Section Chief, GI Oncology
Program Lead, GI Cancer
and
Co-Leader Gastro-Intestinal Cancer Core Program

Jefferson University and Kimmel Cancer Center
Philadelphia, PA
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Executive Summary

The Department of Medical Oncology at Jefferson Medical College (JMC) in collaboration with the NCI designated Kimmel Cancer Center (KCC) at Thomas Jefferson University (TJU) is recruiting a Program Lead for GI Cancer, who may also serve as Program Leader or Program Co-Leader for the KCC Gastro-Intestinal Cancer Core Research Program.

The successful candidate will serve as the:

- Section Chief for GI Oncology, responsible for recruitment, development, mentoring, and oversight of the GI faculty and for clinical and research activities related to GI cancer within the Department of Medical Oncology;
- Program Lead, GI Cancer, the convener and coordinator of the cross-disciplinary faculty, treating and conducting clinical investigation with GI Cancer patients; and
- Program Leader or Program Co-Leader (depending on qualifications) for the KCC GI Cancer Core Research Program, responsible for maintaining and growing the core KCC scientific GI program in conformity with KCC strategy and NCI designation requirements.

Candidates must demonstrate the ability to provide vision and leadership in developing outstanding multidisciplinary patient care programs, collaborative clinical/translational research, and strong educational offerings related to scientific and clinical aspects of GI malignancies in an environment of exceptionally successful, talented, and collaborative peers. Strong candidates will have the academic qualifications for an appointment at the level of Associate or Full Professor at Jefferson Medical College and for the leadership roles at Jefferson and KCC outlined above.

This is a unique opportunity for a highly qualified and experienced Board Certified medical oncologist with deep expertise and interest in gastrointestinal malignancies and related clinical and translational research to advance a vision for a “world class” GI Cancer program within Jefferson’s collegial and highly receptive environment. This individual will build upon Jefferson’s status as a destination center for pancreatic and hepatobiliary cancer and a well respected multidisciplinary referral center for colorectal, foregut, thoracic/esophageal conditions with well established clinical, basic science, and translational research platforms in many of these areas. Colleagues will include nationally recognized investigators including Drs. Charles Yeo, Jordan Winter, and Jonathan Brody (Department of Surgery), Edith Mitchell (Department of Medical Oncology), Scott Waldman (Pharmacology and Experimental Therapeutics), and Adam Dicker (Radiation Oncology). Program, Research, and Service Line leaders are highly enthusiastic about this recruitment and optimistic regarding the potential of the Jefferson GI Cancer Program to build upon its current reputation. Jefferson’s strong commitment to translational research in GI malignancy is demonstrated by its inclusion of GI Cancer as one of six core Cancer Center programs -- one of only two core clinical programs.

The successful candidate will enjoy strong leadership support from and collaboration with the Kimmel Cancer Center as well as from the Departments of Medical Oncology, Surgery, Radiation Oncology, Pathology, Pharmacology & Experimental Therapeutics, the Division of Gastroenterology (Department of Medicine), and the leadership of the Gastrointestinal Service Line at Jefferson Hospitals. The new Chief will be resourced to recruit additional faculty talent consistent with his/her vision.
The Organization

Thomas Jefferson University and Hospitals

Founded in Philadelphia in 1824, as one of seven health professions colleges within Thomas Jefferson University, the Jefferson Medical College (JMC) is one of the nation's most historic and highly rated medical schools. Since its inception, JMC has awarded more than 29,800 medical degrees. JMC currently has approximately 2,700 teaching, research, and clinical faculty with nearly 1,030 enrolled students. JMC has a long-standing reputation for excellence in undergraduate and graduate medical education. The Dean, Dr. Mark Tykocinski, is committed to sustaining and strengthening that reputation.

Distinguished as one of the top 60 medical schools in the nation for research, JMC has approximately $140 million in sponsored program activity, including approximately $62 million from federal sources, the majority of which comes from the National Institutes of Health, including funding received from the National Cancer Institute through the Jefferson’s NCI-designated Kimmel Cancer Center. JMC and its affiliated clinical faculty and provider facilities also have a strong reputation for the delivery of high-quality, patient-focused health care.

In 1996, nationally recognized Thomas Jefferson University Hospital (TJUH) was spun off from the University to become the flagship institution for the Jefferson Health System (JHS), a $2 billion integrated health delivery system. The University and TJUH remain closely integrated and share the same campus, with TJUH continuing its role as the primary teaching hospital for JMC. The Jefferson Health System is now the largest integrated healthcare network in southeastern Pennsylvania and enjoys excellent financial and reputational stability.

TJUH operates using a service line framework to coordinate clinical care, quality, financial planning, and strategy. Six service lines have been designated by the institution, including cancer, neuroscience, musculoskeletal, heart and vascular, GI and transplant, and women’s and children’s. Each service line is co-led by its service line administrator and medical director. Each service line team is responsible for developing a one year operating plan and a three year strategic plan annually using standard reporting templates. This includes the identification of performance metrics (volumes, clinical quality, cost, revenue), new programs, recruits, and the capital and operating budgets for the fiscal year. This is reviewed and approved by the senior leadership team and then monitored quarterly through formal reviews with the President and Dean to ensure focus and accountability. The service line model is jointly accountable to the President of the TJUH and the Dean of JMC. The new GI Cancer Program Lead will work with both the Cancer and GI and Transplant service lines given the multidisciplinary nature of this specialty.

The Kimmel Cancer Center

The Kimmel Cancer Center (KCC) was founded in 1991 with approximately 30 investigators in the basic sciences. As of 2013, the KCC has over 400 members that include physicians and scientists dedicated to the discovery and development of novel approaches to cancer treatment. Representing over 40 countries, the Kimmel Cancer Center physicians and scientists are a truly international team strengthening research programs, accelerating the pace of discovery, and providing the most current and innovative treatments to cancer patients. The mission of the Kimmel Cancer Center, a National Cancer Institute-designated cancer center, is to:
• Make transformational discoveries of the cellular and molecular biology of the malignant process and the individual's and society's response to it;
• Effectively translate the latest research discoveries into clinical trials to provide the highest quality of care to all patients, including those of diverse ethnic and racial populations; and
• Provide expert and humanitarian care to cancer patients, their families, and those at risk.

The NCI recently reviewed the KCC and recommended continued funding and renewal of the formal NCI cancer center designation through to 2018.

Recent highlights of KCC accomplishments include Dr. Neal Flomenberg’s clinical research efforts to make blood and marrow transplantation (BMT) safer; Dr. Scott Waldman’s studies of the role of guanylcyclase hormone supplementation to prevent colorectal transformation; Dr. Pestell’s identification of cyclin D1 alterations as major factors of early disease stage behavior in prostate cancer; and Dr. Hallgeir Rui’s research to improve personalized breast cancer care.

The Kimmel Cancer Center’s faculty includes some of the nation’s top researchers who work tirelessly to unlock the mysteries of cancer's origin, develop new treatments, and discover cures. Recent recruits include: Dr. William Kevin Kelly from Yale University, who has enabled new translational research and clinical trials activities; Dr. Mark Weiss from Memorial Sloan Kettering as Director of the Hematologic Malignancies and Hematopoietic Stem Cell Transplantation; Dr. Russell Schilder, an internationally renowned medical oncologist and clinician scientist, who serves as the Chief of Medical Gynecologic Oncology, Co-Leader of Biology of Breast Cancer and Associate Director of Translation Research in KCC; and Dr. Massimo Cristofanilli, an internationally renowned breast cancer researcher and clinician, who has been appointed Director of the Jefferson Breast Care Center at the KCC. Through translational research and increased availability of clinical trials, the KCC is able to more quickly move new ideas from “bench to the community”, thereby accelerating the pace at which new discoveries become life-saving treatments.

The KCC Gastro-Intestinal Cancer Program was organized to facilitate bench to bedside translation in GI Cancer. Program meetings and educational activities focus on the translation of molecular discoveries in the laboratory into clinical practice across tumor types. Directors are integrally involved in the leadership of the core elements of the KCC that specifically focus on translational research, including the Clinical Research Management Office (CRMO), the Biostatistics Core, and the Translational Core. Further, they have broad experience in successfully establishing peer-review and other funding mechanisms to support research that bridges the customary valley of death that characterizes the translation of early stage technology. Moreover, they have established broad networks of collaborating investigators and institutions, regionally, nationally and internationally that support KCC translational research. The success of this leadership to date is highlighted by the presence of two active institutional program projects and the awarding of Komen and CURE awards, which were co-developed and are co-led by GI Cancer program investigators. Indeed, this program has been successful in advancing KCC discoveries into the clinic including, but not limited to, the prognostic and predictive utility of occult tumor burden in colorectal cancer, paracrine hormone replacement therapy to prevent colorectal transformation, the utility of cancer mucosa antigens as vaccine targets for the secondary prevention of metastatic mucosal tumors, the utility of angiotensin receptor antagonists to treat pancreatic cancer, the utility of mRNA binding proteins as predictive markers of therapeutic response in pancreatic cancer patients, and the utility of glycoconjugates as prognostic and predictive markers in Hepatitis B patients at risk for hepatocellular carcinoma.
Jefferson Health System

TJUH is a founding member of the Jefferson Health System, (JHS) the largest integrated health system in southeastern Pennsylvania, with over 2,500 beds, 15,000 employees, and 3,400 physicians and combined revenue of over $2 billion. The other members include the Main Line Health System (MLHS) and Magee Rehabilitation Hospital. The system includes seven acute care hospitals (TJUH, JHN, Methodist, Paoli, Bryn Mawr, Lankenau, and Riddle) and two rehabilitation hospitals (Bryn Mawr, Magee). JHS was recently recognized by Thomson Reuters as one of the nation’s Top 15 Large Health Systems based on its members’ clinical performance. Jefferson has partnered with the Main Line Health System to provide quaternary services at several of their facilities, including the trauma center at Paoli Hospital, the interventional neurosurgical suite at Bryn Mawr Hospital, and the kidney transplant program at Lankenau Hospital. There are significant opportunities to further develop the relationship in GI Cancer with MLHS hospitals and physicians.

The Department and Division

Department of Medical Oncology

Since 2006 Medical Oncology has been a freestanding department within JMC and closely integrated with the KCC. After serving as Interim Chair at the time the Department was founded, Dr. Neal Flomenberg became the first permanent Departmental Chair in January 2008 and continues to hold that position. A major part of the rationale for creating a free standing Department was to allow Departmental leadership to participate at a high level in the planning and execution of enhanced cancer services at Jefferson and to facilitate the recruitment of nationally recognized faculty to higher-level leadership positions at the institution.

As of early 2013, the Department is comprised of 42 medical oncologists, five internists/oncology hospitalists, four population scientists, and two bench investigators. The Department’s stature has improved substantially since it was originally “spun off” from the Department of Medicine. In 2012, U.S. News & World Report ranked Jefferson number 20 nationally among cancer centers. This ranking is expected to rise in 2013.

The Department of Medical Oncology is comprised of four divisions: Solid Tumor Oncology (STO), Hematologic Malignancies & Hematopoietic Stem Cell Transplantation (HM), Regional Cancer Care (RCC), and Population Science (PSCI). RCC is home to a group of medical oncologists who practice both at Jefferson as well as other regional hospitals and Jefferson’s Navy Yard facility. The PSCI Division is the home base of the developing Cancer Prevention and Control /Population Science Program, a necessary component of NCI designated cancer centers seeking a “comprehensive” designation. An executive committee including the chairman, division chiefs, departmental administrator, Directors of Education, Diversity, Quality & Safety, and the Cancer Service Line Medical Director meets monthly to review progress on the strategic plan and other similar activities. The Department holds monthly faculty meetings and the four Divisions also hold (at a minimum) monthly meetings, though some meet weekly. The Chairman and clinical Division Chiefs meet together at least weekly.

In FY 2012 the Department had 14 active grant awards supporting nine faculty members. Total costs of the awards are approximately $1.7 million ($1.45 million direct costs). The Department occupies 8,700
square feet of wet-bench laboratory space in the College and Curtis buildings at 1025 Walnut Street and just less than 1,000 square feet in the Bluemle building.

Over the past five years, the Department of Medical Oncology has also received approximately $4.6 million in philanthropic gifts, of which $1.4 million was donated in FY 2012. The majority of these donations are earmarked for a specific disease site or laboratory. In March of this year, the Department of Medical Oncology established its first endowed chair account with a $1.5 million donation from Dr. Kenichiro Hasumi of Japan.

The Division of Solid Tumor Oncology

The Division of Solid Tumor Oncology (DSTO) is composed of 18 physicians with subspecialty oncology experience in specific solid malignancies and palliative care, which provides clinical expertise and research opportunities over a spectrum of solid tumors. The DSTO has seven oncology subspecialty Oncology Care and Research teams (gastrointestinal oncology, genitourinary oncology, cutaneous and ocular melanoma, lung\head\neck oncology, breast oncology, gynecologic oncology, and neuro-oncology) and three over-arching programs (Early Drug Development and Phase I Program; Palliative Care Program and Health Disparities Program). Two basic science\translation research faculty members in the DSTO collaborate in research activities via the Melanoma and Breast Oncology groups.

Wm. Kevin Kelly, DO, the Division Director, was an attending in GU medical oncology at Memorial Sloan Kettering Cancer Center for 15 years prior to being recruited to Yale University to serve as the co-director of Genitourinary Oncology and Associate Director of Clinical Research Services in the Yale Comprehensive Cancer Center. Dr. Kelly was recruited to Jefferson in 2010 to lead the Division and serve as Associate Director of Translation Research for the Kimmel Cancer Center. During the past three years the Division has experienced tremendous growth resulting in diversifying its oncology subspecialty representation.

The Gastrointestinal Oncology Research and Care Team was previously led by Edith Mitchell, MD who is known nationally and internationally for her research in gastrointestinal malignances and work in disparities in oncology. Her clinical focus has been on colorectal cancer and the exploration of new systemic therapies. Currently, Dr. Mitchell is devoting most of her time and effort to the Center to Eliminate Cancer Disparities and the Department is seeking to recruit an accomplished leader as its Section Chief. The GI section is currently supported by three additional clinical investigators, including Dr. Nancy Lewis who heads the early drug development program and has a strong interest in upper gastrointestinal tract malignancies.

The Divisional faculty features other national and international senior leaders including Massimo Cristofanilli, MD, who serves as the Deputy Director of Translation Research in KCC, Chief of Breast Medical Oncology and the Director of the Jefferson Breast Care Center; and Russell Schilder, MD who serves as the Chief of Medical Gynecologic Oncology, Co-Leader of Biology of Breast Cancer and Associate Director of Translation Research in KCC.
Selected Collaborating Departments and Divisions

Department of Pharmacology and Experimental Therapeutics

Scott Waldman, MD PhD, Chair of the Department of Pharmacology and Experimental Therapeutics is an established leader in translational medicine and the development of molecular diagnostics and therapeutics. His career as a physician investigator has focused on the discovery of new molecular insights and their translation into novel paradigms that advance the care of GI Cancer patients. This is reflected in the advancement of molecular discoveries in the laboratory into peer-reviewed clinical trials (five), generation of institutional intellectual property (>60 awarded/pending patents), and the advancement of discoveries into commercial development (two). Beyond the laboratory, he contributes to the development of the institutional translational research agenda, in part as Associate Dean for Clinical and Translational Science. He created the Department of Pharmacology and Experimental Therapeutics (2005), a basic science department built on Jefferson’s largest institutional resource for clinical research (Jefferson Clinical Research Center). Dr. Waldman currently oversees the KCC Gastro-Intestinal Cancer Program, including shaping strategic directions and collaborations in translational research; planning, organizing, and hosting program meetings; oversight of mentoring and educational activities; working with multidisciplinary research groups to plan and implement clinical trials; and directly participating in intra- and inter-programmatic research collaborations and funding opportunities, with a special focus in colorectal cancer.

Department of Surgery

Jefferson’s Department of Surgery is internationally known for its hepatopancreaticobiliary (HPB) and hepatocellular carcinoma (HCC) programs. Thirteen surgeons contribute to a busy clinical service. The cancer and transplant surgeons perform approximately 200 Pancreatectomy/Whipple Procedures, 40-60 liver transplants, and 350 colectomies annually. Approximately 800 total cancer surgeries were performed at TJUH in 2012, a 60% increase from 2005 when Charles J. Yeo, MD joined the Department as Chair.

Dr. Yeo is an internationally-recognized expert in pancreatic cancer. His primary interests and research have been in the fields of hepatopancreaticobiliary surgery—the evaluation of patients with pancreatic and related cancers—and the management of patients with unusual pancreatic neoplasms. He has performed >1100 Whipple procedures, and cared for >2000 patients with pancreatic tumors. His NIH funding in the field of pancreatic cancer began in 1991, and he continues to lead a team that receives extramural funding in this area today. His design and completion of numerous prospective randomized clinical trials have dramatically impacted the field of pancreatic surgery—particularly the most difficult of all pancreatic procedures, the pancreaticoduodenectomy. Additionally, his leadership of large teams of physicians and scientists (Johns Hopkins and Jefferson) dedicated to a better understanding of pancreatic neoplasia, has generated an abundance of new knowledge relevant to the early detection, screening, categorization, and therapy of pancreatic and related types of cancer. Dr. Yeo was instrumental in organizing the Jefferson Pancreas, Biliary and Related Cancer Center, the Jefferson Pancreas Tumor Registry, in the presentation of a Webcast about the mini-Whipple operation (www.jeffersonhospital.org/pancreas), and in the organization and hosting of annual pancreas patient symposia at Jefferson. Dr. Yeo has worked closely with Drs. Waldman and DiMarino in the oversight of the KCC Gastro-Intestinal Cancer Program to date, including planning strategic directions and collaborations in translational research; planning, organizing, and hosting the bimonthly pancreatic cancer interest group meetings; oversight of mentoring and educational activities; working with
multidisciplinary research groups to plan and implement clinical trials, especially those focused in pancreatic cancer; and directly participating in intra- and inter-programmatic research collaborations and funding opportunities, with a special focus in pancreatic cancer.

Dr. Jonathan Brody earned his PhD in Pathobiology from Johns Hopkins University, where he also completed a fellowship in the Departments of Pathology and Oncology and served as an Instructor in the Advanced Programs in Biotechnology. In 2006, he joined Jefferson as an Assistant Professor of Surgery and also currently co-directs the Jefferson Pancreatic, Biliary, and Related Cancers Center. He has published extensively on the topic of the molecular determinants of 5-FU and gemcitabine effectiveness against pancreatic cancer cells. Dr. Brody’s preliminary studies have determined that a protein called HuR could serve as a predictor for patients’ responsiveness to gemcitabine. He continues to work closely with his clinical colleagues to further develop novel biomarkers that will personalize treatment for pancreatic cancer.

Dr. Jordan Winter joined the Jefferson faculty in 2011, after eight years at Johns Hopkins Hospital, including five years of general surgery training and three years as a post-doctoral fellow with Dr. Scott Kern (2004-2007) studying molecular aspects of pancreatic cancer. Other notable scientist-mentors during those research years included Drs. Ralph Hruban, Christine Iacobuzio-Donahue, and Dr. Yeo. He was the principal developer of a scoring system designed to assess the validity of reported somatic mutations in human cancers and discovered novel mutations in pancreatic cancer (in SOS1 and KEAP1 [4, 5]) and identified the underlying molecular changes of undifferentiated ductal adenocarcinoma (E-cadherin loss), which is the most aggressive pancreatic cancer subtype [6]. He has collaborated with Dr. Jonathan Brody to study the impact of thymidylate synthase on 5-fluorouracil efficacy in pancreatic cancer [7-9]. Concurrently, he managed and conducted numerous studies on the world’s largest clinical pancreatic surgery database (2004-2006). In conjunction with Dr. Brody, he was recently awarded R21 funding to develop systemic gene therapy in mice.

**Division of Gastroenterology and Hepatology, Department of Medicine**

The Division, under the leadership of Anthony DiMarino, MD, is one of the largest GI programs on the East Coast, performing nearly 20,000 procedures annually. *U.S. News and World Report* identified Jefferson GI as the 22nd best program in the nation in 2012. Jefferson is a comprehensive provider of services including diagnostic and therapeutic endoscopy, colonoscopy and enteroscopy (single-balloon, double-balloon, spiral overtube and intraoperative enteroscopy), endoscopic ultrasound (EUS), endoscopic retrograde cholangiopancreatography (ERCP), Barrett’s Esophagus ablation therapy, SmartPill technology, cancer prevention, screening, and genetic counseling, and advanced esophageal testing (24-hour and 48-hour ambulatory pH monitoring, impedance testing, and manometry). The Division has numerous centers of excellence including GI endoscopy, GI motility, inflammatory bowel disease, celiac disease, gastroesophageal reflux disease (GERD), GI bleeding, hepatitis C, and liver tumor.

The Division is currently comprised of 33 physicians, four nurse practitioners and 12 fellows who perform procedures at two sites and evaluate patients at four satellite offices in Pennsylvania, New Jersey, and Delaware. The Division’s key to success in providing the highest quality of care in the most compassionate manner has been the faculty’s commitment to excellence and their incredible work ethic as evidenced by five of our physicians being named to “Top Doc in Philadelphia” by Philadelphia Magazine and four being named “Top Doc in South Jersey” in 2012.
The Faculty in the Division is at the forefront of high quality cutting-edge basic science and clinical research with one NIH grant, Co-PI’s on two NIH grants, and over 25 industry sponsored clinical trials totaling $4.8 million in awards this past year; 72 peer reviewed publications, 18 book chapters, and over 75 lectures and presentations were completed in the most recent academic year.

The Division’s Fellowship Program is strong with the addition of a new fellowship position added this past year. There are over 350 applications for the four fellowship positions annually. This along with the Advanced Endoscopy Fellowship (1 of 22 in the U.S.) and the Advanced Hepatology Fellowship (1 of 24 in the U.S.) continue to foster the Division’s national academic reputation as a leader in GI/Hepatology training and advanced training.

Department of Radiation Oncology

The Department of Radiation Oncology is a clinical and research partner for the GI Cancer Program. The Department offers a full range of therapies including IORT, SRS, Gamma Knife, CyberKnife, IMRT, VMAT, Image Guided Therapy (2D,3D,4D), 6D Rotational Correction, LDR and HDR Brachytherapy, and Flattening-filter-free high dose rate Linac treatments and is therefore able to support standard and investigational therapies for GI Cancers. GI LightSpeed-16 CT simulation with 4D capability is used for assessing tumor motion in GI malignancies.

Investigators in the Department are extensively engaged in basic research, in house clinical trials, and multi-institutional trials. The Department actively seeks to collaborate within Jefferson and with investigators nationally and internationally. Adam Dicker, MD PhD, Chair of the Department of Radiation Oncology, serves as the Chair of the Translational Research Program in the Radiation Therapy Oncology Group (RTOG), which has a particular emphasis on predictive biomarkers, preclinical research, and molecular signatures. Dr. Dicker has served as Chair of the Radiation and Cancer Biology Committee of the American Society of Therapeutic Radiation Oncology. He represents the RTOG on the National Cancer Institute’s Investigational Drug Steering Committee of Cancer Treatment Evaluation Program and also serves as a consultant on cancer to the European Commission, the National Cancer Institute of Canada, and the Italian Association of Cancer Research.
The Position

Jefferson and the KCC are seeking a nationally or internationally recognized expert in clinical and scientific aspects of GI malignancy to fill a new position comprised of three critical and complementary components that together have the potential to significantly enhance the growth and output of its excellent and well established clinical and research programs in gastro-intestinal cancer. While highly successful research and clinical activities have been ongoing in the Departments of Surgery, Medical Oncology, and the Division of Gastroenterology, as well as at the KCC, and collaboration across entities has been excellent, there is broad recognition that overall program development could be greatly enhanced by focused leadership across the clinical and scientific realms. Therefore, while holding a primary appointment in the Section of GI Oncology, the new GI leader will have defined clinical and scientific portfolios that ensure he/she will have substantial influence across all Jefferson’s clinical GI related services as well as at the KCC.

**Section Chief:** As Section Chief, the candidate will be directly responsible for recruitment, development, mentoring, and oversight of the GI faculty within the Department of Medical Oncology. He/she will oversee the Department’s GI Cancer program including strategy, program design and interactions, treatment planning and delivery, clinical resource allocation, clinical research programs, educational and academic activities, and participation in cooperative groups related to GI Cancer. In this role, the new Section Chief will report to the Director of the Division of Solid Tumor Oncology in the Department of Medical Oncology. The new Chief will be resourced to recruit additional faculty talent consistent with his/her vision.

**Program Leader, GI Cancer:** The Program Leader will be responsible for further developing and coordinating Jefferson’s multidisciplinary clinical GI Cancer programs, and marketing them to internal and external audiences. This new position spans, but is not limited to, strengthening collaborative group clinical trials participation, designing and activating investigator initiated trials, cementing communications and working relationships between the principal disciplines involved in the diagnosis and management of GI Cancers at Jefferson, and representing the perspectives and needs of GI Cancer within the GI and Transplant Service Line.

**Program Co-Leader for the KCC Gastro-Intestinal Cancer Core Research Program:** This appointment will be offered to the most highly experienced candidates whose background qualifies them for a major cancer center role. The KCC Gastro-Intestinal Program Co-Leader or Leader (depending on qualifications) is appointed by and accountable to the Cancer Center Director. He/she will be expected to maintain and grow the core scientific program in conformity with KCC strategy and NCI designation requirements and expectations. The robust KCC GI Cancer Program (see program summary above, full program detail available to qualified candidates) earned high scores on the most recent NCI site review and is one of only two clinical core programs of the KCC.
The Candidate

Qualifications

The ideal candidate will be a nationally or internationally recognized Board Certified medical oncologist with expertise in GI malignancy and fluent with current clinical and scientific literature in this field. He/she will have a vision for what a “world class” GI Cancer center at Jefferson could look like and will lead development of the Jefferson GI Cancer Program to achieve it. In order to do this, this individual will have a strong track record of successful program development, clinical research, as well as translational research including investigator/institutionally initiated as well as industry sponsored drug development and Phase I trial activity. Strong candidates will also have a demonstrated ability to independently obtain and retain research support, ideally including NCI qualifying as well as other major peer reviewed funding. Competitive candidates will have presented nationally and internationally (e.g. ASCO, AACR) and been published in well-respected venues (e.g. JCO, Cancer, Gastroenterology) and held leadership positions in cooperative group sections (e.g. SWOG, ECOG, RTOG). He/she will have the academic qualifications for an appointment at the level of Associate or Full Professor at Jefferson Medical College and the scientific credentials required for the leadership roles at KCC outlined above.

In addition to the qualifications above, candidates of interest will have significant skill and demonstrated accomplishment in developing and managing multidisciplinary programs, achieving consensus on clinical and research strategies across traditional boundaries, and managing in a collegial and highly matrixed environment.

Candidates meeting the fundamental qualifications and having outstanding potential but less seniority or demonstrated accomplishment in the field may be considered, however they may not qualify for all components of the position as outlined above.

Personal Characteristics

The Jefferson environment presents the dynamic richness and challenge of a complex managerial and professional milieu, typical of top-ranking academic medical centers. Candidates must be equipped to thrive in this stimulating setting by possessing the following leadership skills and attributes:

- The ability to articulate a vision and recruit support for achieving it;
- Innovation and creativity;
- Understands and is able to adapt to the evolving healthcare environment and its potential impact on clinical care and research in GI Cancer;
- Collegial within and across Departmental and institutional boundaries;
- Clinical excellence and a passion for efficient, safe, effective, multidisciplinary clinical practice;
- The ability to collaborate, cooperate, negotiate, and delegate to obtain results across organizational boundaries and professional roles;
- Well developed organizational, planning, and business skills;
- Competency and interest in mentoring, coaching, and functioning as a team leader within and across Departmental boundaries;
- Outstanding written and oral communication and listening skills;
- A track record of success in solving complex clinical, scientific, and operational challenges;
- Experience in successfully developing, mentoring, and managing physicians and staff resulting in effective clinical and research operations;
• Familiarity with methods and tools for measuring performance, quality, and operational improvement;
• Familiarity and comfort with electronic tools and the electronic medical record;
• High professional and clinical standards and the ability to lead others to high levels of achievement;
• A working understanding of organizational processes that characterize complex and highly matrixed academic environments; and
• Personal energy, passion, and a strong commitment to the tripartite academic mission.

Critical Success Factors

The Search Committee, comprised of critical participants in Jefferson’s Cancer Program, has identified provisional measures of success for this position as follows:

Short Term (Year 1)
• Build a well-functioning, cohesive, and synergistic clinical program team
• Build bridges to current and new collaborators, in a spirit of inclusiveness that attracts new participants into the program
• Develop a sound infrastructure for enhanced collaborative care and research
• Identify opportunities and strengths within the GI Cancer Program. Begin to formalize and develop clinical and research strategy to be implemented in the coming 3-5 years, while also making the case for the required research and resource commitments
• Co-author grant applications, presentation proposals, and collaboration agreements
• Recruit, mentor, and develop junior faculty

Intermediate Term (Year 3)
• Establish individual sub-program identities (e.g. HCC, colon, pancreas) that build and differentiate the clinical and research components of the GI Cancer Program
• Demonstrate growth in program volumes, participation, and activities
• Submit manuscripts to important peer reviewed journals
• Establish visibility in national venues (e.g. cooperative groups, scientific symposia, etc.)
The Philadelphia Environment

Philadelphia is much more than a convenient place to live and work—it is also a beautiful, walkable city of 1.5 million people, bursting with historic attractions, cultural amenities, major sports teams, affordable housing options and excellent schools and health care facilities. Close to the Atlantic Ocean and the other cities of the Northeast, Philadelphia is an ideal place to call home.


The city is well known for its many excellent restaurants, and the Italian Market, Chinatown, and the Reading Terminal Market are within ten minutes walking distance from the Jefferson campus. Philadelphia is home to numerous Universities and has many activities for young professionals. Philadelphia also offers a wide array of choices for sports spectators, with professional football (Eagles), baseball (Phillies), basketball (76ers), and hockey (Flyers) teams, men’s and women’s soccer, and even the US Pro Cycling championship.

New York City and Washington D.C. are within 90 minutes via train. The New Jersey Shore resorts are 60 miles east of the city and excellent ski mountains located 70 miles north of Philadelphia in the Pocono Mountains.

Compensation

A competitive startup, compensation, and benefits package will be constructed commensurate with the background and experience of the selected candidate.

Equal Employment Opportunity Statement

Thomas Jefferson University & Hospitals, Inc. is an equal opportunity/affirmative action employer. We strongly encourage women and minority candidates to apply for these and all available positions at Jefferson.

For More Information

ZurickDavis, a retained executive search firm specializing in physician leadership recruitment, is assisting Jefferson University with this search. Interested individuals should send a letter of interest and current CV to JeffersonChiefGI-Oncology2057@ZurickDavis.com. For nominations, referrals, or questions, please contact: Lida Junghans, PhD (lida.junghans@ZurickDavis.com) or Jacqueline Rosenthal (jrosenthal@ZurickDavis.com) who can be reached at 781-938-1975, or Stephen Blattner, MD MBA (sblattner@exagomd.com) who can be reached at 207-233-8521. All contact with ZurickDavis will remain strictly confidential.