

Srikanth Davuluri, MD



Specialty

Pulmonary, Critical Care, Neuro-critical care and Sleep Medicine

Professional Experience

- Vista Medical Center, Waukegan, IL
Attending Pulmonary, Critical Care, neurocritical care and Sleep Medicine.
07/01/ 2014 to present.
- Advocate Condell Medical Center, Libertyville, IL
07/01/2015 to present.
- Riverside Medical Center, Kankakee Il.
Attending Pulmonary, Critical Care, neurocritical care and Sleep Medicine.
06/ 2011 to 06/30/2014.
- Presence St. Mary's Hospital, Kankakee Il.
Attending - Pulmonary Critical Care and Sleep Medicine.
06/2011 to 06/30/2014.

Administrative Experience

Medical Director for Sleep Medicine Department.

07/01/2017 to present

- Vista Medical Center, Waukegan, IL

Medical Director for ICU.

07/01/2012 to 06/30/2014

- Riverside Medical Center, Kankakee, IL

Teaching Experience

- Rosalind Franklin University of Medicine and sciences
(Assistant Professor Department of Medicine)
 - Pulmonary medicine fellowship Program
 - Teaching Attending Pulmonary, Critical Care and Sleep Medicine.
 - Involved in training pulmonary fellows during pulmonary and ICU rotations.
- Riverside Medical Center
 - Internal Medicine Residency Program (AOA Program).
 - Teaching Attending Pulmonary, Critical Care and Sleep Medicine.
 - Involved in training IM residents in pulmonary and ICU rotations.
 - Also involved in teaching medical students from Midwestern University.

Education

CRITICAL CARE MEDICINE

07/01/2009 to 06/30/2010

ST. JOHNS MERCY MEDICAL CENTER/ST. LOUIS UNIV.

SLEEP MEDICINE

07/01/2010 to 07/26/2011

HENRY FORD MEDICAL CENTRE

PULMONARY MEDICINE

07/01/2007 – 06/30/2009

CHICAGO MEDICAL SCHOOL/ ROSALIND FRANKLIN UNIVERSITY of Medicine and sciences.

3333 Green Bay Road, North Chicago, IL 60064

INTERNAL MEDICINE

06/26/2004 to 06/30/2007

UNIVERSITY OF CHICAGO HOSPITAL/LOUIS A. WEISS MEMORIAL HOSPITAL

INTERNSHIP

05/01/2001 to 12/01/2002

VICTORIA HOSPITAL, RAJIV GANDHI UNIVERSITY, INDIA

MEDICAL SCHOOL

12/01/1996 to 05/01/2001

BANGALORE MEDICAL COLLEGE, INDIA

Examinations / Certification

- ABIM – Critical Care Med Board Certified, Certification Year: 2013, Validity: Dec 2023
- UCNS – Neurocritical Care Med Board Certified, Certification Year: 2013, Validity: Dec 2024
- ABIM – Pulmonary Board Certified, Certification Year: 2009, Validity: Dec 2029
- ABIM – Internal Medicine Certified, Certification Year: 2007, Validity: Dec 2027

Research Experience

1. HENRY FORD SLEEP DISORDERS & RESEARCH CENTER

Principal Investigator

Identification of Natural Short Sleepers using Bout Length Data Obtained from Polysomnography (IRB Approved Study) June 2010 to July 2011

Traditionally, “natural short sleepers” are defined by reported habitual sleep time. By this approach short sleepers cannot be differentiated from chronic sleep restricted individuals. In this research study, we used the bout length data obtained on a 8.5 hour polysomnogram and we further prove this as an objective way of identifying natural short sleepers. A bout length is the duration of consecutive 30 second epochs spent in either sleep or wake. From a population-based sample (N=618) 86 randomly selected subjects were evaluated with sleep diary, sleep-wake symptoms, 8.5 hour PSG and MSLT. From PSG data, 4 phenotypes were created based on a median split of sleep (19.38 min) and wake (2.18 min) bout lengths. The Short Sleep /Long Wake (SS/LW) group would characterize short sleepers and the Long Sleep/Short Wake (LS/SW) group would characterize sleep restricted individuals. We compared these two groups in terms of traditional sleep measures, MSLT and sleep related symptoms. The PSG sleep efficiency for the SS/LW group was 70% (SD±12) and for the LS/SW was 96% (SD±2.5, p=0.00). The ESS for SS/LW was 7.3(SD±3) and LS/SW was 9.7(SD±4.9)(p>.10) and the MSLT for the SS/LW group was 14.3 min (SD±3.84) and LS/SW group was 9.8 min(SD±4.87) (p=0.00). Despite this diary data showed similar reported total sleep time (7.0 hours) and nap time in both groups. The frequency of insomnia symptoms did not differ between the groups (p>0.1). These results confirm our hypothesis of identifying natural short sleepers by using the bout length data.

2. CHICAGO MEDICAL SCHOOL / ROSALIND FRANKLIN UNIVERSITY OF MEDICINE AND SCIENCES/NORTH CHICAGO VA MEDICAL CENTER

Principal Investigator; July 2007 to June 2009

“Sleep disorders in mild TBI soldiers returning from Iraqi war, OEF/OIF” IRB and NCVA Approved in Dec 2007

It is established from the recently published studies that there is an increased incidence of sleep disorders among patients suffering from Traumatic Brain Injury (TBI). However this is recognized in Moderate and Severe TBI victims, but this is not studied in mild TBI. We therefore conducted this study in evaluating sleep disorders among mild TBI victims as they add significant morbidity to TBI victims and have an effect on the rehabilitation and delay the recovery process. This study is a cross sectional controlled study, and we have recruited subjects from North Chicago VA TBI Clinic from 12/10/2007 to 10/15/2008. 45 subjects were recruited out of which 25 were controls and 20 were mTBI cases. Both the groups were given sleep Disordered Questionnaire (SDQ), which is validated instrument for identifying four sleep disorder, sleep apnea (SA), narcolepsy (NAR), psychiatric sleep disorders (PSY) and periodic limb movement disorder (PLM). The SDQ is a 175 item questionnaire and based on the total scores obtained on the diagnostic specific questions will categorize patients into above mentioned 4 groups. 23 patients have completed study, of these 12 were from mTBI and 11 from control group respectively. We have found an increase in the prevalence of psychiatric related sleep disorders among mTBI group compared with control group ($p < 0.06$). There was no difference among the prevalence of SA, NAR, PLMD among both the groups.

Journal Publications/Abstracts/Oral Presentations/Poster Sessions

1. CASE REPORT

Chest 2016 - Diagnosis “Hunted” Down

Y. Yerramalla, G Sivasubramanian, Srikanth Davuluri, L Srinivasan

Rosalind Franklin University, North Chicago, IL

Huntavirus Pulmonary Syndrome (HPS) is an extremely rare disease with very high mortality rate. We report one such interesting case

DOI: <https://doi.org/10.1016/j.chest.2016.08.151>

2. CASE REPORT

Chest – 2017: Daptomycin-Induced Severe ARDS: A

Therapeutic Nightmare V Ravi, S Davuluri, A Fulambarker, G Malhotra

Rosalind Franklin University of Medicine and Science, North Chicago, IL

DOI: <https://doi.org/10.1016/j.chest.2017.08.299>

3. CASE REPORT

CHEST 2008 ANNUAL MEETING ABSTRACT SUPPLEMENT

“Pulmonary metastasis of Low Grade Endometrial Stomal Sarcoma”

S. Davuluri, M.D., S. Sripathi, M.D., A. Fulambarker, M.D., FCCP

[HTTP://MEETING.CHESTJOURNAL.ORG/CGI/CONTENT/ABSTRACT/134/4/c27003](http://MEETING.CHESTJOURNAL.ORG/CGI/CONTENT/ABSTRACT/134/4/c27003)

4. RESEARCH ABSTRACT – POSTER PRESENTATION Jun 14, 2011

SLEEP 2011 25th ANNUAL MEETING - INT’L CONF – MINNEAPOLIS

“Identification of Natural Short Sleepers using Bout Length Data Obtained from Polysomnography” S. Davuluri, M.D., C. Drake Ph.D., T. Roth Ph.D.,

5. RESEARCH ABSTRACT – POSTER PRESENTATION

HENRY FORD MEDICAL CENTER RESIDENT RESEARCH FORUM, FEB 2011

“Identification of Natural Short Sleepers using Bout Length Data Obtained from Polysomnography” S. Davuluri, M.D., C. Drake Ph.D., T. Roth Ph.D.,

6. RESEARCH ABSTRACT – POSTER PRESENTATION

SLEEP 2009 23rd ANNUAL MEETING –

SEATTLE, Jun 09, 2009

“Sleep disorders in mild TBI soldiers returning from Iraqi war, OEF/OIF”

S. Davuluri, M.D., A. Fulambarker M.D., FCCP, Edwin Simon M.D.,

7. CASE REPORT – ORAL PRESENTATION

CHEST 2008 ANNUAL MEETING - Oct 28, 2008

ACCP INTERNATIONAL CONFERENCE – PHILADELPHIA

“Pulmonary metastasis of Low Grade Endometrial Stomal Sarcoma”

S. Davuluri, M.D., S. Sripathi, M.D., A. Fulambarker, M.D., FCCP

8. CASE REPORT – POSTER PRESENTATION

ACP NATIONAL MEETING - Nov 2005

“Amiodarone Induced Lung Toxicity”

S. Davuluri, M.D., N. Kanter M.D., FCCP, M. Bangayan, M.D., FCCP