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Fall 2020

## Better Medicine

Lehigh Valley Health Network

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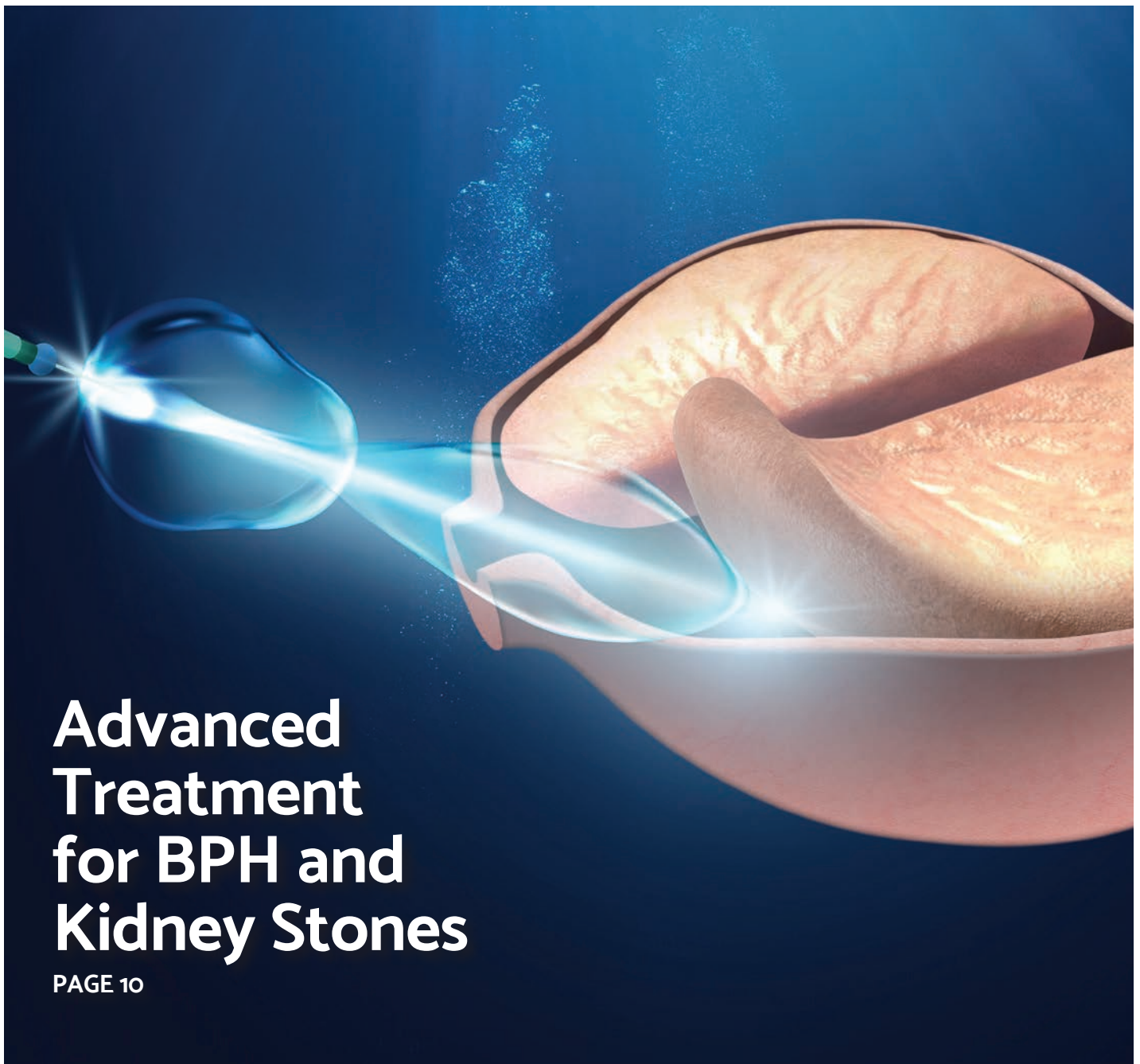
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PARTNERS IN  
**BETTER**  
MEDICINE



**Advanced  
Treatment  
for BPH and  
Kidney Stones**

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## Leadership Observations

# Organized Medical Staff Gives Physicians a Voice

BY PATRICIA MARTIN, MD

About the author: Patricia Martin, MD, is President of the Lehigh Valley Health Network medical staff.



**Patricia Martin, MD**  
Diagnostic radiology

### THE JOINT COMMISSION DEFINES ORGANIZED MEDICAL STAFF AS FOLLOWS:

A self-governing entity accountable to the governing body that operates under a set of bylaws, rules and regulations, and policies developed and adopted by the voting members of the organized medical staff and approved by the governing body.

The organized medical staff plays a critical role in driving day-to-day operations, ensuring excellent care and supporting performance improvement among the medical staff.

The Lehigh Valley Health Network (LVHN) organized medical staff is governed by the Medical Executive Committee, which includes all Department Chairs, Physicians in Chief of the Cancer Institute, Heart Institute and Institute for Surgical Excellence, all Chief Medical Officers, the Chief Nursing Officer, the Chief of Quality and Patient Safety, and all Executive Medical Leadership Chairs. The President and CEO, as well as the Chairman of the Board of Trustees, are non-voting members, and we receive invaluable support from medical staff, especially with regard to credentialing and compliance issues.

### Allowing flexibility

As the network has grown, we've learned valuable lessons on how to foster unity and ensure universally high standards while also allowing individual hospitals the flexibility they need to manage their own challenges. For example, Lehigh Valley Hospital-Pocono and Coordinated Health, which joined the network in 2017 and 2019, respectively, have elected


to keep their own governance structures but are still kept apprised of Medical Executive Committee activities and requirements.

### Addressing physician well-being

The most important role the organized medical staff plays is ensuring that LVHN physicians have a voice. To that end, we manage credentialing and privileging issues and provide input on network policies, clinical practice guidelines and disciplinary guidelines. We invite all network physicians to join us at our monthly meetings to bring up any issues

or concerns. We're also striving to make these meetings relevant to a wide physician audience. Our March 2020 meeting, for example, featured our first guest speaker, David Barbe, MD, a former president of the American Medical Association.

One of the key issues the organized medical staff is targeting this year is physician burnout. Joseph Patrino, MD, a past president of the medical staff and our new Chief Wellness Officer, will be overseeing our efforts to improve physician well-being, which will include administering anonymous mental wellness surveys, offering a peer-to-peer counseling service, and making changes to our credentialing and privileging policy language to help de-stigmatize mental health issues.

I encourage all physicians to consider taking an active role in the organized medical staff, whether that means attending Medical Executive Committee meetings or serving in an official capacity. We are always looking to hear from as many voices as we can to make LVHN the best it can be for all our clinicians. 

*I encourage all physicians to consider taking an active role in the organized medical staff.*

# COVID-19 Patients Thrive After Inpatient Rehabilitation

EXTENSIVE TIME IN ICU PROMPTS NEED FOR INTENSE THERAPY POST-ILLNESS

**INPATIENT REHABILITATION THERAPISTS WERE AMONG LEHIGH VALLEY HEALTH NETWORK (LVHN) HEALTH CARE PROVIDERS AND STAFF** who stepped up in unprecedented ways to assist patients in recovering from severe COVID-19 impairments.

“Surviving the critical part of the illness was a battle, and the recovery afterward was hard work,” says physiatrist Beth Stepanczuk, MD, with LVPG Physiatry. Many COVID-19 patients who spent extensive time in ICU had post-ICU syndrome, a spectrum of conditions that includes critical illness neuropathy, critical illness myopathy, respiratory failure, dysphagia and/or cognitive deficits.

“These patients could survive COVID-19, but they could only thrive with intense rehabilitation,” Stepanczuk says.

## Road to recovery

Fortunately, patients were highly motivated. “Everyone tried as hard as they could and stuck with the program,” Stepanczuk says.

After COVID-19 patients were discharged from an LVHN ICU stepdown unit, they were transferred to the Inpatient Rehabilitation Center (IRC) at LVH-Cedar Crest, LVH-Muhlenberg, LVH-Hazleton, LVH-Schuylkill or LVH-Pocono. Because each acute IRC is located within the hospital, “we have access to the specialists who treated these patients,” Stepanczuk says. “If a patient has a tracheostomy, for example, we can work with the surgeon who treated the patient to work on early decannulation.”


## Small steps to success

Acute inpatient rehabilitation during the initial COVID-19 surge generally consisted of 30- to 60-minute intermittent sessions for a total of three hours daily. Under the guidance and encouragement of physical, occupational and speech therapists, patients practiced breathing techniques and simple tasks, such as walking short distances, speaking, swallowing, standing up from a chair and getting dressed, with the goal of being able to do activities of daily living at home.



While social distancing and universal masking precautions keep patients and staff safe, they presented challenges. Patients had to do their rehabilitation exercises in their rooms, for example, instead of exercising in the IRC's state-of-the-art therapy gym.

Still, rehabilitation therapists found creative ways to work around COVID-19 barriers. Inpatient rehabilitation therapists at LVH-Muhlenberg transformed a surplus large negative-pressure patient room into a small gym for individual exercise, complete with a NuStep for aerobic exercise, parallel bars, weights, bands, cones and a hospital stretcher to simulate the use of a therapy mat.

After an average of 14 days, many COVID-19 patients were discharged to home. “It was so gratifying to see patients who initially couldn't stand up without assistance walk out of rehab,” Stepanczuk says. 



**Beth Stepanczuk, MD**  
Physiatry

➤ To refer a patient for rehabilitation, call **888-402-LVHN (5846)**.



# New Acute Care Complex Poised to Open

FLEXIBLE, COMPREHENSIVE EMERGENCY MEDICINE FACILITY WILL BE ONE OF NATION'S LARGEST



**David Burmeister, DO**  
Emergency medicine

SINCE MARCH 2019, THE LEHIGH VALLEY COMMUNITY HAS WATCHED CONSTRUCTION TO ENLARGE THE EMERGENCY DEPARTMENT AT LEHIGH VALLEY HOSPITAL (LVH)–CEDAR CREST. However, there is more going on than many people realize. “This is more than an ER – the emergency room is just one component,” says David Burmeister, DO, Chair, Department of Emergency and Hospital Medicine, Lehigh Valley Health Network (LVHN), with LVP Emergency Medicine. “We’re really building a comprehensive acute care complex that’s like nothing I’m aware of anywhere else in the country.”

Set to open in December, the facility’s construction was spurred by space constraints in providing acute, trauma and emergency care for both adults and children at LVH–Cedar Crest. The new complex increases the number of adult ED beds from 42 to 97, and Children’s ER beds from 12 to 27.

## Flexible, modular design

A new three-bay trauma center lies at the center of the complex with the new ED proximal to it. Surrounding these areas is a 59-bed observation unit for patients who need additional care but not an inpatient hospital stay. “Having a directly adjacent observation unit in the same building is something we’ve wanted for 20 years,” Burmeister says.

Many beds can be used flexibly for either ED or observation purposes. “If we get 20 or 30 ED patients at once – and that has happened – we can draw on adjacent observation flex beds,” Burmeister says. “Likewise, some of the ED can be used for observation.” Multiple 12-bed modules can easily be opened or closed as patient volumes fluctuate.

➤ To refer a patient for acute care, call **888-402-LVHN (5846)**.

“The entire facility is intended to allow more efficient movement of patients and more efficient care,” Burmeister says. Included is a radiology infrastructure with MRI, CT scan and X-ray capabilities; two helipads for air transport; physical therapy facilities; a laboratory; a trauma center with its own operating room; and an area for acute psychiatric and behavioral health care.

“We can even do transesophageal echocardiograms within this space,” Burmeister says. “Putting this facility together required collaboration across specialties like I’ve never seen before, which speaks to how LVHN can coordinate care for our community.”

## Positioned for growth

About 90,000 people receive care in the adult and children’s emergency departments every year, and Burmeister anticipates volume will grow with the space. The completed pavilion will comprise almost 160,000 square feet – “one of the largest facilities of its kind in the country and certainly the largest in Pennsylvania,” Burmeister says.

The complex also will include information technologies that will facilitate communication between providers, patients and families while ensuring patient privacy and better adapting care to new realities and expectations imposed by the COVID-19 pandemic.

“LVHN already provides optimal care for the sickest patients in the Lehigh Valley, and this project takes us to another level,” Burmeister says. “It’s one of multiple ways that LVHN on the whole – and our leadership deserves an incredible amount of credit for this – has shown the dedication we have to this community.”





# LVHN's Pediatric Oncology Group Collaborates to Fight Childhood Cancer

COMPREHENSIVE SERVICES OFFERED CLOSE TO HOME

WHEN A PEDIATRIC PATIENT HAS ABNORMAL IMAGING OR LAB WORK, the pediatric oncology team at Lehigh Valley Reilly Children's Hospital offers world-class diagnostic and treatment capabilities close to home, with the goal of mitigating long-term side effects.

"Many patients with pediatric malignancies are curable," says Dennis Sopka, MD, Division Chief of Radiation Oncology at Lehigh Valley Reilly Children's Hospital. "With more children surviving pediatric cancer, we're exceptionally cautious not just about the treatment's effectiveness today, but about the implications of that treatment down the road."

## Tumor board and case conference management

Children with pediatric cancers, such as leukemia, lymphoma, including Hodgkin lymphoma, neuroblastoma, Wilms' tumor, medulloblastoma and sarcoma can receive all of their care at Lehigh Valley Reilly Children's Hospital.

"For the majority of our pediatric cancer patients, we can provide the whole scope of services," says J. Nathan Hagstrom, MD, Chair, Department of Pediatrics, who is also a pediatric hematology oncology physician. "We have highly trained and experienced pediatric specific oncologists, surgeons, radiologists, pathologists, pharmacists and radiation oncologists, as well as experienced pediatric oncology nurses, child-life specialists and social workers." The team at Lehigh Valley

Reilly Children's Hospital has a tumor board every month and a patient care conference every week, which fine-tunes a patient's prospective care plan.


The tumor board draws upon the expertise of pathology, radiology, pediatric medical oncology, pediatric hematology oncology and radiation oncology to provide the patient and his or her family with a comprehensive care plan.

"Case conferences improve our ability to take care of these challenging patients from a multidisciplinary perspective," Sopka says.

Eligible patients also can participate in major clinical trials. Lehigh Valley Health Network is a member of Children's Oncology Group, the world's largest international clinical trials organization devoted exclusively to childhood and adolescent cancer research.

## CHOP partnership

For the occasional pediatric patient who requires a specialized treatment that cannot be offered locally, Lehigh Valley Reilly Children's Hospital's pediatric oncology team will partner with specialists at a larger center, such as Children's Hospital of Philadelphia (CHOP), to provide the care.

"Through our collaboration with CHOP, patients with a specialized treatment need can receive the clinical service they need, while maintaining the remainder of their treatment and follow-up care with Lehigh Valley Reilly Children's Hospital," Sopka says. It's all part of the commitment to ensure the best possible outcome for these young patients. 

## DEDICATED TEAMWORK

It takes a village to treat a child with cancer, including this comprehensive team of physicians at the Children's Cancer Center at Lehigh Valley Reilly Children's Hospital.

### Pediatric oncology

J. Nathan Hagstrom, MD  
Felipe Bautista Otanez, MD  
Jacob Troutman, DO  
Daniel Zinn, MD

### Pediatric surgery

Marybeth Browne, MD  
Daniel Relles, MD  
Sarah Jones Sapienza, MD

### Radiation oncology

Dennis Sopka, MD

### Pediatric radiology

Alex Kowal, MD  
Bret Kricun, MD  
Ross Myers, MD  
Howard Rosenberg, MD

### Pathology

Mini Abraham, MD  
Shereen Gheith, MD  
Elsie Lee, MD  
Gary Stopyra, MD

### Pediatric oncology pharmacy

Kristen Held-Wheatley, PharmD

### Pediatric urology

Michele Clement, MD

### Pediatric plastic surgery

Wellington Davis, MD

### Pediatric ENT

Sri Kiran Chennupati, MD  
Roy Rajan, MD

 To refer a patient for oncology care, call **888-402-LVHN (5846)**.



# How Lehigh Valley Cancer Institute Keeps Patients Safe During COVID-19

OFFERING THE SAME EXCEPTIONAL CANCER CARE WHILE PROTECTING VULNERABLE PATIENTS



**Roberto Fratomico, MD**  
Hematology oncology

**THE COVID-19 PANDEMIC CONTINUES TO BE A STRESSFUL TIME FOR EVERYONE, BUT THE CHALLENGES FEEL EVEN GREATER FOR PATIENTS RECEIVING CANCER TREATMENT.** Physicians and nurses at Lehigh Valley Cancer Institute have worked together throughout this crisis to ensure cancer patients continue receiving outstanding care and leading-edge treatments while also minimizing their risk for contracting the virus.

“Because some cancer patients may be immunosuppressed and more susceptible to COVID-19, we’ve made multiple accommodations to ensure they’re being treated safely and that our caregivers are also protected,” says hematologist/medical oncologist Roberto Fratomico, MD, with LVPG Hematology Oncology. “We continue to be here for patients and their loved ones providing the same personalized, convenient and compassionate care we always have.”

## Pandemic plan

The Cancer Institute has worked to adapt efficiently to changing patient and staff needs during the COVID-19 crisis while also maintaining its commitment to providing world-class care that patients expect. Its multiple locations throughout the region continue to offer the latest treatments and surgical techniques, access to prestigious clinical trials, and collaborations

with renowned cancer experts around the world via the Cancer Institute’s membership in the Memorial Sloan Kettering Cancer Alliance.

COVID-related changes include operational shifts at some locations, as well as new safety measures for in-person visits.


On the operations side, one change is the discontinuation of infusion services at LVPG Hematology Oncology-Lehigh. However, the practice remains open and a new transportation service is now available, too. The service, developed by the Cancer Institute and Lehigh and Northampton Transportation Authority (LANTA), provides free transportation from oncology patients’ homes in Carbon County to appointments at John and Dorothy Morgan Cancer Center at Lehigh Valley Hospital-Cedar Crest. Infusion patients also are being referred to other Cancer Institute infusion centers, including Health Center at Bangor, LVH-Cedar Crest in Allentown, LVH-Hazleton, LVH-Muhlenberg in Bethlehem, LVH-Pocono in East Stroudsburg and LVH-Schuylkill in Pottsville.

## Commitment to safety, continuity of care

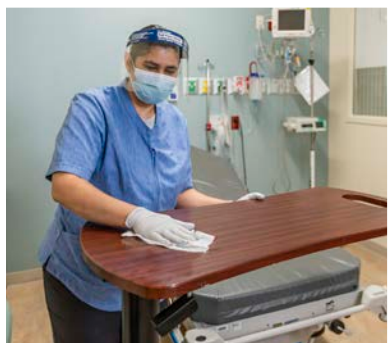
Also new are multiple safety measures designed to reduce the spread of COVID-19 at Cancer Institute facilities without unduly burdening patients or disrupting their care.

“We’re operating fairly normally,” Fratomico says. “Anyone who needs cancer treatment can get the treatment they need with few limitations except for some day-to-day precautions.”

Safety protocols include:

- Screening patients and visitors for COVID-19 symptoms the day before their visit and during check-in, including taking their temperature
- Requiring patients and visitors to wear face masks at all times
- Limiting the number of patients in waiting rooms, with seats spaced for proper social distancing
- Allowing only one family member or friend to accompany patients during visits (occasional exceptions are made when multiple people will be involved in patient care)
- Cleaning and disinfecting facilities on a daily basis
- Offering patients the option of virtual appointments, including phone and video visits 

➤ To refer a patient for oncology care, call **888-402-LVHN (5846)**.





# New Inpatient Oncology Unit Features Infection Control and Comfort Amenities

CANCER SURVIVORS PROVIDED INPUT ON DESIGN



**Suresh Nair, MD**  
Hematology oncology

LEHIGH VALLEY CANCER INSTITUTE RECENTLY OPENED ITS NEW INPATIENT UNIT AT LEHIGH VALLEY HOSPITAL (LVH)-CEDAR CREST. “The unit was specifically designed to meet the unique safety, privacy and comfort needs of our oncology population,” says oncologist Suresh Nair, MD, Physician in Chief with Lehigh Valley Cancer Institute. Located on the fifth floor of the Kasych Family Pavilion, the new unit features 22 specialized private rooms and much more.

## Safety zone

Each of the private patient rooms features positive pressure and HEPA filters in the ceiling to help reduce the spread of infectious contaminants. Positive pressure rooms are important when treating immunocompromised patients. Positive pressure rooms maintain a higher pressure in the treated room, compared to the neighboring environment, to filter the air by forcing airborne particles originating in the room out and inhibiting potential contaminants in the surrounding environment from entering. Air is also circulated through HEPA filters to control the movement of airborne contaminants.

Additionally, six patient rooms also feature negative pressure in an anteroom to protect both staff and other patients. In a negative-pressure anteroom, air pressure is reduced to contain airborne contaminants, such as viruses, fungi, bacteria, yeast, molds and gases, within the room. Negative pressure helps prevent aerosolized infections from exiting into the hallway.

“Patients and staff will be protected by these unique features, which gives peace of mind to patients and their families,” Nair says.

## Technology and homelike aesthetic

The new inpatient oncology unit is designed to help patients feel at home. “The Patient-Centered Experience (PCE) Advisory Council, which is composed of cancer survivors, took a lead effort in the designing of the floor,” Nair says. Council members added three benches spread out over the floor so patients can take a break when they’re on their walks. Other comforts of the new inpatient oncology unit include:

- 55-inch TVs with Bluetooth compatibility so patients can stream television and movies in their room using their own phone or computer
- Smart beds equipped with chargers and a modern built-in headboard against the wall for a more homelike aesthetic
- A computer workstation
- Access to a private bathroom and showers with a foldable chair attached to the wall and a ceiling lift
- A magnetic board for patients to post personal items, such as cards, photos and inspirational quotes

There is also a meditation room for both patients and colleagues with comfortable seating, dimmable lighting, aromatherapy, white noise and a small TV for guided meditation.

“I’m amazed at the warmth, compassion and professionalism of our nurses and staff,” Nair says. “Now, we have a floor to match that warmth and compassion. It’s exciting to be in this very healing environment.”

➤ To refer a patient for oncology care, call **888-402-LVHN (5846)**.



# LVHN Offers New Robotic Surgical Technique for Ulcerative Colitis

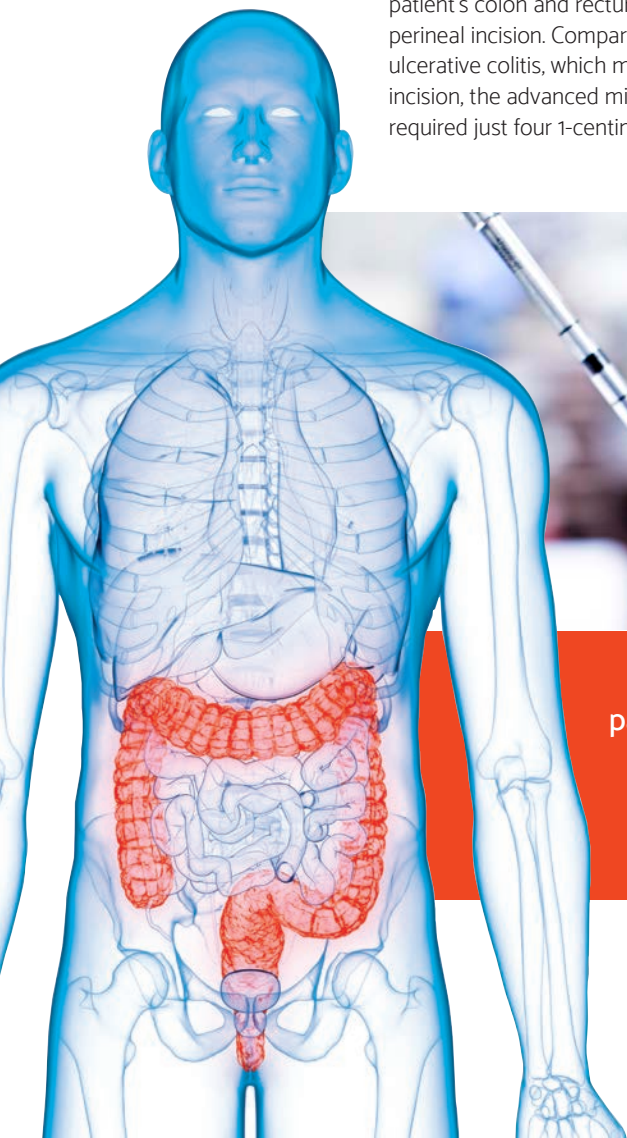
SMALL INCISIONS MEAN LESS BLOOD LOSS, LESS PAINFUL RECOVERY, SHORTER HOSPITAL STAY



**Mikhail Rakhmanine, MD**  
Colon and rectal surgery

**UP TO 30 PERCENT OF PATIENTS WITH ULCERATIVE COLITIS WILL REQUIRE SURGERY IN THE COURSE OF THEIR DISEASE**, according to the Crohn's & Colitis Foundation. Surgery becomes an option when patients with ulcerative colitis fail medical treatment or develop complications.

Colon and rectal surgeon Mikhail Rakhmanine, MD, with Lehigh Valley Institute for Surgical Excellence at Lehigh Valley Health Network, and his team recently performed the region's first robotic proctocolectomy for ulcerative colitis. During the precise operation, the patient's colon and rectum were removed through a perineal incision. Compared with traditional surgery for ulcerative colitis, which may require a 12-inch abdominal incision, the advanced minimally invasive surgery required just four 1-centimeter incisions in total.



Up to 30 percent of patients with ulcerative colitis will require surgery in the course of their disease.

"The patient was very happy because recovery wasn't so painful and resulted in a short hospital stay," Rakhmanine says. The patient was discharged to home after three days. With traditional laparoscopic surgery for ulcerative colitis, hospital stays may extend to six days or longer.

## A frontier in ulcerative colitis treatment

Rakhmanine and his surgical team performed the minimally invasive surgery using the da Vinci Xi robotic surgical system, which allows surgeons to operate in all parts of the abdomen.


Other advantages of da Vinci Xi system include a magnified surgical field and jointed robotic instruments for greater surgical dexterity.

"The da Vinci Xi provides greater visualization, better control with mobility in the robotic arms and less trauma to tissue," Rakhmanine says. Performing robotic abdominal proctocolectomy for severe ulcerative colitis with the da Vinci Xi requires an elite team of highly skilled and credentialed surgeons, nurses and bedside assistants who are experienced in working with the advanced technology. Rakhmanine and his team have previously performed the surgery, but in stages.

"Here, we combined everything in one patient," he says. The surgery spanned four hours, which was comparable to traditional laparoscopic proctocolectomy for ulcerative colitis.

## Numerous advantages

Overall, robotic abdominal proctocolectomy offers the advantages of small incisions, which can translate to less blood loss during surgery, a less painful recovery period, shorter hospital stays, and a faster return to work and other daily activities. The advanced surgery for ulcerative colitis is now being offered at Lehigh Valley Hospital (LVH)—Cedar Crest and LVH—Muhlenberg.

"We look forward to offering this minimally invasive option to more patients with severe ulcerative colitis who require surgery," Rakhmanine says. 

 To refer a patient for surgical care, call **888-402-LVHN (5846)**.

# Bariatric Surgery Resumes at LVHN to Help Patients Improve Their Health

A HEALTHY BMI IS ASSOCIATED WITH A REDUCED RISK FOR COVID-19 COMPLICATIONS

**PATIENTS WITH A BMI OF 40 OR GREATER, OR THOSE WITH A BMI OF 35 OR GREATER AND A PREEXISTING CONDITION**, such as type 2 diabetes, hypertension, sleep apnea, reflux, arthritis or fatty liver disease, shouldn't wait until the COVID-19 era has resolved to consider or undergo bariatric surgery.

In a new position statement, the American Society for Metabolic and Bariatric Surgery calls for the safe and rapid resumption of bariatric procedures, which have largely been postponed along with other surgeries deemed elective during the COVID-19 pandemic.

That's because bariatric surgery may be lifesaving, especially during COVID-19. People with a BMI of 30 or above who contract COVID-19 have a greater risk of severe illness, according to the Centers for Disease Control and Prevention. Moreover, a study published in August 2020 in the Annals of Internal Medicine involving 6,916 patients with COVID-19 found that a BMI  $\geq 40$  was associated with a stepwise increase in the adjusted risk of death, compared with a healthy BMI of 18.5-24.<sup>1</sup>

"Adipose tissue isn't just a mechanical stress on the body. It also creates a chronic inflammatory state that impacts the immune system," says T. Daniel Harrison, DO, with LVPG General, Bariatric and Trauma Surgery. "We have specific examples within our network of patients who had bariatric surgery last fall, lost 80 to 90 pounds, contracted COVID-19 in April and did just fine. We can't say for sure, but if they hadn't lost the weight, their outcomes might have been different."

## Bariatric surgery safeguards

Lehigh Valley Health Network (LVHN) resumed offering bariatric surgery in early May 2020 and is taking every precaution to improve patient safety. Before surgery, bariatric surgical patients undergo COVID-19 testing; they're also screened before entering the hospital. All operating room and endoscopy suites are equipped with portable ventilation units to increase the exchange of fresh air. After surgery, bariatric patients recover on a dedicated bariatrics floor, in single-patient rooms, where COVID-19 patients haven't been treated. Patients are discharged quickly, usually within a day or so.

## Not the easy way out

Sleeve gastrectomy, in which surgeons reduce stomach volume by 85 percent, is the most common bariatric surgery performed at LVHN and throughout the country, Harrison says. The surgery, which can be performed by robotic surgery, restricts the volume of food patients can consume at one time and surgically removes stomach tissue that contains appetite-stimulating hormones to decrease hunger drive. Sleeve gastrectomy can help patients lose up to 70 percent of their excess body weight within two years and dramatically improve their health.

"Bariatric surgery is the most effective solution for long-term weight loss, compared to anything else, but it's always a struggle for patients in the beginning," Harrison says. "After the first few days though, they wish they'd done it long ago." 🦋



**T. Daniel Harrison, DO**  
Surgery

➤ To refer a patient for bariatric surgery, call **888-402-LVHN (5846)**.



People with a **BMI  $\geq 30$**  who contract COVID-19 have a **greater risk for severe illness**

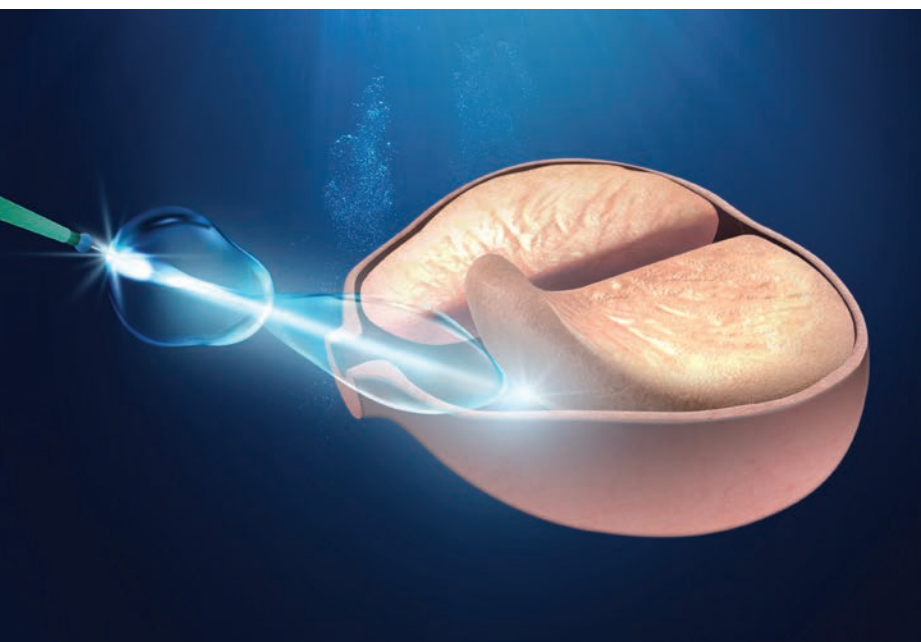


A study of COVID-19 patients found that a **BMI  $\geq 40$**  was associated with an **increased risk of death**



Sleeve gastrectomy can help patients lose up to **70% of excess body weight** within two years and **dramatically improve their health**

1. "Obesity and mortality among patients diagnosed with COVID-19: results from an integrated health care organization." S.Y. Tartof et al. Annals of Internal Medicine. 2020 Aug 12; M20-3742. doi: 10.7326/M20-3742. Online ahead of print.



# Laser Technologies Offer Advanced Treatment for BPH and Kidney Stones

HOLEP AND MOSES SYSTEMS ALLOW SAME-DAY SURGERIES IN MANY CASES



**James Johannes, MD**  
Urology

LEHIGH VALLEY HEALTH NETWORK'S (LVHN) INVESTMENT IN STATE-OF-THE-ART LASER TECHNOLOGY FOR UROLOGY APPLICATIONS has made the network a tertiary referral center for treatment of prostate enlargement and kidney stones throughout the mid-Atlantic region.

That's especially true with the addition of a MOSES high-powered laser system from Lumenis, a premiere manufacturer of surgical lasers. The MOSES system enhances holmium enucleation of the prostate (HoLEP) technology that LVHN has used for five years.

## Improved treatment options

HoLEP already has improved prostate treatment options for men with urinary symptoms of benign prostatic hyperplasia (BPH), such as difficulty getting a stream going or inability to completely empty the bladder. Standard therapy for decades had been transurethral resection of the prostate (TURP), in which a resectoscope equipped with a cautery instrument and inserted into the urethra is used to shave away excess tissue inside the gland.

"But TURP entailed a lot of bleeding, and its effectiveness waned in prostates larger than 80 grams," says urologic surgeon James Johannes, MD, with LVPG Urology.

Surgeons using HoLEP open the natural plane between the transition zone (through which the urethra passes) and the peripheral zone (the gland's largest area) in a process Johannes likens to peeling an orange.


"The end result is that you remove the entire inside of the prostate – far more tissue than with TURP or photo vaporization of the prostate," an earlier type of laser treatment, he says. Excess tissue is deposited in the bladder and removed with a morcellator.


HoLEP relieves BPH symptoms as well as or better than TURP but with fewer adverse events, less bleeding and shorter hospital stays.<sup>1</sup> Men undergoing HoLEP initially have a slightly higher risk for incontinence than with TURP, but rates even out after a year. Guided by a perioperative pathway that Johannes helped develop, HoLEP has become a same-day surgery for about 84 percent of men who receive the treatment at LVHN.

## Not widely available

LVHN alone provides HoLEP or MOSES treatment in the Lehigh Valley. "HoLEP is not widely adopted in the United States because there's a long learning curve to mastering the technique," Johannes says. "Only a handful of surgeons do these procedures in the entire mid-Atlantic." Johannes has had men travel from New York City, Long Island, Philadelphia, New Jersey and Connecticut to receive HoLEP treatment at LVHN.

The network now has five holmium lasers plus the MOSES system with its enhanced lithotripsy capability. While lasers already are used to break up kidney stones, the process typically entails painstakingly retrieving smaller stones during surgery with a tiny basket-like instrument. MOSES applies higher energy and breaks stones into tinier particles that flush out painlessly in a technique known as dusting.

"MOSES achieves a higher stone-free rate and is able to speed surgery by as much as 50 percent, so there's less anesthesia and patients go home sooner," Johannes says. "I first thought claims were just marketing, but when we tried the system here, there was such a huge clinical difference that LVHN decided to invest in the technology to better serve our community." 

 To refer a patient for urology care, call **888-402-LVHN (5846)**. To learn more, go to **LVHN.org/HoLEP** and **LVHN.org/BPH**.

1. "A randomized trial comparing holmium laser enucleation of the prostate with transurethral resection of the prostate for the treatment of bladder outlet obstruction secondary to benign prostatic hyperplasia in large glands (40 to 200 grams)." A.H.H. Tan et al. Journal of Urology. 2003; 170(4 Pt 1): 1270-4.



# Pain Management Physicians Deploy Video Visits for New Referrals

VIRTUAL EVALUATIONS MANAGE EXPECTATIONS AND HELP CLARIFY NEXT STEPS



**Bruce Nicholson, MD**  
Pain management



**Jennifer Roeder**  
Musculoskeletal services

**IN AN EFFORT TO EXPAND ACCESS AND PROVIDE APPROPRIATE, EFFECTIVE CARE**, LVPG Pain Management physicians are now offering all newly referred patients the option for a video visit on MyLVHN, the Epic patient portal used by Lehigh Valley Health Network.

"Video visits allow us to meet prospective patients faster, often within a few days of the referral request, and quickly gain an understanding of their needs and expectations," says Bruce Nicholson, MD, Chief, Division of Pain Medicine, with LVPG Pain Specialists.

Jennifer Roeder, Administrator for LVPG Musculoskeletal Services, notes that although video visit utilization increased exponentially in response to the COVID-19 pandemic, the modality went from being a stopgap measure to an essential one.

"Physicians were surprised at how receptive patients were to this modality," she says. "Virtual access gives the providers the ability to interact with patients in a safe and secure manner, discuss patient expectations and collaborate with them on a plan of care."

## Benefits for patients and physicians

Nicholson offers several reasons why video visits may be preferable to in-person evaluations when seeing patients for the first time. "Patients are typically more relaxed, since they haven't commuted or been asked

to wait in an unfamiliar office," he says. "They are more focused on the conversation and better able to discuss their issues."


"On the physicians' side, we've found that our ability to do evaluations through video visits is much better than we anticipated," he says. "We're able to read patients' body language, pick up cues based on their affect and demeanor, and even do a basic physical exam."

Patients with acute issues are able to access treatment faster. Nicholson recently cared for a referred patient with a herniated disc who had required treatment in the Emergency Department. "Rather than asking him to come in to the office, I saw him virtually the day after he was discharged from the hospital and was able to prescribe physical therapy and the appropriate medications, as well as discuss the possibility of pain management injections," he says.

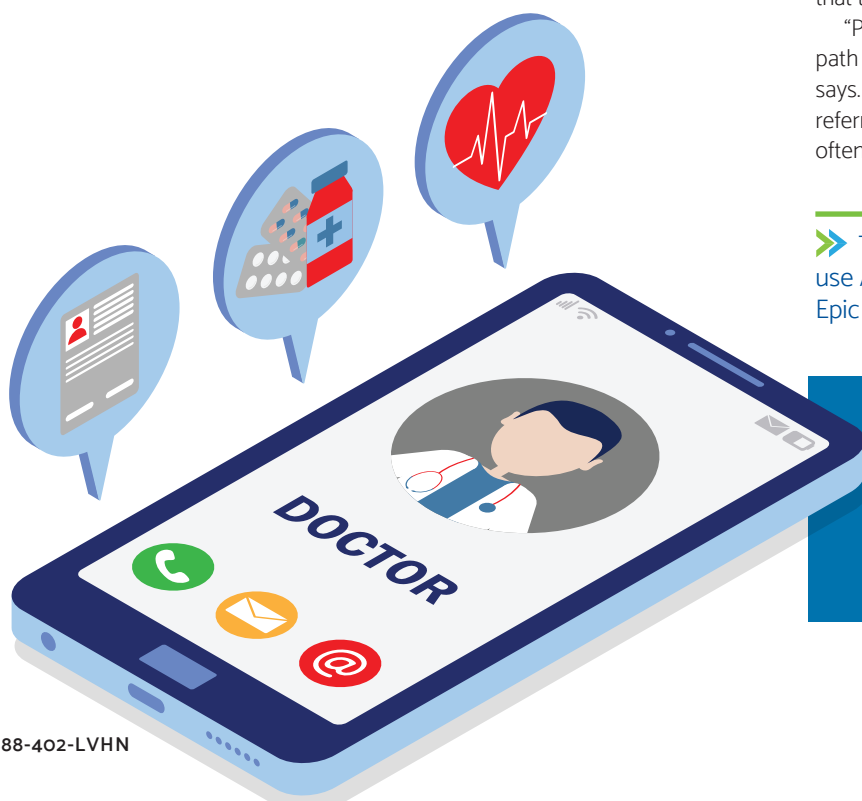
## Managing expectations

At the end of the video visit, Nicholson says, physicians have a clear idea of whether LVPG Pain Specialists can help. "Half the time, we suggest that patients come in for an in-person evaluation; the rest of the time we advise patients to continue with their treatment plan with their regular physician," he says.

In those cases where Nicholson feels there is nothing more to offer these patients, they can provide reassurance that their current provider's plan of care is appropriate.

"Providing confirmation that they are on the right path encourages patients to stay the course," Nicholson says. "Our goal is to provide quicker access for our referring providers and to partner on co-managing these often complex patients." 

 To refer a patient for pain management, use AMB REF LVPG PAIN SPECIALISTS in Epic or call **610-402-1757**.



Utilization increased exponentially in response to the COVID-19 pandemic, and video visits went from being a stopgap measure to an essential one.

# Cochlear Implant Program Helps Patients Regain Hearing and Quality of Life

OFFERS ADULTS OPPORTUNITY FOR PRE- AND POSTOPERATIVE CARE CLOSE TO HOME



**Alicia Kittle, AuD**  
Audiology



**Kevin Kriesel, MD**  
Otolaryngology

**HEARING AIDS MAY RESULT IN DRAMATICALLY IMPROVED HEARING FOR PATIENTS WITH SENSORINEURAL HEARING LOSS**, which results from deterioration of the neural pathways in the inner ear. When hearing aids lose their effectiveness, adult patients may benefit from the Cochlear Provider Network (CPN) Cochlear Implant Program.

Lehigh Valley Health Network (LVHN) has a pediatric ENT who performs cochlear implant surgery in children, but not an ENT who performs the surgery in adults. The CPN Cochlear Implant Program, however, enables LVHN to expand its services to include cochlear implants to help adult patients with hearing loss achieve optimal outcomes.

## Coordinated care network

Through an agreement with Cochlear Americas, the CPN Cochlear Implant Program allows adult patients with profound hearing loss to see LVHN providers for preoperative and postoperative care, and an adult ENT cochlear implant surgeon from outside the network for cochlear implant surgery.

Adult patients experiencing hearing loss can be referred to Kevin Kriesel, MD, an otolaryngologist with LVPG Ear, Nose and Throat, for their preoperative care. After Kriesel performs an audiology evaluation, patients

eligible for a cochlear implant may be referred to audiologist Alicia Kittle, AuD, with LVPG Pediatric Surgical Specialties and Lehigh Valley Hospital (LVH)–Cedar Crest, for cochlear implant mapping.

“I evaluate patients’ degree of hearing loss by testing their hearing with their hearing aids using a variety of specialized tests. If their hearing aids are no longer performing, we discuss whether a cochlear implant is an option,” Kittle says. Patients are then referred to Jon E. Isaacson, MD, an ENT-otolaryngologist at Geisinger Holy Spirit Hospital in Camp Hill, for cochlear implant surgery. Patients can then return to Kriesel for postoperative care. LVHN is the only facility to provide coordinated cochlear implant care for adult patients in the Lehigh Valley.

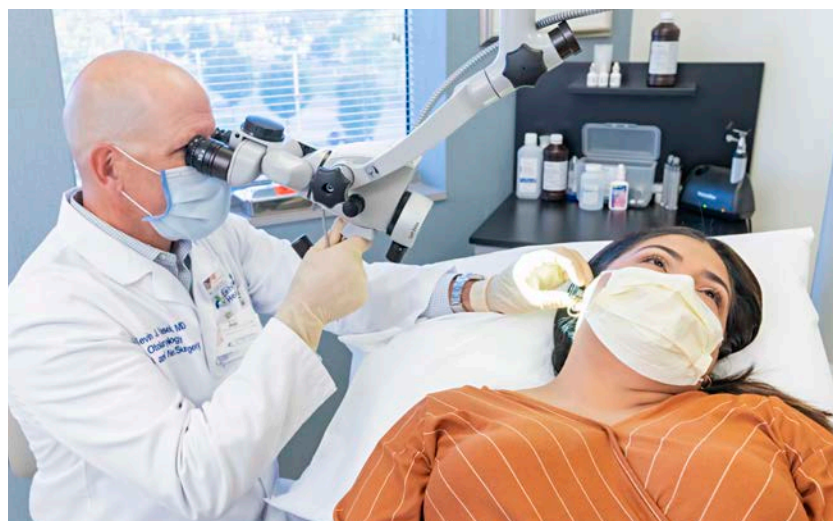
## Sound advice

While sensorineural hearing loss can be congenital or caused by noise exposure, ototoxic medicine, a virus or disease, it’s most often the result of age-related nerve degeneration. A cochlear implant provides a sense of sound by mimicking the function of the cochlea, the hollow spiral-shaped bone in the inner ear that plays a key role in auditory transduction. The implant is composed of a surgically implanted electrode array that functions in tandem with an external speech processor, transmitter and receiver/stimulator.

Hearing with a cochlear implant can sound artificial at first. “Patients have described it as tinny or robotic,” Kittle says.

During the first six months, patients will see Kittle four to six times for audiology fine-tuning and then every three months for the remainder of the first year. During those visits, she often encourages patients that the results will be worth the wait.

“From being able to interact with their grandchildren and their family, going back to work and participating in conversations at restaurants, those are the kinds of changes I’ve seen in patients,” Kittle says. “A cochlear implant can be life changing.”



➤ To refer a patient for audiology care, call **888-402-LVHN (5846)**.

LVH-Cedar Crest, LVH-Muhlenberg, LVH-17th Street, LVHN-Tilghman

## Lehigh Valley Hospitals Earn Magnet® Redesignation for Fifth Time



At Lehigh Valley Health Network (LVHN), nurses' care has received worldwide attention for the fifth time. The health network's Lehigh Valley-based hospitals and services achieved Magnet designation for the fifth consecutive time, according to LVHN Chief Nursing Officer Kim Jordan, DNP, RN.

The American Nurses Credentialing Center Magnet Recognition Program distinguishes health care organizations that demonstrate excellence in nursing services. Magnet recognition is the highest national credential for nursing excellence, serving as the gold standard for nursing practice.

"Throughout 2020, which is Year of the Nurse, we celebrate our nurses for all they are and all that they do," Jordan says. "Now, we can once again celebrate the achievement made possible by the contributions of each and every nurse at LVH."

This is the fifth consecutive time LVHN's Lehigh Valley-based hospitals and health care professionals earned Magnet recognition; the first was achieved in 2002. More than 500 health organizations are currently recognized by the Magnet program, and only 23 (including LVHN hospitals) have earned the distinction five times.

Nurses from Lehigh Valley Hospital (LVH)-Cedar Crest, LVH-Muhlenberg, LVH-17th Street and LVHN-Tilghman who work in patient care services, perioperative services, home care, hospice, cancer services, cardiac catheterization labs and interventional radiology had the chance to meet with Magnet appraisers during a one-of-a-kind virtual site visit in July.

"A team of four appraisers validated that the Magnet model components (transformational leadership; structural empowerment; exemplary professional practice; new knowledge, innovation and improvement) were in action at LVH," says Lori Grischoth, RN, LVHN's Magnet Program Director. "They ensured that performance and quality were sustained and improved over the four-year period since the hospital received its last recognition."

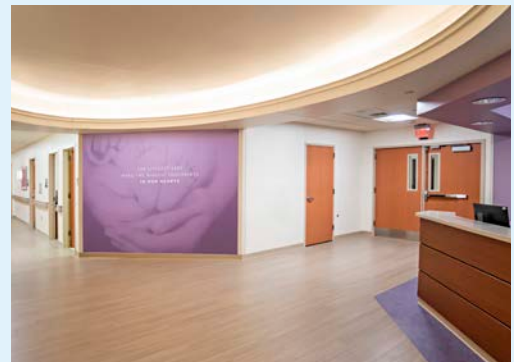
Hazleton

## REMODELED NEWBORN CENTER AT LVH-HAZLETON

The newly remodeled Family Birth and Newborn Center is a modern, secure maternity unit at Lehigh Valley Hospital (LVH)-Hazleton that offers a variety of accommodations to ensure the comfort, safety and security of patients.

The Family Birth and Newborn Center at LVH-Hazleton consists of three private labor and delivery rooms, as well as nine postpartum suites, which feature private bathrooms and wall-sized wooden armoires with plenty of storage to make a patient's stay as home-like as possible.

In addition, there are two prenatal testing rooms, a large nursery and a hydrotherapy room with a whirlpool bath to help expectant mothers manage labor pains. The Family Birth and Newborn Center also features its own cesarean birth suite, including an operating and recovery room, so cesarean section deliveries can be performed within the security of the unit.



➤ To refer a patient for maternity care, call **888-402-LVHN (5846)**.



## Around the Network

## NEW PROVIDERS AND PRACTICE LOCATIONS



**Bhavana Singh, MD**  
Dale and Frances  
Hughes Cancer Center,  
Lehigh Valley Hospital-  
Pocono



**Ahmed Nadeem, DO**  
LVPg Hematology  
Oncology-Muhlenberg



**Suzette Barreto, MD**  
LVPg Family and  
Internal Medicine-  
Bethlehem Township



**Ann Marie  
McDermott, MD**  
LVPg Obstetrics and  
Gynecology-Palmer  
Township



**Wen Zhang, DO**  
LVPg Internal  
Medicine-3080  
Hamilton Blvd.



**Syed Jafry, MD**  
LVPg Family Medicine-  
Macungie



**Clark Veet, MD**  
LVPg Family and  
Internal Medicine-  
Center Valley



**Stephen Evans, DO**  
Primary Care-Schuylkill  
Medical Plaza  
Sports Medicine-  
Mauch Chunk Pottsville



**Paul McCabe, MD**  
LVH Neurology  
Schuylkill and Hazleton  
Specializing in Seizure  
Disorders



**Mohammed Abdu, MD**  
LVPg Pediatrics-  
Hazleton Shopping  
Center



**Pradeep Adumala, MD**  
LVPg Pediatrics-  
Hazleton Shopping  
Center and LVPg  
Pediatrics-Lantern Lane



**Kimberly Downes, DO**  
LVPg Pediatrics-  
East Stroudsburg



**Leah Arlequin, MD**  
LVPg Family Medicine-  
Tobyhanna



**Mahim Shuja, MD**  
LVPg Family Medicine-  
Stroudsburg



**Tariq Mahmood, MD**  
LVH Neurology



**Kristopher Grajny, MD**  
LVH Neurology



**Kathleen  
Katulis, CRNP**  
LVPg Obstetrics  
and Gynecology-  
Alliance Drive



**Jennifer  
Bouso-Poole, MD**  
LVPg Pediatric  
Pulmonology-  
1210 Cedar Crest



**Stacey Johnson, MD**  
LVPg Pediatric  
Endocrinology-  
1210 Cedar Crest



**Ross Myers, MD**  
Medical Imaging of  
Lehigh Valley



**Christine Wang, MD**  
VHP-Children's Clinic at  
Lehigh Valley Hospital



**Robert Wessel, MD**  
LVPg Orthopedics  
and Sports Medicine-  
Muhlenberg



**Xander Arwand, DO**  
LVPg Orthopedics  
and Sports Medicine-  
Bethlehem Township



**Samantha  
Newstadt, DPM**  
Coordinated Health

### Pottsville

## New Sports Medicine Office in Pottsville

Patients in Pottsville have a new option for orthopedic care at LVPg Orthopedics and Sports Medicine-Mauch Chunk Street.

Specialists at the practice offer both nonsurgical and surgical expertise for any type of orthopedic or musculoskeletal problem. They provide a full range of treatment options, diagnostic aids, injection therapies and on-site services.

Providers include Karl Helmold, MD, and Stephen Evans, DO, who also practices at LVPg Family Medicine-Schuylkill Medical Plaza.

LVPg Orthopedics and Sports Medicine-Mauch Chunk Street is located at 316 Mauch Chunk St., Pottsville.

➤ For more information about these providers, visit [LVHN.org/findadoc](http://LVHN.org/findadoc) or call 888-402-LVHN (5846).

### Luzerne County

## NEW LVPG PEDIATRICS LOCATION OPEN IN CONYNGHAM

Pradeep Adumala, MD, and Shakuntala Varhade, MD, are now providing comprehensive pediatric care for infants, toddlers and adolescents, including those with special and chronic needs, at LVPG Pediatrics-Lantern Lane, Conyngham.

They are currently accepting new patients. Physicians are on call 24 hours a day, seven days a week.

Services include:

- Physicals for school and sports
- Vaccinations
- Asthma counseling
- Nutrition counseling
- Diabetes education
- Suicide prevention screening
- Same-day sick appointments

➤ To refer a patient for pediatric care, call **888-402-LVHN (5846)**.

### Easton

## ENDOSCOPY SERVICES AVAILABLE AT HEALTH CENTER AT EASTON

Lehigh Valley Health Network (LVHN), through a joint venture with Eastern Pennsylvania Gastroenterology and Liver Specialists (EPGI), now provides upper and lower endoscopies, including screening colonoscopies, at a new endoscopy center located at the Health Center at Easton, 2401 Northampton St., Easton.

The Easton location joins other LVHN endoscopy sites at:

- Lehigh Valley Hospital (LVH)-Cedar Crest
- LVH-Muhlenberg
- LVH-17th Street
- Eastern Pennsylvania Endoscopy Center (EPEC), 1501 N. Cedar Crest Blvd.

➤ To refer a patient for endoscopy, call **888-402-LVHN (5846)**.



### Northeastern Pennsylvania

## LVHN Introduces New MedEvac Helicopter to Fleet

Lehigh Valley Health Network (LVHN) introduced an EC-145 helicopter to its fleet to enhance the health network's continuum of care in northeastern Pennsylvania. This aircraft features a larger cabin, which allows additional members of the care team and equipment to be used in flight.

"No matter what hospital in the health network patients visit, they have the backing of an entire health network," says John Fletcher, President, Lehigh Valley Hospital-Hazleton. "Patients who normally would require ground transport due to lifesaving equipment and care team members who need to accompany them, can now be flown to the Lehigh Valley."

LVHN partners with Air Method to operate a fleet of four helicopters in northeastern Pennsylvania. The EC-145 will be centrally located in a hangar at Hazleton Regional Airport and will serve Luzerne, Schuylkill, Monroe and Carbon counties for patient transport.



➤ For information about the helicopter service, visit [LVHN.org/medevac](http://LVHN.org/medevac).

### Hazleton and Schuylkill

## Hospitals Earn Chest Pain Center Accreditation

Lehigh Valley Hospital (LVH)-Hazleton and LVH-Schuylkill have been certified as accredited chest pain centers by the American College of Cardiology (ACC). This distinction means that these facilities meet or exceed the guidelines set by the ACC to ensure best practices and quality outcomes for chest pain patients.

"Time is muscle – minutes can save lives when patients present to the Emergency Department and are having a heart attack or stroke," says Andrew Miller, DO, Vice Chair, Emergency Medicine, LVH-Hazleton.

"By evaluating and intervening quicker, we hope to show improved results for patients. We know, with a cardiac event, there is no time to lose," says Marc Bonin, DO, Medical Director of the Emergency Room at LVH-Schuylkill.



Lehigh Valley Health Network (LVHN) includes eight hospital campuses: three in Allentown, including the region's only facility dedicated to orthopedic surgery, one in Bethlehem, one in Hazleton, two in Pottsville and one in East Stroudsburg, Pa.; Coordinated Health, which includes two hospital campuses, nearly two dozen multispecialty locations including ambulatory surgery centers and orthopedic injury centers in northeastern Pennsylvania and western New Jersey; numerous health centers caring for communities in seven counties; numerous primary and specialty care physician practices throughout the region; pharmacy, imaging and lab services; and preferred provider services through Valley Preferred. Lehigh Valley Hospital has been recognized by U.S. News & World Report for 21 consecutive years as one of America's Best Hospitals and is a national Magnet® hospital for excellence in nursing.



**Lehigh Valley Health Network**  
PO Box 689  
Allentown PA 18105-1556

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## CONTINUING EDUCATION CONFERENCES

**MAY**

**4-5** Trauma 2021: A  
Continuum of Care

The situation concerning coronavirus/ COVID-19 continues to evolve rapidly on a global, national and local level. This has resulted in cancellation of many events (there are some events transitioning to virtual training). For information on upcoming educational conferences, call the Department of Education at **610-402-2277** or visit <https://tinyurl.com/LVHN-DOE>.

Dates and topics are subject to change.



**Coordinated Health**  
PART OF LEHIGH VALLEY HEALTH NETWORK

**New Jersey**

## Coordinated Health Services in New Jersey

A comprehensive array of services is available at Coordinated Health campuses in New Jersey

**Coordinated Health Phillipsburg-**  
**222 Red School Lane**  
**610-861-8080**

Specialists provide care for:

- Knee, hip and shoulder
- Spine
- Foot and ankle
- Hand and wrist
- Endocrinology
- General surgery
- Primary care
- Rheumatology
- Women's health
- Employer health services
- Care on demand
- Walk-in injury center
- Physical therapy
- Imaging services

Other services include Care on Demand, a walk-in injury center, physical therapy and imaging services.

**Phillipsburg Ambulatory**  
**Surgery Center**  
**212 Red School Lane**  
**610-861-8080**

Provides a comprehensive range of state-of-the-art surgical services, including:

- Orthopedic
- Podiatry
- General surgery
- Urology
- Ophthalmology
- Ophthalmologic procedures (including cataracts)
- Minor vascular procedures
- Pain management
- Endoscopy
- Dental procedures

Additional New Jersey Coordinated Health campuses include:

**Coordinated Health Phillipsburg-**  
**800 Coventry Drive**

**908-859-6055** 8 a.m. to 5 p.m.  
**484-273-4222** after hours

- Ophthalmology
- Optometry services

**Coordinated Health Phillipsburg-**  
**224 Roseberry Street**

**908-859-9494**  
• Urology care

**Coordinated Health**  
**Washington-140 Boulevard**

**908-859-6055**  
• Ophthalmology  
• Optometry services



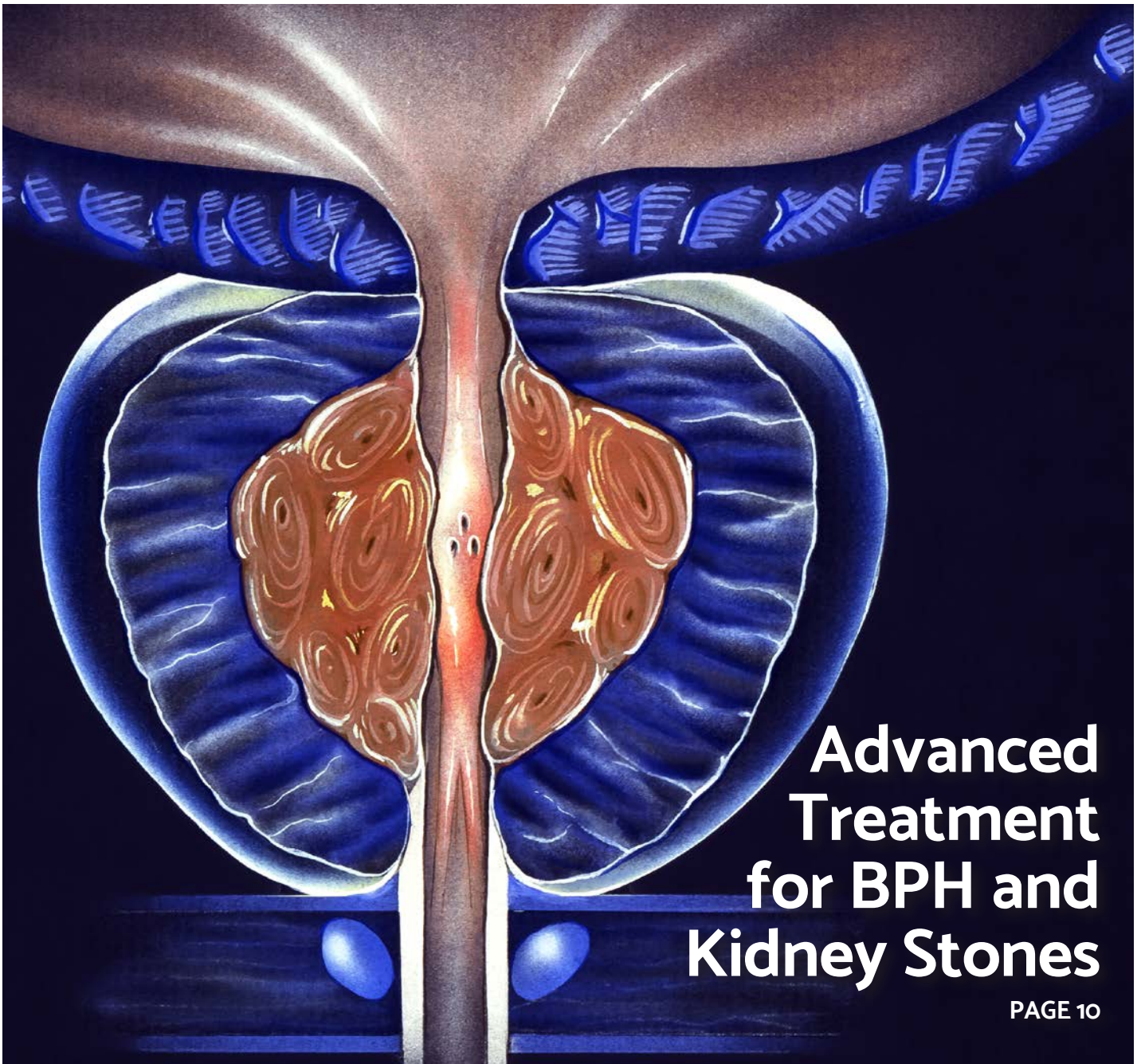
PARTNERS IN  
**BETTER**  
— MEDICINE —



**New  
Technique  
for Ulcerative  
Colitis**

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PARTNERS IN  
**BETTER**  
— MEDICINE —



**Advanced  
Treatment  
for BPH and  
Kidney Stones**

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