



ATS Spotlight 2026: Pulmonary Rehabilitation Assembly Early Career Professionals

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Tell us about yourself.

I am a pulmonary and critical care physician with training in public health and behavioral health promotion. My clinical work spans outpatient care, inpatient services, and critical care, with a strong interest in leadership, education, and health system improvement in chronic respiratory disease.

Is your research clinical, basic science, or translational?

My research is primarily clinical and implementation focused, with an emphasis on developing and testing innovative care delivery models.

Tell us about your research.

My research explores new approaches to chronic respiratory disease care, including how emerging models of care delivery, patient engagement, and behavior change strategies can improve outcomes. This includes work related to pulmonary rehabilitation, as well as broader questions around scalability, access, and quality in respiratory care.

Where do you see yourself in 5 years?

I see myself in a leadership role influencing clinical programs, education, and innovation in chronic respiratory disease care. I aim to contribute to the conversations on care delivery and national policy while maintaining active involvement in patient care and teaching.

How has the Pulmonary Rehabilitation Assembly contributed to your career?

The Pulmonary Rehabilitation Assembly has provided mentorship, collaboration, and a multidisciplinary network that has shaped my approach to innovation and access in pulmonary rehabilitation.

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Title: Clinical review of non-invasive ventilation

Rationale: Non-invasive ventilation (NIV) is widely used in both acute and chronic respiratory failure. Its indications have expanded over time, but clinical use varies across diseases, care settings, and patient populations.

Methods: Narrative clinical review

Results: NIV reduces the need for intubation, complications, and mortality in selected patients with acute respiratory failure, particularly in COPD exacerbations and cardiogenic pulmonary edema. In chronic respiratory failure, long-term NIV improves gas exchange, symptoms, quality of life, and in selected populations, survival. Benefits depend on appropriate patient selection, timing, and mode of delivery.

Conclusions: NIV is an effective therapy when used in appropriate clinical settings. Ongoing advances in technology, home-based care, and telemonitoring support the expanding role in chronic respiratory disease management.

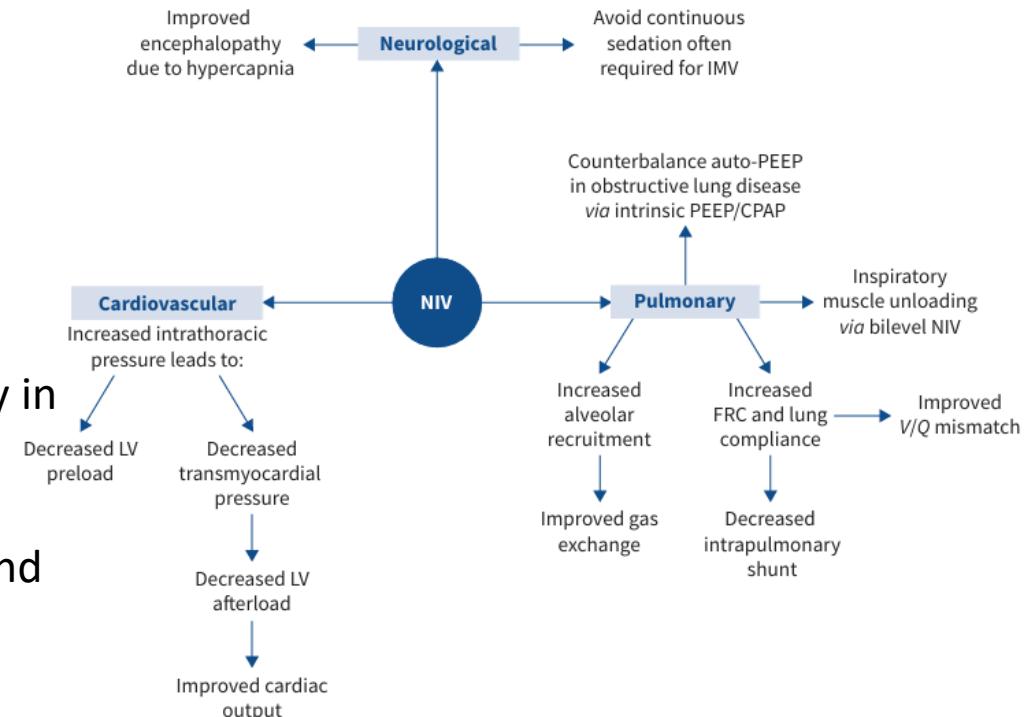


Fig. 1. Physiological benefits of NIV

Criner GJ, Gayen S, Zantah M, Dominguez Castillo E, Naranjo M, Lashari B, **Pourshahid S**, Gangemi A. Clinical review of non-invasive ventilation. European Respiratory Journal. 2024;64:2400396. doi:10.1183/13993003.00396-2024