

Checkup

NOVEMBER
2013

When They Return

Our mission to serve
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A PASSION FOR BETTER MEDICINE

 **Lehigh Valley
Health Network**



Terry Capuano, RN
Chief operating officer

“Achieve
excellence
and then take
it one step
further.”

Leading the Way

A never-ending quest for
excellence fuels our success

“Even if you’re on the right track, you’ll get run over if you just sit there.” Will Rogers said that more than a century ago. It’s one of the many pearls of wisdom – all submitted by colleagues – on the Lehigh Valley Health Network (LVHN)–Mack Boulevard quote wall. It’s also a fitting illustration of our passion for better medicine.

Twice during the past few weeks, that passion was highlighted in a big way. On Sept. 18, we announced LVHN has entered an alliance with six other Pennsylvania and New Jersey health care systems to form AllSpire Health Partners. It’s a bold and visionary step that sets us up for future success. Similar consortiums have formed elsewhere, but none approach AllSpire’s scope and scale.

I’ve met colleagues at our partner institutions and am excited about our possibilities and potential. By sharing best practices, we’ll leverage the strengths of our alliance’s more than 25 hospitals. Together, we represent more than 20 specialties ranked among the best in the nation.

Through our collaboration on population health, we’ll help the people of our communities take charge of their own health while ensuring they have access to patient-focused, cost-efficient care. Collaboration with other systems that share our vision and passion is necessary for the future strength of our health network.

Our never-ending quest for excellence includes the use of technology to make people healthier. One example is our growing commitment to telehealth, which brings LVHN’s expertise to communities in need of our advanced clinical capabilities.

On Oct. 2, our telehealth program was awarded the prestigious Magnet Prize® at the annual American Nurses Credentialing Center National Magnet Conference in Orlando. This recognition represents innovation that stands above all others – the very best of the best. Standing alongside colleagues as we accepted the award on behalf of LVHN was one of the proudest moments of my career.

Our telehealth team uses interactive video technology to connect patients and other providers remotely with LVHN experts in areas such as stroke, burn and wound care – 15 services in all – that are not available in their communities. The Magnet committee noted that others provide telehealth, but no other program is as robust and diverse as ours.

That’s the LVHN way. Achieve excellence and then take it one step further. It all starts with you. Thank you for contributing your passion and talents to a team that never settles for the status quo.



DEBRA DEDDO and KARISSA MILLER
with Plastic Surgery Associates of Lehigh Valley enter their time through API Time and Attendance as part of the pilot group.

All About API

New tools will help colleagues track time, attendance, scheduling and staffing

You may have seen them in hallways.

They're small, white, wall-mounted boxes with digital screens, and they're one way our health network will use technology to make sure all colleagues are paid accurately for their hard work.

They're part of something called API. That's the system all colleagues will eventually use to record the time and days they work. API also will be used by clinical colleagues for staffing and scheduling. "API has been working with other health systems for more than 30 years and is skilled at developing helpful tools for health care workers," says Tracie Merkle, RN, director of staffing operations and co-leader of the API project.

If you're not yet familiar with API, you will be. The first pilot group of nearly 450 colleagues began using it to track their time in October, and the tools will be rolled out in phases. By November 2014, every LVHN colleague will be using it.

HERE'S HOW THE TWO API TOOLS WILL WORK:

► **The time and attendance tool** will allow exempt (salaried) colleagues to record nonproductive time (PTO, sick, jury duty, etc.) on their computer, and will allow non-exempt (hourly) colleagues to use a badge swipe or computer to record time worked. When fully implemented, API will replace Lawson time entry and all other time systems currently being used.

► **The staffing and scheduling tool** will allow clinical colleagues to view their schedules and open shifts from work or home. When fully implemented, it will replace ANSOS One-Staff.

All colleagues will be able to access API from their SSO Toolbar. The type of API tool you use will be determined by where you work in LVHN and the type of work you do.

All colleagues also will receive education on how to use the API tools through

The Learning Curve (TLC). "When it's time for your department to get involved, your supervisor will be notified by email," says payroll director Dawn Gugliuzza, API project co-leader. Your supervisor will then share with you specifics about training modules and processes.

The API tools will take some adjustment. "They mark a major change in the way we record time and attendance and the way we staff and schedule clinical areas," Merkle says. It's also necessary for a health network that includes more than 12,000 colleagues. The benefits: "You'll have more control over the way you record hours and more control over your schedule," Gugliuzza says. "In the end, API will make our health network better."

—Kyle Hardner

NEXT STEP

Learn more about API

Operation: Learn **Epic**

Nicole Crystal is part of a team that will help us embrace our new EMR system

When surgeons at Reading Health System began learning the Epic electronic medical record (EMR) system two years ago, Nicole Crystal stood by their side. “I scrubbed into the operating room, was there to answer any Epic-related questions the surgeons had, and worked 24/7 to support them,” she says.

That’s the kind of dedication and enthusiasm Crystal and the entire Epic team are bringing to Lehigh Valley Health Network’s (LVHN) implementation. Crystal is one of dozens of professionals in information services and the Division of Education, along with doctors, clinicians and other trained super-users, who will lead training sessions, offer face-to-face education and help build the excitement for the 2015 launch of Epic.

NICOLE’S JOURNEY

Crystal’s experience with Epic goes back more than a decade – all the way to another coast. She helped implement an earlier version of Epic in the Kaiser Permanente health system. “I worked in their northern California region,” she says.

When the opportunity to work on Reading’s Epic implementation arrived, she couldn’t wait to get started. “Epic is

fantastic,” she says. “They listen to the end user to continually improve their system. Each new upgrade is better than the last.”

While Crystal is quite familiar with Epic, she and other members of our Epic education team are always brushing up on their knowledge. For the past few months, they’ve been taking classes and exams at Epic’s headquarters in Wisconsin to become certified. “Epic is like Disneyland for geeks,” she says with a laugh. “They understand that if training succeeds, the system will succeed, which is why they put so much effort into education.”

This time around as an LVHN colleague, Crystal will be an instructional designer, and part of the team that helps to plan and design curriculum for physicians and surgeons. She’ll be training super-users – colleagues who will then teach others the ins and outs of Epic. She also will provide elbow-to-elbow support when and where her colleagues need her most.

Epic will include dozens of modules, each with a unique view of the same data. Crystal will provide education for EpicCare Inpatient Orders, the module surgeons and physicians will use inside the hospital. Other members of the team provide education for different modules, such as EpicCare Inpatient ClinDoc, which will

be used by hospital nurses and clinicians.

SETTING OFF ‘LIGHT BULBS’

Surgeons and doctors, like most people, have different levels of comfort with technology and learning EMR systems like Epic. It’s a challenge Crystal handles well. “All of us try to be flexible, communicate as much as possible and offer additional training for people who need it,” she says. “When you show how knowledgeable you are in Epic, it gives the learner confidence.”

Sometimes the people she trains begin as skeptics. Once they see the power of Epic, they become believers. “It’s amazing to see the light bulbs go off,” Crystal says. “Once physicians see how it works and how to optimize it, they see a huge benefit.”

The end goal: to have all of LVHN prepared and supported as we move to Epic. It’s a challenge Crystal accepts. “I’m thrilled to be part of a phenomenal group of educators, led by experienced and dedicated colleagues,” she says. “I know Epic at LVHN will be a huge success.”

–Kyle Hardner





NICOLE CRYSTAL will help
surgeons and physicians learn Epic.

What Epic Will Look Like

Epic is the biggest information technology project in our history – and with good reason. Once complete, Epic will replace nearly two dozen systems currently in use, which is true to Epic’s “one patient, one record, one system” approach.

Epic’s EMR also will benefit patients. Through an online application called “My Chart,” patients will be able to view upcoming appointments, allergies, immunizations, lab and test results.

See a demo of Epic and learn more about the project.



Serving Those Who Serve

We're learning how to meet veterans' unique health care needs

Diving into a crowded roadside bunker as shells explode all around you isn't an experience you soon forget. Neither is watching a buddy die – and wondering if you're next.

Eric Johnson knows this all too well. The facilities and construction operations specialist served nearly 10 years in the Air Force, ending with a six-month tour in Afghanistan. He returned home in 2010, but Johnson still suffers from hearing loss and traumatic brain injury (TBI) from the seismic force of the blasts he survived. The emotional repercussions also linger.

"Many of us shut down emotionally in order to keep functioning," says Johnson, who serves as LVHN's veterans' affairs liaison officer. "That's one reason readjusting to civilian life can be so challenging."

From World War II to Vietnam to Desert Storm, every military conflict poses unique health risks. Post-traumatic stress disorder, TBI, chronic joint pain and side effects from chemicals like Agent Orange are just a few of the long-term health issues veterans face.

"Many veterans don't realize – or talk about – the underlying causes of their symptoms," Johnson says. "That makes proper diagnosis and treatment more difficult." Together with diversity and cultural awareness liaison Judy Sabino, Johnson is leading a team that's working to change that.

What began as the Patient-Centered Experience (PCE) Veteran Health Project in 2012 is now a permanent LVHN initiative. More than 150 colleagues, deemed "veteran champions," are participating, including

Celebrate Veterans Day

Learn how we're saluting veterans on Nov. 11 during celebrations at our three hospitals and Mack Boulevard.

veterans, family members and colleagues who simply want to help (see sidebar).

Identifying the estimated 5-15 percent of Lehigh Valley residents who are veterans has been a top priority. "In order to better understand military culture, we first need to know who these men and women are," Sabino says.

A major step forward will take place on Veterans Day, Nov. 11. In collaboration with six other area hospitals, LVHN will roll out a standardized veteran identification tool at all patient registration areas. Veteran status now will be added to patient records, and clinicians will be given a pocket guide to help identify and discuss service-related health issues.

"It's a significant accomplishment, but we have much more work to do," Sabino says.

OTHER ONGOING

INITIATIVES INCLUDE:

- ▶ Continuing education for clinicians
- ▶ Web-based resource development
- ▶ Annual Memorial Day and Veterans Day ceremonies
- ▶ Support groups for LVHN veterans and family members

The peer support, Johnson says, is especially meaningful. "It's been extremely cathartic for me," he says. "Now I know I'm not alone."

—Gerard Migliore

MEET TWO VETERAN CHAMPIONS



BILL SISOLAK

PATIENT TRANSPORT SERVICES SUPERVISOR

Sisolak served in the Navy and the Army National Guard. He also worked for the Department of Defense during the Gulf War, overseeing a team that retrieved explosive devices from Iraq so they could be inspected and studied. Now he's co-leading a project to educate clinicians on veterans' health issues.

"My team handled materials like depleted uranium. Other troops were exposed to oil well fires and other environmental threats. Clinicians and veterans alike need to better understand the impact of these threats. I'm honored to help make that happen."

CATHY STORY

DIAGNOSTIC SERVICES ADMINISTRATOR

Story is not a veteran, but after hearing Johnson describe the veteran health project, she realized some veterans may feel extra stress during diagnostic procedures like magnetic resonance imaging (MRI). Story decided to investigate the issue.



"The darkness, tight spaces and loud noises during an MRI can potentially be very traumatic. We're working to create a better testing experience for these men and women. It's the least we can do for the service they've given us."

Simply the Best

The role of nurses in our telehealth programs earns us the prestigious Magnet Prize®

Achieving Magnet® status requires effort. The American Nurses Credentialing Center (ANCC) sets high standards for hospitals seeking to achieve this recognition. The same organization sets another high bar when it comes to its annual Magnet Prize®. This national award recognizes innovative nursing programs and practices and is given to a single hospital among all ANCC Magnet-designated organizations. This year, Lehigh Valley Health Network received the Magnet Prize by detailing the impact professional nurses make in our telehealth services program.

“The LVHN telehealth programs reveal how essential nurses are in leading, developing and improving upon the use of new technologies to ensure the best in patient care,” says ANCC executive director Karen Drenkard, PhD. “These

telehealth programs are powerful models to be implemented nationally and globally as a transformative new care delivery system.”

“Having LVHN recognized by the ANCC as the Magnet Prize recipient is an honor we share with all of our nurses and colleagues,” says Anne Panik, RN, senior vice president for patient care services. “We can all feel proud of this accomplishment and feel energized to lead the way to the next level of patient care.”

At the ANCC National Magnet Conference, chief operating officer Terry Capuano, RN, vice president for telehealth services Joe Tracy and Panik presented a multimedia program to more than 7,000 attendees. As part of the presentation, videos featuring several colleagues were shown to help tell our telehealth story.



DR. SWINFARD'S TELEHEALTH EXPERIENCE

Telehealth as a health care service model has long been championed by our president and chief executive officer Ron Swinfard, MD. His experience with telemedicine as a dermatologist in Missouri helped shape his perspective about the power and potential of this interactive medium.



NURSES PLAY AN INTEGRAL ROLE

From the beginning, we relied on the experience of nurses to bring interactive telehealth technologies to the bedside and exam room. Lori Yesenofski, RN, and Sharon Kromer, RN, discuss their role as clinical coordinators for telehealth.



BENEFITS OF AN AICU

Among our most studied and talked about telehealth service is the advanced intensive care unit (AICU). Intensivist Matt McCambridge, MD, explains some of the processes that make the AICU work and the outcomes achieved from this level of care.



BABYCAM KEEPS FAMILIES CONNECTED

BabyCam is an amazing service that offers the most comforting image worried parents could ask for – a live video image of their baby in our neonatal intensive care unit (NICU). Jane Nemeth, RN, and a family talk about the impact of the BabyCam service.

—Jenn Fisher

NEXT STEP

See the rest of the videos shown at the ANCC National Magnet Conference on our [telehealth services web page](http://telehealthservices.lvn.org).

Presidents, Chefs, Phlebotomists and Children

Trish and Michael Evans' love story ties them all together

If not for Michael Evans' 12 years as a chef aboard Air Force One, 10 years as a corporate chef and sudden unemployment, Patricia "Trish" Evans may never have become a phlebotomist at Health Network Laboratories. "It's been quite a journey," says Trish, "but it couldn't have worked out better."

The journey is actually a love story for Trish and Michael Evans, who met while Michael was in the U.S. Air Force trying to cope with being a single parent of a special-needs son. "Trish came into my life when my son, Ryan, was 7," says Michael. "She fell in love with him before she fell in love with me. He was heartbroken by the ending of my first marriage. Trish was the Band-Aid on his broken heart."

Trish became a stay-at-home mom for Ryan and eventually two children of her own, Sarah and Noah. Meanwhile, Michael cooked on Air Force One for three presi-

dents: Ronald Reagan, George H.W. Bush and Bill Clinton.

"I was in the Air Force for 21 years. Because I could cook, it led me to working aboard flights for dignitaries such as the First Lady, senators and congressmen," Michael says. "Eventually I was recommended for Air Force One. The first time I stepped aboard, I found myself standing in the spot where John F. Kennedy's casket was kept after his assassination. You can feel the history on that plane."

In 1998, Michael got a lucrative offer from CitiBank. He retired from the Air Force and spent 10 years with CitiBank before the economic woes of 2008 forced him out. He got his severance package and shared an idea with Trish.

"Michael told me this was my chance to study phlebotomy," Trish says. "We had the money to do it, and he knew it was something close to my heart."

That's because of Trish's experiences with her children. While getting blood drawn, Ryan was once stuck eight times, and Sarah was strapped down simply because she was afraid. "I was horrified," Trish says.

In just three years at Health Network Laboratories, Trish has developed a stellar reputation. At last spring's Friends of Nursing Awards gala, she earned the Kathy Mundt-Bulla Memorial Award for excellence as a laboratorian for her velvet touch in drawing blood. ABC Family Pediatrics, across the hall from her Center Valley office, always asks for her when a blood sample is needed.

"I take it personally if I don't get the vein on the first try," Trish says. "It's all about having a soft touch and listening. I also have a Minnie Mouse voice that helps. For me, it's doing everything I can to avoid the experience my kids had. That always stays with me."

— Ted Williams



How to Make an Employee Survey Improvement Plan

Follow these seven steps to create an even better workplace

Karen McHugh communicates with visuals. That's why Lehigh Valley Hospital–Muhlenberg's supervisor of patient transport services created a poster to share her department's employee survey results with colleagues. It shows the department's strengths and opportunities, and encourages colleagues to vote for one thing they should work on to make the department an even better place to work. "It's definitely getting colleagues energized," she says.

Throughout Lehigh Valley Health Network (LVHN), supervisors like McHugh are engaging colleagues and using the results of April's employee survey to create an improvement plan. **Improvement plans must be submitted by Dec. 1.** "Producing an interactive, collaborative and effective improvement plan is key to LVHN's success," says Jack Dunleavy, organizational development senior consultant.

Supervisors and their teams should follow these steps to create a plan:

1. PUT YOUR RESULTS IN CONTEXT.

Consider what has and has not gone well, and what has changed in your department and LVHN since our last employee survey in 2010. These factors likely affected your department's results.

2. CELEBRATE FIVE AREAS OF STRENGTH.

Each department's survey report contains a graph with four sections (leverage analysis) that shows how colleagues responded collectively to each survey statement. Statements that rank in the upper-right section represent your department's strengths and attributes that are important to LVHN. Celebrate these as a team.

3. IDENTIFY FIVE OPPORTUNITIES FOR IMPROVEMENT. Focus on the upper-left section. Statements here represent important opportunities for improvement in your



Karen McHugh, Rachael Brendahl and their colleagues are creating a better place to work.

department. Review comments from the survey's open-ended questions to see if multiple colleagues support the data in your report or identify additional opportunities for improvement.

4. CHOOSE TOPICS FOR DISCUSSION.

From your list of strengths and opportunities, choose five topics. For each, consider why you scored the way you did.

5. DISCUSS YOUR TOPICS WITH YOUR WHOLE TEAM. Encourage colleagues to talk about the factors that led to your scores and to share ideas about ways your department can improve.

6. CREATE AND SUBMIT YOUR IMPROVEMENT PLAN. Based on colleagues' feedback, choose at least one thing your department can work on to make it a better place to work. Clearly define your objective and the steps you will take to improve. (If your department did not receive an employee survey report, use LVHN's overall results to create your improvement plan.) Each LVHN department also will create an improvement plan to enhance trust between colleagues and supervisors.

7. PUT YOUR PLAN INTO ACTION.

"Submitting your plan is just the beginning," Dunleavy says. "It's up to all of us to implement our plans so we can be at our best for colleagues, patients and visitors."

—Rick Martuscelli

NEXT STEPS

- ▶ Contact Jack Dunleavy (484-884-0203) or Jessica Ruane (484-884-0207) with questions.
- ▶ Visit the **Leader-to-Leader Sharepoint site** for:
 - An improvement plan template
 - Our network survey results
 - Information about building trust and relationships
 - The employee survey leader toolkit

Submit your improvement plan on the site by clicking on your senior leader's name.

Repeat Champions



For eight years, Valley Preferred has had several teams ride in the Rodale Corporate Challenge at the Valley Preferred Cycling Center. This year, Valley Preferred Team 1 successfully defended the title. Team members (l-r) Wayne Dubov, MD, Randy Smargiassi, DPM, Julie Antidormi, CRNA, Gary Riddell, Meg Moore, MD, and Rich Boorse, MD, finished with an official time of 2:35:09. Team 1 defeated 14 other teams, including two teams from Philadelphia. One of the Philly teams was coached by Philadelphia Mayor Michael Nutter, who was on the sidelines all night long.

Dental Resident Is a Superhero



Dental residents Eric Turner, DMD (right), and John McGuire, DMD, were trying to escape an intense rainstorm that flooded streets around the Allentown Fairgrounds. On Sumner Avenue, the water reached the floorboards in McGuire's SUV and caused the vehicle to stall. As they abandoned the vehicle and headed toward higher ground, Turner noticed a stalled car moving in the current toward McGuire's SUV. He had seen no one exiting so he waded over and told the occupants – Melanie Rivera and her children, Maleah, 16, Xavian, 13, and Elani, 4 – to get out. Seeing the scared little girl wrapped in a blanket in the back, Turner scooped her up and carried her to safety while Rivera and her other children followed, just as the car floated away. For the next few days, Elani told her mom and everyone she encountered that Turner was her superhero.

RECOGNIZED FOR HIGH-VALUE CARE

Discovering ways to enhance the quality of care while lowering costs is the right thing to do for our patients. We're doing just that based on the results of an evaluation of our hospitals conducted as part of the Highmark Quality Blue Pay-for-Performance Program. As a program participant, teams of colleagues throughout our health network looked at ways to reduce readmissions and hospital-acquired infections, and enhance diabetes, emergency and palliative care. New processes were implemented, and data were collected and shared with Highmark representatives during a site visit. In the end, Lehigh Valley Hospital and Lehigh Valley Hospital–Muhlenberg achieved a maximum score. Hospitals that do so earn higher reimbursements from Highmark, one of the largest health insurers in Pennsylvania. The work colleagues have done as part of the program has resulted in more than \$23 million in Highmark reimbursements over the past four years.

Learn more about the program and meet the colleagues who helped us achieve a maximum score.

Get Your Free Turkey



You deserve to be rewarded for your hard work. That's why all colleagues will receive a free 12-14-pound frozen Jaindl turkey. It's the third consecutive year colleagues will receive this holiday gift. You'll receive a card in your home mail that contains the certificate you'll need to get your turkey. Turkeys will be distributed:

Wednesday, Nov. 13, 2-5 p.m.

- ▶ Dorney Park, parking lot
- ▶ Lehigh Valley Health Network–Mack Boulevard, corner of rear parking lot

Thursday, Nov. 14, 2-5 p.m.

- ▶ Dorney Park, parking lot
- ▶ Lehigh Valley Hospital–Muhlenberg, Nite Lites event pad

Certificates also can be redeemed during business hours at the Jaindl Farms Store. See the certificate for details.

Service Star of the Month



Beth Pacchioli

7B, Lehigh Valley Hospital–Cedar Crest

Technical partner Beth Pacchioli's philosophy of care is to put herself in her patient's shoes and ask what she would want if she were in the same situation. Her philosophy helped one patient establish a sense of normalcy during a long hospital stay.

Her patient had been placed in guardianship and was unable to make decisions for himself. He was hard of hearing, at increased risk for falls, couldn't go for a walk without an escort and had no support from family or friends. If one of his caregivers didn't have time to escort him, he essentially was stuck in his room. Because he was used to being independent, he was becoming agitated as he waited to be placed in a skilled nursing facility.

Pacchioli knew establishing a routine for her patient would go a long way in helping him cope with his situation. She started taking him to the cafeteria for ice cream or snacks several times a day. Even if he wasn't her patient that day, she would take him on her breaks. Because he didn't have much money, she would spend her own to buy him treats. Pacchioli

even purchased an over-the-counter hearing aid for him with her own money.

"I made it clear to Beth that she didn't have to use her own money to help patients," says nominator Kelly Dougherty, RN. "But she told me, 'We are here to take care of each other as human beings. That's what it's all about. Sometimes some people need more help than others.'"

Her compassion and caring formed an everlasting bond with the patient, who has since been moved to a skilled nursing facility. He still calls the unit just to talk with Pacchioli.

This wasn't the first time Pacchioli befriended a patient who was feeling lonely during an extended stay. She supported a patient who was wheelchair-bound and in the hospital for nearly one month by regularly taking him to the cafeteria and buying him milkshakes. A 103-year-old patient also appreciated sitting with Pacchioli for 20 minutes when she just needed someone to talk to. "Beth truly exemplifies PRIDE behaviors," Dougherty says.

—Matthew Burns

THINGS TO REMEMBER WHEN NOMINATING A SERVICE STAR:

- ▶ **Choose a colleague or a team** of colleagues.
- ▶ **Tell a story.** Specifically explain how the colleague or team did something extra special.
- ▶ **All colleagues and teams** can be nominated. You don't have to provide direct patient care to be a Service Star.

NEXT STEPS

- ▶ **Nominate a Service Star**
- ▶ Visit **Mission Central** to read the stories of these nominees:
 - **Perioperative services supply management team**, Lehigh Valley Hospital–Cedar Crest
 - **Michelle Dunleavy**, Plastic Surgery Associates of the Lehigh Valley
 - **Catherine Williams**, staffing office, Lehigh Valley Hospital–Muhlenberg
 - **William Swedar**, information services

45 Years

Bernadette Kratzer
Infection Control/
Prevention

35 Years

Terry Bogunovich
Medical Records

Vicki Girodo
4K

Darlene Hinkle
Fairgrounds Surgical
Center

Debra Jones
Sleep Disorders Center

John Kiriposki
Courier Services

Dorothy Pfeiffer
Epic

30 Years

Anita Breittfeld
Valley Family Medical
Center

Mary Green
ASU Staging

Lynn Roth
3T

Agnes Schwartz
Partial Hospitalization

25 Years

Beverly Dillman
Information Services

Kim Dreisbach
OR Centralized
Scheduling

Gerald Lawrence
Security

Suzanne Micek
Pediatrics

Ai Ng
Nursing Float Pool

Francis Paulson
Security

Judith Post
Emergency Services

20 Years

Deborah Fenimore
Crisis Intervention

Gina Leiby
OR Centralized
Scheduling

Phyllis Smith
Diagnostic Care Center

Barbara Thomas
Hospice

15 Years

Jacqueline Bortz
Village Lane Primary Care

Linda Carey
Group Health Claims

Joyce Chacko
Nursing Float Pool

Michele Grietzer
Family Health Center

Lisa Kresge
EMR

Jeri Lemanek
Employee Health

Roxanne Masino
LVPG Billing

Robin Montgomery
Managed Care

Pamela Repetz
Specialty Practice Mgmt.

Irene Rock
LVPG Collections

Gail Stern
Psychiatry

Charles Stivala
Health Spectrum
Pharmacy

Lisa Vanderbeck
PACU

10 Years

Robin Aldinger
2 South

Catherine Bachert
Hemodialysis Center

Jocelyn Burgos
MacArthur Medical
Center

Marisol Colon
LVPG Reimbursement

Kristen Cornell
Nursing Float Pool

Jennifer Eddinger
Operations

Kathleen Felix
Case Management

Brad Fulmer
Security

Patricia Hendricks
Radiation Oncology

Laura Herbener
7C

Charmaine Jackson
Medical Records

Melanie Johnson
Dept. of Family Practice

Debra Keller
Breast Health Services

Afifi Khoury
Wound Healing Center

Caroline Klepeisz
NICU

Jane Krasulak
Valley Family Medical
Center

Kassidy Lax
EAU

Christine Lehr
Emergency Services

Kristie Lowery
Patient Safety

Michael Papp
LV Anesthesia Services

Susan Patterson
Wound Ostomy
Continence

Barbara Schroeder
Case Management

Abbe Seidel
Operating Room

Lori Ann Simmons
Heart Station

Gary Thorne
Epic

Carole Wetherhold
LV Anesthesia Services

Diane Zantias
College Heights OB/GYN

5 Years

Barbara Bechtold
Case Management

Amanda Brittain
ER Coding

Christine Bush
LVHN Fitness

Lauren Butcher
MICU/SICU

Katie Christman
MICU/SICU

Karla Cox
Medicine Clinics

Kensy Dubon
LVPG Billing

Joan Dunbobbin
Anti-Coagulation

Deborah Elsheakh
ABC Family Peds

Loralye Feinberg
OB/GYN Assoc.

Dayle Hammons
Hematology Oncology
Assoc.

Denisette Irizarry
402-CARE

Dorothy Jacquez
Family Medicine
Residency

Masuma Juma
Nursing Float Pool

Christina Kaufman
Case Mgmt. Float Pool

Andrew Knittle
LV Anesthesia Services

**Roxanne
Leibensperger**
Operating Room

Camille Llewellyn
LVHN Fitness

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Gail Moyer
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Sumerta Ochani
Gynecologic Oncology
Spec.

Michael Pisciotto
Information Services

Pamela Podeszwa
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Rebecca Rodriguez
6K

Jane Russek
Pharmacy

Bhavesht Satashia
Hospitalist Program

Charles Scagliotti
Surgery-Education

Yvonne Schroeder
Rheumatology

Kelli Staples
ED Registration

Melissa Taylor
Trexlerstown Medical
Center

Nancy Throckmorton
Regional Heart Center-
Medical

Jillian Timer
Pediatric Unit

Tiffany Weller
Float Pool

Samiyyah Whitney
NORI

Gallus Wukitsch
Health Spectrum
Pharmacy

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LVH.com | LVHN.org

A PASSION FOR BETTER MEDICINE



Culture of Wellness

Schedule

Monday Morning Moms

Starting Nov. 4

Preparing for Childbirth and Baby (six-week series)

Nov. 4



Postpartum Support Group

Nov. 4 and 21

CPR Family and Friends

Nov. 5



Car Seat Check Event

Nov. 6, 21 and 27

Breast-feeding Your Baby

Nov. 7 and 20

Preparing for Childbirth (Saturday/Sunday class)

Nov. 9 and 10



Maternity Tour

Nov. 10, 18 and 25



Sibling Tour

Nov. 10

Baby Care (two-week series)

Nov. 12 and 19

Preparing for Childbirth (one-day class)

Nov. 16

Secrets to Staying Patient and Calm With Your Kids

Nov. 19

Preparing for Childbirth (Friday/Saturday class)

Nov. 22 and 23

[Learn more.](#)

LVHN Fitness Group Classes

Being an LVHN Fitness member allows you to partake in a variety of classes. Call **610-402-CARE** for more information. Get a list of [class locations](#) and [descriptions](#).

WELLNESS ROLE MODEL

Cory and Christina Tomsic



Pharmacy technician Christina Tomsic experienced a “light-bulb moment” when she received a prediabetes diagnosis. “I thought, ‘I got myself into this predicament, I will get myself out of it,’” she says. With advice from LVHN’s Weight Management Center, Tomsic revamped her diet and ramped up her activity. In less than two years, Tomsic lost more than 180 pounds. Her husband, Cory, lost 150 pounds. “We count calories, and weigh and measure our food,” she says. “We take long walks, plus use the treadmill and elliptical.” On a recent “Rachael Ray Show,” the couple was part of an audience comprising people who lost more than 100 pounds each. “They posed the audience in front of two monster trucks to show we lost 20,000 pounds total,” Tomsic says.

— Jenn Fisher

Get a list of **Culture of Wellness** classes and programs.

Call **610-402-CARE** for details or to register.