



YEAR OF AWARD: 2005

Karen Rheuban, M.D.

**Professor of Pediatrics
Senior Associate Dean for
Continuing Medical Education
and External Affairs**

**Director of the Karen S. Rheuban
Center for Telehealth**

**Years of service at UVA:
1980-present**

Dr. Karen Rheuban and her husband, William, came to Charlottesville together in 1974 for their residencies in Pediatrics and Psychiatry (respectively) at the University of Virginia School of Medicine. From a non-medical family, she became interested in pursuing a career in medicine not long after her father was diagnosed with lymphoma. Growing up, she was

fascinated with science and health, and her summer jobs included volunteer work in a local hospital and in a children’s rehabilitation clinic near her home.

After completing her residency in Pediatrics, Rheuban pursued fellowship training in pediatric cardiology and joined the UVA faculty in 1980. A native New Yorker, throughout her career, she took to heart Yogi Berra’s advice: “When you come to the fork in the road, take it!”

As a pediatric cardiologist, Rheuban cares for infants, children, and adults with congenital and acquired heart disease, which has included

travel to clinics across the Commonwealth. After being named Associate Dean for Continuing Medical Education in 1990, her experience traveling throughout Virginia advancing provider continuing education inspired her to co-found the UVA telemedicine program with Lt. Col (ret) Eugene Sullivan in the early 1990s. The program was designated as a center in 2010, and in 2016 was renamed the Karen S. Rheuban Center for Telehealth in recognition of her significant contributions to the field of telemedicine.

Rheuban’s influence extends well beyond UVA.

She is a past president of the American Telemedicine Association, served as a board member of the Center for Telehealth and e-Health Law, and is the board chair of the Virginia Telehealth Network. She served on and chaired the board of Virginia Medicaid, along with several other telehealth-related boards and nonprofits. She has presented congressional testimony regarding telehealth to five US House committees, and twice before the US Senate. In Virginia, her efforts led in 2010 to the passage of a sweeping telemedicine reimbursement bill for telehealth services, and subsequently to several other bills enabling adoption of telemedicine and remote patient monitoring.

A fellow of the American College of Cardiology, the American Academy of Pediatrics, and the American Telemedicine Association, Rheuban is listed in the Best Doctors in America database. She also was profiled in the National Library of Medicine's exhibit, "Changing the Face of Medicine: Celebrating America's Women Physicians."

WHY DID YOU COME TO UVA?

My husband and I were married in medical school. Bill identified UVA as a place at which he wanted to train because of faculty members whose research he admired. I joined him for his interviews, and fell in love with Charlottesville, and with the faculty in the Department of Pediatrics. We came for our residency training; I stayed at UVA for my fellowship training in pediatric cardiology and then joined the faculty in 1980.

Most of my initial work on the faculty was clinical, with some clinical research included in my portfolio. Building upon the legacy of my mentor, Dr. Martha Carpenter, we traveled extensively to see children with heart disease at locations across the Commonwealth. We saw patients in Bristol, Roanoke, Winchester, and Lynchburg, because it was a more convenient way for patients to receive care.

In 1990, Dean Robert Carey, another of my most treasured mentors, approached me about potentially becoming the Associate Dean for Continuing Medical Education. I decided that was a "fork in the road" worth taking to enable us to expand outreach by UVA faculty to practitioners across the Commonwealth and beyond. It was during that timeframe that I learned about the nascent field of telemedicine, in which the relatively new technology of video-conferencing could be used not just for educational services, but also for patient care. That was in 1992.

I had the good fortune of meeting Lt. Col (ret) Eugene Sullivan, a systems engineer who had come from the Pentagon to UVA to work with Dr. Neal Kassell after his distinguished career in the US Army, and together we developed the telemedicine program with immense support from senior leadership at UVA. Our program evolved and grew over the years. Although UVA Telemedicine was initially designed to provide access to specialty care for patients in remote communities, we subsequently worked to advocate for the development of a remote monitoring program for patients with chronic illness, for patient education supported by video programs, and a host of other virtual services.

Fast-forward to COVID-19, when what we had built at UVA for specialty telemedicine, by necessity, evolved into

continued

In Her Words | Karen Rheuban

a tool for access to care for all our patients, replacing, by necessity, visits that would have been held in person with virtual visits. We worked extensively with many colleagues to make that happen.

WHAT WAS UVA LIKE WHEN YOU ARRIVED? HOW HAS IT CHANGED AND/OR STAYED THE SAME?

When I arrived at UVA, in the Class of 1974, there were four women graduates from the UVA School of Medicine, out of a class of approximately 100 medical students. I had just graduated from the Ohio State University College of Medicine, where, at that time, 20 percent of my classmates were women. It was heartening to witness the transformation in enrollment at UVA by women, and by underrepresented minorities in medicine.

Now, at least 50 percent of the undergraduate medical education classes are women. Historically, in pediatrics, we did have more women trainees than did many of the other specialties.

Here at UVA, in Pediatrics, many strong and successful women faculty paved the way for my generation of faculty and those that followed, to include Dr. Martha Carpenter, my personal mentor in pediatric cardiology and an extraordinary clinician, and Dr. Ann Johanson, who founded the division of pediatric endocrinology. And, of course, Dr. Sharon Hostler, in developmental pediatrics, herself another Zintl awardee. There is no question, a career in medicine was a greater challenge for them than it was for me.

I would love to be remembered as a collaborator on a mission – one member of a great network of UVA colleagues and advocates who contributed to the transformation of healthcare.

Dean Robert Carey truly made a difference for women at the School of Medicine. Under his leadership, the committee on women was established to develop greater equity in recruitment, promotion, tenure, and salary equity for women. He was the first Dean who appointed women to senior administrative leadership positions as well. He is an amazing leader, and we are privileged that he remains on our faculty today.

WHAT SUPPORT(S) DID YOU HAVE?

I've had a very robust support network. I have a loving family, a terrific husband, himself a physician, and three wonderful children. Having a spouse in medicine was helpful, as it enabled us to understand and appreciate that which the other was experiencing. Neither of my parents attended college and as children of the Depression, it was their goal that my sister and I pursue our dreams educationally.

My own colleagues have also been incredibly supportive. I am grateful for colleagues such as Gene Sullivan, with whom I co-founded the telemedicine program or Jann Balmer, PhD, RN though whose vision our

CME program received national prominence.

As an example, Gene was so dedicated to our mission that in the earliest phases of growing our telemedicine program, he would personally climb through the ceilings of hospitals to string the telecommunications cables that would enable us to connect via telemedicine to serve patients.

Following Gene's tenure, David Cattell-Gordon, served as the next Director of Telemedicine. Dedicated to outreach, David is a visionary who developed innovative outreach programs incorporating our students, and he championed scaling telemedicine more broadly to underserved communities.

I have been fortunate to have been mentored by our younger faculty as well. Passionate and creative colleagues such as Dr. Nina Solenski in the Neurology department, under whose leadership we built our telestroke program, and Dr. Andy Southerland, who took the next step and advanced the telestroke program to mobile settings.

WHAT KEPT YOU GOING IN MOMENTS OF ADVERSITY?

In moments of adversity, it has been my approach to logically address issues of concern with colleagues, and to find solutions collaboratively. I have always tried to stay true to the mission, knowing eventually, we would "get there." In that regard, I owe a huge debt of gratitude to Leonard Sandridge, the COO of the University of Virginia when we launched our telemedicine program. When we faced what seemed like insurmountable roadblocks, with his support, we connected with legislators from southwest Virginia such as State Senator William Wampler, or US Congressman Rick Boucher, who helped us to advance public policies that enabled us to build and sustain our program, and today, see it evolve into mainstream healthcare.

HOW DO YOU WANT TO BE REMEMBERED? WHAT LEGACY ARE YOU LEAVING THAT YOU ARE MOST PROUD OF?

I have had an amazing career and as such, all elements of my work mean so much to me. As a pediatric cardiologist, I have been privileged to care for patients from infancy into adulthood. I'm very proud of contributing to the development of our continuing medical education program, growing it from a small program to a nationally recognized program in partnership with Jann Balmer. I am also proud to have chaired the Virginia Board of Medical Assistance Services (Medicaid) and to have worked with so many leaders and dedicated public servants, including through Medicaid expansion in Virginia. Of course, I am honored to have contributed to the development and scaling of telemedicine at UVA, enabling us to provide care to patients across the Commonwealth and beyond. That work prepared us to respond to the COVID-19 public health emergency. The success of our telemedicine program relied on so many contributors – clinicians, technologists, innovators, administrators, broadband providers, attorneys, policymakers – and of course, our patients. Most of all, professionally, I would love to be remembered as a collaborator on a mission – one member of a great network of UVA colleagues and advocates who contributed to the transformation of healthcare.



Here at UVA, in Pediatrics, many strong and successful women faculty paved the way for my generation of faculty and those that followed, to include Dr. Martha Carpenter, my personal mentor in pediatric cardiology and an extraordinary clinician, and Dr. Ann Johanson, who founded the division of pediatric endocrinology. And, of course, Dr. Sharon Hostler, in developmental pediatrics, herself another Zintl awardee. There is no question, a career in medicine was a greater challenge for them than it was for me.