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# Progress

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#### Inside This Issue:

From the President	1-2
LVHN Announces Partnership with Moffitt Cancer Center	2
Dr. Alan Otsuki to Lead Futuristic Medical Education Program	3
Hospital Disclosure and Conflict of Interest Statement	4
Network Email Update	5
LVHN Digital Library	5
Pain Management Update	6
New "Code Orange" Process	6
News from CAPOE Central	7
Asking for Payment Earlier Helps	8
Clinical Documentation and Value-Based Purchasing	8
Pilot to Reduce Patient Falls on 6B and RHMC	9
Cardiac Surgery Program Chosen to Participate in Study	9
Ethics Corner	10
Congratulations	11
Papers, Publications and Presentations	12
Advanced Practice Clinicians Update	12
Upcoming Seminars, Conferences and Meetings	13-15
Who's New	16-19



## FROM THE PRESIDENT



#### **Time to Listen**

I met Darlene during my internship. She scheduled my continuity clinic patients, and we became fast friends. I loved her sense of humor and fierce protectiveness of those with whom she worked. Our roles within the Network changed through the years, but our relationship remained a constant. She was one of my favorite people to see in the hallways and always put a smile on my face.

Last summer, Darlene was admitted to my service. I reviewed her data with my resident team and pulled up her CT scan — what I saw made me want to cry. I had to give her the news. We talked and listened and we both shed some tears. We formulated a plan to confirm her diagnosis and move forward. I saw Darlene periodically over the next several months. We chatted and I listened for clues to help us guide her care.

In mid-October, I visited Darlene and recognized she was nearing the end. We talked – probably for about an hour. She

finally asked me if she was dying. I took a long breath and told her she was. Darlene was silent for a while and I forced myself to allow that silence to breathe. When she began talking again, we discussed her next steps – essentially, how she wanted to die. I did my best to listen and remember. She passed the next day, comfortable and surrounded by work colleagues and family. She joined her beloved husband Jim, who had also recently passed away.

I share this story to illustrate the importance of listening. Had we not listened, Darlene's passing may have been very different. Those who loved her would have very different memories of her final hours. We have all heard of the 1984 study demonstrating that patients were interrupted within the first 18 seconds of beginning their story. Each of us has likely made a mental note to listen more — to our patients, our partners and our friends. Sadly, we have all probably struggled to make that a consistent reality.



Listening is not easy, as I pointed out in January's column. It is hard work and it takes time but it is essential to developing relationships. Physicians and providers are constantly pressured to move quickly and efficiently. Being asked to take the time to listen annoys us, because we feel listening will slow us down. Taking that extra time, though, gets us to our destination quicker. It provides us the information we need to make the proper diagnosis and confirm the correct treatment choice for a patient's desires and beliefs. It facilitates understanding and solving problems with our colleagues. It shows us a different point-ofview. Listening benefits everyone.

I challenge each of us to listen. It is time to listen.

Thanks for everything, Darlene. We miss you.

"One friend, one person who is truly understanding, who takes the trouble to listen to us as we consider a problem, can change our whole outlook on the world."

- Dr. E. H. Mayo



Michael J. Pistoria, DO Medical Staff President

## LVHN ANNOUNCES PARTNERSHIP WITH MOFFITT CANCER CENTER

On February 8, Lehigh Valley Health Network (LVHN) announced a partnership with the Moffitt Cancer Center and Research Institute of Tampa, Fla. This new partnership will bring the most advanced cancer care to the Lehigh Valley and surrounding communities without the need to travel far from home.

As a result of LVHN's clinical reputation as well as its affiliation with USF Health, the health network was asked to become a member of the Moffitt Clinical Research Network (MCRN). As an MCRN member, LVHN now will be able to provide an avenue for cancer patients to participate in the most advanced clinical research trials. Additionally, last year LVHN became one of only 30 cancer centers nationwide selected to join the National Cancer Institute's Community Cancer Centers Program.

"We're proud of our reputation in cancer services here at Lehigh Valley Health Network," said Ronald W. Swinfard, MD, LVHN's President and CEO. "This distinction brings more hope and more options to people in the Lehigh Valley. We can now offer and provide breakthrough clinical research that can improve cancer patients' quality of life and extend survival."

"Our vision is to integrate new technologies into the standard of care and improve outcomes of all cancer patients by partnering with outstanding health care institutions," said William Dalton, MD, Moffitt's President and CEO and center director. "We are also looking forward to collaborating with the physicians to increase access to new and improved therapies for cancer."



One of the biggest and newest areas of clinical research in cancer care is genetic testing and finding mutated genes that cause cancerous tumors to grow. Drug companies are now starting to produce medications that target these mutations and turn them off. "Unfortunately these tumors find other genebased methods to reproduce," said Suresh G. Nair, MD, LVHN's Senior Medical Director of Academic Oncology Programs and lead clinical research investigator. "But new drug trials at places like the Moffitt Cancer Center are finding ways to shut down all of the mutated genes to stop growth completely. Our patients in the Lehigh Valley will now be able to take full advantage."

Located in Tampa, Fla., Moffitt Cancer Center is an NCI Comprehensive Cancer Center – a designation that recognizes Moffitt's excellence in research and contributions to clinical trials, prevention and cancer control. Moffitt currently has 14 affiliates in Florida, one in Georgia, one in Pennsylvania, and two in Puerto Rico. Additionally, Moffitt is a member of the National Comprehensive Cancer Network, a prestigious alliance of the country's leading cancer centers, and is listed in *U.S. News & World Report* as one of "America's Best Hospitals" for cancer. Moffitt marks a very important anniversary this year – 25 years committed to one mission: to contribute to the prevention and cure of cancer.

## DR. ALAN OTSUKI TO LEAD FUTURISTIC MEDICAL EDUCATION PROGRAM



J. Alan Otsuki, MD, MBA, a recognized leader in medical education, has been chosen to help lead the innovative program in medical education jointly created by the University of South Florida (USF) and Lehigh Valley Health Network (LVHN).

Dr. Otsuki will be the founding

Associate Dean of Educational Affairs of the USF College of Medicine at the LVHN Campus and Chief of the Division of Education, LVHN. He will also serve as an Associate Professor of Internal Medicine at USF Health. He starts his new position March 14, joining USF and LVHN from Emory University School of Medicine in Atlanta, Ga., where he is Associate Dean for Medical Education and Student Affairs and Associate Professor of Emergency Medicine.

"Dr. Otsuki's national reputation, along with his clinical and academic credentials, is a great fit for the unique partnership between USF and Lehigh Valley. His passion for excellence in teaching and improving patient care are just what we need as we advance our futuristic program in medical education," said Stephen K. Klasko, MD, MBA, CEO of USF Health and Dean of the College of Medicine.

"Our USF and LVHN communities will benefit greatly from Dr. Otsuki's scholarly spirit and impressive academic experience," said Ronald W. Swinfard, MD, President and CEO of LVHN. "He has the vision, inter-personal relationship skills, energy and credentials to explore the realities of the modern-day physician and help reshape medical education so tomorrow's doctors can lead and innovate."

Dr. Otsuki will be based at the LVHN campus and travel regularly to the USF College of Medicine, where he will work closely with Alicia Monroe, MD, the college's Vice Dean of Educational Affairs, and her staff.

"Dr. Otsuki brings energy, a fresh perspective and ideal experiences to our ambitious goal to transform medical education and health care," Dr. Monroe said. "Together, we will transform the knowledge of science, quality and safety into application that will better prepare students for clinical practice."

Dr. Otsuki's own background is well-rounded – with experience in primary and specialty care, the business of medicine, faculty development, and impressive credentials in undergraduate and graduate medical education and curriculum development. Throughout his career, he has worked in many capacities across the health care system – from caring for individual patients and their families, to integrating hospital care into the community and to implementing new health care delivery processes and measuring their outcomes.

He received a BA degree from Yale University and MD degree from Dalhousie University in Canada in 1977. Dr. Otsuki completed his residency training in Emergency Medicine, including one year as chief resident, at Emory University Affiliated Hospitals. He also holds an MBA degree from Emory.

After spending five years as a family physician, Dr. Otsuki worked as an emergency physician in community and tertiary care hospitals for several years before joining Emory University School of Medicine as an Assistant Professor of Emergency Medicine in 1989.

At Emory, he filled many leadership roles, including Associate Residency Director for Emergency Medicine, founding director of the Emory University Hospital Emergency Department, Executive Director of Continuing Medical Education and Assistant, then Associate Dean, for Medical Education and Student Affairs. As Director of Medical Management for the Emory Clinic, Office of Managed Care, from 1996 to 1998, Dr. Otsuki developed practice guidelines and managed resource utilization for Emory's multispecialty health care delivery system. He helped initiate and direct a mentoring program for first-year medical students to provide counsel on professional, ethical and career issues and help them transition into the community of medicine at Emory and in Atlanta. He has been involved in many activities to promote innovation in medical education, including advances in information technology, the use of standardized patients and inter-professional team training.

Dr. Otsuki is a fellow of the American College of Emergency Physicians and past president of the Georgia College of Emergency Physicians. He is a member (faculty) of the Alpha Omega Alpha Medical Honor Society.

## HOSPITAL DISCLOSURE AND CONFLICT OF INTEREST STATEMENT

As stipulated in the Medical Staff Bylaws, **ALL** members of the Medical Staff are required to complete the **Hospital Disclosure and Conflict of Interest Statement** on an annual basis.

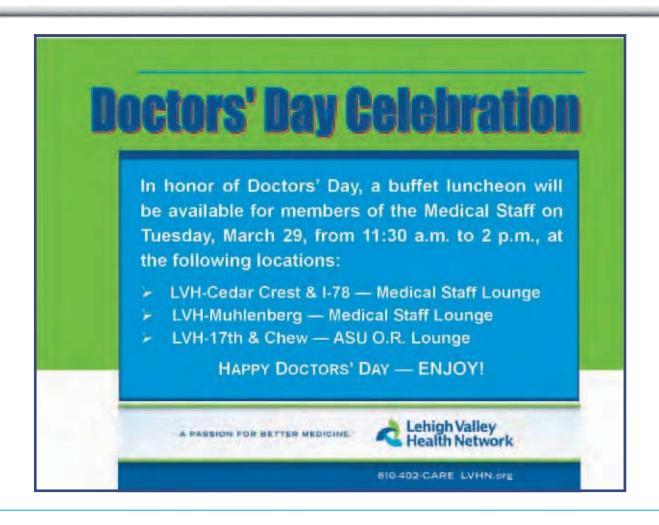
For Fiscal Year 2011, you will be required to complete the Hospital Disclosure and Conflict of Interest Statement by **June 30, 2011**. This questionnaire is a web-based application which will maintain your answers along with the date you last updated the information. This will allow you to review the answers you previously provided and will allow you to make modifications as necessary. The information is confidential and will be compiled by the Internal Audit department.

Access to the form is easy. From the LVHN Intranet Homepage, under the "What's New" section on the right-hand side, select "Conflict of Interest Questionnaire." Accessing the form via the Intranet is secure and, since you will have already logged on using the SSO log-in process, no user ID or password is required.

When the homepage of the "Conflict of Interest Questionnaire" appears, select the appropriate questionnaire based on the following:

- If you are an LVHN employed physician, choose the first selection – "EMPLOYEE QUESTIONNAIRE (INCLUDING EMPLOYED PHYSICIANS)"
- ➤ If you are a physician in an independent practice, choose the second selection "PHYSICIANS IN PRIVATE PRACTICE/OTHER NON-EMPLOYEES QUESTION-NAIRE"

If you have any questions regarding this issue, please call Ruth Davis in Medical Staff Services at 610-402-8975 or Carol Kriebel in the Internal Audit department at 610-969-0501.



## **NETWORK EMAIL UPDATE**

Prior to last August, an auto-forwarding function in the LVHN email system allowed users to forward their network email to a personal account such as Yahoo, Hotmail, GMail, etc. However, improvements in technology and connectivity removed previous barriers to access your network email account and made forwarding emails to personal accounts no longer necessary. Therefore, on August 12, 2010, Information Services removed the ability to automatically forward email to personal accounts. Doing this also eliminated the potential for compromise to patient privacy and assures that LVHN is in compliance with state and federal privacy laws, including HIPAA.

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

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

To reset your password:

- From an LVHN computer, navigate to the intranet homepage (<u>www.lvh.com</u>).
- Near the top of the page, mouse over **Technology** and in the resulting dropdown, click **I/S Support Center**. You can also access this page directly by typing in <a href="www.lvh.com/supportcenter">www.lvh.com/supportcenter</a>.
- On the I/S Support Center page, click on the RESET PASSWORD graphic on the left side of the screen.
- Click the drop-down list next to Application and choose GUI Email.
- The password reset tool will display your new computer generated email password and synchronize it with your TAO email SSO button.
  Do not change this password within TAO (either from home or on the Network). Changing the password will "break" the synchronization with your SSO button and prevent you from launching the TAO application when you are on the network.
- To access Interpost Express from home or outside of the network, type mail2.lvh.com in the address bar of your web browser. Do not preface it with "www."
- On the Interpost Express login page, enter your user ID and your newly reset email password and click Sign in.
- If you have questions or encounter difficulty, please contact the I/S Support Center at 610-402-8303, option 1, and someone will assist you with the process.

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

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



## LVHN DIGITAL LIBRARY

#### A New Look for Micromedex

Micromedex 2.0 is coming. Micromedex provides comprehensive pharmacology information including drug summaries, trade/generic drug lists, toxicology, interactions, disease profiles, patient education handouts and clinical decision calculators. Along with the same great content, some of the new 2.0 features include advanced search functions, a "new look" to search results, additional calculators, and enhanced mobile access.

The switch over will occur in mid-March. Library Services will be offering handouts, online tutorials, and training sessions with teleconferencing at all three sites. Look for announcements on the Digital Library homepage and LVHN bulletin boards for training session times and locations.

You can access Micromedex through the Digital Library's Homepage. Go to **Find Fast/ Library Services/** click on Drug Resources/ Micromedex. If you have any questions, please contact Kristine Petre in Library Services at 610-402-8408.

## PAIN MANAGEMENT UPDATE



In an ongoing effort to offer pain management educational opportunities, Lehigh Valley Health Network is excited to announce the availability of a new eLearning CME/CNE course – "Managing the Patient in Pain"

You can access the course by going into eLearning from your SSO toolbar. In the "Catalog Search" box, type "Managing the Patient in Pain" then select the modules that are appropriate for the type of credits you need (either CME, CNE or certificate of attendance). This course is for physicians, nurse

practitioners, registered nurses, physician assistants and other health care providers. Each computer-assisted instructional module takes approximately 30 minutes to complete. There is a post test and other resources available to assist you in treating the patient in pain.

#### **Accreditation:**

It is Lehigh Valley Health Network's policy to ensure balance, independence, objectivity, and scientific rigor in all of our sponsored educational programs. Faculty and all others who have the ability to control the content of continuing education activities sponsored by LVHN are expected to disclose to the audience whether they do or do not have any real or apparent conflict(s) of interest or other relationships related to the content of their presentation(s).

LVHN is accredited by the Pennsylvania Medical Society to provide continuing medical education for physicians.

LVHN designates this educational activity for a maximum of **0.5** AMA PRA Category 1 Credit(s). Physicians should only claim credit commensurate with the extent of their participation in the educational activity.

LVHN is an approved provider of continuing nursing education by the PA State Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. Registered Nurses attending the entire program and completing the evaluation tool will receive **0.5** Contact Hours.

Approval of this continuing nursing education activity refers to recognition of the educational activity only and does not imply ANCC Commission on Accreditation or PA Nurses approval or endorsement of any product.

If you have any questions regarding this new Pain Management eLearning course, please contact Maryjane Cerrone, MSN, RN-BC, Pain Educator and Research, at 610-402-9003 or via email at <a href="mary\_jane.cerrone@lvhn.org">mary\_jane.cerrone@lvhn.org</a>.

## **New "Code Orange" Process**

On February 1, a new process for patient and staff safety became effective with changes to the "Code Orange" process. All LVHN staff that provide care to patients are impacted by this and need to know how to respond. Following is the revised process of "Code Orange" events:

- Anyone may call 555 this will connect you with Security. You will need to identify the problem and the location.
- Security Officers will be prompted to the location of the event immediately via radio.
- Code Orange Response Team (CORT) members will be paged and will also respond to the location of the event.
- All CORT members will utilize the patient's team (nurse, physicians, techs, family, etc.) to intervene with skills to ensure patient and staff safety.
- CORT members will debrief after each event as a learning opportunity.
- Findings will be provided to the Code Orange Task Force and opportunities will be shared with departments/units/staff.

During the first month of this new process, Code Oranges continued to have an over head page and staff who have had Comprehensive Crisis Management training were able to respond to assist. Untrained staff was asked not to respond. However, untrained staff was encouraged to attend an upcoming Comprehensive Crisis Management training.

In March, overhead announcements of Code Oranges will be discontinued.

This is a learning process for the Network and staff is encouraged to provide feedback regarding this process.

If you have any questions or need additional information regarding this issue, please contact Georgene Saliba, Administrator, Risk Management/Patient Safety, at 610-402-3005, or Gail Stern, Administrator, Department of Psychiatry, at 484-884-6505.

### **News from Capoe Central**

## Care and Feeding of LifeBook Batteries

There are over 500 LifeBooks circulating around the hospital sites. There is a constant need for batteries that are fully charged and working. We are finding an increasing number of batteries with broken and bent pins. This occurs when people try to force the battery into the charging bay or into the LifeBook. Please remember to GENTLY place the batteries into the charging bays and when sliding them into the LifeBooks.

## **Changes to 1:1 Observation Orders**

In an effort to help the physicians become more efficient, we have made modifications to the 1:1/ observation level order sets for both visual and arms length observation.

There will be a new required field – "Manage by." You will need to select that the 1:1/observation level be managed by either nursing or the physician. If you choose manage by nursing, a safe, effective algorithm will be utilized to determine when it is appropriate to discontinue the 1:1/observation. Nursing has been using this algorithm for two years, and there has been a demonstrated decrease in the number of 1:1/observation level hours without any relationship between that reduction and falls and restraint use. If you choose the physician to manage the 1:1/observation, the process will remain as it has been.

It is encouraged that you choose Nursing to manage the 1:1/observation. Note this order does not apply to the observation level for suicide precautions.

For questions regarding this issue, please contact Courtney Vose, Administrator, Patient Care Services, at 484-884-2544 or <a href="mailto:courtney.vose@lvhn.org">courtney.vose@lvhn.org</a>.

## Using CE to create meds for DCI? What Could Happen??

We have found that some providers are placing medication orders in Centricity Enterprise so the med will appear in DCI, making it easier to manage Home Meds and create prescriptions (and then discontinuing the medication in CE). This is NOT the correct process and has potential for serious patient safety issues. Placing the order in CE creates an action for the Nurse, and there is potential that Pharmacy verifies the medication and sends it to the unit, prior to the provider canceling/discontinuing the order. We recently had an occurrence in which the nurse saw the action on her Medication Administration screen and thought the order was valid and attempted to administer the medication. Please use DCI to manage the Home Medications and create prescriptions for discharge. It is the correct process, and is safer for our patients.

#### **Case Management Orders Just Got Easier**

The current list of CAPOE orders for Case Management is being consolidated into one order – "Consult Case Manager" – eliminating the need to choose from the current list which includes:

- Case Manager Complex Consult
- Discharge Planning
- Discharge Planning for Home Care
- Discharge Planning for TSU

This change is being made to simplify the decision making process, allowing for a "one size fits all" order. The ordering provider will have the opportunity to write a comment if needed. The Case Managers will continue to evaluate all patients and assess each patient's need for intervention and post-hospital care, discuss the patient's needs with the practitioner and coordinate the discharge arrangements. Any specific instructions for the Case Manager should be entered into this order.

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

## **ASKING FOR PAYMENT EARLIER HELPS**

#### You can help educate patients about point of service collection



Lehigh Valley Health Network (LVHN) currently collects co-pays at the point of service in the Emergency Departments, ambulatory surgical unit at LVH-17th Street, and the rehabilitation department. Beginning this spring, LVHN will

ask for co-pays, deductibles and co-insurance from patients before their scheduled surgery. This will help to identify and educate people who need assistance with their medical bills and reduce their anxiety by providing the help they need.

As you refer and schedule patients for surgery, you and your office staff can help prepare patients by educating them about the process and why LVHN is doing this. How will it work? After a patient's surgery is scheduled, a financial counselor will call and offer to take payment over the phone or at pre-admission testing. Treatment will be provided regardless of ability to pay.

If a patient is uninsured or underinsured, the financial counselor will screen for eligibility for state Medical Assistance or LVHN's Reduced Cost of Care Program based on income. Often many patients don't know they are eligible for financial help – as a result, they endure unnecessary financial burden, and LVHN accrues unnecessary costs that affect the bottom line. Consider that on average it takes up to 90 days to collect 70 percent of self-pay balances.

By implementing this process, it eliminates the patient receiving several bills and potential collection agency phone calls that cause anxiety and network costs and inefficiencies. Asking for and collecting payments earlier benefits our patients, community and network. Our patients receive the surgeries and financial assistance they need, and LVHN is able to reduce bad debt and invest revenue back into services in order to provide the highest level of care.

For more information regarding this issue, please contact Lisa Coleman, Director of Support Services, Diagnostic Care, at 484-884-8718.

#### CLINICAL DOCUMENTATION AND VALUE-BASED PURCHASING

The Federal government's *Patient Protection and Affordable Care Act* was signed into law in March 2010, with goals of decreasing healthcare cost and improving quality. As part of this law, on January 7, 2011, the Centers for Medicare & Medicaid Services (CMS) issued a proposed rule that would establish a new inpatient hospital value-based purchasing program for inpatient stays at more than 3,000 acute-care hospitals, for discharges beginning October 1, 2012.

Under this system, a physician's quality profile will be determined by a variety of factors, including reported quality data, severity-adjusted clinical outcome measures, patient-safety indicators, and hospital-acquired conditions (HACs). Since all of these are, to some extent, documentation issues, physicians are now forced to pay closer attention to how they identify and describe diagnoses and procedures in their clinical documentation.

Medicare will, in effect, attempt to determine: "Did the clinical team correctly identify and appropriately treat all relevant patient conditions—without causing any adverse conditions—and do so safely, efficiently, and with good outcomes?"

The clinical documentation must "tell the story" of the episode of care in the hospital. It must accurately describe all of the patient's conditions and demonstrate the complexity of medical decision-making and establishment of risk. Upon discharge, this risk must "match up" with the diagnoses that are being coded and the Medicare Severity Diagnosis Related Group (MS-DRGs) being assigned. Often, the information present in the chart is incomplete, inconsistent from provider to provider, or documented in a way that is misunderstood by hospital coders. This is where our Clinical Documentation Improvement (CDI) Team comes in to address these problems. The CDI team reviews medical records seven days a week looking for incomplete and inconsistent documentation. "Yellow notes" are placed in the medical record to prompt physicians for clarification of chart documentation.

If successful in improving our documentation skills, the rewards are obvious and far-reaching for the patient, physician and hospital.

If you have any questions about this topic, please contact John P. Pettine, MD, Director of LVHN's Clinical Documentation Improvement Program, via email at <a href="mailto:iohn.pettine@lvhn.org">iohn.pettine@lvhn.org</a>.

### PILOT TO REDUCE PATIENT FALLS ON 6B AND RHMC

Since January, 2011, members of the Pharmacy and physicians on 6B at LVH-Cedar Crest and RHMC at LVH-Muhlenberg have been working collaboratively on a pilot program in an attempt to reduce patient falls.

The purpose of the program is twofold:

- To eliminate the potential for a patient who fell on one of these two units to have a subsequent fall
- To attempt to identify medications which, by themselves or in conjunction with other medications, may contribute to a fall. If a pattern of usage does suggest potential for contributing to falls, the Pharmacy will provide feed back to physicians for future prescribing consideration.

#### **Current Process**

- If a patient falls on 6B or RHMC, the nurse contacts the Pharmacy in close proximity to the fall.
- A pharmacist will review the medication regimen of the patient who just fell.
- ➤ If the pharmacist believes the patient would benefit from a change in medication(s) or dosage(s), then the pharmacist will relay the recommendation by contacting the physician directly.
- The physician then has the opportunity to interact with the pharmacist and discuss the alternatives.

- If the physician agrees with the pharmacist that the medication may have contributed to a fall, then the doctor has the opportunity to change the patient's medication regimen.
- In the meantime, the pharmacists are also beginning to track these medication recommendations to alert physicians of potential issues with specific medications in regards to falls. (While the Pharmacy previously had a program that flagged certain medications as potential fall contributors, the criteria were overly sensitive and ultimately cumbersome to apply.)

The two pharmacists who are overseeing the pilot are David Lorchak and Ann Kirka. Although there are currently only two units that are trialing this process, a doctor who has concerns regarding medication may email or phone (610-402-8886) either David or Ann or any other pharmacist at any time to discuss medication concerns or make other recommendations to improve this process to benefit LVHN patients.

After a sufficient period of time has occurred to make a decision as to the effectiveness of this program, the results of this pilot will be communicated.

If you have any questions regarding this pilot, please contact Claire Kukielka, Clinical Quality Specialist, at 610-402-1711.

#### CARDIAC SURGERY PROGRAM CHOSEN TO PARTICIPATE IN STUDY

The Agency for Healthcare Research and Quality (AHRQ) awarded a three-year research grant of \$4 million to the FOCUS\* initiative to improve teamwork to prevent infections in cardiac operations. This research is a joint collaboration of the Society of Cardiovascular Anesthesiologists (SCA) Foundation and the Quality and Safety Research Group (QSRG) at the Johns Hopkins School of Medicine.

The cardiac surgery program at Lehigh Valley Health Network was chosen as one of 17 sites throughout the United States to participate in this study. Nanette M. Schwann, MD, Vice Chair for Research in the Department of Anesthesiology, will serve as the principal investigator along with Gary W. Szydlowski, MD, Chief, Section of Cardiac Surgery, who will serve as the co-investigator. The LVHN Cardiac Surgery program was one of the five original alpha sites that provided the data for the AHRQ grant.

Raymond L. Singer, MD, Chief, Division of Cardio-Thoracic Surgery, describes heart surgery as a high-intensity procedure performed by a multidisciplinary team using complex tools and technologies. Efforts to improve patient safety and reduce human error for cardiac surgery patients have been ongoing for more than a decade, yet the literature provides little guidance regarding best practices for hazard identification and interventions to effectively reduce risk.

\* The FOCUS initiative is a multi-year, multi-center initiative, designed to examine the physical and cultural environment of the cardiac surgery operating rooms, and will seek to define processes by which the cardiovascular operative teams can reduce the occurrence of human error. Although every individual involved in cardiovascular operative patient care is dedicated to patient safety, the processes and communication patterns that exist frequently are inadequate to achieve the goal of absolute patient safety.

## ETHICS CORNER by Glenn Guanowsky, Esq., Vice President, Legal Services

#### Appointment of a Guardian

Sometimes, in order to safely discharge a patient from Lehigh Valley Health Network's hospitals, Legal Services must petition the Court to appoint a guardian for that patient. Adjudicating a person as lacking the capacity to make their own decisions and requiring the appointment of a guardian of their person or estate or both, is a serious matter. If successful, a Petition for the Appointment of a Guardian may strip that person of some of their most basic civil rights to which every citizen is entitled – loss of liberty, elimination of the ability to contract, denial of the right to accept or reject medical treatment, and a prohibition of their right to manage their own financial affairs. An individual adjudicated as incapacitated may not even be allowed to make their own simple or harmless mistakes any longer. A guardian must do that for them.

The statutory provisions governing the appointment of guardians and administration of the estates of incapacitated persons are contained in Chapter 55 of the Probate, Estates and Fiduciaries Code. Orphans' Court has exclusive jurisdiction over guardians. The current law was amended in 1992, and the term "incompetent" was replaced with the term of "incapacitated person." An incapacitated person is an adult whose ability to receive and evaluate information effectively and communicate decisions in any way is impaired to such a significant extent that he is partially or totally unable to manage his financial resources to meet essential requirements for his physical health and safety. Due to this change in the law, the focus of the Court is on the alleged incapacitated person's own capacity to understand and make decisions and to communicate such decisions and the least restrictive means to address the alleged incapacitated person's needs.

Whenever an issue is presented to the Department of Legal Services in respect to whether a guardianship should be pursued for one of our patients, the decision to pursue a guardianship takes into consideration ethical issues that exist when taking an action that will fundamentally change that person's life.

Whenever a potential guardianship is discussed, all avenues are explored to assess whether a safe discharge plan can be achieved without the necessity of pursuing guardianship for that person. If no other options are available and guardianship is the only means available to provide for a safe discharge, then a number of other steps are always taken to ensure that the person's rights are protected and full due process of the law is provided.

Typically, a psychiatric evaluation is requested through the Department of Psychiatry's liaison service so that a full and complete assessment is performed of the patient's cognitive functioning. This is important, particularly in those cases where patients have the ability to make some decisions for themselves. Only after psychiatric evaluation confirms a lack of capacity to make decisions does the guardianship proceed.

In order to ensure that the patient's rights are protected in addition to filing a Petition for Guardianship, we will also request that a Guardian Ad Litem be appointed. The



Guardian Ad Litem is the person appointed during the pendency of the guardianship proceedings who is in a position to aid and assist the alleged incapacitated person during the proceedings. The Guardian Ad Litem can authorize transfer of the care of that patient outside of our hospitals if it is in the best interest of the patient to do so during the pendency of the hearing process which can take several weeks. The Guardian Ad Litem can also, based on their independent judgment, request that the person be appointed legal counsel. The Guardian Ad Litem also provides an independent report to the court as to their assessment of the patient's needs. Both the Guardian Ad Litem and the court-appointed counsel are provided with full access to the patient's medical records and providers so they are fully informed as to the patient's medical condition and the concerns of LVHN healthcare providers as to why a guardian is needed. Such a proceeding is not undertaken with an adversarial viewpoint. Rather, we seek to foster a collaborative relationship with other interested parties in a guardianship with a focus on trying to accomplish what is in the best interests of the patient.

Finally, at the time of the hearing, arrangements will be made, unless medically contra-indicated, to ensure that the patient is present at the hearing and participating in the hearing process.

In summary, pursuing guardianships on behalf of patients at Lehigh Valley Health Network is done with the same objectives and considerations that drive the mission of our organization - "We heal, comfort and care for the people of our community by providing advanced and compassionate healthcare of superior quality and value, supported by education and clinical research." The pursuit of guardianships on behalf of our patients supports that mission statement by providing compassion and ethical care when the pursuit of a guardianship in the only way to ensure a patient can safely leave our hospitals.

If you have any questions regarding this issue, please contact Glenn Guanowsky, Esq., Vice President, Legal Services, at 610-969-2774. If you have questions regarding any other ethical issues, please contact Robert D. Barraco, MD, MPH, Chair of the Ethics Committee, at robert d.barraco@lvhn.org.

## **CONGRATULATIONS**



**Bruce A. Ellsweig, MD,** Vice Chair, Family Medicine Community Practices, was recently notified by the American Board of Family Medicine that he passed the 2010 Hospice and Palliative Medicine Certification Examination and will be awarded a Certificate of Added

Qualifications in Hospice and Palliative Medicine. Dr. Ellsweig is also board certified in Family Medicine. A member of the Medical Staff since November, 1978, Dr. Ellsweig is also the Medical Director of Lehigh Valley Hospice.



Ronald S. Freudenberger, MD, Chief, Division of Cardiology, has become certified in Advanced Heart Failure/Transplant Cardiology by the American Board of Internal Medicine. He is the only cardiologist in the Lehigh Valley with this certification, and one of 250 in the

United States. Dr. Freudenberger is also certified in Cardiovascular Disease. A member of the Medical Staff since August, 2007, Dr. Freudenberger is in practice with Lehigh Valley Heart Specialists.



Gregory R. Harper, MD, PhD, Medical Director, Breast Health Services, was recently recertified in Hospice and Palliative Medicine by the American Board of Internal Medicine. Dr. Harper is also board certified in both Internal Medicine and Medical Oncology. A member of

the Medical Staff since September, 1996, Dr. Harper is in practice with Hematology-Oncology Associates.



Martin E. Matsumura, MD, Division of Cardiology, was recently recertified in Cardiovascular Disease by the American Board of Internal Medicine. A member of the Medical Staff since May, 2003, Dr. Matsumura is in practice with The Heart Care Group, PC.



**Donna F. Petruccelli, CRNP**, was recently asked to serve on the Heart Failure and Transplant Committee of the American College of Cardiology. As a Cardiac Care Associate Member on the Heart Failure and Transplant Committee, Ms. Petruccelli will review and comment on documents and guidelines related to heart failure.

including clinical practices, credentialing issues, government and thirdparty payer relationships, research and funding, training, and medical education. A member of the Allied Health Staff since March, 1999, Ms. Petruccelli is in practice with Lehigh Valley Heart Specialists.



Michael J. Pistoria, DO, Medical Staff President, was recently recertified in Internal Medicine with Focused Practice in Hospital Medicine by the American Board of Internal Medicine. A member of the Medical Staff since September, 1999, Dr. Pistoria is a member of the Division

of General Internal Medicine, Section of Hospital Medicine. He is in practice with LVPG-Hospitalist Services.



**Daniel E. Ray, MD**, Division of Pulmonary/Critical Care Medicine, was recently recertified in Hospice and Palliative Medicine by the American Board of Internal Medicine. Dr. Ray is also certified in

Critical Care Medicine, Pulmonary Disease, and Internal Medicine. A member of the Medical Staff since May, 1998, Dr. Ray is in practice with Pulmonary Associates.



Muhamad Aly Rifai, MD, Medical Director, Behavioral Health Emergency Services, has been asked by the American Psychiatric Association to serve as a regional leader for the DSM-5 Field trials. These field trials are

designed to assess the utility and feasibility of newly drafted diagnostic criteria for individual practitioners and clinicians in routine clinical practice settings. Publication of the fifth edition of Diagnostic and Statistical Manual of Mental Disorders (DSM-5) in May, 2013 will mark one of the most anticipated events in the mental health field. The Diagnostic and Statistical Manual of Mental Disorders (DSM) is the standard classification of mental disorders used by mental health professionals in the United States and contains a listing of diagnostic criteria for every psychiatric disorder recognized by the U.S. healthcare system. The current edition, DSM-IV-TR, is used by professionals in a wide array of contexts, including psychiatrists and other physicians, psychologists, social workers, nurses, occupational and rehabilitation therapists, and counselors, as well as by clinicians and researchers of many different orientations. Dr. Rifai has been a member of the Medical Staff since May, 2007. He is in practice with LVPG-Psychiatry.



Michael A. Rossi, MD, Physician Executive Director of Lehigh Valley Physician Group, recently earned his MBA with a concentration in Healthcare Systems Management at DeSales University. A

member of the Medical Staff since July, 1992, Dr. Rossi is a member of the Division of Cardiology. He is in practice with Lehigh Valley Heart Specialists.



**Daniel T. Valancius, MD**, Division of General Internal Medicine, Section of Hospital Medicine, was recently certified in Hospice and Palliative Medicine by the American Board of Internal Medicine. Dr. Valancius is also board certified in Internal

Medicine. A member of the Medical Staff since July, 2004, Dr. Valancius is in practice with Lehigh Area Medical Associates.

## Papers, Publications and Presentations

A. Hamed Amani, MD, Division of Burn/Trauma-Surgical Critical Care/General Surgery, presented a talk – "TEN in 2010" - at the NorthEast Region Burn Conference on November 5, 2010, in Providence, Rhode Island.

Members of the Department of Family Medicine – Jay Baglia, PhD, Medical Educator; Elissa Foster, PhD, Medical Educator; Julie A. Dostal, MD, Vice Chair, Education; Drew Keister, MD; Nyann Biery, MS, Research Coordinator; and Daniel Larson, Research Assistant – co-authored the article – "Generating Developmentally Appropriate Competency Assessment at a Family Medicine Residency" – which was published in Family Medicine, Volume 43, Number 2, February 2011.

Sigrid A. Blome-Eberwein, MD, Division of Burn/Trauma-Surgical Critical Care/Plastic Surgery, presented a talk titled "Fractional ER: Glass Photothermolysis Laser Therapy to Treat Hypertrophic Scarring" at the NorthEast Region Burn Conference on November 5, 2010, in Providence, R.I.

Elissa Foster, PhD, Medical Educator, and Joanne Cohen-Katz, PhD, Psychologist, Department of Family Medicine, cowrote a chapter titled "Caring for the Family: Teaching Systems and Cycles in a Family Medicine Residency Program" for the book - Family Communication, Connections, and Health Transitions: Going Through This Together.

Ronald S. Freudenberger, MD, Chief, Division of Cardiology, authored a chapter - "Management of Advanced Heart Failure" - which was published as Chapter 15 in the book - Management of Heart Failure.

Sweety Jain, MD, Department of Family Medicine, wrote an essay titled "Scarred," which was published in the "Life in 55 Words" column of Family Medicine, Volume 43, Number 2, February 2011.

Indru T. Khubchandani, MD, Division of Colon and Rectal Surgery, represented Lehigh Valley Health Network in a multinational, multi-center study. An article regarding the study – "No Rectopexy Versus Rectopexy Following Rectal Mobilization for Full-Thickness Rectal Prolapse: A Randomized Controlled Trial" – was published in *Diseases of the Colon &* Rectum, Volume 54, Number 1, 2011.

Daniel D. Lozano, MD, Chief, Division of Burn, presented "Update in the Management of Inhalation Injury" as part of the Management of Burns and Other Dermal Injuries session at the Society of Critical Care Medicine 40th Critical Care Congress, held January 15-19, in San Diego, Calif.

William L. Miller, MD, MA, Chair, Department of Family Medicine, and Joanne Cohen-Katz, PhD, co-authored the article - "Creating Collaborative Learning Environments for Transforming Primary Care Practices Now" – which was published in Families, Systems and Health, Volume 28, Number 4, 2010.

Muhamad Aly Rifai, MD, Medical Director, Behavioral Health Emergency Services, co-authored the article – "Psychiatric Care of the Patient with Hepatitis C: A Review of the Literature" - which was published in *The Primary Care* Companion to the Journal of Clinical Psychiatry, 2010, Volume 12, Number 6.

### **ADVANCED PRACTICE CLINICIANS UPDATE**

#### APC Quarterly Meeting

Please plan to attend the next quarterly meeting of the Advanced Practice Clinicians on Thursday, April 28, beginning at 5:30 p.m., in Kasych ECC Room 7 at LVH-Cedar Crest. The election of three at-large members of the Executive Council will be held at the meeting.

The APC Executive Council meets monthly on the third Wednesday of each month from 7 to 8 a.m., in the Medical Staff Services Conference Room at LVH-Cedar Crest. APC Executive Council officers are strongly encouraged to attend the Quarterly APC meetings as well.

In keeping with the APC Bylaws/Charter membership stipulations (a maximum of three PA's, three CRNA's, and three CRNP's on the Council) and upon review of the current makeup of the APC Executive Council, nominations for three at-large members will be accepted from the LVHN APC membership as follows:

- CRNP's maximum of two
- CRNA's maximum of one
- ➤ PA's maximum of one
- Nurse Midwives
- Psychologists
- Chiropractors

To nominate a member of the APC staff for an at-large seat, please call 610-402-APC1 (2721). Leave a message including your name and the name of the nominee. Deadline for nominations is April 1, 2011.

## UPCOMING SEMINARS, CONFERENCES AND MEETINGS

#### **General Medical Staff Meeting**

The quarterly meeting of the General Medical Staff will be held on Monday, March 14, beginning at 6 p.m., in ECC Rooms 7 and 8 on the first floor of the Kasych Family Pavilion at LVH-Cedar Crest. The meeting will be teleconferenced to ECC Rooms C and D at LVH-Muhlenberg.

All members of the Medical Staff are encouraged to attend.

#### **GLVIPA Quarterly Meeting**

The quarterly membership meeting of the Greater Lehigh Valley Independent Practice Association will be held on **Tuesday, March 22**, beginning at **6 p.m.**, in the hospital's **Auditorium** at LVH-Cedar Crest, and teleconferenced to **ECC Room C** at LVH-Muhlenberg.

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

#### **Cardiology Grand Rounds**

"Pathology of Drug-Eluting Stents (DES): What We Have Learned from Autopsy Studies" will be presented by Renu Virmani, MD, President and Medical Director, CVPath Institute, Inc., on **Friday, March 4**, from Noon to 1 p.m., in the hospital's Auditorium at LVH-Cedar Crest, and teleconferenced to ECC Room B at LVH-Muhlenberg.

For more information, 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. (unless otherwise noted) at various locations. Topics to be discussed in March include:

- March 3 LVH-M ECC Rooms C and D
  - O "Ultrasound Guided Nerve Block" Kevin Roth, DO
  - O Journal Club William Bond, MD, and Steven Frei, MD
  - O Administrator Hour David Burmeister, DO

- ➤ March 10 LVH-M ECC Rooms C and D
  - Rosen's "Cardiac System: Dysrhythmias, Pericardial and Myocardial Disease, Infective Endocarditis and Valvular Heart Disease" – Michael Weigner, MD
  - O Toxicology Series Matthew Cook, DO
  - O "Tic-Borne Related Illness" Joseph Sexton, MD
  - O "Pediatric Visual Diagnoses" Gregory Smeriglio,DO
  - "Emerging Infectious Disease" Brian Lovett, MD
- March 17 Banko Building
  - O M&M Andrew Miller, DO
  - O "Valvular Heart Disease" Charles Worrilow, MD, and Gavin Barr, Jr., MD
  - O Chair's Rounds
  - O Longitudinal Series Kevin Weaver, DO, and faculty
- March 24 LVH-M ECC Rooms C and D
  - O CPC
- March 31 EMI-2166 S. 12th Street
  - O Bioterrorism course

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

#### **Family Medicine Grand Rounds**

Family Medicine Grand Rounds will be held on **Tuesday, March 1**, from 7 to 8 a.m., in Kasych ECC Room 9 at LVH-Cedar Crest and teleconferenced to ECC Room A at LVH-Muhlenberg.

The topic, to be announced, will be presented by Suneel S. Valla, MD, Department of Family Medicine.

For more information, contact Dorothy Jacquez in the Department of Family Medicine at 610-969-4965 or via email at <a href="mailto:dorothy.jacquez@lvhn.org">dorothy.jacquez@lvhn.org</a>.

#### **Medical Grand Rounds**

Medical Grand Rounds will be 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. Topics for March will include:

- ➤ March 1 "Sharp Turn Ahead: OLST Replaces DNR" – Lou Lukas, MD
- March 8 "Update in Neurology" David Jones, MD, John Castaldo, MD, Yevgeniy Isayev, MD, Christian Schumacher, MD, Sulada Kanchana, MD, Peter Barbour, MD, Clarissa Liew, MD, and Soraya Jimenez, MD
- ➤ March 15 Case Presentation: "Acetaminophen Toxicity" - Robert Cannon, DO
- March 22 "Update in Rheumatoid Arthritis" Kristin Ingraham, DO, MBA
- ➤ March 29 Quality Improvement Forum Location: Kasych ECC Room 6

For more information, contact Shelly Ketchens in the Department of Medicine at 610-402-4412.

#### **Neurology Conferences**

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

- ➤ March 3 Division Meeting
- ➤ March 10 "Early Diagnosis of Parkinson's Disease: Where are we and where are we going?" - Peter Barbour, MD
- March 17 "Bacterial Meningitis and its Complications" - Eric Young, MD
- March 24 "Peripheral Nerve Injuries in the Trauma Population" - Wayne Dubov, MD
- March 31 "Treat Common Medical Illness" Michael Pistoria, DO

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

#### **Nutrition Grand Rounds**

Nutrition Grand Rounds will be held on the first Wednesday of each month beginning at Noon in the Auditorium at LVH-Cedar Crest unless otherwise specified. The topic for March is as follows:

➤ March 2 – "Inflammatory Bowel Disease" – Paola Blanco, MD, and William Whipple, RD, LCN, CDE

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

#### **Pediatric Grand Rounds**

The Department of Pediatrics will hold Grand Rounds at 8 a.m., in Kasych ECC Room 6 at LVH-Cedar Crest on the following Tuesdays in March:

- March 1 "Effective Transition from Pediatric to Adult Health Care for Young Adults with Special Health Care Needs" - Rita Meek, MD, Alfred I. DuPont Hospital for Children
- March 8 Pediatric Hematology/Oncology topic Philip Monteleone, MD
- March 15 Neonatology topic
- March 22 "Evaluation Techniques" Elaine Donoghue, MD, and Amy Smith, PhD
- March 29 "Health Disparities and Cross Cultural Communication" - Jarret Patton, MD, and Judy Sabino

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, March 17, beginning at Noon (registration at 11:45 a.m.) in ECC Rooms B, C and D at LVH-Muhlenberg, and teleconferenced to Kasych ECC Room 7 at LVH-Cedar Crest.

"Emotional and Social Effects of Hearing Loss" will be presented by Mary Kaland, PhD, psychologist with The Guidance Program.

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, March 2**, in Kasych ECC Room 10.

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 are held on Tuesdays at 7 a.m., in the Auditorium at LVH-Cedar Crest and teleconferenced to the First Floor Conference Room at LVH-Muhlenberg. Topics for March will include:

- March 1 "Colo-Rectal Cancer and Genetics" – John D'Emilia, MD
- March 8 "Patient Safety in Surgery: Who, What, When, Where, and Why" – Michael Pasquale, MD
- March 15 "Post-operative Epidural in Patients Undergoing Major Abdominal Surgery: Risks and Benefits" – Michael He, MD
- March 22 "Carotid Stenosis Where are we now?" Samuel Steerman, MD
- March 29 "Surgical Options for the Management of Locally Advanced Non Small Cell Lung Cancer" – Michael Szwerc, MD

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

## What's New in Continuing Medical Education?

#### FYI - Upcoming Events

Update in Cardiology 2011

Saturday, March 5

Kasych Family Pavilion (ECC Rooms 6, 7 and 8)

Registration through 610-402-CARE or eLearning

Neuromuscular Manifestation of Systemic Illness

Wednesday, March 16

Kasych Family Pavilion (ECC Rooms 6, 7 and 8)

Registration through 610-402-CARE

The Yee Family Critical Care Symposium – Essential Tools in Critical Care

Friday, April 1

LVH-Cedar Crest

Registration through eLearning

4th Annual Ethics Symposium – Ethics Across the Continuum of Care: Don't Go to Work Without It

Tuesday, April 5

Kasych Family Pavilion (ECC Rooms 5, 6, 7 and 9)

Registration through 610-402-CARE or eLearning

Past, Present and Future: 20 Years of Transplantation at Lehigh Valley Health Network

Friday, April 8

LVH-Cedar Crest Auditorium

Clinical Staff Development Annual Symposium

Monday, April 11

Kasych Family Pavilion (ECC Rooms 6, 7 and 8)

Registration through eLearning

Risk Reduction Symposium

Friday, April 29

LVH-Cedar Crest Auditorium

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

#### The New Name in Heart and Vascular Care

The Regional Heart Center has a new name – **The Lehigh Valley Health Network Heart and Vascular Center**. The new name better reflects the merging of our cardiac and vascular service lines. Our specialists will continue to provide nationally recognized, quality heart and vascular services at Lehigh Valley Hospital-Cedar Crest and Lehigh Valley Hospital-Muhlenberg.

## 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** 



Michael J. Barrett, MD Lehigh Valley Heart Specialists Center for Advanced Health Care 1250 S. Cedar Crest Blvd., Suite 300 Allentown, PA 18103-6381 Phone: 610-402-3110 Fax: 610-402-3112 Department of Medicine Division of Cardiology Provisional Active



Barbara K. Bollinger, MD Forensic Pathology Associates Inc. 1210 S. Cedar Crest Blvd., Suite 3900 Allentown, PA 18103-6242 Phone: 610-402-8144 Fax: 610-402-5637 Department of Pathology & Laboratory Medicine Division of Anatomic Pathology Section of Medical and Forensic Pathology Provisional Active



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



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



Marianne Hamel, MD, PhD Forensic Pathology Associates Inc. 1210 S. Cedar Crest Blvd., Suite 3900 Allentown, PA 18103-6242 Phone: 610-402-8144 Fax: 610-402-5637 Department of Pathology & Laboratory Medicine Division of Anatomic Pathology Section of Medical and Forensic Pathology Provisional Active



Scott L. Hamilton, DO LVH-M Emergency Medicine LVH-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



Richard C. Massaro, 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

#### Status Changes

George A. Arangio, MD Department of Surgery Division of Orthopedic Surgery Section of Ortho Trauma/Foot and Ankle Surgery From: Active To: Honorary Status

Pasquale J. Fugazzotto, MD Department of Pediatrics Division of General Pediatrics From: Active To: Honorary Status

#### Theodore H. Gaylor, MD

Department of Surgery

Division of Otolaryngology-Head & Neck Surgery

From: Active To: Honorary Status

#### Tayyaba S. Jan, MD

Department of Pediatrics

Division of General Pediatrics

From: Associate To: Active

#### Richard C. Pearce, MD

Department of Family Medicine

From: Provisional Active To: Affiliate

#### Joseph H. Schaffer, DDS

Department of Dental Medicine

Division of General Dentistry

From: Active To: Honorary Status

#### Elliot J. Sussman, MD

Department of Medicine

Division of General Internal Medicine

From: Active To: Honorary Status

#### Wen-Shiong Yang, MD

Department of Anesthesiology

From: Active To: Honorary Status

#### In Memoriam

#### Alan H. Wolson, MD

Department of Radiology-Diagnostic Medical Imaging

Division of Diagnostic Radiology

May 13, 1942 – January 17, 2011

#### Change to Departmental Assignment

#### Steven A. Scott, MD

Department of Medicine

From: Division of General Internal Medicine/Geriatrics,

Section of Hospital Medicine

To: Division of General Internal Medicine, Section of

Hospital Medicine

#### Michael F. Szwerc, MD

Department of Surgery

Division of Cardio-Thoracic Surgery

From: Section of Cardiac Surgery/Thoracic Surgery

To: Section of Thoracic Surgery

#### **Primary Office Address Change**

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

Lehigh Valley Surgical Oncology

1240 S. Cedar Crest Blvd., Suite 205

Allentown, PA 18103-6264

Phone: 610-402-7884 Fax: 610-402-8876

#### Michael R. Goldner, DO

Muhlenberg Primary Care, PC

2649 Schoenersville Road, Suite 201

Bethlehem, PA 18017-7326

Phone: 610-868-6880 Fax: 610-868-5333

#### **Practice Changes**

#### Thomas V. Brislin, DO

(No longer with Lehigh Internal Medicine Associates)

LVHN Elder Care

1240 S. Cedar Crest Blvd., Suite 409

Allentown, PA 18103-6218

Phone: 610-402-5623 Fax: 610-402-5959

#### Vanessa J. Eiswerth, DO

(No longer with Community Physician Practice Growth Initiative)

Whitehall Medical Center

3691 Crescent Court East, Suite 100

Whitehall, PA 18052-3498

Phone: 610-434-4294 Fax: 610-439-1224

#### MaryAnne K. Peifer, MD

(No longer with Valley Family Medical Center)

Eagle Point Family Medicine

5505 MacArthur Road

Whitehall, PA 18052-1605

Phone: 610-262-2706 Fax: 610-262-2707

#### Louis E. Spikol, MD

(No longer with Spikol & Medina Family Medicine)

Eagle Point Family Medicine

5505 MacArthur Road

Whitehall, PA 18052-1605

Phone: 610-262-2706 Fax: 610-262-2707

#### **Practice Name Change**

#### Lisa H. Medina, MD

From: Spikol & Medina Family Medicine

To: Manor Family Medicine

1111 Sixth Street

Whitehall, PA 18052-5212

Phone: 610-403-3800 Fax: 610-403-3805

#### Resignations

#### Neil D. Belman, DO

Department of Medicine Division of Hematology-Medical Oncology (Oncology-Hematology of Lehigh Valley, PC)

#### Rene Chalom, MD

Department of Pediatrics Division of Critical Care Medicine (LVH Pediatric Intensive Care)

#### Christina L. Dunbar, DO

Department of Medicine Division of General Internal Medicine (LVH-Department of Medicine)

#### Yacoub Faroun, MD

Department of Medicine Division of Hematology-Medical Oncology (Oncology-Hematology of Lehigh Valley, PC)

#### Paul J. Mosca, MD, PhD

Department of Surgery Division of General Surgery Section of Surgical Oncology (Lehigh Valley Surgical Oncology)

#### Steven F. Nemerson, MD, MBA

Department of Pediatrics Division of Critical Care Medicine (LVH Pediatric Intensive Care)

#### Christopher M. Pogodzinski, MD

Department of Family Medicine (Nazareth Area Family Medicine Associates, PC)

#### Subhash C. Proothi, MD

Department of Medicine Division of Hematology-Medical Oncology (Oncology-Hematology of Lehigh Valley, PC)

#### Robert M. Roeshman, DO

Department of Medicine Division of Neurology

#### Catherine Schrei Broadt, DO

Department of Family Medicine (Nazareth Area Family Medicine Associates, PC)

#### Narpinder Singh, MD

Department of Medicine Division of Cardiology (Coventry Cardiology Associates)

#### Allied Health Staff

#### **New Appointments**



Jennifer L. Becker Administrative Support Young's Medical Equipment 2710 Emrick Blvd. Bethlehem, PA 18020-8012 Phone: 800-258-7770 Fax: 610-867-7023

#### Linda L. Breidigam, CRNP



Certified Registered Nurse Practitioner Health Center at Moselem Springs 14351 Kutztown Road Fleetwood, PA 19522-9273 Phone: 610-944-8800 Fax: 610-944-8213 Supervising Physician: Joselito A. Ouano, MD

Supervising Physician: Richard J. Strobel, MD

Evan M. Leibelsperger, PA-C



Physician Assistant-Certified OAA Orthopaedic Specialists 250 Cetronia Road, Second Floor Allentown, PA 18104-9168 Phone: 610-973-6200 Fax: 610-973-6545 Supervising Physician: Jay S. Talsania, MD

#### Joseph P. Ossiander, CRNA



Certified Registered Nurse Anesthetist Lehigh Valley Anesthesia Services, PC 1210 S. Cedar Crest Blvd., Suite 1100 Allentown, PA 18103-6241 Phone: 610-402-1374 Fax: 610-402-4230 Supervising Physician: Thomas M. McLoughlin, Jr., MD

#### Heather A. Shevchik, PA-C



Physician Assistant-Certified Coordinated Health 2775 Schoenersville Road Bethlehem, PA 18017-7307 Phone: 610-861-8080 Fax: 610-861-2989 Supervising Physician: Christopher F. Wagener, MD



Traci L. Wagner, CRNP

Certified Registered Nurse Practitioner

LVPG-Emergency Medicine

Lehigh Valley Hospital

Cedar Crest & I-78, P.O. Box 689

Allentown, PA 18105-1556

Phone: 610-402-8130 Fax: 610-402-7160

Supervising Physician: David B. Burmeister, DO

#### **Change of Status**

Tina M. VanBuren, CNS
From: Registered Nurse
To: Clinical Nurse Specialist
(Pulmonary Associates – Matthew M. McCambridge, MD)

#### Removal of Supervising Physician

Catherine M. Ehrig, CRNP
Certified Registered Nurse Practitioner
(Lehigh Valley Family Health Center – Jeffrey S. Mathieu, MD)
Removal of: LVPG-Emergency Medicine – David B. Burmeister, DO

#### Resignations

Heather A. Davis, PA-C Physician Assistant-Certified (Advanced Dermatology Associates, Ltd.)

#### Suzanne J. DeLaPlante, CCP

Perfusionist (Perfusion Care Associates, Inc.)

#### Natalie L. Fahs, PA-C

Physician Assistant-Certified (Cedar Crest ENT Associates, PC)

#### Michael R. Krzyzewski, CCP

Perfusionist (Perfusion Care Associates, Inc.)

#### Elizabeth K. Nesland, CRNP

Certified Registered Nurse Practitioner (LVPG-Pediatrics)

#### Beatrice A. Oertner, RN

Registered Nurse (The Heart Care Group)

#### Michael J. Wassel, Jr., PA-C

Physician Assistant-Certified (Advanced Dermatology Associates, Ltd.)



#### Medical Staff Services Office

Michael J. Pistoria, DO President, Medical Staff

Michael D. Pasquale, MD President-elect, Medical Staff

Matthew M. McCambridge, MD Past President, Medical Staff

John W. Hart
Vice President, Medical Staff Services

Janet M. Seifert

Coordinator, Communications & Special Events

Managing Editor

#### Medical Executive Committee

Charles F. Andrews, MD

Paul M. Berger, MD

Aaron D. Bleznak, MD

Anthony P. Buonanno, MD

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