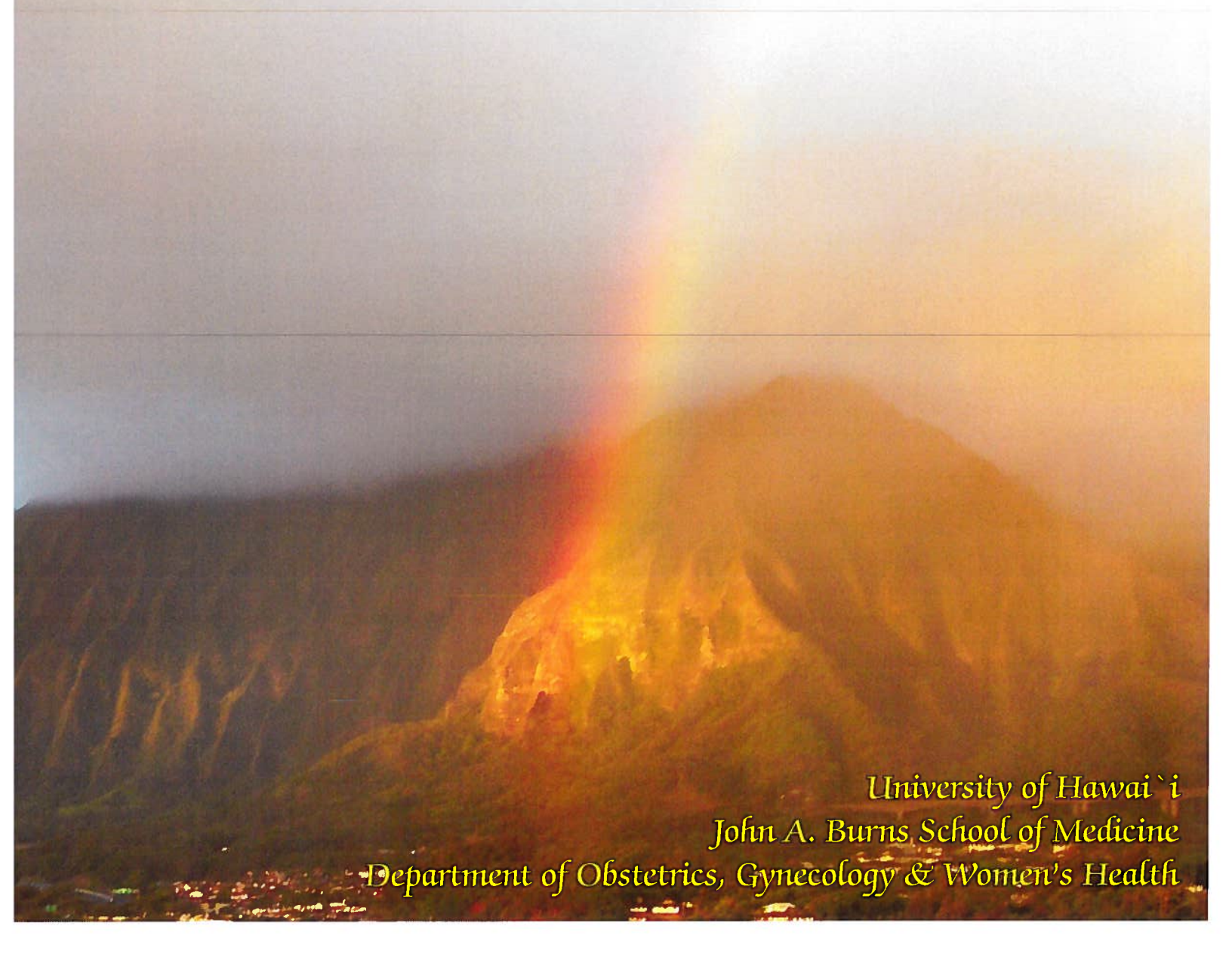


*Sixteenth Annual
Obstetrics, Gynecology
& Women's Health
Resident Research Day*



University of Hawai`i
John A. Burns School of Medicine
Department of Obstetrics, Gynecology & Women's Health

Koʻolau Range is a name given to the fragmented remnant of the eastern or windward shield volcano of the Hawaiian island of Oʻahu. It is not a mountain range in the normal sense, because it was formed as a single mountain called Koʻolau Volcano (koʻolau means “windward” in Hawaiian). What remains of Koʻolau is the western half of the original volcano that was destroyed in prehistoric times when the entire eastern half—including much of the summit caldera—slid cataclysmically into the Pacific Ocean. Remains of this ancient volcano lie as massive fragments strewn nearly 100 miles over the ocean floor to the northeast of Oʻahu. The modern Koʻolau mountain forms Oʻahu’s windward coast and rises behind the leeward coast city of Honolulu — on its leeward slopes and valleys are located most of Honolulu’s residential neighborhoods.

The volcano is thought to have first erupted on the ocean floor more than 2.5 million years ago. It eventually reached sea level and continued to grow in elevation until about 1.7 million years ago, when the volcano became dormant. The volcano remained dormant for hundreds of thousands of years, during which time erosion ate away at the initially smooth slopes of the shield-shaped mountain; and the entire mass subsided considerably. The highest elevation perhaps exceeded 3000 m (10,000 ft), although today it is only 960 m (3149 ft; Puʻu Konahuanui).

After hundreds of thousands of years of dormancy, Koʻolau volcano began to erupt again. Some thirty eruptions over the past 500,000 years or so have created many of the landmarks around eastern Oʻahu, such as Diamond Head, Hanauma Bay, Koko Head, Punchbowl Crater, Tantalus, and Āliapaʻakai. Geologists do not always agree on the dates of these more recent eruptions, some dating them to around 32,000 years ago, others to as recently as 10,000 years ago. Geologists believe that there is at least a remote possibility that Koʻolau volcano will erupt again.

Description above from Wikipedia, the free encyclopedia

cover: The “Koʻolau Range,” photo courtesy of Karen Akiyama

**Sixteenth Annual
Obstetrics, Gynecology & Women's Health
Resident Research Day**

**May 11, 2011
Hale Ikena
Honolulu, Hawai`i**



**University of Hawai`i
John A. Burns School of Medicine
Department of Obstetrics, Gynecology & Women's Health**





**LYNNAE MILLAR
SAUVAGE, M.D.**

**LYNNAE MILLAR SAUVAGE, M.D.
PROFESSOR AND CHAIR
DEPARTMENT OF OBSTETRICS, GYNECOLOGY AND
WOMEN'S HEALTH
UNIVERSITY OF HAWAII
JOHN A. BURNS SCHOOL OF MEDICINE**

We would like to welcome everyone to our annual resident research day presentations. The residents in Obstetrics and Gynecology have worked hard to generate a hypothesis and design and conduct an original research project. The knowledge and experience they have gained throughout this effort will aid them to critically analyze the medical literature and determine optimum evidence based practice. We hope it encourages some of them to enter into an academic career, and continue as clinical researchers advancing women's health.



MICHAEL AARONOFF, M.D.

**MICHAEL AARONOFF, M.D., FACOG
ASSOCIATE PROGRAM DIRECTOR
DIRECTOR OF RESIDENT RESEARCH
DEPARTMENT OF OBSTETRICS, GYNECOLOGY AND
WOMEN'S HEALTH
UNIVERSITY OF HAWAII
JOHN A. BURNS SCHOOL OF MEDICINE**

Welcome to the 2011 Resident Research Day. I congratulate our residents on the completion of their excellent projects and for your support of resident research. As in years past, our patients, hospitals, department, Hawaii Residency Program, faculty, visiting professor, research judges, teaching staff, medical students, nursing, ancillary and support staff have supported our residents as they accomplished this work. And with each of these projects, we have seen again that the most interesting results are obtained by asking the right kinds of questions.

GUEST SPEAKER & JUDGE

May 11-13, 2011



Andrew Berchuck, M.D.

**Director of Gynecologic Cancer Research
Professor of Gynecologic Oncology, Department of Obstetrics and Gynecology
Duke University Medical Center
Durham, North Carolina**

Andrew Berchuck, M.D. is Co-Director of the Duke Comprehensive Cancer Center Breast/Ovarian Cancer Program. He also serves as the Director of Gynecologic Cancer Research.

Dr. Berchuck has developed a research program that focuses on the molecular-genetic alterations involved in malignant transformation of the ovarian and endometrial epithelium. The objectives of his research include 1) identification of ovarian cancer susceptibility polymorphisms through a population-based case-control molecular epidemiologic study, and 2) using microarrays to define molecular signatures that are predictive of clinical phenotypes and response to targeted biological therapies.

Dr. Berchuck attended medical school and received his Obstetrics and Gynecology residency training at Case Western Reserve University in Cleveland, Ohio. His research and clinical training in Gynecologic Oncology was completed at UT Southwestern in Dallas, Texas and Memorial Sloan-Kettering Cancer Center in New York City. Recent Press: *"Catching Ovarian Cancer Early May Miss Aggressive Tumors," US News & World Report, March 24, 2009 and ABC News, March 24, 2009.*

Wednesday, May 11, 2011, Hale Ikena at Fort Shafter

8:30 a.m. - 1:00 p.m., *"Prospects for Individualized Treatment and Prevention of Ovarian Cancer"*
OB/GYN Research Day Lecture

Participants: Faculty, Private Attending Physicians, Residents and Medical Students

Friday, May 13, 2011, Kapi'olani Medical Center for Women & Children, Room 815

9:15 a.m. - 10:15 a.m., *"Management of Hereditary Gynecologic Cancers"*

11:45 a.m. - 12:45 p.m., Review & Advise: Ongoing 2nd Year Research Projects

Attendees: Faculty, Clinical Faculty, Residents, and Medical Students

PAST RESEARCH DAY GUEST SPEAKERS

- 2010 **Leo R. Brancazio, M.D., FACOG**, Vice Chair for Patient Safety & Quality and Associate Professor, Duke University Department of Obstetrics and Gynecology, Duke University Medical Center, Durham, North Carolina, Medical Director at Duke University Hospital Labor and Delivery, Durham, North Carolina, "*The Ideal Cesarean Section Rate*"
- 2009 **Ruth Word, M.D., FACOG**, Professor of Obstetrics and Gynecology & Director, Urogynecology Research and the Human Biologic Fluid and Tissue Acquisition Core Laboratory, University of Texas Southwestern Medical Center, Dallas, Texas, "*New Insights into the Pathophysiology of Pelvic Organ Prolapse*"
- 2008 **Charles W. Weems, Ph.D.** Professor of Animal Science, CTAHR Animal Reproduction Research Laboratory, College of Tropical Agriculture and Human Resources, Department of Human Nutrition, Food & Animal Science, University of Hawaii, "*Establishment of Pregnancy*"
- 2007 **Robert Taylor, M.D., Ph.D.** Acting Professor, and Vice Chair for Research, Department of Gynecology and Obstetrics, and Acting Professor, Department of Cell Biology, Emory University School of Medicine, "*Cellular and Molecular Pathophysiology of Preeclampsia*"
- 2006 **Professor Warwick Giles, MB. BS(NSW), FRACOG, Ph.D(Syd.) DDU.CMFM** Conjoint Professor, The University of Newcastle, Callaghan, NSW, Australia and Director, John Hunter Hospital, Newcastle NSW, Australia, "*Fibronectin and other Markers of Preterm Delivery*"
- James M. Roberts, M.D.** Senior Scientist and Director, Magee-Women's Research Institute, Professor and Vice Chair (Research), Obstetrics, Gynecology and Reproductive Sciences, University of Pittsburgh, "*Whither Toxaemia*"
- 2005 **Robert B. Jaffe, M.D., M.S.** Fred Gellert Endowed Chair in Reproductive Medicine & Biology, University of California, San Francisco, "*Angiogenesis and Ovarian Cancer*"
- 2004 **Diana W. Bianchi, M.D.** Chief of the Division of Genetics in the Department of Pediatrics at Tufts-New England Medical Center, Natalie V. Zucker Professor of Pediatrics and Obstetrics and Gynecology "*Circulating Fetal Nucleic Acids in Maternal Blood: Origin and Diagnostic Applications*"
- 2003 **Roy M. Pitkin, M.D.** Former Editor, *Obstetrics and Gynecology*, *Clinical Obstetrics and Gynecology*, Emeritus Professor and Chairman of Obstetrics and Gynecology, University of California, Los Angeles School of Medicine, "*Obstetric-Gynecologic Research, 1953 - 2002*"
- 2002 **James R. Scott, M.D.** Professor, University of Utah, Department of Obstetrics and Gynecology, Editor of *Obstetrics & Gynecology*, Co-Editor of *Clinical Obstetrics and Gynecology*, "*Pregnancy in Transplant Patients*"
- 2001 **William Droegemueller, M.D.** Clinical Professor and Chairman Emeritus, University of North Carolina, Department of Obstetrics and Gynecology, Associate Editor of *Obstetrics and Gynecology*, "*Don't Look Back... Someone is Gaining on You, A Discussion of Mentoring*"
- 2000 **Robert Israel, M.D.** Chief of Gynecology, University of Southern California, Department of Obstetrics and Gynecology, Associate Editor of *Obstetrics and Gynecology*, "*Endometriosis: A Continuing Conundrum*"
- 1999 **David A. Grimes, M.D.** Vice President of Biomedical Affairs Family Health International, Associate Editor, *Obstetrical and Gynecological Survey*, *Contraception*, Former Professor and Vice-Chairman, Department of Obstetrics, Gynecology and Reproductive Sciences, University of California, San Francisco, "*Evidence-based Medicine in Obstetrics and Gynecology: the Paradigm for the Next Century*"
- 1998 **Roy M. Pitkin, M.D.** Editor, *Obstetrics and Gynecology*, Editor, *Clinical Obstetrics and Gynecology*, Former Professor & Chairman of Obstetrics & Gynecology, University of California, Los Angeles School of Medicine, "*The Peer Review System in Medical Publishing*"
- 1997 **John T. Queenan, M.D.** Professor and Chairman of Obstetrics and Gynecology, Georgetown University School of Medicine & Chief of Georgetown University Hospital since 1980, Editor-in-Chief of *Contemporary Obstetrics and Gynecology*

PAST RESEARCH DAY AWARD RECIPIENTS

Best Study Design Award

- 2010 **Pai-Jong Stacy Tsai, M.D., M.P.H.** *“Racial Differences in Perineal Body Length in First Stage of Labor”*
- 2009 **Maria G. Barrett, M.D.** *“Knowledge and Misconceptions of Intrauterine Devices in Adolescent Patients”*

Most Potential to Impact Clinical Practice Award

- 2010 **Celeste S. Adrian, M.D.** *“Assessment of the Accuracy of Information Regarding Emergency Contraception on the Internet”*
- 2009 **Karen A. Soules, M.D.** *“Does Cell Phone-Bluetooth Technology for the Outpatient Management of Diabetes in Pregnancy Improve Patient Compliance and Satisfaction when Compared with Traditional Methods of Blood Sugar Reporting?”*

Best Overall Research Project Award

- 2010 **Pai-Jong Stacy Tsai, M.D., M.P.H.** *“Racial Differences in Perineal Body Length in First Stage of Labor”*
- 2009 **Shera L.C. Sugibayashi, M.D.** *“Effectiveness of Examining Amniotic Fluid Arborization in Diagnosing PPROM in Early Pregnancies”*

First Place Award

- 2008 **Chrystie K. Fujimoto, M.D.** *“The Effect of Methamphetamine Use on the Placenta”*
- 2007 **Aya Sultan, M.D., Ph.D.** *“Association of Ovarian Cancer and Atypical Endometriosis”*
- 2006 **Reina M. Ahern, M.D.** *“Knowledge and Attitudes of Emergency Contraception in Hawaii’s Adolescents”*
Renee L. Sato, M.D. *“Antepartum Seafood Consumption and Mercury Levels in Newborn Cord Blood”*
- 2005 **Reni A. Y. Soon, M.D.** *“Comparison of Active Phase and Second Stage of Labor in Adolescents and Adults”*
- 2004 **Scott D. Eaton, M.D.** *“EKG Changes Occuring with Magnesium Administration for Preterm Labor”*
- 2003 **Sapna M. Janas, M.D.** *“Rate of Complication from Third Trimester Amniocentesis Performed at the Fetal Diagnostic Center”*
- 2002 **Ian A. Oyama, M.D.** *“Local Anesthetic for use in Colposcopic Biopsies”*
Melissa J. Lawrence, M.D. *“Impact of Fetal Fibronectin Testing at Kapi’olani Medical Center”*
- 2001 **Seema Sidhu, M.D.** *“Randomized, Double-Blind Trial of Rectal Misoprostol Versus Oxytocin in Management of the Third Stage of Labor”*
- 2000 **Deborah D. Geary, M.D.** *“TDx Surfactant/Albumin Ratio and Lamellar Body Count: Effect of Blood and Meconium Contaminants on Fetal Lung Maturity Assays”*
- 1999 **Steven M. Nishi, M.D.** *“Sample Adequacy of Endocervical Curettage (ECC) Compared with Endocervical Brush”*
- 1998 **Julie Ann Henriksen, M.D.** *“Nitric Oxide in the Human Placenta”*
- 1997 **Cheryl Leialoha, M.D.** *“Uriscreen, a Rapid Enzymatic Urine Screening Test for the Detection of Bacteriuria in Pregnancy”*
- 1996 **Christine Brody, M.D.** *“Vaginal Birth After Cesarean Section in Hawaii: Experience at Kapiolani Medical Center for Women and Children”*

RESEARCH DAY PROGRAM

Wednesday, May 11, 2011

8:30 a.m. Registration

8:45 a.m. Welcome Remarks and Introduction of Speaker by Lynnae Millar Sauvage, M.D., Chair

9:00 a.m. "Prospects for Individualized Treatment and Prevention of Ovarian Cancer," Andrew Berchuck, M.D.

9:45 a.m. Introduction of Residents by Michael Aaronoff, M.D., Director of Resident Research/
Janet Burlingame, M.D., Program Director

Residents' Research Presentations

TIME	PRESENTER	ABSTRACT
9:45 a.m.	Juliana R. Melo, M.D.	"The Impact of a Longitudinal Curriculum on Medical Student Obstetrics and Gynecology Clinical Training"
10:00 a.m.	Judy A. Honegger, D.O	"Rate of Elective Induction Between 34 0/7 – 38 6/7 Weeks Gestation at Kapi`olani Medical Center for Women and Children"
10:15 a.m.	Lauren Millet, M.D.	"Rates of Bacteriuria in Laboring Women with Epidural Analgesia - Continuous vs. Intermittent Bladder Catheterization"
10:30 a.m.	Ronnie B.N. Texeira, M.D.	"Blood Loss at the Time of First Trimester Surgical Abortion in Anticoagulated Women: A Case Series"
10:45 a.m.	Jason Fong, M.D.	"Female Genital Appearance: An Evaluation of Intra-Subject Variability and Symmetry"
11:00 a.m.	Kassondra S. Grzankowski, M.D.	"Microsatellite Instability in Endometrial Cancer in Patients with HNPCC"

2011 JUDGING PANEL:



*Andrew Berchuck, M.D.
Director, Gynecologic Cancer Research
Professor, Gynecologic Oncology
Department of Obstetrics and Gynecology
Duke University Medical Center*



*Michael Carney, M.D.
Assistant Professor
Department of OB/GYN
John A. Burns School of Medicine
Gynecologic Oncologist
Kapi`olani Women's Cancer Center*



*Kenneth Nakamura, M.D., C.M.O.
Professor & Chair
Department of Pediatrics
Chief Medical Officer
Kapi`olani Medical Specialists
Neonatal-Perinatal Medicine*

11:00 a.m. Buffet Lunch and Judges' Deliberations

12:30 p.m. Awards Presentation - Lynnae Millar Sauvage, M.D. and Andrew Berchuck, M.D.

Kassondra S. Grzankowski, M.D.

Kassondra Suzanne Grzankowski, M.D.

- * 2010 Outstanding Second Year Resident for Excellence in Medical Student Teaching Award
- * 2009 Outstanding First Year Resident for Excellence in Medical Student Teaching Award

State University of New York at Buffalo School of Medicine, Buffalo, New York

Honors/Awards:

- * 2008 Hans J. Lowenstein Award Recipient
- * 2007 Gold Humanism Honor Society Inductee
- * 2005-2006 Dean's Letter of Commendation

B.S. Biological Sciences, State University of New York at Buffalo Honors Program, 1998-2002

Honors/Awards:

- * Magna Cum Laude Graduate
- * 1998, 1999, 2000, 2001, 2002 Dean's Letter of Commendation

Hobbies & Interests: Volleyball, cooking/gourmet food, swimming, interior design/decoration, traveling, ice skating

Place of Birth: West Seneca, New York

Medical Interests: Gynecologic Oncology, Robotic Surgery

Research Experience: Summer Research Associate, Diabetes Institute of Texas, San Antonio, Texas: Conducted clinical research in the Actos Now For Prevention of Diabetes (ACT NOW study). The purpose of this study was to examine whether pioglitazone versus placebo can reduce the conversion rate of impaired glucose tolerance to type 2 diabetes mellitus; directed by Ralph A DeFronzo, M.D., Summer 2005.

-Associate Research Scientist, IMMCO Diagnostics Incorporated, Buffalo, NY: Extensive experience in development of diagnostic immunoassays utilizing ELISA, Western Blot, and IFA platforms, developed and obtained FDA approval for: Anti-nuclear antibodies Screen ELISA, Human tissue transglutaminase ELISA for IgG, IgA, and IgG/IgA, experience in molecular biology techniques, and successfully designed primers, epitope mapped, transformed, cloned, and amplified Protein Zero for testing for potential involvement in auto-immune hearing loss, directed by Vijay Kumar, Ph.D., 2002-2004.

-Summer Research Fellow, Institute of Human Virology, Baltimore, M.D.: Conducted laboratory experiments using in vitro stem cell and cancer cell based assays on novel biological compounds for potential use in HIV vaccine development and cancer treatment directed by Robert Gallo, M.D., Summer 2001.

-Biological Sciences Researcher, SUNY at Buffalo: Assisted in researching the effects of Gravitropism in rhizoids in *C. coralline* including the mechanism of the statolith falling, the interaction with the cytoskeleton, and the effects of changing tension on the cytoskeleton, directed by Mary Bisson, Ph.D., 2001.

Publications/Abstracts: Kaneshiro, B, Oyama, I, **Grzankowski, K**, Minaglia, S; *Assessment of Internet-Based Information regarding Pelvic Organ Prolapse and Urinary Incontinence*, submitted, pending acceptance to Journal of Pelvic Medicine & Surgery.

Grzankowski KS, Carney M., *Quality of life in ovarian cancer*. Cancer Control. 2011 Jan;18(1):52-8. PMID: 21273980

Stromgren Allen, N., Collings, D., Siegel, A., **Grzankowski, K.**, Johannes, E. & Bisson, M.A.. *Statolith Movement in Response to Gravitational Stimulation in the Chara Rhizoid*. The Journal of Eukaryotic Microbiology, 2003 Mar; Volume 50(Issue 2):page 1A-12A.



Poster Presentations: Grzankowski, K, Wright, K. Reliable Method of Detecting Anti-Nuclear Antibodies by Solid Phase Immunoassay. Presented at XIX International Congress of Clinical Chemistry Annual Meeting, Orlando, Florida, July 2005.

Stromgren Allen, N., Collings, D., Sigel, A., Grzankowski, K., Johannes, E. & Bisson, M.A.. Statolith Movement in Response to Gravistimulation in the Chara Rhizoid. Presented at The Society of Protozoologists 54th Annual Meeting, Salt Lake City, Utah, May 2002.

Bisson, M., Collings, D., Allen, N., Grzankowski, K. Statolith Movement in Response to Gravistimulation in the Chara Rhizoid. Presented at American Society of Plant Physiologists Annual Meeting, Providence, Rhode Island, July 2001.

Microsatellite Instability in Endometrial Cancer in Patients with HNPCC **Kassandra S. Grzankowski, M.D., Keith Terada, M.D. and David Shimizu M.D.**

Background: HNPCC (hereditary nonpolyposis colorectal cancer) is the most common hereditary cancer syndrome in the United States. These individuals have a high risk of cancers of the colon, endometrium, ovary, stomach, and brain. Over 50% of women with HNPCC will present with endometrial cancer as their first malignancy. Because of their genetic predisposition these individuals are generally diagnosed at a younger age; approximately 11% of women under the age of 50 with endometrial cancer will have HNPCC.

HNPCC is associated with mutations in a family of genes called mismatch repair genes. The most common mutations are MLH 1, MSH 2, MSH 6, and PMS 2. Defects in these genes are associated with microsatellite instability in tumor tissue. The function of these genes is to repair DNA mismatching that occurs during cell replication. Testing for germline mutations in HNPCC genes is expensive and time consuming; therefore it is more effective to screen patients by testing for microsatellite instability (MSI) in fixed tumor tissue. This can be easily done on paraffin blocks with immunohistochemical stains.

There are many unanswered questions regarding the natural history of endometrial cancer in patients with HNPCC. It is unclear whether these tumors differ from sporadic endometrial cancer other than occurring at a younger age. The current study is a retrospective analysis to further clarify the clinical aspects of patients with HNPCC and endometrial cancer.

Objective: The current study is a retrospective analysis to evaluate and compare clinical/pathologic findings and in patients with HNPCC and MSI high endometrial cancer compared to patients with MSI normal tumors. All pts were treated by the principal investigator at a single institution over a 10 year period (1998-2008). Information was obtained from clinical charts, office records, and the hospital tumor registry.

Materials and Methods: A listing of patients between the ages of 18 and 60 with endometrial cancer treated by the principal investigator was obtained from the hospital tumor registry. The pathology department retrieved the tissue blocks for MSI immunohistochemical staining. A 10 year period was reviewed (1998-2008) and 110 pts were identified. Age, grade, stage, myometrial involvement, and lymph-vascular involvement, estrogen and progesterone receptor status, disease status and vital status were compared. Patients were categorized into two groups: patients with MSI high tumors and patients with MSI normal tumors. Chi-square and multivariate analysis were used to compare clinical and pathologic findings in these two groups of patients. P values of less than 0.05 are considered significant.

Results: Pending

Future: Funding is currently being obtained to expand the study. Ideally a total 50 MSI high tumors can be identified. At that point, life table analysis will be used to compare survival in these two groups of patients.

Jason Fong, M.D.

Jason Fong, M.D.

First two years of residency at New York Medical College/ Metropolitan Hospital Center OB/GYN Program, New York, New York

Georgetown University School of Medicine, Washington, District of Columbia

Honors/Awards:

**Honors in Biochemistry, Patients, Physicians & Behavior, Clinical Ethics, Psychiatry, Physical Diagnosis*

*B.A. Molecular Cellular Biology
University of California, Berkeley, California*

Language Fluency (other than English): Understands Cantonese

Hobbies & Interests: Hip hop culture, culinary arts, car modification, ultimate Frisbee, tennis

Place of Birth: Manhasset, New York

Medical Interests: Nutrition in pregnancy

Research Experience: Research Assistant to George Sensabaugh, Ph.D., UC Berkeley, Department of Public Health. I looked at a possible genetic link between hemochromatosis and those who underwent hip replacement surgery. In particular, I searched for combinations of mutations on chromosome six that showed a link to hemochromatosis. To perform this research, I applied molecular biology techniques such as DNA extraction from bone and PCR typing. August 2000-April 2003.

Presentations: Fish Oil in Pregnancy, Kapiolani Medical Center, March 9, 2011.
Updates on Menorrhagia, the Queen's Medical Center, December 20, 2010.



Female Genital Appearance: An Evaluation of Intra-Subject Variability and Symmetry

Jason Fong, M.D. and Steven Minaglia, M.D.

Background: The request for surgical enhancement of female external genitalia is increasing. The American Society of Plastic Surgeons reported a 30% increase in vaginal rejuvenations during 2005-2006. A 2009 European survey showed that approximately 30% of females believed the appearance of their labia not to be normal. And, of those receiving labiaplasty, one third had the procedure performed for aesthetic purposes, another third for functional purposes and the remaining third for both aesthetic and functional purposes. In reviewing the literature regarding labiaplasty, there are no standard physical criteria. Whereas some require a minimum of 3 to 4 centimeter in labial width to perform surgery, others do not have any criteria. In addition, these surgeries are have a reported complication and dissatisfaction rate of up to 9%. Research into why women seek genital enhancement surgery is underway. One study demonstrated that there is a large variation in measurements of female external genitalia. However, no study to date has determined whether or not asymmetry exists with respect to measurements of female external genitalia and whether or not this correlates with a woman's self-reported perception of her external genitalia.

Objective: The purpose of this study is to compare intra-subject variability (right-sided measurements versus left-sided measurements) of female external genitalia with a woman's own self-reported perception of her external genitalia to establish baseline descriptive data and to determine whether a correlation exists between measurement and perception.

Hypothesis: Women with genitalia that are symmetrical (right-sided versus left-sided) will have a perception of their genitalia as being normal.

Methods: For the study, 62 women between the ages of 18 and 55 years old, who are non-pregnant or less than 12 weeks pregnant, without labial disease and not seeking gynecologic cosmetic surgery will be recruited. Each participant will be given a questionnaire regarding how she feels about her genital appearance. A pelvic exam will be performed and will include taking measurements of the bilateral labia minora length and width and labia majora length, as well as clitoral length, genital hiatus, distance from the clitoris to the external urethral meatus, and distance from the fourchette to the anus. To determine if mean labia measurements are statistically different between the left and right sides, a Student's T test will be used. Spearman's Rho will be used to evaluate the relationship between right and left asymmetry and each subject's answer to the questions.

Results: Pending

Conclusion: Pending

Judy A. Honegger, D.O.

Judy Ann Honegger, D.O.

Western University of Health Sciences/College of
Osteopathic Medicine of the Pacific, Pomona, California
Honors/Awards:

- * *Summa Cum Laude Graduate*
- * *Montclair Free Clinic Student Coordinator Award*
- * *Pomona Community Health Action Team Award*

B.S. Biology
Notre Dame de Namur University, Belmont, California

Hobbies & Interests: Spending time with my husband, son and our two Pug dogs, visiting with my friends and family, cooking, hiking, surfing, kayaking, working out at the gym, wine tasting, and exploring the Hawaiian Islands. I also enjoy talking with, and educating women about important health related topics.

Place of Birth: Pacific Grove, California

Medical Interests: General Obstetrics and Gynecology

Research Experience: Student Research Fellow: I was selected to complete an eight week summer research internship through the American Heart Association at Stanford University. My responsibilities included designing and executing behavioral experiments, analyzing data, assisting with writing journal articles, and presenting our findings to the other interns and their supervisors. Under the direction of Frances Davies, Ph.D., June 2002-August 2002.

Publications/Presentations: Davis, F.M., Tsui J. Y., Flannery J.A., Li X., DeLorey T.M., Hoffman B.B. Augmentation of the Noradrenergic System in Alpha-2 Adrenergic Receptor Deficient Mice: Anatomical Changes Associated with Enhanced Fear Memory. Brain Research 2003 Oct; 986(1-2): 157-165.

Davis, F.M., Tsui J. Y., Flannery J.A., Li X., DeLorey T.M., Hoffman B.B. Activation of Alpha-1 Adrenergic Receptors Suppresses Fear Conditioning: Expression of c-Fos and Phosphorylated CREB in Mouse Amygdala. Neuropsychopharmacology. 2004 Oct; 1(29): 229-239.

Rate of Elective Induction Between 34 0/7 – 38 6/7 Weeks Gestation at Kapi`olani Medical Center for Women and Children

Judy A. Honegger, D.O. and Lynnae Millar Sauvage, M.D.

Objective: The purpose of the study was to determine the rate of elective induction between 34 0/7 – 38 6/7 weeks gestation at Kapiolani Medical Center for Women and Children (KMCWC) from July 1st 2009 until May 31st 2010. We also sought to identify the most frequent reasons for inappropriate inductions.

Hypothesis: The rate of elective induction is on the rise. We hypothesize that the rate of elective induction at KMCWC will have increased from July 2009 until May 2010.

Background: More than 22% of all gravid women undergo induction of labor in the US, and the overall rate of induction of labor in the US has more than doubled since 1990 to 225 per 1,000 live births in 2006.



Non-medically indicated induction of labor is rising and estimates of the prevalence of non-medically indicated induction vary greatly. A large series from a single center estimated that 6.3% of all inductions were not medically indicated and a population-based study from Washington state showed that 33% of women underwent labor induction and of those women, 14.3% had either no reason for induction or a nonstandard reason for induction.

Possible reasons for the increase in elective inductions include availability of better ripening agents, physician and patient desire to arrange a convenient time for delivery, and more relaxed attitudes towards marginal indications for induction. The major concerns associated with elective inductions are the potential for iatrogenic prematurity, increased rates of cesarean section and cost.

A prospective observational study that compared the outcome of 790 planned elective inductions at 37-39 weeks gestation with the outcome of 2004 planned elective inductions at >39 weeks gestation found that earlier induction was associated with a significantly higher risk of neonatal ICU admissions (7.7 vs. 3.0%).

A retrospective cohort study that looked at 1135 eligible women with singleton pregnancies at 38-41 weeks gestation were analyzed retrospectively after elective induction or spontaneous labor. They found that nulliparas were at a twofold higher risk for cesarean delivery compared with those who experienced spontaneous labor. They also found that elective induction increased the in-hospital predelivery time and costs.

Methods: This study was a retrospective chart review. Using ICD-9 codes, all patients at KMCWC who underwent labor induction between 34 0/7 -38 6/7 weeks gestation from July 1st 2009 to May 31st 2010 were evaluated. Those with approved indications were excluded. Using the recommendations from the ACOG practice bulletin #107 and TJC recommendations, a list of approved indications for induction prior to 39 weeks gestation was compiled. After eliminating patients with codes from this table, we then conducted a chart review for the rest of the patients to determine if the induction was elective or if it had acceptable circumstances.

Results: From July 1st 2009 until May 31st 2010, there were 2519 deliveries between 34 0/7 – 38 6/7 weeks gestation. Using ICD-9 codes, patients who underwent induction were identified. Out of the 2519 deliveries, 195 did not have ICD9 codes that were deemed acceptable for induction, and these charts were personally reviewed by myself and Dr. Sauvage to determine if the induction was indeed indicated. Of those 195 patients, 52 inductions were not medically indicated. The overall rate of elective induction between 34 0/7 – 38 6/7 weeks gestation at KMCWC from July 1st 2009 until May 31st 2010 was 2.1%.

Secondary outcomes: 4 (7.69%) of the 52 infants born to mothers undergoing induction without a medical indication were admitted to the NICU, and 4 (7.69%) had an operative delivery via cesarean section/forceps or vacuum.

Conclusion: The rate of elective induction between 34 0/7 – 38 6/7 weeks gestation at KMCWC from July 1st 2009 until May 31st 2010 was 2.1%.

Based on the literature, inductions for non-medical reasons should be scheduled only after 39 0/7 weeks because maternal and infant morbidity and mortality are reduced.

The Perinatal Improvement Team at KMCWC is working to try to reduce the number of elective inductions prior to 39 weeks in order to improve maternal and neonatal outcomes.

Juliana R. Melo, M.D.

Julianna Roxo Melo, M.D.

Medical College of Georgia, Augusta, Georgia

B.S. Genetics

University of Georgia, Athens, Georgia

*Language Fluency (other than English):
Portuguese and Spanish*

*Hobbies & Interests: Traveling, biking, cooking,
music, yoga and photography.*

Place of Birth: Rio de Janeiro, Brazil

Medical Interests: Family Planning

Research Experience: MS4 Researcher, UCSF Center Reproductive Health Research, California: For my elective month of research I was working with Jody Steinauer, M.D. on one of her many ongoing projects pertaining to reproductive health. September 2007-October 2007.

-MS4 Researcher, Medical College of Georgia, Department of Ob/Gyn, Georgia: I worked with Jason Bell, M.D. a resident in MCG Ob/Gyn Department on a retrospective analysis of the incidence of wound breakdown in surgical patients who are morbidly obese. May 2007

-Research Technician, University of Georgia Plant Sciences, Biology Department, under the direction of Kelly Dawe, Ph.D.: As part a large collaborative project, this lab aims to identify the functional centromere repeats in maize. My contribution to this project was cloning and sequencing genomically digested CentC, an abundant centromeric repeat in maize. I also identified and cloned the oat homolog to maize CenH3, the centromeric histone. As a result of the years of experience with this lab, I have many molecular biology laboratory skills. May 2002-August 2004.

-Student Researcher, University of Georgia, Department of Genetics, under the direction of Kelly Dawe, Ph.D.: Research consisted of analyzing microsatellites and RFLP distribution in two types of Abnormal Chromosome 10 in maize (responsible for meiotic drive), as well as the Normal maize Chromosome 10. Techniques included: designing primers, PCR amplification and analysis, Southern blotting, molecular cloning, and sequencing. August 2001-May 2002.

Publications: Jim W, **Melo JR**, Nagaki K, Talbert PB, Henikoff S, Dawe RK, Jiang J.. *Maize Centromeres: Fine Structure and Functional Adaptation in the Genetic Background of Oat*. Plant Cell. 2004 Mar; 16(3): 571-581. Cited in PubMed: PMID: 14973167.

Mroczek RJ, **Melo JR**, Luce AC, Hiatt En, Dawe RK. *The Maize AB10 Meiotic Drive System Maps to Supernumerary Sequences in a Large Complex Haplotype*. Genetics 2006 Sep; 174(1): 145-154. cited in PubMed: PMID: 16849609

Poster Presentation: Melo, J (March 2004) Maize Centromeres: Fine Structure and Functional Adaptation in the Genetic Background of Oat. Presented at 46th Maize Genetics Conference, Mexico City.



The Impact of a Longitudinal Curriculum on Medical Student Obstetrics and Gynecology Clinical Training

Juliana R. Melo, M.D., Mark Hiraoka, M.D. and Bliss Kaneshiro, M.D., M.P.H.

Objective: To determine differences in obstetrics and gynecology procedural experiences between third year medical students who undergo a traditional block clerkship versus a longitudinal curriculum, in which students rotate with designated community based preceptors over the course of a year. Secondary objectives include differences in National Board of Medical Examiners (NBME) subject exam scores, clerkship grades and residency career choices.

Methods: From July 2007 to June 2009, data were extracted on the obstetrics and gynecology procedural experience of third year medical students at the University of Hawaii using Personal Digital Assistant (PDA) based logs. Information on NBME subject exam scores, clerkship grade and chosen residency specialty were also collected. Student's t-tests and chi-square tests were used to determine the significance of association for the various outcome variables. Multiple logistic regression was used to confirm associations.

Results: The longitudinally trained group and traditional block students were similar in terms of age and gender. Longitudinally trained students performed more pelvic exams [longitudinal 36.2 (32.6) versus block 7.5 (5.5), ($p < 0.001$)] and Pap smears than traditional block trained students [longitudinal 28.4 (26.4) versus block 6.5 (2.8), ($p < 0.001$)]. Block trained students participated in more vaginal deliveries, [block 18.3 (7.0) versus longitudinal 14.7 (4.2), ($p < 0.05$)] and cesarean deliveries [block 10.7 (4.4) versus longitudinal 8.0 (2.1), ($p < 0.005$)] than longitudinally trained students. There was no difference in the number of hysterectomies, [block 4.2 (2.1) versus longitudinal 4.7 (2.7) ($p = 0.321$)] between groups. There was no significant difference in overall clerkship grades or NBME shelf exam scores. Various confirmatory analyses did not change the significance of relationships.

Conclusion: Although longitudinal curriculums have been integrated into some medical schools, evidence regarding educational outcomes of this approach to medical education is sparse. This study indicates that longitudinally trained students performed similarly to traditional block trained students in terms of clerkship grades and NBME scores. However, there were significant differences in the number of procedures performed by students in the two groups with longitudinal students performing more office-based procedures such as pap smears and traditional block students performing more hospital-based procedures such as deliveries. With longitudinal students performing similarly on standardized tests, non-traditional tracks may be more appropriate for some students depending on educational goals.

Lauren Millet, M.D.

Lauren Millet, M.D.

2009 Best PGY2 Teaching Resident Award

*Texas Tech University of Medicine,
Lubbock, Texas
Clinical Campus: Texas Tech University
School of Medicine, El Paso, Texas*

*B.A. Biology
University of Texas, Austin, Texas
Honors/Awards:*

- * Cum Laude Graduate*
- * 2001-2004 Dean's Honors*
- * 2000-2004 National Achievement Scholarship*

Language Fluency (other than English): Conversational Spanish

Hobbies & Interests: Reading, writing, piano, singing, dancing, knitting, and traveling

Place of Birth: Washington D.C.

Medical Interests: Maternal Fetal Medicine

*Presentations: "Just Images- Case Presentations in Obstetrics," a clinical presentation at conference
"Contemporary OB/GYN Ultrasound: Recent Advances and Clinical Practice," Honolulu, Hawaii,
January 28-29, 2011.*



Rates of Bacteriuria in Laboring Women With Epidural Analgesia - Continuous vs. Intermittent Bladder Catheterization

Lauren Millet, M.D. and Marguerite Lisa Bartholomew, M.D.

Introduction: The number of women requesting epidurals in labor has increased over the last decade and is now approximately 60%. Temporary urinary retention is a known side effect of epidural analgesia. Independent ambulation to the bathroom to urinate is not usually recommended for laboring women with standard epidurals. Moreover, women with epidurals cannot feel when their bladders are full. As a result, bladder catheterization is standard of care for women who receive epidurals during labor. The type of catheterization is determined by the physician's preference and/or regional practice patterns. For women in labor receiving epidurals, options of bladder catheterization include use of a continuous indwelling foley catheter or intermittent catheterization. There is a paucity of information in the medical literature that evaluates the type of catheterization that provides the lowest risk of bacteriuria for the parturient. We hypothesize that intermittent straight catheterization (ISC) is associated with a lower rate of postpartum bacteriuria than the continuous indwelling foley (CIF).

Materials and Methods: This is a randomized prospective trial with intention to treat analysis. One hundred and forty women admitted to the Kapiolani Medical Center for Women and Children (KMCWC) labor and delivery unit who agree to regional analgesia during labor will be randomized to two groups. One will receive intermittent straight catheterizations (ISC) of the bladder at the time of epidural. The other will receive continuous indwelling foley catheterization of the bladder at the time of epidural. The nature of the study does not allow blinding. Inclusion criteria were singleton pregnancies greater than 37 weeks who agreed to regional anesthesia during their labor course. Exclusion criteria included chorioamnionitis at time of admission, symptoms of UTI/pyelonephritis, and antibiotic usage within 2 weeks of admission. The primary outcome measure is the number of postpartum cultures with bacteriuria in each catheter group, defined as $>10^5$ cfu/ml. We hypothesize that 25 % of the urine cultures from the CIF will have a positive urine culture, and that 15% of the urine cultures from the intermittent catheterization arm will be positive. 128 subjects will be needed (64 in each group) to detect a 40% difference in rate of urinary tract infection between the two groups (power 0.80, alpha 0.05). To account for anticipated 10% subject dropout, 140 subjects will be randomized. Each subject will submit two catheterized urine specimens for evaluation. The first will occur at time of epidural placement in labor. The second will occur on the day of discharge from the hospital by way of a straight catheterization to avoid contamination by lochia. Subjects with intrapartum and/or postpartum bacteriuria will be treated.

Statistical methods will be employed to compare the number of positive urine cultures in the continuous foley and straight catheterization groups. Randomization should control for cesarean delivery, chorioamnionitis that develops after randomization, GBS positive women, use of antibiotics after randomization, and postpartum endometritis.

Results: Pending

Conclusions: Pending

Ronnie B.N. Texeira, M.D.

Ronnie Beth Nawai`eha Texeira, M.D.

**2009 Family Planning Award Recipient*

University of Hawai`i, John A. Burns School of Medicine

- * 3rd year clerkship honors in OB/GYN, Internal Medicine, Surgery, Family Practice and Psychiatry, nominated for AOA Honor Society*
- * 2003-2007 Dr. Hans & Clara Zimmerman Foundation Scholarship and Kamehameha Schools Scholarship*
- * 2006 Starr Foundation Science & Technology Scholarship*
- * 2005 John and Gertrude Moir Education Fund and Keali`i Pauahi Scholarship*
- * 2004 & 2003 Liko A`e Native Hawaiian Scholarship*
- * 2004 Makia and Ann Malo Scholarship, Executive Women International Scholarship, Native Hawaiian Leadership Project*
- * 2003 Cora Aguda Manyan Fund*
- * 1999-2003 Spirit Club at Hawaii Pacific University*



B.S. Pre-Medical Studies

Hawaii Pacific University, Kane`ohe, Hawai`i

Honors/Awards:

- * Summa Cum Laude Graduate*
- * 1999-2003 Dean's List*
- * Tri Beta Honor Society, Psi Chi Honor Society, Alpha Chi Honor Society, Phi Sigma Honor Society, President of Pre-Med Society*
- * 2003 Hawaii Pacific University Natural Sciences Academic Excellence Award*
- * 2003 Outstanding Service to the Pre-Med Society*

Language Fluency (other than English): Conversational Hawaiian language

Hobbies & Interests: Hula dancing, paddling, hiking, and spending time with family

Place of Birth: Wailuku, Hawai`i

Medical Interests: Adolescent medicine

*Publications/Presentations: Alice M. Tse, Donna-Marie Palakiko, **Ronnie Texeira**. Contrast of Pediatric Asthma Management Approaches in a Multicultural and Collectivistic Population. Journal of Asthma. Jan; 42(0277-0903): 623-631.*

***Ronnie Texeira**, Nicholas Fogelson, Sarah Barwise. The Effect of Parity on Surgical Time in Second Trimester Surgical Abortion, Abstract submitted in August 2007 to the SMFM 28th Annual Scientific Meeting.*

*Nicholas Fogelson, **Ronnie Texeira**, Sarah Barwise. Anesthetic Modality in Second Trimester Surgical Abortion, Abstract submitted in August 2007 to the SMFM 28th Annual Scientific Meeting.*

Blood Loss at the Time of First Trimester Surgical Abortion in Anticoagulated Women: A Case Series

Ronnie B.N. Texeira, M.D., Alison Edelman, M.D., Jeffrey Jensen, M.D., Paula Bednarek, M.D. and Bliss Kaneshiro, M.D., M.P.H.

Objective: To describe blood loss resulting from surgical termination of pregnancy up to 12 weeks gestation in women who receive anticoagulant therapy.

Methods: A case series was compiled of subjects undergoing surgical termination of pregnancy who were taking an anticoagulant (heparin, low molecular weight heparin, or Coumadin) using two email listserves. Participants in the listserve, which included Family Planning Fellowship faculty, fellows and graduated fellows as well as Ryan Residency Training Program faculty, submitted online de-identified case reports of anticoagulated patients who had a surgical abortion. Subjects were analyzed in three study groups; 1) women who took therapeutic doses of anticoagulant, 2) women who took prophylactic doses of an anticoagulant and, 3) women who discontinued the anticoagulant prior to the surgical procedure. The primary outcome, blood loss at the time of surgical abortion, was primarily analyzed using descriptive statistics. Data for continuous variables were presented as means and standard deviations if they were normally distributed otherwise an appropriate transformation was performed. Comparison of means was by paired t-test. Associations for categorical variables was compared using chi-square tests.

Results: Currently being collected and analyzed.

Conclusion: It is hypothesized that intraoperative blood loss in anticoagulated women receiving a surgical termination of pregnancy up to 12 weeks gestation will be higher than what has been reported in women who are not anticoagulated. However, it is also hypothesized that blood loss will not be elevated to the point which would result in clinical signs or symptoms of anemia.

Ob/Gyn Resident Research Publications

Tsai PJ, Nakashima L, Yamamoto J, Ngo L, Kaneshiro B. Postpartum Follow-up Rates Before and After the Postpartum Follow-up Initiative at Queen Emma Clinic. Hawaii Med J. 2011 Mar;70(3):56-9. PMID: 21365543 [PubMed]

Grzankowski KS, Carney M. Quality of life in ovarian cancer. Cancer Control. 2011 Jan;18(1):52-8. PMID: 21273980 [PubMed]

Ahern R, Frattarelli LA, Delto J, Kaneshiro B. Knowledge & awareness of emergency contraception in adolescents. J Pediatr Adolesc Gynecol. 2010 Oct;23(5):273-8. Epub 2010 May 31. PMID: 20537573 [PubMed - indexed for MEDLINE]

Minaglia SM, Kimata C, Soules KA, Pappas T, Oyama IA. Defining an at-risk population for obstetric anal sphincter laceration. Am J Obstet Gynecol. 2009 Nov;201(5):526.e1-6. Epub 2009 Sep 17. PMID: 19762002 [PubMed - indexed for MEDLINE]

Sueblinvong T, Carney ME. Current understanding of risk factors for ovarian cancer. Curr Treat Options Oncol. 2009 Apr;10(1-2):67-81. Epub 2009 Jul 15. PMID: 19603272 [PubMed - indexed for MEDLINE]

Lazenby GB, Fogelson NS, Aeby T. Impact of paracervical block on postabortion pain in patients undergoing abortion under general anesthesia. Contraception. 2009 Dec;80(6):578-82. Epub 2009 Jul 10, PMID: 19913154 [PubMed - indexed for MEDLINE]

Sueblinvong T, Carney ME. Ovarian cancer: risks. Hawaii Med J. 2009 Mar;68(2):40-6. PMID: 9385377 [PubMed - indexed for MEDLINE]

Lazenby GB, Huang C, Rahall AM, Fogelson NS. Pregnancy termination via laparotomy in a woman with bicornuate uterus. Contraception. 2007 Mar;75(3):241-3. Epub 2007 Jan 16. PMID: 173034497 [PubMed - indexed for MEDLINE]

Vo C, Carney ME. Ovarian cancer hormonal and environmental risk effect. Obstet Gynecol Clin North Am. 2007 Dec;34(4):687-700, viii. PMID: 18061864 [PubMed - indexed for MEDLINE]

Sokol MS, Fujimoto CK, Jackson TK, Silberberg PJ. Anorexia nervosa and brain tumor in a 14-year-old girl. CNS Spectr. 2006 Sep;11(9):669-73; quiz 719. PMID: 16946691 [PubMed - indexed for MEDLINE]

Kaneshiro BE, Acoba JD, Holzman J, Wachi K, Carney ME. Effect of delivery route on natural history of cervical dysplasia. Am J Obstet Gynecol. 2005 May;192(5):1452-4. PMID: 15902135 [PubMed - indexed for MEDLINE]

Sato RL, Li GG, Shaha S. Antepartum seafood consumption and mercury levels in newborn cord blood. Am J Obstet Gynecol. 2006 Jun;194(6):1683-8. Epub 2006 Apr 25. PMID: 16635458 [PubMed - indexed for MEDLINE]

Steinemann S, Roytman T, Chang J, Holzman J, Hishinuma E, Nagoshi M, Tam E, Murakami S, Wong J. Impact of education on smoking cessation counseling by surgical residents. Am J Surg. 2005 Jan;189(1):44-6. PMID: 15701489 [PubMed - indexed for MEDLINE]

Mau MK, Yamasato KS, Yamamoto LG. Normal oxygen saturation values in pediatric patients. Hawaii Med J. 2005 Feb;64(2):42, 44-5. PMID: 15871568 [PubMed - indexed for MEDLINE]

Ahern RM, Tan SY. Duty to third parties: a new worry for doctors. Hawaii Med J. 2003 Jun;62(6):123-5. PMID: 12886726 [PubMed - indexed for MEDLINE]

Sato RL, Wong JJ, Sumida SM, Marn RY, Enoki NR, Yamamoto LG. Efficacy of superactivated charcoal administered late (3 hours) after acetaminophen overdose. Am J Emerg Med. 2003 May;21(3):189-91. Comment in: Am J Emerg Med. 2004 Oct;22(6):496; author reply 497. PMID: 12811710 [PubMed - indexed for MEDLINE]

Yamamoto LG, Nomura JT, Sato RL, Ahern RM, Snow JL, Kuwaye TT. Minimum clinically significant VAS differences for simultaneous (paired) interval serial pain assessments. Am J Emerg Med. 2003 May;21(3):176-9. PMID: 12811707 [PubMed - indexed for MEDLINE]

Sumida SM, Sato RL, Wong JJ, Yamamoto LG. Acetaminophen levels 4 and 7 hours after 2000 and 3000 mg single doses in healthy adults. Hawaii Med J. 2003 Jan;62(1):6-9. PMID: 12592742 [PubMed - indexed for MEDLINE]

Ob/Gyn Resident Abstract Poster Presentations

- February 7-12, 2011 31st Society for Maternal-Fetal Medicine Annual Meeting, Hilton San Francisco Union Square, San Francisco, CA. Marguerite Lisa Bartholomew, M.D., Kacy Church, **Karen Soules, M.D.**, Steve Shaha, Ph.D., George Graham, M.D., Janet Burlingame, M.D., Ivica Zalud, M.D., Ph.D., Lynnae Millar Sauvage, M.D. *Managing Diabetes In Pregnancy Using Cell Phone/Internet Technology*
- February 7-12, 2011 31st Society for Maternal-Fetal Medicine Annual Meeting, Hilton San Francisco Union Square, San Francisco, CA. William Goh, M.D., Monica Rincon, M.D., Jorge Tolosa, M.D., Roya Sohaey, M.D., Leslie Arpin, M.D., Rene Riano, M.D., **Shannel Adams, M.D.**, James Davis, Ph.D., **Justin Bohrer, M.D.**, Ivica Zalud, M.D. *Persistent Adnexal Masses and Pregnancy Outcomes*
- December 6-9, 2010 12th RCMI International Symposium on Health Disparities, Nashville, Tennessee **Pai-Jong Stacy Tsai, M.D., M.P.H.**, Ian A. Oyama, M.D., Mark Hiraoka, M.D., Steven Minaglia, M.D., Jennifer Thomas, Bliss Kaneshiro, M.D., M.P.H. *Differences in Perineal Body Length in Labor*
- December 6-9, 2010 12th RCMI International Symposium on Health Disparities, Nashville, Tennessee Bliss Kaneshiro, M.D., M.P.H., **Maria Barrett, M.D.**, Sarah Takekawa, M.D., Reni Soon, M.D. *Knowledge of Intrauterine Devices in a Diverse Adolescent Population*
- October 14-6, 2010 ACOG Districts VII, VIII, IX, XI Combined 2010 Annual District Meeting, Maui, Hawaii i Viola Chu, Iris Kim, **Celeste Adrian, M.D.**, Bliss Kaneshiro, M.D., M.P.H. *Assessment of the Accuracy of Information Regarding Emergency Contraception on the Internet*
- May 15-19, 2010 ACOG 58th Annual Clinical Meeting, San Francisco, CA **Gregory W. Woo, M.D.**, Jennifer M. Thomas, Reni Soon, M.D., Bliss Kaneshiro, M.D., M.P.H. *Factors Affecting Sexual Health Education in the School System*
- February 5, 2009 He Huliau 2009 Conference **Ann Chang, MD** The Prevalence of Gestational Diabetes among Micronesians in Honolulu, Hawaii
- February 5, 2009 Society of Gynecologic Oncologists 40th Annual Meeting on Women's Cancer **Thanasak Sueblinvoing, M.D.**, Michael Carney, M.D., Christina Sing, Bliss Kaneshiro, M.D., Jeffrey Killeen, M.D. *Prediction of Metastatic Disease of Endometrial Carcinoma Using Preoperative Endometrial Biopsy or Curettage*
- January 26, 2009 Society of Maternal-Fetal Medicine **Chrystie Fujimoto, M.D.**, Jeffrey Killeen, M.D., Tricia Wright, M.D. *The Effects of Methamphetamine Use on the Placenta*
- August 18-20, 2008 13th Annual Pacific Basin Association Medical Conference, Yap, Federated States of Micronesia **Ann Chang, M.D.** *The Prevalence of Gestational Diabetes among Micronesians in Honolulu, Hawaii*
- March 26, 2008 Society of Gynecologic Investigation **Gweneth Lazenby, M.D.**, Tod Aeby, M.D. *Impact of Paracervical Block, in Combination with General Anesthesia, on Post-Abortion Pain*
- August 9, 2007 34th Annual Scientific Meeting of the Infectious Diseases Society for OB/GYN **Gweneth B. Lazenby, M.D.**, *Fever of Unknown Origin: a Case of Klebsiella oxytoca Liver Abscess in Pregnancy*
- May 5-9, 2007 ACOG Annual Clinical Meeting 2007, San Diego, CA **Angel M. Willey, M.D.**, Jim Davis, Ph.D., David Kim, M.D. *Risk Factors Associated with Striae Gravidarum*
- May 5-9, 2007 ACOG Annual Clinical Meeting 2007, San Diego, CA **Jennifer P. Holzman, M.D.**, Jeffrey Killeen, M.D., Lori Kamemoto, M.D., Mark Wakabayashi, M.D., Steve Shaha, Ph.D. *P16 INK 4a and Cervical Cytology: Improving Cervical Pap Smear Screening- ACOG Blue Ribbon Award for Poster Presentation*
- May 19, 2007 North American Society of Pediatric & Adolescent Gyn **Reina M. Ahern Harris, M.D.**, LeighAnn Frattarelli, M.D. *Knowledge & Attitudes of Emergency Contraception (EC) in Hawaii Adolescents*
- March 13, 2007 Annual Biomedical Sciences Symposium **Jennifer P. Holzman, M.D.**, Jeffrey Killeen, M.D., Lori Kamemoto, M.D., Mark Wakabayashi, M.D., Steve Shaha, Ph.D. *P16 INK 4a and Cervical Cytology: Improving Cervical Pap Smear Screening*
- August 3-5, 2006 Infectious Diseases Society **Gweneth Lazenby, M.D.**, Amy Bell, MS4 *Syphilis or Yaws: a Clinical Approach to Positive Fluorescent Treponemal Antibody-Absorbed Double Stain Test in Marshallese Pregnant Women*
- August 3-5, 2006 Infectious Diseases Society **Gweneth Lazenby, M.D.** *A Complex Case of Enterococcus Endocarditis in Pregnancy*
- May 25, 2006 **Stefanie Ueda, M.D.**, Jeffrey Killeen, M.D., Michael Carney, M.D., Steve Shaha, Ph.D. *Utility of Clinical Tumor Markers to Identify Patients with High Risk Cervical Dysplasia & Cancer*
- September 28-October 2, 2005 Pacific Coast OB/GYN Society 72th Annual Meeting **Renee Sato, M.D.**, Gaylyn Li, M.D., Steve Shaha, Ph.D. *Antepartum Seafood Consumption and Mercury Levels in Newborn Cord Blood- Ted Adams Award for Poster Presentation*
- May 10, 2005 **Alexandra Sueda, M.D.**, LeighAnn Frattarelli, M.D. *Knowledge and Risk-Taking Behavior Among An Adolescent Population in Hawaii*

