

# Changemakers

Amy K. Patel, MD  
Transforming the face  
of value-based care

## ABOUT THE PROJECT

Around the world, radiologists are transforming the specialty and advancing medical care. They're providing expert imaging interpretation to guide treatments while partnering with referring physicians, consulting with patients, serving as advocates, and developing innovations for high-quality, accessible, equitable healthcare. They are the trailblazers, the leaders, the influencers ... the **CHANGEMAKERS**. This occasional series of profiles helps us know some of these inspiring radiologists better as they discuss why they pursued careers in medicine, what drew them to radiology, who they consider their mentors, what motivates them to approach demanding challenges, why they see radiologists as stewards of care, and even how they spend their downtime. We hope you gain inspiration from these stories, and we invite you to visit the Imaging 3.0 case study library ([acr.org/changemakers](http://acr.org/changemakers)) for additional strategies to advance your own changemaking journey.

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**AMY K. PATEL, MD**

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**MOTTO:** Work hard, play hard

**FAVORITE SPORTS TEAMS:** Kansas City Chiefs and Kansas City Royals

**BACKUP CAREER:** Opera singer

# Leading Change with Grace and Grit

Trailblazing breast radiologist Amy K. Patel, MD, bridges the healthcare gap for rural women at her growing practice in Northwest Missouri. Through her commitment to advocating for patients and promoting diversity in the radiology profession, Patel is transforming the face of value-based care.

In some ways, Amy K. Patel's healthcare calling began generations ago in the remote villages of Tanzania. It's there that her grandfather served as a surgeon, treating underserved populations and exemplifying patient care in action. "He devoted his life to serving patients, and he instilled in his grandchildren a belief that there's no greater calling than serving others," Patel remembers. "He inspired a lot of our family members, and most of us ended up pursuing healthcare professions."

The majority of Patel's family — including her brother, mother, father, and dozens of cousins, aunts, and uncles — work in the medical field, many as physicians, pharmacists, and nurses. After growing up surrounded by healthcare professionals, it wasn't surprising when Patel chose to pursue a career in medicine. Unlike her grandfather, however, Patel didn't have to travel far to find underserved patients.

In her rural hometown of Chillicothe, Missouri, Patel noticed a void in women's healthcare from a young age: Most of the physicians practicing in her area were men, and women often had to drive into the city for specialized care. Early on, Patel dedicated herself to filling this gap. "I saw such a paucity of specialized care for women in my hometown that I became fervently passionate about bridging the gap in healthcare disparities within my community," says Patel, 35. "I thought, 'If I don't step up to the plate, then who will?'"

With this in mind, Patel initially considered becoming a primary care provider, specializing in women's care, but her passion for women's health ultimately pointed her toward radiology. Now, she's a breast imager who is blazing trails as a radiology changemaker by advocating for patients' access to care, demonstrating the importance of patient-facing interactions, and promoting the importance of diversity within the profession — all of which embody her grandfather's lessons about serving others.

## DISCOVERING RADIOLOGY

Recognizing the opportunity to have a meaningful impact in her community, Patel pursued a medical degree close to home. Just one week after her high school graduation, Patel began college classes in preparation for a rigorous six-year accelerated medical program at the University of Missouri – Kansas City (UMKC). “Although I felt like I was more mature than the average 18-year-old, the amount of discipline and devotion I needed to commit to being successful in medical school was a bitter pill for me to swallow,” Patel recalls. “While my friends were enjoying sorority and fraternity life and attending football games, I was cooped up studying for over 20 hours of classes each semester.”

Even though she sacrificed parts of the proverbial college experience, Patel got a head start in medicine — interacting with physicians and patients much sooner than traditional medical students. “As a first-year med student, I was able to shadow physicians and gain exposure to patients very early, which kept me focused on my reason for pursuing this career,” she says. “Interacting with patients shows you what you’re working toward, and it confirmed that I was on the right path.”

With an eye toward direct patient care, Patel didn’t initially consider a career in radiology, which has a reputation for limited patient interaction. But when a fellow med student suggested that Patel shadow his mom, a breast radiologist, to see if the imaging specialty aligned with Patel’s personality and passion for women’s health, she took the opportunity.

This one-month rotation exposed Patel to various imaging-guided procedures, patient consultations, diagnostic imaging, and even multidisciplinary conferences. “By the end of the rotation, I knew that breast imaging was the specialty for me because it had everything — the diagnostic and the procedural interaction with patients,” Patel says. “From then on, I committed to learning as much as I could about breast imaging, and that educational engagement really served me well as I built my knowledge about improving women’s health.”

## BREAKING DOWN BARRIERS

Patel continued her fast-tracked education when she entered the residency program at the University of Kansas (KU)-Wichita. “The university doesn’t have a fellowship program, so the residents get to perform more advanced procedures that would typically be reserved for fellows,” she says. “That’s a huge advantage for the residents, giving them autonomy to become confident in their skills even earlier.”

As the only woman in an all-male class of residents, however, Patel struggled to find her confidence and fell behind her peers. “One of my attendings said I was subpar compared to the other residents, and it stung. At first, I thought he was just picking on me, but I really analyzed the situation and faced my shortcomings,” Patel says. “I took it to heart and worked even harder, studying after work and going in early to read mammograms. I think it shaped who I am today: resilient, unwavering, and unafraid in times of turbulence.”

Driven to succeed, Patel developed a mentorship with her residency program director, Kamran Ali, MD, FACR, to soak up all of the knowledge she could to eventually reach the top of her program. “She was not easily intimidated,” Ali says. “Her humility and adaptability allowed her to overcome setbacks. She asked for feedback during every rotation, and that’s not

something a lot of residents do. She quickly expanded her knowledge and, because of her passion and enthusiasm for radiology, she became chief resident her senior year.”

In 2015, Patel’s peers elected her as the first female chief resident in the program’s history, proving she was anything but subpar. “It felt incredible knowing that all my extra work paid off,” Patel recalls. “I felt immense pride, but I was also humbled that the residents had faith in me to lead the program. I knew it was a groundbreaking responsibility, being the first female chief. I wanted to put everything I had into the position to make the women following after me proud.”

The residency program has welcomed another female resident since then and has expanded its efforts to recruit more. “Citing Dr. Patel as an example of what female leadership can look like in our program has increased our applicant pool of women,” Ali says. “As a result, we have seen significantly more women interview for our program in the last five years.”

## LEADING CHANGE

As the first female chief resident, Patel wanted to set an example as a firm but fair leader to gain the respect of her male colleagues — some of whom questioned whether she was the best resident for the position. “From the beginning, I wanted to be a leader that residents felt comfortable approaching with anything, but at the same time, I wanted to be firm and decisive and not let them think they could walk all over me,” Patel says. “Essentially, I wanted to lead with grit and grace, and that was the mantra that I used as my equation for success.”

Ali watched Patel strike this balance carefully as she resolved conflicts among her peers, made difficult decisions to mediate differing opinions, and ultimately drove positive change in the program. “She was very good at navigating strong personalities while maintaining her own identity,” he says. “Without compromising her goals, she could take a step back and listen to her fellow residents. That made her an excellent conflict manager because she respected all points of view. In complex situations, like a rotation requirement change that half of the class supported and the other half objected to, she would bring both sides to the table and act as the arbitrator rather than the decision maker. Through this, she learned how to interact with people who thought differently from herself to champion change.”



*Patel always knew that she wanted to improve care for women and found her calling in breast imaging.*

Patel's balanced approach helped build buy-in among her peers around several new initiatives aimed at improving the educational experience for trainees. For example, she established the radiology medical student interest group at KU-Wichita, organizing workshops and events to expose and recruit more students to the specialty. She also began scheduling regular resident excursions — including pool parties, bowling events, and movie outings — to promote wellness and foster camaraderie.

"I felt that we needed to focus on wellness outside of work as one cohesive unit, and it really solidified the bonds in our program," she says. "One of my mantras has always been 'work hard, play hard,' and I wanted to make sure we were providing fun opportunities for trainees to engage outside of the daily grind, which in turn assisted in mitigating burnout."

Of course, being chief resident wasn't all fun and games. The role also exposed Patel to the "business of radiology," as she calls it, which was foundational to her career success. "As chief, I attended meetings with our radiology staff and the hospital CEO," she says. "Not many trainees get the opportunity to see what's happening in the C-suite and learn about the business of radiology, but it's arguably just as important as what you learn clinically. It prepares you to lead the organizational changes that are necessary to improve clinical care."

**"As a woman and a person of color, Amy is making huge contributions to the radiology community."**

— Geraldine B. McGinty, MD, MBA, FACR

To expose more residents to the critical business principles of radiology, Patel developed a healthcare economics curriculum for KU-Wichita's residency program. The one-week curriculum covered non-interpretive skills like finance, code valuation, and relative value units to help trainees better understand hospital business operations and prepare them to take on leadership roles. "Having exposure to the business side of radiology as early as possible can be imperative to kick-starting your career," Patel says. "Helping to educate the next generation of radiologists about the business of our profession made me feel like I was making a big impact on the future of the program."

## PROMOTING DIVERSITY

Even before she was elected as the first female chief of her residency program, Patel committed herself to promoting the importance of diversity in radiology. To impact change throughout the profession, she knew she needed to engage with the ACR. "Since the ACR is the governing body of our profession, and the decisions that ACR members make influence our entire profession and the lives of our patients, I knew I wanted a seat at their table," she says. "By getting involved early as a trainee, I thought I could obtain that seat sooner rather than later."

Patel attended her first ACR Annual Meeting as a first-year resident at the urging of one of her attending physicians, John Lohnes Jr., MD, FACR, who was involved in the Kansas Radiological Society, a state chapter of the ACR. He introduced Patel

to Geraldine B. McGinty, MD, MBA, FACR, who was chair of the ACR's Commission on Economics at the time. "I think he recognized that Dr. McGinty and I shared common interests, and he thought she could be a mentor for me," Patel says. "Boy, was he right! Dr. McGinty took me under her wing from that day on."

As two female breast imagers with a shared passion for patient advocacy and professional diversity, McGinty and Patel bonded instantly. "Our mentoring relationship was pretty natural because our interests align," says McGinty, who became president of the ACR in May of 2020. "Amy is intent on making an impact in breast imaging. In fact, she became part of our community so quickly that it's hard to believe she wasn't always there."

By her second year of residency in 2014, Patel was ready to get more involved in the ACR to help advocate not only for patients' access to breast care but also for the inclusion of more diverse trainees and radiologists in the field. That year, she ran for a position on the ACR's Resident and Fellow Section (RFS) Executive Committee and was elected secretary.

With McGinty's guidance, Patel used her position to push for increased diversity in the profession. The ACR had already established the Commission for Women and Diversity in 2013, but in 2015, Patel proposed creating a committee of the commission at the RFS level to give trainees like herself a platform for recruiting candidates from more diverse backgrounds. "I thought having an RFS chapter of the main commission would help us engage more underrepresented minorities and women," she says. "There were rumblings in radiology that we needed to recruit more minorities, but few people were actually doing anything about it."

Once established, the group quickly drew the interest of RFS members. "It exploded," Patel says. "So many people are involved that they can't even call it a committee anymore, which by the ACR's definition consists of 12 members or fewer. Now, it's a large advisory group with its own subcommittees. It's really exceeded my expectations, and it's probably the earliest example where I felt like I was making a national impact on the profession."

Patel credits the support of ACR leaders who have pushed for diversity over the years, including former ACR Board of Chancellors (BOC) chair and past president Paul H. Ellenbogen, MD, FACR; past BOC chair and former president Jim A. Brink MD, FACR; and her mentor McGinty, who in 2018 became the first female chair in the BOC's 94-year history. "As a woman and a person of color, Amy is making huge contributions to the radiology community," McGinty says. "Only about 25% of radiologists are women and an even larger gap exists when we look at underrepresented minorities, so we still have work to do with the diversity of the profession. But when we see people like Amy in leadership roles, it sends a message to medical students that says, 'This is a place where you will not only be welcomed but embraced into the leadership.'"

## ADVOCATING FOR PATIENTS

Getting involved in the ACR also unlocked Patel's passion for politics, giving her opportunities to impact issues that directly affect her patients. "Whether radiologists are fans of politics or not, you've got to be able to work with your elected officials to pass legislation that benefits patients," she says. "If you don't, then your patients won't get coverage for the examinations they need. In breast imaging, that equates to breast

cancers being diagnosed much later, when women are less likely to be treated successfully. If you go into medicine for the right reasons, it should be important to you to advocate for your patients.”

As part of her role on the RFS executive committee, Patel served on RADPAC, the ACR’s bipartisan political action committee, which triggered her passion for patient advocacy. “Getting involved with RADPAC and learning the intricacies of ACR’s government relations efforts really got me hooked,” says Patel, whose interest in politics started at a young age thanks to long talks with her father about political affairs, “As an advocate with the ACR, I realized that I had the potential to be a voice for those who did not have one.”

In 2015, Patel received the ACR’s Rutherford-Lavanty Fellowship in Government Relations. “Through this one-week fellowship in Washington, D.C., I got to meet a lot of elected officials and learn how the ACR government relations team advocates for patients at the federal level,” Patel explains. “I learned how I could use my political passion to help women by advocating for breast imaging legislation that improves their access to care.”

After completing her residency at KU-Wichita and a breast imaging fellowship at Washington University in St. Louis, Patel took a position as a breast imaging specialist at Beth Israel Deaconess Medical Center (BIDMC), a Harvard teaching hospital in Boston, in 2017. At that time, she joined the Massachusetts Radiological Society and leveraged her advocacy prowess as part of the mammography committee. In 2018, she lobbied the state legislature to pass a bill mandating insurance coverage of 3D mammography annually beginning at age 40. The following year, when Patel returned to her home state to join her current practice, she continued her advocacy efforts with the Missouri Radiological Society.

In April of 2018, she helped amend legislation to expand mammography coverage in alignment with ACR guidelines. “This bill was a huge victory because Missouri’s mammography legislation hadn’t been revised since the early 1990s, when it was first introduced,” Patel explains. “Previously, Missouri women were only covered for 2D mammography screening every other year beginning at age 50. The new legislation mandates insurance coverage of 2D and 3D mammography screening annually beginning at age 40. This change will help save more lives from breast cancer in Missouri.” (Read the Imaging 3.0 case study “Advocating for Change” at [acr.org/Advocating-for-Change](http://acr.org/Advocating-for-Change) to learn more about Patel’s advocacy for this mammography legislation.)

Still, Patel saw a gap in coverage for women at high-risk for breast cancer due to personal health or family history. “Patients came to me so upset that insurance providers were denying coverage for them, when it was recommended by expert groups such as the ACR,” Patel says. “One high-risk patient in particular was denied coverage for supplemental screening even though she had dense breasts, which can obscure masses in a traditional mammogram and increase the risk of developing breast cancer. When she returned for her next mammogram, we found an obvious breast cancer that was not on her previous mammogram. I often wonder: If she had been granted access to supplemental screening six months prior, could we have found the cancer when it was much smaller and easier to treat? That was when I decided I had to do something about this issue.”

Patel approached State Sen. Lauren Arthur (D) and State

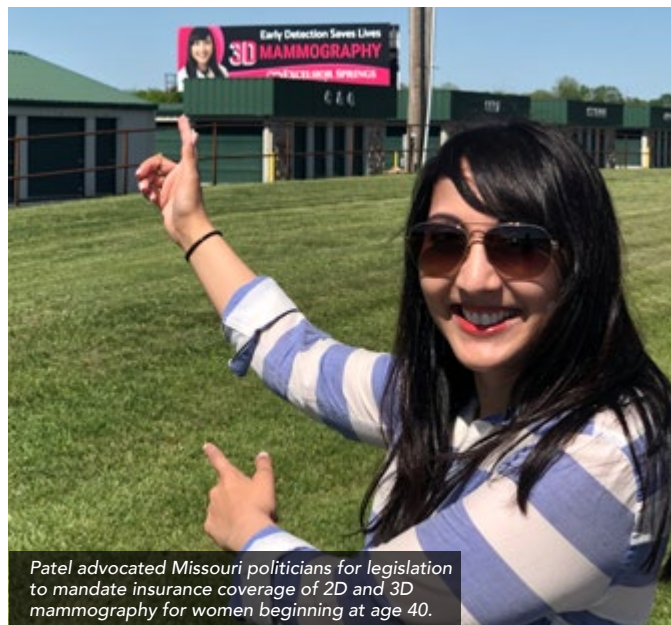
Rep. Jon Carpenter (D), who agreed to sponsor legislation in the Missouri Senate and House, respectively, to extend coverage for annual mammograms and supplemental screening to high-risk women in line with ACR screening recommendations for above-average-risk women. Both pieces of legislation passed the House and Senate in May of 2020. “Amy’s able to build allies across the political divide to advocate for better access to care,” McGinty says. “By engaging with local politicians to make sure that legislation and regulation support breast cancer screening, she’s visibly investing in the health of her community. Her energy and engagement are inspiring other radiologists and positively impacting her patients by protecting their access to screening.”

## RETURNING TO RURAL CARE

After completing most of her medical training in the Midwest, Patel’s first imaging position on the East Coast marked a crucial shift in her perspective on women’s health disparities in certain regions. “The Midwest was all I’d ever known, because I’d done all my training there, so I wanted to see how people practiced in different parts of the country,” she says.

The contrast shocked her. Patel noticed a stark difference in the level of subspecialty care and the sheer number of subspecialists in a large city like Boston compared to her hometown hospital in Missouri. From her perspective, this emphasized the need for more specialized rural care. “In Boston, there’s a subspecialist on every corner,” Patel says. “But by comparison, rural areas often have far fewer subspecialists and much higher breast cancer morbidity and mortality rates than urban settings. It made me feel sad and, honestly, a bit angry. For me, it was a calling to return home with the education and experience I’d received. I knew I had the potential to make a profound impact in my home state.”

As soon as an opportunity opened in Kansas City, Patel returned to her roots, moving toward her dream of providing specialized imaging to a rural population. In July of 2018, Patel became medical director of women’s imaging at Liberty Hospital and a part of the private practice group, Alliance Radiology, where she is now a partner. While she was excited



Patel advocated Missouri politicians for legislation to mandate insurance coverage of 2D and 3D mammography for women beginning at age 40.

about returning home to her tight-knit family, Patel was also anxious about her new role. "Taking this position was a huge undertaking for someone so early in her career," says Patel, who was 32 when she joined Liberty Hospital/Alliance Radiology. "When I assumed this role, I was told, 'You're too young,' or, 'It's too early in your career to take this on.'"

But Patel quickly proved naysayers wrong as she executed an ambitious plan to standardize the breast imaging protocols at all of the sites her group oversees. Her team of nine radiologists based at Liberty provides radiological services for seven rural hospitals across Northwest Missouri as well as Samuel U. Rodgers Health Center, an urban hospital that serves 20,000 underserved patients in the Kansas City metro area. In total, her department oversees breast imaging for about a quarter of the state.

To drive the massive changes needed to improve breast care throughout her region, Patel leveraged her teambuilding skills to collaborate across disciplines. She met with technologists to provide hands-on training about the updated imaging protocols she deployed and worked with referring physicians to streamline the process for triaging patients into the breast center to improve the overall experience.

As a result of these efforts, Patel's department earned "nearly perfect" patient satisfaction scores for four consecutive quarters — a record that's never been achieved by any department at Liberty Hospital. To accommodate the department's rapid growth, Liberty plans to expand the Women's Imaging Center in the future. Patel emphasizes that this expansion is a byproduct of bringing value-based care to rural patients. "This is what I'm meant to do," says Patel, who is one of only a handful of fellowship-trained breast imagers in Northwest Missouri. "I knew I could make a bigger impact here by improving access to care and bridging the gap in healthcare disparities than I could by practicing in a more urban area where there's already an abundance of subspecialists."

## PAYING IT FORWARD

Throughout her changemaking journey, Patel has often encountered critics who have second-guessed her ambition — whether through a blunt review of her "subpar" performance during residency or a question about taking on a directorship at a young age. But because her supporters have outnumbered the skeptics, these remarks have only fueled her determination. "My advice to other radiologists is: Don't be intimidated if you want to incite change. Being a true changemaker takes a lot of patience and persistence," she says. "Even if it seems like a daunting undertaking, surround yourself with a diverse cadre of solid mentors to help you navigate the challenge."

Patel says mentors like McGinty, Lohnes, and Ali have been instrumental to her success by offering advice from their experience. To pass on the knowledge and guidance they've shared with her, Patel actively mentors other young radiologists, trainees, and medical students through platforms like the ACR, the American Association for Women in Radiology, and even social media. "Social media has become such a powerful tool for mentorship, sponsorship, and medical education," says Patel, who serves as the *Journal of the American College of Radiology's* associate editor for digital media and is active on Twitter, Facebook, and LinkedIn. "You can mentor anyone anywhere now that we're so digitally connected."

Patel regularly tweets about the importance of strong mentors to guide young radiologists through training. A few years ago, a third-year student in Chicago Medical School at Rosalind Franklin University responded to one of these tweets — asking Patel for guidance, since her school didn't offer radiology training. Patel accepted her request and sparked a virtual mentorship that continues today.

"The message I sent to Dr. Patel is one of the most influential and beneficial acts of my career," says Anne Sailer, MD, who is now a first-year interventional radiology/diagnostic radiology resident at Yale New Haven Hospital. "Through



Patel and her fiancé, Joe Rathemmel, attended the 2020 Super Bowl to cheer on her favorite football team, the Kansas City Chiefs.

hours on the phone, monthly email updates, and wonderfully constructive feedback, she helped me strengthen my applications for radiology rotations and decide which programs would be the best fit for my career goals. Her mentorship has helped me find my place and my voice in radiology.”

Patel also mentors local students and residents in person to share her expertise. In her role at Liberty Hospital, Patel is affiliated with the department of radiology at UMKC School of Medicine, where she serves as assistant professor and faculty adviser of the medical student interest group — the one she participated in as a resident and resurrected when she returned to her current role. “It’s important for me to pay it forward and give back some of the wisdom and advice that I’ve been given by so many amazing mentors,” says Patel, who now has more opportunities to lead young radiologists as the chair of the Young and Early Career Professional Section of the ACR. “Finding strong mentors and continuing to mentor others can help you improve, not just professionally but also personally.”

## PLAYING HARD

While running her practice, mentoring young radiologists, promoting diversity in the profession, and advocating for improved patient care, Patel often juggles a packed schedule. But true to her “work hard, play hard” motto, she never misses an opportunity to indulge in hobbies and other interests to achieve balance and to avoid burnout. “We know that physicians in general are subject to critical levels of burnout, and radiologists may be even more prone to that,” McGinty notes. “We need to make sure that our professional careers support our wellness, and Amy’s been a great example of that. Her obvious joy and professional satisfaction show that it’s possible to find a practice that supports your personal life. Amy has created that balance.”

Patel plans time for regular exercise, like hiking and running, to help with stress management. “I like to get outside in the sun because, as radiologists, we’re in the dark all day,” she says. “When I travel, I can really unplug and get away from it all, which also helps.” A fan of fine arts, Patel also likes to unwind at the symphony and the opera. In fact, Patel herself sings opera and says if she hadn’t gone to medical school, she would have been a vocal music major instead. “That’s one factoid that a lot of people don’t know about me,” she says.

Though her busy profession has taught her a lot about time management and deadline-driven discipline, Patel says her fiancé has been a key proponent of her work-life integration. While planning an upcoming wedding, the couple has prioritized taking time off together to relax and recharge. “A lot of the balance I’ve achieved in the last couple of years has been because of my fiancé,” she says. “He’s an architect, so he works crazy hours like me, and he taught me that we need to strike a balance. We make time to take breaks together, and once I have those little breaks, I’m ready to go again.”

A favorite pastime of Patel’s is cheering on the Kansas City Chiefs with her fiancé, her brother, and other family members. A fiercely loyal sports fan, Patel’s devotion to her local teams illustrates her character of commitment, according to Ali. “She loves her Kansas City sports teams,” he says. “I remember one night as a resident, after she got done with her night float shift at 6:30 a.m., she slept for four hours then drove straight from Wichita to Kansas City for Game 7 of the World Series. The

Royals had been in a rut for years, and she told me she wasn’t going to miss this game for anything. Even though the Royals lost to the Giants that day, I think that anecdote exemplifies her character very well: She’s loyal and enthusiastic, and she perseveres with a never-give-up attitude.”

Whether she’s cheering on her team, fighting for patient access to screening, or driving change through her practice, Patel is unwavering in her resolve. “I have an inherent, insatiable driving thirst to better myself, try new things, and advance myself personally and professionally as much as I can,” Patel says. “I want to go above and beyond what people think I can do. People don’t expect those of us from middle-of-nowhere America to do prolific things, so debunking that myth has been important to me.”

## ADVANCING PATIENT CARE

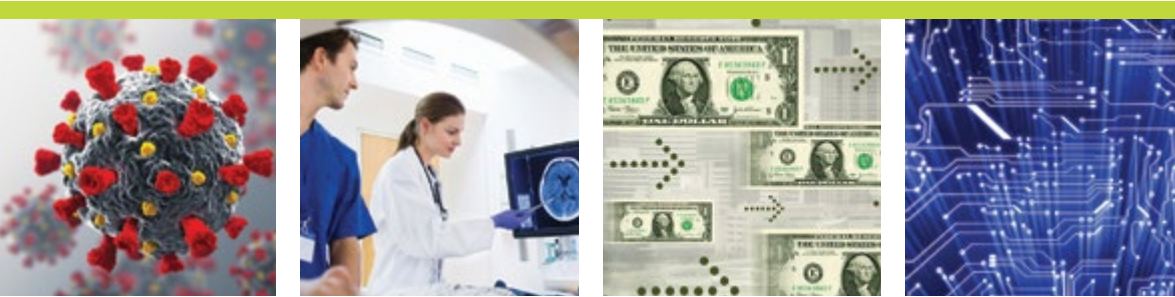
Although Patel acknowledges that “a lot of improvements still need to be made,” both in her practice and the radiology profession at large, she has already made a significant impact in just three years since completing her subspecialty training. “I’m making a difference for underserved women both clinically, by bridging the gap to breast care disparities and improving access to lifesaving care within my own practice, and legislatively, by working on critical legislation to improve insurance coverage for women across the state,” Patel says. “I feel infinitely proud of the work I have accomplished to improve the lives of these women because the issues that affect them also affect me.”

Through her commitment to making every patient feel valued, Patel applies her trademark energy and selfless devotion to improve the patient experience at every level, from her personal interactions to her role as vice chair of the Economics Committee of the ACR’s Patient- and Family-Centered Care Commission. “Amy has made a big difference by encouraging patient-facing interaction,” Ali says. “She’s not the type to just sit in a dark room. She utilizes her skills to interact with patients in a way that adds value. She loves talking to patients and advocating for the best imaging tools to serve them, and she has proven how this can lead to improved patient satisfaction. We need more changemakers like Amy to champion innovative changes that improve the healthcare experience for our patients.”

As much progress as she’s made in Missouri, Patel continues to see increasing demand for more radiologists to bridge the lack of services in rural practices nationwide. While many radiologists her age are migrating to urban health systems, Patel urges specialists to go where their services are needed most. For her grandfather, that meant traveling around the globe to treat patients in Africa, and later returning to the area where he was raised in India to serve his own community. For Patel, it meant returning to her rural roots in Missouri to improve breast care for underserved women.

“So many healthcare disparities exist between urban and rural areas in this country; we’re never going to close the gap if we don’t have more changemakers who are willing to go out to the underserved areas that need improved access to care,” Patel says. “The more we can diversify the map in terms of where we provide specialty expertise, the better our patients and our entire profession will fare in the years to come.”

BY BROOKE BILYJ, FREELANCE WRITER



# Discover Imaging 3.0 Case Studies

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