

# Progress Notes

Published for the Medical Staff  
and Advanced Practice Clinicians  
of Lehigh Valley Health Network

## Inside This Issue:

<i>From the President</i>	1-2
<i>Medical Staff Dues</i>	2
<i>Recognizing the Impaired Health Care Professional</i>	3
<i>Safe Prescribing of Opioids</i>	4
<i>LVHN Marathon for Via — Road Closures</i>	4
<i>Thyroid Function Screen with Reflex</i>	5
<i>LVHN Digital Library</i>	5
<i>Physician Documentation</i>	6
<i>Attention: Osteopathic Physicians</i>	6
<i>2010 LVHN United Way Campaign</i>	6
<i>Advanced Practice Clinicians Update</i>	7
<i>Automatic Forwarding of Email</i>	8
<i>Congratulations</i>	9
<i>Papers, Publications and Presentations</i>	9
<i>News from CAPOE Central</i>	10-11
<i>Ethics Corner</i>	12
<i>Upcoming Seminars, Conferences and Meetings</i>	13-15
<i>Who's New</i>	16-19



## FROM THE PRESIDENT

### The Primary Care Physician Shortage



Approximately 50 million – The number of adults currently in America living without health insurance.

2013 – The year when all Americans will be required to have health coverage under the recently passed congressional health care plan.

2.5 – The number of years to build the supply of doctors, especially primary care physicians, necessary to care for the newly insured.

300 – The number of additional residency slots per year as prescribed in the congressional health care plan.

66,000 – the 2020 shortage of primary care physicians as projected by the Department of Health and Human Services. (7,000 in underserved urban and rural areas)

33 – Percent of active physicians in America expected to retire between now and 2020 (250,000 out of 750,000)

124,000 – the 2025 shortage of physicians in America as projected by the AAMC

These numbers paint a picture where patient demand will outpace the supply of physicians and the shortages are especially critical among primary care providers.

A study published in 2008 in the *New England Journal of Medicine* documented the average daily workload faced by our primary care physicians. In this study, an average physician conducted 18 patient visits a day. This is not an unmanageable patient workload, but the days were also filled with 24 telephone calls, 12 prescription refills, 17 emails to patients, 11 imaging reports to read, and 14 consultation reports to review. Each physician performed nearly 80 acts of data exchange and review each day.

A study published in 2009 in the *Annals of Internal Medicine* concerning primary care physicians reported high levels of unhappiness regarding time pressure and practice pace, little sense of control over work conditions, and deficient organizational culture.

*Continued on next page*

### Continued from Page 1

I spoke with our Chair of the Department of Family Medicine, Will Miller, MD, who recently attended a national meeting of family medicine chairs. At this meeting, they reviewed a national survey of medical students that asked for factors negatively influencing their choosing primary care. Some of the answers given were as follows:

- Medical students are afraid to go into primary care with the current and worsening shortage of physicians as they believe the amount of work that will be required of them will be unsustainable.
- Medical students' career choices were influenced by debt acquired from medical school training and the primary care salary was not sufficient to pay down their debt in a timely fashion.
- The medical students surveyed were concerned the family medicine lifestyle would not be conducive to their own family lives.
- Medical students who worked with and observed current primary care providers felt there was too much of an emphasis on seeing as many patients as possible to maintain a minimum level of income.

Medical students valued the teaching during their time in primary care offices but had serious reservations about primary care as a career. This was the same conclusion reached in a *JAMA* article published in 2008 concerning medical student career choices regarding outpatient primary care in Internal Medicine. With this as background, it is no surprise that the percentage of graduating seniors from U.S. medical schools who have chosen residency spots in family medicine has declined 53.7 percent from 2,340 to 1,083 since 1997.

So how do we fix the difficulties found in primary care utilizing the current primary care physician workforce? How do we entice more graduating medical students to enter primary care? Certainly, there is no one simple solution, but many experts think some of the answers can be found in a Patient Centered Medical Home model of health care delivery. The medical home approach surfaced in the 1990s and delivers service that is intended to be better coordinated, family-centered, and more accessible. Nurse practitioners and physician assistants play bigger roles in office visits and relieve physicians of time-consuming tasks so they can focus on the continuity of quality care. "Home" implies continuous, preventative care rather than seeing the doctor only for acute problems. LVPG has piloted this model with success and plans to continue the Patient Centered Medical Home model.

Food for thought . . . Have a nice month!



Matthew M. McCambridge, MD  
Medical Staff President

#### Sources:

- Andrews, M. *The New York Times*, "Doctor Shortage is Projected." September 26, 2009, Section A, p22.
- Silva, T. "The Other Health Care Crisis." August 2, 2010, *The Huffington Report*.
- Baron, RJ. *New England Journal of Medicine*, 2010; 362:1632-1636.
- Hauer KE, Durning SJ, Kernan WN, et al, *JAMA* 2008; 300:1154-1164
- *Annals of Internal Medicine* Editorial, p66, 2009.
- Lloyd, J. "Doctor Shortage: Primary Care Losing Its Prestige." *USA Today*, August 18, 2009, page 1.

## Medical Staff Dues

Annual Medical Staff dues invoices (dated September 1, 2010) have been distributed to members of the Medical Staff of Lehigh Valley Health Network. Timely remittance of dues is both **requested** and **appreciated**. If your practice includes more than one doctor, one check may be issued to cover all the doctors in the group – there is no need to issue individual checks. However, to insure proper credit, please enclose the remittance part of the invoice for each doctor in the return envelope along with the check.

If you have any questions regarding Medical Staff dues, please contact Janet M. Seifert in Medical Staff Services at 610-402-8590.



# RECOGNIZING THE IMPAIRED HEALTH CARE PROFESSIONAL

*by Carmine J. Pellosie, DO, MPH, MBA, Medical Director, Employee Health Services, and Carol Guanowsky, RN, BSN, COHN-S, Director, Employee Health Services*

You have been working with Dr. “X” for several years. You have worked well together throughout this time but have noted occasional tardiness, which at some times caused patient and staff complaints. Today, you notice an odor of alcohol during a conversation with Dr. “X.” What will you do?

If you are not really sure there is a problem, there are some “triggers” that can be helpful when considering impairment and reporting this colleague. In the case above, tardiness and alcohol on the breath are fairly clear indicators that the person needs to be referred, at least, for further evaluation and consideration of reporting to the state board. However, there are many “triggers” that should be considered when observing those with potential impairment. These include:

- Physical signs and/or symptoms of substance abuse including, but not limited to, red eyes, pupil size, alcohol on breath, lateness, disheveled appearance, tremors, flushing, coordination abnormalities or acute cognition abnormalities
- Newspaper DUI (or other) reports
- Unexpectedly poor decision making, changes in handwriting, or other changes in record keeping without explanation
- Not following directions, policies or protocols as expected
- Behaviors considered outside the “norm” (i.e., repeated tardiness despite counseling, inappropriate affect, meeting disruption or other odd behaviors).

Inappropriate behaviors, signs, or symptoms of impairment should be documented. If these signs or symptoms are noted by several personnel, documented statements should be obtained. Constellation of signs, worsening, and/or increasing frequency of the signs often indicates an addiction progression and warrants prompt attention and reporting.

The Medical Practice Act and the Osteopathic Medical Practice Act both state that “any person...who reports...in good faith and without malice shall be immune from any civil or criminal liability arising from such report.” Your concerns should first be discussed with the Department Chair, the Vice President of Medical Staff Services, or Employee Health Services. Medical Staff Services and Employee Health Services both serve as resources for assessment of the situation and evaluation of the practitioner, if warranted. If necessary, further evaluation and treatment is facilitated. The Network also has resources that assess whether or not a report must be made to the appropriate board. The report can then be made by a Network representative rather than an individual colleague.

What if you’re the physician with the problem? Enrollment in a medical board approved program can void activating license suspension or revocation. Seeking help for an addiction does not, in itself, prompt a report to the board nor does it necessarily affect your Medical Staff privileges. It is clearly better to address the problem before a report is made to the medical board and disciplinary action occurs.

The goal of action taken with a potentially impaired colleague is to provide opportunity for treatment before a patient is injured or the colleague puts his or her license at risk. Reporting a colleague or peer (or even yourself) is not an easy thing to do, but it is your obligation under the law, for the protection of patients, and for the greater good of the community.

Please remember -- **ALL contacts are confidential.** For assistance, please call Employee Health at 610-402-8869, or Medical Staff Services at 610-402-8980.





## SAFE PRESCRIBING OF OPIOIDS

Opioid prescribing for chronic non-cancer pain has been the center of debate for the past few years. Multiple guidelines have been established for

appropriate use, yet despite this guidance, there continues to be risks and medico-legal issues that arise. As practitioners, we need to protect ourselves and our patients. When developing the plan of care for your patient in pain, several factors need to be taken into consideration. First, you need to complete a thorough pain assessment in order to make a definitive diagnosis. Assessment includes the location, onset, description, and interventions that have been tried. While interviewing the patient, you will establish the severity of pain and the impact it has on the patient's function and quality of life.

The next step is determining the appropriate medication to prescribe. In considering opioids for your patient, you need to discuss the plan to include risks and benefits of the medication and obtain an opioid agreement which outlines the patient's responsibilities while being prescribed the medication. Setting realistic goals and measuring the outcome at each follow-up is important in determining the need and appropriate on-going use of the medication. Documentation at all points will help to validate the plan.

Prescription opioid medications are one of the most common groups of medications that are abused and misused by teenagers in the United States. The abuse of prescription medication has increased 400% over the past 10 years. In 2007, the National Survey on Drug Use and Health estimated that there were 5.2 million young adults (ages 12 or older) who were using pain relievers that were not prescribed.

To protect our patients, the following should be included in patient teaching and documented that the patient understands and takes responsibility for the medication:

- Keep medication locked or stored out of sight in your house.
- Do not share your medication with friends or family members.
- Use the medication only as prescribed. Do not alter the dose or take more than what is recommended.
- When you no longer need the medication (opioid), dispose of it by mixing the pills with hot water to make slurry, then add coffee grounds or dirt to the container. Place this in a small bag, tie the bag, and then place in your regular trash. **DO NOT** flush the medication down your toilet.

**September is Pain Awareness Month.** In an effort to educate patients and practitioners about the safe use of opioids, there will be several pain information tables set up within the Network throughout September. In addition, a Pain Management seminar is scheduled for September 21, from 4:30-8:30 p.m., in Kasych 6, 7 and 8. Brochures are available.

For more information or questions, please contact Maryjane Cerrone, MSN, RN-BC, Pain Education and Research, at 610-402-9003.

## LVHN MARATHON FOR VIA – ROAD CLOSURES



On Sunday, September 12, LVHN Marathon for Via will again start at LVH-Cedar Crest. Similar to last year, the starting line will be on the employee access road, off of Fish Hatchery Road, near the volleyball courts. To accommodate preparations and clean up of the race start, the employee access road, from Fish Hatchery Road to the Daycare Center, will be closed on Sunday, September 12 from 4 - 8 a.m. This means that parking lots P, Q, R and S will not be accessible from Fish Hatchery Road during this time. However, access to these parking lots will be accessible from the Daycare Center side of the Campus. Lot T will be closed for the day. Employees may still use the parking deck.

Fish Hatchery Road will be closed from Cedar Crest Blvd. to Pleasant Avenue from 6:50 - 7:05 a.m., and that part of Cedar Crest Blvd. will be closed from 6:55 - 7:05 a.m., to begin the race.

# THYROID FUNCTION SCREEN WITH REFLEX

“**Thyroid Function Screen with Reflex**,” a TSH–first algorithm, is being introduced as the recommended screening pathway for thyroid function testing. This evidence based best practice algorithm is a result of collaboration between members of the Department of Medicine, Division of Endocrinology, and the Department of Pediatrics, Division of Pediatric Subspecialties, Section of Endocrinology, together with Health Network Laboratories and the LVHN Test Utilization Council. This algorithm, which has been approved by the Clinical Decision Support Committee, Chairs Troika and the Medical Executive Committee, will be available in CAPOE beginning September 1.

When placing an order for “**Thyroid Function Screen with Reflex**,” TSH levels will automatically determine the need for reflex free T4 and free T3 testing. This algorithm will eliminate unnecessary additional testing in the presence of normal TSH levels. The algorithm will be posted in the HNL Laboratory Handbook accessible in “Find Fast” on the LVHN intranet. A separate order for TSH alone may be ordered to monitor patients on thyroxine replacement therapy.

An advisory window will recommend that TSH may be non-specifically skewed during an acute illness and therefore screening for thyroid function should be reserved for ambulatory patients or in cases where thyroid disease is a serious diagnostic consideration.

The half life of T4 is six to eight weeks. To reduce unnecessary repeat testing, an advisory at the time of ordering “Thyroid Function Screen” will also alert the ordering provider if a TSH was resulted on that patient within the prior eight weeks.

If you have any questions regarding these test menu changes or if you have suggestions for other Test Utilization Council initiatives, please contact Bala Carver, MD, at 610-402-8142.



## LVHN DIGITAL LIBRARY

### New Digital Library Website

Change is sometimes difficult, however, the old Library website had some issues. It had grown and grown and become longer and unwieldy. The new site is more user friendly with shorter pages and a left navigation bar. The Key Resources section on the homepage lists the most needed and frequently used resources. Experienced library users can now quickly “grab-n-go.”

For those who want more information about a particular program or who want to delve more deeply into research, new pages have been added to the website. The Databases page lists search tools like PubMed, EBSCOHost and OVID. Many links to great resources appear on the Clinical Trials and Guidelines pages. As almost everyone is now going mobile, the new Mobile Resources page provides information on the resources you can access on your mobile device. Need CME? Check out the Continuing Education page.

Research is such an important part of our culture at LVHN that a new page on Writing Resources should be helpful to many of our staff. You will find resources here for style and format like the AMA Style Guide, manuscript and poster preparation, grant writing, and even how to select a journal in which to publish.

The look has changed, but the content is better than ever! The website is still accessible through the intranet homepage. Click on **Find Fast/Library Services**.

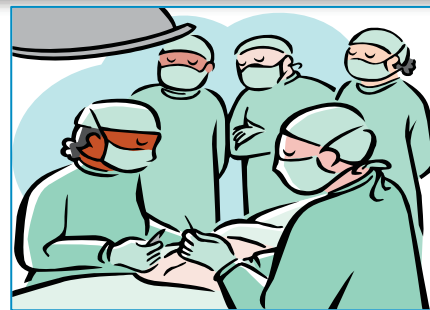
For more information, contact Linda Schwartz, Director, Library Services, at 610-402-8410.

# PHYSICIAN DOCUMENTATION

## Debridement

Have you done a Debridement today? **“Sharp” doesn’t cut it anymore!**

Specific coding guidelines require clarity of documentation of debridement. Please note **excisional** or **non-excisional** and indicate the level/depth of debridement in operative reports.



**Clear and concise physician documentation of all diagnoses and procedures is important to accurately reflect the severity and complexity of those you treat.**

If you have any questions regarding this issue, please contact John P. Pettine, MD, Lead Coach, Clinical Documentation Improvement Program, via email at [john.pettine@lvhn.org](mailto:john.pettine@lvhn.org).

## Attention: Osteopathic Physicians

If you are an osteopathic physician, your Pennsylvania license will expire on **October 31, 2010**. If you have not already done so, please remember to renew your license.

The State Board of Osteopathic Medicine mails renewal notices two to three months prior to the license expiration date. Notices are mailed to the most recent address the licensee has reported to the Board. **The Postal Service does not forward licenses.**

If your address has changed since your last license renewal, or if you did not yet receive your renewal notice, you may want to call the **State Board of Osteopathic Medicine** at **(717) 783-4858**.

Don't take a chance of having your license expire!



## 2010 LVHN UNITED WAY CAMPAIGN

**Who's the Next Lehigh Valley Hero? You! All You Need to Do is Give to the United Way**

People in need in the Lehigh Valley aren't looking for someone who can leap tall buildings in a single bound. But they certainly are in need of someone equally as heroic – “Super” heroes who will better our community not through brute strength or extraordinary powers, but through simple generosity, contributing to after-school programs that keep students engaged in learning, neighborhood services that help families become financially secure, and home visitation services that ensure a lifetime of good health for newborns of at-risk mothers and older adults living at home.

If you have not yet pledged to this year's United Way Campaign, please take five minutes and click on the United Way icon on your SSO toolbar and follow the prompts, or you can complete a paper donation form. This year's campaign runs through November 30.

Please be a hero to those who need your help! LVHN Gives Back!

If you have any questions, please contact Kevin A. Vrablik, MD, United Way Committee Physician Team Leader, via email at [kevin.vrablik@lvhn.org](mailto:kevin.vrablik@lvhn.org) or pager 610-402-5100 8323.

# ADVANCED PRACTICE CLINICIANS UPDATE

## Ongoing Professional Provider Evaluation and Its Affect on the Advanced Practice Clinicians

Starting in January 2008, The Joint Commission (TJC) required every medical staff of Joint Commission-accredited hospitals to collect practitioner-specific performance data to identify professional practice trends that impact on quality of care and patient safety. As a practitioner with privileges approved by the Credentials and Medical Executive Committees, Advanced Practice Clinicians (APCs) are included in this process.

The intent of Ongoing Professional Provider Evaluation (OPPE) at LVHN is to evaluate data on performance for all practitioners. This will occur on an ongoing basis rather than at the two-year reappointment process. The purpose is to allow LVHN to take steps to improve performance in a timely manner.

### Who will be affected?

It affects all APCs credentialed by LVHN to work within the Network.

### Who will determine what benchmarks/quality indicators to follow?

The quality improvement committee of your department and/or department chairs will determine which measures/indicators to follow. The selected department indicators are approved by the Medical Executive Committee.

### Who will be reviewing the data collected?

They will be reviewed by your department chair every six months as a Joint Commission requirement.

### Will this be included in your recredentialing process?

Yes, the benchmarks/quality indicators collected will be included as part of your evaluation for recredentialing here at LVHN.

### When does it go into effect?

It is in effect now.

If you have any questions regarding this issue, please call 610-402 APC1 (2721) and provide your name and a call-back number.

## Annual Dues for Advanced Practice Clinicians

At the quarterly meeting of the Advanced Practice Clinicians (APCs) held on July 22, those in attendance voted to require APCs to pay annual dues. The amount of dues for the 2010/2011 period will be \$25. Funds received will support educational activities for Advanced Practice Clinicians as well as community outreach programs.

Dues invoices for APCs were mailed on September 1. Timely remittance of dues is both **requested** and **appreciated**. To insure proper credit, please enclose the remittance part of the invoice along with the check in the return envelope.

If you have any questions regarding APC dues, please contact Gloribel Nieves in Medical Staff Services at 610-402-8984.

# AUTOMATIC FORWARDING OF EMAIL

As many of you know, there is an auto-forwarding function in the LVHN email system that allows the user to forward email regardless of the content or destination. Many forward their email to a home account such as Yahoo, Hotmail, GMail, etc. Initially, limitations in technology made this a reasonable means to access information away from work. Users were expected to follow the policies pertaining to appropriate use by not forwarding patient health information to external accounts where privacy can be compromised.

However, improvements in technology and connectivity have removed previous barriers to access of your internal account. This has made forwarding emails to home accounts no longer necessary. Therefore, on **August 12**, Information Services removed the ability to automatically forward email to private accounts. Doing this eliminates the potential for compromise to patient privacy and assures that LVHN is in compliance with state and federal privacy laws, including HIPAA.

You can access your LVHN email from anywhere you have Internet connectivity through WebSSO, which is a secure tunnel to the network. If you don't have WebSSO, there are several options to access your TAO email when you are not connected to the Network.

You can access TAO through the web ("Interpost Express") with the following instructions. This will work for both Windows and Macintosh computers. Note that you will need to reset your TAO password while connected to the Network, before accessing TAO from home.

To reset your password:

1. From an LVHN computer, navigate to the intranet homepage ([www.lvhn.com](http://www.lvhn.com)).
2. Near the top of the page, mouse over **Technology** and in the resulting drop-down, click **I/S Support Center**. You can also access this page directly by typing in [www.lvhn.com/supportcenter](http://www.lvhn.com/supportcenter).

3. On the I/S Support Center page, click on the **RESET PASSWORD** graphic on the left side of the screen.
4. Click the drop-down list next to **Application** and choose **GUI Email**.
5. The password reset tool will display your new computer generated email password and synchronize it with your TAO email SSO button.  
**Do not change this password within TAO (either from home or on the Network). Changing the password will "break" the synchronization with your SSO button and prevent you from launching the TAO application when you are on the network.**
6. To access Interpost Express from home or outside of the network, type **mail2.lvhn.com** in the address bar of your web browser. Do not preface it with "www."
7. On the Interpost Express login page, enter your user ID and your newly reset **email** password and click **Sign in**.
8. If you have questions or encounter difficulty, please contact the I/S Support Center at 610-402-8303, option 1, and someone will assist you with the process.

The second option is to access the Network through a secure connection (VPN). This will allow you to access all of the applications available on your current SSO Toolbar. The steps to set up the VPN can be found on the Medical Staff Services webpage under "Documents." To access the Medical Staff Services website from the Internet, go to [www.lvhn.org](http://www.lvhn.org). Select "Information for: Physicians" in the lower black section, then select "Medical Staff Services" and "Services for Members of the Medical Staff." Then click on "WebSSO Installation Instructions."

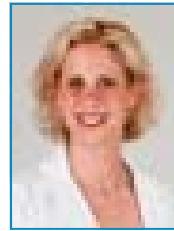
Information Services is also working on options to securely access your email from your Smartphone. Your patience and cooperation is appreciated.

If you have any questions regarding this issue, please contact the I/S Support Center at 610-402-8303, option 1.

# CONGRATULATIONS



**David Allen, DO**, Division of Cardiology, was recently notified by the American Osteopathic Board of Internal Medicine that he satisfactorily passed the required examinations and has become certified in the subspecialty of Cardiology. Dr. Allen has been a member of the Medical Staff since September, 2009. He is in practice with The Heart Care Group, PC.



**Rachel B. Liebman, DO**, Department of Family Medicine, was recently notified by the American Osteopathic Board of Family Physicians that she met the requirements of the Board and having passed the required examinations, has become certified in Family Practice. Dr. Liebman has been a member of the Medical Staff since November, 2009. She is in practice with Moorestown Family Medicine.



**Raymond A. Fritz, Jr., DPM**, Division of Podiatric Surgery, has become recertified in Foot and Ankle Surgery by the American Board of Podiatric Surgery. Dr. Fritz has been a member of the Medical Staff since August, 1991. He is in practice with Allentown Family Foot Care.



## PAPERS, PUBLICATIONS AND PRESENTATIONS



**Sigrid A. Blome-Eberwein, MD**, Division of Burn/Trauma-Surgical Critical Care/Plastic Surgery, was a co-author of the article – “Hydrofiber dressing with silver for the management of split-thickness donor sites:

A randomized evaluation of two protocols of care” – which was published in *Burns*, Volume 36, Issue 5, August 2010 (p. 665-672).



**Lou A. Lukas, MD**, Department of Family Medicine, and Medical Director, OASIS Services, presented at the National Hospice and Palliative Care Organization conference on Developing the Patient Care Continuum

held on August 5, in Boston, Mass. The one-hour presentation detailed how Lehigh Valley Health Network has used OACIS to improve continuity for patients with Advanced Complex Illness through its inpatient and out-patient consulting services and by changing policy and practice through interventions such as Goals of Treatment dictations and education.



**Marshall G. Miles, DO**, Division of Plastic Surgery; Terry Lynn Burger, Director, Infection

Control; and **Robert X. Murphy, Jr., MD**, Plastic Surgery Residency Program Director and Assistant CMO, LVH-Muhlenberg, co-authored the article – “Community-Acquired Methicillin-Resistant *Staphylococcus aureus* in the Suburban Hand Surgery Patient Population” – which was published in *Hand*, Volume 5, 2010.

# NEWS FROM CAPOE CENTRAL

## Radiology Reports — No More Printing on the Units

In September, Radiology reports will no longer be printed on the inpatient units in the hospital sites. It has become apparent that none of the clinicians were utilizing the paper reports and a lot of paper was being wasted in the printing process.

## Post-Op Orders — When to Enter

Please do not enter post-op orders during the pre-operative period. Although it may appear more efficient, entering the post-op orders too soon can result in several problems. The orders are processed as soon as they are entered — consequently, the PACU and post-op units receive the orders prior to the patient arriving. The medication orders are also received and verified by pharmacy when received. As the actual post-op time for the patient is unknown, the medication administration times in the system will be mismatched with the actual times the patient arrives in PACU. Please do not enter post-op orders into the system until the patient is close to the conclusion of the procedure.

## Who Really is the Attending for this Patient?

There has been some confusion over the “Attending of Record” field located on the Discharge Patient orders. This is a required field that, when completed, will be used by Medical Records and other departments to assist in assigning the patient to the appropriate attending. Whoever is entering the Discharge Order will be responsible for completing this field. This should decrease the confusion over responsibility for completion of the chart, etc. The idea for this change came about through discussions at the Chairs/Troika meeting and was approved by the Medical Executive Committee in 2007.

## Change in CAPOE Hospice Order screen

You may have noticed that the hospice order screen has changed. The two previously existing orders — “In Patient Hospice” and “Hospice, Inpatient” — were leading to confusion. There will now only be one order for “Hospice Referral.” On the detail screen, you will be able to define whether you want in-patient hospice, out patient (home, SNF, etc.), or are unsure of the best location. This will facilitate better communication with case management and the hospice liaisons.

## LastWord Upgrade Training: eLearning and Drop-In Sessions

Sometime this fall, LastWord will be upgraded to Centricity Enterprise (CE). The upgrade will bring a new look and improved functionality. The overall look will appear more “Windows-like,” however, most of the screens and buttons will be arranged the same as the current system (button location, drop-down lists, etc.). A multi-disciplinary team of physicians, allied health staff, and ancillary staff have been meeting twice monthly to review screen design, screen flow and other issues. Several eLearning modules have been created to explain the changes. You can access these modules either through the eLearning button on the SSO Toolbar or directly from LastWord and CE from the Physician Resources page.

To assist clinicians in the transition, we have also scheduled drop-in sessions in the Computer Learning Labs at LVH-CC and in the I/S Training Room located off the South Entrance lobby at LVH-M. During the scheduled times (shown on the next page), you will be able to try out the new system. It is suggested that you take a few minutes to go through the eLearning modules and then play with the new system. Suggested functions to investigate are: creating your group and private census lists, using the new and improved Allergy screens, using the new Document Display screens; and select a patient and follow your typical daily routine for reviewing information, entering orders and using order sets. The Drop-In sessions will be staffed by Physician Educators who will be able to answer questions and explain the features. The schedule for the sessions will be posted in the Lounges and on the Physician Resource page in LastWord.

*Continued on next page*

Continued from Page 10

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9/5	9/6	9/7	9/8	9/9	9/10	9/11
	Labor Day		3-6pm	11am-1pm	11am-1pm	
			3-6pm	11am-1pm		
9/12	9/13	9/14	9/15	9/16	9/17	9/18
	11am-1pm (CL2)	11am-1pm	11am-1pm	6-8am	6-8am	
	3-6pm	3-6pm (CL2)	6-9pm	6-9pm	11am-1pm	
9/19	9/20	9/21	9/22	9/23	9/24	9/25
	3-6pm (CL2)	6-8am	11am-1pm	6-8am	6-8am	11am-2pm
	6-9pm	6-9pm	3-6pm	11am-1pm	11am-1pm	
			3-6pm			
9/26	9/27	9/28	9/29	9/30	10/1	10/2
	3-6pm	11am-1pm (CL2)	6-8am	6-8am	6-8am	11am-2pm
	3-6pm	1-5pm (CL2)	11am-1pm	11am-1pm	11am-1pm	
	6-9pm	6-9pm	3-6pm	3-6pm		
10/3	10/4	10/5	10/6	10/7	10/8 – GO LIVE	10/9
	3-6pm	6-8am	6-8am	6-8am	6-8am	
	3-6pm	11am-1pm	11am-1pm	6-8am	6-8am	
	6-9pm	3-6pm	3-6pm	11am-1pm	11am-1pm	
	6-9pm	6-9pm	6-9pm	3-6pm	11am-1pm	
				6-9pm		
LVH-Cedar Crest	Training at LVH-Cedar Crest will take place in Kasych Computer Lab 1 unless otherwise noted by CL2 for Computer Lab 2.					
LVH-Muhlenberg	Training at LVH-Muhlenberg will take place in the I/S Training Room located off the South Entrance lobby.					

If you have any questions or concerns regarding these or any other CAPOE issues, please contact Don Levick, MD, MBA, Medical Director, Clinical Informatics, at 610-402-1426 or pager 610-402-5100 7481.

# ETHICS CORNER

## Professionalism Lost? Or just misplaced ... Part 1: Where did we begin?

According to Goode in 1969, professionalism is “Something that resides in the interface between the possession of specialized knowledge and a commitment to use that knowledge for the betterment of others.” Nothing could be more befitting of medicine. James Ring, in his AMA presidential address states it is “A dedication to competence, compassion and moral accountability along with patient advocacy, personal sacrifice and beneficence.” The American Board of Internal Medicine in 1995 added the following characteristics: “Aspiring toward altruism, accountability, excellence, duty, service, honor, integrity and respect for others.”

Obviously, professionalism is all of this and much more. When one examines all of the great medical traditions, the picture becomes clearer and unified. Different eras and different traditions emphasize different parts of what it means to be a professional. In the Hippocratic tradition, there is a vow of allegiance to one’s teachers and colleagues, a vow to keep certain moral rules and, of course, a vow to do your best, “or at least, do no harm.” The Chinese Code of Medical Ethics states a great doctor should not discriminate among patients with even foul cases treated without the slightest antipathy, should disregard his/her own inconvenience, should be respectable and talkative and that it is a great mistake to boast or to slander other physicians. The Oath and Prayer of Moses Maimonides holds that the medicine is a calling from God, or the eternal providence. He prays “May the love for my art actuate me at all times; may neither avarice nor miserliness nor thirst for glory or for a great reputation engage my mind; for the enemies of truth and philanthropy could easily deceive me and make me forgetful of my lofty aim of doing good to Thy children, May I never see in the patient anything but a fellow creature in pain, and May no strange thoughts divert my attention at the bedside of the sick or disturb my mind in its silent labors.” The Islamic Code of Medical Ethics is based on similar vows, “To protect human life in all stages and under all circumstances, doing my utmost to rescue it from death, malady, pain and anxiety, To keep people’s dignity, cover their privacies and lock up their secrets, To be...an instrument of God’s mercy, extending my medical care to near and far, virtuous and sinner and friend and enemy, To strive in the pursuit of knowledge and harnessing it for the



benefit but not the harm of mankind, To revere my teacher, teach my junior and be brother to members of the medical profession joined in piety and charity.”

During the period of Enlightenment, science began to take hold. There was a heightened emphasis upon competence. The concept of the doctor-patient relationship was further developed. This relationship and medical ethics as discussed by Percival became the basis for the AMA’s first Code of Medical Ethics. This document is continually revised and updated by the Council on Ethical and Judicial Affairs of the AMA. But this is only the beginning of the modern discussion...

If you have any questions regarding this issue, please contact Robert D. Barraco, MD, MPH, Chair of the Ethics Committee, at [robert\\_d.barraco@lvhn.org](mailto:robert_d.barraco@lvhn.org).

References: [www.ama-assn.org/go/ceja](http://www.ama-assn.org/go/ceja)



# UPCOMING SEMINARS, CONFERENCES AND MEETINGS

## General Medical Staff Meeting

The quarterly meeting of the General Medical Staff will be held on **Monday, September 13**, beginning at **6 p.m.**, in **ECC Rooms 7 and 8** on the first floor of the Kasych Family Pavilion at Lehigh Valley Hospital, Cedar Crest & I-78. The meeting will be teleconferenced to the **Educational Conference Center, Rooms C and D**, at LVH-Muhlenberg.

All members of the Medical Staff are encouraged to attend.

## GLVIPA Quarterly Meeting

The quarterly membership meeting of the Greater Lehigh Valley Independent Practice Association will be held on **Monday, September 27**, beginning at **6 p.m.**, in the hospital's Auditorium at Cedar Crest & I-78, and teleconferenced to the Educational Conference Center, Rooms C and D, at LVH-Muhlenberg.

For more information, please contact Mary Ann Curcio, Coordinator, GLVIPA, at 610-969-0423.

## Clinical Research Education

On Tuesday, September 28, **Dr. Jeffrey Cooper**, HRPP Consultant for Huron and former Vice President for Education and Regulatory Affairs for AAHRPP, will present two topics.

From 9 to 10 a.m., in Kasych ECC Room 7 and 8, Dr. Cooper will present **"IRB Reporting Requirements."** Dr. Cooper will review the differences between unanticipated problems involving risk to participants and serious adverse events.

From Noon to 1 p.m., in the LVH-Cedar Crest Auditorium, Dr. Cooper will present **"Investigator Responsibilities."**

For more information, please contact Victoria Sabella in the Research Participant Protection Office at 610-969-2038.

## Emergency Medicine Grand Rounds

Emergency Medicine Grand Rounds are held on Thursdays, from 9 a.m. to 2 p.m., at various locations. Topics to be discussed in September are as follows:

September 2 – LVH-M ECC Rooms B, C and D

- "Pediatric EM Jeopardy" and "Neonatal Emergencies" – Jennifer Walthall, MD, Emergency Medicine Faculty, Riley Hospital for Children
- Journal Club – Steve Frei, MD, and David Richardson, MD
- Administrative Hour – David Burmeister, DO

September 9 – LVH-M Banko Building

- Rosen's Club – "Systemic Injuries: Peripheral Vascular" and "Orthopedic Lesions: General Principles of Ortho Injuries, Hand"
- Toxicology Series – Matt Cook, DO
- Pediatric Lecture – TBD
- "Who Wants to be an ED Physician" – Tony Werhun, MD, and Perry Fooskas, MD

September 16

- No Grand Rounds
- Resident Event at Rodeway Inn, Route 309, Allentown

September 23 – EMI – 2166 S. 12<sup>th</sup> Street

- PGY 3 & 4 – Airway Course
- PGY 1 & 2 – Moderate Sedation/Citi Training

September 30 – EMI – 2166 S. 12<sup>th</sup> Street

- EMS Day – Disaster Drills/Decon/Mass Gatherings

For more information, contact Dawn Yenser in the Department of Emergency Medicine at 484-884-2888.

## Family Medicine Grand Rounds

The next Family Medicine Grand Rounds will be held on Tuesday, September 7, from 7 to 8 a.m., in Kasych ECC Room 9 at LVH-Cedar Crest, and teleconferenced to ECC Room A at LVH-Muhlenberg.

"Update on Psychiatric Emergencies in the Primary Care Offices and Appropriate Utilization of Psychiatry Consultative Services" will be the topics of discussion.

For more information, contact Dorothy Jacquez in the Department of Family Medicine at 610-969-4965.

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## Neurology Conferences

The Division of Neurology Conferences are held on Thursdays beginning at Noon at the location listed. Topics to be discussed in September will include:

- September 2 – Division of Neurology Meeting
- September 9 – “How to Use Narcotics” – Bruce Nicholson, MD – Location: 1250 S. Cedar Crest Blvd., Fourth Floor Conference Room, and videoconferenced to Lehigh Neurology – Bathgate Office
- September 16 – Case Studies – John Margraf, MD – Location: 1250 S. Cedar Crest Blvd., Fourth Floor Conference Room, and videoconferenced to Lehigh Neurology – Bathgate Office
- September 23 – “Neurological Complications of Radiation Therapy” – Location: 1250 S. Cedar Crest Blvd., Fourth Floor Conference Room, and videoconferenced to Lehigh Neurology – Bathgate Office and Kasych ECC Room 7
- September 30 – “Neuro-ophthalmology Update” – Dr. Lee Klombers – NOTE: This conference will be held at 7 a.m., in Kasych ECC Room 7, and videoconferenced to Lehigh Neurology – Bathgate Office

For more information, contact Sharon Bartz, Conference Coordinator, at 610-402-9001.

## Nutrition Grand Rounds

Nutrition Grand Rounds are held monthly at Noon for physicians, nurses, pharmacy staff, allied health staff, and any other interested patient care providers. The topic for September is as follows:

- September 14 – “Burns in Adults” – Christina Christianson, RD, LDN, CNSC – Location: Auditorium at LVH-Cedar Crest; ECC Room B at LVH-Muhlenberg and the VTC Room at LVH-17

For information, contact Kimberly Procaccino, Director of Nutrition, at 610-402-8609.

## OB/GYN Grand Rounds

OB/GYN Grand Rounds and “Second Hour” are held every Friday morning from 7 to 9 a.m. in Kasych ECC Room 8. The following topics will be discussed in September:

- September 3
  - 7-8 a.m. – “Type II Endometrial Cancer” – M. Bijoy Thomas, MD
  - 8-9 a.m. – Mortality & Morbidity Conference
- September 10
  - 7-8 a.m. – “Evaluation of Fetal Death: Past, Present and Future” – Visiting Professor Wendy Kinzler, MD, Director of Adverse Pregnancy Outcome Program, Winthrop University Hospital
  - 8-9 a.m. – Faculty Education Committee
- September 17
  - 7-8 a.m. – “Robotics” – Visiting Professor Richard Satava, MD, Department of Surgery, University of Washington
  - 8-9 a.m. – Morbidity & Mortality Conference
- September 24
  - 7 a.m.-Noon – Hands on Fetal Echocardiography Course – John Smulian, MD, Vice Chair, Department of Obstetrics and Gynecology

For more information, contact Teresa Benner in the Department of Obstetrics and Gynecology at 610-969-4515.

## Pediatric Grand Rounds

The Department of Pediatrics will hold Grand Rounds at 8 a.m., in ECC Room 1 on the first floor of the Anderson Wing at LVH-Cedar Crest (unless otherwise noted) on the following Tuesdays in September:

- September 7 – Risk Management topic
- September 14 – “Curriculum Development” – Elaine Donoghue, MD, and Amy Smith
- September 21 – Neonatology topic
- September 28 – TBA – Kara Luckritz, MD

For more information, contact Kelli Ripperger in the Department of Pediatrics at 610-969-2540.

## Spine Conference

Conferences relating to interesting spine cases are held on the first Wednesday of each month beginning at 7 a.m. Clinicians are invited to bring interesting cases to the meeting.

The next Spine Conference will be held on Wednesday, September 1, in Kasych ECC Room 10 at LVH-Cedar Crest.

For more information, contact James C. Weis, MD, Co-Chief, Division of Spine Surgery, or Kristen Tallman, Clinical Coordinator, at 610-973-6339.

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## Surgical Grand Rounds

Surgical Grand Rounds will be held at 7 a.m., in the Auditorium at LVH-Cedar Crest and via teleconference in the First Floor Conference Room at LVH-Muhlenberg. The topics for September will include:

- September 14 – “National Models to Monitor and Improve the Quality of Cancer Care” – Stephen B. Edge, MD, Chair, Department of Breast Surgery, Roswell Park Cancer Institute
- September 21 – “The Current Role of MR Imaging in Prostate Cancer Diagnosis and Its Potential for Minimally Invasive Treatment” – Angelo A. Baccala, Jr., MD, Chief, Division of Urology
- September 28 – “Challenges & Controversies in the Management of Rectal Cancer” – Jorge Marcet, MD, University of South Florida

For more information, contact Cathy Glenn in the Department of Surgery at 610-402-7839.

## Teaching Leader Series

The Division of Education is sponsoring network faculty development workshops for all clinical educators. This series has been designed to identify and apply adult teaching principles to maximize training, assess performance, deliver constructive feedback, and create a safe learning environment using a diverse set of teaching methods tailored for the learner.

Workshops for September will include:

- “Curriculum Design”
  - September 10 – 7:30-9 a.m., ECC Room B, LVH-Muhlenberg
  - September 27 – Noon-1:30 p.m., Kasych ECC Room 7, LVH-Cedar Crest
- “Evaluation Strategies”
  - September 17 – Noon-1:30 p.m., Banko 1 & 2, LVH-Muhlenberg

Registration is available through eLearning on your WebSSO toolbar.

For more information or if you have questions, please contact Kirsten Ryan, Medical Education Coordinator, at 610-402-2316.

## What's New in CME?

### Performance Improvement CME – Wave of the Future

PI CME is a structured process in which evidence-based measures and quality improvement (QI) interventions are used to change physician performance, competence and/or patient outcomes. It includes a three-stage learning model approved for *AMA PRA Category 1 Credit*, and may also qualify for approval for Maintenance of Certification Part IV by individual specialty boards. A total of 20 CME credits can be earned - 5 CME credits for completing each of the three stages of the project, with an additional 5 CME credits granted for completing all three stages.

### CME Advisory Board

The Continuing Education Team is looking for physicians interested in joining the CME Advisory Board. For physicians who want to take a more active role with continuing medical education, the CME Advisory Board is a good place to start. The Board oversees all continuing medical education within the health network and meets four times a year.

### FYI – Upcoming Events

- **“Oh My Aching Back!” Pain Symposium**  
September 21  
Kasych Family Pavilion (ECC 6, 7 and 8)
- **2<sup>nd</sup> Annual OB/GYN Ultrasound**  
September 24-25  
Cedar Crest Campus
- **S.T.A.B.L.E. (Physician Course with RN/RT Renewal)**  
September 30, October 9, and March 3, 2011  
Kasych Family Pavilion
- **Hypertrophic Cardiomyopathy: What to Know and What to DO**  
October 2  
Kasych Family Pavilion (ECC 6, 7 and 8)

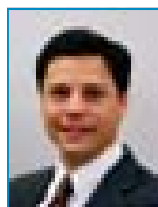
If you have any questions regarding CME/CNE accreditation, PI CME, or the CME Advisory Board, please contact Jane Grube, Associate Director, Continuing Education, at 610-402-2398.

# Who's New

*This section contains an update of new appointments, address changes, status changes, resignations, etc. Please remember to update your directory and rolodexes with this information.*

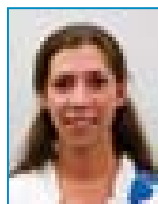
## Medical Staff

### New Appointments



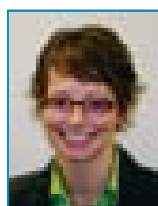
**Angelo A. Baccala, Jr., MD**

Lehigh Valley Urology Specialty Care  
Center for Advanced Health Care  
1250 S. Cedar Crest Blvd., Suite 210  
Allentown, PA 18103-6271  
Phone: 610-402-6986 Fax: 610-402-4460  
Department of Surgery  
Division of Urology  
Provisional Active



**Hilary F. Basham, DO**

LVH-M Emergency Medicine  
Lehigh Valley Hospital-Muhlenberg  
2545 Schoenersville Road, Fifth Floor  
Bethlehem, PA 18017-7384  
Phone: 484-884-2888 Fax: 484-884-2885  
Department of Emergency Medicine  
Division of Emergency Medicine  
Provisional Limited Duty



**Lynsey S. Biondi, MD**

LVPG Transplant Surgery  
Center for Advanced Health Care  
1250 S. Cedar Crest Blvd., Suite 210  
Allentown, PA 18103-6271  
Phone: 610-402-8506 Fax: 610-402-1682  
Department of Surgery  
Division of General Surgery  
Section of Transplantation Surgery  
Provisional Active



**Matthew E. Brown, MD**

Medical Imaging of LV, PC  
Lehigh Valley Hospital  
Cedar Crest & I-78, P.O. Box 689  
Allentown, PA 18105-1556  
Phone: 610-402-8088 Fax: 610-402-1023  
Department of Radiology-Diagnostic Medical  
Imaging  
Division of Diagnostic Radiology  
Provisional Active



**Robert D. Cannon, DO**

LVPG-Emergency Medicine  
Lehigh Valley Hospital  
Cedar Crest & I-78, P.O. Box 689  
Allentown, PA 18105-1556  
Phone: 610-402-8130 Fax: 610-402-7160  
Department of Emergency Medicine  
Division of Emergency Medicine  
Section of Medical Toxicology  
Provisional Active



**John C. D'Emilia, MD**

Lehigh Valley Surgical Oncology  
2597 Schoenersville Road, Suite 201  
Bethlehem, PA 18017-7331  
Phone: 484-884-3024 Fax: 484-884-3026  
Department of Surgery  
Division of General Surgery  
Section of Surgical Oncology  
Provisional Active



**Kevin F. Joyce, MD**

LVHN Hospital Medicine at Muhlenberg  
Lehigh Valley Hospital-Muhlenberg  
2545 Schoenersville Road  
Second Floor, Kolb Center  
Bethlehem, PA 18017-7384  
Phone: 484-884-9677 Fax: 484-884-9297  
Department of Medicine  
Division of General Internal Medicine  
Section of Hospital Medicine  
Provisional Active

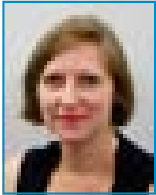


**Crystal A. Maksimik, DO**

The Heart Care Group, PC  
Jaindl Pavilion, Suite 500  
1202 S. Cedar Crest Blvd.  
P.O. Box 3880  
Allentown, PA 18106-0880  
Phone: 610-770-2200 Fax: 610-776-6645  
Department of Medicine  
Division of Cardiology  
Provisional Active

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**Alyson F. McIntosh, MD**  
Allentown Radiation Oncology Associates  
Lehigh Valley Hospital  
Cedar Crest & I-78, P.O. Box 689  
Department of Radiation Oncology  
Allentown, PA 18105-1556  
Phone: 610-402-0700 Fax: 610-402-0708  
Department of Radiation Oncology  
Provisional Active



**Jillian F. Paprota, DO**  
Lehigh Area Medical Associates  
1255 S. Cedar Crest Blvd., Suite 2200  
Allentown, PA 18103-6257  
Phone: 610-437-9006 Fax: 610-437-2475  
Department of Medicine  
Division of General Internal Medicine  
Section of Hospital Medicine  
Provisional Active



**Hermann C. Schumacher, MD**  
Lehigh Neurology  
Center for Advanced Health Care  
1250 S. Cedar Crest Blvd., Suite 405  
Allentown, PA 18103-6224  
Phone: 610-402-8420 Fax: 610-402-1689  
Department of Medicine  
Division of Neurology  
Provisional Active



**Vikram Verma, MD**  
Eastern PA Nephrology Associates  
1230 S. Cedar Crest Blvd., Suite 301  
Allentown, PA 18103-6231  
Phone: 610-432-4529 Fax: 610-432-2206  
Department of Medicine  
Division of Nephrology  
Provisional Active

### ***Changes to Departmental Assignment***

**Sandra L. Curet, MD**

Department of Obstetrics and Gynecology  
From: Division of Obstetrics/Gynecology  
To: Division of Gynecology/Primary Care OBGYN

**Daniel G. Kiefer, MD**

Department of Obstetrics and Gynecology  
From: Division of Obstetrics/Gynecology  
To: Division of Maternal-Fetal Medicine/Obstetrics

### ***Medical Staff Leadership Appointment***

***Department of Surgery***

**Angelo A. Baccala, Jr., MD**  
Chief, Division of Urology

### ***Status Changes***

**Scott J. Lipkin, DPM**

Department of Surgery  
Division of Podiatric Surgery  
From: Active  
To: Medical Administrative

**Joselito A. Ouano, MD**

Department of Family Medicine  
From: Affiliate  
To: Provisional Active

**Astrid K. Radermacher, DO**

Department of Medicine  
Division of General Internal Medicine  
From: Limited Duty  
To: Provisional Active

### ***Changes of Address***

**Daniel G. Kiefer, MD**

LVPF-Maternal Fetal Medicine  
Lehigh Valley Hospital  
Cedar Crest & I-78, P.O. Box 689  
Allentown, PA 18105-1556  
Phone: 610-402-8510 Fax: 610-402-1328

**Gene V. Levinstein, MD**

Pennsylvania Pain Specialists  
451 W. Chew Street, Suite 405  
Allentown, PA 18102-3424  
Phone: 610-776-4746 Fax: 610-770-3452

**Sanjay M. Mehta, MD**

Lehigh Valley Heart & Lung Surgeons  
2649 Schoenersville Road, Suite 104  
Bethlehem, PA 18017-7317  
Phone: 484-884-1011 Fax: 484-884-1012

**Michele A. Pisano-Marsh, DMD**

3055 College Heights Blvd.  
Allentown, PA 18104-4875  
Phone: 610-432-8037 Fax: 610-432-7032

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**Cromwell C. Estrada, DO**

**Gary M. Pryblich, DO**

**Judith R. Pryblich, DO**

Total Family Health Care

3050 Hamilton Blvd., Suite 100

Allentown, PA 18103-3691

Phone: 610-437-7181 Fax: 610-435-0597

## **Changes of Practice**

**John G. Brady, DO**

(No longer with Advanced Dermatology Associates, Ltd)

Dermatology & Skin Cancer Center, P.C.

2200 W. Hamilton Street, Suite 305

Allentown, PA 18104-6385

Phone: 610-432-0200 Fax: 610-432-0202

**Scott J. Lipkin, DPM**

(No longer with Podiatry Associates of LVPG)

Lehigh Valley Hospital

17th & Chew, P.O. Box 7017

Research Participant Protection Office, Room 6T-34

Allentown, PA 18105-7017

Phone: 610-969-2525 Fax: 610-969-2437

**Charles C. Norelli, MD**

(No longer with OAA Orthopaedic Specialists)

Coordinated Health

1503 N. Cedar Crest Blvd.

Allentown, PA 18104-2310

Phone: 610-861-8080 Fax: 610-821-1129

## **Leave of Absence**

**Kara L. Niski, DMD**

Department of Dental Medicine

Division of General Dentistry

## **Resignations**

**John A. Altobelli, MD**

Department of Surgery

Division of Plastic Surgery

(Allentown Center for Plastic Surgery)

**Roderick E. Brown, MD**

Department of Anesthesiology

(AnestiPlus Anesthesia Services, Inc.)

**Brett W. Gibson, MD**

Department of Surgery

Division of Orthopedic Surgery

(Coordinated Health)

**Arif Husain, MD**

Department of Psychiatry

Division of Psychiatric Ambulatory Care

(Arif Husain, MD – Muhlenberg Behavioral Health)

**Frank L. Scholes III, DMD**

Department of Dental Medicine

Division of General Dentistry

**R. Barry Sirard, Jr., MD**

Department of Family Medicine

(Community Physician Practice Growth Initiative)

**Brian G. Wilson, MD**

Department of Anesthesiology

(AnestiPlus Anesthesia Services, Inc.)

## **In Memoriam**

**Lawrence M. Weisbrod, MD**

Department of Surgery

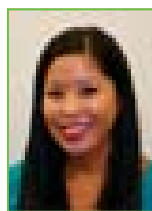
Division of Orthopedic Surgery

Honorary Status

April 16, 1917 – June 20, 2010

## **Allied Health Staff**

### **New Appointments**



**Frances D. Arroyo, CRNA**

*Certified Registered Nurse Anesthetist*

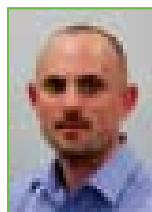
Lehigh Valley Anesthesia Services, PC

1210 S. Cedar Crest Blvd., Suite 1100

Allentown, PA 18103-6241

Phone: 610-402-1374 Fax: 610-402-4230

Supervising Physician: Thomas M. McLoughlin, Jr., MD



**Ryan A. Harter, OTC**

*Orthopaedic Technologist Certified*

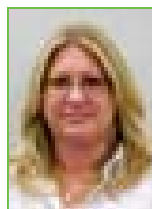
Coordinated Health

2300 Highland Avenue

Bethlehem, PA 18020-8920

Phone: 610-865-4880 Fax: 610-997-7171

Supervising Physician: Emil J. DiIorio, MD



**Debra M. Loder**

*Medical Assistant*

The Heart Care Group, PC

Jaindl Pavilion, Suite 500

1202 S. Cedar Crest Blvd.

P.O. Box 3880

Allentown, PA 18106-0880

Phone: 610-770-2200 Fax: 610-776-6645

Supervising Physician: Sean K. George, DO

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**Joanne P. Mulligan, PA-C**

*Physician Assistant-Certified*

Lehigh Valley Urology Specialty Care

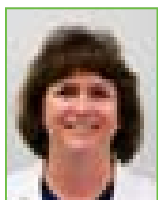
Center for Advanced Health Care

1250 S. Cedar Crest Blvd., Suite 210

Allentown, PA 18103-6271

Phone: 610-402-6986 Fax: 610-402-4460

Supervising Physician: Angelo A. Baccala, Jr., MD



**Patricia A. Reinbold**

*Medical Assistant*

The Heart Care Group, PC

Jaindl Pavilion, Suite 500

1202 S. Cedar Crest Blvd.

P.O. Box 3880

Allentown, PA 18106-0880

Phone: 610-770-2200 Fax: 610-776-6645

Supervising Physician: Jason D. Fragin, DO



**Kailin T. Slowick, CRNP**

*Certified Registered Nurse Practitioner*

Pediatric Specialists of the Lehigh Valley

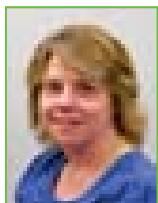
Fairground Medical Center

400 N. 17<sup>th</sup> Street, Suite 201

Allentown, PA 18104-5052

Phone: 484-664-7850 Fax: 484-664-7864

Supervising Physician: Arnold H. Slyper, MD



**Wendy A. Weaver, RN**

*Registered Nurse*

ABC Family Pediatricians/Center Valley

3800 Sierra Circle, Suite 100

Center Valley, PA 18034-8102

Phone: 484-664-2090 Fax: 484-664-2089

Supervising Physician: Amy Jibilian, MD



**Cornell M. Yellen**

*Intraoperative Neurophysiological Monitoring Specialist*

Surgical Monitoring Associates, Inc.

900 Old Marple Road

Springfield, PA 19064-1211

Phone: 610-328-1166 Fax: 610-328-2023

Supervising Physician: Stefano Camici, MD

## **Status Change**

**Lisa M. Shores, RN**

From: Licensed Practical Nurse

To: Registered Nurse

(The Heart Care Group, PC – William J. Smolinski, DO)

## **Change of Group and Departmental Assignment**

**Melissa C. Lehmann, PA-C**

Physician Assistant-Certified

From: Department of Surgery

Division of Orthopedic Surgery

Section of Ortho Trauma

Surgical Specialists of the Lehigh Valley – Patrick B.

Respet, MD

To: Department of Family Medicine

Section of Occupational Medicine

HealthWorks – Patrick B. Respet, MD

## **Resignations**

**Jenifer L. Brilla, CRNP**

Certified Registered Nurse Practitioner

(LVPG-Psychiatry)

**Justin R. Davis**

Pacemaker/ICD Technician

(Boston Scientific)

**Daniel Delaney, CRNA**

Certified Registered Nurse Anesthetist

(AnestiPlus Anesthesia Services, Inc.)

**Amanda L. Goddard, CRNP**

Certified Registered Nurse Practitioner

(Lehigh County Child Advocacy Center)

**Lindsey M. Goodwin**

Pacemaker/ICD Technician

(Boston Scientific)

**Clare E. Griffis, PA-C**

Physician Assistant-Certified

(OAA Orthopaedic Specialists)

**Daniel T. Richmond, CST**

Certified Surgical Technologist

(Barry A. Ruht, MD, FACS, PC)

**Deidre J. Van Assche, CRNP**

Certified Registered Nurse Practitioner

(Allentown Associates LLC)

**Gregory A. Wilsker**

Pacemaker/ICD Technician

(Boston Scientific)

## ***Medical Staff Services Office***

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