



Episode 29: Leading with Passion
Cheri L. Canon, MD, FACR, FAWR, FSAR
December 17, 2020

American College of Radiology, through its Radiology Leadership Institute (RLI), offers this podcast as one of a series of educational discussions with radiology leaders. The podcasts reflect the perspectives of the individual leaders, not of ACR or RLI. ACR disclaims liability for any acts or omissions that occur based on these discussions. Listeners may download the transcript for their own learning and share with their colleagues in their practices and departments. However, they may not copy and redistribute any portion of the podcast content for any commercial purpose.

[00:00:14.877]

Geoff: Hello, and welcome to "Taking the Lead," a podcast from the Radiology Leadership Institute that profiles radiologists as leaders, seeking insight and inspiration from a variety of perspectives and experiences. I'm Geoff Rubin. Today I'm speaking with Cheri Canon, the Witten-Stanley Endowed department chair of radiology at the University of Alabama, president of the Society of Chairs of Academic Radiology Departments, and president of the Board of Directors for the Momentum Women's Executive Leadership Program, which for 20 years has empowered promising women through leadership training and mentorship to positively impact business, culture, and politics in the state of Alabama.

She founded the LEAD program, which brings women chairs of Radiology departments together with leaders from GE Healthcare to sponsor women's leadership in the field of Radiology. Born and raised in Garland, Texas, Dr. Canon overcame the strong forces of traditional gender roles to become a champion of women's leadership within radiology and beyond. Here ceiling-busting efforts on behalf of women and underrepresented minorities, as well as her service to our field, have led to her recent recognition as a gold medalist of the American College of Radiology and recipient of the Marie Curie Award from the American Association for Women in Radiology.

[00:01:27.910]

[music]

[00:01:44.941]

Cheri, welcome.

[00:01:46.756]

Dr. Canon: Thank you, Geoff. I'm really glad to be here.

[00:01:48.631]

Geoff: We're really glad that you are here. You were born in Garland, Texas. What was your life like growing up there?

[00:01:55.758]

Dr. Canon: You know, when I reflect on it, I have the ability to have a broader perspective. At the time, it was all that I knew. It was a very traditional community. In fact, I would refer to it as the Beaver Cleaver type community, except so many people now don't know that reference, so I no longer use it. But it was the typical community where in most houses, the father worked, the mothers were stay-at-home workers. And when I look back on it, now I see that some parts of it were really remarkable in both positive and negative ways. One

of the things that was striking to me even at the time was the very traditional gender roles and how this was reinforced throughout the community. And I always share a story that I remember as clearly as it was yesterday because it had such an impact on me.

[00:02:48.783]

At the time, I didn't know the word sexism, but that's what it was. And I was struggling with my schedule for the coming year, and I honestly don't remember if it was my second or third year of high school, and having a meeting with my counselor and struggling because I had always tried to take the most advanced courses, although there were really not that many in my school, which was a public school, but I always focused on the science courses. I was also a member of the tennis team, which met in sixth period. And so we were struggling making everything fit. And my counselor, I think in a moment of exasperation, finally turned to me and said, you know, "Cheri, you would be much better served if you were to take typing and home ec." At the time, I registered this was not right. I didn't know that this was gender bias. But I realized that was not appropriate and I was angry. So, in my anger, I lashed out and said, well, that was not gonna happen. And so I purposely did not take typing or home ec, and to this day probably at least one of those things was the biggest mistake because as it turns out, who knew typing would be such an important skill, and I can't type. I can't really cook that well but that's okay. My family forgives me for that. You know, that stood out for me.

[00:04:00.435]

And it was also interesting in my home that it was a real dichotomy with my parents. They raised me to be very strong, independent, but more so perhaps in the way of a tomboy, but then they also valued very traditional roles. And I remember the day before I was getting married, sitting in my living room with my father, and Malcolm, my fiance, to be husband, and having a conversation around my name and reference the fact that I wasn't changing my name when I got married. And honestly, Malcolm and I really didn't have a conversation around it because we both always assumed I would keep my maiden name. And my father overheard this conversation and immediately spoke to Malcolm, not to me, but to my husband-to-be, and said, "Well, I wouldn't marry a girl that wouldn't take my name."

[00:04:49.092]

Geoff: Wow.

[00:04:50.491]

Dr. Canon: So, you know, I look back, and at the time, these were just things I kind of brushed off but I look back now and see this and it really resonates with me now of how we learn these gender roles. And I also realized how sheltered I was. My first day in college at the University of Texas at Austin, I was so excited. And my first class was biology. And it was the equivalent of Biology 101, if you will. And first day, first class, immediately, discussion on evolution. And I had never heard that term before. Despite having taken all the science courses that I could possibly take in high school, it just wasn't taught in my high school. It wasn't that it was taught as maybe one of the explanations for the universe. It just wasn't mentioned.

[00:05:38.766]

Geoff: That's amazing.

[00:05:40.494]

Dr. Canon: Yeah.

[00:05:41.221]

Geoff: Yeah. Wow. What a reflection on your upbringing to have such a clear-eyed perspective, going back. Clearly, was very formative and terrific recounting of those instances. You mentioned that your traditional roles was that the mother would work in the home, father outside of the home. Was that true of both your folks? And if so, what did your dad do?

[00:06:03.336]

Dr. Canon: Yeah, so that's kind of an interesting story. My father for, I guess, my earlier years was actually President and CEO of News Texan, which was the publishing company in Dallas for all of the major area newspapers. And my mom at that point was a stay-at-home mother. Although before having me, my mom was...and this is the ironic part. My mom was a science teacher, a high school science teacher. When I was in, I believe, middle school, my father actually lost his job. And as part of a traditional family, a lot of discussions between my parents were only between my parents. They weren't particularly family discussions. But he lost his job and decided at that point that he wanted to be his own boss. So, one of the first adventures we had was we bought a florist and the entire family went to work at the florist. And not that any of us had any experience in that arena but it was kind of fun. It was a lot of hard work. But at that point, my mom did go back to work and continued to work until they both retired several years back.

[00:07:14.105]

Geoff: Fantastic. So, you are an expert in flower arrangements?

[00:07:18.746]

Dr. Canon: You know, I wouldn't say I'm an expert, but we did that for quite a bit. And, you know, I learned. I got okay at it. I remember as a first-year resident...and it's interesting, I just now recalled this, when I was a first-year resident here at UAB, one of the attendings got wind of this, so she would have me come over to her house to help her decorate for our Christmas party. It was kind of fun.

[00:07:41.139]

Geoff: Oh, that's great. You were certainly busting out from the tomboy persona that you were describing a moment ago.

[00:07:47.698]

Dr. Canon: Well, you know, like I said, my life, I guess is a dichotomy on both ends so I guess that gives me an interesting perspective.

[00:07:53.855]

Geoff: How about brothers and sisters?

[00:07:55.731]

Dr. Canon: So I have an older brother. His name is Rex. He's seven years older than I am, I believe. So I was kind of the tagalong, annoying kid sister. He has a degree in chemical engineering and then a master's also from the University of Texas and has been in various versions of oil and gas for most of his career, and was president and CEO of a company that was actually primarily located in Peru for much of his career. A typical commute a few years ago for him would be Lima, London, Dallas, Houston, New York. He has a very different lifestyle but we see him now more in Dallas. His family is on the way to moving to Dallas, hopefully for good. And so, he'll be able to see my parents more as well.

[00:08:41.950]

Geoff: Yeah, that's nice. That's great that you're still close. What was your first job growing up?

[00:08:47.336]

Dr. Canon: What was my first legal job or...?

[00:08:49.962]

Geoff: Yeah. Well, the first job out of the home, legal or not.

[00:08:54.247]

Dr. Canon: Well, you know, when I was a kid, I learned quickly the value of money, not in the sense of, "Oh, I want to have more money," but the power

that it brings. And so, I started doing odd jobs, I think as early as 8 or 10, you know, with the typical babysitting. And then I learned quickly that you could actually make more money mowing lawns, so I started mowing lawns. I guess I don't remember my first paying job. I had several. I was a lifeguard. I was a telemarketer for about four or five hours. I was a Merry Maid for a summer. I don't know. You name it, I've done it, I think.

[00:09:31.537]

Geoff: Any lessons that you carry with you to this day from those early jobs?

[00:09:35.888]

Dr. Canon: You know, probably most of the lessons were in the customer service. I worked at the Gap for a couple of years. And, you know, retail teaches you incredible self-awareness and self-control and the value of engaging with customers. So, yes, I would say I learned significant things. I also learned, as a Merry Maid...that was a really challenging summer. You know, it's a tough job. And these women are incredibly undervalued and underappreciated. And I was often struck by how the homeowners would treat us when we came into their homes. And in fact, more than once we were accused of stealing and we hadn't, but it was just remarkable, again, that bias that lives in all of us.

[00:10:22.502]

Geoff: So you went to college, as you mentioned, at the University of Texas, Austin, you studied biology there, any major activities outside of the classroom?

[00:10:30.407]

Dr. Canon: I joined a sorority. I was really involved in my sorority for really probably my first three years of college. And most of my friends and social activities were around that sorority. Really, I was a studier. I was kind of a bookworm in college. I felt great pressure because I knew I wanted to go to medical school and was really somewhat all-consumed in that. And, in fact, quit my sorority my senior year of college so that I could truly double-down on studying.

[00:11:01.173]

Geoff: That is impressive. Did you do anything to help keep Austin weird?

[00:11:06.782]

Dr. Canon: I probably won't comment on most of those things on this particular discussion.

[00:11:13.217]

Geoff: Nothing to share, huh?

[00:11:15.787]

Dr. Canon: Well, you know, Austin at the time was the undiscovered Austin. It's very different now. But back then, it was undiscovered. It was a wonderful jewel in the rough. And like many things, you don't appreciate them at the time and the ability to just go to a bar and sit down and hear wonderful music, and the laid-back vibe. You know, at the time, I thought it was great but I really had no idea what a wonderful opportunity it was. And I look back on my years there. And even though I studied, I did study, it was wonderful four years.

[00:11:51.278]

Geoff: From Austin, you headed down to Galveston for medical school. What attracted you to UTMB?

[00:11:57.504]

Dr. Canon: Wow, it's been a long time since I thought about that. I think on the interview trail, as I went to the different medical schools, and Texas has so many, it was just a feeling, a gestalt, if you will, with my interview there, and that people that I met, there was frankly nothing scientific about the decision. I just liked the conversations that I had with the individuals who seem to really love UTMB. And going there, that was absolutely true. UTMB had a remarkable community. We knew one another well. And most people who lived on the island worked at UTMB. And so, it was a great decision for me.

[00:12:42.447]

Geoff: Did you take on any leadership roles during those years in medical school?

[00:12:48.813]

Dr. Canon: You know, I've not thought about it, but I did not. I think anything that would have been construed as leadership was strictly informal. For example, our gross anatomy group, I probably would be considered the informal leader of that group. But no, I guess I really didn't have a leadership role.

[00:13:07.613]

Geoff: Obviously, you made up for that down the line. So after spending your entire life in Texas up until that point, what led you to leave Texas for Alabama for your residency?

[00:13:18.215]

Dr. Canon: You know, that was an interesting and very surprising decision. And let me kind of give a little bit of background. I met my husband-to-be when I was a third-year medical student. I guess I can disclose this now. He was my intern on one of my clinical rotations. And for the record, we did not date at that time. He, after that year, left to go on to train in emergency medicine in Baton Rouge. And once I decided on radiology, which initially had been orthopedics, and it was kind of a last-minute change, once I decided and started the interview trail, I had a really difficult decision to make, which is, did I want to be in close proximity or actually in the same state with Malcolm or did I wanna go at the best place I could possibly go? And he was incredibly encouraging, saying, "You know, I'm always gonna be here. You pick what you need to do for now, and we can be put on hold, and we'll be fine." And he was a huge supporter.

[00:14:21.718]

And so I interviewed, and to be honest, I only interviewed at UAB because my career advisor, Sandy Rubin, who had such an impact in my life, literally forced the issue. And he said, "Cheri, you need to go to UAB. It's a great program, I think you need to check it out." And frankly, out of respect for him, I came. And it was one of my last interviews, and I had already made up my mind how I was gonna rank the programs. And after my visit to UAB, all of that went out the window. I decided immediately that I wanted to put UAB number one. And interestingly, it was over 10 years later, Malcolm confided in me that when I shared that I wanted to put UAB number one, and then when I matched at UAB, he said, you know, secretly, he was a little bit disappointed, because he had hoped we'd end up in one of these coastal towns so that we could continue our fishing. And he also had some negative connotations about Alabama, which frankly, most people do. And so when he did finally move to Alabama, two years later, he, like I, was pleasantly surprised and found Birmingham to be a wonderful place to live.

[00:15:32.169]

Geoff: It's remarkable the sort of trust your gut theme that comes up in your decision-making, at least at this stage of your career. But it's also really, I think, tremendously remarkable to reflect on the fact that this decision that you made way back then, was clearly the right decision because you are still at UAB and have never left.

[00:15:54.984]

Dr. Canon: That's right. I think I'm going on 26, 27 years.

[00:15:58.853]

Geoff: That's awesome. That's amazing. Now, did you follow your residency with a clinical fellowship?

[00:16:03.627]

Dr. Canon: That's another little secret. I did not. The plan was for me to stay at UAB for an abdominal imaging fellowship. I had even signed the dotted line for that. And Bob Stanley, who was chair at the time, approached me to join the faculty in abdominal imaging without a fellowship. And, you know, I was a little taken aback and thought maybe it was somehow some kind of trick because it seemed too good to be true. So no, I never did a fellowship.

[00:16:29.004]

Geoff: You must have been some kind of a wunderkind as a resident.

[00:16:32.005]

Dr. Canon: I don't know about that. I will say in my senior year, Bob Kohler, who was probably the most important mentor I still have, created a mini-fellowship. And this was long before the current senior-year fellowships that we see now. And for six months, I did only GI fluoroscopy. And much of this time, I would be in the ambulatory setting and he would be in the hospital setting and we would flip and we would round on all the cases together. And so it was an incredibly intense fellowship. It was one of the most impactful things I have done and really set my course for academics.

[00:17:09.327]

Geoff: I should ask you, what led you to choose radiology?

[00:17:12.531]

Dr. Canon: Yeah, you know, I guess that gets back to one of those gestalt moments. I was clearly going down the road of orthopedics and always was drawn to the surgery, but specifically orthopedics, and did an elective in radiology at UTMB, in part to prepare for orthopedics. And in that rotation, met some remarkable people. One I already mentioned, Sandy Rubin, who was the program director at the time, a well-recognized internationally renowned chest radiologist, and Mel Schreiber, who was also an internationally renowned GI radiologist. And over the course of that month, my entire career direction changed.

[00:17:52.764]

Geoff: I know both of those gentlemen and they are phenomenal. Sandy, in particular, I can well understand how they would have been so influential. Now, you mentioned you joined the UAB faculty right out of residency, how would

you describe your focus in those early years? You know, you join the faculty, what are you thinking? You know, what are you concentrating on?

[00:18:12.032]

Dr. Canon: You know, at the time, medical student education was a focus for me. I had approached Bob Koehler, who was then program director and vice chair of education. Our medical student elective in the department was weak. And we didn't even really have a faculty member who was leading it. It was kind of the typical radi-holiday. And I saw that as a real opportunity and realized, you know, this was the pipeline to our residency and even then realized, this is one of the solutions for our diversity problem. And so, I got involved in medical student education within the department and was so fortunate. And I've had so many people sponsor me over the years and a couple of key sponsorships happened. One, Bob Kohler, who had sat for several years on the School of Medicine Curriculum Committee, decided he wanted to roll-off is how he shared it to me. What I realized now is he stepped aside and sponsored me to take his place on the curriculum committee, which was wonderful.

[00:19:13.606]

And so, I was immediately thrust into this group of individuals across the campus who was putting together the curriculum for the entire medical school. And it was such an opportunity to meet these incredibly seasoned educators. And then not too long after that, Dennis Boulware, who was the senior associate dean of Medical Education, sponsored me to become the chair of the curriculum committee. And during the course of that tenure, we implemented a brand new curriculum across the medical school, across the first really two-plus years, and transitioned from the traditional medical curriculum, which had been in place for decades, to an Oregon-based curriculum. And that really was such an important component of really those first years of my academic career.

[00:20:02.313]

Geoff: I can relate to, you know, sort of, being in the room, the big room, and how impactful that is. It's easy to, sort of, just get comfortable in the insular world of our departments. And, you know, the first time you sit in a committee, a university committee, a hospital committee, and at the table with such a diverse group is really rewarding.

[00:20:20.288]

Dr. Canon: Yeah, that may have been my first experience with imposter syndrome. You know, there were these icons from the campus history there.

And, you know, I suspect the first part of it, I was fairly starstruck and probably didn't say two words for a long time.

[00:20:35.416]

Geoff: Well, let's come back to imposter syndrome. It's hard to envision with all that you've accomplished and achieved that imposter syndrome is still something that you experienced. Well, let's actually just unpack it right now. I mean, have you overcome those feelings?

[00:20:48.928]

Dr. Canon: I, every month, have imposter syndrome. And I just had it today. I have it with our faculty meetings. And it's interesting, you know, of all the talks I've given in all the different stages, the one that makes me most nervous are our faculty meetings. And now we've expanded the platform since we are using Zoom. In order to reach more individuals, we now expand it to include our faculty, our administrative staff, our residents, and our fellows. And so, it's a meeting of about 130-plus individuals. That's just the most recent. But, you know, if I'm being honest, I bet a week doesn't go by that something happens that it doesn't at least make me take pause. And, you know, we have a hallway that leads to the chairs area and it's a glass door. And I think every time I walk down that hallway, I have this surreal moment of thinking, you know, I was just a resident, which seems like yesterday, and I'm going through this door. It's just...I don't know, it makes you take pause and think, "Wow, it's really happened."

[00:21:52.130]

Geoff: It's great to hang on to that perspective, no doubt. I'm curious the extent to which, you know, you describe experiencing these feelings that you describe as imposter syndrome on a fairly regular basis, have you found a way to harness those feelings and that experience in a positive way?

[00:22:11.923]

Dr. Canon: Well, I think imposter syndrome is good. I mean, it demonstrates a level of humility. If we get to a point that we truly think we are a successful, confident, never-failing leader, I think that's a problem. I think leadership, in general, is about making very difficult decisions and following through with those. We always have fear. It's just a matter of managing that fear and not letting it manage us. I would be afraid of the leader who doesn't have fear.

[00:22:44.683]

Geoff: So well stated. And I think that the emphasis that you placed on not letting the fear overtake you, on harnessing it, but to the extent that there's butterflies, that you feel a little bit of unease, it almost creates a heightened

sense of attention and attentiveness. I couldn't agree with you more. As your department chair, Bob Stanley appointed you chief of GI Radiology within a couple of years post-residency. And, you know, I imagine, you know, Bob being there, Bob Kohler that is, he wouldn't be the chief of GI Radiology. Can you talk a little bit about how Bob Stanley came to identify you for that role?

[00:23:20.816]

Dr. Canon: Well, again, although I don't know the behind the scenes conversations, I suspect Bob Koehler was the sponsor of that, and the one who stepped aside to allow me to step into that role. I don't remember exactly how that transpired but I am quite sure that it happened at his hand and his sponsorship to Bob Stanley. And I don't remember the details. I know, at that time, the abdominal section had slowly started developing subsections, if you will, ultrasound, CT, MR, GI, and suspect this was one of the ones that had cleaved off a little bit earlier. But, you know, it's funny, you're asking me some of these questions. You know, I feel like I was a resident yesterday, but some of these questions made me feel like it was hundreds of years ago.

[00:24:09.887]

Geoff: Yeah. Well, you know, it's just really interesting to be able to consider these formative years and how we got set on our path. And, you know, I think one of the themes that I hear from you, as well as the sort of trusting your gut so effectively, is also the role of sponsorship in your career. I mean, you've on several occasions really indicated how folks didn't just, sort of, make suggestions to you, but really kind of stepped up to provide you with opportunity.

[00:24:37.658]

Dr. Canon: Yeah, I was so fortunate. And there have been so many sponsors, both men and women, who have really pulled me through the door, put me at the table, and I remember a very clear conversation with Bob Kohler. I remember him sitting at the desk. He was the program director and asking me, "Where do you wanna be in five years?" And I told him, I said, "I wanna be sitting where you are. I wanna be the program director." I think some individuals would have been threatened by that. And just the opposite. He paved the way and made sure that it happened.

[00:25:12.148]

Geoff: Yeah. Well, kudos for you for articulating it and not just thinking it.

[00:25:15.387]

Dr. Canon: Well, we had a very trusting relationship. I trusted him implicitly. So, saying something like that to him was very natural.

[00:25:23.545]

Geoff: Yeah, amazing. And so, that came to fruition. You became the residency program director, vice chair for education. It wasn't even that long thereafter. And it was just another example of, sort of, him stepping to the side and saying, "Please, this is a great opportunity for you," or how did it come about?

[00:25:40.519]

Dr. Canon: Again, I don't remember the exact transition. But effectively, it was that, "It's a great opportunity and it's time for you to do this." And it was interesting, I had forgotten this, but at some point Bob, when the residency was growing, he had never had an assistant program director and decided he wanted to do that. And this was fairly early in my faculty position. And he put out a call for individuals interested in becoming the assistant program director. And I put my name in the hat. And I didn't get that position. And he carefully explained to me that it was just too early in my career for that. I needed more experience and that he was concerned it would derail me. It was too much responsibility too soon. And of course, at the time, I was mad as hell. But in hindsight, you know, he was truly looking out for me. And it motivated me to work even harder to make sure when the opportunity came up again, that it wouldn't be no again.

[00:26:39.244]

Geoff: Yeah, what characteristics do you believe make a good residency program director?

[00:26:43.759]

Dr. Canon: Well, let me preface it with, and I say this very publicly now to my faculty, I think residency program director may be the most difficult leadership position in an academic department. And I'm very serious about that. You know, you're put in a situation where you're responsible for trainees' education. And that in and of itself is challenging because of the rules and regulations with an accredited program. That is really a Herculean task. On top of it, you need to advocate for your residents, but frankly, you're not their buddy. You have to make sure that their paths are in the right direction. But then you're also a leader in the realm of the faculty. And so, many decisions that you make as a program director, you're having to balance between the residents and the faculty because often they are at odds with one another. So, I think in many respects, it's challenging. And so, because of that, I think emotional intelligence is absolutely key for that role. And you really have to get some thick skin and you have to have attention to detail. You have to have a boundless sense of optimism. And you must be willing to speak up for the residents, and even in the face of faculty members who, in some respects, may be your senior. So I think it's a really important leadership role and it's a tough one.

[00:28:08.762]

Geoff: Yeah, you mentioned the value of emotional intelligence, maybe you could speak directly to that. So just a quick explanation for those who may not be as familiar with the term as to what it means and how you see some examples of where it's so critical for a program director.

[00:28:27.478]

Dr. Canon: You know, emotional intelligence is an evolution of not just your behavior, but a way of thinking. So that, one, you know, what your triggers are, you know what sets you off. And that's kind of the entry level, if you will. Two is the ability to manage those triggers. And those two things are key. But then the next level is where we become truly the resident leader, which is you develop empathy. And emotional intelligence doesn't mean being nice. It's that you truly understand the perspective of another individual. And then finally, you know, if you reach the true pinnacle of emotional intelligence, you're able to lead not only in a resident manner, but you're able to move people to a vision. So it's kind of this stepwise progression. And I have many examples of what a lack of emotional intelligence looks like. And one of them was actually when I was a program director, and it's one of these events that still haunts me to this day.

[00:29:27.817]

I was, I believe, fairly early in my career as a program director, and had a conversation with our resident leaders. And it was concerning our first-year residents who despite our reminding them had failed to register for the physics part of the board exam. And this was back when the board exams were very different. You took the physics component first, and then the written, and then the oral. And as a program director, we reminded them, you know, "You need to register for this, you need to pay the fees." And I'm not sure what happened. The entire class failed to register for the physics part of the exam. And so, my chiefs approached me via email on behalf of the first-year residents asking if I would use my role in the ABR and my influence to perhaps have the late fee waived for these individuals because there was a pretty steep late fee.

[00:30:23.484]

And so, while I don't think the philosophy behind my answer is completely wrong, I think the execution lacked a little bit. I responded in an email, which is never a good thing. And it was a pretty nasty email saying, remembering it, and some paraphrasing, you know, that basically, no, that I would not petition the board on their behalf, that it was not my responsibility to do so. In fact, was

their responsibility. And my job was not to hold their hands to help them through this process. And it went on and on. It was not one of my finer moments. I didn't really think much about it until I received an interesting anonymous email. And to this day, I don't know who sent it to me. It was an address that since disappeared, and said, you know, I may wanna check out AuntMinnie. Well, honestly, I didn't even really know what AuntMinnie was at that time. It was still in the early phases. And so I actually had to go on and register for AuntMinnie, and went on there to the resident forum, and was horrified to see this email that I had written on for public display. Horrified, right?

[00:31:30.712]

And you just feel like, you know, a part of your underbelly has been just splayed open. And then more horrifying were all the responses and comments to my email. And you know, you can still go on AuntMinnie today and search under my name and still find it there. Periodically, I go and look just to remind myself of prior transgressions. And there were some really awful things that were said about me, some horrible language. I just felt like it was the biggest gut punch. And of course, the first person I went to, in tears I think, was Bob Kohler. And he walked me through it, but he definitely took it as a teaching opportunity, pointing out that, you know, you could have handled this differently. Because when I went to him, of course, I wanted him to pat me on the back and say, "Oh, it's okay. They're wrong." But he didn't. He said, "You know, how could you have done this differently?" And so, it was a real aha moment for me.

[00:32:28.080]

Geoff: There's nothing like public embarrassment to help to create a teachable event and laid bare that was really quite the vignette. I'm sure you learned a lot from it. Do you believe that you are well-suited to the role of residency program director?

[00:32:43.548]

Dr. Canon: I had a significant amount of on the job learning. Like many leadership positions, I learned a lot of hard lessons on the way. And so, I think one of my abilities is to learn areas where I fell short, and there were many. I worked as hard as I could to shore those up. I enjoy helping people. I enjoy operations. And those two things are such an important part of residency training. I also enjoy attention to detail. So some of the mind-boggling rules and processes for accreditation that scare off many people, I take comfort in those. So, I probably did have the right skill set, but I had to learn a lot of it as I, kind of, rolled along.

[00:33:31.744]

Geoff: Yeah, well, it sounds like you had the right skill set and you also really developed as a leader during those times and the points that you raise that, you know, leadership is a journey. It's not a destination. We're constantly learning and being able to step back and reflect on those learning opportunities is so important to our development as leaders. It wasn't very long after, it seems, you became residency program director that you then became department chair at UAB. How old were you when you assumed the role of department chair if you don't mind my ask?

[00:34:02.822]

Dr. Canon: I don't know. Let me do the math quickly here. I was 41 years old.

[00:34:09.034]

Geoff: I thought it was somewhere in that range. And that is definitely on the young side and, you know, a tremendous testament to the person that you were at that time and the person that you are today and such. And I just wanna ask, did you feel ready at 41 years of age to take on the leadership of a major academic department?

[00:34:30.475]

Dr. Canon: I don't know if one ever feels ready for a role such as being a chair. It's such a huge responsibility. So no, I absolutely didn't feel ready. However, there were a couple of really formative years in between being the program director and chair. And I served as the vice chair of operations. And initially informally in that role with Bob Kohler as my chair, my second chair, and then Reggie Munden became chair at UAB. And when he came in, he formally put me in this operations role. And again, a wonderful sponsor. And I learned so much from Reggie and really learned how to lead in the operational realm. And with his support, really gained confidence in that arena. And also, with his support on the health system level was really able to build my network of colleagues well beyond the department. I believe that's what gave me the courage to say yes to the position. In the interim position, I really owe Reggie for that because when he left UAB...and we all hated to see him leave because he was a wonderful chair. When he left, he told our hospital leadership that he felt like that I should be put in, he actually said chair position. And so, they followed his advice and put me in as the interim chair.

[00:35:56.224]

Geoff: You know, rising to the role of chair as an internal candidate, particularly one who began their tenure at the UAB as a resident is not very common, particularly for a woman of the age of 43. What attributes did you

possess at that time you feel that distinguished you from other internal and external candidates that you were clearly the choice?

[00:36:21.029]

Dr. Canon: Oh, that's a tough question. I learn a lot from watching other individuals and watching leaders lead, and seeing how they conduct themselves. And I try to take the best parts of individuals and, unfortunately, learn from those who are publicly failing. And I think this is how it allowed me to really, kind of, increase my rates, if you will, of on the job learning. I think in great part, success is also about passion. And if you are in a role that aligns with your passions, that gives you boundless energy, and strength, and courage to move forward. And I love UAB. And being a chair in a department in which I grew up with individuals who were truly my family just was, frankly, the most empowering thing of all.

[00:37:16.226]

Geoff: Yeah, clearly, you love your job.

[00:37:19.760]

Dr. Canon: I love my job. Now, not every day, but most days.

[00:37:22.920]

Geoff: Excellent. Serving in an interim role can be particularly tough. You must have really excelled during that year. Do you remember anything in particular that you were able to accomplish as an interim chair?

[00:37:34.788]

Dr. Canon: I went into it with a very determined mindset of trying to forget that I was interim. I decided that I was going to conduct myself as if I were the permanent chair and not be afraid to make decisions and move forward. And there were many initiatives that Reggie started before his departure, and I wanted to make sure that those were carried to fruition. And one of the, frankly, scariest things was as part of Reggie's chair package was a huge cyclotron project, which involved the project around placement of the largest cyclotron in an academic institution in the United States, an entire program around that, an advanced imaging facility with PET CT, PET MRI. And all of this was in planning progress but hadn't really started upon his departure. So, I inherited this legacy. And I still do refer to the cyclotron as the beast. And it was a pretty quick learning curve. There was nothing in that project that was included in medical school or college. And so, that first year was really wading through this incredibly complex project. It was tough. It was a really good lesson for me as you absolutely have to have the right leaders in place with the right skill sets, the right attitude, and then let them lead.

[00:39:05.369]

Geoff: No doubt. Now, you essentially took over from a chair that was in place for a very long time. I mean, you mentioned that Reggie was there in the role relatively briefly, but Bob Stanley had been shared for quite a while. I'm interested in what the key issues that you felt you needed to prioritize upon assuming the role and in particular, issues that might have been really sort of fundamentally ingrained in the culture that you just felt maybe were out of step with the times and needed attention.

[00:39:37.964]

Dr. Canon: It's interesting, when I first became interim, I had all three prior chairs still working in the department, which fortunately was positive because all three were very careful to not meddle. And in fact, I had to really engage them actively to get their input. So, that was a positive experience to have that historical wisdom available immediately. So that piece, I was very fortunate. I will tell you, and at the time, I didn't realize, but the biggest evolution that we needed to have was the transition of our leadership structure. We had been with Bob Stanley's leadership in what I call the traditional academic leadership model, for lack of a better description, the benevolent dictator. The department has a chair that oversees the entire department. And we had grown in not only size and complexity but really had a leadership structure that didn't serve that well.

[00:40:42.207]

And so much of my first several years was creating this leadership structure that was incredibly matrixed, but also had individuals in very specific roles with accountability and pulling together, if you will, a cabinet to support me. And it was a very intentional act on my part because I realized that was a deficiency and that if I didn't have this leadership team around me that I would fail, and that's probably something I am most proud of. Our leadership team is remarkable. On a daily basis, I am struck by the things that they do, how they work together as a team. And I guess it was first apparent to me that I needed this cabinet because Reggie had really started down a path to a vision of an incredibly strong research program. UAB has historically been recognized for its clinical care in radiology and it's teaching, but research was the relatively weak third leg of that stool. And so, Reggie really moved us down the road, and particularly with the cyclotron project, but really across the entire department. And so, I realized, one, the importance of that vision and that I wanted to keep that vision, but two, because of my lack of experience in some of these areas, I really needed to surround myself with leaders who could provide me with that expertise and that leadership support.

[00:42:14.389]

Geoff: Yeah, kudos, that is a great focus. And thank you so much for articulating that and the importance of the team. I mean, clearly, it has been very empowering for you. I wanna turn our attention to your advocacy on behalf of leadership opportunities for women, particularly as chairs of academic radiology departments. While there has been a number of prominent women in leadership roles prior to you, including as chairs, to my mind, your dedication to this effort has been second to none. Tell us about the evolution of your interest and why you think that the opportunity was largely untapped.

[00:42:50.609]

Dr. Canon: Yeah, it's interesting, as you ask me these questions, I really have to reflect and think about it because most of these things at the time, it wasn't like I thought, okay, we're going to move in this direction. I see things that I feel like I can help make things better, have an impact, and just kind of charge forward. And I suspect this was true around just gender diversity in general. You know, we have all attended so many plenary sessions, read so many papers, discussions, panels around the diversity challenges in radiology. And despite all of our efforts, we really haven't moved the needle. And so, I really started thinking about this. And historically, we talked about it being a pipeline problem that there were fewer women going into medical school, therefore fewer women going into radiology. But you know what, that pipeline was fixed. Now, we have more women than men in medical school.

[00:43:48.582]

So I really started focusing on the other side, and that is we need more women in leadership positions for so many reasons. One, so women can see themselves and want to come into our profession. Why would someone want to enter into a profession where they didn't see anyone that looked like them? So I think women in leadership is incredibly important from that perspective. But also, it's been proven that companies that have women leaders have significantly less issues with bias, either implicit bias or overt bias, and sexual harassment, and we still have a sexual harassment problem in medicine. There's ample literature to support that. And there's also literature to support that if you don't have diversity at the top, you're not going to address this problem.

[00:44:41.821]

So, I guess all of those things kind of came together for me. And I remember my first year as an interim chair, and how often physician recruiting firms would reach out to me with job opportunities, typically chair positions in

radiology, and ask me specifically, not for my interest, some of them did, but they really wanted me to perhaps suggest other women who were candidates. And my reflexive response, I remember thinking this, well, why would I have a list of the women who could become chairs in radiology? I mean, just because I'm a woman doesn't mean I have that list. And then, you know, at some point later, it was an aha, it was like, well, yeah, I should have that list. And, you know, I should be able to, at any moment, sponsor remarkable women for roles. And it was interesting, there were so many women leaders out there that I was unaware of until I really started getting into this role in diversity. And it's remarkable the number of women leaders in radiology and we're now seeing them step up to chair positions. And I will tell you over the last few years, the numbers have significantly increased. And so, I am hopeful that in the next few years, we can have 50% of all radiology chairs as women.

[00:45:56.447]

Geoff: What a fantastic accomplishment that will be. I think you'll be in a position to take substantial credit for that, whether you accept it or not. I wanna unpack a little bit more about your efforts. It seems that the last 10 years, you've really been hitting your stride in the area of leadership training and advocacy and I want to discuss your role in three initiatives. The ACR's Radiology Leadership Institute, for which both you and I were founding board members, LEAD, and Momentum. So, let's take each of these in turn and start with the RLI. What drew you to this initiative during its founding stages to contribute your energy and what were your aspirations for the RLI as you initially dug in?

[00:46:39.474]

Dr. Canon: As program director, I realized there were significant deficiencies in our resident curricula, particularly around leadership management, business, etc. And then, as I moved through the leadership ranks, I realized that so much of what I was doing was on the job learning, which is a natural part of leadership, but it shouldn't be the entirety of it. You need to have foundational knowledge that we just didn't have. And so, I saw the RLI as an opportunity to really create this bedrock of leadership for our trainees. And then for those already in practice, perhaps as a catch-up, or to help them as they prepare for their next leadership opportunities. At the time, to be quite honest, at that point, I wasn't thinking of gender diversity. I was just thinking about a significant curricular gap in our medical training.

[00:47:38.562]

Geoff: Did you believe that the RLI is delivered on those aspirations?

[00:47:42.362]

Dr. Canon: I do, and particularly with our early-career radiologists. They are hungry for this content. And I'm so pleased when I see them joining the different RLI activities. It just ignites them. And so, I think we have more work to do. But yes, I think it's made a remarkable impact.

[00:48:04.101]

Geoff: Yeah. Very rewarding. Let's turn to LEAD. What is LEAD and how was it born?

[00:48:09.362]

Dr. Canon: Love talking about LEAD. I remember intentionally a few years ago deciding okay, for my last phase of my career, what do I wanna do? What is gonna be my legacy? And LEAD is it. And it was born out of a very simple conversation between me and Rachel Gilbreath, a leader in GE Healthcare, and we were actually at the RLI Annual Summit, and we were commiserating the lack of women leaders in our organization. And the more we spoke, we realized how similar the situations were. GE Healthcare entry workforce is mostly women. And medical school now is at least 50/50 women. Yet, as you move through the ranks, section chairs, chairs, deans, and as you move through GE Healthcare up to the C-suite, the number of women was just not there.

[00:49:04.426]

And so, we just started brainstorming around, how can we change this? It had clearly been a conversation for years. But again, neither radiology nor has GE moved the needle. And with this conversation, we really started speaking around very tactical actions we can take. And then we started realizing the power of having a relationship between industry development and academic development. And it was born out of that. And that was a conversation, I believe, August-September timeline, and we launched the program that next spring. It was definitely building the airplane that was still in flight. I don't even think we had wings and we were flying.

[00:49:48.670]

Geoff: Well, what did it look like? Tell us a little bit about, you know, the structure and what you built, and how it has evolved.

[00:49:54.277]

Dr. Canon: So, there were certain components that we felt strongly about, and much of it was actually patterned after the executive development program that I've been a part of, here in Birmingham, the Momentum organization that you mentioned. And it's really based upon, number one, the concept of sponsorship.

We wanted chairs of radiology departments to identify women who could rise to be a chair within the next three to five years, the equivalent of that on the GE side. So we wanted to actually make as an exercise for our chairs the activity of sponsorship. So that was one.

[00:50:31.244]

Two, we wanted to bring the women together in a cohort. So, 10 women from academia and radiology and 10 from GE Healthcare industry, put these 20 women together for periodic development. Some of this was in-person development, very fundamental skill development, finance, accounting, change management, communication, emotional intelligence, some of it distance learning. One of the great things with having a partnership with GE is their vast repertoire of leadership development. GE has done this for a very long time but hadn't really gone out into the realm of specifically development of their women. So we had that expertise to tap into. And we also tried to do creative things. We did emotional intelligence activities. We had a scavenger hunt to develop team-building.

[00:51:27.385]

And, you know, it was interesting, there were several things we were surprised by. One, how the women interacted and how they realized, although coming from somewhat different careers, they all had very similar challenges. But there were also things that were very different. And as one concrete example, I think industry does a really good job in evaluation, their evaluation process for promotion and career advancement is very objective and structured. I think in academia, we struggle with this sometimes. Sometimes that feedback is not always well received. And so it was an opportunity for our academic women to see how it's done in the industry. And I think that was a very educational opportunity.

[00:52:14.586]

The other important part is mentorship. And so, each woman is assigned to mentors, one chair of radiology and another GE Healthcare leader. And it was remarkable, these leaders were so willing of giving of their time for an entire year to mentor these women, and many of them continue these relationships now. COVID did, like everything, kind of require a pivot. So we did a virtual pivot. And we also took off for this year now. We've completed two cohorts, and now have a class of 40 alumni, and we will hopefully, in the spring, put out a call for application for our third year of applicants.

[00:52:58.271]

Geoff: I have little doubt that your mailbox will be busting and your door will be broken down with the folks wanting to participate. It's really superb, really terrific. Congratulations. You mentioned Momentum. And, you know, my understanding of Momentum is that this is a leadership development program for women that transcends industry and professional discipline. What is your scope of involvement within that organization?

[00:53:23.950]

Dr. Canon: Yeah, Momentum was started about 18 years ago by Barbara Royal. And it's interesting, Barbara is the wife of Stuart Royal, a very well-recognized pediatric radiologist who had been the chief of radiology at our children's hospital for years and years. And so his wife started this program to develop women executives. And this program, much like the LEAD program, selects typically 25 executive women each year from the Birmingham area who are sponsored by their companies. And it's across all fields, we have banking, law firms, healthcare is actually one of the smaller components, insurance companies, you name it, but it's all the large companies in Birmingham. And it's really limited to truly the C-suite equivalent women, and it's a year-long cohort, and I was in the 5th class, we're now on class 18, I believe. And I just recently stepped down as president of our board. And so, I'm very involved. Like LEAD, it's something that I feel incredibly passionate about. And in fact, just over a year ago, we launched a new program for early-career women, because that's also a gap. Although training our executives is key, we also need to give some attention to our early-career women. So we're in the process of launching our third class for that.

[00:54:48.899]

Geoff: Fantastic. I'm curious, what have you learned from working with women leaders and professions outside of medicine that maybe inform your own leadership or your approach to leadership training within medicine?

[00:54:59.767]

Dr. Canon: I think anytime you can learn another's perspective, again, developing that emotional intelligence, empathy, I think the larger your repertoire of perspective, the better leader you can be. I think that's infinite. You know, one of the people in my small groups was an executive at Blue Cross Blue Shield, right? And so, this is a company that sometimes I curse because, you know, we're fighting battles with reimbursement. Yet, I worked with this woman for a year and she's spectacular. So, it gives you that ability to see that other perspective and realize, you know, they're just people, right? We may have different jobs, but we are just people at the end of the day. And so, not only did I learn from this group of women, it's now given me a network

that's unbelievable. We now have over 500 alumni. And there's really not an area in Birmingham that I can't pick up the phone and identify someone in Momentum if I need some help.

[00:55:57.272]

Geoff: It sounds very empowering.

[00:55:59.643]

Dr. Canon: It is.

[00:56:00.187]

Geoff: Among so many leadership contributions to our field, you are currently serving as the president of SCARD, Society for Chairman of Academic Radiology Departments. And despite having featured three of the past four SCARD presidents on prior episodes of this podcast, I really haven't had a chance to dive into discussions of the organization. So, I'd like to take a moment to do it with you. What is the scope of SCARD's work and why is it important?

[00:56:29.027]

Dr. Canon: I think, like everything, SCARD is evolving. SCARD is the Society of Chairs and Academic Radiology Departments. It serves in several purposes. It's always been a gathering of chairs to network, to work through challenges because we all are facing similar challenges, and we meet twice a year. But in particular, our fall meeting is an opportunity to really see not just powerful talks, but an opportunity for us to really be vulnerable and stand up and share not only our successes but our failures in hopes that others can learn from our failures and help us solve our problems. SCARD's role, I believe, is getting a little more formal and more outward focused, perhaps is a good description. For example, last year, we actually put out a public statement supporting 12 weeks of paid parental leave. We had typically not done something like that. And I think that that was an important step forward. Now, does that mean we all have 12 weeks of paid leave in our organizations? No, we have a huge battle. But at least that gives us a starting point for conversations with our deans and our CEOs. And I think more statements like that coming forward are very important.

[00:57:52.149]

The role of SCARD reflects the role of chairs, which is we are responsible for all of the academic missions. So we have our clinical areas, we have research, and we have education. And so we are often pulled into conversations around all three areas and different chairs bring different expertise to the table. And so

when we come together, we're able to tap into that. I will say what I personally see as the greatest benefit is the ability to pick up the phone, text or call, in a moment's notice to ask for help and advice. The other piece that SCARD provides, which is perhaps more tangible, is SCARD's sister organization, AAARAD, which is the Association of Academic Administrators and Radiology Departments has created a remarkable body of data year over year and its data around salary and productivity. And it has become such a robust data set that most academic institutions recognize this as valid data. And as many of us enter into different funds flow models, I am seeing that most academic healthcare systems are allowing, if you will, this data to be used for benchmarking and that's incredibly important. And it speaks to a wonderful relationship that we have with our AAARAD colleagues, and we really value that partnership. And this data has really empowered so many of us as we have these conversations with our deans and CEOs.

[00:59:32.199]

Geoff: Absolutely. You mentioned the ability for the chairs to be vulnerable with one another and to share their failures so that they could learn from one another. I suspect that there's perhaps some folks that are listening that might be surprised to hear that that is the way leaders interact at the level of being academic chairs. And I think it's really critically important to indicate that, you know, along the theme of leadership is a journey and constantly learning, you know, SCARD is a marvelous forum for continuous learning in the area of leadership.

[01:00:07.602]

Dr. Canon: Well, you know, leadership has evolved, and I would say that hasn't always been true at SCARD. I was fortunate to attend SCARD some years prior to becoming chair, again, with sponsorship from Bob Kohler. And it was a very different environment at that time. And I wouldn't say there was a lot of exposure of underbellies if you will. I think people are now becoming more comfortable and realizing the value of sharing failure. And, you know, I'm gonna go out on a limb here and say I think part of this is driven by having more women chairs, and I think it pushes us to really think of leading in a completely holistic manner.

[01:00:49.344]

Geoff: Terrific, although the men have just as much failure to share as the women.

[01:00:55.405]

Dr. Canon: Yeah, but sometimes I don't see them as being as comfortable perhaps. Now, I say this cautiously because I think stereotypes never serve us any good but I think bringing more women in does change the dynamic.

[01:01:09.263]

Geoff: Absolutely. And I think it's a marvelous insight. It really is. And I mean if having more women chairs at SCARD means that the men are better able to be vulnerable and to share the information or the experiences that they may not have felt comfortable sharing before, then what a marvelous benefit, what a marvelous gift. What do you see as the top issues for SCARD today? You know, what do you see facing the academic radiology chair community?

[01:01:44.200]

Dr. Canon: There are several things. I had mentioned funds flow, I think funds flow in its broad definition is always a challenge and how we are able to grow our departments, particularly around research and education, and manage with also the clinical mission. So, how dollars move through the organization is always a challenge. Particularly in the current environment, you know, as we have on the near horizon with the proposed E&M changes and the impact on radiology, that's just one example. But it seems like every year, there's some flavor of this that we are grappling with.

[01:02:27.085]

And then that leads us to our second really biggest challenge is we want to invest in research. And we all realize the importance of that for our patients. But, you know, funding research, it is an expensive business. You know, for about every dollar of external funding we receive, it costs about 50 cents. And so, we have to find the dollars to pay for this research and it's usually out of the clinical margin, which clinical margins continue to shrink. And then, of course, external funding is always a challenge. So, those are always topics of conversation, how we manage the clinical productivity of our faculty in the proverbial hamster wheel, and yet also expect them to engage in these other missions. And also with the overlay of increasing burnouts. That's a discussion at every conversation for chairs.

[01:03:27.034]

And then added to the mix is the outreach that we're seeing, the community outreach, whether it's mergers, acquisitions, affiliations, taking on private radiology practices and trying to pull them into the academic culture, how do we manage through that these expansion of healthcare systems? You know, many of chairs have shared of stories that literally private practice groups are

launched into their lap with maybe a 30-day notice. And so I see those as really the big, hairy challenges that we are grappling with right now.

[01:04:05.874]

Geoff: Those are some big ones, no doubt. Cheri, how do you unwind? Do you have any hobbies or activities that you pursue outside of work that energize you?

[01:04:14.918]

Dr. Canon: You know, I don't know if they would be classified as hobbies, but my absolute favorite place in the world is the beach. We really make an effort to try to get there most weekends. And if I can sit in the sun on the beach, I am happy. Or if I can sit on my porch swing at the beach, I am happy. I really enjoy that. And with COVID, we've branched out a little bit and started camping. And that's been an interesting adventure. And that's been a lot of fun as well. I really don't have a lot of hobbies, per se. I periodically will pick up something, like right now, I'm kind of into crocheting. I'm not particularly good, but it's relaxing. And I'm not a great cook, but it's fun when Malcolm and I cook together and it's not cooking for family sustenance, it's cooking for fun. You know the concept of, you know, "Hey, Mom, what's for dinner tonight?" after you've been at work all day, I don't enjoy that conversation. It's more that, "Hey, let's cook dinner on Saturday night," and it becomes an activity in and of itself.

[01:05:19.893]

Geoff: Yeah, it's good to know you've got that happy place at the beach. It sounds like you've got a really well-rounded life going out camping. Fantastic. You mentioned the word mom. And we haven't talked at all about your life as a mother, raising a family. Can you talk a little bit about your family life? And how do you assure that you're able to commit time to nurturing the relationships with your family amongst all that you're doing?

[01:05:43.898]

Dr. Canon: If I'm being honest, and my friends have heard me say this, and I really believe it, parenting is not a strength for me. I try. I am not going to win any gold medals in parenting. I'm not even gonna be a close finalist. We have two children, Olivia and Evan. Olivia is about to be 20 and a college student at Boulder and Evan, 18, is our challenge. He has had a lifetime of seizures and neurosurgeries and disability that has been a real challenge for us, in many respects has probably robbed Olivia of some of her childhood. So, you know, it's interesting, it's hard to be a full-time career and balance that with home.

[01:06:30.206]

And I will tell you the only reason, the only reason that I've been able to do it is because of Malcolm. Malcolm is an emergency medicine physician. And really when my kids were babies, probably the first, I don't know, five, six, seven years of their lives, Malcolm's job was incredibly overwhelming for lack of a better term. He commuted an hour each way to a hospital and a large, large emergency department. And for much of those years, he would work anywhere from 25 to 28 twelve-hour shifts a month. I stayed at home, kept the kids, and was really the main parent, and still worked full time. But that really flipped in the next half of their childhood and I started getting more active at work, having to travel and rising up into leadership positions. And Malcolm actually now has two urgent care clinics, and he has truly become the primary caregiver of our kids, and this is incredibly important with Evan. And so, I couldn't have done this without Malcolm. I mean, he is truly my bedrock. And it is such a partnership. And it's interesting when I reflect back on it, it wasn't that we choreographed it in this way. It just worked out, in great part, because he realized that he was gonna have to help me, I think, and he's so selfless about that and really stepped in and became, you know, Mr. Mom.

[01:07:58.171]

Geoff: Clearly takes two to have a team and the challenges that you, you know, described with your kids, with Evan, would put a lot of pressure on any parent. And so you should give yourself some credit. Sounds like you've been an amazing mom, and that you and Malcolm together have been an amazing mom and dad. Thank you for, you know, being so open and sharing that part of your life with us. What advice would you offer to a young radiologist who's inspired by your journey and would like to pursue leadership?

[01:08:29.828]

Dr. Canon: You know, so much of leadership is experience. And when I have individuals that approach me with that goal, you know, there are several practical things for them to do to build their leadership skill set. And I think that's very important. And we referred back to RLI as being an opportunity for that, and I think that is important. But I also warn them not to get too much in a hurry. An important part of leadership is the journey and cataloging experiences and learning from those, and you can't fast track that. And so, you have to be patient, seek out leadership opportunities, stretch yourself, say yes sometimes when you're scared and you're not sure that you can do it, say yes, and find a cadre of mentors and sponsors to help you succeed. Again, my biggest piece of advice is don't try to rush through it, it comes in time. And if you rush through it, you just will not have that experiential skill set and it will be incredibly frustrating.

[01:09:37.396]

Geoff: Phenomenal. Thank you. Thank you for sharing those thoughts and advice. Cheri, and I can't tell you what a pleasure it has been to spend this time with you and have this conversation. You have meant so much for the empowerment of so many people coming up into leadership and radiology, not just women, but many men who learn from your example. And I'm really happy that you're being recognized with the awards that you're receiving for the contributions that you've made. It's spectacular what you have brought to our field. And I want to thank you kindly for sharing this time with us on "Taking the Lead."

[01:10:18.587]

Dr. Canon: Well, Geoff, I really appreciate the opportunity. Having this opportunity to do a little bit of soul searching has been somewhat therapeutic for me, so I really appreciate that.

[01:10:28.769]

Geoff: Please join me next month when I speak with Giles Boland, president of the Brigham and Women's Physician Organization in Boston, Massachusetts, and the Philip H. Hook professor of radiology at Harvard Medical School. As President of the Brigham exposition organization, Dr. Boland directs the strategic work of the organization and guides key operational activities including finance, ambulatory operations, business and network development, information technology infrastructure, decision support, quality and compliance, as well as wellbeing and professionalism efforts. A former chair of radiology at the Brigham and vice chair for business development, and founding member and principal of the radiology Consulting Group at the Massachusetts General Hospital, Dr. Bolan has been a pioneer in driving cost-effective patient care through practice and workflow redesign, quality improvement, outcome enhancing information technologies, patient employee wellness, new market development, and systems integration.

[01:11:35.940]

If you've enjoyed this podcast, I invite you to do three easy things. First, subscribe to this series so you need never miss an episode. Second, share the link so your peers can listen too. And third, like or rate every episode so more people will do discover it. "Taking the Lead" is a production of the Radiology Leadership Institute and the American College of Radiology. Special thanks go to Ann Marie Pascoe, senior director of the RLI and co-producer of this podcast. To Port City Films for production support. Linda Sowers, Meghan Swope, and Debbie Kakol for our marketing and social media. Bryan Russell, Jen Pendo, and Crystal McIntosh for technical and web support, and Shane

Yoder for our theme music. Finally, thank you, our audience, for listening and for your interest in radiology leadership. I'm your host, Geoff Rubin from the University of Arizona College of Medicine in Tucson. We welcome your feedback, questions, and ideas for future conversations. You can reach me on Twitter @Geoffrubin or using the #RLITakingTheLead. Alternatively, send us an email at rli@acr.org. I look forward to you joining me next time on "Taking the Lead."

[01:12:53.103]

[music]

[01:13:16.600]