<table>
<thead>
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<th>Title</th>
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<tr>
<td>Cohan, Jessica - #1931 - Identifying barriers to patient-centered decision making in older adults with diverticulitis</td>
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<tr>
<td>VPCAT 2020 Senior Mentor Selection Form</td>
<td>5</td>
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<td>VPCAT 2020 Combined PDF Application</td>
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Application Summary

Competition Details

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<tr>
<th>Competition Title:</th>
<th>2020 Vice President's Clinical and Translational (VPCAT) Research Scholars Program Application</th>
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<td>Category:</td>
<td>VPCAT</td>
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<td>Award Cycle:</td>
<td>Calendar Year</td>
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<tr>
<td>Submission Deadline:</td>
<td>09/27/2019 at 5:10 PM</td>
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Application Information

<table>
<thead>
<tr>
<th>Submitted By:</th>
<th>AUSTIN STEVENS</th>
</tr>
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<td>Application ID:</td>
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<td>Identifying barriers to patient-centered decision making in older adults with diverticulitis</td>
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<td>09/27/2019 at 4:48 PM</td>
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Personal Details

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<tr>
<th>uNID (U of U ID number/u00000000):</th>
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<tbody>
<tr>
<td>Applicant First Name:</td>
<td>Jessica</td>
</tr>
<tr>
<td>Applicant Middle Initial:</td>
<td>N</td>
</tr>
<tr>
<td>Applicant Last Name:</td>
<td>Cohan</td>
</tr>
<tr>
<td>Applicant Alias (i.e., Name Applicant Prefers to Go By):</td>
<td>Jess Cohan</td>
</tr>
<tr>
<td>Applicant Degree(s):</td>
<td>M.D., M.A.S.</td>
</tr>
<tr>
<td>Academic Rank (i.e., Primary Appointment Title):</td>
<td>Assistant Professor</td>
</tr>
<tr>
<td>If selected &quot;Other Title,&quot; please designate your Primary Appointment Title:</td>
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</tr>
<tr>
<td>Secondary Appointment Title (i.e., clinic director, chair, chief, etc.):</td>
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</tr>
<tr>
<td>Academic Track:</td>
<td>Tenure Line</td>
</tr>
<tr>
<td>College or School:</td>
<td>Medicine</td>
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<tr>
<td>Department:</td>
<td>Surgery</td>
</tr>
<tr>
<td>Division:</td>
<td>General Surgery</td>
</tr>
<tr>
<td>Email Address:</td>
<td><a href="mailto:jessica.cohan@hsc.utah.edu">jessica.cohan@hsc.utah.edu</a></td>
</tr>
<tr>
<td>Work Phone Number:</td>
<td></td>
</tr>
<tr>
<td>Cell Phone Number:</td>
<td></td>
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<td>Month of Birth:</td>
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<td>Day of Birth:</td>
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<td>Question</td>
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<td>Year of Birth:</td>
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<td></td>
</tr>
<tr>
<td>eRA Commons UserID:</td>
<td>cohanj</td>
</tr>
<tr>
<td>ORCID Identifier # (if applicant does not have an ORCID, please register for a unique ID via <a href="http://www.orcid.org">www.orcid.org</a>):</td>
<td>0000-0002-5461-4716</td>
</tr>
<tr>
<td>Gender Identification:</td>
<td></td>
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<tr>
<td>Ethnicity:</td>
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<tr>
<td>Race:</td>
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<tr>
<td>Do you have a disability (NIH defines individuals with disabilities as those with a physical or mental impairment that substantially limits one or more major life activities):</td>
<td></td>
</tr>
<tr>
<td>Are you from a disadvantaged background? (see NIH NOT-OD-15-053 for definition):</td>
<td></td>
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<tr>
<td>Separating each with a semicolon, list up to 5 key SCIENTIFIC TERMS aligned to your research interests that we could use to search for funding opportunities via online systems (i.e., Grants.gov, NIH, Pivot, etc.).:</td>
<td>Shared decision making; colorectal surgery; patient-reported outcomes; diverticulitis; quality of life</td>
</tr>
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<td>Separating each with a semicolon, list up to 5 FUNDING AGENCIES you are interested in submitting an application for funding considerations. NOTE: if you are interested in the National Institute of Health (NIH), provide the name of the specific institute.:</td>
<td>NIA; NIDDK; PCORI; ASCRS; ACS</td>
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<tr>
<td>Are you a Scholar in one of the following programs?:</td>
<td>None of the Above</td>
</tr>
<tr>
<td>Administrative Assistant First Name:</td>
<td>Cheri</td>
</tr>
<tr>
<td>Administrative Assistant Last Name:</td>
<td>Peyton</td>
</tr>
<tr>
<td>Administrative Assistant Email:</td>
<td><a href="mailto:cheri.peyton@hsc.utah.edu">cheri.peyton@hsc.utah.edu</a></td>
</tr>
<tr>
<td>Administrative Assistant Phone #:</td>
<td>801-585-9670</td>
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</table>
Identifying barriers to patient-centered decision making in older adults with diverticulitis

Scientific Mentor Unid (U of U ID number/ u0000000. If none, list "Not Applicable")

Scientific Mentor First Name
Elissa

Scientific Mentor Middle Initial
M

Scientific Mentor Last Name
Ozanne

Scientific Mentor Alias (i.e., Name Mentor Prefers to Go By)
Elissa Ozanne

Scientific Mentor Degree(s)
PhD

Scientific Mentor Academic Rank (i.e., Primary Appointment Title)
Associate Professor

If selected "Other Title," please designate Mentor's Primary Appointment Title

Scientific Mentor Secondary Appointment Title (i.e., clinic director, chair, chief, etc.)
Scientific Mentor College or School
School of Medicine

Scientific Mentor Department
Population Health Sciences

Scientific Mentor Division
Health System Innovation and Research

Scientific Mentor Email Address
Elissa.Ozanne@hsc.utah.edu

Scientific Mentor Work Phone Number

Scientific Mentor eRA Commons UserID
eozanne

Scientific Mentor ORCID Identifier # (if mentor does not have an ORCID, please register for a unique ID via www.orcid.org)
0000-0001-5352-9459

Comments to Competition Coordinators

Acknowledgment

Applicant Acknowledgement Statement
[Acknowledged] As an applicant to the Vice President's Clinical and Translational (VPCAT) Research Scholars Program, I acknowledge that everything I have written and included within my application is a true and accurate representation of the work that I have done and aim to do if chosen to be a part of the program. I acknowledge that my application will be reviewed by VPCAT Senior mentors. I understand that upon submission, I will not be allowed to make any further changes to my application.
September 27, 2019

Michael A. Rubin, MD, PhD, MS
Director, VPCAT Program
University of Utah Health
Office of Academic Affairs and Faculty Development
HSEB 5515

Dear Dr. Rubin,

I am writing to express my enthusiasm and sincere interest in being considered for the 2020 class of the Vice President's Clinical and Translational (VPCAT) Research Scholar's Program with my proposal "Identifying Barriers to Patient-Centered Decision Making for Older Adults with Diverticulitis". I am a colorectal surgeon with a passion for improving the quality and scope of clinical research. My long-term career goal is to become an independent clinical researcher who uses clinical trials and implementation science to successfully disseminate large-scale programs that improve the surgical care of older adults. I have a track record of successful grant funding and publications that demonstrate my commitment to performing high-impact clinical research and have reached a point in my career where with the support of the VPCAT program will provide the critical support necessary to launch my successful transition to NIH funding. I propose a two-year mentoring, research, and training program that will allow me to establish a foundation in grant writing, leadership, and relevant research methodologies. As a result of the VPCAT program, I will be well positioned to successfully apply for an NIA K76 Beeson Career Development Award.

My background in advanced clinical research training and experience will provide the foundation for my success as a VPCAT scholar. During my general surgery residency at UCSF, I obtained a Master's degree in Clinical Research through the UCSF Department of Epidemiology and Biostatistics. This program was specifically designed to train physicians, like myself, who were interested in an academic research career in clinical medicine. My coursework included advanced study in research design, epidemiology, biostatistics, and STATA programming. During these two years, I was funded by a Crohn's and Colitis Foundation of America Research Fellowship Award and the American Society of Colon and Rectal Surgeons Resident Research Initiation Grant and received mentorship from Dr. Ozanne (primary research mentor) who was faculty in the Institute for Health Policy Studies at UCSF at this time. My prior work focused on shared decision making for ulcerative colitis and the impact of age and frailty on outcomes in colorectal surgery. This work resulted in a total of 8 manuscripts (7 first author) as well as a number of podium presentations at national meetings, including one manuscript and podium presentation with Dr. Ozanne.

I am now a board-certified general surgeon with subspecialty training in Colorectal Surgery and advanced training in clinical research. I began my first year as Assistant Professor of Surgery at the University of Utah in September 2018. In my current position, I have 50% protected time for research and professional development that is funded by the Department of Surgery (see Table). In addition, I have support from my department to obtain additional age-related, research, and leadership training. I also receive per year in professional development funds. In addition, the Department supports my time to attend professional development activities, including the Association for Academic Surgery Early Career Development Course in October 2019, which I will attend as the recipient of the American Society of Colon and Rectal Surgeons Training Award.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Effort</th>
<th>Description</th>
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<tr>
<td>Research and Professional</td>
<td>50%</td>
<td>• Grant writing</td>
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<tr>
<td>Development</td>
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<td>• Research conduct and dissemination</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Research and academic training</td>
</tr>
<tr>
<td>Clinical Responsibilities</td>
<td>45%</td>
<td>• Evaluating patients in clinic (1.5d/wk)</td>
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<tr>
<td></td>
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<td>• Performing surgery (1d/week)</td>
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<td>• Weekend call (every 8 weeks)</td>
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<tr>
<td>Administrative Responsibilities</td>
<td>5%</td>
<td>• Educating students and residents</td>
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<td>• Hospital quality improvement</td>
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DEPARTMENT OF SURGERY
I am fortunate to have a talented, diverse, and dedicated team of mentors that contribute distinct and complementary skills to my research and career development. Dr. Elissa Ozanne, my Primary Research Mentor, is Associate Professor in Population Health Sciences with an extensive track record in mentoring and extramural funding and expertise in decision science. She and I have worked closely together since 2013 when she was faculty at UCSF and I was a general surgery resident. This resulted in an extremely academically productive relationship, as described above. She will continue to provide dedicated mentorship in qualitative methods, decision science, and academic development and will continue weekly meetings. Dr. Benjamin Brooke, a Co-Mentor, is Associate Professor of Surgery and Chief of the Health Services Research Section within the Department of Surgery. He and I have worked closely in my surgical and research development since I began my faculty appointment and will provide invaluable guidance in my surgical professional development and becoming a leader in aging-related surgical research by continuing our twice-monthly meetings. My other Co-Mentor is Dr. Angela Fagerlin, Professor and Chair of the Department of Population Health Sciences. She has extensive academic mentorship experience, including junior faculty who have successfully attained career development awards and transitioned to independent R01-level funding. In addition, she has expertise in the survey methods used in this study. We will continue to meet monthly. Together, my entire mentorship team and I will meet at least twice yearly to assure that I am on track in meeting my professional development milestones and deliverables as described in the enclosed application.

I now propose to build upon my prior work by performing the mixed-methods research required to inform a high-impact tool to support patient-centered decision making for older adults making decisions about surgery. In order to fund this research, I submitted a proposal for the NIA Grants for Early Medical/Surgical Specialists’ Transition to Aging Research (GEMSSTAR) R03 on October 2, 2019. The professional development plan that is required for the GEMSSTAR includes Dr. Ozanne as the Primary Research Mentor and Dr. Brooke as the Surgical Specialty Mentor. In addition, I received intramural funding through the University of Utah Center on Aging Pilot Grant Program that will fund a complementary study to evaluate population-level diverticulitis disease and treatment patterns in older adults. This grant includes Drs. Ozanne and Brooke as Co-Investigators.

My training thus far has provided me with expertise in statistical methodology and clinical research design that has served me well in my development as a surgeon-scientist. Now having completed my first year as faculty at the University of Utah, my clinical work has inspired my strong passion for improving surgical care for older adults. I have established important mentorship relationships and continue to increase my experience in grant funding and research to support my successful transition to a career development award (NIA Beeson K76) with a clear plan for my eventual development into an independent clinical researcher and implementation scientist who successfully disseminates large-scale programs that improve the surgical care of older adults. This VPCAT proposal is complementary to my current research endeavors and will provide focused mentorship and training in mixed-methods research to facilitate attainment of my career goals. I am excited for the opportunity leverage the vast resources available through the VPCAT program and to work with an interdisciplinary team of successful and well-trained mentors who will guide my professional development. Thank you for considering my application.

Sincerely,

A.S.
Assistant Professor, Department of Surgery
Adjunct Assistant Professor, Department of Population Health Sciences
University of Utah
Curriculum Vitae

PERSONAL DATA
Name: Jessica N. Cohan

EDUCATION
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<th>Years</th>
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<th>Institution (Area of Study)</th>
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<td>2017 - 2018</td>
<td>Fellow</td>
<td>Lahey Hospital and Medical Center (Colorectal Surgery)</td>
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<td>Burlington, MA</td>
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<td>2013 - 2015</td>
<td>M.A.S.</td>
<td>University of California San Francisco (Clinical Research)</td>
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<td></td>
<td>San Francisco, CA</td>
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<tr>
<td>2013 - 2015</td>
<td>Fellow</td>
<td>University of California San Francisco, Philip R. Lee Institute for Health Policy Studies (Health Policy)</td>
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<td></td>
<td></td>
<td>San Francisco, CA</td>
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<tr>
<td>2010 - 2017</td>
<td>Resident</td>
<td>University of California, San Francisco School of Medicine (General Surgery)</td>
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<tr>
<td></td>
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<td>San Francisco, CA</td>
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<td>2006 - 2010</td>
<td>M.D.</td>
<td>Weill Cornell Medical College (Medicine)</td>
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<td>New York, NY</td>
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<tr>
<td>2001 - 2005</td>
<td>B.S.</td>
<td>California Polytechnic State University (Microbiology)</td>
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<td>San Luis Obispo, CA</td>
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BOARD CERTIFICATIONS
10/17/2017 - Present American Board of Surgery, Certified

CURRENT LICENSES/CERTIFICATIONS
2018 - Present Utah: State License - Physician (MD)
2012 - Present DEA Certificate

UNIVERSITY OF UTAH ACADEMIC HISTORY
Population Health Sciences (Health System Innovation and Research), 01/01/2019 - Present
01/01/2019 New Hire, Adjunct Track, Adjunct Assistant Professor

Surgery (General Surgery), 09/01/2018 - Present
09/01/2018 New Hire, Tenure Track, Assistant Professor

PROFESSIONAL EXPERIENCE
Full-Time Positions
2018 - Present Assistant Professor of Surgery, University of Utah, Salt Lake City, UT
2018 - Present Assistant Professor of Surgery, Huntsman Cancer Institute, Salt Lake City, UT

Reviewer Experience
Member, Reviewer's Guild, *Diseases of the Colon and Rectum*

Reviewer for *Annals of Surgery*

**SCHOLASTIC HONORS**

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<td>American Society of Colon and Rectal Surgeons Training Award In Research Methodology</td>
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<td>2018</td>
<td>First Place Poster Presentation, Postgraduate Recognition Day, Lahey Hospital &amp; Medical Center, Burlington, MA</td>
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<td>2017</td>
<td>The Lawrence W. Way Critical Thinking Award, University of California San Francisco</td>
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<td>2017</td>
<td>Haile T. Debas Resident Teaching Award, University of California San Francisco</td>
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<td>2015</td>
<td>Best of Digestive Disease Week, Digestive Disease Week Annual Meeting</td>
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<td>2015</td>
<td>Best Clinical Science Presentation, J. Engelbert Dunphy Resident Research Symposium, University of California San Francisco</td>
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<td>2015</td>
<td>Poster of Distinction Award, American Society of Colon and Rectal Surgeons Annual Scientific Meeting, Boston, MA</td>
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**ADMINISTRATIVE EXPERIENCE**

**Administrative Duties**

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<td>Associate Member, Cancer Center, Huntsman Cancer Institute</td>
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<td>2019 - 2020</td>
<td>Surgeon Panelist, Patient Reported Outcomes after Pouch Surgery (PROPS) Study, Massachusetts General Hospital</td>
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<td>2019 - Present</td>
<td>Liaison Physician, American College of Surgeons Commission on Cancer, Huntsman Cancer Institute</td>
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<td>2019 - 2024</td>
<td>Member, Clinical Advisory Group, Comparison of Surgery and Medicine in the Impact of Diverticulitis (COSMID) Trial, University of Washington</td>
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<td>2019 - Present</td>
<td>Member, Cancer Therapies Evaluation Program, Huntsman Cancer Institute</td>
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<td>2019 - Present</td>
<td>Member, SWOG</td>
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<td>2018 - Present</td>
<td>Liaison Physician, Surgical Research Network, Crohn's and Colitis Foundation of America</td>
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**Professional Organization & Scientific Activities**

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<td>2019 - 2021</td>
<td>Elected Councilor, Executive Council, Association for Academic Surgery</td>
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<td>2019</td>
<td>ePoster Moderator, American Society of Colon and Rectal Surgeons</td>
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<tr>
<td>2018 - Present</td>
<td>Committee Member, American Society of Colon and Rectal Surgeons, Young Surgeons Committee</td>
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<td>2018 - Present</td>
<td>Committee Member, American Society of Colon and Rectal Surgeons, Healthcare Economics Committee</td>
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<tr>
<td>2014</td>
<td>Panelist, American College of Surgeons, Applying to Residency</td>
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**PROFESSIONAL COMMUNITY ACTIVITIES**

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<tbody>
<tr>
<td>2018</td>
<td>Panel Participant &amp; Speaker, Crohn's &amp; Colitis Foundation of America, Inflammatory Bowel Disease Patient Education Symposium. Topics: Surgery for Inflammatory Bowel Disease and Shared Decision Making</td>
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</table>
UNIVERSITY COMMUNITY ACTIVITIES

College Level
2018 - Present Member, College of Nursing, Patient Communications Research Innovation Team

Department Level
2019 - Present Member, Surgery, Resident Career and Development Year Committee

University Level
2019 - Present Member, University of Utah Center for Genomic Medicine
2019 - Present Member, University of Utah Center on Aging

SERVICE AT PREVIOUS INSTITUTIONS
2013 - 2015 Member, University of California, San Francisco School of Medicine, Department of Surgery Program Evaluation Committee
2013 - 2015 Coordinator, University of California, San Francisco School of Medicine, Department of Surgery Moonlighting Program
2010 - 2017 Member, University of California, San Francisco School of Medicine, Surgery Education Counsel
2010 - 2012 Resident Champion, University of California, San Francisco School of Medicine, Pager Forwarding Program

CURRENT MEMBERSHIPS IN PROFESSIONAL SOCIETIES
American College of Surgeons
American College of Surgeons: Utah Chapter
American Geriatrics Society
American Society of Colon and Rectal Surgeons
Association for Academic Surgery
Midwest Society of Colon and Rectal Surgeons
New England Society of Colon and Rectal Surgeons
Society for Surgery of the Alimentary Tract

FUNDING
Active Grants
07/01/2019 - 06/30/2021 Utah Cancer Action Network Implementation Grant
Title: Leveraging an existing mobile health clinic to decrease structural and financial barriers to colorectal cancer screening
Principal Investigator(s): Jessica N. Cohan; Sheetal Hardikar
Direct Costs: $44,000 Total Costs: $44,000
Role: Co-Principal Investigator

07/01/2019 - 06/30/2020 Center on Aging Pilot Grant Program
Title: Disease and Treatment Patterns in Older Adults with Diverticulitis
Principal Investigator(s): Jessica N. Cohan
Co-Investigators: Elissa Ozanne, Benjamin Brooke, Andrea Wallace
Direct Costs: $20,000 Total Costs: $20,000
University of Utah Center on Aging

Role: Principal Investigator

11/20/2018 - 11/20/2024
PCORI Pragmatic Clinical Studies to Evaluate Patient-Centered Outcomes Title: Comparison of Surgery and Medicine on the Impact of Diverticulitis (COSMID) Trial
Study Principal Investigator(s): David Flum
Direct Costs: $10,754,323 Total Costs: $10,754,323
Patient-Centered Outcomes Research Institute
Role: Site Principal Investigator, University of Utah

Pending Grants

10/2019
NIA Grants for Early Medical/Surgical Specialists’ Transition to Aging Research (GEMSSTAR) R03
Principal Investigator(s): Jessica N. Cohan
Direct Costs: $200,000 over 2 years
National Institutes of Health, National Institute on Aging
Role: Principal Investigator

Past Grants

06/01/2019 - 08/31/2019
Cohan ASCRS MSRIG Mar2019
Principal Investigator(s): Jessica N. Cohan
Role: Principal Investigator

05/01/2019 - 07/31/2019
NIH Medical Student Research program Title: Bowel Preparation for Colorectal Surgery: What Matters to Patients?
Direct Costs: $4,000 Total Costs: $4,000
Role: Research Mentor

10/01/2014 - 09/30/2015
Surgical Decision Making in Ulcerative Colitis: The Patient Perspective
Principal Investigator(s): Jessica N. Cohan
Direct Costs: $20,000 Total Costs: $20,000
American Society of Colon and Rectal Surgeons
Role: Principal Investigator

07/01/2014 - 06/30/2015
Implementation and Effectiveness of a Decision Aid for Ulcerative Colitis Patients Considering Surgery
Principal Investigator(s): Jessica N. Cohan
Direct Costs: $58,250 Total Costs: $58,250
Crohn’s & Colitis Foundation of America
Role: Principal Investigator

01/01/2014 - 12/31/2014
A Multi-Lingual Decision Aid for Surgical Patients with Ulcerative Colitis
Principal Investigator(s): Jessica N. Cohan
Direct Costs: $2,000 Total Costs: $2,000
University of California, San Francisco
Role: Principal Investigator

TEACHING RESPONSIBILITIES/ASSIGNMENTS
Courses Directed

2012 - 2013
Course Director, Dr. Schecter’s Clinical Surgery Conference, University of California, San Francisco School of Medicine
2011 - 2012 Assistant Course Director, Dr. Schecter’s Clinical Surgery Conference, University of California, San Francisco School of Medicine

**Course Lectures**

2015 Teaching Assistant, Biostatistical Methods for Clinical Research III, University of California, San Francisco School of Medicine

2014 - 2015 Instructor, Coda: Internship Transition Course for MS4 Students, University of California, San Francisco School of Medicine

**Clinical Teaching**

2018 - Present Weekly Colorectal and Abdominal Surgery Conference, University of Utah, General Surgery Residency Program

**Trainee Supervision**

**Resident**

2019 - Present Career Mentor, Megan Zac, University of Utah

2019 - Present Career Mentor, Emily Adams, University of Utah

2019 - Present Research and Career Mentor, Maranda Pahlkotter, University of Utah

**Medical Student**

2019 Research Mentor, Federica Brecha, University of Utah, Medical Student Research Program

**Didactic Lectures**

2019 Cohan JN. Diverticulitis: A Common Disease with Unanswered Questions. Emergency Medicine Division Meeting, University of Utah, Salt Lake City, UT

**Internal Teaching Experience**

2014 - 2015 Grant-writing workshop, University of California, San Francisco School of Medicine, Residents

**PEER-REVIEWED JOURNAL ARTICLES**


**REVIEW ARTICLES**


**BOOK CHAPTERS**


**CASE REPORTS**


**EDITORIALS**


**POSTER PRESENTATIONS**

2019  
**Cohan JN, Hofer RK, Kelley YM, Finlayson EF. “It Was My Decision”: A Qualitative Analysis of Surgical Decision-making in Patients with Ulcerative Colitis.** Poster session presented at American Society of Colon and Rectal Surgeons Annual Scientific Meeting, Cleveland, Ohio.

2019  
Esplin J, Huang L, **Cohan JN**, Savarise M, Kapingst K. *Rural Patient Experiences Managing Pain and Opioids After Surgery*. Poster session presented at the Utah Chapter of the American College of Surgeons, Salt Lake City, UT

2018  
**Cohan JN, Donahue C, Pantel HJ, Ricciardi R, Breen EM, Francone TD, Hall JF, Kleiman DA, Read TE, Roberts PL, Rusin LC, Marcello PW. How should advanced neoplastic polyps be managed? An appeal for an Endoscopic Step Up approach.** Poster session presented at American Society of Colon and Rectal Surgeons Annual Scientific Meeting, Nashville.

2015  
**Cohan JN, Ozanne EM, Sewell JL, Mahadevan U, Dohan D, Varma MG, Finlayson E. A Surgical Decision Aid for Patients with Ulcerative Colitis.** Poster session presented at American Society of Colon and Rectal Surgeons Annual Scientific Meeting.
**Comparison of obstructive defecation and colonic inertia subtypes in patients with constipation.** Poster session presented at American Society of Colon and Rectal Surgeons Annual Scientific Meeting.

**Male fecal incontinence: who is seeking evaluation and treatment?** Poster session presented at American Society of Colon and Rectal Surgeons.

**Determinants of Poor Quality of Life in Patients with Double Incontinence.** Poster session presented at American College of Surgeons Clinical Congress, San Francisco, CA.

**Pineal parenchymal tumor of intermediate differentiation with papillary features: a continuum of primary pineal tumors?** Poster session presented at Weill Cornell Medical College 2010 Medical Student Research Day, New York City.

**ORAL PRESENTATIONS**

**Meeting Presentations**

**National**

2019 Huang LC, Esplin J, **Cohan JN**, Savarise M, Kaphingst KA. Rural Patient Experiences Managing pain and Opioids after Surgery. American College of Surgeons, San Francisco, Ca

2019 Pantel H, Donahue C, **Cohan JN**, Marcello PW. Double channel endoscopy, a useful approach to advanced endoscopic polypectomy. American Society of Colon and Rectal Surgeons Annual Scientific Meeting. Cleveland, OH.


**Local/Regional**


2014 **Cohan JN**, Nosova E, Chong K, Alley H, Owens C, and Grenon SM. Depression and peripheral arterial disease: is physiology the link? University of California San Francisco, Engelbert Dunphy Resident Research Symposium, San Francisco, CA, USA.

**Invited/Visiting Professor Presentations**

Cohan, Jessica - #1931 14 of 47
### Local/Regional

<table>
<thead>
<tr>
<th>Year</th>
<th>Author</th>
<th>Title</th>
<th>Event</th>
<th>Location</th>
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<tbody>
<tr>
<td>2019</td>
<td>Cohan JN, Hardikar S.</td>
<td>Implementation to overcome colorectal cancer screening barriers in Utah.</td>
<td>Utah Cancer Action Network Conference.</td>
<td>Salt Lake City, UT</td>
</tr>
<tr>
<td>2019</td>
<td>Cohan JN</td>
<td>University of Utah School of Medicine Women Empowering Women in Leadership Workshop.</td>
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<td>Salt Lake City, UT</td>
</tr>
<tr>
<td>2019</td>
<td>Cohan JN, Hardikar S.</td>
<td>Leveraging an existing mobile health clinic to decrease structural and financial barriers to colorectal cancer screening.</td>
<td>Utah Cancer Action Network Quarterly Meeting.</td>
<td>Salt Lake City, UT, USA</td>
</tr>
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<td>2019</td>
<td>Cohan JN</td>
<td>Developing Decision Support for Patients Considering Elective Surgery for Diverticulitis.</td>
<td>Health System Innovation and Research Program at the University of Utah.</td>
<td>Salt Lake City, Utah</td>
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<tr>
<td>2019</td>
<td>Cohan JN</td>
<td>Developing a decision support tool for diverticulitis: specific aims and grant strategy.</td>
<td>University of Utah Department of Surgery U-INQUIRE.</td>
<td>Salt Lake City, UT, USA</td>
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<tr>
<td>2016</td>
<td>Cohan JN</td>
<td>Shared Surgical Decision Making: The patient, the surgeon, and a decision aid.</td>
<td>Philip R. Lee Institute for Health Policy, San Francisco, CA</td>
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### Training

<table>
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<tr>
<td>2019</td>
<td>AAS Career Development Course</td>
</tr>
<tr>
<td>2019</td>
<td>AAS/SUS Surgical Investigator's Course</td>
</tr>
</tbody>
</table>
1. CAREER PLAN

a. Career Statement: My career goal is to improve surgical care for older adults by designing high-impact interventions that increase patient-centered decision making. By the end of my career, I plan to become a leader who uses clinical trials and implementation science to successfully disseminate large-scale programs that improve care of older adults.

b. Career Goals and Objectives: I am a board-certified general surgeon with subspecialty training in Colorectal Surgery and advanced training in clinical research. I began my first year as Assistant Professor of Surgery with an academic appointment that includes a clinical practice in colorectal surgery with 50% protected time for research activities. My prior research focused on improving shared decision making in surgery and improving surgical care by optimizing patient reported outcomes. Now at the University of Utah, my clinical career has inspired me to engage in research to optimize the surgical care of older adults. As my research interests are expanding into a new focus on aging using mixed methods approaches, this proposal is complementary to my current research endeavors and will provide focused training in gerontology and mixed methods research, as well as focused efforts to improve my grant writing, and leadership skills to facilitate my future career. My mentorship team and I have designed the following 2-year research and training program, focused on achieving my career goals (Table 2). I submitted a Grants for Early Medical/Surgical Specialists’ Transition to Aging Research (GEMSSTAR) to the NIA on October 2, 2019. This is a unique R03 with a professional development plan, which if funded will complement my career plan as detailed below.

Goal 1: Broaden my research training. I have already completed advanced training in research design, epidemiology, and biostatistics through my Master's degree in Clinical Research, which I obtained at UCSF through the Department of Epidemiology and Biostatistics. I will gain additional training in clinical trials and implementation science during my K-award, when these courses will be more applicable. During my VPCAT scholarship, I will focus my efforts in coursework focused on skills needed to successfully conduct the aging-related, survey, and mixed-methods research applicable to the current research proposal (Table 1).

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Credits</th>
<th>Course Instructor</th>
<th>Enrollment</th>
<th>Format</th>
<th>Department</th>
<th>Funding</th>
</tr>
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<tr>
<td>GERON 6003: Research in Aging</td>
<td>3</td>
<td>Dr. Michael Caserta</td>
<td>Spring 2021</td>
<td>Online</td>
<td>Gerontology Program</td>
<td>Department of Surgery</td>
</tr>
<tr>
<td>PHS 735: Qual and Mixed Methods</td>
<td>2</td>
<td>Dr. Susan Zickmund, Dr. Megan Vanneman</td>
<td>Fall 2021</td>
<td>In-person</td>
<td>Population Health Sciences</td>
<td>VPCAT</td>
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<tr>
<td>MDCRC 622: Survey Methods</td>
<td>2</td>
<td>Dr. Lenora Olson</td>
<td>Spring 2021</td>
<td>In-person</td>
<td>Medicine Clinical Research Center</td>
<td>VPCAT</td>
</tr>
</tbody>
</table>

Goal 2: Improve my manuscript and grant writing skills. I plan to submit 1-2 first-author peer-reviewed publications in high-impact geriatric and surgical journals per year (see proposed titles for manuscripts expected to result from the GEMSSTAR in table below). My mentors will work with me during the entire course of the conduct of research to ensure high-quality and high-impact publications. To gain additional training and experience, I will attend in the University of Utah Grant Writing Academy at Deer Valley, a 2.5-day intensive program in October 2020 to focus on the successful preparation of NIH-style proposals. The department of surgery will support my attendance at this course. I will use the course to develop a successful Beeson K76 Career Development Award proposal. I will continue to attend and present at the K-club, a monthly lunchtime meeting sponsored by CCTS for early-career clinical and translational researchers where I will have the opportunity to present my own K application and learn from other K-applicants. The Reviewer's Guild for the journal Diseases of the Colon and Rectum (DCR) is a group of junior surgeon-investigators with exceptional potential for a career in academic colon and rectal surgery. I was selected to participate in March, 2019 for this ongoing program through the DCR Editorial office that involves 1) structured training in peer review and 2) individual mentorship in manuscript review to develop the next generation of reviewers and leaders in the field. Through this program I perform mentored manuscript review every 1-2 months. Finally, the Department of Surgery has already demonstrated commitment to my training by providing the time and financial support for me to attend the Association for Academic Surgeons Surgical Investigator's Course (a 2-day intensive grant writing course that I took in February 2019) as well as the 1-day CCTS Grant Writer's Seminar (I will attend this on October 4, 2019).
**Goal 3: Develop my presentation skills and become a leader in academic surgery.** I will present my research at 2 or more national meetings per year (Table 2). My mentorship team will work with me to compose high quality, focused, and concise presentations of my work. I currently have an abstract accepted for presentation at the American College of Surgeons Clinical Congress in October 2019, an abstract under review for the Academic Surgical Congress in February 2020, and abstracts in preparation for submission for the Digestive Diseases Week in May 2020 and the American Society of Colon and Rectal Surgeons Annual Scientific Meeting in June 2020. In addition, I am committed to becoming a leader in my field and have developed a training plan to achieve this goal. I am the 2019 recipient of the American Society of Colon and Rectal Surgeons Training Award which will support my attendance of the Association for Academic Surgery Early Career Development Course. This 1-day course focuses on skills needed to 1) advance along promotion and tenure tracks, 2) develop and sustain mentoring relationships, 3) build and manage a research team, and 4) obtain and sustain research funding. I plan to obtain additional leadership training through the Health Sciences Leadership Seminar: Foundations of Leadership. This 3-day course is interactive and experiential, focusing on fundamentals for high performing leaders, managing conflict, managing difficult negotiations, and communicating in an effective and engaging manner. Tuition for this course will be paid for by the Department of Surgery. I will continue and expand my current active involvement in national surgical societies, including my current service as an elected Councillor for the Association for Academic Surgery and committee member for the American Society for Colon and Rectal Surgeons Young Surgeons and Healthcare Economics Committees. In addition, I serve as a Physician Liaison to the American College of Surgeons Commission on Cancer.

**Summary:** The training and career development activities made possible through the VPCAT program will be instrumental to establishing my career as a surgical leader in research that aims to improve care for older adults. The skills gained and the manuscripts produced as a result of this award will prepare me to submit an NIA K76 and subsequent NIA R01 and to be highly competitive for other career development funding. This proposed project will be a critical step toward my goal of becoming a leading independent surgeon-scientist in aging-related surgical research.

**Table 2. Summary of Research and Professional Development Plan for VPCAT Award**

<table>
<thead>
<tr>
<th>Activity</th>
<th>VPCAT Year 1</th>
<th>VPCAT Year 2</th>
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<tbody>
<tr>
<td>Professional Development Plan</td>
<td>Q1</td>
<td>Q2</td>
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<tr>
<td>Complete Mentorship Team Meetings</td>
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<td>🟢</td>
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<tr>
<td>Individual Mentor Meetings</td>
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<tr>
<td>GERON 6003: Research Methods in Aging</td>
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<tr>
<td>MDCRC 622: Survey Methods</td>
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<td>PHS 735: Qualitative and Mixed Methods</td>
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<tr>
<td>University of Utah Grant Writing Course</td>
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<td>University of Utah Health Sciences Leadership Program</td>
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<tr>
<td>External Funding Application Plan</td>
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<tr>
<td>NIA GEMSSTAR Re-submission (if necessary)</td>
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<td>NIA K76 Submission</td>
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<tr>
<td>Research Plan</td>
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<tr>
<td>Aim 1. Characterize patient and provider treatment goals and their expression</td>
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<tr>
<td>Aim 2. Identify barriers to patient-centered decision making</td>
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<tr>
<td>Publication Plan</td>
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<tr>
<td>Treatment goals in older adults with diverticulitis and their providers</td>
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<tr>
<td>Patient-provider communication regarding high risk surgery for diverticulitis</td>
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<tr>
<td>Barriers to patient-centered decision making in older adults with diverticulitis</td>
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<tr>
<td>Meeting Attendance and Potential Abstract Presentation</td>
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<tr>
<td>American College of Surgeons</td>
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<tr>
<td>University of Utah Center on Aging Research Retreat</td>
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<td>American Society of Colon and Rectal Surgeons</td>
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<tr>
<td>American Geriatrics Society</td>
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**2. SCIENTIFIC MENTORING PLAN**

I have assembled a talented, diverse, and dedicated team and have the institutional support to ensure the success of the proposed work. My mentors contribute distinct and complementary skills to my research and career development, are individually committed to meeting with me regularly, and will meet as a group twice per year to ensure that my professional and research development is optimized.
Table 3: Scientific Mentoring Team

<table>
<thead>
<tr>
<th>Mentor/Advisor</th>
<th>Role</th>
<th>Content Areas</th>
<th>Meetings</th>
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<tbody>
<tr>
<td>Elissa Ozanne, PhD</td>
<td>Primary Research Mentor</td>
<td>• Patient decision making research • Academic professional development</td>
<td>Weekly</td>
</tr>
<tr>
<td>Ben Brooke, MD PhD</td>
<td>Co-Mentor</td>
<td>• Aging-related research in surgery • Surgical professional development</td>
<td>Twice Monthly</td>
</tr>
<tr>
<td>Angela Fagerlin, PhD</td>
<td>Co-Mentor</td>
<td>• Psychology of decision making • Survey-based research</td>
<td>Monthly</td>
</tr>
</tbody>
</table>

Primary Research Mentor: Elissa Ozanne, PhD is Associate Professor in the Department of Population Health Sciences and a decision scientist at the University of Utah. She has published over 75 peer-reviewed manuscripts, received funding from the NCI, PCORI, American Heart Association (AHA), NCCN, and the Komen Foundation, and currently serves as project PI for a six-site AHA/PCORI RCT to implement and disseminate shared decision making interventions for atrial fibrillation. She has co-mentored 3 trainees on career development awards, 2 of whom have successfully transitioned to R-level extramural funding and provided individual mentorship to over 25 mentees at various levels on qualitative and medical decision-making studies. She has been my primary research mentor since 2013 and as my primary academic professional development mentor since I joined the faculty at the University of Utah. Under her mentorship, I have received internal and extramural research funding from the Crohn’s and Colitis Foundation of America and American Society of Colon and Rectal Surgeons, and the University of Utah Center on Aging, published peer-reviewed research in Diseases of the Colon and Rectum, and presented at national conferences including Digestive Disease Week and the American Society of Colon and Rectal Surgeons (ASCRS) Annual Scientific Meeting. We currently have an abstract under review for the 2020 Academic Surgical Congress, an abstract in preparation for the 2020 ASCRS meeting, and a manuscript in preparation to submit to Medical Decision Making. I will be a co-investigator on her two upcoming R01 proposals. Dr. Ozanne has expertise in the study of patient and provider decision making including the qualitative and survey methods proposed in this study. She will provide invaluable guidance in study execution and data interpretation as well as detailed review of my proposed manuscripts and grant applications (Table 1). She will continue to provide detailed mentorship for my career development, including my future grant applications. We currently meet weekly and plan to continue weekly meetings throughout the scholarship period.

Co-Mentor: Benjamin Brooke, MD, PhD is Chief of the Division of Vascular Surgery and Section Chief of the Health Services Research Section at the University of Utah. His research focuses on developing innovative care coordination models for older high-risk surgical patients during transitions of care. He has been my surgical mentor since I began my faculty appointment at the University of Utah. He has been a mentor on 2 prior grant proposals and is a co-investigator on my funded Center on Aging Pilot Grant Award. We have an abstract in preparation for the 2020 ASCRS Meeting. He will be instrumental in helping me integrate my surgical expertise with my new focus in aging-related research and in my development as a leader in surgery. We currently meet twice monthly and will continue to do so in order to ensure optimal integration of my leadership development, clinical expertise, and aging-related research.

Co-Mentor: Angela Fagerlin, PhD is Professor and Chair of the Department of Population Health Sciences and a research scientist and core investigator at the Salt Lake City VA Informatics Decision-Enhancement and Analytic Sciences (IDEAS) Center for Innovation. Her expertise in the development, testing, and implementation of interventions to promote patient-centered care and survey development and validation will be invaluable for my proposed research plan. In addition, she has substantial mentorship experience. Of her junior faculty mentees, all 6 have received career development awards and the three who have completed their career development awards have successfully transitioned to PIs of R01s. Dr. Fagerlin and I currently meet monthly and will continue to do so in order to support my academic professional development and to perform detailed review of the survey methods used the proposed research.

Professional Development Milestones: My mentorship team and I established a detailed mentorship and research plan as well as professional milestones that I intend to achieve in the next 5 years as a result of the VPCAT Scholars Program. These include: (1) presentation of abstracts at national meetings, (2) 1-2 first author peer-reviewed publications in high-impact geriatric and surgical journals per year, (3) successful KL-2 award application, and (4) successful Beeson K76 application (Table 2).
3. RESEARCH PLAN: Identifying Barriers to Patient-Centered Decision Making for Older Adults with Diverticulitis

A. Specific Aims:
Decision-making about surgery in older adults entails difficult tradeoffs. On one hand, surgery can cure disease or improve symptoms, while on the other hand, surgery can have unintended short and long-term consequences, such as prolonged ICU care, organ failure, and functional and/or cognitive decline. Treatment discussions between patients and providers should include the impact of treatment on daily life and the decision should reflect the patient’s treatment goals.1,2 Shared decision making between patients and providers is one way to increase patient engagement and patient-centered decision making.3 Although frameworks have been developed for shared decision making in general,4 older adults deal with multiple comorbidities, neurocognitive changes,5 and varying preferences regarding participation in decision making6,7 that require a unique approach.2,8 Unfortunately, patient-centered decision making is not routinely achieved among older adults facing high-risk surgery for a number of conditions.9,10

This challenge in achieving patient-centered decision making is central for older patients with diverticulitis, a common, morbid condition that requires a complex decision about proceeding with observation or colectomy. Diverticulitis is the 4th most common reason for emergency surgery in older adults.11 Due to the catastrophic consequences of emergency surgery in older adults with diverticulitis, the decision between elective colectomy and observation requires careful consideration. Decision making is difficult because under observation, >60% of patients will not have recurrent diverticulitis.12 Therefore elective colectomy, which is associated with significant morbidity, could be considered over-treatment.13 Guidelines state that treatment should be “individualized” without providing direction as to how this should be done.14 There is a significant gap in medical evidence to support decision-making and it is unknown 1) how decisions are made or 2) whether patients and providers are aligned in treatment goals. Owing to the substantial consequences of diverticulitis in older adults, it is imperative that these knowledge gaps are addressed so that patient-centered treatment decision making can be achieved in this vulnerable population.

My long-term career goal is to unite expertise in colorectal surgery and aging-related research to improve patient-centered care for older adults by aligning surgical treatment decisions with patient goals. Based on research in other decisions,9,10 the central hypothesis of this GEMSSTAR proposal is that patient-centered decision making is not routinely achieved for older adults with diverticulitis who are faced with a high-stakes decision about proceeding with surgery or observation. The overall objective is to identify barriers to patient-centered decisions by accomplishing the following Specific Aims:

Aim 1: Characterize patient and provider treatment decision making for diverticulitis. Audio recordings of 30 clinic visits at multiple sites followed by semi-structured interviews with patients (n=30) and providers (5 surgeons, 5 geriatricians) will be analyzed to address key questions including: What are patient and provider treatment goals for diverticulitis? How are patient treatment goals elicited, expressed, and incorporated into treatment planning? Are decisions centered around the patient, provider, or both? What is constitutes adequate patient knowledge for decision making? Significance: Qualitative themes will inform the development of a questionnaire to obtain a more generalizable understanding of barriers to patient-centered decision making.

Aim 2: Identify barriers to patient-centered decision making among older adults with diverticulitis. We hypothesize that factors such as frailty, social support, quality of life, and self-efficacy are barriers to patient-centered decision making. We will further assess the barriers identified in Aim 1 that may include decision role concordance, knowledge, and shared decision making. A survey incorporating validated instruments will be designed based on the results of Aim 1 and administered to a large population of older adults (n=200) with diverticulitis at multiple centers. Significance: Identifying barriers to patient-centered decision making is necessary to define the required components of a future decision support tool.

This innovative work will address significant gaps in the literature regarding surgical decision making for older adults with diverticulitis and can be used to tailor existing decision making frameworks4 for older adults making high-stakes decisions about surgery for a number of conditions. The results will have a significant impact because they will be used to define the necessary components of a future decision support tool. Achieving successful completion of the aims is feasible due to my expertise as a colorectal surgeon who regularly treats older adults complimented by protected research time, multi-center research collaborations, and a mentorship team with extensive experience in mixed-methods and aging research. The proposed geriatrics training and experience will provide the foundation for achieving my long-term career goals and future extramural funding, including an NIA K76 that will use to develop a high-impact decision support tool to guide the patient-centered management of older adults facing high-risk surgery.
B. Prior Research Efforts: My background in advanced clinical research training and prior research experience will provide the foundation for my success as a VPCAT scholar and for the completion of the proposed work. During my general surgery residency at UCSF, I obtained a Master’s degree in Clinical Research through the UCSF Department of Epidemiology and Biostatistics. This program was specifically designed to train physicians, like myself, who were interested in an academic research career in clinical medicine. My coursework included advanced study in research design, epidemiology, biostatistics, and STATA programming. My research focused on 1) improving patient-centered decision making for a largely younger adult population with ulcerative colitis, 2) examining the role of age and frailty on outcomes in colorectal surgery, and 3) determining patient reported outcomes after surgery. These projects gave me experience in the design and conduct of multi-center research utilizing surveys and interviews to better understand the barriers to patient-centered decision-making. In my previous work I identified gaps in patient education and pilot tested a tool to close the gaps. This experience taught me the importance of team building, developing comprehensive plans for enrollment and retention, and creating well-designed survey questions and interview guides. Therefore, these studies gave me the experience in qualitative and survey-based research as well as the design of decision support tools that will provide a foundation for the proposed research. My previous work resulted in 8 manuscripts (7 first-author) and was supported by the Crohn’s and Colitis Foundation of America and the American Society of Colon and Rectal Surgeons.

Since my faculty appointment at the University of Utah (September 2018), my clinical experience has inspired me to build upon my prior work, now with a focus on diverticulitis in older adults. I was a recipient of the University of Utah Center on Aging Pilot Grant Program July 2019, in conjunction with co-investigators Drs. Ozanne and Brooke. This award is funding a Utah Population Database study to evaluate population-level diverticulitis disease and treatment patterns in older adults. I have successfully obtained access to the data, and am actively working on data programming.

C. Future Research Plan: My clinical and research experience have given me a greater understanding of the complexity of treatment decision making in older adults and inspired my plan to to build upon my prior work. I propose to perform a focused study of barriers and facilitators to patient-centered decision making for older adults with diverticulitis. This mixed-methods research is required to inform a high-impact tool to support patient-centered decision making for older adults making decisions about surgery. To gain the training needed to conduct this research, I will take courses in survey and mixed methods and research in older adults (Table 1). In order to fund this research, I submitted a proposal for the NIA Grants for Early Medical/Surgical Specialists’ Transition to Aging Research (GEMSSTAR) R03 on October 2, 2019. If this is not successful, I intend to resubmit with the next cycle. The results of the proposed research will provide the specific information about barriers to patient-centered decision making in older adults with diverticulitis that will be necessary for an NIA K76 Beeson Career Development Award that aims to develop a high-impact decision support tool for older adults facing high-risk surgery for diverticulitis. The findings from the K76 will provide the foundation for an NIA R01 (or PCORI) proposal for a multi-center clinical trial of the decision support tool (Figure 1).

In summary, I have a track record of success as an early career surgeon scientist. My experience as a colorectal surgeon with advanced clinical research training has informed the proposed research and professional development plan, which is complemented by a comprehensive mentorship team and support from the Department of Surgery with 50% protected time. I have laid out a clear professional development plan with measureable goals (Table 1). I am excited for the opportunity leverage the vast resources available through the VPCAT program to successfully achieve my long-term career goal of becoming an independent clinical researcher who uses clinical trials and implementation science to successfully disseminate large-scale programs that improve the surgical care of older adults.

Figure 1: Long-Term Research Plan
4. REFERENCES

September 18, 2019

Re: Vice President’s Clinical and Translational (VPCAT) Research Scholars Program
PI: Jessica Cohan, MD, MAS

Dear members of the review committee,

I am delighted to serve as the primary research mentor for Dr. Jessica Cohan’s VPCAT application entitled “Identifying Barriers to Patient-Centered Decision Making for Older Adults with Diverticulitis”. Dr. Cohan is a promising young physician-scientist with exceptional clinical training in general and colorectal surgery. Her clinical career has pushed her to engage in research to optimize surgical care for older adults. By caring for these patients in her clinical practice, she has recognized the importance of patient-centered decision making in surgery. This VPCAT proposal focuses on a particularly high-risk group, older adults with diverticulitis. She has received advanced training in clinical research resulting in a Master’s degree is now at a point where dedicated training and mentored research experience will provide a foundation for her future career in aging-related research.

I have extensive mentoring and research experience that has prepared me well to mentor Dr. Cohan during her time in the VPCAT program. I have individually mentored over 25 mentees including pre-medical interns, graduate students, residents, fellows, and junior faculty at various levels on qualitative studies, medical decision-making, decision analyses, and cost-effectiveness analyses. I have co-mentored 3 trainees on career development awards, 2 of whom have successfully transitioned to R-level extramural funding. Further, I have extensive experience in patient centered outcomes and patient decision-making research in older adults and have served as PI on research funded by the NCI (R21 CA141097), PCORI/American Heart Association (AHA 18SFRN34230142), American Cancer Society (ACS MRSG112037), National Comprehensive Cancer Network Foundation (NCCN), and Komen Foundation. I currently serve as project PI for a six-site RCT funded jointly by the AHA and PCORI to identify effective methods to support shared decision making for older adults with atrial fibrillation.

I first met Dr. Cohan in 2013 at UCSF while I was faculty and Dr. Cohan was completing her surgical residency. Her commitment, work ethic, intelligence, and tenacity set her apart from her peers, and I have enjoyed working with her tremendously. I am committed to mentoring Dr. Cohan on the methodological aspects of the study and in her career development. I look forward to working with her mentorship team, which includes Dr. Ben Brooke, and Dr. Angie Fagerlin. My skills are complementary to the mentorship team and we are all committed to Dr. Cohan’s success. Together, we have the knowledge and experience to guide Dr. Cohan’s research and development as a successful and independent surgeon-scientist. I currently meet with Dr. Cohan on a weekly basis and am committed to continuing these 1-2 hour long, weekly meetings during her time as a VPCAT scholar.

I have read, understood, and can meet the required responsibilities outlined in the Scientific Mentor(s) Eligibility Determination Checklist. Dr. Cohan has been guaranteed 50% protected time for research and professional development during the 2-year program period. We have also developed a plan to prevent and/or address issues of inadequate time for research and career development due to encroaching clinical, administrative, and/or teaching effort. I will work closely with her Department
Chair (Dr. Finlayson), and her co-mentors, Drs. Fagerlin and Brooke, to ensure that Dr. Cohan’s schedule and/or responsibilities are modified as necessary. We are all aligned in our commitment to supporting Dr. Cohan in achieving her career goals.

I have worked with Dr. Cohan on her career plan, scientific mentoring plan, and research plan. Her overall goal is to obtain the additional research experience and gerontology training to facilitate her future career goal of becoming a leader at the intersection of surgery and aging-related research to improve patient-centered care for older adults by aligning surgical treatment decisions with patient goals. In order to reach this goal, Dr. Cohan has developed a detailed training plan that includes courses in gerontology and qualitative/mixed-methods, and survey-based research as well as focused leadership and grant writing courses. These courses will complement her prior clinical and research training.

Dr. Cohan and I have a long standing collaboration. During her residency, I mentored Dr. Cohan in successfully applying for grants and conducting research with the American Society of Colon and Rectal Surgeons and the Crohn’s and Colitis Foundation of America. She presented this work at the American Society of Colon and Rectal Surgeons Annual Scientific Meeting and published the results in *Diseases of the Colon and Rectum*. In the six years that we have known each other, Dr. Cohan has proven herself to be an incredibly dedicated surgeon-researcher who I have no doubt will exceed expectations in her academic pursuits.

Dr. Cohan and I have since relocated to the University of Utah and continue to work together. I was thrilled to participate in the recruitment of Dr. Cohan to the University of Utah, and to facilitate her Adjunct Appointment in my Department, Population Health Sciences. In her first year she has demonstrated outstanding potential to obtain extramural funding, already having received grant funding from the Utah Cancer Action Network and the University of Utah Center on Aging. I am a co-Investigator on the Center on Aging grant and served as a mentor on three of her grant proposals, including a recently submitted NIA R03. Dr. Cohan’s impressive initiative and drive have garnered support from the University and the Department of Surgery. She has been granted 50% protected time by Dr. Sam Finlayson, the Chair of the Department of Surgery, who is invested in her success. She has recruited and energized key mentors and advisors including leaders in the departments of Surgery, Population Health Science, Medicine, and the Center for Clinical and Translational Science. We are fully committed to Dr. Cohan’s career development and the success of the proposed project.

It is clear to me that Dr. Cohan has the ability, drive, and determination to become a successful surgeon-scientist. Her proposed research will address a critical gap in knowledge about surgical decision-making for older adults with diverticulitis. In my capacity as an expert in decision science research an accomplished independent investigator, I have the experience to support Dr. Cohan in achieving the aims of her proposed project and in her career development. The expected outcomes of this work will be used to refine an existing framework for shared decision making in older adults and to develop high-impact decision support that will be the focus of a future NIA K76 proposal. Dr. Cohan’s participation in the VPCAT program will provide an important foundation for her future transition to an independent and successful surgeon-scientist and leader in aging-related research. I give my strongest possible recommendation for Dr. Cohan’s selection for the VPCAT program.

Sincerely,

Elissa Ozanne, PhD

Associate Professor, Division of Health System Innovation and Research
Department of Population Health Sciences
University of Utah
September 24, 2019

Vice President’s Clinical and Translational (VPCAT) Research Scholars Program
University of Utah Health

Re: VPCAT application for Jessica Cohan, MD

Dear Members of the VPCAT Selection Committee,

I am pleased to write this letter of strong support as a scientific co-mentor for Dr. Jessica Cohan’s VPCAT Research Scholars Program proposal entitled “Identifying Barriers to Patient-Centered Care for Older Adults with Diverticulitis.” I have mentored Dr. Cohan since she joined the surgical faculty at the University of Utah in 2018. She is a rising star in academic surgery with the vision, leadership, determination, and intellect to complete the aims of this project and become an independent researcher at the intersection of surgical and aging-related research. Dr. Cohan is an outstanding candidate for the VPCAT Program.

Dr. Cohan went to medical school at Cornell followed by General Surgery residency at the University of California, San Francisco (UCSF). During her surgical training, she completed UCSF’s 2-year Master’s Program in Clinical Research and focused her research efforts on surgical decision making in Ulcerative Colitis. As a testament to her ingenuity and leadership, she was able to fund this research project with over $100,000 from three separate grants as Principle Investigator, including extramural grants from the American Society of Colon & Rectal Surgeons and the Crohn’s & Colitis Foundation of America. Dr. Cohan then matriculated as a Colorectal Surgery Fellow at the Lahey Hospital & Medical Center where she continued to excel in all aspects of her clinical and academic training.

Now as a faculty member at the University of Utah, Dr. Cohan is determined to extend her experience in surgical decision-making science to improve surgical care for older adults. She clearly possesses the necessary clinical and research training to pursue this work, and has experience in qualitative and survey research. Dr. Cohan has assembled a diverse and talented research team at the University of Utah to ensure the success of the project and provide career development. I have no doubt that Dr. Cohan’s proposed project will have a significant impact in generating important data and providing the foundation for a decision support tool for older adults facing high-risk surgery. The findings from this study will set the stage for a future Career Development Award.

I well-suited to provide co-mentorship for Dr. Cohan’s aging-related research and surgical career development. My research focuses on the development and evaluation of care coordination models for older, high-risk surgical patients during transitions of care. Dr. Cohan approached me to serve as mentor on her projects when she joined our faculty given our similar research interests. I have since served as a mentor on two of her extramural grant applications and am Co-Investigator on her recently awarded Center on Aging Pilot Grant. In addition, we have an abstract in preparation for the 2020 American Society of Colon and Rectal Surgeons Annual Scientific Meeting. I am well positioned to support Dr. Cohan’s research as the Section Chief of Health Services Research (HSR) within the Department of Surgery. Dr. Cohan’s actively participates in our weekly HSR workgroup known as the Utah Intervention Quality and Implementation Research (U-INQUIRE) group and was selected to be core faculty for the Surgical Population Analytic Research Core (SPARC). These will be valuable resources within our Department to ensure that Dr. Cohan has access to analytic expertise.

Cohan, Jessica - #1931
for completing her aims. Further, the HSR section also will support Dr. Cohan’s tuition at the CCTS Grant Writer’s Seminar in October of 2019. I plan to continue my twice-monthly, 1-hour, in person meetings with Dr. Cohan throughout the VPCAT Scholarship period. My mentorship philosophy is a hands-on approach that is tailored to the mentee. I will provide specific mentorship in aging-related research in surgery and academic promotion, including the measurable milestones and outcomes (publications, presentation at national meetings, and a successful Beeson K76) as detailed in her proposal. Dr. Cohan will meet with the entire mentorship team (also including Drs. Ozanne and Fagerlin) twice yearly to ensure her progress is aligned with her academic goals.

I have read, understood, and can meet the required responsibilities outlined in the Scientific Mentor(s) Eligibility Determination Checklist. Dr. Cohan has been guaranteed 50% protected time for research and professional development during the 2-year program period. We have also developed a plan to prevent and/or address issues of inadequate time for research and career development due to encroaching clinical, administrative, and/or teaching effort. I will work closely with our Department Chair, Dr. Finlayson, and General Surgery Division Chief (Dr. Nirula) to ensure that Dr. Cohan’s schedule and/or responsibilities are modified as necessary. We are all aligned in our commitment to supporting Dr. Cohan in achieving her career goals.

In summary, Dr. Cohan is a bright, talented, and thoughtful surgeon scientist who is ready to take the next step in her academic development. I have no doubt that she will attain extramural funding as a junior faculty member and have a successful career as a surgeon-scientist. I look forward to serving as a scientific co-mentor to Dr. Cohan during her time in the VPCAT Research Scholars Program.

Sincerely,

Benjamin S. Brooke, M.D., Ph.D., FACS, DFSVS
Chief, Division of Vascular Surgery
Associate Professor of Surgery
Adjunct Associate Professor of Bioinformatics and Population Health Sciences
Section Chief, Health Services Research
University of Utah Department of Surgery
September 13, 2019

Michael A. Rubin, MD, PhD, MS
Director, VPCAT Program

Re: VPCAT Research Scholars Program: Jessica Cohan, MD, MAS

Dear Dr. Rubin and VPCAT Review Committee:

It is a genuine pleasure to write this extremely enthusiastic letter of support as a co-mentor for Dr. Jessica Cohan, who is applying for the VPCAT Research Scholars Program. Her project, entitled "Identifying Barriers to Patient-Centered Care for Older Adults with Diverticulitis," will have a high impact in helping her develop her already promising career. I actively participated in Dr. Cohan’s recruitment to the University of Utah in September 2018 and facilitated her adjunct appointment in the Department of Population Health Sciences. She attends a monthly patient communication/decision making group that I co-lead. In addition to these monthly meetings, I have met with her a number of times. Over the year she has been here, I have been extremely impressed by her intellect, her well thought out ideas, and her passion. It has been a real pleasure watching her evolve and grow as a physician-scientist. My research interests aligns very closely with the research and career development plans Dr. Cohan presents in this proposal, thus I am very qualified to serve as a co-mentor and comment on her potential as a successful clinical investigator. Dr. Cohan is an exceptional emerging young investigator whom I recommend wholeheartedly for the VPCAT program.

The proposed research in this VPCAT application extends Dr. Cohan’s expertise in outcomes research and colorectal disease and will provide training to address identified gaps in aging-related and mixed methods research. Dr. Cohan has assembled an outstanding interprofessional mentoring and advisory team including myself, Dr. Elissa Ozanne from the Department of Population Health Sciences, and Dr. Benjamin Brooke from the Department of Surgery. Dr. Ozanne’s contributions to mentoring will center on her long-standing and academically productive relationship with Dr. Cohan in addition to her ability to provide expertise in research regarding patient decision making processes and risk communication. My distinct interests lie in the psychology of decision making and expertise in survey research methods. Dr. Benjamin Brooke will provide aging-related and surgically focused mentorship. All three mentors are necessary to provide a comprehensive and balanced team to support Dr. Cohan in her research and professional development. Personally, I have extensive experience mentoring fellows and junior faculty across various disciplines, clinical contexts.
and in doing so I provide support and guidance on grantsmanship and preparation of grant applications, as well as helping trainees "run" their first grants. For your reference, a table of current and past mentees is included below (please note that these are only mentees I served as Primary or Co-Primary mentor. I have been a secondary mentor for at least a dozen more junior faculty). These mentees have a strong record of extramural funding from the NIH and VA. Mentoring is one of the most rewarding parts of my job, and I greatly look forward to continuing to work with Dr. Cohan.

I am confident that Dr. Cohan is well positioned to complete the proposed research and career development plan. The University of Utah provides a strong environment for interprofessional and collaborative research. She will draw upon the unique resources available through the Department of Population Health Sciences, Qualitative and Survey Measurement (QSM) core, and the Center on Aging. She will be well supported by Dr. Samuel Finlayson through the Department of Surgery. Specifically, the Department has wholeheartedly committed to supporting Dr. Cohan in her academic development, including committing to protect 50% of her time for research and academic development, in professional development funds, and the time to attend relevant meetings and courses.

I have read, understood, and can meet the required responsibilities outlined in the Scientific Mentor(s) Eligibility Determination Checklist. We have also developed a plan to prevent and/or address issues of inadequate time for research and career development due to encroaching clinical, administrative, and/or teaching effort. I will work closely with our Department Chair, Dr. Finlayson, and Dr. Cohan’s other mentors (Drs. Ozanne and Brooke) to ensure that Dr. Cohan’s schedule and/or responsibilities are modified as necessary.

In summary, Dr. Cohan is an exceptional junior faculty member and candidate for the VPCAT Research Scholars Program. She has identified a significant problem in the field of patient centered-decision making and has organized an outstanding team of mentors and developed a strong plan to improve her skills. I envision that she will develop into a national leader as a principal investigator in aging-related research in surgery and I support her application with the highest possible enthusiasm.

Sincerely,

Angela Fagerlin, PhD
Professor and Chair, Department of Population Health Sciences
Research Scientist, Salt Lake City VA Center for Informatics Decision Enhancement and Surveillance (IDEAS).
<table>
<thead>
<tr>
<th>Fellows</th>
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<tr>
<td>Bannon, Brittany</td>
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<td>T32 Award</td>
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<td>Dillard, Amanda</td>
<td>Tenured Professor in R2 Institution</td>
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<td>Fuhrel-Forbis, Andrea</td>
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<td>Goldberger, Zachary</td>
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<td>Henry, Stephen</td>
<td>NIH K-award, NIH R01</td>
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<td>Keeton, Kristie</td>
<td>Limited research, Clinical Track</td>
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<td>Lacey, Heather</td>
<td>Tenured Professor at Liberal Arts College</td>
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<td>Langford, Aisha</td>
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<td>Wancata, Lauren</td>
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<td>Witteman, Holly</td>
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<td>Gornick, Michele</td>
<td>Internal K-Award</td>
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<td>Scherer, Aaron</td>
<td>NIH K-Award in resubmission</td>
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<tr>
<td>Valley, Thomas (+ Junior Faculty)</td>
<td>NIH K-Award</td>
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<td><strong>Junior Faculty</strong></td>
<td><strong>Achievements</strong></td>
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<td>Kullgren, Jeffrey</td>
<td>VA Career Development Award, VA IIR, NIH R01</td>
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<tr>
<td>Lin, Jody (Sept 2019)</td>
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<tr>
<td>Matsen, Cindy</td>
<td>NIH R01 to be submitted in October</td>
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<tr>
<td>Suneja, Gita (Sept 2019)</td>
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<td>Vanneman, Megan</td>
<td>VA Career Development Award</td>
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<td>Wright, Julie</td>
<td>NIH K-award, NIH R01</td>
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<tr>
<td>Zahurenec, Darin</td>
<td>NIH K-award, NIH R01, NIH R21</td>
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September 26, 2019

VPCAT Program Committee
Office of Academic Affairs and Faculty Development
HSEB 5515, University of Utah

Re: Jessica Cohan, MD MAS, VPCAT Research Scholars Program Application

Dear Members of the Review Committee:

I am writing to lend my enthusiastic support to Dr. Jessica Cohan’s application for the VPCAT Research Scholars Program entitled “Identifying Barriers to Patient-Centered Decision Making for Older Adults with Diverticulitis.” Dr. Cohan joined our faculty in the Department of Surgery as an Assistant Professor in 2018. In the short time she has been here, she has proven herself to be a dedicated and successful surgeon-scientist with a strong interest in improving surgical care for older adults. In her first year, she was awarded three grants, including the Utah Cancer Action Network Implementation Grant, Center on Aging Pilot Grant, and the American Society of Colon and Rectal Surgeons Research Training Award. Germaine to the present proposal, the Center on Aging pilot grant funding is being used to conduct a population-wide assessment of disease and treatment patterns in older adults with diverticulitis, which will provide a broad view of diverticulitis in older adults complementary to the proposed research. In addition, she has previously successfully conducted research in surgical decision making in patients with ulcerative colitis and has published 8 manuscripts (7 first author).

Dr. Cohan has both my and the department’s comprehensive support, including 50% protected time for research, in professional development funds, and provided time to attend relevant national meetings in surgery and geriatrics. I further commit to providing funds for tuition fees to support her attendance at the VPCAT Program Colloquium, the twice-monthly curricular sessions, meetings with VPCAT mentors (including weekly as needed), and attendance at supplemental career development opportunities. Her other current roles include administrative duties (5%) such as teaching residents and students, and clinical time (45%). I conduct twice-yearly meetings with Dr. Cohan and the relevant surgical leadership, including the Chief of the Division of General Surgery (Dr. Ram Nirula) to ensure that there is alignment in the expectations for Dr. Cohan and that her needs are being met.

We have designed a plan to protect her research and professional development time from encroachment by administrative and clinical duties. First, her clinical duties include infrequent weekend call (1 per 8 weekends) and provisions for emergency colorectal problems which are covered by our acute care surgery team. This ensures that her clinical schedule is predictable and manageable. If challenges are identified in balancing clinical and research duties, I will work to ensure that the appropriate resources are identified, including support from a number of clinical track faculty in the General Surgery Division. Further, we plan to hire a fourth colorectal surgeon (anticipated September 2020) to further offset clinical demands. With regards to administrative duties, I have worked with her
to ensure that her administrative roles are in direct alignment with her academic goals. She will not be expected to participate in any administrative role that would compromise the commitment of 5% time. If administrative duties become burdensome, I will personally work with Dr. Cohan to ensure maximal use of administrative services (her medical secretary, administrative assistant, research assistant, and a variety of other staff in our research division) and to determine which roles can be allocated to others in the Department.

Dr. Cohan will have access to the rich resources available across the institution, including a dedicated Qualitative and Survey Methods core, Center on Aging, and the mentorship of experienced researchers, which is encouraged and strongly supported in the Department of Surgery. In addition to my mentorship, Dr. Cohan’s identified mentors for this project include: Dr. Benjamin Brooke, MD PhD, Chief of our Section on Health Services Research, a prior VPCAT graduate and leader in improving provider communication about high-risk adults undergoing surgery, and Dr. Angela Fagerlin, an accomplished shared decision making researcher with expertise in survey methods. This team will provide the comprehensive research and academic support required for her future successful transition into an independent surgeon scientist and leader in improving surgical outcomes in older adults.

As Dr. Cohan’s Department Chair, I can confirm that she will be on site and fully supported during this project. The VPCAT program will provide a foundation for her success by helping advance her research goals, and obtain the data necessary for her future K76 Career Development Award.

I am confident that Dr. Cohan will successfully utilize the VPCAT experience as a catalyst to establish herself at the University of Utah, and I anticipate that she will achieve great success throughout her academic career.

Sincerely,

Samuel RG Finlayson, MD, MPH, MBA
Professor and Chair, Department of Surgery
University of Utah School of Medicine
NAME: Cohan, Jessica N.
eRA COMMONS USER NAME (credential, e.g., agency login): cohanj
POSITION TITLE: Assistant Professor of General Surgery, School of Medicine, University of Utah

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

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<tr>
<th>INSTITUTION AND LOCATION</th>
<th>DEGREE</th>
<th>Completion Date</th>
<th>FIELD OF STUDY</th>
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<tbody>
<tr>
<td>California Polytechnic State University</td>
<td>B.S.</td>
<td>2005</td>
<td>Microbiology</td>
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<tr>
<td>Weill Cornell Medical College</td>
<td>M.D.</td>
<td>2010</td>
<td>Medicine</td>
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<tr>
<td>University of California, San Francisco, Philip R. Lee Institute for Health Policy Studies</td>
<td>Fellow</td>
<td>2015</td>
<td>Health Policy</td>
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<tr>
<td>University of California, San Francisco</td>
<td>M.A.S.</td>
<td>2015</td>
<td>Clinical Research</td>
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<tr>
<td>University of California, San Francisco School of Medicine</td>
<td>Resident</td>
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<td>General Surgery</td>
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<tr>
<td>Lahey Hospital and Medical Center</td>
<td>Fellow</td>
<td>2018</td>
<td>Colorectal Surgery</td>
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A. Personal Statement

I am a colorectal surgeon and clinical researcher at the University of Utah, where I started in September of 2018 after completing my colorectal surgery residency. My prior research training included a Master's in Advanced Studies from the University of California, San Francisco and my research focused on increasing shared decision making about surgery between patients and providers. My work has received funding from the American Society of Colon and Rectal Surgeons, the Crohn’s and Colitis Foundation of America, and the Utah Cancer Action Network and resulted in eight peer-reviewed manuscripts as well as several podium and poster presentations at national meetings.

My first year in clinical practice has inspired me to pursue a research career focused on improving the quality of surgical care for older adults. I recently was awarded a pilot grant from the University of Utah Center on Aging to study outcomes in older adults with diverticulitis using administrative claims data. I now wish to merge my research interests to achieve my long-term career goal of becoming a leader in research that improves care for older adults by aligning treatment decisions with patient goals and values. I anticipate that the research experience and professional development training proposed in this VPCAT application will allow me to achieve my short and long-term career goals and provide the foundation for my future Beeson K76 career development award proposal.

B. Positions and Honors

Positions and Employment
2018 – Present  Assistant Professor, University of Utah School of Medicine, Department of Surgery, Salt Lake City, Utah
2019 – Present  Adjunct Assistant Professor, University of Utah School of Medicine, Department of Population Health Sciences, Salt Lake City, Utah

Other Experience and Professional Memberships
2019 – Present  Executive Council (elected position), Association for Academic Surgery
2019 – Present  Member, Center for Genomic Medicine, University of Utah
2019 – Present  Liaison Physician, American College of Surgeons Commission on Cancer, Huntsman Cancer Institute
2019 – Present  Member, Center on Aging, University of Utah
2019 – 2024  Member, Clinical Advisory Group, Comparison of Surgery and Medicine in the Impact of Diverticulitis (COSMID) Trial, University of Washington
2019 – Present  Member, Cancer Therapies Evaluation Program, Huntsman Cancer Institute
2019 – Present  Member, SWOG
2018 – Present  Liaison Physician, Surgical Research Network, Crohn's and Colitis Foundation of America

Awards Honors
2019  American Society of Colon and Rectal Surgeons Research Training Award
2018  First Place Poster Presentation, Postgraduate Recognition Day, Lahey Hospital & Medical Center, Burlington, MA
2017  The Lawrence W. Way Critical Thinking Award, University of California San Francisco
2017  Haile T. Debas Resident Teaching Award, University of California San Francisco
2015  Best of Digestive Disease Week, Digestive Disease Week Annual Meeting
2015  Best Clinical Science Presentation, J. Engelbert Dunphy Resident Research Symposium, University of California San Francisco
2015  Poster of Distinction Award, American Society of Colon and Rectal Surgeons Annual Scientific Meeting, Boston, MA

C. Contribution to Science

1. Patient-Centered Decision Making: In this study, where I served as Principle Investigator, I modified and performed pilot testing of a decision aid designed to increase shared decision making in patients with ulcerative colitis.

2. Patient Centered Outcomes: This body of work aimed to challenge surgical dogma by evaluating patient-centered outcomes as opposed to the traditional surgical outcomes reported in the literature.

3. Surgical Outcomes in Older Adults: In these research projects, where I served as Principle Investigator, I worked to identify treatment patterns and surgical outcomes among older adults undergoing surgery.

4. Novel Therapies in Colorectal Surgery: In this work included the description of a novel approach to the management of colon polyps.

Complete List of Published Work in MyBibliography:
D. Research Support

**Ongoing Research Support**

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<tr>
<th>Project Title</th>
<th>PI(s)</th>
<th>Start Date – End Date</th>
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<tbody>
<tr>
<td>Leveraging an existing mobile health clinic to decrease structural and financial barriers to colorectal cancer screening</td>
<td>Cohan, Hardikar (PIs)</td>
<td>06/01/2019 – 05/31/2021</td>
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<tr>
<td>The goals of this project are to perform a community-based needs assessment for colorectal cancer screening in the state of Utah and to increase colorectal cancer screening by implementing FIT testing using an existing mobile health clinic.</td>
<td></td>
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</tr>
<tr>
<td>Role: Co-Principal Investigator</td>
<td></td>
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<tr>
<td>University of Utah Center on Aging</td>
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<tr>
<td>Disease and Treatment Patterns in Older Adults with Diverticulitis</td>
<td>Cohan (PI)</td>
<td>07/01/2019 – 06/30/2020</td>
</tr>
<tr>
<td>The goal of this project is to characterize disease and treatment patterns in older adults at the population level. The research team is complemented by co-investigators Dr. Elissa Ozanne and Dr. Benjamin Brooke, who are mentors for the present proposal.</td>
<td></td>
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<tr>
<td>Role: Principal Investigator</td>
<td></td>
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<tr>
<td>The goals of this project is to determine whether surgery or best medical management leads to improved outcomes among patients with quality of life limiting diverticulitis.</td>
<td></td>
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<tr>
<td>Role: Site-Principal Investigator, University of Utah</td>
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**Completed Research Support**

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<th>Start Date – End Date</th>
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<tr>
<td>Bowel Preparation for Colorectal Surgery: What Matters to Patients?</td>
<td>Brecha (PI)</td>
<td>05/01/2019 – 07/31/2019</td>
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<tr>
<td>The goals of this project are to characterize patient experiences during bowel preparation for colorectal surgery and to understand patient preferences regarding the use of oral antibiotics.</td>
<td></td>
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<tr>
<td>Role: Mentor</td>
<td></td>
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</table>
Name: Ozanne, Elissa Mary

eRA COMMONS USER NAME (credential, e.g., agency login): eozanne

Position Title: Associate Professor, University of Utah

Education/Training (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

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<td>Stanford University, Stanford, California</td>
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<tr>
<td>Stanford University, Stanford, California</td>
<td>MS</td>
<td>06/1998</td>
<td>Engineering Economic Systems</td>
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<tr>
<td>Stanford University, Stanford, California</td>
<td>PhD</td>
<td>01/2003</td>
<td>Management Science and Engineering</td>
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A. Personal Statement

Throughout my career, I have been involved with teaching and mentoring. My teaching and mentoring interests lie in decision sciences for graduate students and junior faculty. This includes patient decision making, shared decision-making classes, decision analysis, and cost-effectiveness analysis. I have individually mentored pre-medical interns, graduate students, residents, fellows, and junior faculty. I have worked with over 25 mentees at various levels on qualitative studies, medical decision-making, decision analyses, and cost-effectiveness analyses projects at the University of Utah, Dartmouth, UCSF, and Harvard (mentees on listed publications are indicated with an * below). I have co-mentored 3 trainees on career development awards, 2 of whom have successfully transitioned to R-level extramural funding. I have mentored Dr. Cohan since we met in 2013, when she was a surgical resident. I participated in her recruitment to the University of Utah and have continued to mentor her in her development as a surgeon scientist since she joined the faculty here.

I chose an academic career in health service research because I want to improve health outcomes, as well as contribute to society by teaching and mentoring excellent students. My primary research goal is to guide effective, patient-centered use of prevention, screening, and treatment strategies in medicine. With my appointment as an Associate Professor in the Department of Population Health Sciences at the University of Utah, I am involved in and exposed to cutting-edge research in health services research and healthcare delivery science.

I have extensive experience in patient centered outcomes and patient decision-making research and have served as PI on research funded by the NCI (R21 CA141097), PCORI/American Heart Association (AHA 18SFRN34230142), American Cancer Society (ACS MRSG112037), National Comprehensive Cancer Network Foundation (NCCN), and Komen Foundation, to investigate patient and provider decision making. I currently serve as project PI for a six-site RCT funded jointly by the AHA and PCORI to identify effective methods to support shared decision making for adults with atrial fibrillation.

These experiences have prepared me well to serve as a primary research mentor to Dr. Cohan during her VPCAT scholarship and her accompanying project; “Identifying barriers to patient-centered decision making for older adults with diverticulitis” and in her overall career development. I am excited to have the opportunity to share my expertise in grant writing, publication, qualitative methods, and decision science to ensure the success of her work and development as a surgeon-scientist.


B. Positions and Honors

**Positions and Employment**

1996 – 1997 Research Associate, Entelos, Menlo Park, CA
1998 – 1999 Decision Services Associate, Pharsight, Mountain View, CA
2000 – 2002 Research Associate, University of California San Francisco Medical Center, San Francisco, CA
2003 – 2003 Post-Doctoral Research Fellow, Department of Surgery, University of California San Francisco Medical Center, San Francisco, CA
2003 – 2005 Post-Doctoral Research Fellow, National Cancer Institute, Program in Cancer Outcomes Research Training, Massachusetts General Hospital, Institute for Technology Assessment
2005 – 2009 Instructor, Harvard Medical School, Boston, MA
2007 – 2010 Fellowship, Summer Institute in Informed Patient Choice, Dartmouth-Hitchcock Medical Center
2005 – 2011 Senior Scientist, the Institute for Technology Assessment, Massachusetts General Hospital, Boston, MA
2009 – 2011 Assistant Professor, Harvard Medical School, Boston, MA
2011 – 2013 Associate Professor, University of California, San Francisco, CA
2013 – 2016 Associate Professor, the Dartmouth Institute for Health Policy & Clinical Practice, Lebanon, NH
2013 – 2016 Member, Cancer Control Research Program, Norris Cotton Cancer Center, Lebanon, NH
2016 – Associate Professor, University of Utah

**Other Experience and Professional Membership**

2000 – Member, Institute for Operations Research and Management Science (INFORMS)
2000 – Member, Decision Analysis Society, INFORMS
2000 – Member, Health Application Section, INFORMS
2001 – Member, Society for Medical Decision Making
2004 – 2007 Education Committee Member, Society for Medical Decision Making
2004 – 2011 Annual Conference Scientific Review Committee, Society for Medical Decision Making
2005 External Review Committee, Research Grants Council of Hong Kong
2006 Annual Conference Scientific Co-Chair: Risk Perception, Society for Medical Decision Making
2006 Decision Analysis Society: Student Paper Award Scientific Review Committee
2006 – 2011 External Reviewer, Foundation for Informed Medical Decision Making
2007 External Reviewer, Canadian Institutes of Health
2008 Research Study Section Member, Agency for Healthcare Research and Quality
2016 Ad hoc Reviewer, Health Services Organization and Delivery, National Institutes of Health

**Honors and Awards**

1998 – 1999 Chief Teaching Assistantship, Decision Analysis Core, Stanford University
1999 – 2000 Pharsight Corporation Research Fellowship
2000 – 2002 Carol Franc Buck Breast Care Center Doctoral Research Fellowship, UCSF Medical Center

C. Contributions to Science

1. Patient and Provider Decision Making: In an effort to design and implement decision support interventions, I study decision making both from the provider perspective and the patient perspective using a variety of methods, including qualitative and survey methods. These publications study the impact that communication methods have on provider decision making, and patient decision making. I served as the primary investigator or trainee mentor for these studies.


2. Risk Assessment and Decision Support: Scientific advancements have enabled the identification of women at increased risk for breast cancer, which when coupled with targeted risk reducing strategies, can work to prevent the disease. However, both these risk assessment methods and risk reducing interventions are greatly underused. This area of my work focuses on the development and implementation of risk assessment and decision support interventions for breast cancer. These methods have been shown to encourage patient-provider communication and improve patient decision making in clinical settings. I served as the primary investigator for all of these studies.


3. Cost-Effectiveness Analyses: It is critical to the success of decision support interventions to understand the policy implications of such interventions as only those that are cost-effective will be sustainable. A large body of my work focuses on the evaluation of patient-centered interventions from a policy perspective. I employ predictive modeling to estimate costs and cost effectiveness of potential clinical strategies for breast cancer prevention, screening, and treatment. These publications have served to inform both clinicians and policy makers about the value of these particular clinical strategies. I served as the primary investigator or co-investigator for all of these studies.


Complete List of Published Work:
http://www.ncbi.nlm.nih.gov/sites/myncbi/1VWg6gg0s6mQn/bibliography/45044937/public/?sort=date&direction=descending

D. Research Support

Ongoing Research Support
18SFRN34230142 Fagerlin (PI) 07/01/2018 – 06/30/2022
AHA/PCORI
American Heart Association/PCORI DECIDE Center
The goals of the Center are to identify, enhance, implement, and disseminate the most effective methods to support shared decision making (SDM) for people diagnosed with atrial fibrillation (AF), improving patient-centered care and health outcomes for diverse patient populations.
Role: Project PI

17SFRN33630041 Tristani-Firouzi (PI) 07/01/2017 – 06/30/2021
AHA
The Population Project: Improving Patient and Family Health Using Family-Centered Outcomes and Shared Decision-Making
Leveraging Big Data Science to Link Genomics, Epigenetics, and the Family to Improve the Health of Children with CHD
Role: Co-Investigator

PCORI Hwang (PI) 03/01/2016 – 02/28/2020
Comparison of Operative to Medical Endocrine Therapy (COMET) for Low-Risk DCIS
The major goal of this project is to conduct a RCT of active surveillance compared to usual care for patients with DCIS.
Role: Subcontract PI

U01CA199336-01 Hur (PI) 09/01/2017 – 08/31/2020
NCI
Controlling Esophageal Cancer: A Collaborative Modeling Approach
The goal of this project is to improve esophageal cancer mortality and morbidity by taking a collaborative modeling approach to determine an effective and personalized EAC cancer control strategy.
Role: Subcontract PI

PCORI Durand (PI) 01/01/2016 – 12/31/2019
Addressing disparities in early stage breast cancer treatments and decision making: A three-arm comparative effectiveness trial across socioeconomic strata.
Role: Consultant

Completed Research Support (past 3 years)
5U01CA199336 Hur, Inadomi, Luebeck (MPI) 09/01/2017 – 06/30/2018
NIH/NCI
Controlling Esophageal Cancer: A Collaborative Modeling Approach
The goal of this project is to advance our understanding of ESOPHAGEAL cancer and the impact of Cancer Control interventions to diminish the burden of this disease.
Role: Co-Investigator
NAME: Brooke, Benjamin Sands  
eRA COMMONS USER NAME: BBROOKE  
POSITION TITLE: Assistant Professor of Surgery, School of Medicine, University of Utah

EDUCATION/TRAINING

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<th>FIELD OF STUDY</th>
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<td>University of Virginia</td>
<td>B.A.</td>
<td>05/1994</td>
<td>Biology</td>
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<tr>
<td>University of Utah School of Medicine</td>
<td>M.D.</td>
<td>06/2003</td>
<td>Medicine</td>
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<td>Johns Hopkins Hospital</td>
<td>Intern/Resident</td>
<td>06/2010</td>
<td>General Surgery</td>
</tr>
<tr>
<td>Johns Hopkins Bloomberg School of Public Health &amp; School of Medicine</td>
<td>Ph.D.</td>
<td>05/2010</td>
<td>Clinical Investigation</td>
</tr>
<tr>
<td>Johns Hopkins Hospital</td>
<td>Chief Resident</td>
<td>06/2011</td>
<td>General Surgery</td>
</tr>
<tr>
<td>Dartmouth–Hitchcock Medical Center</td>
<td>Fellow</td>
<td>06/2013</td>
<td>Vascular Surgery</td>
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A. Personal Statement

I am a vascular surgeon and health services researcher at the University of Utah and the VA Salt Lake City Health Care System. My research training includes a Ph.D. in Clinical Investigation from the Johns Hopkins Bloomberg School of Public Health. While completing my vascular surgery fellowship at Dartmouth, I gained additional expertise in population analyses at the Dartmouth Institute for Health Policy & Clinical Practice. Over the past decade, my research has been aimed at improving the quality of care delivered to surgery patients by studying variation in clinical practice, identifying processes of care associated with the best outcomes, and developing strategies to implement evidence-based findings into practice. Currently, I am in charge of surgical implementation science and health services research efforts at the University of Utah Department of Surgery, where I serve as section chief of the Health Services Research (HSR) Section and director of the Utah Intervention Quality and Implementation Research (U-INQUIRE) group. In addition, I am leading surgical research and implementation efforts as part of the Specialty Care Center of Innovation (SC-COI) and IDEAS 2.0 Center located at the VA Salt Lake City Medical Center. My research has been funded by grants from PCORI, the National Institutes of Health, the VA, and the Office of the National Coordinator for Health Information Technology. This includes a prior NIH/NIA GEMSSTAR grant that led to my current focus on developing innovative care coordination models for older high-risk surgical patients during transitions of care. I have worked extensively with Dr. Cohan over the past year as a mentor in my role overseeing the HSR Section and have extensive experience in aging-related surgical research. I am well prepared to provide research expertise and career development mentorship needed to ensure that she can achieve her career goals and benefit maximally from her time as a VPCAT Research Scholar.

B. Positions and Honors

Positions and Employment

2013 – Staff Vascular Surgeon, University of Utah Hospital, Salt Lake City, UT  
2013 – Staff Vascular Surgeon, Primary Children’s Hospital, Salt Lake City, UT  
2013 – Staff Vascular Surgeon, Department of Surgery, George E. Wahlen Veterans Administrative Medical Center, Salt Lake City, UT  
2013 – 2018 Assistant Professor of Surgery (Tenure Track), University of Utah, Salt Lake City, UT  
2013 – Director, Utah Intervention Quality & Implementation Research (U – INQUIRE) Group  
2015 – Surgical Specialist Clinical Educator, Specialty Care Center of Innovation (SC – COI), George E. Wahlen Veterans Administrative Medical Center, Salt Lake City, UT  
2015 – Co-Director, University of Utah – IHC Surgical Resident Research Fellowship  
2016 – Chief, Section of Health Services Research, Department of Surgery, University of Utah  
2018 – Associate Professor of Surgery with Tenure, University of Utah, Salt Lake City, UT
Other Experience and Professional Membership

2004 – Member, American College of Surgeons
2006 – Member, Association for Academic Surgery, Outcomes Research Committee (2015 – 17)
2010 – 2011 Member, Johns Hopkins Department of Surgery Residency Admissions Committee
2011 – Member, Halsted “Old Hands“ Surgical Society of Johns Hopkins
2011 – Editorial Board, Case Reports in Vascular Medicine
2012 – 2015 Member, Society for Vascular Surgery, Quality & Performance Measures Committee
2013 – Member, Peripheral Vascular Surgery Society
2013 – Member, Study Design & Biostatistics Center Advisory Committee, University of Utah
2015 – 2018 Member, VA Surgical Quality Date Use Group (SQDUG)
2015 – 2018 Medical Director, Utah Intermountain – West Partnership to Improve Surgical Care Transitions
2016 – 2018 Secretary, Utah Chapter of American College of Surgeons
2017 – 2019 Chair, Society of Vascular Surgery PSO Carotid Endarterectomy Work Group
2018 – 2020 President, Utah Chapter of American College of Surgeons
2016 – 2020 Board of Directors, Secretary and President, Surgical Outcomes Club
2016 – 2020 Treasurer and President, Salt Lake Surgical Society

Honors

1999  James R. Bush Memorial Research Award, University of Utah
1999 – 2000 Howard Hughes Medical Student Research Fellowship (Advisor: Mark T. Keating, MD)
2001 American Heart Association Student Scholar in Cardiovascular Disease and Stroke
(Advisor: Dean Y. Li, MD, PhD)
2002 Elected to Alpha Omega Alpha, University of Utah
2005 1st Place, Resident/Fellow Presentation, Chesapeake Vascular Society
2005 Resident Research Award, Baltimore Academy of Surgery
2006 Postdoctoral Presentation Award, American Society of Human Genetics Annual Meeting
2006 2nd Place, Resident/Fellow Presentation, Chesapeake Vascular Society
2006 Resident Research Award, Baltimore Academy of Surgery
2007 G. Melville Williams Hero Award, Johns Hopkins Hospital Department of Surgery
2008 Resident Research Award, Baltimore Academy of Surgery
2008 Best Abstract Award, Academy – Health Annual Research Meeting
2008 Helen B. Taussig Research Award, Johns Hopkins University School of Medicine
2009 Excellence in Research Award, American College of Surgeons
2014 – 2016 Vice Presidents Clinical and Translational (VPCAT) Scholars Program, University of Utah
2015 Fellow, American College of Surgeons
2016 Golden Anniversary Prize for Distinguished Clinical Investigation, University of Utah School of Medicine Alumni Association
2019 Awarded Status as Distinguished Fellow, Society of Vascular Surgery

C. Contribution to Science

1. My early work in basic science was focused on understanding the role of different extracellular matrix proteins in vascular development and disease. I received a Howard Hughes Medical Student Research Fellowship and Student Scholars Grant from the American Heart Association to work on this area of research during medical school in the laboratories of Dr. Mark Keating and Dr. Dean Li. During this pre-doctoral experience, I helped characterize mouse models of Hereditary Hemorrhagic Telangiectasia (mice deficient for endoglin) and Supravalvular Aortic Stenosis (mice deficient of elastin). This later work uncovered a novel signaling role for elastin in maintaining vascular smooth muscle cell homeostasis. Based on this finding, I helped to develop a novel elastin-coated stent that was tested in a porcine model of coronary restenosis and found to significantly inhibit neointimal hyperplasia. This work in animal models has subsequently led to further research development and human testing of elastin-based therapies.

      PMID: 9607766
My experience in translational research described above led me to seek formal training in clinical investigation methodology. During surgical residency, I enrolled in the Clinical Training Program in Clinical Investigation within the Johns Hopkins School of Public Health. The focus of my doctoral thesis work was centered on evaluating the use of observational study designs as the source of evidence to bridge knowledge gaps in translational research directed at aortic aneurysm disease therapy. The papers below describe patient and population-level observational studies that targeted knowledge gaps at the different phases in the spectrum of translational research. The first study is a patient-level observational analysis to evaluate angiotensin receptor blocker (ARB) therapy in patients with Marfan syndrome, which provided data to justify a large multicenter randomized trial. The following papers involve a population-level analysis to evaluate nationwide hospital adoption of beta-blocker therapy for patients undergoing high-risk aortic surgery.


3. My current research program as a Principal Investigator has been focused on understanding the association between perioperative care pathways with variation in surgical care coordination and their effect on outcomes following high-risk surgery. In particular, I have sought to identify risk factors for unplanned readmission following surgery, and factors that influence outcomes if surgical patients are readmitted for complications. The papers below provide evidence that care coordination is important for high-risk surgical patients after surgery, which includes having patients maintain continuity with the same medical and surgical providers following discharge to achieve the best outcomes.


4. My current area of research includes expertise with the application of implementation science model to improve the quality of care for older surgical patients across the entire episode of surgical care. This includes the development and use of health information technology (HIT) tools to facilitate implementation
of evidence-based processes of care for surgical patients. The papers before provide frameworks for implementation of surgical quality improvement measures and HIT communication tools.


**Complete List of Publications via MyBibliography**

**D. Research Support**

**Ongoing Research Support**

| Department of Veteran Affairs | Brooke (PI) | 10/01/2017 – 09/30/2020 |
| Patient-centered Pain Management During Episodes of Surgical Care |
| Goals: Implementation and Evaluation of Transitional Pain Service within SLC VA Medical Center |
| Role: Principal Investigator |

| NIH/NHLBI | U01HL107407 | Farber (PI) | 01/01/2015 – 12/31/2020 |
| Randomized, Multicenter, Controlled Trial to Compare Best Endovascular versus Best Surgical Therapy in Patients with Critical Limb Ischemia (BEST CLI) |
| Goals: National multicenter randomized trial comparing the effectiveness of surgical bypass versus endovascular treatment in adults with critical limb ischemia (CLI) who are eligible for both treatment options. |
| Role: Site Principal Investigator |

| Department of Veteran Affairs | Goodney (PI) | 09/01/2016 – 08/31/2020 |
| Alignment of Treatment Preferences and Repair Type for Veterans with Abdominal Aortic Aneurysm |
| Goals: To learn about factors that influence Veteran and provider’s choice of open surgical repair versus endovascular repair of abdominal aortic aneurysms |
| Role: Site Principal Investigator (VA SLC) |

| Vascular Cures Foundation | Kraiss (PI) | 01/01/2017 – 12/31/2019 |
| Implementing Pre-Operative Frailty Assessment in the Vascular Surgery Clinic (Frailty4Site Study) |
| Goals: Multi-site prospective study to evaluate effectiveness of different pre-operative frailty screening methods within vascular surgery clinics. |
| Role: Site Principal Investigator |

**Completed Research Support** (from past 3 years)

| NIH/NIA | 1R03AG050884-01 | Brooke (PI) | 08/15/2015 – 05/31/2017 |
| Improving Communication between Providers Caring for Older Patients Undergoing Surgery |
| Goals: Characterize how medical and surgical providers exchange information for medically complex older patients before and after surgery, identify gaps in shared cognition, and develop a health IT communication tool for EHR systems that improves health information exchange between medical and surgical providers. |
| Role: Principal Investigator |
7738317                Brooke (PI)            07/01/2016 – 06/30/2017
Patient-Centered Outcomes Research Institute (PCORI)
Patient-Centered Transitions for Episodes of Surgical Care
Goals: Assemble diverse stakeholder groups and develop comparative effectiveness research questions that evaluate care coordination pathways for surgical patients and caregivers during transitions of surgical care.
Role: Principal Investigator

90AX0013/01-00   Brooke (PI)            09/16/2016 – 09/15/2017
Office of the National Coordinator for Health Information Technology
Supporting closed-loop surgical referrals with a SMART on FHIR Dashboard
Goals: The objective of this project is to implement and pilot test a novel closed loop surgical referrals dashboard app that is integrated with commercially available EHRs through a standards-based approach using the emerging SMART on FHIR standard.
Role: Principal Investigator
NAME: Fagerlin, Angela

eRA COMMONS USER NAME (credential, e.g., agency login): fagerlin

POSITION TITLE: Professor and Chair, Department of Population Health Sciences

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

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<td>Hope College, Holland, MI</td>
<td>B.A.</td>
<td>05/1995</td>
<td>Psychology</td>
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<tr>
<td>Kent State University, Kent, OH</td>
<td>M.A.</td>
<td>08/1997</td>
<td>Experimental Psychology</td>
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<td>Kent State University, Kent, OH</td>
<td>Ph.D.</td>
<td>08/2000</td>
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A. Personal Statement

I am Professor and Chair of the Department of Population Health Sciences and a research scientist and core investigator at the Salt Lake City VA Informatics Decision-Enhancement and Analytic Sciences (IDEAS) Center for Innovation and I am excited to serve as a co-mentor for Dr. Jessica Cohan’s proposed VPCAT application. My expertise is in risk communication and the development, testing, and implementation of patient decision aids to promote shared decision making and patient centered care. Furthermore, as an experimental psychologist, I have extensive experience in survey development and implementation. I have also been involved in the development of over a dozen decision aids over a variety of conditions (e.g., bariatric surgery, congenital heart disease, atrial fibrillation, diabetes, chronic kidney disease, prostate, breast, colon, lung cancer screening/ prevention/treatment, genetic testing, preventive behaviors). My research has focused on testing decision support interventions in randomized controlled trials (RCT) with patients and testing risk communication strategies to support people’s understanding of the risks and benefits of treatments. I have conducted several systematic reviews of values clarifications and am well versed on the best methodologies for eliciting patient preferences. I am confident in my ability to support Dr. Cohan’s training goals as well as her research using survey-based methods. In addition, I have also substantial experience in mentoring trainees from various disciplines and providing support and guidance on grantsmanship and preparation of grant applications. I led the Center for Bioethics and Social Science in Medicine Postdoctoral Fellowship Training program (University of Michigan, 2005-2015) that housed between 2-4 postdoctoral fellows per year. This program received between 30-40 applications annually and graduating fellows typically accepted positions at R1 or R2 institutions. I have trained 5 MD fellows and 15 postdoctoral fellows (all but one of whom are now tenure-track faculty at academic institutions), and 6 junior faculty (as primary mentor, numerous others as secondary mentor). Of the junior faculty mentees, 6/6 have received career development awards (i.e., VA or NIH) and the three faculty mentees who have completed CDAs, all have transitioned to PIs of R01s. I look forward to providing support in Dr. Cohan’s research endeavors and training her to become an independent investigator in health services research. The following articles were led by career development awardees.

B. Positions and Honors

Positions and Employment:
- 1995 – 2000  Research Fellow, Kent State University, Kent, OH
- 1998 – 1999  Teaching Fellow, Kent State University, Kent, OH
- 2000 – 2016  Research Health Science Specialist, Ann Arbor Veterans Affairs Health Services Research and Development, Ann Arbor, MI
- 2000 – 2006  Research Investigator, Internal Medicine, University of Michigan, Ann Arbor, MI
- 2006 – 2008  Research Assistant Professor, Internal Medicine, University of Michigan, Ann Arbor, MI
- 2008 – 2015  Associate Professor, Internal Medicine, University of Michigan, Ann Arbor, MI
- 2015         Professor, Internal Medicine, University of Michigan, Ann Arbor, MI
- 2010 – 2015  Adjunct Associate Professor, Psychology, University of Michigan, Ann Arbor, MI
- 2010 – 2015  Co-Director, Center for Bioethics and Social Science and Medicine, Ann Arbor MI
- 2016 – 2015  Professor and Chair, Department of Population Health Sciences, University of Utah, Salt Lake City, UT
- 2016 – 2015  Research Health Science Specialist, Salt Lake City VA

Other Experience and Professional Memberships:
- 1994 – 2000  American Psychological Society
- 1996 – 2000  American Psychological Association
- 2001 – 2000  Society for Medical Decision Making
- 2007 – 2010  Trustee and Chair of Publications Committee, Society for Medical Decision Making
- 2013 – 2015  Vice-President Elect / Vice President, Society for Medical Decision Making
- 2015 – 2018  President Elect/President/Past-President, Society for Medical Decision Making

Honors:
- 1995  Phi Beta Kappa, Hope College
- 1999  Outstanding Manuscript, Kent State University, Applied Psychology Center
- 2005  Best Paper by a Young Investigator, Society for Medical Decision Making
- 2006  Awarded an APA Science Leadership Conference Invitation (extended to the 25 “best and brightest of the newest generation of psychological scientists”)
- 2009  Outstanding contributions to health psychology (Junior Award), American Psychological Association (Division 38)
- 2014  “Champion of Shared Decision Making” One of 25 individuals who provided inspiration and guidance in the shared decision making field by the Informed Medical Decisions Foundation.
- 2014  Thompson-Reuters tops 1% Cited Scholars in the World (Social Science)

C. Contributions to Science

1. The International Patient Decision Aids Standards collaboration (and others) have laid out broad guidelines for ensuring unbiased communication of the risks and benefits of medical interventions. However, the vagueness of the recommendations has required testing different methods for achieving the goals of the guidelines. Along with my colleagues, I have tested dozens of different methods for communicating risk. For instance, we have tested the best methods for graphically communicating risk. Our findings that have shown that pictographs (icon arrays) are the best communicators of risk have led to increased use of pictographs in patient decision aids and in the popular media.
   b. Witteman H, Zikmund-Fisher BJ, Waters EA, Gavaruzzi T, Fagerlin A. Risk estimates from an online risk calculator are more believable and recalled better when expressed as integers. Journal of Medical Internet Research. 2011; 13(3):e54. PMCID: PMC3222170

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2. With the increased emphasis on patient autonomy and shared decision making (i.e., increased collaboration in medical decision making between patients and physicians) and the decreasing time physicians are able to counsel patients on serious health conditions, patient decision aids have been proposed as a method for improving: 1) patients knowledge about their diagnosis and the risks and benefits of their treatment options, 2) the concordance between patients’ values and goals and the treatment they receive, and 3) patient involvement in shared decision making. My work in this area has focused on understanding the components of decision aids that make them more or less successful. In this aim, I have tested the impact of different risk messages within decision aids on patient knowledge, risk perceptions, and actual treatment decisions. I have also investigated the role of the literacy level of the decision aid on these same outcomes. In addition, I have worked with numerous clinicians on the development and testing of patient decision aids. Finally, I have been part of the IPDAS collaboration which regularly reviews the literature on the topics related to the IPDAS standards for the development of decision aids (particularly on the topics of literacy and values clarification methods). I have authored or co-authored dozens of papers on the topics related to shared decision making and the development and testing of decision aids.


3. Numeracy and literacy: Much of my work has focused on the role of numeracy (the ability to understand, and derive meaning from quantitative health information) and literacy in medical decision making. My work in this area has included 1) the development of the Subjective Numeracy Scale which measures people’s perceived numeracy skills (and has been translated into Spanish, French, Dutch, Portuguese, Norwegian, and Japanese), 2) testing risk communication methods designed to help lower numeracy individuals better understand the risks and benefits of interventions, 3) determine how patients’ numeracy affects their ability understand the risks and benefits of interventions, and 4) the development of low literacy patient decision aids.


4. In the early 1990’s living wills were advocated as a method to ensure patient autonomy. My graduate work tested whether living wills improved surrogate decision makers’ ability to make the same treatment
decisions as a patient would. In this work, we found that living wills did not improve the accuracy of surrogate decision makers, primarily because surrogates projected their own treatment preferences onto the patient. I was the key part of the team that designed a longitudinal study that examined these issues and I was the lead author on a Hastings Center review which detailed the failure of the living will and called into question the appropriateness of hospital policies that require that every patient admitted must be offered the opportunity to complete a living will. This paper has been cited over 350 times and republished in textbooks.


**Complete List of Published Work:**


2015  Research Support

**Ongoing Research Support**

QUE 15-286  Lowery/Fagerlin/Rosland (MPI)  10/01/2015 – 09/30/2020
Veterans Affairs Quality Enhancement Research Initiative

**PROVE: PeRsonalizing Options through Veteran Engagement**

Role: MPI Query and Project Leader

17SFRN33660465  Fagerlin (PI)  07/01/2017 – 06/30/2021
American Heart Association (AHA)

*Improving Patient and Family Health using Family-Centered Outcomes and Shared Decision-Making*
This grant is part of a larger center grant aimed at pediatric congenital heart disease. The proposed research will develop and test a decision aid to be used by families and providers of fetuses/infants diagnosed with congenital heart disease.

Role: PI of Population Health Project

1R01DK115844-01  Wright (PI)  09/01/2017 – 08/31/2022
NIH/NIDDK

*Improving Outcomes in Kidney Disease Using Systems-Driven Education and Coaching*

The goal of this project at the University of Utah is to advise on the design, testing, implementation, and analysis of the proposal research intervention, and advise on the design and implementation of measuring post-intervention qualitative outcomes.

Role: Co-Investigator

TL1TR001066-04  Fagerlin/Camp (MPI)  05/01/2018 – 04/30/2023
NIH/NCATS

*University of Utah Center for Clinical and Translational Science (CCTS)*

Through the University of Utah Center for Clinical and Translational Science (CCTS), the Training Core goal is to produce a next generation of scientists with strategic translational emphases who are successful communicators across disciplines and whose breadth of knowledge across the STARS (Spheres of Translation Across the Research Spectrum) can increase transdisciplinary cross-fertilization and accelerated healthcare advances.

Role: MPI (Contact PI)

18SFRN34110489  Fagerlin (PI)  07/01/2018 – 06/30/2022
AHA

*Studying Effectiveness in Patient Centered Care*
The Studying Effectiveness in Patient-centered care (STEP UP-AF) Center takes as its mission to determine which type of decision aid (DA) most effectively promotes shared decision making (SDM) to improve the quality and patient-centeredness of care for patients diagnosed with atrial fibrillation (AF).

Role: Center PI

1R01MD012243-01A1 Makarov/Ravenell (MPI) 08/22/2018 – 03/31/2023
NIH/NIMHD

Randomized trial of community health worker-led decision coaching to promote shared decision making for prostate cancer screening among Black male patients and their providers.

The goal of this study is to investigate the efficacy of a Community Health Worker (CHW)-led decision coaching intervention to promote Shared Decision Making (SDM) among Black men considering prostate cancer screening within a Federally Qualified Health Center (FQHC) network.

Role: Co-Investigator

Completed Research Support (abbreviated list)

5R21AG052849-02 Taksler (PI) 09/01/2017 – 08/31/2019
NIH/NIA

Individualizing Disease Prevention for Middle-Aged Adults

This goal of this project is to help middle-aged adults make an informed decision about utilization of health care services most likely to promote longevity. We will develop and test a framework to communicate the net benefits of all major preventive care services, individualized for a patient’s age and risk factors.

Role: Co-Investigator

5R21NR016332-02 Zahuranec (PI) 09/19/2017 – 07/31/2019
NIH/NINR

Development of a tailored decision support intervention for stroke surrogate decision makers

The purpose of this project is to develop and test a decision support tool for family members of patients with severe stroke.

Role: Co-Investigator

5R01CA181357-04 Schonberg (PI) 06/12/2014 – 05/31/2019
NIH/NCI

Randomized Trial of a Mammography Decision Aid for Women Aged 75 and Older

The purpose of this project is to test the effectiveness of a decision aid designed to help older women decide whether or not they should undergo a screening mammography after the age of 75.

Role: Co-Investigator / Site Lead