist</td>
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<tr>
<td>October, 2001-June, 2003</td>
<td>Private Practice (part time)</td>
<td>Psychiatrist</td>
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<tr>
<td>July, 1995-</td>
<td>Western Psychiatric Institute and Clinic</td>
<td>Medical Director, Stanley Center for the Innovative Treatment of Bipolar Disorder</td>
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<tr>
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<td>July, 1992-</td>
<td>Western Psychiatric Institute and Clinic</td>
<td>Associate Medical Director, Maintenance Psychotherapy in Recurrent Depression Study, Depression Prevention Program</td>
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<tr>
<td>October, 2001</td>
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<td>July, 1990-</td>
<td>Western Psychiatric Institute and Clinic</td>
<td>Medical Director, Maintenance Therapies in Bipolar Disorder Study, Depression Prevention Program</td>
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<tr>
<td>December, 2002</td>
<td>University of Pittsburgh</td>
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<tr>
<td>July, 1990-</td>
<td>Western Psychiatric Institute and Clinic</td>
<td>Medical Director Pharmacotherapy Training in Mood Disorders Program</td>
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<td>June, 1995</td>
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<tr>
<td>July, 1987-</td>
<td>Western Psychiatric Institute and Clinic</td>
<td>Director, Psychopharmacology of Mania and Depression Program</td>
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<td>June, 2003</td>
<td>University of Pittsburgh</td>
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<tr>
<td>December, 1982</td>
<td>Western Psychiatric Institute and Clinic</td>
<td>Attending Psychiatrist, Mood Disorders Module</td>
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<tr>
<td>June, 2003</td>
<td>University of Pittsburgh</td>
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<tr>
<td>July, 1982-</td>
<td>Department of Epidemiology Graduate School of Public Health</td>
<td>Consultant Psychiatrist, Systolic Hypertension in the Elderly Program</td>
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<tr>
<td>June, 1991</td>
<td>University of Pittsburgh</td>
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<tr>
<td>July, 1981-</td>
<td>Western Psychiatric Institute &amp; Clinic</td>
<td>Associate Attending Psychiatrist and Treatment Team Leader, Schizophrenia Module</td>
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<tr>
<td>December, 1982</td>
<td>University of Pittsburgh</td>
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### APPOINTMENTS AND POSITIONS (continued)

**Non-Academic: (continued)**

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<tr>
<td>June-Sept., 1971</td>
<td>School of Medicine</td>
<td>Pre-doctoral Research</td>
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<tr>
<td>June-Sept., 1970</td>
<td>University of Pittsburgh</td>
<td>Fellow</td>
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<tr>
<td>May-Sept., 1969</td>
<td>Department of Chemistry</td>
<td>Research Assistant</td>
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<tr>
<td>May-Sept., 1968</td>
<td>Department of Biophysics and Microbiology</td>
<td>Research Assistant</td>
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<tr>
<td>May-Sept., 1967</td>
<td>Department of Chemistry</td>
<td>Laboratory Assistant</td>
</tr>
<tr>
<td>May-Sept., 1966</td>
<td>College of Arts &amp; Sciences</td>
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<tr>
<td>June-Sept., 1964</td>
<td>Department of Anatomy and Cell Biology</td>
<td>Research Trainee</td>
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<td>School of Medicine</td>
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</table>

### CERTIFICATION AND LICENSURE

**Specialty Certification:**

- Board Certified (Psychiatry), 1982
- American Board of Psychiatry and Neurology

**Medical Licensure:**

1. State of Maryland
2. Commonwealth of Pennsylvania (inactive status)

Diplomate, National Board of Medical Examiners
MEMBERSHIPS IN PROFESSIONAL AND SCIENTIFIC SOCIETIES

Date: Organization:
2012-present American College of Psychiatrists
1988-present Society of Biological Psychiatry
1978-2002 American Psychosomatic Society
1977-2002 Society for Neuroscience
1977-2002 American Society for Clinical Pharmacology and Therapeutics
1976-2002 American Association for the Advancement of Science
1975-2002 American College of Clinical Pharmacology (Fellow, 1982)
1999-2002 International Society for Bipolar Disorders

MEDICAL STAFF APPOINTMENTS

Dates: Institution:
April, 2007- May, 2011 National Institutes of Health Clinical Center
April, 2008- April, 2010 National Naval Medical Center
July, 1981- June, 2003 Western Psychiatric Institute and Clinic

10 Center Drive
Bethesda, Maryland
8901 Wisconsin Avenue
Bethesda, Maryland
University of Pittsburgh
3811 O’Hara Street
Pittsburgh, PA
HONORS

Date:          Title of Award:

1994,         Nominated for Outstanding Teacher Award (Golden Apple)
1998          WPIC Residents Graduating Class

1982          Mead Johnson Travel Fellowship
               (American College of Neuropsychopharmacology)

1981          Laughlin Fellow
               (American College of Psychiatrists)

-------------------------------

1973          M.D. conferred cum laude
1969          B.S. conferred summa cum laude

-------------------------------

1972          Alpha Omega Alpha
1969          Phi Beta Kappa
1967          Beta Beta Beta
1966          Phi Eta Sigma

-------------------------------

1969-73        Medical Alumni Scholar
1972          Roche Award (academic achievement)
1970          Nu Sigma Nu Award (academic achievement)
1970          Guthrie Award (Medical Physiology)
1970          Stock Award (Medical Microbiology)
1966-69        University Scholar
1969          Phi Eta Sigma Senior Scholar Award
PUBLICATIONS

Refereed Articles:


Refereed Articles: (continued)


Refereed Articles: (continued)


Refereed Articles: (continued)


Refereed Articles: (continued)


Refereed Articles: (continued)


Refereed Articles: (continued)


Refereed Articles: (continued)


Refereed Articles:  (continued)


Refereed Articles: (continued)


Recent Abstract (manuscript in preparation):


Invited Published Papers and Book Chapters:


Invited Published Papers and Book Chapters:  (continued)


Published Letters:


### PROFESSIONAL ACTIVITIES

#### TEACHING (Uniformed Services University of the Health Sciences)

<table>
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<tr>
<th>Activity:</th>
<th>Program:</th>
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<tr>
<td>Student Preceptor</td>
<td>Psychiatry</td>
<td>Weekly precepting of medical students in second/third year clinical clerkship.</td>
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#### TEACHING (National Institutes of Health):

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<tr>
<td>Writing Seminar</td>
<td>Experimental</td>
<td>Biweekly seminar/workshop for Clinical Therapeutics Fellows on writing for publication.</td>
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<tr>
<td>2011-2012</td>
<td>Therapeutics</td>
<td></td>
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<tr>
<td>Journal Club Coordinator</td>
<td>Experimental</td>
<td>Weekly journal club for Fellows and staff.</td>
</tr>
<tr>
<td>2010-2011</td>
<td>Therapeutics</td>
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<tr>
<td>Seminar Coordinator</td>
<td>Mood and Anxiety Disorders</td>
<td>Weekly seminars on current psychiatric literature.</td>
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<tr>
<td>(Clinical and Research Fellows)</td>
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<td>2007-2010</td>
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#### TEACHING (University of Pittsburgh):

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<th>Courses Directed:</th>
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<tr>
<td>Fourth International Conference on Bipolar Disorder, June, 2001</td>
<td>Psychiatry</td>
<td>International meeting of researchers and clinicians, dealing with recent advances in the bipolar disorder area.</td>
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<tr>
<td>Third International Conference on Bipolar Disorder, June, 1999</td>
<td>Psychiatry</td>
<td>International meeting of researchers and clinicians, dealing with recent advances in the bipolar disorder area.</td>
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<tr>
<td>Second International Conference on Bipolar Disorder, June, 1997</td>
<td>Psychiatry</td>
<td>International meeting of researchers and clinicians, dealing with recent advances in the bipolar disorder area.</td>
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<tr>
<td>Pharmacotherapy Training in Mood Disorders Clinic, (PGY-2), 1997-2001</td>
<td>Psychiatry</td>
<td>Longitudinal management of mood disorder cases, with group supervision.</td>
</tr>
</tbody>
</table>
TEACHING (University of Pittsburgh): (continued)

Courses Directed: Pharmacotherapy Training in Mood Disorders Elective (PGY-3, 4), 1990-2001
Department: Psychiatry
Content: Group supervision and discussion of maintenance pharmacotherapy.

Courses Directed: Pharmacotherapy Training in Mood Disorders Course (PGY-3), 1990-1995
Department: Psychiatry
Content: Weekly lecture program and group supervision.

Conducted additional Lectures/Seminars/Mentoring/Supervision/Case Conferences from 1975 to 2006.

RESEARCH:

Grants Received (Principal Investigator):

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
<th>Source</th>
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| January-December, 1975| In vitro studies of lithium metabolism by erythrocytes of depressed patients. | Fluid Research Program
|                       |                                                                      | Western Psychiatric Institute and Clinic    |
|                       |                                                                      | University of Pittsburgh                   |
|                       |                                                                      | Pittsburgh, Pennsylvania                   |
|                       |                                                                      | 1155 Fifteenth St., NW                      |
|                       |                                                                      | Washington, D.C.                            |
| April, 1976-March, 1977| Lithium and electrolyte transport in depression. MH28252            | National Institute of Mental Health Small Grants Program |
|                       |                                                                      | 5600 Fishers Lane                           |
|                       |                                                                      | Rockville, Maryland                         |
| January-December, 1978| Alterations of cell membrane lithium transport in depression.        | Health Research and Services Foundation     |
|                       |                                                                      | 200 Ross Street                             |
|                       |                                                                      | Pittsburgh, Pennsylvania                    |
| April, 1978-June, 1980| Lithium and sodium transport studies in depression. MH31279           | National Institute of Mental Health Psychopharmacology Research Branch |
|                       |                                                                      | 5600 Fishers Lane                           |
|                       |                                                                      | Rockville, Maryland                         |
Grants Received (Principal Investigator): (continued)

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<td>January, 1981-</td>
<td>Cell membrane transport of lithium and sodium in depression.</td>
<td>Health Research and Services Foundation</td>
</tr>
<tr>
<td>December, 1982</td>
<td></td>
<td>200 Ross Street</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pittsburgh, Pennsylvania</td>
</tr>
<tr>
<td>October, 1983-</td>
<td>Pharmacokinetics of tranylcypromine in depressed patients.</td>
<td>Smith Kline and French Laboratories</td>
</tr>
<tr>
<td>March, 1985</td>
<td></td>
<td>1500 Spring Garden Street</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Philadelphia, Pennsylvania</td>
</tr>
<tr>
<td>December, 1990</td>
<td></td>
<td>Affective and Anxiety Disorders Research Branch</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5600 Fishers Lane</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rockville, Maryland</td>
</tr>
<tr>
<td>July, 1990-</td>
<td>Membrane phospholipid turnover and metabolism in bipolar disorder.</td>
<td>Seed Project</td>
</tr>
<tr>
<td>June, 1991</td>
<td></td>
<td>Mental Health Clinical Research Center for Affective Disorders</td>
</tr>
<tr>
<td></td>
<td></td>
<td>University of Pittsburgh</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pittsburgh, Pennsylvania</td>
</tr>
<tr>
<td>December, 1993</td>
<td></td>
<td>340 Kingsland Street</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Nutley, New Jersey</td>
</tr>
<tr>
<td>September, 1994-</td>
<td>Pharmacotherapy of treatment-resistant mania.</td>
<td>National Institute of Mental Health</td>
</tr>
<tr>
<td>August, 1999</td>
<td></td>
<td>Clinical Treatment Research Branch</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5600 Fishers Lane</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rockville, Maryland</td>
</tr>
<tr>
<td>May, 1995-</td>
<td>Double-blind controlled study of oral inositol for lithium-induced side effects.</td>
<td>Stanley Center for the Innovative Treatment of Bipolar Disorder (substudy)</td>
</tr>
<tr>
<td>September, 1999</td>
<td></td>
<td>University of Pittsburgh</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pittsburgh, Pennsylvania</td>
</tr>
</tbody>
</table>
Grants Received (Principal Investigator): (continued)

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>November, 2000-</td>
<td>Brain levels of lithium as a predictor of drug response in depressed women with rapid cycling bipolar disorder: Pilot study N01 MH 80001</td>
<td></td>
</tr>
<tr>
<td>September, 2002</td>
<td>Brain levels of lithium as a predictor of drug response in depressed women with rapid cycling bipolar disorder: Pilot study N01 MH 80001</td>
<td></td>
</tr>
<tr>
<td></td>
<td>National Institute of Mental Health</td>
<td>6001 Executive Boulevard</td>
</tr>
<tr>
<td></td>
<td>Bethesda, Maryland</td>
<td></td>
</tr>
</tbody>
</table>

NIMH Intramural Research Projects (Principal Investigator):

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>April, 2008-</td>
<td>An investigation to determine whether levels of p11 protein in peripheral blood cells correlate with treatment response to citalopram in patients with major depressive disorder.</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
</tbody>
</table>

NIMH Intramural Research Projects (Associate Investigator):

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>December, 2006-</td>
<td>The evaluation of patients with mood and anxiety disorders and healthy volunteers (Principal Investigator: Carlos A. Zarate, Jr., M.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
<tr>
<td>December, 2006-</td>
<td>Combining a dopamine agonist and selective serotonin reuptake inhibitor for treatment of depression: a double-blind, randomized study (Principal Investigator: Carlos A. Zarate, Jr., M.D.)</td>
</tr>
<tr>
<td>February, 2010</td>
<td></td>
</tr>
<tr>
<td>December, 2006-</td>
<td>An investigation of the antidepressant efficacy of an antiglutamatergic agent in bipolar depression (Principal Investigator: Carlos A. Zarate, Jr., M.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
<tr>
<td>May, 2008-</td>
<td>Investigation of the rapid (next day) antidepressant effects of an NMDA antagonist (Principal Investigator: Carlos A. Zarate, Jr., M.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
<tr>
<td>June, 2008-</td>
<td>Evaluation of the efficacy of the NK1 antagonist GR205171 in posttraumatic stress disorder (Principal Investigator: Carlos A. Zarate, Jr., M.D.)</td>
</tr>
<tr>
<td>September, 2009</td>
<td></td>
</tr>
<tr>
<td>June, 2008-</td>
<td>An investigation of the antidepressant efficacy of a selective, high affinity enkephalinergic agonist in anxious major depressive disorder (Principal Investigator: Carlos A. Zarate, Jr., M.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
</tbody>
</table>
**NIMH Intramural Research Projects (Associate Investigator): (continued)**

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>July, 2008-</td>
<td>Psychobiological mechanisms of resilience to trauma (Principal Investigator: James Blair, Ph.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
<tr>
<td>November, 2008-</td>
<td>Antidepressant effects on cAMP specific phosphodiesterase (PDE4) in depressed patients (Principal Investigator: Masahiro Fujita, M.D., Ph.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
<tr>
<td>April, 2009-</td>
<td>An investigation of the antidepressant effects of a low-trapping mixed NR2A/2B antagonist in treatment-resistant major depression (Principal Investigator: Carlos A. Zarate, Jr., M.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
<tr>
<td>November, 2009-</td>
<td>Imaging serotonin 5-HT\textsubscript{1A} receptors in the high affinity state in brains of patients with major depressive disorder (Principal Investigator: Christina S. Hines, M.D., Ph.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
<tr>
<td>September, 2010-</td>
<td>Efficacy and tolerability of riluzole and biomarker of treatment response in treatment-resistant depression (Principal Investigator: Carlos A. Zarate, Jr., M.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
<tr>
<td>October, 2010-</td>
<td>Development of functional and structural magnetic resonance imaging techniques for the study of mood and anxiety disorders (Principal Investigator: Allison Nugent, Ph.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
</tr>
</tbody>
</table>

**Collaborative Research Projects (Walter Reed Army Medical Center):**

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>May, 2008-</td>
<td>The ViRTICo-BP trial: Virtual reality therapy and imaging in combat veterans with blast injury and posttraumatic stress disorder (Principal Investigator: COL Michael J. Roy, M.D.)</td>
</tr>
<tr>
<td>May, 2011</td>
<td></td>
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<tr>
<td>Date</td>
<td>Description</td>
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</tr>
<tr>
<td>February, 1980</td>
<td>Consultant for</td>
</tr>
<tr>
<td>October, 1981</td>
<td>Consultant for scientific merit review.</td>
</tr>
<tr>
<td>May, 1982 (site visit)</td>
<td></td>
</tr>
<tr>
<td>October, 1982</td>
<td>Consultant for scientific merit review.</td>
</tr>
<tr>
<td>December, 1983</td>
<td>Member, Special Review Committee.</td>
</tr>
<tr>
<td></td>
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<tr>
<td>March, 1985</td>
<td>Member, Ad Hoc Review Committee.</td>
</tr>
<tr>
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<tr>
<td>March, 1991 - June, 1994</td>
<td>Member, ADAMHA Reviewers Reserve.</td>
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<tr>
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<tr>
<td>June, 1995 - June, 1998</td>
<td>Member, Merit Review Committee for Mental Health and Behavioral Sciences.</td>
</tr>
<tr>
<td></td>
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<tr>
<td>February, 1996</td>
<td>Consultant Reviewer.</td>
</tr>
<tr>
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<tr>
<td>May, 1996</td>
<td>Consultant for RFP concept review.</td>
</tr>
<tr>
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<tr>
<td>June, 1997 - June, 1998</td>
<td>Chairperson, Merit Review Committee for Mental Health and Behavioral Sciences.</td>
</tr>
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</table>
### Grant Reviewing: (continued)

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Agency:</th>
</tr>
</thead>
<tbody>
<tr>
<td>June, 1998</td>
<td>Member, Merit Review Council.</td>
<td>Department of Veterans Affairs</td>
</tr>
<tr>
<td>December, 1998</td>
<td></td>
<td>Veterans Health Administration Washington, D.C.</td>
</tr>
<tr>
<td>October, 1999</td>
<td>Ad Hoc Member, Merit Review Committee for Mental Health and Behavioral Sciences.</td>
<td>Department of Veterans Affairs</td>
</tr>
<tr>
<td>November, 1999</td>
<td>Ad Hoc Member, Interventions Research Review Committee</td>
<td>National Institute of Mental Health Bethesda, Maryland</td>
</tr>
<tr>
<td>December, 1999</td>
<td>Consultant Reviewer</td>
<td>Medical Research Council London, U.K.</td>
</tr>
<tr>
<td>March, 2000</td>
<td>Ad Hoc Member, Seed Money Review Committee</td>
<td>Mental Health Intervention Research Center for the Study of Mood and Anxiety Disorders University of Pittsburgh Pittsburgh, Pennsylvania</td>
</tr>
<tr>
<td>May, 2000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>July, 2000 - July, 2002</td>
<td>Member, Seed Money Review Committee</td>
<td>Mental Health Intervention Research Center for the Study of Mood and Anxiety Disorders University of Pittsburgh Pittsburgh, Pennsylvania</td>
</tr>
<tr>
<td>February, 2003</td>
<td>Consultant Reviewer</td>
<td>Department of Veterans Affairs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Veterans Health Administration Washington, D.C.</td>
</tr>
</tbody>
</table>

### Recent Journal Reviewing (since 2006):

- Journal of Clinical Psychiatry
- Biological Psychiatry
- American Journal of Psychiatry
- Neuropsychopharmacology
- Bipolar Disorders
- 2009 and 2010 NCDEU Meeting submissions
- Case Reports in Medicine
- International Medical Case Reports Journal
<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>September, 1983</td>
<td>Lecture on mood disorders presented to counselors at the Pittsburgh Pastoral Institute.</td>
</tr>
<tr>
<td>September, 1985</td>
<td>Guest Speaker, Depressive Illness Support Group, Pittsburgh, PA.</td>
</tr>
<tr>
<td>November, 1985</td>
<td>Lecture on &quot;Depression and its Treatment&quot; presented at the Harmarville Rehabilitation Center.</td>
</tr>
<tr>
<td>January, 1987</td>
<td>Lecture on &quot;Depression in the Workplace&quot; presented to Pennsylvania Academy of Family Physicians, Allegheny Chapter.</td>
</tr>
<tr>
<td>May, 1987</td>
<td>Lecture on &quot;Management of Clinical Depression&quot; presented at Holy Spirit Hospital, Camp Hill, PA.</td>
</tr>
<tr>
<td>January, 1988</td>
<td>Lecture on &quot;Depression&quot; presented at Medical Grand Rounds, St. Francis Hospital, Pittsburgh, PA.</td>
</tr>
<tr>
<td>February, 1988</td>
<td>Lecture on &quot;Problems of Modern Psychotherapy&quot; presented at Psychiatric Grand Rounds, St. Francis Hospital, Pittsburgh, PA.</td>
</tr>
<tr>
<td>June, 1988</td>
<td>Presentation on &quot;Manic Depressive Illness&quot; to the Alliance for the Mentally Ill of Erie County, Erie, PA.</td>
</tr>
<tr>
<td>July, 1988</td>
<td>Lecture on &quot;Depression&quot; presented at Green County Memorial Hospital, Waynesburg, PA.</td>
</tr>
<tr>
<td>October, 1988</td>
<td>Guest Discussant on the Al McDowell Show, KDKA radio, Pittsburgh, PA.</td>
</tr>
<tr>
<td>May, 1989</td>
<td>Guest Speaker, Depressive Illness Support Group, Pittsburgh, PA.</td>
</tr>
<tr>
<td>June, 1989</td>
<td>Lecture on &quot;Treatment of Bipolar Disorder&quot; presented at Psychiatric Grand Rounds, Hamot Hospital, Erie, PA.</td>
</tr>
</tbody>
</table>
**SERVICE: (continued)**

**Community: (continued)**

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>October, 1989</td>
<td>Guest Speaker, Western Pennsylvania Chapter of the National Depressive and Manic-Depressive Association, Pittsburgh, PA.</td>
</tr>
<tr>
<td>September, 1990</td>
<td>Lecture on &quot;Mood Disorders: Acute and Long-Term Management&quot; presented at Psychiatric Grand Rounds, Hamot Hospital, Erie, PA.</td>
</tr>
<tr>
<td>December, 1990</td>
<td>Lecture on &quot;Pharmacology of Tricyclic Antidepressants&quot; presented at the Pain Evaluation and Treatment Institute, Pittsburgh, PA.</td>
</tr>
<tr>
<td>December, 1990</td>
<td>Guest Discussant on &quot;Holiday Depression&quot;, KDKA radio, Pittsburgh, PA.</td>
</tr>
<tr>
<td>September, 1993</td>
<td>Presentation on &quot;Social Butterflies - Social Phobia&quot; at HealthPLACE, Pittsburgh, PA.</td>
</tr>
<tr>
<td>May, 1996</td>
<td>Guest Discussant on &quot;Bipolar Disorder&quot;, WBZY radio, New Castle, PA.</td>
</tr>
<tr>
<td>November, 2002</td>
<td>Presentation on “Depression” at Carnegie Library, Mt. Washington Branch, Pittsburgh, PA.</td>
</tr>
<tr>
<td>March, 2003</td>
<td>Presentation on “Depression” at Carnegie Library, Oakland Main Library, Pittsburgh, PA.</td>
</tr>
<tr>
<td>July, 2007</td>
<td>Presentation on “Pathophysiology of Affective Disorders and Potential New Treatments for Treatment-Resistant Mood Disorders” to Depression and Bipolar Support Alliance, George Washington University Hospital, Washington, D.C.</td>
</tr>
<tr>
<td>November, 2007</td>
<td>Presentation on “New Research on the Causes and Treatment of Mood Disorders” to NAMI, Prince George’s County, New Carrollton, MD.</td>
</tr>
<tr>
<td>February, 2008</td>
<td>Presentation on “How to Find the Right Meds for Your Bipolar Disorder,” webcast on HealthTalk (<a href="http://www.healthtalk.com">www.healthtalk.com</a>), Seattle, WA.</td>
</tr>
<tr>
<td>Date</td>
<td>Description</td>
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</tr>
<tr>
<td>April, 2008</td>
<td>Presentation on “Research and Treatment Issues in Unipolar Depression” to Depression and Bipolar Support Alliance, George Washington University Hospital, Washington, D.C.</td>
</tr>
<tr>
<td>July, 2008</td>
<td>Informational interview for NAMI Prince George’s County newsletter.</td>
</tr>
<tr>
<td>February, 2009</td>
<td>Presentation on “Research and Treatment Issues in Unipolar Depression” to NAMI, Montgomery County, Bethesda, MD.</td>
</tr>
<tr>
<td>April, 2009</td>
<td>Psychiatry Grand Rounds presentation: “Monoamine Oxidase Inhibitors: New Lessons from Older Medicines” at Penn State College of Medicine, Hershey, PA.</td>
</tr>
</tbody>
</table>
PROFESSIONAL EXPERIENCE

Office of Inspector General, U.S. Department of Veterans Affairs, Washington, DC
Senior Level Physician 2005-Present

Comprehensive Health Systems, Fishersville, VA
Private Practice-Attending Physician 2004-2005

• Co-Medical Director, inpatient mental health treatment unit. Provided outpatient treatment to patients in private practice and consult/liaison and medical detoxification services for the medical-surgical service at a rural, private, community hospital.

Western State Hospital, Staunton, VA
Head of Treatment Team 2001-2004

• Directed inpatient mental health treatment unit. Led multi-disciplinary team, coordinated treatment planning, and active, recovery oriented care for complex patients with serious mental illness and concomitant medical issues.
• Co-chaired hospital quality assurance and medical staff committees.
• Provided lectures on dementia, delirium, and forensic psychiatry for University of Virginia medical students. Supervised medical and physician assistant students during clinical psychiatry rotation.

University of Virginia Medical Center, Charlottesville, VA
Clinical Assistant Professor/Geriatric Psychiatrist 2001-2004

• Provided on-site geriatric psychiatry consultation and treatment to senior adults residing in long term care facilities. Supervised third year medical students.

University of Virginia Medical Center, Charlottesville, VA
Assistant Professor of Psychiatric Medicine 1999-2001

• Provided outpatient and inpatient adult and geriatric psychiatry evaluation and treatment. Presented at UVA grand rounds and external healthcare conferences. Developed joint on-site, integrated, psychiatric consultation co-located in the Neurology Memory Disorders Clinic. Provided psychiatric consultation liaison services to patients on medical-surgical units.
• Mentored and supervised geriatric psychiatry fellows, resident physicians and medical students. Provided medical student lectures on delirium and dementia.
• In coordination with UVA geriatricians, provided once per week, bedside teaching for family practice residents and geriatric medicine fellows at an affiliated nursing facility.
Riverside Methodist Hospital, Columbus, OH  
**Director of Geriatric Psychiatry Services** 1998-1999

- Led geriatric-psychiatry services at a large, urban hospital. Developed and coordinated implementation of an acute inpatient senior adult mental health treatment unit, partial hospitalization program, and co-located geriatric psychiatry outpatient clinic. Treated adult psychiatry inpatients, and provided psychiatric consult-liaison services to patients on medical surgical units.

**MEDICAL TRAINING**

**University of Virginia Medical Center**, Charlottesville, VA 1996-1998
Senior (PL-IV) Psychiatry Resident and Geriatric Psychiatry Fellowship

**The Johns Hopkins Hospital**, Baltimore, MD 1994-1996
Psychiatry Residency

**Texas Children’s Hospital, Baylor College of Medicine**, Houston, TX 1992-1994
Pediatric Residency

**St. Louis Children’s Hospital**, St. Louis, MO 1991-1992
Pediatric Internship

**EDUCATION**

**CPA**  
University of Virginia, Charlottesville, Virginia, 30 Credit Certificate in Accounting 2010
Certified Public Accountant (CPA) designation

**MD**  
Rutgers University-Robert Wood Johnson Medical School 1991
Piscataway, New Jersey, Doctor of Medicine (MD)

**BA**  
Cornell University, Ithaca, New York, Economics 1987

**CERTIFICATION and Licensure**

American Board of Psychiatry and Neurology: Board Certification in Psychiatry

Active Medical License in Virginia

Active Certified Public Accountant license in Virginia

**PUBLICATIONS (NON-OIG)**


CURRICULUM VITA

GEORGE B. WESLEY, M.D.

CURRENT POSITIONS: Director, Medical Consultation and Review, Office of Inspector General, U.S. Department of Veterans Affairs, 810 Vermont Avenue, N.W., Washington, D.C. 20420 (Grade: SES)

Assistant Professor of Medicine, F. Edward Hébert School of Medicine, Uniformed Services University of the Health Sciences, Bethesda, Maryland 20814

EDUCATION:

SECONDARY SCHOOL – Williston Academy, Easthampton, Massachusetts, 1969-1971

UNDERGRADUATE – University of Massachusetts, Amherst, Massachusetts B.S., Zoology-Honors, summa cum laude, 1971-1974

MEDICAL EDUCATION – University of Rochester School of Medicine and Dentistry, Rochester, New York, M.D., 1974-1978

POSTGRADUATE MEDICAL EDUCATION:

INTERNSHIP – Internal Medicine, St. Luke’s Hospital, Denver, Colorado, 1978-1979

RESIDENCY – Internal Medicine, St. Luke’s Hospital, Denver, Colorado 1979-1981

FELLOWSHIP – Laboratory of Microbial Immunity, National Institute of Allergy and Infectious Diseases, National Institutes of Health, Bethesda, Maryland, 1984-1986

OTHER MEDICAL TRAINING:

National Library of Medicine, National Institutes of Health, Medical Informatics Fellowship, Marine Biological Laboratory, Woods Hole, Massachusetts, June, 1992

MANAGEMENT TRAINING:

Leadership VA Program, Class of 1990


UNIFORMED SERVICE:

Senior Assistant Surgeon (O-3), 1981-2 and Surgeon (O-4), 1982-3; National Health Service Corps, United States Public Health Service

CERTIFICATIONS:

Diplomate, National Board of Medical Examiners, July 2, 1979

Diplomate, American Board of Internal Medicine, September 16, 1981

MEDICAL LICENSURE:

California
PROFESSIONAL POSITIONS:

Medical Officer, Office of Inspector General, Department of Veterans Affairs, December 1989 - Present

Director, Medical Consultation and Review, Office of Healthcare Inspections, Office of Inspector General, Department of Veterans Affairs, December, 2001 - Present

Assistant Professor of Medicine, F. Edward Hébert School of Medicine Uniformed Services University of the Health Sciences, Bethesda, Maryland 1985-86 and 1990 - Present

Medical Advisor to the VA Inspector General, Office of Inspector General, Department of Veterans Affairs, January 2000 - December 2003

Director, Medical Assessment and Consultation Section, Office of Healthcare Inspections, Office of Inspector General, Department of Veterans Affairs, July, 1996 - December, 1999

Director, Research and Program Evaluation Division, Office of Healthcare Inspections, Office of the Inspector General, Department of Veterans Affairs July, 1991 - June, 1996

Director, Quality Assurance Review Division and Medical Supervisory Officer, Office of Policy, Planning, & Resources, Office of Inspector General, Department of Veterans Affairs, May, 1989 - June, 1991

Assistant Chief, Ambulatory Care Service, Long Beach, California VA Medical Center, Long Beach, California, May, 1987 - May, 1989

Acting Assistant Chief, Ambulatory Care Service, Long Beach VA Medical Center, Long Beach, California, October, 1986 - May, 1987

Staff Physician, Ambulatory Care Service, Long Beach VA Medical Center Long Beach, California, July, 1986 - October, 1986

Faculty Advisor, F. Edward Hébert School of Medicine, Uniformed Services University of the Health Sciences, Bethesda, Maryland 1985 - 1986

Medical Staff Fellow, Laboratory of Microbial Immunity, National Institute of Allergy and Infectious Diseases, National Institutes of Health, Bethesda, Maryland, 1984 - 1986

Staff Internist, St. Luke’s Hospital, Denver, Colorado, 1983 - 1984
Staff Internist, 1981 - 1983 and Director, ICU, 1982 - 1983, Prowers Medical Center, Lamar, Colorado

SELECTED ASSIGNMENTS/COMMITTEES:

Prowers Medical Center/National Health Service Corps

- POW Clinic Coordinator
- Infection Control Committee
- Medical Care Evaluation and Utilization Review Committee
- Chairman, Medical Records Committee
- Emergency Room Committee

Long Beach VA Medical Center

- Executive Committee, Ambulatory Care Service
- Credentialing and Privileging Committee, Ambulatory Care Service
- Medical District Peer Review Organization Board Reviewer
- Chairman, Visual Impairment Services Team
- Position Management Subcommittee
- Service Excellence Committee
- Chairman and/or Member, Quality Assurance Investigations
- Chairman, Physical Standards Board

SELECTED OIG ASSIGNMENTS

- Department of Veterans Affairs Office of Inspector General Mission Task Force, 1992
- Office of Healthcare Inspections Strategic Planning Council, July 1996 - November, 1999
- President’s Council on Integrity and Ethics/Executive Council on Integrity and Ethics Misconduct in Research Working Group

HONORS AND AWARDS:

Williston Academy

Graduated Valedictorian, Cum Laude Society, Senior Scientific Award, Achievement in Advanced Mathematics, Best Work in Physics, Bausch & Lomb Honor Science Award, Adelphi Gamma Sigma Award, Best Senior Term Paper, Excellence in Debating Award, Edward L. O’Brien Debating Prize, Dickinson Prize for Sight Reading, J.P. Williston Declamation Prize, Elizabeth Hazeldine Prize
UNIVERSITY OF MASSACHUSETTS

Phi Beta Kappa, Phi Eta Sigma Honor Society, Commonwealth of Massachusetts Scholar

UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE AND DENTISTRY

Honors Summer Research Fellowship, Tufts University School of Medicine, Boston, Massachusetts, 1975

Honors Summer Research Fellowship, Sidney Farber Cancer Institute, Harvard Medical School, Boston, Massachusetts, 1976

OTHER AWARDS

Letter of Commendation to the Chief of Staff, Long Beach VA Medical Center for a Quality Assurance Investigation chaired by George B. Wesley, M.D., 1989

Selection as VA Office of Inspector General representative to Leadership VA Program, April, 1990

Superior Performance Awards, Office of Healthcare Inspections, Multiple Years


Honorable Mention, Best Technical Paper, Federal Forecasters Conference 1993


Letter of Commendation from the Assistant Inspector General/OHI, October 11, 1996

“Special”/Cash Award “In Grateful Appreciation for Your Talents Which Contributed Most Significantly to the Recent Success of a Congressional Hearing and Your Development of the Roster of Medical and Healthcare Advisors,” October 15, 1997


“Special Contribution Award,” September 1998 and August 1999

“Special,” “In Acknowledgment of Your Key Role In Support of the Preparation of the Roll-up Report on Hotline Activities, FY 93 To FY 95” November 4, 1998
Office of Inspector General, Assistant Inspector General, Team Accomplishment of the Year Award, July 2000

Office of Inspector General, Assistant Inspector General, Employee of the Year, July 2000

James J. Leonard Award for Excellence in Teaching Internal Medicine, F. Edward Hébert School of Medicine, Uniformed Services University of the Health Sciences, Bethesda, Maryland, Award for Academic Year 2001 - 2002

The President’s Council on Integrity and Efficiency, Award for Excellence, October 21, 2008

IG Distinguished Achievement Award, December 11, 2008

MEMBERSHIPS IN PROFESSIONAL SOCIETIES:

• Association of Military Surgeons of the United States (Life Member)

CONFERENCE PRESENTATIONS:


18. Guest Panelist, Forensic Medicine Section of the VA OIG’s Office of Investigations Annual Senior Staff Retreat, Newport Naval Station, May 1998.

2: ‘Enhancing Patient Safety and Reducing Errors in Health Care,’” December

21. Keynote Address: Securing Potential Forensic Evidence in the Hospital
Setting, Domestic Violence and Sexual Assault Update, Carl T. Hayden
Veterans’ Affairs Medical Center and the International Association of Forensic

22. Panelist: Conference: “Unsuspected Poisonings In Suspicious Hospital
Deaths,” Frederic Rieders Family Renaissance Foundation, National Medical

23. “Comments On The Overlap Between Medical Quality Assurance Activities
And Forensic Science,” American Academy of Forensic Science, 55th Annual

24. Panelist: “Integrating Forensic Science Into Clinical Care,” Department of
Veterans Affairs: Improving Patient Care Through Forensic Science, San Diego,
California, April 22, 2003.

25. Presentation: “Forensic Science in the Health Care Setting: Pitfalls and
Promise,” American Academy of Forensic Science, 56th Annual Meeting, Dallas,

26. Presentation: “Handling Misconduct in Veterans’ Healthcare,” Misconduct in
Research Working Group, National Science Foundation, Arlington, Virginia,
December 4, 2008.

ABSTRACTS AND POSTER PRESENTATIONS:

1. Wesley, George B., Edison L. and Howard M.: “Analysis Of Pre-B Cell Lines,”

2. Wesley, George B. and Howard, Maureen: “Mature B Cell Populations
Precede the Emergence Of Pre-B Cell Lines In Murine Marrow Culture,”

3. Wesley, George and Young, Peg, “Measuring Interventions in Mortality and
Time Series Data,” Program Book, ISF 93 - The Thirteenth Annual International
Symposium on Forecasting, Pittsburgh, Pennsylvania.

4. Young, Peg, Connell, Alastair M., and Wesley, George, “Using Forecasting
Techniques or Quality Control: A Case Study in the Health Care Industry,”
Program Book, ISF 94 - The Fourteenth Annual International Symposium on


BOOKS -- EDITING AND CONTRIBUTIONS:


ARTICLES AND LETTERS:


CONSULTATIONS AND APPEARANCES BEFORE EXPERT COMMISSIONS:


2. Appearance before the 102nd Congress of the United States, House of Representatives, Veterans’ Affairs Committee, Subcommittee on Health and Hospitals: “Hearing on the Quality of Care Provided at a VA Medical Center,” April 24, 1991.


6. Appearance before the 112th Congress of the United States, Senate Veterans’ Affairs Committee Field Hearing Regarding the Dayton Dental Clinic, Dayton VA Medical Center, Dayton, Ohio, April 26, 2011,

**U.S. GOVERNMENT OVERSIGHT REPORTS**

Over 150 VA Office of Inspector General public reports.
CV Robert K Yang, MD

Robert K Yang MD, MHA

Current Position
Senior Physician
Medical Consultation and Review, Office of Healthcare Inspections
Department of Veterans Affairs, Office of Inspector General
12/10 - present

Previous Work Experience

Clinical Assistant Professor
University of Iowa Hospitals and Clinics
Department of Orthopaedics and Rehabilitation
01/07 – 11/10
Director, UI Spine Center (2010)
Carver College of Medicine

Physiatrist
Iowa City VA Medical Center
11/07 – 12/10
Chair, Spinal Cord Injury and Dysfunction Team
11/07 – 09/08
Chair, Amputee Clinic Team
10/08 – 12/10

Assistant Professor
Assistant Residency Program Director
University of North Carolina, Chapel Hill
Department of Physical Medicine and Rehabilitation

Senior Associate Consultant
Mayo Clinic Department of Physical Medicine and Rehabilitation

Instructor
Mayo Clinic College of Medicine

Education
University of North Carolina
Masters in Healthcare Administration (MHA)
2005 - 2008

Mayo Graduate School of Medicine
Physical Medicine and Rehabilitation
Chief Resident (1999 – 2000)
1997 – 2000
CV Robert K Yang, MD

Virginia Mason Medical Center 1996
Transitional Year

Washington University School of Medicine 1992 – 1996
MD

Washington University in St. Louis 1988 – 1992
BA, Biochemistry and Mathematics – Summa cum laude

Honors and Awards
- Excellence in Teaching Award – Mayo Clinic College of Medicine 2000 – 2004
- Summer Research Fellowship – Washington University 1993
- Summa cum laude – Washington University 1992
- Pew Mid-states Science and Mathematics Research Fellowship 1990

Board Certification
- American Board of Physical Medicine and Rehabilitation 2001 – 2021
- American Board of Medical Acupuncture 2005 – 2015

Medical Licenses
- Iowa 2006 - present

Professional Memberships and Services
- American Academy of Physical Medicine and Rehabilitation 1997 – present
- Health Policy and Legislation Committee 2006 – 2012
- Delegate to the American Medical Association YPS 2006 - 2010
- Membership Marketing Committee 2001 – 2006

Presentations

April 2009 Rehabilitation Services for Veterans
Iowa Academy of Physical Medicine and Rehabilitation 2009
Iowa City, Iowa

February 2008 Physical Modalities for Low Back Pain
Iowa Neurological Association – 2008 Annual Meeting
Coralville, Iowa

January 2008 Applications of Medical Acupuncture
Palliative Care Ground Rounds
University of Iowa Hospitals and Clinics
September 2007  Multidisciplinary Team Approach for the Back-Injured Worker
                    Chen, JJ  Vogel, A  Yang, RK

September 2007  Introduction to Medical Acupuncture
                    Rheumatology Journal Club
                    University of Iowa Hospitals and Clinics

June 2007  Medical Acupuncture for Musculoskeletal Pain
                    5th Annual Physical Medicine and Rehabilitation Symposium
                    Department of Orthopaedics and Rehabilitation
                    University of Iowa Hospitals and Clinics

May 2006  Impairment Ratings
                    Anesthesiology Grand Rounds
                    University of North Carolina
                    Chapel Hill, North Carolina

April 2006  Medical Considerations in Disabling Conditions
                    National Association of Disability Evaluating Professionals
                    Chapel Hill, North Carolina

April 2005  Evidence Based Review of Diagnosis and Treatment of Spine Disorders
                    National Association of Disability Examiners
                    Raleigh, North Carolina

April 2005  Acupuncture Treatment: The Importance of Point Selection
                    J.W. Eby and R.K. Yang
                    American Academy of Medical Acupuncture, Annual Meeting
                    Atlanta, Georgia

January 2005  Acupuncture for Back Pain
                    Mayo Clinic Spine Center Update for Primary Care Physicians
                    Scottsdale, Arizona

April 2003  The Use of Acupuncture as an Adjunct Therapy for Pain Control Resulting in Decreased Medication Usage
                    E.A. Huntoon and R.K. Yang

                    Acupuncture for Discogram-Proven Discogenic Back Pain: A Case Report and Literature Review
                    R.K. Yang and E.A. Huntoon
                    American Academy of Medical Acupuncture
                    Baltimore, Maryland
CV Robert K Yang, MD

March 2003  Persistent Symptoms of Rotator Cuff Arthropathy: A Case Report and Review of the Literature
A.J Locketz and R.K Yang
Association of Academic Physiatrists
Ft. Lauderdale, Florida

January 2003  Acupuncture - An Overview
Manual Medicine Course
Rochester, Minnesota

January 2002  Acupuncture for Low Back Pain: Critical Review of the Current Literature
Mayo Spine Center Conference
Scottsdale, Arizona

October 2001  Worker's Compensation in Chronic Low Back Pain, Patient Counseling, and Return to Work Issues
Mayo Clinic Spine Center Physicians' Retreat
Scottsdale, Arizona

September 1999  Neural Network Analysis of Outcomes in ACL Repair
Case Presentation: Neck Pain with History of Transverse Myelitis
Third National Conference of Rehabilitation Medicine for the Young
Nanjing, People's Republic of China

Publications


Chen JJ, Yang RK. The future of UIHC Rehabilitation Services: defining and measuring quality rehabilitation services. Iowa Orthop J. 2009; 29: 139 - 42


