It is a pleasure to provide you with this review of the clinical activities, educational efforts and research initiatives that have taken place in our Department in 2013. Truly, this has been a year of external change. At NorthShore University HealthSystem (NorthShore) we prefer to function as an agent of change rather than simply respond to the environment. Leading—rather than lagging—is our most effective strategy. Examples of our leadership in 2013 are numerous, including an unprecedented #21 ranking we received from the U.S. News & World Report, climbing 10 places in the span of one year. This national recognition reinforces all that we do in focusing our collective effort on clinical outcomes, patient safety, educational processes and infrastructure/technology. As we have entered an era of constrained resources, continuing to be the best at our calling and further increasing the quality of care we provide to our patients will not be easy, but it remains our professional “north star.” Our approach involves continued focus on integration and collaboration between all of our women’s health disciplines, examples of which are found in this report, most notably in the patient stories we have chosen to highlight.

We have further integrated our clinical research initiatives that have traditionally lived within separate divisions, in order to leverage the breadth and depth of scientific knowledge across our principal investigator group. A prime example is the collaboration between the Divisions of Chronic Pelvic Pain and Urogynecology, a partnership that resulted in a grant award to study neurogenic pain associated with overactive bladder syndrome, a devastating condition that afflicts women of all ages. Our Department added new investigators and our research infrastructure now accommodates greater multidisciplinary collaborations at both the bench and the bedside.

Our educational efforts epitomize our ability to engage in collaborations as we remained fully committed to teach multiple learner groups including physician assistant students, undergraduates, medical students, residents and postgraduate fellows. In partnership with our University of Chicago colleagues, two educational milestones were reached. In resident education, the University of Chicago OB/GYN program received the highest recognition from the Residency Review Committee with the maximum (10-year) certification awarded. In addition, the Pritzker medical students provided the highest student evaluations of the clerkship ever recorded during our five-year academic partnership.

In closing, the many notable achievements included in this annual report are featured to provide an opportunity for well-deserved recognition, but also to inspire others as much as these accomplishments have inspired me. To my Department colleagues—thank you for all that you do and for the difference you make each and every day for the families we are privileged to serve.

Richard K. Silver, MD
Chairman and Chief Academic Officer
Department of Obstetrics and Gynecology
NorthShore University HealthSystem
Clinical Professor and Associate Dean
University of Chicago Pritzker School of Medicine
Obstetrics

Emmet Hirsch, MD
Vice Chair for Faculty Development and Clinical Practice, Division Director and Clinical Professor

Clinical Mission and Services
The Division of Obstetrics exists to preserve and advance the health of pregnant women through activity in three interrelated spheres. The first is providing excellent care to pregnant, laboring and postpartum women and their infants. Next is creating a learning environment with first-rate educational opportunities for students, residents and fellows. Our third sphere is to expand the body of knowledge in women’s health through original research and clinical trials.

2013 Highlights and Achievements
Clinical outcomes in Obstetrics at NorthShore continue to rank favorably compared to similar institutions across the country. The table below presents the latest 12-month data compiled by the National Perinatal Information Center (NPIC), in which NorthShore is compared to other institutions in Subgroup AR (academic regional perinatal centers) and to the entire database that includes all types of hospitals. In particular, the lower rates of cesarean section and higher rates of vaginal birth after cesarean (VBAC) reflect a significantly positive impact on patient health at NorthShore.

Obstetrics 2013 Clinical Outcomes

<table>
<thead>
<tr>
<th></th>
<th>NorthShore</th>
<th>Subgroup AR Average</th>
<th>Entire NPIC Database Avg</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of deliveries</td>
<td>4,455</td>
<td>4,247</td>
<td>4,130</td>
</tr>
<tr>
<td>Babies born</td>
<td>4,554</td>
<td>4,314</td>
<td>4,191</td>
</tr>
<tr>
<td>Cesarean section rate</td>
<td>29.1%</td>
<td>33.3%</td>
<td>34.8%</td>
</tr>
<tr>
<td>VBAC rate*</td>
<td>23.0%</td>
<td>15.5%</td>
<td>12.2%</td>
</tr>
<tr>
<td>3rd and 4th degree laceration rate</td>
<td>3.42%</td>
<td>3.03%</td>
<td>2.85%</td>
</tr>
<tr>
<td>Postpartum readmission (within 42 days of discharge)</td>
<td>0.8%</td>
<td>1.2%</td>
<td>1.0%</td>
</tr>
</tbody>
</table>

* Calculated as the percentage of cases delivered vaginally among patients with a pre-existing uterine scar

- Activities in the Division occur within the framework of our multidisciplinary and collaborative culture. Active participant areas include Nursing, Nurse Midwifery, Family Medicine, Anesthesia, Obstetrics, Maternal-Fetal Medicine (high-risk obstetrics), and, where necessary, Urogynecology and Gynecologic Oncology.

- Our committee structure remains robust and includes the following interdisciplinary groups:
  - The Obstetrics Practice Committee reviews and publishes practice guidelines for the Division of Obstetrics.
  - The Perinatal Morbidity and Mortality Committee meets monthly at NorthShore Evanston Hospital and quarterly at NorthShore Highland Park Hospital to review challenging clinical scenarios.
  - The Obstetrical Clinical Outcomes Committee meets bimonthly to review quality data.
  - The OB Safety Committee designs and implements programs and training initiatives (often using NorthShore’s state-of-the-art Simulation Center) to improve care in a low-risk environment.

continued>
Clinical Care Division Reports

Gynecology

Kenneth Nelson, MD
Vice Chair of Quality, Division Director
and Clinical Associate Professor

Clinical Mission and Services
The Division of Gynecology includes all of our Department’s specialists and encompasses the disciplines of office practice, adolescent gynecology, and contraceptive and family planning services, as well as surgical procedures in both outpatient and inpatient settings. The Division recognizes that gynecologic surgery in particular is an iterative area within our specialty. As such, members are committed to lifelong and collaborative learning for the benefit of our patients. Our Division’s collegial culture is manifested by preceptor programs in which more experienced members proctor others in order to elevate the quality and procedure-related expertise across the Division. We have employed all of the latest technologies, including robotics, to bring state-of-the-art care to the community of patients we serve. We are committed to providing this quality care in an atmosphere of safety, support, cost-effectiveness and partnership with all of our patients.

Obstetrics (continued)

• The Division experienced significant growth in obstetrician gynecologists in 2013. The NorthShore Medical Group added the Lake Bluff practice and the Highland Park practice. The Skokie, Lake Bluff and Old Orchard groups each added new partners to their practices. Midwest Center for Women’s Healthcare added a new partner and nurse midwife to the AGSO practice. And finally, two solo practitioners relocated their clinical practices to NorthShore.

2013 Highlights and Achievements
• In 2013, the U.S. News & World Report ranking of NorthShore Gynecology moved up to 21st among the nation’s 50 best gynecology divisions. The rankings reflect accomplishments and recognition within the domains of structure, process, outcomes and safety in 16 specialty areas. This is the second consecutive year that NorthShore Gynecology was recognized and places our Department among the most outstanding and well-recognized departments in the United States.

• The Gynecology Division remains totally committed to surgical performance improvement and patient safety through our robust peer review process. A multispecialty committee thoroughly reviews cases identified by specific criteria, as well as by referral from Risk Management or Quality. Each case is reviewed for indication, documentation, complications, surgical management, and adherence to Centers for Medicare & Medicaid Services Surgical Care Improvement Project (SCIP) protocols. At the recommendation of the Gynecologic Morbidity and Mortality Committee, cases may be referred to the Division Director and/or the Department Chairman for additional review, education and process improvement.

• Our efforts at preoperative documentation improvement proved highly successful with near total compliance. Education targeting process and workflow revisions proved most effective. The Department’s success has served as a model for all surgical departments at our institution.

• In the interest of providing outstanding gynecologic surgical care in the most cost-effective and efficient manner, all of the gynecologic surgeons benefit from a personalized annual “report card” composed of cost per case, length of stay and case mix index. Each surgeon is compared to his or her peers as well as national benchmarks where available. These reports serve as an educational tool for surgeons’ self-reflection as well as a mechanism for identifying best practice.
High-Risk Pregnancy Management
Demands Advanced Testing and TLC

Managing a high-risk pregnancy demands a high level of technical ability and clinical expertise, with all the most advanced tests available to monitor the mother’s and the baby’s progress. But it also requires the caring, human touch. This is particularly true when it is the woman’s second high-risk pregnancy.

Marlena Calica and her husband Will turned to NorthShore’s Maternal-Fetal Medicine (MFM) team after they lost their daughter to complications of pre-eclampsia. Like all families, Calica was in need of a care team with a high degree of empathy to guide her to a healthy outcome for herself and her baby.

“We were nervous about having another child. We knew that I would be high risk, but we wanted to try again,” said Calica. “Even before I became pregnant, we met with NorthShore’s Maternal-Fetal Medicine team. I knew I was finally in the right place.”

The good news came—Calica discovered she was pregnant. After 12 weeks of care under her obstetrician Jill Hoprasart, MD, she was transferred to MFM physicians Beth Plunkett, MD, MPH, and Scott McGregor, DO. “I was seen weekly for ultrasounds to monitor the baby’s heart rate, placental perfusion, umbilical cord blood flow, and to check my blood pressure and urine. I was worried pre-eclampsia would return, but I was very closely watched. I knew I could call any time. The collaborative care was key—the clinical exchange of ideas between the physicians provided the best care for me and our baby.”

At 31 weeks, Calica was admitted to Evanston Hospital. Her blood pressure was high, and her urine tested positive for protein. The baby’s placenta was no longer receiving the best perfusion. Pre-eclampsia had returned. The only cure for pre-eclampsia is delivering the baby. The physicians walk a fine line, optimizing the health of the mother and baby while maintaining the pregnancy as long as possible.

Calica recalled her physician saying, “It will be better for your baby to be living out here with us.” After a C-section, Liam Calica was born on May 17, 2013. “We were so relieved that he was alive and okay. It was amazing that he could breathe and eat without tubes.” Liam spent two and a half weeks in the Evanston Hospital Infant Special Care Unit (ISCU). “Once we brought him home, his growth just took off.”

According to Calica, the experience at NorthShore was completely different than elsewhere. “There was a noticeable balance of technology and touch. My team’s use of advanced lab technology and research and the ability to bring results to my bedside in a sensitive way meant a lot to us. Our physicians took the time to explain results one-on-one, rather than delegating the task to someone else. I also appreciated their hospital rounding coverage that included the attending physicians as well as the fellows and the residents. The communication chain worked well.”

From Calica’s point of view, it is clear that NorthShore’s MFM team has a goal to maintain a balance of expertise and innovation with an environment that is nurturing. “My NorthShore care team was there for us so we could bring Liam home to our extended family. Liam has brought our family closer. There is so much joy in that.”
2013 Highlights and Achievements

• The Division of Gynecologic Oncology was again recognized as an Annual FY 2013 Top Practice for outstanding patient loyalty, ranking very favorably compared to their peers nationally and within the NorthShore Medical Group.

• Jean Hurteau, MD, is spearheading a robust clinical trials program with a number of trial opportunities for women with gynecologic cancers. He continues to play an active role in protocol development within the Gynecologic Oncology Group, a national research consortium that is a leading organization in gynecologic oncology clinical research.

• Under the direction of Carolyn Kirschner, MD, the NorthShore Gynecologic Oncology Robotics Program has developed into a leading programmatic resource in the region. The anticipated benefits and perioperative outcomes have fulfilled the expectations of both patients and surgeons.

• Work has continued under a multi-million dollar Department of Defense award granted to the Division for studies related to the prevention of endometrial cancer and ovarian cancer. These studies are being spearheaded by Gustavo Rodriguez, MD, and his laboratory team headed by Larry Thaete, PhD, and include collaborations with scientists at Harvard University, University of Chicago, University of Pittsburgh and Walter Reed Army Medical Center.

• Under Dr. Rodriguez’s leadership as Principal Investigator, enrollment has been completed in Gynecologic Oncology Group Protocol 214. This study evaluates the ovarian cancer preventive effects of a progestin in women at high risk of ovarian cancer. The laboratory work related to this national clinical trial is now under way with results expected by the first quarter of 2014.

• Dr. Kirschner and her family have continued their outstanding mission efforts in Nigeria, where she made two trips in the past year with the goal of serving women with vesicovaginal fistula, a debilitating consequence of traumatic childbirth. This year, Dr. Kirschner was an invited speaker on her work at the Christian Medical and Dental Association’s Continuing Medical and Dental Education Conference XXXIII in Thailand.

• Dr. Rodriguez was awarded a grant from Bears Care to support research related to ovarian cancer prevention. In addition, The Auxiliary of NorthShore at Evanston and Glenbrook Hospitals held a very successful American Craft Exposition raising funds in support of the Clinical Gynecologic Cancer Prevention Program. The program has been opened, and seeks to screen women in our community for ovarian and endometrial cancer risk, with implementation of tailored strategies to mitigate risk.

• Dr. Hurteau gave a presentation on the management of ovarian germ cell tumors at the Society of Gynecologic Oncologists winter meeting.

• The Division is proud to announce a new member, Elena Diaz, MD. Dr. Diaz recently completed her fellowship training at the University of California Los Angeles/Cedars-Sinai Program, one of the most prestigious gynecologic oncology fellowships in the country. While there, she distinguished herself broadly, receiving a number of awards for humanism and excellence in care. She will extend Division coverage to Highland Park Hospital.
Clinical Mission and Services

The Division of Maternal-Fetal Medicine (MFM) is a group of specialists committed to clinical service, research and educational opportunities related to patients with high-risk pregnancies and their referring physicians. The Division’s commitment to quality and loyalty is evident in the Fetal Diagnostic Center (FDC) of the Center for Maternal and Fetal Health (CMFH) at Evanston Hospital and at six satellite sites throughout the north and northwest Chicago metropolitan area. The CMFH consolidates the services of the MFM and the FDC offering integrated and advanced technology and services.

2013 Highlights and Achievements

- In the past year, MFM has continued its commitment to quality improvement in clinical services, research activities and educational opportunities. Our clinical programs have focused on service excellence and timely consultation to our patients and referring physicians. Our group’s primary clinical site is Evanston Hospital; however, we also provide services at six other FDC sites in Glenbrook, Highland Park, Lake Bluff, Evanston, Arlington Heights, Libertyville and Gurnee.
- In addition to 10 specialist physicians, support staff members include five genetic counselors, four MFM and three FDC nurses, four research nurses, a nurse assistant, 11 ultrasonographers and supportive secretary and billing staffs, a prenatal dietician and certified diabetic educator to assist patients, particularly those with diabetes or multiple gestations.
- The Center for Maternal and Fetal Health offers the latest technology and services. In the past year, the FDC provided more than 30,000 patient encounters. Ultrasoundographers

NorthShore Care Team Helps Courageous Couple Build Family

There is a saying in life: “Ask yourself what is really important, then have the courage and wisdom to build your life around that answer.” For Michelle Fanaro and husband Ken, of the North Chicago suburbs, this mantra rings true, especially after the loss of their infant son, Cruciano, to spinal muscular atrophy (SMA). It is the leading genetic cause of death in children under the age of two.

Building on a dream, they found the wisdom to turn to Fanaro’s trusted Certified Nurse Midwife Linda Given Welch, CNM, MS, for guidance and began a journey of figuring out the best way to renew their dream to have a family. “I found Linda with a cold call to her practice years ago when I moved to the area and needed a routine exam,” said Fanaro. “She has been there for us through everything. Today, I have grown to trust her completely. She’s a part of our family and I think she’s wonderful.”

Fanaro then met Richard Silver, MD, and his team through Welch when pregnant with her daughter, Gianna, now 4. “We turned to Dr. Silver’s team for care beginning with genetic testing early on,” recalled Fanaro. “We knew that there was a 25 percent chance Gianna could have SMA.”
In addition to maintaining American Institute of Ultrasound in Medicine (AIUM) certification, our Fetal Diagnostic Centers have upgraded image archiving systems. All of the Centers are interconnected through this state-of-the-art system and Epic, facilitating rapid communication of results to referring physicians. The ubiquitous, remote access to our patients’ electronic medical record in Epic enables the physicians and staff to seamlessly improve the quality and continuity of patient care throughout a large geographic area in multiple locations. Epic has been used to develop a systematic approach to patient and physician communication, as well as record review. It also provides patients access to their records, results and physicians through NorthShoreConnect.

The Division has continued its commitment to clinical and laboratory research, and a number of new projects have been developed during this past fiscal year. These research efforts have resulted in numerous presentations at leading scientific research meetings and numerous publications in leading peer-reviewed journals. In addition, NorthShore Maternal-Fetal Medicine and the Department of Obstetrics and Gynecology at the University of Chicago have initiated collaboration on approved research trials and anticipate continued development of these collaborative efforts.

Within our Perinatal Network, the Division provides educational opportunities to all network hospitals under the administration of Myra Sabini, RNC, Perinatal Network Coordinator. MFM physicians regularly attend their Department meetings and provide quarterly morbidity and mortality conferences at each of the hospitals in the network. In addition, the network hospitals benefit from the provision of educational materials for their obstetrical nurses.

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We are one of only 14 clinical centers of the National Institute of Child Health and Human Development-sponsored MFM Unit Network. The MFM Unit participation allows our patients access to the most innovative and important clinical trials. Recent studies have included use of progesterone to reduce preterm delivery in patients with shortened cervix on ultrasound evaluation, an observational cohort study to evaluate measures of quality of obstetric care, a randomized placebo-controlled trial of antenatal late preterm steroids, a randomized placebo-controlled trial in patients at risk for congenital cytomegalovirus infection, and a randomized trial comparing traditional electronic fetal heart rate monitoring in labor to traditional monitoring plus fetal echocardiographic monitoring.

Dr. Silver’s team’s use of high-tech and high-touch care impressed Fanaro, “We may have been more educated on the importance of genetic testing and appreciative of the advanced technology at NorthShore because of the experience with our son, but our care team never assumed we knew everything.”

“The outcomes of all of our testing, from the amniocentesis to other tests, their discussions and the time they took to explain it all to us was such an important part of our care. We received quick, informative results but in such a caring, respectful way. The amnio revealed she was healthy. We received good news, but truly we got so much more. It was incredible to see a team so dedicated to us and who communicated so efficiently between offices and to the bedside.”

Today, the Fanaro family continues to thrive. In April, Michelle, Ken and Gianna welcomed baby Daniela. Daniela followed in her big sister’s footsteps, cared for by the same family of experts led by Dr. Silver and Nurse Midwife Welch. Daniela’s genetic testing also revealed that she, too, is healthy and not affected by SMA.

“We received excellent care during each pregnancy and birth. The team will bend over backwards for any patient, whether you’re in a high-risk situation or not,” added Fanaro. “They’re a group of hands-on experts who truly weigh every pro and con for each patient, assessing every potential outcome so each patient clearly understands their options. Through my experience, other doctors and hospitals don’t necessarily offer that kind of care. In my experience, at NorthShore, I can count on it.”
Reproductive Endocrinology and Infertility

John Rinehart, MD, PhD, JD  
Division Director and Senior Clinician Educator

Clinical Mission and Services
NorthShore has 10 physicians who specialize in reproductive endocrinology and infertility. These physicians are independent practitioners belonging to a variety of practice models. This variety provides the patients of the NorthShore community with a number of excellent choices when faced with problems of the reproductive endocrine system. A commonly encountered problem is infertility.

Over the last 30 years, great strides have been made in providing treatment for couples experiencing infertility such that today a majority of couples faced with infertility have many options that provide a high degree of success.

The community of reproductive endocrinologists serving the NorthShore families have, from the beginning, been at the leading edge of technological development. The reproductive endocrinologists have consistently maintained the highest levels of success achievable with the technology available.

2013 Highlights and Achievements
• A recent trend in the practice of infertility has focused on higher success rates for a cycle of treatments and the use of in vitro fertilization (IVF) to reduce treatment-related risks. The physicians at NorthShore were some of the first to turn to the evolving field of genetic diagnosis to increase the success rates for IVF. Using preimplantation genetic diagnosis and screening, IVF can be done using single-embryo transfer. In this procedure, a single embryo is transferred to the woman, and because of the genetic information obtained from that embryo, the pregnancy rates are the highest achievable.

• A second area of progress in IVF is the use of cryobiology. Newer techniques of freezing tissue have resulted in very high success rates in IVF without the destruction of embryos. Recently, improved egg (oocyte) freezing permits the formation of fewer embryos and yet still preserves the same overall likelihood of success. Progress is being made for patients seeking the use of donor oocytes. Oocytes now can be cryopreserved and thus there are developing programs for fertility preservation and the ability to obtain cryopreserved oocytes from programs across the country. This provides patients with a greater choice when using oocyte donation.

• The Division continues to pursue active participation in research and education both at the medical student level and at the graduate education level. The affiliation with The University of Chicago provides a great opportunity for these pursuits. Other institutions of learning also are served by the physicians of NorthShore. Many physicians are involved with national clinical trials as well as local research studies.

NorthShore Fertility Team Gets New Mom Back Up and Running
If you have ever cheered on a marathon runner, your sign might say: “Pain is temporary. Pride is forever.” Just ask Jennifer Paul, a seasoned marathoner and triathlete who is very familiar with the sacrifice and endurance needed to train and finish such grueling events. But when severe pelvic pain began to affect her training, work and eventually her fertility, she knew something was terribly wrong.

“My pain would last for seven days each month during my period. The cramps were extreme—I would miss work, need to use a heating pad or soak in the tub. I was also extremely bloated,” recalled Paul. “I had been healthy and active my entire life. I had never experienced anything like this.”

Paul and her husband Todd were ready to take on a new dream—to be parents. “Todd and I had been married for 11 years and built a great partnership in our marriage. We wanted to wait to have children. I was suddenly afraid our dream would not come true.”

Paul’s OB/GYN, Jill Hoprasart, MD, suspected endometriosis and quickly referred her to Eve Feinberg, MD, of The Fertility Centers of Illinois, for an in vitro fertilization (IVF) consultation, and to Sangeeta Senapati, MD, MS, for pelvic surgery. “Dr. Hoprasart told me how confident she was in Drs. Feinberg and Senapati, and that she knew I would soon be back in her care as an OB patient. I was so grateful for that sense of hope.”

When Paul met Drs. Feinberg and Senapati, an exam revealed that she had an ovarian cyst, endometriosis and uterine polyps—all of which could be removed laparoscopically and hysteroscopically. “Dr. Feinberg and Dr. Senapati were incredibly reassuring that I would recover from the surgery and I could move on to IVF treatments,” said Paul.

Paul’s three-hour surgery was performed on Oct. 30, 2012, successfully. “I was well-informed on exactly what was going to happen to me during my surgery and my waiting family was, too,”
2013 Highlights and Achievements

- **Diana Atashroo**, MD, has joined the Division and has a particular interest in neuropathic pain disorders, including pudendal neuralgia, and also extensive expertise in single-incision surgery and robotic assisted pelvic surgery. The Division hosted a single-port incision surgical lab in the NorthShore Center for Simulation and Innovation (NCSI) for the Department members and residency program. Dr. Atashroo will be servicing both Glenbrook and Gurnee clinics to optimize the Division’s ability to provide cutting-edge minimally invasive procedures and pain evaluation to the greater Chicagoland community.

- **Kevin Hellman**, PhD, in collaboration with Adam Gafni-Kane, MD, of the Division of Urogynecology and Reconstructive Surgery, was awarded a NorthShore pilot project award to determine the mechanisms responsible for bladder pain in women with interstitial cystitis.

- Two students in the Hellman laboratory received undergraduate and medical student research awards from Northwestern University and the University of Chicago, respectively. Insiyah Patanwala, MD, of the University of Chicago graduate medical education program presented research and surgical videos from the Division at the International Pelvic Pain Society and the World Robotics Gynecology Congress.

- Frank Tu, MD, MPH, and Sangeeta Senapati, MD, MS, served as faculty for the 22nd Annual AAGL Comprehensive Workshop on Minimally Invasive Gynecology for Residents and Fellows in Chicago. Drs. Senapati and Tu also were faculty for workshops at the AAGL Global Congress and presented data from a recently completed National Institutes for Health (NIH) study on pelvic floor pain and bladder pain syndromes.

- Dr. Tu was the scientific program director for the International Pelvic Pain Society in Orlando, and was an invited speaker at Stanford University and Washington Hospital Center where he spoke about the team’s emerging research: “Dysmenorrhea, not your mother’s menstrual cramps.” He was also an invited participant in the NIH Vulvodynia Research Diagnostic Criteria workshop.

- Drs. Hellman and Tu published an article in the *American Journal of Obstetrics and Gynecology* characterizing the potential early influence of having painful menses on future risk of chronic pelvic pain, a project funded through NorthShore’s Clinical Collaborative Research Program.

- Dr. Senapati also was selected as one of 12 Medical Education, Research, Innovation, Teaching and Scholarship (MERITS) Fellows. This highly competitive program is sponsored by the University of Chicago to provide participants with the conceptual and practical skills required for successful future careers as medical education scholars.

"My doctors took the time to extend care and sensitivity to my husband and family, and that really means a lot.”

Looking back, Paul sees the value in the comprehensive care she received. “I was impressed that all three of my doctors were so approachable, down-to-earth and compassionate. They understood the level of my pain, and I knew they had everything under control,” said Paul. “They all conferred with each other constantly to deliver me thorough, excellent medical care.”

By January 2013, Paul began her IVF treatment, and by March 2013, she was pregnant. “To say that it was successful was an understatement,” said Paul. “Our baby is due in November, and my pregnancy has gone well so far. Although I had a rough first trimester, it’s hard to complain when I realize what it took to get here,” recalled Paul.

Once the baby is born, Paul hopes to begin training for the Chicago Triathlon in August 2014. This time, thanks to her NorthShore care team, she will have a new little fan cheering for her on the sideline.
In the end, we only regret the chances we did not take. For Sharon Glassner, there are no regrets. She lives with urinary incontinence, a condition for which many are too embarrassed to seek help. Facing her diagnosis head-on, Glassner opted for a full hysterectomy in 1977 when leakage began to disrupt her daily exercise routine.

“I wasn’t going to wear pads and worry about finding the nearest bathroom for the rest of my life,” recalled Glassner. “Back then, a full hysterectomy and pelvic floor rebuild was the only treatment. I was done having children and I knew I wanted to be free of feeling so uncomfortable.”

Glassner explained that after a few years leakage reoccurred. “I experienced urge and stress incontinence, returned to my physician and was referred to Peter Sand, MD,” said Glassner. “Dr. Sand is on the leading edge of new treatment options for incontinence and travels the world to train others in this area.”

In 1998, Dr. Sand began treating Glassner’s stress incontinence with injections of collagen around her sphincter to keep urine from leaking. “Periurethral bulking procedures are very effective in women, like Sharon, with stress urinary incontinence who have good urethral support,” said Dr. Sand.

“Over the last two decades, we’ve introduced and reported on several new materials for urethral bulking in the office,” Dr. Sand said. “Currently, I’m investigating the use of stem cell injections in the urethra to achieve the same good results Sharon has had, without the need for subsequent reinjections.”

Since collagen injections were removed from the market, Glassner has been receiving Coaptite (calcium hydroxylapatite) injections. “The Coaptite injections continue to work well for me today,” said Glassner. “I recently had a virus that caused me a lot of heavy coughing and sneezing. I didn’t have any problems with leakage at all.” According to Glassner, the Coaptite needs replacing from time to time, but the amount of time between treatments depends on the person. For her, it is approximately once every two years.

To treat Glassner’s additional problem of urgency urinary incontinence—caused by involuntary bladder contractions—she went on oral medications Toviaz and Vesicare. “The medications worked well for a while, but not completely. I also suffered a terrible case of dry mouth, as a side effect. While I understood that it was something I needed to endure to reap the benefit of the drug, in the long run the dry mouth was bad for my teeth and my oral hygiene. I didn’t even have enough saliva to wet a stamp.”

Then Dr. Sand gave Glassner good news about a new treatment that they had been investigating and using for the last decade: BOTOX® injections for the bladder. Dr. Sand and colleagues have published on clinical trials using BOTOX® for patients with and without neurological conditions with overactive bladder syndrome that has led to FDA approval for these conditions. With the treatment newly approved by the FDA, Dr. Sand got to work treating his patients with the new procedure and Glassner was one of the first in line.

“I’m the ‘queen of injections’ according to Dr. Sand,” joked Glassner. “I had the BOTOX® treatment in June 2013 and immediately went off the oral medications. My urge incontinence has vastly improved, and I want to tell people how these treatments have helped in my life. I hate to hear about people afraid to talk to their doctor. There are answers that can really make a difference. It would be silly to not try because the outcome can be amazing. It happened to me.”

Glassner feels when you have the right physician, it makes a world of difference. “Dr. Sand is wonderful, and I pray that God will keep him around for a long time, continuing to help others. Dr. Sand’s nurse, Karen Sasso, and the other members on his care team are caring, kind and concerned about the feelings of each patient.”

“They’re all so dedicated to patient care, and because of that I would refer Dr. Sand in a heartbeat. He and his team can change a patient’s life so they don’t feel like this is just part of getting older. It just doesn’t have to be that way.”
Clinical Care Division Reports

Urogynecology and Reconstructive Surgery

Roger Goldberg, MD, MPH
Division Director and Clinical Associate Professor

Clinical Mission and Services
The Division of Urogynecology and Reconstructive Surgery is dedicated to improving the care of women with incontinence, painful bladder syndrome, voiding dysfunction and other pelvic floor abnormalities. The Division is actively involved in the education of University of Chicago Pritzker School of Medicine residents and medical students and also continues an Accreditation Council of Graduate Medical Education-approved three-year fellowship. The physicians and clinical staff are recognized nationally as a premier resource for clinical care, research, and informatics and quality outcomes tracking in urogynecology.

2013 Highlights and Achievements
• The Division relocated to new headquarters in the Skokie Hospital Ambulatory Care Center from the longstanding previous location adjacent to Evanston Hospital. This new state-of-the-art facility is equipped with vastly improved clinical areas and amenities, and similar to the Highland Park location, allows common office spaces with other divisions comprising the Pelvic Health Center including Pelvic Pain/Minimally Invasive Surgery, Colorectal Surgery and Gastroenterology.

• This past year included the Female Pelvic Medicine and Reconstructive Surgery (FPMRS) national institution of the written certifying examination. All of the NorthShore Urogynecology and Reconstructive Surgery attending physicians who took the written FPMRS board exam successfully passed, thus earning the formal recognition as subspecialists in this field of women’s health.

• With support from the Department of Obstetrics and Gynecology, the Division developed a novel informatics system in Epic to allow for tracking of all clinical data and surgical outcomes. This represents a “first of its kind” system never before developed in a Urogynecology division and is seen as a model for other institutions to emulate. Roger Goldberg, MD, MPH, is overseeing the project, with the assistance of NorthShore’s Center for Biomedical Research Informatics and the American Urogynecology Society, to disseminate this novel technology to other divisions of urogynecology throughout the United States.

• The Division continues to be highly productive in clinical research. Adam Gafni-Kane, MD, was recipient of the NorthShore Pilot Grant for his ongoing work in the area of Interstitial Cystitis/Painful Bladder. Kelly Jirschele, DO, was accepted in the Quality Scholarship program. New trials for 2014 include an innovative study of BOTOX® for overactive bladder, a novel sublingual medication for the treatment of nocturia or nighttime voiding, and surgical trials involving minimally invasive methods for the treatment of advanced pelvic organ prolapse. Physicians from the Division lectured on their research findings, and provided surgical instruction to peers widely throughout the United States and internationally, including surgical teaching visits to Brazil, Colombia and Africa.

• NorthShore Urogynecology physicians fill national and international leadership roles in numerous professional societies. Peter Sand, MD, is the Past President of the International Urogynecological Association; Sylvia Botros, MD, MS, is the Fellowship Committee Chairman for the International Urogynecological Association; and Dr. Roger Goldberg serves on the Board of Directors of the American Urogynecology Society and oversees the Health Policy Committee.

• Dr. Roger Goldberg was awarded the Distinguished Contribution in Medicine by the NorthShore Medical Group for 2013. He was recognized for his clinical skill in the operating room, in the office setting and beyond the NorthShore geography through his contribution to evidence-based medicine in the subspecialty. His commitment to the best patient outcomes drives innovation in surgical technique, and he has been recognized nationally for novel surgical treatments related to pelvic relaxation/prolapse and urinary incontinence.
Perinatal Depression Program

Jo Kim, PhD  
Clinical Assistant Professor and Program Director

Clinical Mission and Services

Women are at greatly increased risk for clinical depression and its potentially devastating outcomes during the perinatal period. The Perinatal Depression Program (PDP) provides proactive universal screening for depression in both the pre- and postnatal periods using the Edinburgh Postnatal Depression Scale (EPDS). The program also provides an immediate, live telephone response to at-risk women by a trained and licensed professional 24/7/365 for information, advice or referral to an appropriate mental health provider.

A community-based network of mental health professionals also is maintained and updated. This network gives physicians and their patients ready access to outpatient mental health services—avoiding the typical barriers encountered without such a robust program.

2013 Highlights and Achievements

- The North Suburban Healthcare Foundation awarded the program a $500,000 grant to expand depression-screening services. The program will establish screening in more pediatric offices.
- Based on its pioneering reputation, the program was one of two hospitals in the country chosen for the 2020 Mom Project, an initiative from the California Maternal Mental Health Collaborative.
- Jo Kim, PhD, presented perinatal depression research findings at the 2013 annual meeting of Postpartum Support International.
- Through a unique partnership with NorthShore’s Department of Psychiatry launched in 2013, six NorthShore Medical Group psychiatrists received additional training in perinatal mood disorders. As further enhancement, a mechanism was developed to link more than 50 perinatal women with expert psychiatric care.
- The perinatal psychiatric medication clinic for unfunded/underfunded women staffed by PDP Medical Director Scott Gordon, MD, served 28 patients who would have otherwise faced prohibitive barriers to psychiatric care in community-based settings.
- A large number of women (6,895) were screened in 2013 resulting in identification of 493 women at risk. Of those, 198 endorsed thoughts of suicide on the screen, demonstrating the central importance of engaging these women for mental health services.
- Unlike any other service, the free MOMS Hotline served 764 women in the past year. The licensed mental health professionals staffing the Hotline sent 39 mothers to the emergency room for potentially life-saving treatment.

Dr. Jo Kim
Perinatal Family Support Center

Clinical Mission and Services

The Perinatal Family Support Center (PFSC) provides a wide array of social and referral services to women and their families experiencing challenges related to pregnancy, birth, prematurity or perinatal loss. Patients and their families at both Evanston and Highland Park Hospitals’ obstetrical and pediatric units are able to access services of the Center.

2013 Highlights and Achievements

- The top five reasons for initial referral to PFSC:

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<tr>
<th>Reason</th>
<th>Percentage</th>
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<tr>
<td>Mental health issues</td>
<td>33.3%</td>
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<tr>
<td>High-risk pregnancy</td>
<td>13.0%</td>
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<tr>
<td>Pregnancy loss</td>
<td>12.6%</td>
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<tr>
<td>ISCU admissions</td>
<td>6.9%</td>
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<tr>
<td>Unmet patient needs</td>
<td>5.6%</td>
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</table>

- Nearly 1,700 families received services from PFSC in FY 2013.

- The Teen Education program was completely restructured resulting in nearly 100 percent attendance by teens and their support persons.

- Seventy-six antenatal consults with Neonatology were performed in anticipation of support, guidance and resource needs of obstetric patients whose unborn children were diagnosed with significant birth defects.

- In conjunction with the Department of Pediatrics with the goal of fostering safe transition to the community for infants and children, a high-risk discharge plan was developed and implemented. In the first six months, 12 families participated with excellent outcomes.

- More than 400 families were provided with needs-based support with the assistance of the NorthShore Associate Board Emergency Family Fund.

- More than 5,300 books were distributed through the Child and Adolescent Clinic to promote literacy through the Reach Out and Read program.

- Two hundred sixty-four children participated in Sibling Tours at both hospitals.

- A continued partnership with North Shore Junior League and the PFSC enabled an education and advocacy “baby shower” for 21 low-income pregnant women and their guests.

- PFSC staff members have served as invited presenters at an array of local and national conferences.

Messages from Patients to the Perinatal Family Support Center

A note from a postpartum mother:
“There are no words to describe our gratitude. From the bottom of our hearts—thank you! We will never forget your care, your graciousness and your help.”

A pregnant mother writes:
“You don’t know how grateful and thankful I am to have someone like you in my corner; there’s not many caring social workers like you out there.”

From a family member:
“The social worker, besides being highly professional and seasoned, exhibited an overwhelming array of skills, understanding and involvement without encroaching upon the family’s privacy by going absolutely beyond and exceeding all reasonable expectations, professional duties and protocols.”

A postpartum mother writes:
“Thank you, once again, for pouring your heart and soul into what you do…”

Department of Obstetrics and Gynecology 2013 Annual Report
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<td>A Multi-Centre, Double-Blind, Randomized Controlled Trial</td>
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<td>Bridging the Gap: Expanding Perinatal Depression Screening to the Pediatric Setting</td>
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Undergraduate Medical Education

H. Jacob Saleh, MD  
Site Director and Clinical Associate Professor

In collaboration with the University of Chicago Pritzker School of Medicine, NorthShore faculty continue its commitment to ongoing excellence in undergraduate medical education. Students complete learning objectives in health care for women in an atmosphere of discovery and clinical excellence.

In addition to the core third-year rotation, fourth-year students are offered unique month-long electives in general and high-risk obstetrics. Electives are expanding to include subspecialty experience in Urogynecology, Gynecologic Oncology, Fertility and Pelvic Pain. Increasing numbers of senior students with a strong interest in Obstetrics are offered unique month-long electives in general and high-risk obstetrics.

Students complete learning objectives in health care for women to ongoing excellence in undergraduate medical education.

In collaboration with the University of Chicago Pritzker School of Medicine OB/GYN residency program, which allows for at least one resident to participate with our labor and delivery team throughout the academic year. The residents’ obstetrics and gynecology outpatient clinic training is based at NorthShore. This experience gives the residents the opportunity to learn outpatient management within the context of a “group practice.”

2013 Highlights and Achievements

- Loren Hutter, MD, and David Ouyang, MD, were recipients of the Holden K. Farrar, Jr. MD Teacher of the Year Award and Lecturer of the Year Award, respectively.
- Michael Hughey, MD, received the AOA Faculty recognition award for the 2012–13 academic year, which was the second AOA award to our NorthShore Department faculty in as many years.
- This academic year experienced a surge of new faculty participation in student education with new mentors and, most notably, simulation center and Objective Structured Clinical Exam faculty participants.
- Student evaluations and feedback on the NorthShore faculty and Department for the 2012–13 academic year were at their highest level since the University of Chicago–NorthShore affiliation.

Graduate Medical Education

Beth Plunkett, MD, MPH  
Site Director and Clinical Assistant Professor

Sangeeta Senapati, MD, MS  
Associate Site Director and Clinical Assistant Professor

Overview

In collaboration with the NorthShore faculty, all 28 of the University of Chicago Pritzker School of Medicine OB/GYN residents benefit from learning opportunities at NorthShore over their four-year training program. NorthShore also hosts residents from St. Francis Hospital’s Obstetrics and Gynecology residency training program, which allows for at least one resident to participate with our labor and delivery team throughout the academic year. The residents’ obstetrics and gynecology outpatient clinic training is based at NorthShore. This experience gives the residents the opportunity to learn outpatient management within the context of a “group practice.”

Highlights

- Our OB/GYN faculty are reknowned for their remarkable teaching abilities. NorthShore physician Sangeeta Senapati, MD, MS, Clinical Assistant Professor (Division of Gynecological Pain and Minimally Invasive Surgery) was recognized by the Obstetrics and Gynecology residents for her talent and dedication to graduate medical education as the recipient of the 2013 Golden Apple Award.
- The residents received several important accolades. Benjamin Brown, MD (Class of 2016) was recognized campus-wide by the students of the Pritzker School of Medicine for his superlative teaching. He was awarded the 2012–13 Arnold P. Gold Foundation Humanism and Excellence in Teaching Award. Samantha Pace, MD (Class of 2013) was recognized for her exemplary role as a resident and received the AOA Housestaff Award. Several residents were recognized by the medical students as outstanding teachers during their clerkships.

They include Andrea Loberg, MD (Class of 2016), Insiyah Patanwala, MD (Class of 2015), Neha Bhardwaj, MD (Class of 2014) and Laura Douglass, MD (Class of 2013).

- The Obstetrics and Gynecology residents had outstanding faculty-mentored research accomplishments with representation at several national meetings. Two of these research endeavors culminated in publication. Christina Boots, MD (Class of 2013), mentored by Eve Feinberg, MD (Division of Reproductive Endocrinology and Infertility), published on the effects of methotrexate on ovarian reserve, and Dr. Insiyah Patanwala (Class of 2015) published a review of trials that assessed human papilloma virus testing in screening protocols for cervical cancer. Lindsey Benson, MD (Class of 2014) published her work on contraceptive use in an urban clinic.
- Ian Grable, MD, MPH, Clinical Assistant Professor in Maternal-Fetal Medicine, and his colleagues continued to provide cutting-edge educational opportunities for the residents through his use of simulation technology in the state-of-the-art NorthShore Center for Simulation and Innovation (NCSI). His educational program provided intensive training for the residents in such areas as complex deliveries, procedural skills, team building, obstetric emergencies and patient counseling and management of medically complex situations. Dr. Sangeeta Senapati and colleagues provided the residents with high-impact learning at the NCSI. Under her leadership, residents participate in educational programs to focus on advanced minimally invasive skills and techniques in the safety of the simulated learning environment.
- Under the leadership of Anita Blanchard, MD, and Adrienne Dade, MD (Program Director and Associate Program Director, respectively) in collaboration with Beth Plunkett, MD, MPH, and Dr. Sangeeta Senapati, MD, MS, the residency program received an excellent Residency Review Committee review with no citations and a 10-year renewal cycle—the longest possible cycle awarded to Accreditation Council for Graduate Medical Education-sponsored programs.

continued>
Fellowship Programs

Sylvia Botros, MD, MS
Program Director and Clinical Assistant Professor
Female Pelvic Medicine and Reconstructive Surgery (formerly known as Urogynecology)

Overview
The NorthShore Division of Female Pelvic Medicine and Reconstructive Surgery (FPMRS) supports the advanced training for three fellowship positions certified by the Accreditation Council for Graduate Medical Education (ACGME). The program continues to successfully integrate selected clinical rotations at the University of Chicago. The national reputation of the NorthShore FPMRS fellowship program was instrumental in interviewing with top-tier applicants again in 2013 for the twelfth consecutive year.

Highlights
- NorthShore’s FPMRS Division achieved subspecialty board accreditation in transition from ABOG to ACGME.
- The fellowship program successfully received accreditation from the ACGME for the maximum number of years for which the program is eligible.
- The four faculty eligible for board subspecialization successfully completed written board examinations and were officially certified in the subspecialty; 2013 being the first year certification was available.
- Juraj Letko, MD, graduated and is practicing at Mt. Sinai Hospital in Chicago leading the development of a new urogynecology division.
- Alexis Tran, DO, matriculated for the PGY-5 position and was welcomed into the program.
- Kelly Jirschele, DO, was accepted in the Quality Scholarship program.

Jean Hurteau, MD
Associate Director and Clinical Professor
Gynecologic Oncology

Overview
The Division of Gynecologic Oncology has an approved, integrated fellowship training program directed by S. Diane Yamada, MD, at the University of Chicago and certified by the American Board of Obstetrics and Gynecology. The program consists of one basic science research year and two clinical years divided between the two campuses. The clinical experience includes management of preinvasive and complex invasive cancers of the gynecological tract under the supervision of eight attending physicians, with both surgical and medical oncology as central components of the curriculum.

Highlights
- Terri Febbraro, MD, began her first year in the Gynecologic Oncology Fellowship Program after completing her residency at Brown University.
- Josephine Kim, MD, matched to our fellowship program and will start in the 2014–15 academic year. Dr. Kim received her medical degree at the University of Chicago and is currently completing her residency at the University of California San Diego.
- Elena Diaz, MD, is the newest faculty member of the NorthShore Division of Gynecologic Oncology. Dr. Diaz completed her Gynecologic Oncology fellowship at the University of California Los Angeles/Cedars-Sinai. She is actively involved in our fellowship program in addition to developing a clinical practice.
- Andras Ladanyi, MD, PGY-6 presented his research entitled “Omental adipocytes promote overexpression of CD36 in ovarian cancer cells and enhance tumorigenicity” at the 2013 American Association for Cancer Research in Washington, D.C. (University of Chicago mentor: Ernst Lengyel, MD, PhD)
Graduate Fellowship Program (continued)

Richard Silver, MD
Program Director and Clinical Professor

Maternal-Fetal Medicine

Overview
The integrated NorthShore and University of Chicago Maternal-Fetal Medicine fellowship has fully developed the training experience in the care of women with high-risk pregnancies for all three of its fellows. Their learning experience includes diagnosis, treatment and management of medical, surgical and obstetrical complications of pregnancy. Additionally, they develop proficiency and expertise in ultrasound and antenatal diagnosis, including procedural skills such as amniocentesis and chorionic villus sampling.

Highlights
- All three fellows selected a different NorthShore faculty for their research mentor, spanning clinical, translational and basic science topics.
- Our recently graduated fellow, Anna Gonzalez, MD, had her thesis “Elevated Neonatal IGF-I is Associated with Fetal Hypertrophic Cardiomyopathy” selected for oral presentation at the 2014 Society of Maternal-Fetal Medicine.
- Our current third-year fellows, Heather Straub, MD, and Ankit Shah, MD, both had oral presentations and numerous poster presentations at prestigious national and international meetings.
- Dr. Heather Straub was awarded the top scientific presentation at the Central Association of Obstetricians and Gynecologists for her research “Harnessing the Electronic Health Record for the Provision of Population-Based Preconception Care.”
- Dr. Straub also was selected to participate in the renowned year-long MacLean Center for Clinical Medical Ethics fellowship at the University of Chicago.
- All three of our fellows successfully passed their oral board examination to become diplomates of the American Board of Obstetrics and Gynecology.
- Dr. Anna Gonzalez successfully completed her fellowship training and has returned to her home state of Texas to join a private practice Maternal-Fetal Medicine group in Corpus Christi.
- Edom Yared, MD, recently began her first year of fellowship after completing her residency at Howard University.
- The MFM fellows had significant scholarly productivity. Collectively, they presented their research 10 times at national meetings and had three publications in leading journals in the specialty.


2013 Presentations and Abstracts


Goldfischer, E, Sand, P, Peters-Gee, J. (2012) Efficacy and safety of oxybutynin transdermal gel (84 mg or 56 mg/day) in patients with urgency and/or mixed urinary incontinence: Results of a randomized, double-blind, placebo-controlled study. Northeastern Section of the American Urological Association 64th Annual Meeting, Niagara Falls, Ontario.


Healy, P. (2013) Surviving and thriving after your baby is born. CVD Moms’ Conference, Swedish Covenant Hospital, Chicago, IL.

Healy, P. (2013) Postpartum depression. CVD Moms’ Conference, Swedish Covenant Hospital, Chicago, IL.


Kim, J. (2013) Continuous innovation in established perinatal depression screening programs. Postpartum Support International Annual Conference, Minneapolis, MN.


Sand, P. (2013) Pharmacotherapy for urinary incontinence: This is your bladder on drugs. Urogynecology and Reconstructive Pelvic Surgery 22nd Annual Conference, Chicago, IL.


2013 Grants and Research Support

**Ann Borders, MD, MSc, MPH**
- Principal Investigator: Evergreen Invitational Women’s Health Grant Initiative Award; Prentice Ambulatory Care Clinic Education Project: Partnership to Improve Breastfeeding Rates Using Peer Counselor Education and Support.
- Prentice Ambulatory Care Clinic Education Project: Creating a Life—Health Education for Low-Income Pregnant Women.
- Principal Investigator: NICHD 1R03HD67440-01 Chronic Stress in Pregnancy: Self-report, Biomarkers and Birth Outcomes.
- Awardee: Illinois Department of Healthcare and Family Services; provide high-risk obstetrics consultation, leadership and oversight for HFS initiatives to improve pregnancy outcomes for high-risk women, leading the CHIPRA WORKGROUP E, Perinatal Health Committee and serving as a consultant for the Illinois High-Risk Maternity/Interconception Care Quality Improvement Initiative.
- Co-Investigator: NIH-NICHD-NCS-07-11-E; HHSN267200700027C The National Children’s Study, Greater Chicago Study Center.
- Principal Investigator: National Children’s Study; Vanguard Study—Task Order 5: Stress and Cortisol Measurement for the National Children’s Study.
- Awardee: NorthShore University HealthSystem Research Institute Research Career Development Award.
- Awardee: NorthShore University HealthSystem Research Institute 2012 Auxiliary Research Scholar.

**Mara Dinsmoor, MD, MPH**
- Site Principal Investigator: Maternal Fetal Medicine Units Network; A randomized trial of fetal ECG ST segment and T wave analysis as an adjunct to electronic fetal heart rate monitoring (STAN). Site Principal Investigator: Maternal Fetal Medicine Units Network; Antenatal late preterm steroids (ALPS): A randomized placebo-controlled trial.
- Principal Investigator: Maternal Fetal Medicine Units Network; A randomized trial to prevent congenital CMV infection (CMV).
- Site Principal Investigator: Ariosa Diagnostics: Non-invasive Examination of Trisomy; Multicenter study of aneuploidy screening comparing cell free fetal DNA to current first trimester screening.
- Site Principal Investigator: Maternal Fetal Medicine Units Network; A Randomized Trial of Thyroxine Therapy for Subclinical Hypothyroidism or Hypothyroxinemia Diagnosed During Pregnancy (TSH).

**Adam Gafni-Kane, MD**
- Principal Investigator: NorthShore University HealthSystem Pilot Grant, Bladder perfusion and abdomino-pelvic muscle activity as a source of pain in Interstitial Cystitis/Bladder Pain Syndrome: a pilot study.
Kevin Hellman, PhD
• Principal Investigator: Novel Approaches to Investigation of Menstrual Pain.

Emmet Hirsch, MD
• Principal Investigator: National Institute of Child Health and Human Development (1R01 HD056118) Toll-like receptor signaling in the pathogenesis and prevention of prematurity.
• Principal Investigator: The Satter Foundation Fund in Perinatal Research. Toward the prevention of preterm birth.
• Mentor for K23 project: Eunice Kennedy Shriver National Institute of Child Health and Human Development (K23 HD065844-01). Bacterial Vaginosis: Vitamin D Links Mucosal Immunity and Patient Risk.
• Co-Investigator: Eunice Kennedy Shriver National Institute of Child Health and Human Development (1R21 HD066471—subcontract). Epigenome-wide Association Study of Preterm Birth.

Jean Hurteau, MD
• Principal Investigator: ChemoFx Observational Study: A Non-Interventional, Longitudinal, Multi-Center Initiative Examining Outcomes Associated with the Use of the ChemoFx Assay in Solid Tumor Malignancies.
• Principal Investigator: A Phase 3, Randomized, Double-Blind Trial of Pegylated Liposomal Doxorubicin (PLD) plus AMG 386 or Placebo in Women With Recurrent Partially Platinum Sensitive or Resistant Epithelial Ovarian, Primary Peritoneal, or Fallopian Tube Cancer, Protocol 20060517.

Jo Kim, PhD
• Awardee: North Suburban Healthcare Foundation, Expanding the Safety Net for Mothers and Families three-year program grant award.
• Principal Investigator: State of Illinois Department of Human Services, NorthShore Hotline Community Services Agreement.
• Principal Investigator: The Satter Foundation Fund in Perinatal Research, Identifying and Helping Women and Families At Risk for Perinatal Mood Disorders.

Jing Lu, PhD
• Principal Investigator: NorthShore University HealthSystem Research Institute Pilot Grant, the role of membrane progesterone receptor-alpha in infection-induced preterm labor (EH13-113).

Gustavo Rodriguez, MD
• Site Principal Investigator: Gynecological Cancer Translational Research Center of Excellence (GYNE-COE) (W81XWH-11-2-0131).
• Principal Investigator: Gynecological Cancer Research, The Bears Care Fund.
• Principal Investigator: Protocol GOG-0214: Phase II Double-Blind Randomized Trial Evaluating the Biologic Effect of Levonorgestrel on the Ovarian Epithelium in Women at High Risk for Ovarian Cancer (IND #79,6210).

Peter Sand, MD
• Principal Investigator: BOTOX® for the Treatment of Urinary Incontinence due to Neurogenic Detrusor Overactivity in Patients with Multiple Sclerosis, Protocol 191622-117. Sponsor: Allergan.
• Principal Investigator: Postoperative Pain, and Perceptions of Recuperation, After Suture-Based vs. Mesh-Based Sacrospinous Suspension. Sponsor: Boston Scientific.
• Principal Investigator: A Multicenter, Long-term Follow-up Study of the Safety and Efficacy of BOTOX® (Botulinum toxin Type A) Purified Neurotoxin Complex in Patients with Idiopathic Overactive Bladder with Urinary Incontinence, Protocol 191622-096 Sponsor: Allergan.
• Principal Investigator: Prospective Trial to Evaluate Mesh Augmented Sacrospinous Hysteropexy for Uterovaginal Prolapse. Sponsor: Boston Scientific.
• Principal Investigator: A Multicenter, Long-Term Follow-Up Study of the Safety and Efficacy of BOTOX® (Botulinum Toxin Type A) Purified Neurotoxin Complex in Patients with Urinary Incontinence Due to Neurogenic Detrusor Overactivity, Protocol 191622-094. Sponsor: Allergan.
• Principal Investigator: A Multi-Centre, Double-Blind, Randomized Trial Investigating the Efficacy and Safety of a Combination Therapy, Desmopressin and Tolterodine, for Treatment of Overactive Bladder with Nocturia in Women. Sponsor: Ferring Pharmaceuticals.

Frank Tu, MD, MPH
• Principal Investigator: K23 Mentored Career Development Award NICHD Novel pelvic floor pain measures to enhance female pelvic pain evaluation.
• Co-Investigator: U01 Multidisciplinary Approach to Pelvic Pain NIDDK Interactive Mechanisms of Pelvic Pain.
• Site Principal Investigator: AbbVie M12-671: A Randomized, Double-Blind, Placebo-Controlled Study to Evaluate the Safety and Efficacy of Elagolix in Subjects with Moderate to Severe Endometriosis-Associated Pain.
The Department realized important growth in new members in 2013. Each is playing a critical role in realizing our goals of outstanding clinical care, leading academics and recognized research.

**Diana Atashroo, MD.** received her medical degree from University of Missouri-Kansas City and completed her residency in Obstetrics and Gynecology at Baystate Medical Center and her AAGL Minimally Invasive Gynecologic Surgery fellowship at St. Joseph’s Hospital and Medical Center in Arizona. She is currently in practice in the NorthShore Medical Group—Gynecologic Pain and Minimally Invasive Surgery Division with Drs. Sangeeta Senapati and Frank Tu.

**Judith Cothran, MD.** received her medical degree from Georgetown University School of Medicine and completed her residency in Obstetrics and Gynecology at University of Virginia Health Sciences Center. She is currently in private practice.

**Elena Diaz, MD.** received her medical degree from University of Minnesota Medical School and completed her residency in Obstetrics and Gynecology at University of Texas Southwestern Medical Center at Dallas—Parkland Memorial Hospital and her Gynecologic Oncology fellowship at University of California Los Angeles/Cedars-Sinai Medical Center. She is currently in practice in the NorthShore Medical Group—Gynecologic Oncology with Drs. Jean Hurteau, Carolyn Kirschner and Gus Rodriguez.

**Terri Febraro, MD.** received her medical degree from Albert Einstein College of Medicine of Yeshiva University and completed her residency at Women & Infant’s Hospital, Brown University. She is pursuing Gynecologic Oncology fellowship training in the University of Chicago/NorthShore University HealthSystem Division of Gynecologic Oncology program.

**Tara Hood, DO.** received her medical degree from Philadelphia College of Osteopathic Medicine and completed her residency in Obstetrics and Gynecology at Lankenau Hospital. She is currently in practice in the NorthShore Medical Group with Drs. Rebecca Jacobson, Leslie Oshin and David Schewitz.

**Julia Kane, MA.** received her Master of Arts in Social Sciences from University of Chicago. She is serving as Research Coordinator in the Division of Gynecological Pain and Minimally Invasive Surgery.

**Elizabeth Marsh, MD.** received her medical degree from Rush University and completed her residency in Obstetrics and Gynecology at University of Chicago Medical Center. She is currently in practice in the NorthShore Medical Group with Drs. Suzanne Ashby, Catherine Dillon, David Shaw and Lawrence Yeager.

**Karen Mass, MD.** received her degree from University of Illinois at Chicago and completed her residency in Obstetrics and Gynecology at University of Michigan Hospital. She is currently in private practice at Women’s Specialty Care.

**Paulina Osinska, MPH.** received her Master of Public Health degree from University of Illinois at Chicago. She is serving as Research Coordinator in the Division of Maternal-Fetal Medicine.

**Katie Peterson, CNM, MS.** received her Master of Science in Nursing at University of Illinois at Chicago. She is currently in practice at Midwest Center for Women’s Healthcare with Drs. William Banzhaf, Carol Ellman, Elizabeth Forbes, Amy Henriott, Karyn Herndon, Jill Hoprasart, Jeremy Miller, Ronald Miller, Miriah Plawer and Certified Nurse Midwife Linda Given Welch.

**Miriah Plawer, MD.** received her medical degree from University of Illinois College of Medicine and completed her residency in Obstetrics and Gynecology at McGaw Medical Center at Northwestern University. She is currently in practice at Midwest Center for Women’s Healthcare with Drs. William Banzhaf, Carol Ellman, Elizabeth Forbes, Amy Henriott, Karyn Herndon, Jill Hoprasart, Jeremy Miller and Ronald Miller and Certified Nurse Midwives Linda Given Welch and Katie Peterson.

**Sameen Qadir, MPH.** received her Master of Public Health degree from Columbia University—Mailman School of Public Health. She is serving as Research Coordinator in the Division of Maternal-Fetal Medicine.

**Prerna Suri, MD.** received her medical degree from Wayne State University School of Medicine and completed her residency in Obstetrics and Gynecology from Ohio State University/Mount Carmel Health System. She is currently in practice in the NorthShore Medical Group with Drs. A. Michael Drachler, Emmet Hirsch, B. Michael Nagel, Jr., Fabio Ortega, Debra Schlossberg, Charla Simon and Kerry Swenson.

**Alexis Tran, DO.** received her medical degree from Western University of Health Sciences College of Osteopathic Medicine of the Pacific and completed her residency in Obstetrics and Gynecology at Albany Medical Center. She is pursuing Urogynecologic fellowship training in the NorthShore Division of Urogynecology and Reconstructive Surgery.

**Courtney Wilms, RN, BSN.** received her Bachelor of Science in Nursing from University of Cincinnati. She is serving as Research Nurse in the Department of Obstetrics and Gynecology.

**Edom Yared, MD.** received her medical degree from Howard University College of Medicine and completed her residency in Obstetrics and Gynecology at Howard University Hospital. She is pursuing fellowship training in the NorthShore University HealthSystem/University of Chicago Maternal-Fetal Medicine program.
Service to the Department Committees

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Lawrence Yeager, MD

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1 Chair
2 Co-Chair
3 Anesthesiology
4 Risk Management
5 Perioperative Services
6 Pathology
7 Family Medicine
8 Pharmacy
9 Quality Improvement
10 Neonatology
11 Infection Control
2013 Staff Directory

To refer a patient or for more information about our specialists, please call (847) 570-5020 or visit northshore.org/findadoctor

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