

Diversity Report

EXCELLENCE THROUGH DIVERSITY & INCLUSION



"Emphasizing opportunities for patient contact and education in radiology may attract more minorities."

- Sharon E. Byrd, MD, FACR

"Diversity is being invited to the party; inclusion is being asked to dance."

− Vernā Myers

CONTENTS

Excellence Through Diversity and Inclusion	3
Making It Official	4
Teaming Up with the AAMC	6
Spreading the Word	7
Diversity is Central to ACR's Mission	8
Making the Meeting	10
Embracing Diversity	11
Fostering the Future of Radiology	12
Collecting the Literature	16
Coming Together for Diversity	17
Leading the Way	18
Finding Barriers to Diversity	19
Mentoring the Next Generation	20
Focusing on Health Equity	21
Looking Forward	22
Leadership & Staff	23

QUESTIONS? COMMENTS?Contact us at email@acr.org | Visit acr.org





ACR DIVERSITY REPORT 2019:

Excellence Through Diversity & Inclusion

Katarzyna J. Macura, MD, PhD, FACR, Chair, Commission for Women and Diversity

Professor of Radiology, Urology, and Oncology at the Johns Hopkins University School of Medicine, Baltimore, Md.

Past President of the American Association for Women Radiologists (2005)

Past President of the Maryland Radiological Society (2013–2015) he ACR established the Commission for Women and Diversity in 2013 to address a lack of diversity in our radiological professions and to overcome barriers faced by women and underrepresented minorities (URMs). To secure a bright future for radiology, we need to attract the best talent and maintain a healthy and engaged workforce — while we create opportunities for all, regardless of age, gender, race, ethnicity, religion, nationality, sexual orientation, physical abilities, military status, socioeconomic status, life experiences, and perspectives. These attributes contribute to our collective creativity and strength as a profession.

At the ACR, which represents more than 30,000 radiology professionals, we are committed to developing policies and programs that address the shortage of women and URMs in our specialty. The ACR stated in its 2014 strategic plan a goal to "increase diversity and inclusion in the radiological professions." To this end, the ACR has dedicated attention and resources toward this goal, launching the initiatives you'll read about in this report.

To advance diversity and inclusion in radiology, our Commission structured its activities around the following areas: advocacy, communication and visibility, education, mentoring, and research. With participation by a large group of enthusiastic volunteers, we have embarked on projects that move the needle forward in recognizing existing barriers and building strategies to overcome them.

Although we have made some headway in addressing underrepresentation of women and other

minorities in our specialty, there remains a lot of work ahead of us. Radiology practices need to become more welcoming to diverse workforces and recruit top talent while mitigating unconscious and conscious biases. We need to create just and equitable work environments with policies, productivity targets, and incentives that are transparent and non-discriminatory. We will benefit from allowing flexibility in the workplace, offering family-friendly leave policies to encourage work/life integration, and promoting well-being while addressing the causes of burnout.

"Diversity is value founded on

acceptance and

that each

respect, recognizing

individual is unique and contributes to the wealth of all."

Meanwhile, the benefits of a diverse specialty are not limited to physicians. Patients receive the best care in inclusive, diverse healthcare systems. We need to work toward diminishing healthcare disparities by studying and improving access to imaging for underserved populations. As we work on technological innovations, such as emerging Al tools, we need to consider potential biases and risks of creating faulty science. If we do not study representative patient populations, these new tools can simply amplify the disparities that already plague medicine.

In the ACR's commitment to radiology professionals and the patients they serve, diversity is key to its mission and core purpose: "to serve patients and society by empowering members to advance the practice, science, and professions of radiological care." I am most grateful to members of the Commission who dedicate their time and tireless efforts to achieving our vision of a profession that celebrates diversity and actively promotes inclusion at all levels of training, practice, and leadership.



THE COMMISSION IS FOUNDED

MAKING IT OFFICIAL

iversity and inclusion have long been recognized as important strategic tools that enable institutions and organizations to excel through enriched collaborations, innovation, and growth. Since 2013, the Commission for Women and Diversity has been committed to identifying barriers to a diverse physician workforce in radiology and radiation oncology, and to offering policy recommendations and programs to overcome these barriers in the future. Training, recruitment, retention, promotion, and leadership development of radiologists, radiation oncologists, and related professionals from underrepresented groups are important to the well-being of our profession. The vision of the Commission is to achieve a radiology profession that celebrates diversity and actively promotes inclusion at all levels of training, practice, and leadership.

MISSION

THE COMMISSION FOR WOMEN

AND DIVERSITY WILL EMBRACE AND

ADVANCE DIVERSITY AND INCLUSION

THROUGH EQUITY, ACCESS, AND

INNOVATION FOR THE BENEFIT OF OUR

PATIENTS, OUR PROFESSION, AND THE

AMERICAN COLLEGE OF RADIOLOGY.

GOALS

- To increase awareness and recognition of the value created by diversity, and make the radiological professions welcoming and inclusive for women and minorities underrepresented in medicine
- 2. To improve professional opportunities, participation, representation, and contribution of women and minorities to the radiological profession
- **3.** To improve organizational and institutional performance by leveraging diversity

VALUES

- We recognize the rights of all individuals to mutual respect, acceptance of others without biases based on differences of any kind.
- We respect, value, and celebrate the unique attributes, characteristics and perspectives that make each person who they are.
- We recognize that differences in age, race, gender, nationality, sexual orientation, gender identity, physical ability, and background bring richness to our work environments and help us better serve our patients to improve patient outcomes.
- We believe that attracting, developing, and retaining a base of members and leaders that reflect the diversity of our patients is essential to our success.
- We believe that communities have a right to be represented equitably and an obligation to contribute to the ranks of healthcare professionals that serve their needs.

THE THREE PILLARS OF THE COMMISSION FOR WOMEN AND DIVERSITY

The Commission recommends actions and policies to organizations and leaders in the radiological profession committed to improving diversity, representation, and inclusiveness. These recommendations and initiatives fall within three areas or pillars: advocacy and awareness, professional development support, and institutional performance improvement.



- Raise awareness about the status of women and underrepresented minorities (URMs) through resources such as review and position papers, web-based resources, and sustained membership communication and dialogue.
- Develop national standards for valuing professional stewardship activities that women and URMs are likely to perform so that the full range and quantity of their service activities are factored into decisions about promotion and leadership (e.g., women are more likely to volunteer to teach, URMs are more likely to serve in underrepresented communities).
- Develop metrics for monitoring and publicizing individual institutions' and practices' progress on professional diversity.
- Develop benchmarks for assessing the institutions' and practices' performance on diversity and inclusion.
- Implement a reward system to highlight the accomplishments of radiology and radiation oncology practices that successfully achieved the level of Diversity 3.0* and disseminate successes as models for diversification.
- * According to the Diversity 3.0 model, "Diversity and inclusion are integrated into the core workings of the institution and framed as integral for achieving excellence."

Nivet MA. Commentary: Diversity 3.0: a necessary systems upgrade. Acad Med. 2011;86(12):1487-9.



- Increase the visibility of accomplishments by women and URMs to
 ensure that their professional contributions receive recognition and open
 opportunities for advancement.
- Offer leadership positions to accomplished and able women and URMs.
- Create programs that directly engage and support women and URMs so that they can develop professionally.
- Develop incentive programs to attract minorities into radiology and radiation oncology as a medical career
- Improve the recruitment and retention of women and URMs.
- Expand initiatives to include diverse, excluded groups such as the LGBT community, veterans, disabled individuals, and the socioeconomically disadvantaged



- Develop leaders that value diversity and who mandate cultural competence and a commitment to diversity.
- Require diverse search committees for new hires.
- Partner with leadership to ensure implementation of diversity and inclusion practices, while reducing conscious and unconscious biases.
- Develop and maintain a system of accountability and responsibility that involves departmental or practice members to ensure diversity and inclusion.
- Improve the work climate for women and URMs by implementing initiatives such as flexible work schedules, strengthening policies that support family leave and career-life balance, and embracing diversity among team members.
- Encourage institutions and practices to implement mentorship programs that specifically address barriers and inequities affecting women and URMs.
- Implement regular and transparent salary reviews; verify equal pay for equal work.
- Require that a five-year review of the department or practice includes assessment of diversity and inclusion.

THE COMMISSION COLLABORATES WITH THE AAMC

TEAMING UP WITH THE AAMC

The Commission collaborated with the Association of American Medical Colleges to approach diversity from a strategic perspective.

ffecting cultural change at the specialty level entails more than good intentions. To chart a course for success, in 2014 the Commission started collaboration with the Association of American Medical Colleges (AAMC) to launch its strategic plan shortly after its founding. Laura Castillo-Page, PhD, AAMC senior director of diversity policy and programs, facilitated the planning session. Leadership left with a specific, goal-driven strategic plan to guide the new Commission's efforts.

At ACR 2016, the Commission again partnered with the AAMC to host an interactive session featuring Castillo-Page. The workshop, entitled "Enhancing Workplace Engagement"

and Other Outcomes Through Diversity and Inclusion," provided participants with an understanding of the important role diversity and inclusion plays in the workplace. Attendees left with concrete strategies to create diverse and inclusive environments that attract top talent, yield greater productivity, increase staff engagement, and improve patient outcomes.

The following year, at ACR 2017, Castillo-Page presented the session "Understanding Unconscious Bias in the Health Professions." Participants learned how to spot unconscious bias in clinical decision-making and reviewed strategies to mitigate the effects and change patterns. Castillo-Page encouraged session attendees to notice any feelings of discomfort in themselves as she walked through examples of unconscious bias, pointing out, "These often conflict with our conscious attitudes, behaviors, and intentions."



PARTICIPANTS IN THE STRATEGIC PLANNING MEETING — MARCH 2014

Top row, left to right: Jan Cox, PHR, SHRM-CP, ACR's senior director of operations, Karla A. Sepulveda, MD, Raymond B. Wynn, MD, FACR, Alexander M. Norbash, MD, FACR, Curtiland Deville, Jr., MD, Johnson B. Lightfoote, MD, MBA, FACR, Yoshimi Anzai, MD, MPH, Jacqueline A. Bello, MD, FACR, Hang Mulhare, ACR's vice president of human resources

Bottom row, left to right: Ruth C. Carlos, MD, MS, FACR, Marta E. Heilbrun, MD, MS, Katarzyna J. Macura, MD, PhD, FACR, Laura Castilllo-Page, PhD, AAMC senior director of diversity policy and programs, Loralie D. Ma, MD, PhD, FACR, and Becky Haines, MSM, CPXP, vice president, ACR Press & Community Empowerment

THE COMMISSION PUBLISHES ITS FIRST PAPERS

SPREADING THE WORD

One of the Commission's overarching goals is to share concrete information about diversity and inclusion in radiology. To that end, research and commentary has appeared in the $JACR^{**}$ since shortly after the Commission launched. The first two articles were published in 2014 and explored the current state of the specialty and why diversity, inclusion, and representation matter in the first place.

PART 1: WHY THESE MATTER

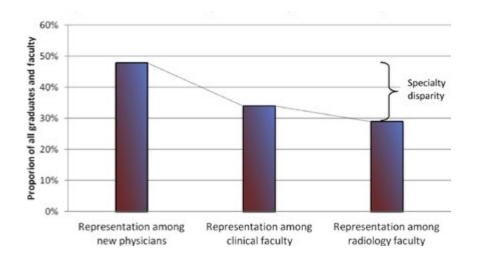
"Commitment to diversity does not mean eliminating differences among individuals or groups, or pretending that they do not exist; rather, a true commitment to diversity means respecting and even celebrating such differences."

"Training, recruitment, retention, promotion, and leadership development of radiologists from underrepresented groups are important to the well-being of our profession and the health of our patients. The ACR Commission for Women and General Diversity is committed to identifying barriers to a diverse physician workforce in RRO, and to offering policy recommendations to overcome these barriers in the future."

PART 2: CHALLENGES AND RECOMMENDATIONS

"The future of radiology will be enhanced by increasing diversity and representation in the professional workforce, which will allow us to address varied needs of diverse patient populations, and to mitigate disparities in healthcare access, delivery, and outcomes."

"By leveraging diverse backgrounds, experiences, and skills of radiologists and radiation oncologists, we will create new, effective ways to not only educate our trainees, medical colleagues, and patients but also improve delivery of healthcare and our service to society."



Women accounted for 48% of medical school graduates in 2012¹, for 34% of all academic clinical faculty MDs, and for 29% of radiology faculty.^{2,3} Women represent 51% of the U.S. population.⁴

^{1.} Association of American Medical Colleges. FACTS: applicants, matriculants, enrollment, graduates, MD/PhD, and residency applicants data. Available at aamc.com/data/facts/. Accessed Nov. 14, 2015.

 $^{2.\} Brotherton\ SE,\ Etzel\ SI.\ Graduate\ medical\ education,\ 2012–2013.\ \textit{JAMA}.\ 2013; 310:2328-46.$

Association of American Medical Colleges. U.S. Medical School Full-time Faculty Distribution by Rank and Gender, 2012 Washington, DC: Association of American Medical Colleges; 2013. Available at bit.ly/AAMC_Fig2. Accessed Nov. 11, 2013.

^{4.} US Census Bureau. 2012 Population estimates.



RESOLUTION 14 IS INTRODUCED

DIVERSITY IS CENTRAL TO ACR'S MISSION

At the 2015 ACR Annual Meeting, the Council voted to confirm Resolution 14. Far from an empty gesture, the resolution affirmed the ACR's commitment to diversity and positioned it as a priority for the organization going forward.

The American College of Radiology affirms that diversity of our membership, and of the radiological professions in general, strengthens our organization and enhances our ability to achieve our mission. The American College of Radiology affirms that diversity of our membership is a central objective and that opportunities to continually measure and assess our membership diversity should be promoted; adopted 2015 (Res. 14).

In 2012, on the recommendation of Paul H. Ellenbogen, MD, FACR (then chair of the ACR BOC), the BOC approved the creation of a new Commission for Women and Diversity.

Today almost every company, organization and educational entity promotes diversity. Many studies have demonstrated diversity resulting in greater productivity and happier people. ACR was an early leader in this respect.

Looking at that time at our own members, our CSC and BOC, as well as medical students and residents involved with radiology and most importantly our patients, it was obvious that we needed to become a more diverse organization to better serve our community, our patients and ourselves.

— Paul H. Ellenbogen, MD, FACR

MEET THE COMMISSION

JOHNSON B. LIGHTFOOTE, MD, FACR



Neuroradiologist at Pomona Valley Hospital Medical Center in California, Chair of the Committee on Diversity & Inclusion

I populated the Committee on Diversity and Inclusion with an energetic, enthusiastic, experienced, and diverse group of ACR physicians in 2013. I supervised and published our Commission's founding position paper in the JACR® in 2014. I also ensured that

diversity and inclusion were incorporated into the ACR strategic plan in 2014 and 2018. I initiated, in collaboration with Dr. Macura and Bruce J. Hillman, MD, FACR, a bimonthly column in JACR entitled "Diversity Matters" — presenting a diverse collection of authors and topics for JACR's readership. Finally, I initiated the ACR Nth Dimensions $^{\text{TM}}$ Pipeline Initiative for the Enrichment of Radiology (PIER) program and supported the integration of PIER into the regular operating budget of ACR. I hope that fellow radiologists, radiation oncologists, medical physicists, and aspiring residents will have a better appreciation of how diversity improves our work product, research, and patient care.



DIVERSITY BENCHMARKED WITHIN ACR

DIVERSITY SNAPSHOT

In December 2015, then ACR BOC Chair Bibb Allen Jr., MD, FACR, requested that all members add demographic information to their profiles on ACR's website. As part of the ACR strategic plan, the BOC established several initiatives to increase both diversity and inclusion in the radiologic professions. In addition to demographic attributes, the ACR added a few fields to the personal information section of the website to include questions on race, ethnicity, primary languages and country of birth. Allen and his successors have continued to encourage members to update their personal information online.

Who are the professionals that make up the fabric of the College?

Are we a diverse group?

Do we accurately represent the field?

The ACR Commission for Women and Diversity and the Commission on Membership and Communications are working to answer these questions.

How can you help?

Please take some time to complete the diversity and practice information on your My ACR profile on the My ACR tab at acr.org.

This <u>confidential</u> information will assist us in developing appropriate programs

and services for our members.

INSTRUCTIONS FOR UPDATING YOUR PROFILE

Log in to

My ACR

2

Click "Profile" on the left-side menu 3

Select "Edit" below the "Personal Information" section 4

Complete the new demographic fields found below your personal information For login assistance, please call ACR Customer Login Services at 1-800-347-7748, or email customerlogin@acr.org.



DIVERSITY FORUM HELD AT ACR ANNUAL MEETING

MAKING THE MEETING

The ACR 2018 Diversity Forum featured a panel of male academic and private practice radiology leaders, who provided insight on how they could mentor, support, and advance women radiologists at all career levels to achieve gender parity. During the session, attendees renewed their commitment to the following:

 Encouraging colleagues to speak up, speak out, and share best practices

- Requiring search committees to consider every aspect of diversity when making hiring decisions
- Ensuring that panels at meetings and conferences are made up of at least 50 percent women
- Working with medical schools to increase recruitment and retention of women
- Supporting women with parental leave, lactation rooms, and flexible work arrangements



Curtiland Deville, Jr., MD, at the Inaugural Diversity Forum in 2016



The ACR 2018 Diversity Forum, titled "Women in Radiology — Why Men Should Care," addressed the importance and value of having women in the radiology workforce. At ACR 2018, members also built upon a tradition that began at ACR 2017 with #HeForShe.

Attendees shared on social media examples of how men and women in the specialty are working together. Learn more about the College's efforts to promote gender equity at acr.org/heforshe.

MEET THE COMMISSION

JULIA R. FIELDING, MD, FACR



Professor of radiology at UT Southwestern Medical Center and chief of its abdominal imaging division

As founding chair of the Committee for Women, one of my initial tasks was to negotiate with the ACR to strategically align its management strategy with that of the American Association for Women Radiologists (AAWR). Meeting with members of

both communities was a great way to educate all members of the ACR about the value of gender diversity. Similarly, members of the AAWR were able to transfer successful programs to the entirety of the ACR membership. I learned to work with a diverse group of people and listen to their concerns. At home, I used these techniques to work with successful colleagues to promote women's careers and inspire new leaders. To women who have benefitted from a colleague's actions supporting your career—remember to pay it forward. There is no greater joy than witnessing a colleague's success.

DIVERSITY SPECIAL SECTION PUBLISHED

EMBRACING DIVERSITY

What does it mean to commit to diversity?

We've long known that radiology is one of the least diverse specialties, lagging behind much of medicine when it comes to participation by women and URMs. But knowing this is not the same as doing something about it. The ACR and the Commission are committed to policies and programs that address the shortage of women and URMs in the radiological profession.

In September 2017, the *Bulletin* published its Embracing Diversity special section, which focused on taking steps to attract and welcome a more diverse set of physicians into the radiology specialty. The special section supported ACR's strategic objective of improving diversity and inclusion to foster meaningful member engagement and included an educational infographic on the pay gap between male and female radiologists who work full-time.



"If in a radiology practice, all of the senior staff are straight white men, it's going to be harder for women, younger radiologists, people of color, or members of the LGBTQ community to feel welcome as part of the practice."

> — JACR® Associate Editor Andrea Borondy Kitts, MS, MPH, a lung cancer and patient advocate, consultant, and patient outreach and research specialist at Lahey Hospital and Medical Center

MEET THE COMMISSION

ANDREA A. BIRCH, MD



Associate professor of clinical radiology and radiological sciences at Vanderbilt University School of Medicine

During my tenure on the Commission for Women and Diversity, I have focused on engaging URM students, hoping to spark their interests in radiology and IR early, to provide and/or match them with the resources they need to

successfully matriculate through our residency programs, and to help them secure positions thereafter. As our society

becomes more diverse in every way, our ability as radiologists to provide exemplary patient care will depend more and more on the diversity of our workforce and how well we bridge ethnic and cultural divides.

As a teenager growing up in a city where healthcare disparities were not only profound, but clearly evident even to laymen, my first exposure to radiology came through an introduction to Sandra Bates, MD, a black female radiologist. She assisted me with a high school science project which assessed differences in growth of plants dosed with radiation compared to those without. She helped solidify my interest in science, but more importantly, continued to mentor me, showing me by example that I too could be a radiologist.

ACR PIER PROGRAM RAMPS UP

FOSTERING THE FUTURE OF RADIOLOGY

he U.S. population is becoming more diverse; however the physician workforce is not keeping up, especially in the medical specialty areas. Healthcare disparities can be expected to worsen if not addressed on multiple levels. The dangers of not diversifying the physician workforce include the loss of a qualified talent pool, poor communication, decreased patient compliance, negative impact on the quality of care and increased cost of care.

The importance of mentoring medical students and connecting young talent to radiology continues to be top of mind for the ACR. Hence, the ACR Commission for Women and Diversity started the Pipeline Initiative for the Enrichment of Radiology (PIER) program in 2016. The goal of PIER is to introduce medical students to the field early — particularly those from backgrounds underrepresented in the specialty.

PIER aims to expose female and underrepresented minority medical students to the specialty and equip them to be competitive applicants to radiology residency programs. The PIER program was launched with the help of Nth DimensionsTM — an educational nonprofit that strives to increase diversity in orthopedics and other subspecialty fields of medicine. Each year, five PIER candidate interns are selected to work side by side with experienced radiologists in both academic and private practice environments. PIER interns learn to "speak" radiology and to "see" radiologists as contributors within their local communities.

The PIER program is in the third year of offering internships for first-year medical students with radiology and radiation oncology departments and practices. The ACR urges practice leaders to volunteer to host an intern; the application process opens on Dec. 1, 2019.







PIER Scholar Artraeu Simms (far left) discusses IR procedures with fellow Nth Dimension scholars and faculty, including Dr. Bonnie C. Davis (far right) during Orientation.

KIRSTEN SCHOFIELD

I'm a second-year medical student at Morehouse School of Medicine in Atlanta. While I have yet to decide on a specific radiology sub-specialty, I'm open to any experience that allows me to gain more insight into such a vast field. My aunt, who works in healthcare, first mentioned radiology to me. I did some research and was fascinated with

the idea of using X-rays, CT scans, MRIs,



radioisotopes, and ultrasounds to diagnose and even treat a wide range of illnesses. My grandmother is a breast cancer survivor who formed a meaningful bond with her radiologist — stating how comforted she felt by interacting with her doctor during such a difficult time. My interest was amplified though shadowing a group of IRs at Emory University. I was honored to participate in the PIER program to gain more in-depth, hands-on experience in different radiology subspecialties. One highlight was going to the ACR headquarters and getting the opportunity to perform techniques from different radiology fields, including US-guided biopsies, stent placements and removals, and even contour mapping for tumors. I spent the remainder of the summer at Stanford University with Iris C. Gibbs, MD, FACR, and Ergi Pollom, MD, as my preceptors. Both made me feel welcome and comfortable, despite being so far away from home. Dr. Gibbs made sure that I was able to see some radiology techniques that they employed in diagnosing and treating patients. I was guided through multiple MRIs and CT scans, observed two internal radiation therapy treatments (one of which was guided by US), spent hours reviewing chest X-rays with radiologists, and got to shadow a neurosurgeon who also practices interventional neuroradiology.



Dr. Bonnie C. Davis (far right) answers question posed by Nth Dimension scholars at their Orientation. Featured are PIER Scholars Kirsten Schofield (far left) and Kristen Williams, (3rd from left)

ARTRAEU SIMMS

I am a student at the University of the Incarnate Word School of Osteopathic Medicine. I became interested in radiology during my first year of medical school. One of my professors, Adam V. Ratner, MD, FACR, teaches us how to recognize various pathologies using different imaging modalities. He also emphasizes the importance of collaborating with physicians of different specialties. During my anatomy



2018 PIER SCHOLAR

labs, I have been able to practice viewing X-ray, CT, MRI, and US images. Because of Dr. Ratner and my anatomy labs, I have become intrigued with the field. My experience during the PIER program was a tremendous learning opportunity. I was able to shadow radiologists from different subspecialties. I saw first-hand how important radiologists are in the field of medicine. I learned that radiologists are not only experts at interpreting images, but they are great collaborators. Radiologists play a vital role in diagnosing, developing a treatment plan, and executing treatment procedures using images. The PIER program increased my desire to practice medicine as a radiologist. I am very thankful to the ACR, the Commission for Women and Diversity, and Dr. Macura for creating a program to make sure that radiology is an inclusive field.

ROSA MIGUEL GARCIA

My hometown is Los Angeles, and my current interests are in radiology, IR, women's health, patient-centered care and healthcare access. Looking back, the PIER summer experience was essential in my development as a medical



student. It provided me with the opportunity to immerse myself in radiology, a field that I would not have been able to experience until late into the third and fourth year of medical school. I gained key insight into radiology's diverse subspecialties and how they fit into the larger healthcare field. Seeing radiologists use the information they gathered from imaging studies to advocate for treatment plans in multidisciplinary teams reinforced how radiology is a patient-centered field that is an integral part of the healthcare system. As part of my internship experience, I was able to attend the residents' activities and work on a research project. Both of these experiences allowed me to better understand the training path to become a radiologist. Beyond the knowledge I gained, being included in these activities are experiences that I highly value because they allowed me to "see" myself as someone who can one day be part of the field. As a first-generation college student, at times it is difficult to feel that I belong in certain spaces or know how to achieve my goals. The PIER program provided me with opportunities to see what my future role in medicine can be and to connect with mentors that can provide me with the guidance to accomplish this.

MEET THE COMMISSION

RAYMOND B. WYNN, MD, FACR



Vice chair of network operations in the department of radiation oncology at Loyola Medicine

As a member of the ACR Commission for Women and Diversity, I also serve as chairman of the Chicago Radiological Society Committee for Diversity and Inclusion. My interest in pursuing a diversity agenda stems from not only a well-documented

history of health disparities in minority communities, but from my experiences growing up in a predominantly African American community and attending historically black institutions of higher learning. By way of my work with Nth Dimensions , I am helping to implement a strategic pipeline to improve the numbers of women and minorities within radiology and radiation oncology. The hope is to expand access to information, improve disease outcomes of minority populations, and develop parity of minority specialists through the work with the Commission, partners, and other related grant projects.

SHEFALI KANAL

I am a second-year medical student currently attending Pacific Northwest University of Health Sciences in Yakima, Wash. I became interested in radiology early on in medical school during our anatomy courses. I found it so interesting to learn about how the anatomy of the bones, organs,



and musculature all came to life through images and scans that were presented to us by the attending radiologist, and I knew I wanted to take the summer between my first and second year to learn more about the field. Over the summer, I worked with Drs. Ackerman and Davis at the Medical University of South Carolina (MUSC) studying lateral ankle pathology using US technology. I had the opportunity to shadow nearly every radiology subspecialty at MUSC, which gave me so much insight into the diversity of the field, the various technologies that are utilized, and procedures that are performed. At the end of the summer, I presented our research at the National Medical Association conference in Orlando, Fla. It was a productive summer that made me even more excited about applying to radiology residencies when I finish medical school!

MEET THE COMMISSION

MICHELE H. JOHNSON, MD, FACR



Professor of radiology and biomedical imaging at Yale School of Medicine

I am privileged to serve as a member of the ACR Commission for Women and Diversity and for the last two years have served as a preceptor for student interns in the PIER Program. I strive to serve as a mentor and role model, while encouraging these students to serve our patients through

imaging and innovation. Education, enthusiasm, passion, and hard work inevitably allow one to reach high goals. Disappointments happen, but they only become failures if we do not use them as a stimulus to find another path to success. As one of the first women in neurointerventional radiology in the U.S., I was treated as equal to my male counterparts. I think this was because I spoke up and made a place for myself at the table. I am the first African American woman professor at the Yale School of Medicine — proof that we can do anything!

MEET THE COMMISSION

SUSAN J. ACKERMAN, MD, FACR



Chair of the ACR Committee for Women and professor of radiology, vice-chair for clinical affairs in radiology, and division director of US at the Medical University of South Carolina in Charleston

My interests are in promoting diversity and, in particular, promoting female representation in the field of radiology. I

have also served as a preceptor for the PIER program for the past two years, and am thrilled to have been matched with a student for the 2019 program. I find this a tremendously rewarding experience, and highly recommend it to anyone looking for a mentoring opportunity.

My message to medical students is that radiology is a great field — always changing, full of opportunities, and a core component of patient care.



2018 PIER Scholars
Front row (left to right): Edna Wang, Shefali Kanal, Kristen Williams
Back row: Kirsten Schofield, Artraeu Simms



MANAL SAIF

I was born in England and moved to the U.S. in fifth grade. I am currently a third-year candidate at Touro College of Osteopathic Medicine in Orange County, N.Y. My interest in radiology began after a personal health experience, during which I

learned that radiologists play an important role in diagnosing and guiding treatment plans for patients. Thanks to the teamwork of my physicians, including radiologists, at age 23 l was diagnosed with and brought into remission from non-Hodgkin lymphoma. After this experience, I knew I wanted to give back to others in a way that my physicians had done for me. Through studying holistic medicine at an osteopathic medical school, my interest in radiology continues. My experience through the PIER program was incredibly valuable. Through the ACR meeting in northern Virginia and my summer experience at the Medical University of South Carolina, I was able to learn from mentors and build relationships that lasted well beyond those two months. Through this scholarship, I worked on multiple research projects, rotated through multiple subspecialties within radiology, and also made time for volunteering at a local free clinic and other charity events. Under the guidance of experienced faculty in diagnostics — combined with the innovative technologies that are being used — my experiences through PIER have given me hope in the direction that radiology is going, and I am honored to be part of the team.

MEET THE COMMISSION

DEREK L. WEST, MD, MS



Acting associate professor in the department of radiology and imaging sciences at Emory University

I am a member of the ACR Commission for Women and Diversity and serve as the co-chair of the mentorship work group. I work with the ACR PIER program to mentor first-year URMs and female medical students for summer

research in radiology. I want to end healthcare disparities in America. To that end, educating the current radiology workforce on diversity and bringing more URMs and women into radiology as a whole and IR specifically are designed to help address this important issue.

PIER SCHOLARS AND PRECEPTORS

2017

SHERLEY DEMETRIUS

Preceptor: Michele H. Johnson, MD, FACR

SAGELINE LABAZE

Preceptor: Lucy B. Spalluto, MD

RAMZY MEREMIKWU

Preceptors: Derek L. West, MD, MS

Nicholas M. Beckmann, MD

MANAL SAIF

Preceptors: Susan J. Ackerman, MD, FACR

Leah Davis, DO

ROSA GARCIA

Preceptors: Katarzyna J. Macura MD, PhD, FACR

Shivani Ahlawat MD

2018

SHEFALI KANAL

Preceptors: Susan J. Ackerman, MD, FACR

Leah Davis DO

BING (EDNA) WANG

Preceptor: Andrea A. Birch, MD

ARTRAEU SIMMS

Preceptor: Derek L. West, MD, MS

KRISTEN WILLIAMS

Preceptor: Michele H. Johnson, MD, FACR

KIRSTEN SCHOFIELD

Preceptors: Iris C. Gibbs, MD, FACR

Ergi L. Pollom, MD, MS

2019

The interview and selection process has been finalized for the third year of the PIER program. Five scholars have been matched with preceptors to participate in an eight-week clinical and research observership that will conclude with poster presentations at the National Medical Association's 2019 Annual Meeting in July.

BAOTRAN VO

Preceptors: Susan J. Ackerman, MD, FACR

Meryle J. Eklund, MD

VICTORIA GONZALEZ

Preceptor: Andrea A. Birch, MD

NAOMI ISAAC

 $\textbf{Preceptor:} \ \mathsf{Michele} \ \mathsf{H.} \ \mathsf{Johnson,} \ \mathsf{MD,} \ \mathsf{FACR}$

BRIAN THOMPSON

Preceptor: Derek L. West, MD, MS

LEXIA CHADWICK

Preceptors: Raymond B. Wynn, MD, FACR

Anil Sethi, PhD

COLLECTING THE LITERATURE

In its continued efforts to promote diversity in radiology, the $JACR^{\circ}$ hosts a special collection exploring the topic through a scholarly lens. The collection is curated by K. Elizabeth Hawk, MD, MS, PhD, and Elizabeth K. Arleo, MD, and contains the following introduction.

Aristotle is largely credited for having said, "The whole is greater than the sum of its parts." While this idea was born long before the first radiographic image, the concept still rings true even in the modern world of rapidly evolving technology. Each radiographic image is greater than the sum of the voxels within. Each image tells an intricate story of an individual patient and the human condition.

Similarly, as a radiology community, we are together so much greater than the sum of our individuals. In order to achieve the greatest synergy, we must embrace the uniqueness of each individual and actively cultivate diversity and practice inclusion in our field. If we do so, our community will be better situated to care for our patients and tell the beautiful story of how we image the human body.

The JACR has a proud tradition of boldly addressing gaps in the radiology literature. As a result, the journal has created a space for outstanding peer-reviewed publications on topics of diversity and inclusion. The Commission for Women and Diversity is proud to support this collection as part of its efforts to increase diversity within the specialty.

This comprehensive, curated collection provides tools for radiology professionals at all stages of training and practice to explore the critical concepts of diversity and inclusion. Whether this content is used as a formal educational tool in the training setting, a reference for best practices, or more casually as an exploration of diversity, it is our hope that the JACR readership finds this collection thought-provoking and inspiring. Beyond raising awareness, however, we hope these articles empower readers to become agents of progress in moving radiology toward a diverse and inclusive future.

Access the JACR® Diversity Collection at bit.ly/DiversityJACR.

MEET THE COMMISSION

K. ELIZABETH HAWK, MD, MS, PHD



Clinical instructor of nuclear medicine at Stanford University and radiologist at Radiology Partners

I am a proud YPS member, am dual boarded by the ABR and the American Board Nuclear Medicine, and I practice in both the academic and private settings. I am also the JACR® associate editor for the YPS

section. My primary role on the Commission is to further the mission of supporting and celebrating diversity across different communication mediums. From traditional written print to social media outreach, I help to curate a portfolio of communication efforts. One of the hallmarks of radiology and radiation oncology through their evolution is the ability to adapt to creative technology and changing needs of our patients. They are perhaps the most dynamic fields in the house of medicine. As a College, we hope to similarly be leaders as we embrace and celebrate diversity and shepherd a cultural shift.

ELIZABETH K. ARLEO, MD



Associate professor at Weill Cornell Medicine and editor-in-chief of the Journal of Clinical Imaging

I am grateful for the opportunity I've had to serve on the Commission for Women and Diversity since 2014, specifically in my role as a liaison with the Commission on Human Resources. In serving both, my interest has been

improving the state of family/parental leave and lactation facilities in radiology practices across the country, as it is my belief that doing so is not only the right thing to do for radiologists' (and ultimately patients') well-being, but also will naturally lead to improved gender diversity in radiology. This is the mark I hope to leave on the radiology community.

COMING TOGETHER FOR DIVERSITY

The 2017 annual Intersociety Summer Conference convened in Annapolis, Md. to take on the topic of diversity in radiology. A summary of the meeting was published in the JACR*.

The 39th Intersociety Committee, led by Jonathan B. Kruskal, MD, PhD, FACR, reviewed the current state of diversity among trainees and in our workplaces and addressed future strategies for fostering diversity through inclusion. The assembled participants addressed the imperatives and drivers for diversity and developed a road map to foster diversity. Themes included the need to be proactive in increasing awareness of our own biases and their potential impact on workplace decisions, overcoming blind spots, and being culturally sensitive. The need to identify and eliminate barriers to diversity was discussed at both the organizational and practice levels and included efforts to break down structural and clinical barriers, such as training in multicultural awareness. Additional strategies that were addressed included building inclusive work environments; facilitating debate, conversations, and community building; and pipelining medical students through mentoring pathways. The conference ended with a call to action to develop toolkits with effective resources to support the necessary diversity and inclusion initiatives we must all undertake.

"Teams comprised of diverse opinions, viewpoints, perspectives, ideas, and backgrounds tend to outperform homogeneous groups on problemsolving tasks. Pro-diversity work environments have significant impactful effects on key business indicators, including sales and staff retention."

Read more about the conference in the JACR* summary at bit.ly/JACR-ISC.

MEET THE COMMISSION

CAROLYN C. MELTZER, MD, FACR



Chair of the department of radiology and imaging sciences at Emory University School of Medicine

I am passionate about ensuring that radiology is well-positioned for the future through a broad reach for attracting a talent workforce. A critical Commission initiative has been working with the Society of Chairs in Academic Radiology Departments

to lead the formation of a family leave policy. This will position us well for the future. The Emory department of radiology has strived to become a model for diversity and inclusion in our field by investing in professional and leadership development, building a core set of values around inclusion, and celebrating our diversity journey. In my new role at Emory as executive associate dean of faculty academic advancement, leadership, and inclusion, I hope to bring radiology's lessons to advance other disciplines.

CHERI L. CANON, MD, FACR



Chair of radiology at the University of Alabama at Birmingham's School of Medicine

We have fallen short of the goal to advance women in medicine. It is not for lack of interest or passion. In many cases, it is failure of intentionality. When I first became a chair in an aca-

demic department, there were few women radiology chairs. Although our numbers have increased, it is only minimally so. My singular goal is to change this, which was the impetus for the Society of Chairs in Academic Radiology Departments and the GE Healthcare LEAD program for women. Although only in its inaugural year, through LEAD we are creating a cohort of women leaders in medicine.



FIRST FEMALE ACR CHAIR BEGINS TERM

LEADING THE WAY

Since its founding in 1924, the ACR has been at the fore-front of radiology evolution, representing the radiology professionals who make up the specialty. And for the first time in its history, the organization is led by a female radiologist. Geraldine B. McGinty, MD, MBA, FACR, became chair at ACR 2018 and quickly made diversity and inclusion a key goal of her tenure.



(Left to right) ACR Vice President Marta Hernanz-Schulman, MD, FACR, ACR President James A. Brink, MD, FACR, ACR Secretary-Treasurer James V. Rawson, MD, FACR, BOC Chair Geraldine B. McGinty, MD, MBA, FACR, Council Speaker Timothy L. Swan, MD, FACR, BOC Vice Chair Howard B. Fleishon, MD, MMM, FACR, and Council Vice Speaker Richard Duszak Jr., MD, FACR.

MEET THE COMMISSION

GERALDINE MCGINTY, MD, MBA, FACR



Chair, ACR BOC, and chief strategy officer of the Weill Cornell Medicine Physician Organization Weill Cornell Medicine Radiology and Healthcare Policy and Research

I am a proud member of the inaugural roster of the Commission for Women and Diversity and have been delighted to act as an executive sponsor for important

initiatives, such as the survey on barriers to a more diverse radiology workforce. I have also been able to speak nationally and internationally about the benefit of a more inclusive radiology profession for the patients we serve. I hope I have been part of a culture change in our specialty that has refocused us on our integral role in the healthcare team and made us more visible to and valued by not only our colleagues, but also our patients. I have never regretted my choice of radiology and continue to be energized by the possibilities it affords in improving patient care and outcomes.

"Oh yes, and I'm the first woman to hold this title. Not, I should stress, because there have been no qualified women up to now. Far from it. The women in our profession who I count as my role models, mentors, and friends have been more than worthy of this role. It is on their shoulders that I stand as I pledge my service to you all."

— Geraldine B. McGinty, MD, MBA, FACR, ACR BOC Chair, ACR Bulletin, June 2018

MEET THE COMMISSION

FINDING BARRIERS TO DIVERSITY

In early 2018, a group of physicians from the ACR Commission for Women and Diversity began a study to identify potential barriers to building a diverse workforce in radiology and radiation oncology by conducting a national survey of physicians in these fields and studying their experiences. The study, led by Pari V. Pandharipande, MD, MPH, included a survey of ACR members. The survey queried physicians' attitudes about their workplace environment, relationships, and culture. Panharipande and her team sought to determine if responses differed by gender or race/ethnicity. Results of the study were submitted for peer review and potential publication.

MEET THE COMMISSION

ALEXANDER M. NORBASH, MD, MS, FACR



Professor and chair of radiology at the University of California, San Diego

My career in interventional neuroradiology includes reaching across lines to form teams to solve problems. Over the past 25 years since completion of my specialty training, I have

been privileged to participate in the development and advancement of many tools, products, and techniques in the field. None of these advances would have been possible without the diverse thought styles housed among inclusive teams of clinicians, scientists, and administrators working together. I fundamentally believe that diversity contains the opportunity for our solving otherwise unsolvable social and scientific problems. For medical students considering radiology, I would like to thank you for your faith, hope, and unconstrained creativity. We very much look forward to growing with you as we push the boundaries of technology, compassion, and discovery.

PARI V. PANDHARIPANDE, MD, MPH



Abdominal radiologist and health outcomes researcher at Massachusetts General Hospital (MGH), and director of the MGH Institute for Technology Assessment

Since joining the Commission in 2013, I've supported the Commission's activities and mission by contributing my skills in health services research. I led a team of talented colleagues from the Com-

mission and MGH in conducting a national survey of ACR members to identify potential barriers to a diverse physician workforce. In 2018, we successfully launched and completed it, and this year we will publish our results. Research is one of multiple important activities that the Commission has pursued. From kindergarten until sixth grade, the most influential teacher that I had was my librarian, Dorothy Vickers-Shelley, an African-American woman and civil rights activist. Every week when visiting the library, we had to say the following statement written by her: "Life is short. Therefore, I shall be a crusader in the fight against ignorance and fear, beginning with myself." I try to embody her teachings, and hope that by doing so, the world that I know — from my community to my profession — can continue to grow and become a better place for the generations to come.

CURTILAND DEVILLE IR., MD



Associate professor of radiation oncology and molecular radiation sciences at Johns Hopkins University School of Medicine

I joined the Commission in 2013 after publishing a comprehensive review of racial, ethnic, and gender diversity trends in the radiology physician workforce. I have a research interest in physician workforce diversity, particularly in specialties like radiology and radiation

oncology that are disproportionately underrepresented by women and minorities. There are two issues impacting the representation of women and URMs in medicine in the radiological specialties. There is the limited pipeline of URM medical students. However, even with the available pipeline, female and URM medical students are not electing radiology as a training specialty, and radiology remains disproportionately underrepresented with respect to women and URMs. We need to engage, expose, attract, and mentor female and URM students to our field to ensure that the radiological workforce is reflective of the diverse patient population that it serves.







SURVEY EXPLORES MENTORSHIP AND DIVERSITY

MENTORING THE NEXT GENERATION

At RSNA 2018, Amy K. Patel, MD, presented "Mentorship Matters: A Call for More Effective Mentorship Programs for Early-Career Radiologists." The presentation disseminated the results of a survey created by the ACR YPS Executive Committee and the Commission for Women and Diversity. The 10-question survey was sent to 2,000 practicing radiologists and addressed satisfaction with their current mentorship and preferences for future mentorship opportunities. Unsurprisingly, the results concluded that radiologists early in their career strongly desired greater mentorship opportunities. However, these opportunities were more sought after among women radiologists. Furthermore, young radiologists expressed a need for "an experienced mentor of a similar subspecialty and practice type who could facilitate their growth beyond the local institution," according to the presentation's conclusion.

47% Not satisfied with their practice's current mentorship program

Respondents did not have a mentor

44%

21%

Respondents have a single mentor

Respondents said a mentor would be valuable, very valuable, or extremely valuable

78%

MEET THE COMMISSION

Addressing Needs of

Needs of Women Radiologists

"The key steps that practice leaders can take to address the needs of women in radiology are: marketing radiology to talented women medical students, addressing recruitment and bias, understanding and accommodating the provisions of the Family and Medical Leave Act of 1993 and the Fair Labor Standards Act for both trainees and radiologists in practice, preventing burnout and promoting well-being, offering flexible work opportunities, providing mentorship and career advancement opportunities, and ensuring equity."

Spalluto LB, Arleo EK, Lewis MC, Oates ME, Macura K J. Addressing needs of women radiologists: opportunities for practice leaders to facilitate change. RadioGraphics. 2018; 38(6). Available at bit.ly/Radio-Graphics. Vol38/No6.

AMY K. PATEL, MD



Medical director of the Women's Imaging Center at Liberty Hospital and clinical assistant professor of radiology at the University of Missouri-Kansas City School of Medicine

I have had the honor of serving on the Commission since I was a resident and established the RFS branch of the Commission for Women in Diversity in 2015, with the steadfast support of Katarzyna J. Macura, MD, PhD, FACR. The message that I have for the radiology community is that I hope our tireless efforts equate to a vibrant profession of diversity and inclusion, including gender

parity in women entering the field. We must all make a concerted effort for this to occur so that we may recruit the best and brightest medicine has to offer.

LUCY B. SPALLUTO, MD



Director of Vanderbilt University Medical Center's Women in Radiology initiative and associate director for diversity, equity, and inclusion in the department of radiology

I serve on the Committee for Women and am dedicated to developing a radiology culture supportive of a diverse workforce. I have championed diversity programming (including mentorship, faculty development, and networking events) at the local, state, and national levels and currently serve as the president-elect for the American Association for Women Radiologists. The

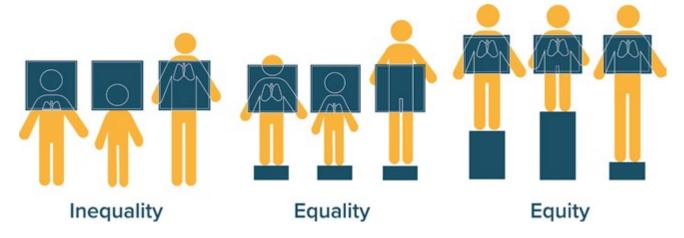
Commission has been instrumental in underscoring the importance of diversity in the greater radiology community. The continued, intentional efforts of the Commission to increase diversity in radiology will allow us to better meet the needs of an increasingly diverse patient population.

JACR HEALTH EQUITY SPECIAL ISSUE PUBLISHED

FOCUSING ON EQUITY

In April 2019, the journal published the Health Equity special issue, exploring differences in patient outcomes by focusing on social determinants of health. Articles covered economic stability (such as a living wage, adequate housing, and transportation), literacy, access to healthy food, social support, and (of course) access to care. Read the entire issue at bit.ly/|ACRequity.





A figure from the issue illustrates the difference between health inequality, health equality, and health equity using access to lung cancer screening.

"Go on, be outraged. Then join a revolution to promote equitable care."

-Ruth C. Carlos, MD, MS, FACR, and Efren J. Flores, MD Carlos RC, Flores EJ. Health equity, JAm Coll Radiol. 2019; 16(4):539-541. Available at bit.ly/JACR_HealthEquity.

To read the $JACR^*$ "Diversity Matters" column co-edited by Katarzyna J. Macura, MD, PhD, FACR, and Johnson B. Lightfoote, MD, MBA, FACR, visit jacr.org/content/diversity-matters.

MEET THE COMMISSION

RUTH C. CARLOS, MD, MS, FACR



Editor-in-chief of the JACR® and professor of radiology at the University of Michigan in Ann Arbor

In my dual roles as a member of the Commission for Women and Diversity and the editor of the $JACR^{\circ}$, I promote synergistic activities between the two to enhance activities that improve diversity in our workforce and scientific pipeline. These activities include the "Diversity Matters" column,

the Health Equity special issue, and providing access to Elsevier's Researcher Academy for our PIER scholars. Respect, opportunity, and access are fundamental to ensuring diversity in our practice. In the future, we will not need the Commission. Until then, Commission members have guaranteed that we have made progress.



2019 AND BEYOND

LOOKING FORWARD

As the Commission charts its course, the scope and reach expand. Here are a few areas of focus in the coming years.

RADIOLOGISTS WITH DISABILITIES

Led by a work group within the Commission for Women and Diversity, the ACR will be developing a "community" for radiologists and radiation oncologists with disabilities. Overall goals of the group will be to offer opportunities for networking and mentoring, as well as provide other valuable resources.

TOTALLY RAD

Beginning in the fall of 2019, Commission staff and volunteers will be taking outreach efforts on the road with

"Totally Rad" hands-on clinical skills workshops — targeting medical schools with heavy URM enrollment — to introduce radiology and radiation oncology to students who might not otherwise be exposed to the specialty until their third or fourth year of medical school. In addition to this valuable exposure, our volunteer physicians will dispel existing misconceptions about the field.

TRANSGENDER AND GENDER DIVERSE HEALTH

The Commission is forming a work group that will focus on advocacy for transgender and gender-expansive patients. The work group will create an educational program for front-line and clinical staff in radiology who interact with these patients. Resources will also be developed around how to perform

sensitive exams in an appropriate manner to minimize physical and/or emotional trauma for these patients.

GRASSROOTS CHAPTER DIVERSITY NETWORK

As ACR has established that diversity is central to its mission of excellence in the radiological professions, it is essential that chapter leaders engage their members to actively promote diversity and inclusion to align with this mission. We need committed volunteers to spearhead diversity committees or implement initiatives to facilitate achieving diversity goals at the local level. Chapters can gain 10 points towards the annual Chapter Recognition Awards based on their diversity activities. To date, 25 chapters joined the network.

MEET THE COMMISSION

GAIL N. MORGAN, MD, FACR



Breast and women's imager at Virginia Mason in Seattle

My participation on the Commission inspired me to formulate ways that ACR could achieve its strategic goal of promoting diversity in our profession. In my current position as co-chair of the Commission's advocacy work group, my role is to promote policies and initiatives that facilitate environments for the participation of women and URMs in our profession. I embrace outreach to

grassroots ACR chapters to engage membership in developing committees and implementing initiatives to make tangible diversity goals. I grew up in a family with English, Native American, and African heritage in the South. I had to face and break through obstacles in school, training, and radiology practice because of bias based on my gender and ethnic background. This history and experience spurred me to work towards improvement for the next generation of females and URMs in medicine. For me, achieving diversity and inclusion are personally meaningful and real, not theoretical.

HOW TO CREATE A COMMITTEE ON DIVERSITY IN YOUR ACR STATE CHAPTER.

Diversity and inclusion in the radiology workforce promotes excellence in our profession and in the care we provide to our patients. Promote implementation of diversity initiatives locally at the state level where membership resides and is most directly impacted.

- 1. Commit to the value of diversity and Inclusion
- 2. Engage chapter leadership
- 3. Engage membership
- 4. Engage the community

I SUPPORT DIVERSITY

LEADERSHIP & STAFF (Past & Present)

COMMISSION FOR WOMEN AND DIVERSITY

Katarzyna J. Macura, MD, PhD, FACR – Chair

Jan Cox, PHR, SHRM-CP (Staff)
Angelica Vergel De Dios (Staff)
Susan J. Ackerman, MD, FACR
Kimberly E. Applegate, MD, MS, FACR
Jaqueline A. Bello, MD, FACR
Cheri L. Canon, MD, FACR
Ruth C. Carlos, MD, MS, FACR
Dianna D. Cody, PhD, FACR

Julian D. Harolman, MD Kalpana M. Kanal, PhD, FACR Johnson B. Lightfoote, MD, FACR Loralie D. Ma, MD, PhD, FACR M. Victoria Marx, MD Geraldine B. McGinty, MD, MBA,

Carolyn C. Meltzer, MD, FACR

Alexander M. Norbash, MD, FACR Pari V. Pandharipande, MD, MPH Amy K. Patel, MD Etta D. Pisano, MD, FACR Michele V. Retrouvey, MD Andrew B. Rosenkrantz, MD Raymond B. Wynn, MD, FACR Judy Yee, MD, FACR

COMMITTEE FOR DIVERSITY AND INCLUSION

Johnson B. Lightfoote, MD, FACR – Chair

Samuel E. Almodovar, MD
A. Pat Basu, MD, MBA
Andrea A. Birch, MD
Kathleen Brown, MD, FACR
Sharon E. Byrd, MD, FACR
Jesse A. Davila, MD
Bonnie C. Davis, MD
Curtiland Deville Jr., MD
Pedro J. Diaz-Marchan, MD, FACR
John S. Dubrow, MD, FACR

Andre J. Duerinckx, MD, PhD, FACR Richard B. Gunderman, MD, FACR Mikhail Higgins, MD, MPH Michele H. Johnson, MD, FACR Nolan J. Kagetsu, MD, FACR Peter Kalina, MD, MBA, FACR Arun Krishnaraj, MD, MPH Jiyon Lee, MD Charles E. Martin III, MD Gail N. Morgan, MD, FACR Alexander M. Norbash, MD, FACR Kwaku K. Obeng, MD Jay R. Parikh, MD, FACR Tina Y. Poussaint, MD, FACR Karla A. Sepulveda, MD Raymond K. Tu, MD, FACR Derek L. West, MD, MS Camille M. Williams, MD Vivian W. Wing, MD, FACR Raymond B. Wynn, MD, FACR

COMMITTEE FOR WOMEN

Susan J. Ackerman, MD, FACR – Chair

Yoshimi Anzai, MD, MPH
Elizabeth K. Arleo, MD
M. Ines Boechat, MD, FACR
Lori Deitte, MD, FACR
Meridith J. Englander, MD
Julia R. Fielding, MD, FACR
Lynn A. Fordham, MD, FACR
Kavita Garg, MD
Rachel F. Gerson, MD
Iris C. Gibbs, MD, FACR
Sonia Gupta, MD

K. Elizabeth Hawk, MD, MS, PhD Marta E. Heilbrun, MD, MS Jill E. Jacobs, MD, FACR Ella A. Kazerooni, MD, FACR Maria D. Kelly, MD, FACR Feng-Ming Kong, MD, MPH, PhD, FACR Serena M. Liebengood, MD Katherine E. Maturen, MD, MS Darlene F. Metter, MD, FACR Janis P. O'Malley, MD, FACR Kristin K. Porter, MD, PhD Aliya Qayyum, MD Gelareh Sadigh, MD Elizabeth A. Sadowski, MD Ami A. Shah, MD Claude B. Sirlin, MD Lucy B. Spalluto, MD Margaret M. Szabunio, MD, FACR Vani Vijayakumar, MD Vanessa Van Duyn Wear, MD



