

## CLINICAL OBSERVATION

In this section, we highlight the human side of clinical academic medicine, putting a few questions to a physician at DMS-DHMC.

**Robert Gougelet, M.D.**

**Assistant Professor of Medicine (Emergency Medicine)**

*Gougelet, who's been at DHMC since 1999, is the medical director for emergency response. He also heads a Boston-based disaster response team that has traveled all over the world—including to New Orleans in the wake of Hurricane Katrina.*

**What made you decide to become a physician?**

I wasn't sure I was going to be a physician when I started college. But as I took courses, I kind of kept going toward medicine. I do have a love for the biological sciences. I volunteered in the emergency room every Friday night for three or four years in college. I also did EMT training when I was 18 and volunteered at my local fire department as an EMT for many years—and later

became that fire department's medical director.



**What famous person, living or dead, would you most like to meet?**

I would say the Dalai Lama. He has this peaceful nature, but there's this incredibly political aspect to his life. I'd like to understand a bit more about how he balances that out.

**If you could live in any time period, when would it be?**

I would like to have a glimpse of the future, 50 years ahead or so. I'd be interested to see how things are working out politically, what kind of shape the world is in then, what medical technology is like, what's the role of doctors.

**What's your favorite nonwork activity?**

Going to canoe camp with my family; we do that once a year. Also, when I have time, fixing things around the house and working on the cars. I don't get much time for that, but I enjoy it.

**What country would you most like to travel to and why?**

China has always fascinated me. I understand that some places there are absolutely beautiful, such as the canyons along the Yangtze River where they're building a dam and they're going to flood all these villages built into the rock—I'd like to see them before they disappear forever.

**Do any events in your career stand out?**

I think the earthquake in Bam, Iran, was the most significant—the politics of it, the enormity of it. Certainly it was the most horrible thing I've seen ever. The other one of particular importance was responding to the New York City anthrax attacks and treating several thousand postal workers. I learned a lot from both of those.

**What new technologies are you involved with?**

We're working with several groups on developing a new foam technology that could decontaminate patients much better than water and soap. This has enormous potential. There are also new ways to track patients and communicate during disasters—all the command and control issues in how medical teams coordinate with law enforcement and fire control. Obviously the focus now is on terrorism.

**What are your greatest frustration and greatest joy?**

The greatest frustration in my work is politics. We're working in a very difficult field right now, with enormous potential consequences, and yet we have to deal with politics, territories, egos, and things like that. It's very unbecoming of people who work in this field. I think the most satisfying thing, at this point in time, is our efforts here at DHMC. There's been a significant amount of attention regionally and nationally to preparing for mass casualties, and we should be proud of the fact that some of the work we've done here is being used in other places.

**What about you would surprise most people?**

I used to be a TV repairman. When I was in high school, a family friend owned a TV repair shop and I worked after school fixing TVs.



## Student from Serbia brings ultrasound to his homeland

Getting an ultrasound, MRI, or CT scan—technologies taken for granted in industrialized nations—is unheard of in remote and impoverished parts of the world. Even when such procedures could save a life, they're simply unavailable. Veljko Popov, a fifth-year M.D.-Ph.D. student at DMS, has been chipping away at this disparity for a few years now, with the assistance of Robert Harris, M.D., director of ultrasound at DHMC.

In 2002, Popov and Harris began investigating the feasibility of transmitting ultrasound images from Popov's hometown—Zrenjanin, Serbia—to DHMC for interpretation. With a grant from the Dartmouth International Health Group, the pair traveled to Zrenjanin to set up a basic computer infrastructure in a local hospital and to conduct preliminary tests.

The people of Zrenjanin are “a population to which I felt in debt, to whom I felt sorry for after all those years of suffering and political and social crises,” says Popov, who emigrated from Serbia in 1995, during its war with Bosnia. This project is a way to give back to the community he left behind.

**Unit:** In January 2004, Popov and Harris returned to Zrenjanin with a compact, portable sonography unit, donated by DHMC's Department of Radiology, and began collecting ultrasound images of patients. They used 50 of