

## **VCLIC** News and Happenings

Hello and welcome to the July edition of VCLIC News! Please join us in **congratulating the Clickbusters Round 1 Winners**, announced Thursday, July 16<sup>th</sup> at the HealthIT Townhall. **Clickbusters Round 2 is open and recruiting**—please see links below to join in and work your way toward a Golden Mouse! We would also like to introduce **VCLIC Featured Member**, **Dave Johnson**, **MD**, and have some details for everyone on how to **work with HealthIT to improve eStar** as well as some information about the **Virtual Epic Training** currently being offered.

As always, we are celebrating the vast array of accepted abstracts (VCLIC members will have an incredible presence at the virtual AMIA Symposium this fall!), innovative projects, and fantastic achievements of our members; and reading the slew of journal articles VCLIC members have published over the last month or so. We will be adding these accomplishments to the <a href="News Page">News Page</a> of our website as well.

If you have any questions or would like to engage with our team, please email Elise (elise.russo@vumc.org).

## Clickbusters Round 1 Winners Announced!

We would like to formally recognize the winners of **Clickbusters Round 1**! As a reminder, participants earned points based on how many of the steps of the <u>process</u> they completed for each of their BPAs and how well they documented their work. We awarded **1**<sup>st</sup>, **2**<sup>nd</sup>, **and 3**<sup>rd</sup> **place "Golden Mouse" trophies** based on these point totals.

Additionally, we awarded prizes to the participant whose work **reduced the most clicks**, to the one whose work was **most innovative**, and to the one who Dr. Kevin Johnson judged to be the most impactful ("**Judge's Choice**").

Without further ado, we present our winners!





## Thank you!

Thank you to everyone who participated in any way in Clickbusters Round 1, which wrapped up officially on June 6<sup>th</sup>, 2020. We had 17 participants who **"busted" 58 BPAs**, which **reduced clicks by 49,026 per week!** If you "Busted" a BPA, we have a framed Certificate for you! We distributed as many as we could but will figure out how to get the remainder out despite the COVID19-related work from home policies.

The Clickbuster participants would not have been able to complete their work without help from HealthIT, whose staff partners closely with participants and VCLIC leadership to move changes to BPAs into production. Thank you, HealthIT!

## Clickbusters Round 2: Open and Recruiting

As you may have heard or seen due to my extensive emailing, BPA Clickbusters Round 2 kick off on June 29<sup>th</sup> and will go through September 1<sup>st</sup>.

If you thought you might be interested but haven't responded or reached out yet, there is still plenty of time to get in on the fun! We welcome participation from any interested VUMC staff! Please feel free to either respond to this email or email me directly (elise.russo@vumc.org) if you'd like more details on the program. We are hoping to make this second round even better than the first!

For reference, our existing resources can be found at our **Confluence site**:

- Main page describing the <u>Clickbusting process</u>
- BPAs available for Clickbusting

Please also see this new article in the VUMC Reporter: Clickbusters program takes on EHR alert fatigue





I am a pediatric hospitalist and serve as the Medical Director of Inpatient Quality and Patient Safety in the children's hospital. In these roles, I utilize quality improvement methods to improve the care of patients within the hospital and teach quality improvement methods to VUMC faculty and staff throughout the enterprise through a program we call **Quality Academy**. Some general tenets of developing effective interventions in quality improvement projects involve the concepts of reliability theory and human factors, which make it easy for our frontline colleagues to do the right thing, and hard for them to do the wrong thing. These tenets hold true whether we are referring to environmental components (like hand sanitizer near door entry sites), or if we are referring to how front-line hospital staff interact with the electronic health record. While I have no formal IT training, my work often brings me

to the intersection of the EHR and human behavior.

For the past few years, a team including Drs. Barron Frazier (Peds ED fellow), Gregory Plemmons (pediatric hospitalist), and myself have worked to reduce unnecessary chest radiographs in patients presenting to our hospital who are diagnosed with bronchiolitis. Through efforts to redesign provider workflow within the EHR, including removing default orders (this was actually in Star Panel!!), updating order sets, and creating a BPA, we were able to reduce the percent of chest radiographs by over half. A recent <u>Discover Magazine article</u> was written about this work, and we hope it will make its way into an academic journal soon! Through the recent VCLIC Click Buster's program, I was able to work closely with VCLIC's **Dr. Allison McCoy** to update the bronchiolitis BPA in ways that I hope will allow us to make it even more useful to providers and continue to improve the care we provide our patients.

More recently, our pediatric hospital medicine fellow, Dr. Ali Carroll, has been working on a project to reduce the duration of time that children are NPO (not able to eat or drink) prior to a procedure requiring sedation. Per anesthesia guidelines, routinely making children (or adults for that matter) "NPO at midnight" results in children being NPO for longer than they need to be and results in "hangry" children and frustrated families. Once again, VCLIC's **Allison McCoy** has helped us obtain a refreshable data set and work through how to leverage Epic to work for us. Utilizing the Model for Improvement, working through true PDSA cycles, and following the data on a weekly basis using statistical process control charts, Ali Carrol was able to determine that a "dot phrase" that she created to reduce NPO time was associated with a decrease in NPO from 10 hours to 6 hours. However, the dot phrase still requires a human being to remember to use it, so we are working with **Dr. Wael Alrifai** (another VCLIC member!!) on making some changes to the Epic NPO order to streamline the process. More improvement to come!

Monroe Carell Jr. Children's Hospital's <u>Quality Academy Program</u> accepts applications from staff throughout VUMC. Please feel free to reach out to me if you have an interest or questions about the program, or if you would like to gain a better understanding of how we use quality improvement techniques to improve the care of patients we serve on a daily basis. These techniques can be used across disciplines and even outside the walls of the hospital!

# Partnering with Health IT to Improve eStar

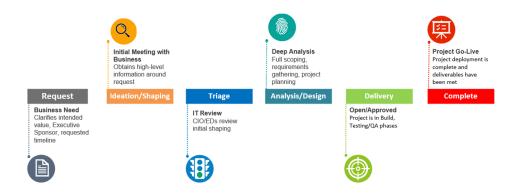
VCLIC members often work with Health IT to improve eStar. Smaller requests (less than 20 hours) are handled through the enhancement request process and are initiated with a Pegasus Health IT Enhancement Request. For bigger, enterprise-level requests that require coordination between numerous HealthIT teams, a centralized process, **HealthIT Intake**, has been established to streamline the review and coordination. We're lucky to work with **Wendy Kiepek**, RN, MSHI, who serves as the Director of Operational Services. Wendy and her team support execution of strategic initiatives and work closely with operational leadership to translate strategies into operational plans. She also partners with departmental colleagues to establish governance processes and execute plans. Wendy is responsible for the HealthIT Intake (also known as Triage) and request coordination process in HealthIT. She oversees the business analysis, customer relationship management, communications, and project management teams.

HealthIT Intake was developed to triage and prioritize requests that span multiple teams in HealthIT and have a cross-departmental impact at VUMC. When a business need is identified, a resource is assigned to work with the business to define the problem, identify the Executive Sponsor and Operational leader, and determine the relative priority of this request against other entity requests. Understanding the business objective and impacted areas is also elicited during this initial meeting with our business partner. This information is reviewed during the weekly HealthIT triage meeting, which is attended by the CIO, Executive Directors, and other key IT stakeholders. A decision of whether to assign additional resources for a more detailed analysis is determined based on the information presented.

With this structure in place, HealthIT has a channel to evaluate a variety of enterprise requests about quality, safety, and innovation to determine how they can be shaped to improve care delivery for the enterprise. DBMI and VCLIC members with ideas about projects they would like to see operationalized can partner with the CRMs from Wendy's team and the Clinical Directors to learn more about the

HealthIT intake process. If you have an enterprise request that requires HealthIT resources, contact <u>Joey Manansala</u> or <u>Wendy Kiepek</u>, and they can help you take this request through the Intake process. You can also contact Joey to ask questions or learn more about the process.

# **HealthIT Request/Project Process**



# **Epic Virtual Training**

Epic has a variety of training and certification programs (<u>Epic Training Resources</u>) that may be of interest to VCLIC members, some of which we list on our <u>Confluence site</u>. Epic has always required travel to Verona, WI to complete trainings. Although Verona is lovely (especially in warmer months!) this travel requirement has sometimes been a barrier to completing training. Since COVID-19, Epic has temporarily started offering trainings remotely, through October 23, 2020.

This virtual option may be your chance to complete certifications like <a href="Physician Builder">Physician Builder</a>, <a href="Clinical Content">Clinical Content</a> <a href="Builder">Builder</a>, <a href="Physician Builder Analytics">Physician Builder Analytics</a>, <a href="Chronicles Programmer">Chronicles Programmer</a>, <a href="Research Informatics">Research Informatics</a>, or <a href="Cogito Clarity">Cogito Clarity</a></a>
<a href="Clinical Data Model">Clinical Data Model</a> without needing to travel. In person training continues to be offered, so if you'd rather learn in person, you can still travel to Verona and take a course on Epic's campus, with enhanced cleaning and safety protocols.

# VCLIC Will Have Incredible Representation at AMIA National Symposium This Year

Check out all of the accepted work from VCLIC Members to be presented in November at the (now virtual) AMIA 2020 Symposium:

Cato K, Hoeksema L, Freeman R, Womack D, **Jeffery A**. Bench to Bedside: The Power of Nursing Data for Prediction. Accepted as Workshop, AMIA Annual Symposium. 2020.

Dankwa-Mullan I, McKillop MM, Solomon M, Preininger AM, Roebuck MC, Arriaga Y, George J, **Jackson GP**, South BR. *Identifying and Leveraging Public Data Sources with Structured Social Determinants of Health Information for Observational Health Research*. Accepted as Presentation, AMIA 2020 Annual Symposium. 2020.

Davis SE, Greevy RA, **Lasko TA**, **Walsh CG**, Matheny ME. *A Surveillance Framework for Monitoring and Updating Clinical Prediction Models*. Accepted as Paper, AMIA Annual Symposium. 2020.

Everson J, Askey N, **McCoy AB**. *Diffusion of a Health Information Exchange Tool Across an Academic Medical Center*. Accepted as Podium Presentation, AMIA Annual Symposium. 2020.

Haddad TC, Leventakos K, South BR, Weeraratne D, Weroha J, Hendrickson AEW, Mahipal A, Singh P, Sands-Lincoln M, Kutub N, Rammage M, Will E, Helgeson J, Snowdon JL, **Jackson GP**. *Development and Training of an Artificial Intelligence (AI)-Based Clinical Trial Matching Tool for Oncology*. Accepted as Poster Presentation, AMIA 2020 Annual Symposium. 2020.

Hersh W, **Jackson GP**, Williams MS, Dorr DA, **Walsh CG**. *Translational research of machine learning and artificial intelligence advances in clinical settings –experiences and challenges*. Accepted as Panel Presentation, AMIA 2020 Annual Symposium. 2020.

**Knake LA**, Borbon T, Iyer S, Park AC, Janssen D, McIntyre J, Schroeder KJR. *Using Social Media as a Clinical Decision Support Tool During the Uncertainty of Covid-19*. AMIA 2020 Annual Symposium. 2020.

Koonce TY, **Giuse DA**, Blasingame MN, Su J, Williams AM, Biggerstaff PL, **Osterman TJ**, Giuse NB. *The Personalization of Evidence: Using Intelligent Datasets to Inform the Process*. Accepted as Poster Presentation, AMIA Annual Symposium. 2020.

Kutub N, Das A, Hekmat R, Fox C, **Jackson GP**. Lessons from industry science: scaling biomedical informatics research at the speed of technology evolution. Accepted as Workshop, AMIA 2020 Annual Symposium. 2020.

**McCoy AB**, Dutta, S, Rubins DM, Tobias M, **Wright A**. *Data-Driven Approaches for Improving Clinical Decision Support Across Multiple Healthcare Organizations*. Accepted as Panel Presentation, AMIA Annual Symposium. 2020.

**McCoy AB**, Williams KS, Chapman WW, Tiase VL, Rajamani S, Senathirajah Y, **Unertl KM**, Jones TL, Hebert C, Taylor K, Bright TJ. *Introducing Undergraduate Women to Biomedical Informatics through the AMIA First Look Program*. Accepted as Podium Presentation, AMIA Annual Symposium. 2020.

McKillop MM, Preininger AM, Steben T, Draulis K, Kutub N, **Jackson GP**. *Adoption and impact of a personalized and data-driven health benefits decision-support tool*. Accepted as Poster Presentation, AMIA 2020 Annual Symposium. 2020.

Preininger AM, Rosario BL, Kutub N, Draulis K, Duke S, Rikkers W, **Jackson GP**. *An operational performance-improvement tool to enable value-based healthcare*. Accepted as Poster Presentation, AMIA 2020 Annual Symposium. 2020.

Reale C, **Novak LL**, Robinson K, Simpson CL, Ribeiro JD, Franklin JC, Ripperger MA, **Walsh CG**. *User-Centered Design of a Machine Learning Intervention for Suicide Risk Prediction in a Military Setting*. Accepted as Paper, AMIA Annual Symposium. 2020.

Samal L, Wu E, Aaron S, Garabedian P, **McCoy AB**, McMahan G, Dykes PC, Lipsitz S, Bates DW, **Wright A**. *Clinical Decision Support for Hypertension Management in Primary Care Patients with Chronic Kidney Disease*. Accepted as Poster Presentation, AMIA Annual Symposium. 2020.

Scheufele EL, Hatanaka J, Baca M, Laclaire S, Heiland J, Kutub N, South BR, **Jackson GP**. *A modular editorial content curation framework for pharmacological and patient knowledge management*. Accepted as Poster Presentation, AMIA 2020 Annual Symposium. 2020.

Schreiber R, Wright A, McCoy AB, Sittig DF, Grasso M. Clinical Decision Support: Metrics, Efficacy, and Alert Burden Reduction. Accepted as Workshop, AMIA Annual Symposium. 2020.

Smith JC, Spann A, McCoy AB, Wright A, Arnold DH, Williams DJ, Weitkamp AO. Natural Language Processing and Machine Learning to Support Clinical Decision Support for Treatment of Pediatric Pneumonia. Accepted as Presentation, AMIA Annual Symposium. 2020.

Suwanvecho S, Suwanrusme H, Jirakulaporn T, Lungchukiet P, Taechakraichana N, Thanakarn N, Decha W, Boonpakdee W, Wongrattananon P, Preininger AM, Wang S, Solomon M, Hekmat R, Esquivel J, Dankwa-Mullan I, Patel VL, Shortliffe EH, Arriaga Y, **Jackson GP**, Kiatikajornthada N. *Concordance with oncology clinical decision support and clinical outcomes in breast and colorectal cancer patients*. Accepted as Poster Presentation, AMIA 2020 Annual Symposium. 2020.

Tang LA, DeLozier S, Bastarache L, **Walsh CG**, Denny JC. *Developing a Phenotype Risk Score for Opioid Adverse Events*. Accepted as Paper, AMIA Annual Symposium. 2020.

**Wright A**, Rector H, Teare AJ, **McCoy AB**, Barrett TW, Edwards DA, Marcovitz DE, **Nelson SD**. *Effect of a Clinical Decision Support Alert Encouraging Prescribing of Naloxone for Patients at High Risk of Opioid Overdose*. Accepted as Podium Presentation, AMIA Annual Symposium. 2020.

Zhang Y, Chen JH, **Wright A**, Tobias M, Ancker JS. *Data-Driven Clinical Decision Support for Computerized Physician Order Entry: Development, Evaluation, and Implementation*. Accepted as Panel Presentation, AMIA Annual Symposium. 2020.

# Publications, Presentations, Interviews, and Awards

## Accomplishments

We have had a lot to celebrate over the past month, and this is only a small sampling of the fantastic work our Center members have been up to! Please continue to send me these accomplishments as you think of them!

Alvin Jeffrey, PhD was recently elected to serve a 3-year term on the Board of Directors for the American Association of Critical-Care Nurses starting July 1st, 2020. This organization has over 125,000 members and is typically considered the 2nd or 3rd largest nursing organization in the world. While acute & critical care nurses have long used technology in patient care, the organization has not had an explicit emphasis on the role of informatics. Therefore, one of his personal goals is to have the organization become a formal member of the Alliance for Nursing Informatics where they can more formally work on recognizing the important role informatics plays in nursing care delivery.

More information can be found <a href="here">here</a>. Congratulations, Alvin!

#### In The News

As **Dave Johnson, MD** mentioned above, his work on improving care for bronchiolitis patients through optimizing Epic was featured in *Discover Magazine* on June 24<sup>th</sup>, 2020: Reducing X-ray Overutilization in Diagnosing Bronchiolitis.

On July 9<sup>th</sup>, 2020, the *VUMC Reporter* published a story on **Sunil Kripalani**, **MD**, **MSc**, who was appointed the Director of the Vanderbilt Center for Health Services Research! Congratulations, Sunil!

#### Also in the *Reporter:*

- VUMC-led network to focus on polygenic risk for common diseases (Josh Peterson, MD, MPH)
- <u>Use of VUMC's patient portal is surging</u> (Trent Rosenbloom, MD, MPH)
- Facial recognition solves patient identification: study (Martin Were, MD, MS)
- Clickbusters program takes on EHR alert fatigue (Adam Wright, PhD; Allison McCoy, PhD)

# Recently Published July 2020

**Jeffery AD**. <u>ANI Emerging Leader Project: Resources for Learning Data Science</u>. *CIN: Computers, Informatics, Nursing*. 2020;38(7):329-330.

Liberman JS, Slagle JM, Whitney G, Shotwell MS, Lorinc A, Porterfield E, **Weinger MB**. <u>Incidence and Classification of Nonroutine Events during Anesthesia Care</u>. *Anesthesiology: The Journal of the American Society of Anesthesiologists*. 2020;133(1):41-52.

**Nelson SD**, **Walsh CG**, Olsen CA, McLaughlin AJ, LeGrand JR, Schutz N, **Lasko TA**. <u>Demystifying artificial intelligence in pharmacy</u>. *American Journal of Health-System Pharmacy*. 2020.

Stenner SP, Rice W and **Nelson SD**. A viewpoint on the information sharing paradox. *Appl Clin Inform*. 2020; 11(3): 460-63.

Stolldorf DP, Mixon AS, Auerbach AD, Aylor AR, Shabbir H, Schnipper J, **Kripalani S**. <u>Implementation and sustainability of a medication reconciliation toolkit: A mixed methods evaluation.</u> *American Journal of Health-System Pharmacy.* 2020;77(14):1135-1143.

Varley AL, **Kripalani S**, Spain T, Mixon AS, Acord E, Rothman R, Limper HM. <u>Understanding Factors Influencing Quality Improvement Capacity Among Ambulatory Care Practices Across the MidSouth Region: An Exploratory Qualitative Study. *Quality Management in Healthcare*. 2020;29(3):136-141.</u>

**Wanderer JP**, Rathmell JP. <u>Ketamine for Neuropathic Pain: an Infusion of Relief?</u> *Anesthesiology*. 2020;133(1):A17.

Wanderer JP, Nathan N. Sugammadex: Now With Fewer Complications! Anesthesia & Analgesia.

2020;131(1):136.

Wang EC-H, **Wright A**. Characterizing outpatient problem list completeness and duplications in the electronic health record. *Journal of the American Medical Informatics Association*. 2020; 0(0): 1-8.

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Allen BFS, Jablonski PM, McEvoy MD, Ehrenfeld JM, Shi H, King AB, **Wanderer JP**. Implementation of an Enhanced Recovery Protocol (ERP) is associated with an increase in the perioperative use of non-opioid multimodal analgesia for non-ERP patients. *Journal of Clinical Anesthesia*. 2020;62:109694.

Ampamya S, Kitayimbwa JM, **Were MC**. <u>Performance of an open source facial recognition system for unique patient matching in a resource-limited setting.</u> *International Journal of Medical Informatics*. 2020;141:104180.

Note that this paper was featured in a <u>Reporter article</u>

Barton MS, Spencer H, **Johnson DP**, Crook TW, Frost PA, Castillo-Galvan R, Creech CB. <u>Group B Streptococcus Meningitis in an Infant with Respiratory Syncytial Virus Detection.</u> *The Journal of Pediatrics*. 2020.

Bates DW, Auerbach A, Schulam P, **Wright A**, Saria S. <u>Reporting and Implementing Interventions Involving Machine Learning and Artificial Intelligence.</u> *Annals of Internal Medicine.* 2020;172(11\_Supplement):S137-S144.

**Cronin RM**, Yang M, Hankins JS, Byrd J, Pernell BM, Kassim A, Adams-Graves P, Thompson AA, Kalinyak K, DeBaun M, Treadwell M. <u>Association between hospital admissions and healthcare provider communication for individuals with sickle cell disease</u>. *Hematology*. 2020;25(1):229-240.

Engoren M, Seelhammer T, **Freundlich RE**, Maile MD, Sigakis MJG, Schwann TA. <u>A Comparison of Sepsis-2 (Systemic Inflammatory Response Syndrome Based) to Sepsis-3 (Sequential Organ Failure Assessment Based) Definitions—A Multicenter Retrospective Study. *Critical Care Medicine*. 2020;Online First.</u>

Gesicho MB, Babic A, **Were MC**. <u>Health Facility Ownership Type and Performance on HIV Indicator Data</u> Reporting in Kenya. *Stud Health Technol Inform*. 2020;270:1301-1302.

Gesicho MB, Babic A, **Were MC**. <u>K-Means Clustering in Monitoring Facility Reporting of HIV Indicator</u> Data: Case of Kenya. *Stud Health Technol Inform*. 2020;272:143-146.

Jelly CA, Ende H, **Freundlich RE**. <u>Terminology, communication, and information systems in nonoperating room anaesthesia in the COVID-19 era. *Curr Opin Anaesthesial*. 2020.</u>

Mekonnen ZA, Gelaye KA, **Were MC**, Tilahun B. <u>Timely completion of vaccination and its determinants</u> among children in northwest, Ethiopia: a multilevel analysis. *BMC Public Health*. 2020;20(1):908.

Ngugi PN, Gesicho MB, Babic A, **Were MC**. <u>Assessment of HIV Data Reporting Performance by Facilities</u> During EMR Systems Implementations in Kenya. *Stud Health Technol Inform*. 2020;272:167-170.

**Novak LL**, Baum HBA, Gray MH, **Unertl KM**, Tippey KG, Simpson CL, Uskavitch JR, **Anders SH**. Everyday objects and spaces: How they afford resilience in diabetes routines. *Applied Ergonomics*. 2020;88:103185.

Patel PD, Kelly KA, Reynolds RA, **Turer RW**, Salwi S, **Rosenbloom ST**, Bonfield CM, Naftel RP. <u>Tracking the</u> Volume of Neurosurgical Care during the COVID-19 Pandemic. *World Neurosurgery*. 2020.

Ramirez AH, Sulieman L, Schlueter DJ, Halvorson A, Qian J, Ratsimbazafy F, Loperena R, Mayo K, Basford M, Deflaux N, Muthuraman KN, Natarajan K, Kho A, Xu H, Wilkins C, Anton-Culver H, Boerwinkle E, Cicek M, Clark CR, Cohn E, Ohno-Machado L, Schully S, Ahmedani BK, Argos M, **Cronin RM**, O'Donnell C, Fouad M, Goldstein DB, Greenland P, Hebbring SJ, Karlson EW, Khatri P, Korf B, Smoller JW, Sodeke S, Wilbanks J, Hentges J, Lunt C, Devaney SA, Gebo K, Denny JC, Carroll RJ, Glazer D, Harris PA, Hripcsak G, Philippakis A, Roden DM. The All of Us Research Program: data quality, utility, and diversity. *medRxiv*. 2020:2020.2005.2029.20116905.

Sulieman L, Robinson JR, **Jackson GP**. <u>Automating the Classification of Complexity of Medical Decision-Making in Patient-Provider Messaging in a Patient Portal.</u> *Journal of Surgical Research.* 2020;255:224-232.

**Wanderer JP**, Nathan N. <u>Handle with Intensive Care: Frailty in the Critically III.</u> *Anesthesia & Analgesia*. 2020;130(6):1461.

Wu J, Bryan J, Rubinstein SM, Wang L, Lenoue-Newton M, Zuhour R, Levy M, Micheel C, Xu Y, Bhavnani SK, Mackey L, **Warner JL**. <u>Opportunities and Challenges for Analyzing Cancer Data at the Inter- and Intra-Institutional Levels</u>. *JCO Precision Oncology*. 2020(4):743-756.

# Reminder to Send Updates for Recognition

If you (or another VCLIC Member) publishes a paper; has an abstract accepted at a conference; are interviewed for or written up in a news article; receive any awards, accolades, or honors; or completed/are currently undertaking any projects you would like to highlight, please email me with or forward this information:

- Names of VCLIC members/VUMC staff who participated in or worked on the project, paper, or abstract (or who received the award/honor)
- The title of the Project, Paper, Abstract, Article, or Award
- The journal, conference, or news publication (this can be podcasts, radio, or more "traditional," news mediums)

Nothing is too big or too small to celebrate, and this information will be featured on the <u>News section</u> of our website as well. As time goes on, I am hoping to also improve our Twitter presence, so feel free to add, tag, or tweet us at <u>@VUMC\_VCLIC</u> too!

# Thank you, and see you next month!