

LEADING OUR LEARNERS: THE 2023-2024 CHIEF RESIDENTS

This summer we welcome our new chief residents, who just completed their third postgraduate year in our internal medicine residency program. This academic year, these outstanding young physicians will help mentor, support, and teach the 180 interns and residents who rotate through the Department of Medicine at ZSFG.

This year's chief residents are Brittany Abel, MD, for ambulatory care, and Marcela Zhou Huang, MD, MPH, and Jack McGregor, MD, for inpatient care. Each brings diverse life experiences, a passion for taking care of vulnerable populations, and a genuine love of teaching.

Dr. Marcela Zhou Huang: Transcending Multicultural Borders

Born in the Mexican border town of Mexicali to Chinese immigrants, Marcela Zhou Huang, MD,

MPH, grew up speaking Chinese,

Spanish, and English. Her parents

worked long hours

in restaurant jobs

to send Dr. Zhou

Huang and her sis-

ter to private school

in Mexico. Later, the

girls lived part-



Marcela Zhou Huang, MD

time with their uncle so they could attend a better school just over the border in Calexico, Calif.

In 2007, her sister and father were detained at the border, and their visas were revoked. Dr. Zhou Huang was at home in Mexico that day, so her visa was still valid. That night her parents gave her a



Chief Residents Brittany Abel, MD, Marcela Zhou-Huang, MD, MPH, Jack McGregor, MD, (l to r) and ZSFG Site Director, Rebecca Brusca, MD, MPH (Second from the right)

stark choice: stay in Mexico, or go back to the U.S. to finish high school. If she returned, she would need to stay in the States. At age 15, she decided to return to the U.S. "I have not seen my father or sister for more than half my life," she said.

She finished high school in Calexico, overstaying her visa and becoming an undocumented immigrant. Soon after graduation, she went to a clinic after a neighborhood dog bit her. "Initially they told me, 'We're going to have to report this to the police,'" recalled Dr. Zhou Huang. With her Asian features she had learned how to pass as Chinese American, but the clinic receptionist saw the fear in her eyes. "The woman told me, 'Tell the doctors that you got bitten by your uncle's dog but ask the owners if their dog got its rabies shots," she said. "She wanted me to get the care I needed, but also wanted to make sure I was safe. Now as a doctor, I understand when patients don't want to share things they fear could put them in danger."

Dr. Zhou Huang attended community college for one year, then transferred to UC San Diego, where she majored in biology. "I didn't think I would be a doctor because I wasn't documented and wasn't sure I could go to medical school, but thought I could work in a lab," she said.

After graduation, she enrolled in the newly created Deferred Action for Childhood Arrivals (DACA) program. Established in 2012 by President Barack Obama, DACA allowed her to obtain work permits and other essential protections. In addition to working 50 to 80 hours a week as a clinical research coordinator at UC San Diego, she volunteered as a medical interpreter at the UC San Diego Student-Run Free Clinic Project, which served unhoused and uninsured patients.

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"It was a pop-up clinic at a church, serving free meals before everyone checked in for clinic at 5 pm," said Dr. Zhou Huang. "Medical students saw patients, who might wait hours while their free medications were packed up. But meanwhile they could see the dentist, social worker, subspecialty doctors, or acupuncturist, or meet with law students for legal advice. Patients were like family, and many were undocumented from Latin America, like me. The preceptors served patiently with so much love, and inspired me to pursue medicine. During those three years in clinic, I really found medicine to be a passion rather than just a career."

She earned her medical degree from UCLA and a master of public health degree in health policy from the Harvard T.H. Chan School of Public Health. Dr. Zhou Huang then chose the SFPC internal medicine residency program at UCSF. "On my interview day I got off the bus at San Francisco General and saw a sign that said, 'Welcome!' in English, Spanish, and Chinese," she said. "I was like, 'Wow!' It showed how multicultural San Francisco and the patient population was.... For a long time, I felt like I wasn't Chinese enough, I wasn't Mexican enough, and I definitely wasn't American enough. Being in different cultures and countries, you have a spectrum of identities. Over time I've come to embrace that blend, and that's also what drew me to UCSF and the General."

She brings that wealth of cultural knowledge to patient care. As an intern, she met a young Guatemalan patient in the ICU who had a rare, mysterious illness. Her husband declined treatment because the side effects included possible death. "After our goals of care conversation, I ran to him in the lobby and sat with him," said Dr. Zhou Huang. "He said his family in Guatemala thought he was preventing them from talking with her. They couldn't understand how there was still no definitive diagnosis at one of the best hospitals in the country. He felt guilty for making her go to the emergency room, so he couldn't be the one to make a decision to give her medication that could potentially kill her."

Later the husband agonized about whether to transition his wife to comfort care, but decided to keep fighting until she eventually died in the ICU. "He declined an autopsy, saying, 'It was worth fighting for her when she was alive, but let her rest in peace now," said Dr. Zhou Huang. "I realized that if a patient dies, I will be very upset, but I don't have to live with that grief the same way families do. Even though he knew she was suffering, he had hope for her and carried the weight of the 20 family members in Guatemala. In their culture, he needed to know that he advocated for her. There were a lot of factors that I carry with me to this day."

Dr. Zhou Huang plans to apply for a fellowship in critical care medicine. "I am drawn to the acuity, speed, and complexity of medicine when patients come in so sick," she said. "I appreciate creating intense bonds with patients and their families when they are so vulnerable."

She looks forward to sharing her learning from residency as one of two Inpatient Chief Residents at ZSFG. "I was a struggling learner for many years, which makes me want to help others," said Dr. Zhou Huang. "I am a kinesthetic learner, so I started thriving once I was able to attach clinical experiences to [book] learning. Every learner is different, and I want to figure out where people are at and supplement that."

Outside the hospital, Dr. Zhou Huang loves baking and cooking, hosting dinner parties for friends, being in nature, and spending time with her cats, Lola and Shisha.

Dr. Jack McGregor: The Patient Is Always at the Center

Jack McGregor, MD, loves learning languages. Growing up in the Los Angeles suburb of Torrance, most of his friends were either immigrants or children of immigrants. "I learned that I prefer not speaking English," he said. His mother is Mexican American and a Spanish teacher, so he heard two languages in the house; he later also studied Japanese.

"For all my patients, I learn words like 'hello,' 'thank you,' and some phrase of encouragement," said Dr. McGregor, who has picked up these words in about forty languages.

He originally planned to become a marine biologist. "I don't actually like being in the ocean, so that's a contraindication," said Dr. McGregor.

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"I pivoted to medicine." During three summers in college, he participated in medical missions to Bombo, Uganda. "I met a lot of really cool doctors,



and learned that I liked collaborative global health and working with patients," he said.

The weeklong medical mission brings together about 20 American doctors and 55 Ugandan doctors and medical

Jack McGregor, MD

students who serve about 1,100 patients a day in a rural area. "Because most of the staff are Ugandan, they enroll patients into their patient panels, so there's follow-up," said Dr. McGregor. He learned enough Luganda and Kiswahili – two languages spoken in the region – to conduct patient intake without a translator. He serves on the mission's executive board, and will participate in future missions.

Dr. McGregor earned his bachelor's degree in biological sciences from Stanford University and his medical degree from the David Geffen School of Medicine at UCLA. He has always had a passion for education, coordinating programs for visiting students from Asia during college and medical school. He also completed the clinical education pathway during medical school and worked as an anatomy tutor, leading small groups focused on problem-based learning.

In addition, he completed a monthlong chaplain training program focused on whole-person care. "It's a skill that helps across any type of religious beliefs," said Dr. McGregor. "I learned to start with broad, open-ended questions such as 'What's important to you?' and 'How are you coping with your illness?' It's been very helpful, particularly with end-of-life care."

Dr. McGregor chose UCSF for his internal medicine residency, and completed the Health Professions Education pathway within the categorical residency. "My co-residents have been amazing," he said. "They are the smartest and most dedicated people. I regularly see them running across the street to buy glasses or a birthday balloon for a pa-

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Celebrating our departing <u>FY23 Chief Residents</u>. Clockwise from the left: Rebecca Berman, Neil Powe, <u>Veronica Manzo, Cati Crawford</u>, Jeff Critchfield, <u>Jessie Holtzman</u>, Sumant Ranji, Rebeccah Brusca, David Chia, Lisa Winston, Sarah Goglin, Lisa Ochoa-Frongia, and Beth Harleman

tient - above and beyond anything I'd seen before."

One highlight of residency was caring for a hospitalized patient who only spoke Spanish. At their first meeting, Dr. McGregor shared the news that the patient's biopsy was positive for stomach cancer. "I spent 50 minutes talking him and his daughter through the diagnosis, then enrolled him in my primary care patient panel," he said. "Unfortunately, his cancer was untreatable. Over the next year he cycled through hospitalizations, eventually went on in-hospital hospice, and ended up passing away. It was really sad, but a true honor to have been there from Day One."

As one of the two Inpatient Chief Residents at ZSFG, along with Dr. Zhou Huang, Dr. McGregor will advocate for other residents and enhance his education skills. "I'll get to facilitate morning reports and help run intern didactics, and there's a lot of good skill-building in an environment where people can regularly give you feedback," he said. He also aspires to provide the best snacks out of all three hospital sites, from dried fruit for the health-conscious to dark chocolate peanut butter cups.

He is especially excited to develop a night float curriculum and well-being program to support residents in that stressful role. Its duties include triaging new admissions from the Emergency Department, which requires balancing many competing priorities under time pressure. "I actually really enjoyed that role, because I like making those higher-level decisions," said Dr. McGregor. "It can be a valuable learning experience, preparing people to become a hospitalist attending. If we give them the tools to succeed, residents might feel more empowered."

This year Dr. McGregor will also apply for infectious diseases fellowships. "I was an ecology major in college, and enjoy thinking about the environment, vectors, and complex life cycles," he said. "Many infectious diseases are treatable, so you get to watch someone get better. My favorite chief concern is fever in a returning traveler, because of the sleuthing that's required. I think my niche will be tuberculosis, because I like having a hand in every organ system. I'm also passionate about immigrant health, and a lot of my patients come in with latent or occasionally even active tuberculosis."

He plans to pursue a career in academic medicine, continuing to train residents and pursuing ways to design curriculum and support resident well-being. "I know for a fact I want to stay at a county site," said Dr. McGregor. "This patient population is super patient and grateful for their care, and often needs people to advocate for them.... The General is my favorite hospital, because we do so

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much with so little. The staff here is creative in their solution to things. Our nurses, case managers, and social workers get things done for our patients in a way that may be a little unorthodox, but the patient is always at the center. That fits with my ethos in medicine."

Beyond medicine, Dr. McGregor enjoys cooking, golf, watching reality television, and playing video games.

Dr. Brittany Abel: The Joy in Building a Community

Brittany Abel, MD, grew up in a small town in New York's Westchester County, where many of her friends were Latinx immigrants. She also watched a close family member navigate many health issues, including Type 1 diabetes and heart disease.

She went to college at Cornell University, planning to become a veterinarian. "I loved working in the barns, taking care of pigs, donkeys, and sheep," said Dr. Abel. "But when I went home after freshman year, I realized how lucky my family

was to have excellent medical care. Many of my undocumented friends and their families often deferred care, and their health issues got more serious. When I recognized inequity within my own community, I decided to



munity, I decided to Brittany Abel, MD switch from animal science to premed."

While earning her bachelor's degree in biological science, she spent a summer in Chile shadowing health professionals and learning medical Spanish. After graduation, Dr. Abel served as an AmeriCorps volunteer, working in several federally qualified health centers in the South Bronx, Harlem, and the Lower East Side. She developed health literacy materials for patients, focused on nutrition, obesity, and insurance terminology.

Dr. Abel earned her medical degree from Weill Cornell Medicine in New York. During medical

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school, she worked with endocrinologist Alpana Shukla, MD, MRCP, helping conduct a pilot study at the Comprehensive Weight Control Center to investigate whether encouraging prediabetic patients to eat foods rich in fiber and protein before starchy foods like rice had health effects.

She also worked with palliative care specialist Milagros Silva, MD, interviewing Chinese and Spanish medical interpreters about ways to improve end-of-life care for patients with limited English proficiency. Medical interpreters frequently act as cultural brokers, serving as a bridge between the medical team and patients and their families and explaining terms such as "palliative care," for which there is no direct translation in those languages. "Because interpreters said that it's so helpful to have a meeting [with the medical provider] to discuss the plan before meeting with a patient and their family, as a resident I tried to use that protocol," said Dr. Abel.

She was in her last year of medical school when the COVID pandemic hit. Like most medical students in New York City, Dr. Abel graduated a few months early to help with the COVID response. She worked with the Weill Cornell Department of Nephrology and Kidney Transplant to collect data on COVID-19 outcomes for transplant candidates and recipients.

Dr. Abel chose the ZSFG Primary Care Track of the UCSF Internal Medicine Residency Program (also known as SFPC) for residency. "At my interview, I absolutely fell in love with the General and SFPC," she said. "I wanted to do a primary care program that was mission-driven and cared deeply about vulnerable populations and immigrant communities. At UCSF, the whole institution - not just SFPC, but the categorical internal medicine program and other specialties - recognizes the importance of social determinants of health and minimizing inequities." Residency highlights included working at the San Quentin State Prison clinic, learning from staff and community members at Glide in the Tenderloin, and spending a month working with patients from Navajo Nation at Gallup Indian Medical Center in New Mexico.

One of her biggest learnings was the importance of earning respect by listening to patients' priorities. "If someone comes in for back pain but they have really poorly controlled diabetes, I try to address the back pain," said Dr. Abel. "Then I say, 'What is your understanding of your diabetes?' so I can get their baseline knowledge and fill in any gaps.... I recognized very quickly that I'm not in charge. The most important thing is just getting patients to come back."

She remembers a powerful experience with a very stoic patient with limited English proficiency. "I couldn't sense any connection or emotion, and worried she wasn't going to come back," said Dr. Abel. "Then I saw her again in clinic, and she showed up with a bouquet of flowers! I said, 'I don't deserve this.' She said, 'You're the first doctor who has actually listened to me.' Getting that feedback was so validating. Now I'm not afraid to connect with patients on a deeper level. Certainly, there is a line – but recognizing that we care about each other, and I care not just about their health but them as people, has brought me so much joy."

Dr. Abel chose to help current residents experience that same joy by staying on as ZSFG Ambulatory Chief Resident where she will oversee resident learning in the Richard H. Fine People's Clinic. "I've benefitted so much from this community, and I wanted to help other trainees navigate the transition from med school to residency." She especially looks forward to organizing social gatherings for interns and residents. "Part of the challenge I had as an intern was moving across the country and not having a community," she said. "There weren't many opportunities to connect with my co-residents outside of work because of COVID. Now that we're starting to get back to real life, I want to help build that community for others. UCSF residents are incredible, humble, kind human beings, and we all benefit from spending more time with each other."

Ultimately, she plans to work in a primary care safety net setting, caring for immigrants, Latinx patients, and vulnerable populations, and continuing to teach and share her enthusiasm with trainees. Besides medicine, Dr. Abel is a talented singer, who performed in a cappella groups in college and medical school. These days she enjoys accompanying herself on the piano and singing Sara Bareilles, R&B, and pop songs in the car on her way home from work.

Elizabeth Chur Editors: Neil Powe, Laurae Pearson, Kevin Weil

SPOTLIGHT

Welcome to our new faculty!

Saate Shakil, MD - Cardiology

Morgan Philbin, PhD - Center for Vulnerable Populations Associate

Ilana Garcia-Grossman, MD - General Internal Medicine

Rebecca Abelman, MD - HIV, ID & Global Medicine

Ayesha Appa, MD - HIV, ID & Global Medicine

Lurit Bepo, MD - Hospital Medicine

Maxwell Birger, MD - Hospital Medicine

Veronica Manzo, MD - Hospital Medicine

Ran Catherine Xu, MD - Hospital Medicine

Stephanie Holm, MD, PhD, MPH - Occupational, Environmental, and Climate Medicine

Michael Lee, MD - Pulmonary & Critical Care Rahul Kumar, PhD - Pulmonary & Critical Care

Laura Plantinga, PhD – Rheumatology and Nephrology

This list comprises new hires as of June 30, 2022, who were not listed last year. There may be additional new hires after this document was created. If we missed a new hire in your division, please email <u>laurae.pearson@ucsf.edu</u>.

Welcome to our new executive analyst!

Abraham Nelson – We are delighted to announce Mr. Abraham Nelson as our new Executive Analyst supporting Dr. Neil Powe in Central Administration. Abraham received both his Bachelor of Science in Finance and Bachelor of Science in Decision Sciences degrees from San Francisco State University. While attending school, he was the recipient of the Willie L. Brown Jr. Fellowship and the Oubre Leadership Scholarship award. He comes to us from Google, where he was a Recruiting Coordinator, supporting Google Cloud and Global Business Organization Portfolios.



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