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University of California San Francisco

CURRICULUM VITAE

Name: Christopher J. Koenig

Position: Health Science Specialist
Department of Medicine
San Francisco Veterans Administration Medical Center (SFVAMC)

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EDUCATION

1994-1996	University of Texas, Austin	B.A.	Spanish & Portuguese
1996-1998	University of Texas, Austin	M.A.	Foreign Language Education
1998-2001	University of Texas, Austin	M.A.	Communication Studies
2001-2008	University of California, Los Angeles	Ph.D.	Applied Linguistics

Dissertation: **The interactional dynamics of treatment counseling in primary care**
Committee: John Heritage (Co-chair), John Schumann (Co-chair), Charles Goodwin, Steve Clayman, Emanuel Schegloff

PRINCIPAL POSITIONS HELD

2012-current Health Science Specialist, San Francisco Veterans Affairs Medical Center
2008-2010 Postdoctoral fellow in Health Policy Research, Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco & Palo Alto Medical Foundation Research Institute (PAMFRI), Palo Alto, CA

ANCILLARY and CONCURRENT POSITIONS

2001-2004 Research assistant/video ethnographer, Professor John Heritage, Department of Sociology, University of California, Los Angeles, Los Angeles, CA
2004 Video ethnographer, Continuing Medical Education for Colorectal Cancer Screening
2004-2005 Video archivist, Professor Rita Mangione-Smith, Department of Pediatrics, David Geffen School of Medicine, University of California, Los Angeles, Los Angeles, CA
2005 Audio & video archivist, Professor Emanuel Schegloff, Department of Sociology, University of California, Los Angeles, Los Angeles, CA
2010-2012 Staff Research Associate III, Qualitative data collection, Qualitative data management, Qualitative data analyst, Northern California Institute for Research and Education (NCIRE)
2011-2012 Analyst III, Qualitative data collection, Qualitative data management, Qualitative data

- analyst, University of California, San Francisco (UCSF)
 2007-current Adjunct professor, Department of Communication Studies, San Francisco State University, San Francisco
 2012-current Evaluation consultant, Evaluation & Analytics, Office of Academic Affiliations, Department of Veteran Affairs, San Francisco, CA

HONORS and AWARDS

- 2000 Travel Scholarship, Department of Communication Studies, UT Austin
 2002 Top Paper, Language and Social Interaction Interest Group, Western States Communication Association
 2003 Travel Scholarship, UC Los Angeles
 2004 Summer Research Mentorship, Office of the Dean, UC Los Angeles
 2006 Top Paper, Language and Social Interaction Division, National Communication Association
 2007 Top Paper, Language and Social Interaction Interest Group, Western States Communication Association
 2007 Dissertation Year Fellowship, Office of the Dean, UC Los Angeles
 2008 Top Paper, Ethno/CA Interest Group, American Sociological Association, Boston, MA

PROFESSIONAL ACTIVITIES

MEMBERSHIPS IN PROFESSIONAL ORGANIZATIONS

- 2000-2012, National Communication Association
 2002-present, Western States Communication Association
 2008-present, American Academy of Communication in Healthcare
 2012-present, American Anthropological Association

SERVICE TO PROFESSIONAL ORGANIZATIONS

Elected positions

- | | | |
|-----------|--|------------------------------|
| 2004-2005 | Western States Communication Association | Interest Group Secretary |
| 2005-2006 | Western States Communication Association | Interest Group Vice-chair |
| 2006-2007 | Western States Communication Association | Interest Group Chair |
| 2007-2010 | National Communication Association | Division Information Officer |

Referee

American Journal of Managed Care, Health Communication, Patient Education & Counseling, Journal of General Internal Medicine, Journal of Pragmatics, Journal of Asian Pacific Communication, Journal of Integrated Social Sciences, Social Science & Medicine

INVITED PAPERS, LECTURES & PRESENTATIONS

INTERNATIONAL

- 2000 “*Ah* in Spanish as a Change-of-State Token.” *International Communication Association*, Acapulco, Mexico (oral)
 2002 “the truth about architecture: An ethnographic performance.” *First Congress of the*

International Society for Gesture Studies, Austin, TX (oral)

2004, “Question initiated oblique sequences”, Institute for the Social Study of Society, Roskilde, Denmark (oral)

2008, “Recipient interventions into multi-unit turns,” *International Working Group on Language Socialization*, Kyoto, Japan (oral)

2009 “Patient displays of understanding in primary care encounters for new medical problems,” *2nd International Meeting on Conversation Analysis & Clinical Encounters*, Plymouth, UK (oral)

2009 “Diagnosis and treatment recommendation sequences as clinical narratives.” *International Conference on Communication in Healthcare*, Miami Beach, FL (oral)

2011 “A Culture-Centered Approach to dietary health meanings for Asian Indians living in the US.” *International Conference on Communication and Healthcare*, Chicago, IL (poster)

2011 “Patient-centered communication as dialectic in routine diabetes visits: A multi-methodic approach.” *International Conference on Communication and Healthcare*, Chicago, IL (oral)

2011 **Koenig CJ**, Sabee CM, Wingard L, Vandergriff I, & Olsher D. Clinical and social functions of assessments in type II diabetes visits.” *International Communication Association*, Boston, MA (virtual)

2011 **Koenig CJ**, Cohen G, Daley A, Maguen S, Seal KH. “Clinicians’ perspectives on integrating mental health within primary care: A qualitative study.” *International Society for the Study of Traumatic Stress*, Baltimore, MD (oral)

2013 **Koenig CJ** and Ho EY. “Gauging and responding to patient complementary and alternative medicine treatment preferences in acute primary care visits.” *International Communication Association*, London, England (oral)

NATIONAL

1999 “Conflict talk and the contested nature of reality: An empirical study.” *National Communication Association*, Chicago, IL (oral)

2001 “Voices from within/voices from without: A sketch of situated language practices in a medical clinic.” *National Communication Association*, Atlanta, GA (oral)

2001 “The collaboration of gesture and talk in a design activity.” *National Communication Association*, Atlanta, GA (oral)

2004 “Gesture, vision, and the environment: An ecological study in interactional multi-modality.” *National Communication Association*, Chicago, IL (oral)

2006 “Architect’s puppets: Imaginary people in architectural work.” *National Communication Association*, San Antonio, TX (oral)

- 2006 “Question initiated oblique sequences.” *National Communication Association*, San Antonio, TX (oral)—TOP PAPER
- 2007 “Giving instructions about treatment in acute primary care,” *National Communication Association*, Chicago, IL (oral)
- 2008 “(Re)Formulating prescription medication in acute primary care,” *American Sociological Association*, Boston, MA (oral)—TOP PAPER
- 2008 “Gauging patient understanding of instructions given for newly prescribed medication.” *American Academy for Communication in Healthcare*, Madison, WI (oral)
- 2008 “Multimodal Instruction Giving for New Medication in Acute Primary Care.” *National Communication Association*, San Diego, CA (oral)
- 2008 “Interactional dynamics of proposing and responding to treatment.” *National Communication Association*, San Diego, CA (oral)
- 2009 Pallegadda R, **Koenig CJ**, Kandula NR, Shin J, Palaniappan L. “Health across the life course: A qualitative study of routine care use in South Asians.” *American Public Health Association*, Philadelphia, PA (poster)
- 2009 “Gauging patient knowledge of newly prescribed medication in acute primary care” *National Communication Association*, Chicago, IL (oral)
- 2009 “Direct Observational Approaches to the Analysis of Focus Group Interview Data” *National Communication Association*, Chicago, IL (oral)
- 2009 “Virtual Data Sessions: Using Second Life to Grow Our LSI Community” *National Communication Association*, Chicago, IL (oral)
- 2010 “Negotiating patient agency in treatment recommendations with adults in primary care visits.” *National Communication Association’s* annual meeting, November, San Francisco, CA (oral)
- 2011 “Contrasting the voice of medicine with the voice of the lifeworld: Blood sugar solicitations in routine diabetes visits.” *National Communication Association’s* annual meeting, November, New Orleans, LA (oral)
- 2012 Barton JL, **Koenig CJ**, Trupin L, Evans-Young G, Imboden J, Schillinger D, Yelin E. “Patient preferences and values associated with therapeutic options for rheumatoid arthritis: A qualitative study of patients and provider stakeholders across three languages.” *American College of Rheumatology* annual meeting, Denver, CO (poster)
- 2012 Barton JL, **Koenig CJ**, Trupin L, Evans-Young G, Imboden J, Schillinger D, Yelin E. International Conference on Communication in Healthcare (ICCH), St. Andrews, Scotland (poster)

2012 Wingard, LM, **Koenig CJ**, Sabee, C, Vandergriff, I & Olsher, D. “Being interactionally sensitive: Practices for counseling patients with type II Diabetes” 2nd LANSI Meeting at Teachers College, Columbia University, New York, NY (oral)

2012 Sabee CM, **Koenig CJ**, Wingard LM, Foster J, Chivers N, Vandergriff I & Olsher D. “Measuring Interactional Sensitivity in the Chronic Medical Visit.” *American Association of Communication and Healthcare Forum*, Providence, RI (oral)

2012 **Koenig CJ**, Cohen G, Daley A, Maguen S, Seal KH. “Outpatient handoff communication decision-making among multidisciplinary provider teams in two VA outpatient clinics” *American Academy of Communication in Healthcare Forum*, Providence, RI (oral)

2012 **Koenig CJ**, Sabee CM, Wingard LM, Vandergriff I, Olsher D. “Interactional Sensitivity as a resource for managing temporality while negotiating treatment outcomes for type 2 diabetes.” *American Anthropological Association* annual meeting, San Francisco, CA (oral)

2012 Wingard LM, **Koenig CJ**, Sabee CM, Vandergriff I, Olsher D. “Verbal assessments as the bellwether for treatment recommendation in patient-centered diabetes visits.” *American Anthropological Association* annual meeting, San Francisco, CA (oral)

2013 Monroy JD, **Koenig CJ**, Seal KH. “Compassion fatigue, burnout, and self-care among multidisciplinary providers at two VA clinics.” *Anxiety and Depression Association of America*, La Jolla, CA. (poster)

2013 Koenig CJ, Monroy JD, Maguen S, Seal KH. “Workplace burnout and self-care among multidisciplinary providers at two VA clinics.” *Society of General Internal Medicine*, Denver, CO. (poster)

REGIONAL and OTHER INVITED PRESENTATIONS

2002 “Performative embodiment.” *Western States Communication Association*, Long Beach, CA (oral)—TOP PAPER

2003 “Responsive derailing: A practice recipients use to interrupt tellings, informings, and other multi-unit turns.” *Western States Communication Association*, Salt Lake City, UT (oral)

2004 “‘Oblique intersection’ as ordinary and institutional practice.” *Western States Communication Association*, Albuquerque, NM (oral)

2007 “Embodying treatment by demonstrating effects and giving instructions.” *Western States Communication Association*, Seattle, WA (oral)—TOP PAPER

2009 “Gauging patient understanding to medication instructions.” EPI 240, *Qualitative Research Methods*, Department of Epidemiology & Biostatistics, University of California at San Francisco.

2010 “Using Atlas.ti and Transana for qualitative research” SOLDASI, San Francisco State University, San Francisco, CA

2011 “Recording communication between providers and patients in a community setting.” *Western States Communication Association*, San Diego, CA (oral)

2010-2013 “Collecting & analyzing audiovisual data” EPI 240, *Qualitative Research Methods*, Department of Epidemiology & Biostatistics, University of California, San Francisco, CA

2012 “Teaching discourse with ethnographic fieldnotes” *Western States Communication Association*, Albuquerque, NM (oral)

2012 Wingard LM & **Koenig CJ**. “Interactional Sensitivity: Practices for Counseling Patients with Type II Diabetes”. Language and Social Interaction (LANSI) Working Group, New York, NY (oral)

RESEARCH AND CREATIVE ACTIVITIES

RESEARCH AWARDS AND GRANTS

CURRENT

1. San Francisco State University Intramural Grant (Sabee & Koenig)

07/2011-06/2013

2.4 Calendar

Office of Research & Sponsored Programs \$15,000 direct/yrs 1-2

Patient-centered communication between physicians and patients with chronic illness

The objective of this grant is to extend and refine previous mixed-methods research investigating how physicians and patients negotiate patient-centered communication during routine Type II diabetes visits. In this project, we will collect longitudinal, video and ethnographic data across multiple visits with patients who have one or more chronic illness to investigate patient-centered communication as a relational process.

Role: Co-Principal Investigator

2. R18 HS019209-01 (Barton & Yelin)

08/2010-08/2013

0.4 Calendar

AHRQ

\$891,136 direct /yrs 1-3

Medication Summary Guides for Vulnerable Populations with Rheumatoid Arthritis

The objective of this study is to identify key treatment preferences and needs with vulnerable populations (low health literacy, low English proficiency) who have Rheumatoid Arthritis and to create a new information guide to help navigate treatment choices and preferences.

Role: Consultant

3. NIH R01 CA152195 (Dohan)

07/2010 – 05/2015

4.8 Calendar

National Cancer Institute

\$556,250/yrs 1-5

Before Consent: Cancer Patients' Deliberations about Early Phase Clinical Trials

The objective of this grant is to ethnographically explore how cancer patients make decisions about participating in early phase trials of new cancer therapies using a mixed methods research design.

Role: Staff Qualitative Analyst

4. W-81-XWH-05-2-0095 (Seal)

11/2011 – 10/2013

2.4 Calendar

Department of Defense

\$249,682

Enhancing Cognitive Function and Reintegration in Iraq and Afghanistan Veterans with PTSD

The objective of this study is to compare change in cognitive function in Iraq and Afghanistan Veterans with PTSD who participate in a pilot randomized controlled trial of cognitive remediation.

Role: Staff Qualitative Analyst

5. RRP-11-434 (Seal) 10/2012-10/2013 4.8 Calendar
 Department of Veterans Affairs/HSR&D QUERI \$100,000/1 yr

A video educational intervention to improve outcomes of VA TBI screening

The objective of this study is to develop, test and implement TBI educational videos for Iraq and Afghanistan veterans after they are screened for TBI VA primary care clinics to mitigate misconceptions about traumatic brain injury and to promote appropriate use for health care services.

Role: Co-Investigator

6. SDP 12-550 (Rongey) 7/2013-6/2016 6.0 Calendar
 Department of Veterans Affairs/HSR&D QUERI \$592,000/1-3 yr

Leveraging HIT to improve specialty care access and coordination in HCV

The objective of this project is to evaluate SCAN-ECHO implementation for HCV across multiple sites in the VA. In phase 1, this project will use video recordings of specialist-generalist SCAN-ECHO sessions to understand how multi-disciplinary providers communicate and coordinate care for HCV patients in order to provide recommendations to grow the SCAN-ECHO program throughout the VA.

Role: Co-Investigator

7. TBD (Seal) 10/2013-9/2016 4.8 Calendar
 Department of Veterans Affairs/HSR&D CREATE

An effectiveness implementation intervention to encourage rural veteran mental health engagement

The objective of this project is to develop and test a motivational interviewing (MI) intervention to facilitate an evidence-based and culturally-appropriate method of engaging rural veterans in mental health care

8. TBD (Pyne) 10/2013-9/2016 6.0 Calendar
 Department of Veterans Affairs/HSR&D CREATE

Development and Validation of a Perceived Access Inventory

The objective of this project is to devise and test a patient-centered perceived access to mental health services inventory, which will include access to e-health services pioneered by VA.

COMPLETED

1. Dissertation Year Fellowship 9/2007-08/2008 12 Calendar
 University of California Office of the Dean \$18,000 direct/yr 1

The interactional dynamics of treatment counseling in primary care

The objective of this grant was to fund original dissertation research about treatment counseling between patients and physicians in primary care practice.

Role: Principal Investigator

2. San Francisco State University Intramural Grant 07/2010-07/2011 2.4 Calendar
 Office of Research & Sponsored Programs \$8,500 direct/yr 1

Patient-centered communication between physicians and patients with Type II Diabetes

The objective of this qualitative to quantitative mixed-methods study was to investigate qualitatively how physicians and patients negotiate patient-centered communication during routine Type II diabetes visits and to develop a quantitative instrument to measure patient-centered communication.

Role: Co-Principal Investigator

Role: Co-Principal Investigator Christina Sabee (SFSU)

3. PT-073238 (Seal) 07/2008-12/2010 2.4 Calendar
Department of Defense

Integrating Mental Health and Primary Care Services for OEF/OIF Combat Veterans with PTSD and Co-Morbid Disorders: Assessing the Evidence

The objective of this study was to evaluate whether co-located, integrated primary care, mental health and social services improves mental health services utilization and delivery for OEF/OIF veterans, with a particular focus on service provision for vulnerable sub-groups of OEF/OIF veterans, such as women and ethnic minorities.

Role: Staff Qualitative Researcher

4. W81XWH-08-2-0106 (Seal) 07/2008-12/2011 2.4 Calendar
Department of Defense

Does Integrating Primary Care and Mental Health Services Improve Mental Health Services Utilization, Symptoms and Functioning among OEF/OIF Veterans?

The objective of this study was a controlled evaluation of a new one-stop primary care, mental health and social services clinic for OEF/OIF veterans known as the “OEF/OIF Integrated Care Clinic” at the San Francisco VA Medical Center (SFVAMC).

Role: Staff Qualitative Researcher

PUBLICATIONS

PEER REVIEWED ARTICLES

1. **Koenig, CJ**. 2002. Gesture and embodiment: A performance ethnographic perspective. Papers from the First Congress of the International Society for Gesture Studies.
2. Ho, EY, **Koenig, CJ**, Wingard, L, Bansavich, JC. 2009. Learning LSI means doing LSI: Reflections on technology use in two Language and Social Interaction courses, *Electronic Journal of Communication*, 19 (1 & 2).
3. **Koenig, CJ**. 2011. Negotiating patient agency in treatment recommendations with adults in primary care visits, *Social Science and Medicine*, 72: 1105-1114.
4. Khanna, R, Karliner, LS, Eck, M, Vittinghoff, E, **Koenig, CJ**, and Fang, MC. 2011. Performance of an online translation tool when applied to patient educational material, *Journal of Hospital Medicine*, 6 (9): 519-525
5. **Koenig, CJ**, Dutta, MJ, Kandula, N, Palaniappan, P. 2012. “All of those things we don’t eat.”: A Culture-Centered Approach to dietary health meanings for Asian Indians living in the United States. *Health Communication*, 27(8): 818-828
6. **Koenig, CJ**, Ho, EY, Yaedgar, V, Tarn, DM. 2012. Negotiating complementary and alternative medicine treatments with older adults in primary care. *Patient Education & Counseling*, 89(3): 368-73
7. **Koenig, CJ**, Maguen, S, Daly, A, Cohen, G, Seal, K. 2013. Passing the baton: A Grounded Practical Theory of outpatient handoff communication between multidisciplinary providers in two department of Veteran Affairs outpatient settings. *Journal of General Internal Medicine*. 28(1): 41-50
8. Pallegadda RR, Wang EJ, Gupta PK, Palaniappan LP, **Koenig CJ**. Under review. Culture and health in Asian Indians: Understanding the role of culture in health care utilization among Asian Indians living in the United States. *Qualitative Health Research*.

9. Dohan D, Abramson CM, Miller S, Bondi M, **Koenig CJ**. Under review. Visual arrays of qualitative data: An analytical approach with potential utility for Health Services Researchers. *Health Services Research*.

OTHER PUBLICATIONS

1. Koenig, CJ. 2001. Book review: Talk, work and institutional order: Discourse in medical, mediation, and management settings, *Issues in Applied Linguistics*, 12(2): 205-208.
2. Koenig, CJ. 2002. A basic tutorial using QuickTime Pro for research purposes, Conversation Analysis Advanced Studies Institute.
3. Ho EY & **Koenig CJ**. Forthcoming. Provider-patient communication about Complementary and Alternative Medicine. In Hamilton, HE & Chou WS (eds.). *Handbook of Language and Health Communication*, Mahwah, NJ: Routledge.
4. **Koenig, CJ** & Robinson JD. Forthcoming. Conversation analysis. In Whaley BB (ed), *Research Methods in Health Communication: Principles and Application*. Mahwah, NJ: Routledge.
5. Koenig, CJ. 2012. Qualitative Data Management Standards. Office of Academic Affiliations, Office of Evaluation & Analytics, Department of Veterans Affairs.

OTHER CREATIVE ACTIVITIES

Koenig, CJ. Composed & managed Language and Social Interaction Division web page (<http://www.nca-lsi.org/>) for the National Communication Association, 2007-2010.

RESEARCH SUMMARY

My research program focuses on the social dimensions of health and illness and emphasizes the mediating role of communication on the social, organizational, and cultural context of providing health care. My long term goals are to advance scientific understanding of how language shapes communication in healthcare as well to discover practical strategies to improve the delivery of healthcare by addressing communication as a key factor. The major goal of my current research program is to investigate how communication can help promote an efficient, effective provider-patient relationship and can help encourage active patient participation in their own health care that supports a strong provider-patient therapeutic alliance and patient agency, a patient's ability to make choices in her or his own interests. Research in primary care has shown that good communication between physician and patient positively influences patient satisfaction, reduces likelihood of malpractice litigation, and increases adherence to recommended treatment. Patient adherence and successful disease management are intimately connected with the communication processes that occur during and after the medical visit. My research mostly focuses on healthcare delivery in primary care environments, but some current projects also address primary care-mental health integration, complementary and alternative medicine, and minority communities in the US.

Although I have expertise in a wide-range of qualitative research methods, including participant observation, focus groups, and in-depth interviewing, I specialize in the analysis of audio and video recordings to study the interactional dynamics between participants in real-time communicative encounters ethnographically. While these methods are relatively rare in academic medicine, social science researchers have used audiovisual methods for decades to explore the communication dynamics at work inside medical visits influence patient satisfaction, malpractice litigation, and even adherence. Health care

can benefit from insights from the analysis of audio-visual recordings because they help document actual communication set in real time to understand how language and communication work in the provision of healthcare. Analytically, I use discourse analysis, a multifaceted qualitative research methodology that focuses on the role language plays in shaping the social, organizational, and interpersonal facets of health care delivery and reception. Insights from discourse analysis can be an effective tool not only for developing and for evaluating health services interventions, but also it can provide insight into the process of providing healthcare in diverse settings. I also use mixed-methods research approaches to integrate audio-visual recordings with survey and interview data to help understand multiple aspects of the illness and therapeutic experience.

My published work has begun to contribute to several substantive areas where language and communication influence the social, cultural, and organizational facets of healthcare. I have several articles that employ audio and video recordings to document communication processes within primary care settings. A paper in *Social Science and Medicine* shows how patient hesitation after a physician's treatment recommendation can be a powerful resource to actively participate in the visit and affirm treatment preferences and concerns. Papers in *Patient Education and Counseling* and the *Handbook of Language and Health Communication* document how providers and patients mention and respond to complementary and alternative medicine treatment. These papers show that despite differential knowledge about CAM treatments, physicians helped patients assess the risks and benefits of CAM treatments and made recommendations based on patient preferences for treatment.

Another aspect of my research has employed focus groups and interviews to show how cultural and organizational processes depend on language for effective communication. An article in *Health Communication* employs focus groups with Asian Indians living in the US to show that one aspect of culture, the discourses around routine dietary choice, is an important, but under-recognized, aspect of culture through which community members manage unique Asian Indian identities and create meanings of health and illness. An article in the *Journal of General Internal Medicine* uses semi-structured interviews with primary care, mental health, and social work providers to develop an original practical model of outpatient handoff communication in outpatient integrated primary care-mental health settings. This article shows that while health care providers are expert at day-to-day clinical work, they are unaware of how underlying communication values contribute to coordinating patient care.

One critique of biomedical research is that most studies are atheoretical. Social theory is important in biomedical research because helps to provide generalizability across studies and grounds specific findings within larger research traditions and ideas. All my articles incorporate social theory to analyze data and to define practical problems for diverse social science and biomedical audiences. For example, the article published in *Social Science and Medicine* used the theoretical notion of "patient agency" to show that hesitation immediately after a treatment recommendation may indicate unarticulated treatment preferences or concerns. In the article published by the *Journal of General Internal Medicine*, I used Grounded Practical Theory, an innovative meta-theoretical framework, to analyze providers' descriptions of outpatient handoffs to help outpatient providers working in multidisciplinary teams better understand and reflect on the values underlying their routine communication practices.

The newest project of my current research agenda investigates interactional sensitivity between patients and providers managing chronic illness, including diabetes and rheumatoid arthritis. In collaboration with Dr. Christina Sabee, Dr. Leah Wingard, our research group obtained intramural pilot study funding for this project from San Francisco State University. This study prospectively documents the relationship and communication dynamics of patients and providers collaboratively managing one or more chronic illness. This project employs multiple and mixed methods, including surveys, interviews, and especially audio and video recording, to learn about how patients and providers navigate symptoms, treatment options, and decisions in the management of chronic illness over time. We will draw on UC San Francisco clinical teams, including Rheumatology, Cardiology, and Internal Medicine, as well as community-based physician practices, to conduct a longitudinal cohort of patient-provider teams.

My research portfolio also includes collaboration with investigators who examine the knowledge and treatment preferences for individuals with Rheumatoid Arthritis (via an R18 from AHRQ), the cancer illness and treatment experience (via an R01 from the NCI), and video recording SCAN-ECHO sessions between specialists and generalists to understand the communication and coordination of care around for managing veterans with Hepatitis C (via an SDP from the VA HIV/HCV QUERI).

The next steps in my research program include collecting original data using multiple methods in a mixed-methods design in which provider-patient teams are audiovisually recorded longitudinally over a 9-month period to document the therapeutic relationship and communication, extending my publication record, and contributing to new publications as a co-investigator on others' projects.

SIGNIFICANT PUBLICATIONS

1. **Koenig, CJ**. 2011. Negotiating patient agency in treatment recommendations with adults in primary care visits, *Social Science and Medicine*, 72: 1105-1114

I am the sole author for this publication. Theoretically, this article uses Conversation Analysis to show the micro-interactional basis of agency. Methodologically, I managed 150 videorecorded interactions, the majority of which I collected. Analytically, I used Conversation Analysis, a field dedicated to the studying the interactive dimensions of communication as a process, to analyze the data.

2. **Koenig CJ**, Dutta MJ, Kandula N, Palaniappan LP. 2012. "All those things we don't eat.": Dietary health meanings of Asian Indians living in the United States. *Health Communication*, 27(8): 818-828

I am the first author on this article. Theoretically, I framed this paper using a critical communication theoretical framework, the Culture-Centered Approach. Methodologically, I managed a small sample of video recorded focus group data set using Atlas.ti, a software packaged to manage qualitative data. Analytically, I focused the analysis using participants' perceptions of how their voices were discursively marginalized in a health care setting. I wrote the manuscript and utilized co-authors as consultants and content-level experts.

3. **Koenig CJ**, Ho EY, Yaedgar V, Tarn DM. 2012. Negotiating complementary and alternative medicine treatments with older adults in primary care. *Patient Education & Counseling*, 89(3): 368-373

I am the first author on this paper. Theoretically, I framed the paper as Discourse Analysis, a cutting-edge sociolinguistic and sociocultural qualitative methodology. Methodologically, I managed 257 audio-recorded visits using Atlas.ti, a software packaged to manage qualitative data. Dr. Ho and I coded the data corpus together and, through discussion, I assembled the collections and suggested the main analysis. I wrote all the analysis, though the first extract was informed by Dr. Ho. While throughout manuscript development Dr. Ho and I collaborated on the all aspects of the article, I took primary responsibility for shaping the manuscript for publication.

4. **Koenig, CJ**, Maguen, S, Daly, A, Cohen, G, Seal, K. 2013. Passing the baton: A Grounded Practical Theory of outpatient handoff communication between multidisciplinary providers in two department of Veteran Affairs outpatient settings. *Journal of General Internal Medicine*. 28(1): 41-50

I am the first author on this paper. Theoretically, I framed this paper using Grounded Practical Theory, an innovative meta-theoretical framework from communication whose goal is to produce theories that have practical relevance to practitioners. Methodologically, Dr Seal helped write original interview instruments. I conducted interviews with 31 multidisciplinary providers, managed the recordings and transcripts with Atlas.ti software. Analytically, I focused the analysis on a significant clinical moment, the handoff between multidisciplinary providers and veteran patients. Collaborating with Drs. Maguen & Seal as clinicians, I wrote the analysis to reflect the social significance while they provided clinical expertise to frame the manuscript.

5. Pallegadda RR, Wang EJ, Gupta PK, Palaniappan LP, **Koenig CJ**. Under review. Culture and health in Asian Indians: Understanding the role of culture in health care utilization among Asian Indians living in the United States. *Qualitative Health Research*.

I am the senior author. I helped the first author, Dr. Rani Pallegadda, collect audio interview data while she was a second year medical student and during her fourth year helped direct her in the completion of

the manuscript which was submitted to the international journal, *Ethnicity & Health*. Under my guidance, Dr. Pallegadda used the Constructionist Grounded Theory theoretical framework to develop an analysis of how Asian Indians utilize both urgent and routine primary care. Methodologically, I managed the data and developed the coding scheme. Analytically, I guided development of the component parts, while Dr. Pallegadda used her experience as a community member to shape the specific analysis. Together, we developed the results and contributed equally to the written report.