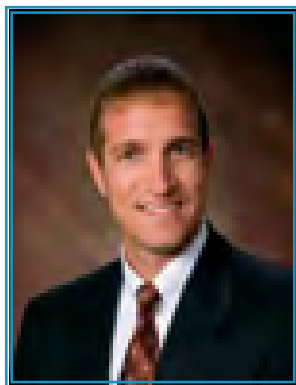


Progress Notes

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

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FROM THE PRESIDENT



Women in Medicine

I have two questions for you to consider. First – “What do five of my partners (Jennifer Rovella, DO, Vanessa Ribaudou Kaufman, MD, Dottie Watson, DO, Niru Kakumanu, MD, and Rita Pechulis, MD), all the ladies who work in my office, and everyone who works in the Medical Staff Services Office (except for John Hart and Trent Smith) have in common?” You guessed it – they are all women! The second question is “What has been the biggest advance in medicine during the last 100 years?” Was it the development of ABO blood typing in 1901? Perhaps it was the discovery of penicillin by Sir Alexander Fleming in 1928. Maybe the biggest advance in medicine over the past century was the description of the structure of the DNA molecule by Watson, Crick, and Wilkins in 1953. Some would argue the greatest advance was the development of HAART therapy for HIV by David Ho, MD in 1996. Certainly, these are all great advances; however, I would argue that the dramatic shift to more women in medicine over the past 40 years belongs among them.

The history of women in medicine in America dates back to 1847 when Harriet Hunt became the first woman to apply to Harvard Medical School. Her application was rejected. (Harvard did not admit their first female medical student until 1946.) Two years later, in 1849, Elizabeth Blackwell became the first woman to receive a medical degree from the Geneva Medical College in New York. Also notable was Rebecca Lee Crumpler who became the first African-American woman to receive a medical degree in 1864, one year after the Emancipation Proclamation. By the beginning of the 20th century, the number of female physicians in the United States had increased to more than 7,000, up from about 200 in 1860. Nevertheless, women remained in the minority in medicine throughout the majority of the 20th century with only seven percent of medical school graduates in 1965 being female. Major advances for women in American medicine really did not begin until the 1980s.

Continued on next page

Continued from Page 1

In 1988, when I started medical school, 33% of all graduates were women. Over 20 years later, in 2009, the American Association of Medical Colleges (AAMC) reported that almost half – 48.8% – of all graduating physicians were women. This represents a 600% increase in the 45 years since 1965. Furthermore, 45.1% of all American residents in 2008 were female. Interestingly, the specialties with the highest proportion of women residents in 2008 were obstetrics and gynecology (78%), pediatrics (69%), medical genetics (66%), and dermatology (61%). You might be surprised to learn that women make up only 27.2% of radiology residents and 36.7% of anesthesiology residents. The same 2008 AAMC dataset showed the specialties with the highest percentage of male residents were neurological surgery (88%), orthopedic surgery (87%), thoracic surgery (87%), and urology (78%).

While much progress has been made by women in medicine, there is still work to be done. When looking at United States Medical Schools in 2009, only 21% of Division/Section Chiefs, 13% of Department Chairs, and 12% of Deans were women.

All of these figures have significantly increased from 1998, but women still are not represented nearly as well as their male counterparts in these areas.

When I began my presidency in January of 2009, I cited in my first article in ***Progress Notes*** that 25% of our medical staff was female. Now, 22 months later, it has risen to 27%. If the trend continues, I would expect the LVHN medical staff to be close to 50% women near the year 2030. I hope I am still around to be part of that staff.

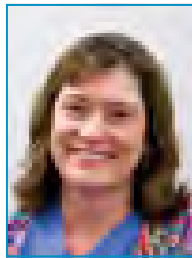
Have a lovely Thanksgiving!



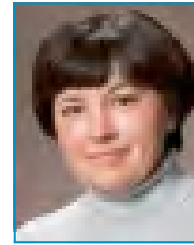
Matthew M. McCambridge, MD
Medical Staff President

Sources: American Association of Medical Colleges and American Medical Association websites

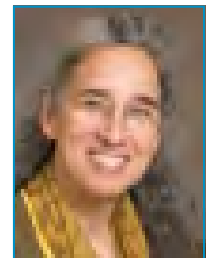
The LVHN Medical Staff includes female members in each department. Following are just a few of our female members:



Karen A. Bretz, MD
Department of Anesthesiology



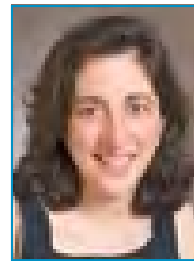
Linda P. Augelli-Hodor, DO
*Department of Medicine
Division of General Internal
Medicine*



Susan D. Wiley, MD
*Department of Psychiatry
Division of Psychiatric
Ambulatory Care*



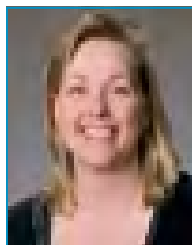
Sophia C. Kladias, DMD
*Department of Dental Medicine
Division of General Dentistry*



Susan I. Haas, MD, PhD
*Department of Obstetrics and
Gynecology
Division of Obstetrics/Gynecology*



Jeanette M. Blauth, MD
*Department of Radiation
Oncology*



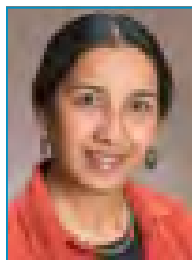
Marna R. Greenberg, DO, MPH
*Department of Emergency Medicine
Division of Emergency Medicine*



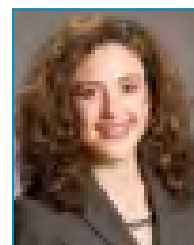
Bala B. Carver, MD
*Department of Pathology &
Laboratory Medicine
Division of Anatomic Pathology
Section of Transfusion Medicine &
HLA*



Kelly M. Freed, MD
*Department of Radiology-Diagnostic
Medical Imaging
Division of Diagnostic Radiology
Section of Genitourinary Radiology*



Sweety Jain, MD
Department of Family Medicine



Kristin M. Menconi, MD
*Department of Pediatrics
Division of General Pediatrics*



Sigrid A. Blome-Eberwein, MD
*Department of Surgery
Division of Burn/Trauma-
Surgical Critical Care/
Plastic Surgery*

LEHIGH VALLEY HEALTH NETWORK ANNOUNCES PUBLIC AWARENESS CAMPAIGN TO CURB DISTRACTED DRIVING



On October 15, Lehigh Valley Health Network (LVHN) announced the kick-off of a widespread public awareness campaign that emphasizes distracted driving, in particular cell phone use and text messaging. The campaign will feature a series of billboard ads, radio ads and yard signs that drive home messages about the dangers of participating in text messaging while driving.

The billboards have been in place since late September with partial messages that feature road signs that say Stop Texting, Cell Limit 0 and Dead End, Don't Text and Drive. Each board now also will include the phrase "Distracted drivers cause crashes." The message also will be carried on LANTA buses. Yard signs will picture the road signs with the anti-texting messages. Car magnets with the same messages will be distributed to the community.

"As the region's leading healthcare provider and as a Level I Trauma Center, our health network witnesses the consequences of distracted driving all too often," said Elliot J. Sussman, MD, LVHN's President and CEO. "We hope our new awareness campaign will make people think twice before they use their cell phones while driving and that by educating our community, we can prevent a visit to our trauma center after a tragic crash caused by distracted driving."

Robert D. Barraco, MD, MPH, Chief, Section of Pediatric/Geriatric Trauma, said 5,500 Americans died in 2009 in car accidents caused by distracted driving — and cell phone use is by far the greatest distraction. He said studies indicate drivers talking on a mobile device are four times more likely to get into crashes that cause injuries. That's the same risk level as driving drunk. He said if you're text messaging, you are eight times more likely to crash.

"Eighty percent of all crashes happen within three seconds of driver distraction," Dr. Barraco said. He added that the health network recently conducted a distracted driving study at four Pennsylvania and New Jersey high schools. Researchers found more than one-third of teenagers drive while distracted with cell phone use among the top distractions. "The team found that sending a single text message takes the driver's attention away for about 26 seconds. That's a lot of time when every single second counts."

Dr. Barraco also noted the importance of education in curbing cell phone use. He said after educating 10th thru 12th graders about the risks of distracted driving, follow-up observations showed cell phone use dropped by 74 percent. "We're hoping adults, like teens, will think twice about using a cell phone while driving after they are educated through our new public awareness campaign."

To further demonstrate the dangers of distracted driving, Dr. Sussman got behind the wheel of Lehigh Carbon Community College's (LCCC) driving simulator while using his cell phone. "We hope multifaceted efforts like the simulator program, public awareness campaigns and the work of our government leaders will make a difference in changing habits and saving lives," he said.

CURBSIDE CONTROLLED SUBSTANCES

To Prescribe or Not to Prescribe



Many physicians and providers are “curbsided” every day for questions about medical diseases along with prescribing medications. Whether it is for prescriptions for a cruise to the Caribbean, a Vicodin prescription that just ran out, or a plain

“can you write me a prescription?”, physicians are asked to choose between personal and family relationships and professional practice. These conversations can be potential minefields for you to navigate. They have the potential to improve a relationship if you manage not to step on a mine in the process. While the American Medical Association has guidelines that discourage this practice, Pennsylvania has four specific rules that must be followed if a controlled substance is involved.

The Pennsylvania Code (49-16.92) requires a “professional” relationship be established by the physician prior to dispensing controlled substances to any patient. It further describes the four factors that constitute this minimum professional relationship:

- A medical History and Physical exam must be conducted unless it is an emergency or you may review another practitioner’s medical history and exam if it was conducted in the last 30 days.
- Records of the medication prescribed and the circumstances surrounding the visit must be documented in the patient’s or healthcare system’s medical record.
- Reevaluations must occur on a periodic basis.
- The patient must be counseled about their medication.

The Pennsylvania Attorney General’s office agents have confronted physicians who prescribe controlled substance medications to patients. They are known to request these records from physician practices when they investigate prescription abuse. Failure to comply with the minimum professional relationship described in the code can be used against the physician’s license who prescribed the medication. Thus, it is important to note that you always face potential liability when you issue a “curbsided” prescription. But when that prescription is for a controlled substance, you also add potential actions to your license.

If you have any questions regarding this issue, please contact Leroy Kromis, PharmD, Medication Safety Officer, at 610-402-8087.

IMPROVING PATIENT SATISFACTION



The Pediatric Performance Improvement Committee has taken on the challenge of improving the physician scores on patient satisfaction surveys for patients admitted to the 4A and 4B pediatric units. While the network has established a target of greater than the 90th percentile, the scores for these areas have been

consistently in the 80-85th percentile range. The committee has reviewed the patient survey scores and the survey comments from families in order to develop an action plan.

Based on the strategy outlined by Patterson, et. al. in *Influencer: The Power to Change Anything*, the Pediatric Performance Improvement Committee is asking you to take the following five simple steps to improve patient satisfaction during pediatric patient encounters.

- Smile
- Make Eye Contact
- Identify yourself and your role in the health-care team
- Let people know what you are doing and why
- End your interaction by asking “Is there anything else I can do for you?”

Your time is valuable and so are our patients. Taking the few extra moments to reassure a family, show compassion and help make sure their needs are met will go a long way toward improving satisfaction scores but more importantly toward improving the care provided to our patients.

If you have any questions regarding this issue, please contact Lee LaRussa, MD, or Claudia Busse, MD, in the Children’s Critical Care Center at 610-402-7632.

SPLIT/SHARED VISITS — WHAT ARE THEY?

A split/shared visit is defined by Medicare as a medically necessary patient encounter in which the physician **and** a qualified non-physician practitioner (CRNP, PA, CNS or CNM) within the same group practice or employed by the same employer each personally perform a substantive portion of an evaluation and management (E/M) visit, face-to-face with the same patient on the same date of service.

A substantive portion of an E/M visit involves all or some portion of the history, exam and medical decision making components of the E/M service. The physician and qualified non-physician practitioner (NPP) who performed the E/M visit must personally document the service in the medical record, and the documentation should support the specific level of E/M visit provided to each individual patient.

Documentation should support the shared nature of the visit. For example, the medical record should:

- Identify both providers;
- Link the physician's notes to the NPP's; and
- Include legible signatures from both providers.

In order to bill the service under the physician's National Provider Identifier (NPI) number, the following requirements must be met:

- The physician must provide a **face-to-face** encounter with the patient;
- The physician must document at least one element of the history, exam and/or medical decision making component of the E/M service;
NOTE: It is not sufficient for the physician to simply document "seen and agree" or countersign the NPP's note. The physician must document what he/she personally performed during the E/M service
- The physician must legibly sign the medical record to justify their involvement in the patient care; and
- The physician and the NPP must be actively involved in the Medicare Program and have a valid NPI number for reporting purposes.

If any of the above are lacking in the patient's medical record, then the service may only be billed using the NPP's NPI. Payment will then be made at the appropriate physician fee schedule rate based on the NPI entered on the claim.

The split/shared visit applies only to select E/M visits in the inpatient, ambulatory, observation and ED settings.

* The split/shared E/M policy **does not** apply to critical care services, procedures, and E/M services performed in a skilled nursing facility/nursing facility.

Common split/shared visit scenario

When a hospital inpatient/ambulatory/observation or emergency department E/M is shared between a physician and a NPP and the physician provides any face-to-face portion of the E/M encounter with the patient, the service may be billed under either the physician's or the NPP's NPI. However, if there was no face-to-face encounter between the patient and the physician (i.e., even if the physician participated in the service by only reviewing the patient's medical record) then the service may only be billed under the NPP's NPI. Payment will be made at the appropriate physician fee schedule rate based on the NPI entered on the claim.

For more information regarding this issue, please contact Carol Kriebel, Corporate Compliance/Privacy Officer at 610-969-0501.

NEWS FROM HEALTH INFORMATION MANAGEMENT

EHR (Electronic Historical Medical Record)

The EHR upgrade scheduled for **November 7, 2010** has been tentatively postponed until **early 2011**.

Training sessions scheduled for mid-October were cancelled and will be rescheduled closer to the implementation date. Communication regarding the new implementation date will be forthcoming as soon as a new date is finalized.

Thank you for your ongoing support as we continually strive to update and improve processes and systems.

If you have any questions regarding this or any other Health Information Management issue, please contact Zeldia Greene, Administrator, at 610-402-8330.

ETHICS CORNER

Professionalism Lost? Or just misplaced . . .

Part 3: The Resurrection of Professionalism

As a teaching hospital, how do we strengthen or “teach” professionalism? Some fixes are easier than others. Having a mission statement that highlights professionalism is an easy one. Increasing awareness of oaths and medical codes is simple to accomplish as well. We have focused our attention on the core competencies pertaining to professionalism.

Residents should demonstrate:

- Respect, compassion, integrity, and altruism in their relationships with patients, families and colleagues
- The ability to serve as a patient’s advocate
- Willingness to provide needed care regardless of ability to pay
- Avoidance of conflicts of interest
- Avoidance of inappropriate gifts

Residents should demonstrate knowledge of:

- The proscription against sexual relationships with patients
- Issues of impairment, including substance abuse
- Health care resources available in the community
- Health care needs of the community

The more difficult challenge is to change the “informal” curriculum. We need to highlight service. After all, medicine is a “service-oriented” profession. We must encourage the raising of moral questions and, if necessary, become involved in the expression and resolution of conflict between institutions and individuals.

In teaching professionalism, we must start with setting expectations for ethical and professional conduct. Then we must provide experiences in which professionalism can be practiced. The most difficult piece is to evaluate outcomes. Written and oral board exams are incorporating ethical questions. Explicit curriculum topics could include: bioethical dilemmas, conflicts of interest, breaking “bad news,” dealing with death and dying, “Hand-offs” in patient care, conflict resolution, boundary issues, dealing with impaired physicians, student and resident abuse and medication errors and “reconciliation.”

But to quote Stern and Papadakis from the *New England Journal of Medicine* article in 2006: “The concept of ‘teaching’ must include not only lectures in the classroom, small group discussions, exercises in the laboratory, and care for patients in clinic *but also conversations held in the hallway, jokes told in the cafeteria, and stories exchanged about a ‘great case’ on our way to the parking lot.*”



No one can do this perfectly. We are all human and will make mistakes. But I believe it is a fair statement that if we live and work by the values of professionalism, then the rest follows:

- A desire for technical competence and knowledge
- Decreased law suits
- No economic fraud
- Knowledge of the system and its resources
- Improved patient care
- Patient satisfaction

To say it differently, according to Aristotle . . . “We are what we repeatedly do. Excellence, then, is not an act, but a habit.”

And a final word from one of the fathers of the modern medical profession . . . “You are in this profession as a calling, not as a business; as a calling which exacts from you at every turn self-sacrifice, devotion, love and tenderness to your fellow-men. Once you get down to purely business level, your influence is gone and the true light of your life is dimmed. You must work in the missionary spirit, with a breadth of charity that raises you far above the petty jealousies of life.” – Osler 1907

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.

EPICNET UPDATE

In July, 2010, the Eastern Pennsylvania Inquiry Collaborative Network (EPICNet), the Practice-Based Research Network within the Department of Family Medicine at LVHN, along with its research partners, prepared and delivered a report to the Agency for Healthcare Research and Quality called “Systems Approach to Tracking and Increasing Screening for Public Health Improvement in Colorectal Cancer,” or SATTIS-PHI/CRC. This report was part of a study sponsored by the Agency for Healthcare Research and Quality (AHRQ) and funded by the Centers for Disease Control and Prevention (CDC) through AHRQs Accelerating Change and Transformation in Organizations and Networks (ACTION) program. The ACTION program is designed to speed translation of evidence-based strategies into practice. The study used a systems-based approach to increase colorectal cancer screening rates in practices of the Lehigh Valley Physician Hospital Organization (LVPHO). All practices that participated in this intervention were active members of the Lehigh Valley Health Network Medical Staff.

EPICNet contracted with CNA of Alexandria, Va., a non-profit research and analysis corporation, and worked in collaboration with CNA and Thomas Jefferson University of Philadelphia to complete the task.

The report details the intervention methodology used to collaborate with LVPHO and private practices to increase colorectal cancer screening rates. There is wide agreement among physicians on the benefits of colorectal cancer screening, but rates of patient participation remain lower than expected. This gap between physician recommendation and patient participation led to the development of the task order.

The 15 primary care practices involved in the intervention were educated on the most up-to-date colorectal cancer screening guidelines from the American Cancer Society, and joined EPICNet in a process to invite their patients to be screened. Over 8,000 patients received information from the Centers for Disease Control on the importance of screening and screening methods, and were invited by their primary care doctors to participate in screening. Patients received information on how to receive and complete a stool blood test kit, as well as guidance in scheduling a colonoscopy.

When the research team compared results between intervention and comparison practices, the intervention group screening rates were more than twice that of comparison practices. Interviews with patients and practices showed that both were pleased with the process.

“We feel we developed a very successful screening program,” said Brian Stello, MD, EPICNet Director and member of the Department of Family Medicine. “We could not have done so without the support of LVPHO and LVHN. EPICNet is hopeful of future opportunities to do this type of work with primary care practices in the future.”

For more information, please contact Brian Stello, MD, via email or pager 610-402-5100 9413.



LVHN DIGITAL LIBRARY

The AMA Manual of Style is now an eBook

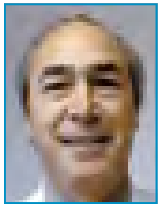
The **AMA Manual of Style** is now available through the LVHN Digital Library as an eBook. This resource allows you to:

- Browse or search the full text of the Manual of Style
- Use Interactive Conversion tables
- Test your editing skills with style quizzes
- Access Web-only tips and word usage commentaries from the editors at *JAMA* and the *Archives* Journals

To access the book from the LVHN Digital Library Homepage go to **Find Fast/Library Services/Writing Resources** on the left hand side navigation frame/**AMA Manual of Style**.

For more information or to schedule a Library training session or demo of resources, contact Kristine Petre in Library Services at 610-402-8408.

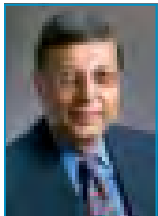
CONGRATULATIONS



Theodore H. Gaylor, MD, Division of Otolaryngology-Head & Neck Surgery, was presented with the American Academy of Otolaryngology-Head and Neck Surgery Honor Award. This prestigious award is given to members of the Academy in recognition

for their volunteer contributions to the Academy and its Foundation. It was presented during the opening ceremony of the 2010 American Academy of Otolaryngology-Head and Neck Surgery Annual Meeting held in Boston, Mass., on September 26.

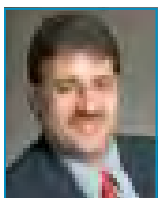
Dr. Gaylor has been a member of the Medical Staff since July, 1979. He is in practice with Cedar Crest ENT Associates, PC.



Indru T. Khubchandani, MD, Division of Colon and Rectal Surgery, was conferred the degree of “Professor Honoris Causa” at the Universidad de Aquino, Bolivia, at a ceremony in Santa Cruz, Bolivia, on September 10. Dr. Khubchandani was awarded Honorary

Membership to the International Scientific and Research Clinic at the University Hospital. He also had the distinction of Honorary Membership to the Bolivian Society of Coloproctology. The International Congress of Bolivian Abdominal and Pelvic Surgical Society was attended by 1,000 registrants, where Dr. Khubchandani gave four invited lectures.

Dr. Khubchandani has been a member of the Medical Staff since January, 1968. He is in practice with John J. Stasik, MD.



Sanjay M. Mehta, MD, co-Medical Director, ICU-M and RHC Surgical/Vascular (LVH-M), has completed his one-year term as President of the Eastern Cardiothoracic Surgical Society (ECTSS). He was elected to a three-year term on the Executive Council of the ECTSS at the

Annual Meeting held October 7-10, in Orlando, Fla. On a separate note, Dr. Mehta will be receiving the Circle of Excellence Award at Freedom High School in Bethlehem on November 5.

Dr. Mehta has been a member of the Medical Staff since May, 2007. He is in practice with Lehigh Valley Heart & Lung Surgeons.



Robert X. Murphy, Jr., MD, Assistant Chief Medical Officer (LVH-M), has been appointed Board Vice President of Health Policy and Advocacy for the American Society of Plastic Surgeons (ASPS) during **Plastic Surgery 2010** – the Society’s annual scientific assembly held October 2-5, in Toronto, Canada.

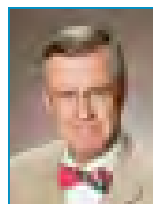
As the ASPS Board Vice President of Health Policy and Advocacy, Dr. Murphy will oversee the governance for quality initiatives and performance improvement, health policy, patient safety, federal/state legislative and regulatory affairs, and economic affairs.

Dr. Murphy has been a member of the Medical Staff since July, 1989. He is in practice with Cosmetic & Reconstructive Specialists of the Lehigh Valley.



Michael F. Szwerc, MD, Chief, Section of Thoracic Surgery, has completed his three-year term as Treasurer of the Eastern Cardiothoracic Surgical Society (ECTSS). He was elected to a one-year term as Vice President and President-Elect of the ECTSS at the Annual Meeting held October 7-10, in Orlando, Fla. At the ECTSS meeting, Dr. Szwerc gave an invited lecture on “Management Options for Locally Advanced Lung Cancer.”

Dr. Szwerc has been a member of the Medical Staff since August, 2005. He is in practice with Lehigh Valley Heart & Lung Surgeons.



Thomas V. Whalen, MD, Chair, Department of Surgery, has been elected Vice Chair of the Board of Regents of the American College of Surgeons for a one-year term. The Regents of the American College of Surgeons is the decision making body of the organization responsible for overall operations and strategy. The Vice Chair is part of core leadership and serves in place of the Chair when he is not available.

Dr. Whalen has been a member of the Medical Staff since October, 2006. He is in practice with LVPG-Pediatric Surgery.

PAPERS, PUBLICATIONS AND PRESENTATIONS



Several members of the Department of Obstetrics and Gynecology co-authored the article – “Randomized Controlled Trial of Wound Complication Rates of Subcuticular Suture vs. Staples for Skin Closure at Cesarean Delivery” – which was published in the September, 2010 issue of the *American Journal of Obstetrics & Gynecology*. The co-authors include **Suzanne L. Basha, MD**, Division of Obstetrics/Gynecology; **Joanne N. Quinones, MD**, **Kara M. Coassolo, MD**, and **Orion A. Rust, MD**, all of the Division of Maternal-Fetal Medicine/Obstetrics; and **John C. Smulian, MD**, Vice Chair, Department of Obstetrics and Gynecology.



Lynn M. Deitrick, PhD, Ethnographer, Department of Community Health, Health Studies, and Education; Terry A. Capuano, RN, MSN, MBA, Chief Operating Officer; and **Debbie Salas-Lopez, MD, MPH**, Chair, Department of Medicine, co-authored the article – “Practicing Anthropology in an Academic Community Hospital: Lessons from the Field” – which was published in *Anthropology*, Volume 32, Number 4, Fall 2010 (p.19-23).



John B. Lang, MD, Department of Anesthesiology, and **Michael T. Hartman, CRNA, DNP**, Certified Registered Nurse Anesthetist, were co-authors of the article – “Acquired Pseudocholinesterase Deficiency” – which was published in *Current Anaesthesia & Critical Care*, Number 21, 2010 (p.297-298).



William L. Miller, MD, MA, Chair, Department of Family Medicine, was a co-author of several articles as part of the final evaluation of the American Academy of Family Physicians’ Patient-Centered Medical Home National Demonstration Project. The articles, which were published in the June, 2010 Supplement of the *Annals of Family Medicine*, are as follows:

- “Context for Understanding the National Demonstration Project and the Patient-Centered Medical Home”
- “Methods for Evaluating Practice Change Toward a Patient-Centered Medical Home”
- “Implementing the Patient-Centered Medical Home: Observation and Description of the National Demonstration Project”
- “Effect of Facilitation on Practice Outcomes in the National Demonstration Project Model of the Patient-Centered Medical Home”
- “Journey to the Patient-Centered Medical Home: A Qualitative Analysis of the Experiences of Practices in the National Demonstration Project”
- “Patient Outcomes at 26 Months in the Patient-Centered Medical Home National Demonstration Project”
- “Primary Care Practice Development: A Relationship-Centered Approach”
- “Summary of the National Demonstration Project and Recommendations for the Patient-Centered Medical Home”



Robert X. Murphy, Jr., MD, Assistant Chief Medical Officer (LVH-M), moderated a panel titled “Prevention of VTE in Plastic Surgery Patients” at the Annual Meeting of the American Society of Plastic Surgeons on October 5 in Toronto, Canada.



Thomas V. Whalen, MD, Chair, Department of Surgery, participated in conducting the following programs at the American College of Surgeons 96th Annual Clinical Congress held October 3-7, in Washington, D.C.:

- “Making the Most of Your Residency Experience” – ACS Division of Education Medical Student Program
- Course Director for the Special Program for Surgical Residents titled “Essential Skills for Surgical Practice: A Primer for Residents”
- Association of Program Directors in Surgery panelist – presented “Best Practices: A Recommended Approach to the Areas of Most Common Citation” for the “RRC Citations and Best Practices to Avoid Them/Milestones – Where Are We and Where Are We Going” session
- Panelist – presented “Perspective of the Residency Review Committee for Surgery” for the “Duty Hour Restrictions for Surgical Residents Impact on Patients, Residents, and Faculty” session

UPCOMING SEMINARS, CONFERENCES AND MEETINGS

First Annual AWARE for All National Clinical Research Education Day

Is clinical research right for you? Come and find out at AWARE for All, a free clinical research information event for the public. The event will be held on **Saturday, November 6**, from 11 a.m. to 2 p.m., in the Kelly Gallagher Atrium in the John and Dorothy Morgan Cancer Center at Lehigh Valley Hospital – Cedar Crest.

Although the program is free, registration is requested in order to plan for the appropriate number of people. For more information or to register, please call 610-402-CARE (2273).

Seizing the Opportunity: Epilepsy 2010

Lehigh Valley Health Network will host **Seizing the Opportunity: Epilepsy 2010** on Tuesday, November 16, from 5 to 9 p.m., in Kasych ECC Rooms 6, 7 and 8 at Lehigh Valley Hospital – Cedar Crest.

The conference is intended for neurologists, primary care physicians, physician assistants, residents/students, nurse practitioners, nurses, EEG technicians and other health care clinicians with an interest in epilepsy.

For more information or to register, please call 610-402-CARE (2273).

Cardiology Grand Rounds

“Arrhythmogenic Right Ventricular Dysplasia: What Does the Clinician Need to Know?” will be presented by Hugh G. Calkins, MD, Professor of Cardiology, Medicine and Pediatric Cardiology, Johns Hopkins University School of Medicine, on **Friday, November 5**, from Noon to 1 p.m., in the hospital Auditorium at Lehigh Valley Hospital – Cedar Crest, and teleconferenced to ECC Room B at Lehigh Valley Hospital – Muhlenberg.

For more information, please contact Caroline Maurer in the Regional Heart Center at 610-402-8215.

Emergency Medicine Grand Rounds

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

November 4 – LVH-M ECC Rooms C and D

- “Vitamin Therapy for Acute Poisonings” and “Chemical Weapons of Mass Destruction” – David Lee, MD, Department of Emergency Medicine, North Shore University Hospital
- Journal Club – Richard MacKenzie, MD
- Ultrasound Series – Kevin Roth, DO

November 11 – LVH-M Banko Building

- Rosen’s Club – “Orthopedic Lesions: Knee and Lower Leg, Ankle and Foot” and “Soft Tissue Injuries: Wounds Management Principles”
- Toxicology Series – Matthew Cook, DO
- Pediatric GI – Jennifer Jozefick, DO
- ENT Emergencies – Richard MacKenzie, MD
- Chair’s Corner – Richard MacKenzie, MD

November 18 – LVH-M Banko Building

- Annual CPC Competition

November 25 – No Grand Rounds – Happy Thanksgiving

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

Medical Grand Rounds

Medical Grand Rounds are held on Tuesdays, from Noon to 1 p.m., in the Auditorium at LVH-Cedar Crest and teleconferenced to ECC Room B at LVH-Muhlenberg and the VTC Room at LVH-17. Upcoming topics for November will include:

- November 2 – Endocrinology Case Presentations – Ya-Yu Lee, MD
- November 9 – Update in Hospital Medicine – Anthony Buonanno, MD, and Daniel Valancius, MD
- November 16 – Update in Neurology – Yuebing Li, MD, PhD, and David Jones, MD
- November 30 – Update in Infectious Disease – Dale Gerding, MD, Chief, Medical Service, VA Chicago Health Care System

For more information, contact Becky Sherman in the Department of Medicine at 610-402-8045.

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Neurology Conferences

The Division of Neurology Conferences are held on Thursdays beginning at Noon. Conferences for November will be held at 1250 S. Cedar Crest Blvd., Fourth Floor Conference Room, and videoconferenced to the Lehigh Neurology Bathgate Office and Kasych Room 4. Topics to be discussed in November will include:

- November 4 – Division Meeting
- November 11 – “New Classifications of Epilepsy and Epilepsy Medications” – Soraya Jimenez, MD
- November 18 – “Management of Concussion – When to Return to Play” – Jay Varrato, DO
- November 25 – No Conference – Happy Thanksgiving

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

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 on the following Tuesdays in November:

- November 2 – Risk Management/Patient Safety topic
- November 9 – Pediatric Hematology/Oncology topic – Anderson Collier, MD
- November 16 – Adolescent Medicine topic – Sarah Stevens, MD, MPH
- November 23 – “Navigating the Special Education Process” – Natalie Reichl, Educational Consultant, Carbon Lehigh Intermediate Unit, and Christa Eck, Occupational Therapy, Good Shepherd Rehabilitation Hospital
- November 30 – TBA

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

Psychiatry Grand Rounds

The next Department of Psychiatry Grand Rounds presentation will be held on **Thursday, November 18**, beginning at Noon (registration at 11:45 a.m.) in ECC Rooms C and D at LVH-Muhlenberg.

“Assessment of Movement Disorders in the Treatment of Psychiatric Disorders” will be presented by Laurence P. Karper, MD, Department of Psychiatry Vice Chair (LVH-M).

For more information, contact Tammy Schweizer at tammy.schweizer@lvhn.org or by phone at 610-402-5766.

Spine Conference

Conferences relating to interesting spine cases are held on the first Wednesday of every 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, November 3**, 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.

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. Topics for November will include:

- November 2 – “Smaller scars, faster recovery, less pain . . . da Vinci Robotic Surgery at LVHN: Where do we go from here?” – Martin A. Martino, MD
- November 9 – “Why We Make Mistakes” – Jeffrey S. Young, MD, Professor of Surgery and Public Health Sciences Director, University of Virginia Trauma Center
- November 16 – “The Morality of Innovation: A 20th Century Surgical Legacy” – Marshall L. Jacobs, MD, Consultant, Department of Pediatric and Congenital Heart Surgery, The Pediatrics Institute, Cleveland, Ohio
- November 23 – “Medicins San Frontieres/Doctors Without Borders – Surgical Missions” – Michael Sinclair, MD, Retired Cardio-Thoracic Surgeon
- November 30 – TBA – H. David Vargas, MD, Associate Professor of Surgery, Head, Section of Colorectal Surgery, University of Kentucky College of Medicine

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

Continued on next page

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 November will include:

- “Adult Learning and Microskills”
 - November 5 – 7:30-9 a.m., Kasych Room 7, LVH-Cedar Crest
 - November 19 – Noon-1:30 p.m., ECC Rooms C and D, LVH-Muhlenberg
- “Remediation and Academic Support”
 - November 12 – 7:30-9 a.m., Banko Rooms 1 and 2, LVH-Muhlenberg
 - November 22 – Noon-1:30 p.m., Kasych Room 7, LVH-Cedar Crest

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 Continuing Education?

Copyright Education

Planning to present at a CE accredited event and/or activity? If the answer is yes, it is important to familiarize yourself with copyright laws. Being proactive prevents presenters and the network from potential copyright infringement. For more information about this topic, please utilize the eLearning Infomastery 1: Copyright Educational Module. From your SSO toolbar, click the eLearning Icon. On your eLearning homepage, type in the Catalog Search Box – Copyright* then click START for the module and follow instructions to complete the course.

For more information or if you have questions, please contact Jane Grube, Associate Director, Continuing Education, at 610-402-2398.

APPROVED CHANGES TO THE MEDICAL STAFF BYLAWS AND RULES AND REGULATIONS

The following revisions to the Medical Staff Bylaws and Rules and Regulations were approved at the General Medical Staff meeting on June 14, 2010, and by the Boards of Trustees of Lehigh Valley Hospital and Lehigh Valley Hospital-Muhlenberg on September 1, 2010.

ARTICLE III, Section B, 2

Discrimination Statement –

~~No aspect of Medical Staff membership or particular clinical privileges shall be denied on the basis of gender, sexual preference, race, age, creed, color, or national origin.~~ Lehigh Valley Health Network does not discriminate on the basis of race, color, national origin, alienage, citizenship status, religion, creed, gender, sexual orientation, disability, healthcare status, age, military status, marital status, genetic predisposition, or any other classification protected by federal, state, or local law. In addition, the Network does not discriminate related to the type of procedure or patients treated in the practitioner’s specialty.

ARTICLE VII, Section B, 1

Leave of Absence –

Request for Leave. Any member of the Medical Staff may request a voluntary leave of absence. To ~~request~~ obtain a leave of absence, a Medical Staff Member shall forward a completed Application for Leave of Absence from the Medical Staff ~~written request~~ to the relevant Department Chair. The Medical Staff Member ~~written request~~ shall specify the reasons for and the length of the leave of absence in the Application. Leaves of absence may be granted for a minimum of six (6) months and up to an initial maximum term of two (2) years.

ARTICLE XII – Section A, 1, 5, 11

Department addition, deletion and change –

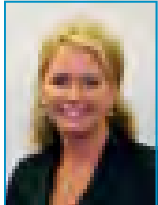
Department of Anesthesiology – Creation of Division of Pediatric Anesthesiology
Department of Medicine – Change the Division of Hospital Medicine to a Section under General Internal Medicine
Department of Radiology-Diagnostic Medical Imaging – Elimination of Section of Trauma Emergency Medicine from Division of Diagnostic Radiology

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

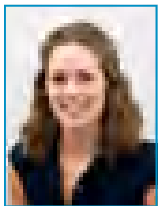
New Appointments



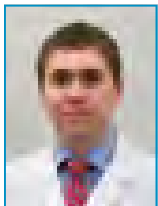
Lori A. Alfonse, DO
Lehigh Valley Surgical Oncology
2597 Schoenersville Road, Suite 201
Bethlehem, PA 18017-7331
Phone: 484-884-3024 Fax: 484-884-3026
Department of Surgery
Division of General Surgery
Section of Surgical Oncology
Provisional Active



Dana R. Burke, 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
Section of Cardiovascular-Interventional Radiology
Provisional Active



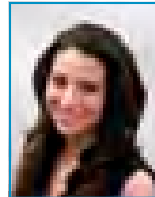
Lauren G. Dugan, DO
LVH-M Emergency Medicine
Lehigh Valley Hospital-Muhlenberg
2545 Schoenersville Road, Fifth Floor
Bethlehem, PA 18017-7384
Phone: 484-884-2888 Fax: 484-884-2885
Department of Emergency Medicine
Division of Emergency Medicine
Provisional Limited Duty



Alex B. Garton, MD
LVH Department of Medicine
Lehigh Valley Hospital
Cedar Crest & I-78, P.O. Box 689
Allentown, PA 18105-1556
Phone: 610-402-5200 Fax: 610-402-1675
Department of Medicine
Division of General Internal Medicine
Provisional Limited Duty



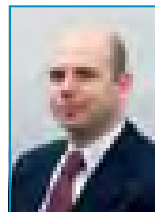
Joseph M. Laureti, DO
Amin Heart Associates
Northwood Medical Arts Bldg.
3735 Nazareth Road
Easton, PA 18045-8338
Phone: 610-258-2588 Fax: 610-252-7951
Department of Medicine
Division of Cardiology
Provisional Active



Melissa B. Leschinsky, 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



Hareth M. Madhoun, DO
LVH Department of Medicine
Lehigh Valley Hospital
Cedar Crest & I-78, P.O. Box 689
Allentown, PA 18105-1556
Phone: 610-402-5200 Fax: 610-402-1675
Department of Medicine
Division of General Internal Medicine
Provisional Limited Duty



Giuseppe M. Militello, MD
Advanced Dermatology Associates, Ltd.
1259 S. Cedar Crest Blvd.
Suite 100
Allentown, PA 18103-6206
Phone: 610-437-4134 Fax: 610-437-2118
Department of Medicine
Division of Dermatology
Provisional Active

Continued on next page

Medical Staff Leadership Appointments

Department of Surgery

David Bub, MD

Colon/Rectal Residency Associate Program Director

Linda L. Lapos, MD

Associate Chief

Division of Colon and Rectal Surgery

Address Changes

Russ S. Bergman, DMD

Newark Beth Israel Medical Center

201 Lyons Avenue

Department of Dentistry, D-9

Newark, NJ 07112-2027

Phone: 973-926-7642 Fax: 973-926-5306

Guillermo Garcia, MD

Pat Toselli, DO

Toselli, Brusko, Garcia & Garcia Surgical Associates

798 Hausman Road, Suite 100A

Allentown, PA 18104-9116

Phone: 610-366-7700 Fax: 610-366-7777

(Effective November 12, 2010)

Change of Primary Location

Timothy M. Pellini, MD

College Heights OBGYN Associates

Health Center at Trexlertown

6900 Hamilton Blvd.

Trexlerstown, PA 18087-9100

Phone: 484-664-2970 Fax: 484-664-2980

Practice Change

Sreedevi K. Sheka, DDS

Bethlehem Pediatric Dental Associates

2299 Brodhead Road, Suite C-1

Bethlehem, PA 18020-8990

Phone: 610-954-5400 Fax: 610-954-9008

Change of Status

Gerald P. Sherwin, MD

Department of Surgery

Division of General Surgery

Section of Surgical Oncology

From: Active To: Honorary

Resignations

Janet E. Erickson, MD

Department of Medicine

Division of General Internal Medicine

(Northern Lehigh Primary Care)

Mark A. Kender, MD

Department of Medicine

Division of General Internal Medicine

(LVPG-Medicine)

Randy A. Rosen, MD

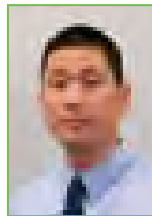
Department of Medicine

Division of Nephrology

(Eastern PA Nephrology Associates)

Allied Health Staff

New Appointments



Jason H. Brennan

Mapping Support Specialist/Pacemaker/ICD Technician

St. Jude Medical

333 Meadowlands Parkway

Fifth Floor

Secaucus, NJ 07094-1804

Phone: 800-722-3423 Fax: 610-530-9875

Supervising Physician: Vadim A. Levin, MD



Robert N. Koehler

Mapping Support Specialist

St. Jude Medical

333 Meadowlands Parkway

Fifth Floor

Secaucus, NJ 07094-1804

Phone: 800-722-3423 Fax: 610-530-9875

Supervising Physician: Vadim A. Levin, MD



Howard C. Pollard

Mapping Support Specialist

St. Jude Medical

333 Meadowlands Parkway

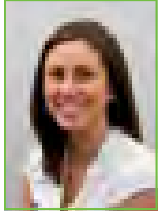
Fifth Floor

Secaucus, NJ 07094-1804

Phone: 800-722-3423 Fax: 610-530-9875

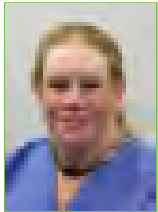
Supervising Physician: Vadim A. Levin, MD

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Kearra M. Wagner, PA-C

Physician Assistant-Certified
Neurosurgical Associates of LVPG
Center for Advanced Health Care
1250 S. Cedar Crest Blvd., Suite 400
Allentown, PA 18103-6224
Phone: 610-402-6555 Fax: 610-402-6550
Supervising Physician: Mei Y. Wong, MD



Johanna M. Ziegler, CST

Certified Surgical Technician
VSAS Orthopaedics
Center for Advanced Health Care
1250 S. Cedar Crest Blvd., Suite 110
Allentown, PA 18103-6224
Phone: 610-435-1003 Fax: 610-435-3184
Supervising Physician: Prodrimos Ververeli, MD

Change of Supervising Physician

Judith J. Canaday, CRNP

Certified Registered Nurse Practitioner
(Bethlehem Gynecology Associates)
From: Helene B. Leonetti, MD
To: Karen M. Sciascia, DO

Emily A. Hafner

Dental Assistant
(Greater Lehigh Valley Oral Health Partnership)
From: S. Clarke Woodruff, DMD
To: Deborah A. Campbell, DMD

Change of Supervising Physician and Status Change

Robyn L. Cimerol

From: Dental Assistant
To: Expanded Duty Dental Assistant
(Greater Lehigh Valley Oral Health Partnership)
From: S. Clarke Woodruff, DMD
To: Deborah A. Campbell, DMD

Latasha S. Connor

From: Dental Hygienist
To: Public Health Dental Hygiene Practitioner
(Greater Lehigh Valley Oral Health Partnership)
From: S. Clarke Woodruff, DMD
To: Deborah A. Campbell, DMD

Heidi P. Gearhart

From: Dental Hygienist
To: Public Health Dental Hygiene Practitioner
(Greater Lehigh Valley Oral Health Partnership)
From: S. Clarke Woodruff, DMD
To: Deborah A. Campbell, DMD

Susan M. Speer

From: Dental Hygienist
To: Public Health Dental Hygiene Practitioner
(Greater Lehigh Valley Oral Health Partnership)
From: S. Clarke Woodruff, DMD
To: Deborah A. Campbell, DMD

M. Christine Yenshaw

From: Dental Hygienist
To: Public Health Dental Hygiene Practitioner
(Greater Lehigh Valley Oral Health Partnership)
From: S. Clarke Woodruff, DMD
To: Deborah A. Campbell, DMD

Resignations

Marie A. Boyle

Dental Assistant
(Marsha A. Gordon, DDS)

Christie J. Kragness

Dental Assistant
(Greater Lehigh Valley Oral Health Partnership)

Sharyn V. Lang, CNS

Clinical Nurse Specialist
(OACIS Services)

Liza M. Towne, PA-C

Physician Assistant-Certified
(Neurosurgical Associates of LVPG)

Erik M. Weikert

Pacemaker/ICD Technician
(St. Jude Medical)

*Happy
Thanksgiving*



Medical Staff Services Office

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President, Medical Staff

Michael J. Pistoria, DO

President-elect, Medical Staff

Linda L. Lapos, MD

Past President, Medical Staff

John W. Hart

Vice President, Medical Staff Services

Janet M. Seifert

*Coordinator, Communications & Special Events
Managing Editor*

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James T. Wertz, DO

Thomas V. Whalen, MD

S. Clarke Woodruff, DMD

*Visit us on the new LVHN internet site at
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"*

Progress Notes is published monthly to inform the Medical Staff, Advanced Practice Clinicians, and employees of Lehigh Valley Health Network of important issues concerning the Medical Staff and Advanced Practice Clinicians.

Articles should be submitted by e-mail to janet.seifert@lvhn.org or sent to Janet M. Seifert, Medical Staff Services, Lehigh Valley Health Network, Cedar Crest & I-78, P.O. Box 689, Allentown, PA 18105-1556 by the 15th of each month.

If you have any questions about the newsletter, please contact Mrs. Seifert by e-mail or phone at (610) 402-8590.