

CheckUp

this month

Remembering
Edgardo Cruz,
M.D.
(See P6)



VOL. 12, NO. 1 • JANUARY 21, 1999

FRED JAINDL PROMISES \$6 MILLION FOR EAST BUILDING

LONG-TIME LEHIGH VALLEY RESIDENT, FARMER AND BUSINESSMAN FRED J. JAINDL HAS PLEDGED TO CONTRIBUTE \$6 MILLION to Lehigh Valley Hospital (LVH), the largest single gift ever to the hospital. The gift will be applied to construction costs of the hospital's new east building, which is scheduled to open in January 2000 at CC&I-78. The building will be named the Fred Jandl Family Pavilion.

"In this holiday season of giving, Fred Jandl shows us his extraordinary commitment to our community," said Elliot J. Sussman, M.D., president and chief executive officer of Lehigh Valley Hospital and Health Network (LVHVN). "His generosity is unparalleled, and we are thrilled to name our new building in honor of him and his family."

"The Lehigh Valley community has always been very good to the Jandl family. We are pleased to be able, due to success in our personal investments, to make a donation that will benefit the people where we live and work," Fred Jandl said. "We chose Lehigh Valley Hospital to be the recipient of this gift because it provides excellent medical care and contributes millions of dollars in charitable care every year. As a family, we are impressed with that commitment, because we believe everyone in our community should have access to superior and affordable health care."

The Jandl family has been farming in the Lehigh Valley for 60 years. Fred and Anne Jandl have eight children and 14 grandchildren.

"Fred Jandl is considered by many to be Pennsylvania's leading farmer," said Kathryn P. Taylor, chairperson of the board of trustees of LVHVN. "This is another example of planting a seed that will take root and flourish, providing a lasting health care resource to the people of the Lehigh Valley."

The five-story, 230,000-sq.-ft. building will complete the consolidation of acute inpatient beds at the Cedar Crest site, and includes several ambulatory diagnostic services. Inpatient services in the new building will include medical and surgical intensive care units, shock trauma/neurology intensive care unit, labor and delivery, neonatal intensive care and newborn nursery. Ambulatory testing services will include the neurophysiology lab, heart station, preadmission testing, outpatient lab, pulmonary lab and sleep center and nuclear medicine. ■

by Mary Alice Czerwonka



Fred Jandl and his wife, Anne, visited the Cedar Crest site earlier this month to view the construction progress on the east building, which will be named the Fred Jandl Family Pavilion. Fred Jandl has pledged \$6 million to LVH for construction costs, the largest single gift in the hospital's history.

Strategic Planning Effort Focuses Resource Decisions

IN THE LAST YEAR OF THE 20TH CENTURY, LVHVN IS ALREADY PREPARING FOR THE 21ST. AT THE CENTER OF THAT EFFORT IS A MAJOR strategic decision to focus time and resources on clinical innovation and service excellence.

"There is no better way to care most appropriately for our community and differentiate ourselves from our competitors," said Elliot J. Sussman, M.D., president and CEO, to LVHVN managers at a day-long retreat last month. "To be the best at both care and caring is the heart of our mission and the basis of our founding."

The decision to focus on innovation and service came after an extensive study by management of environmental factors, organizational resources and work force priorities.

Changes, Challenges Affect Focus

Environmental factors — both locally and nationally — had a big impact on the decision to focus on innovation and service, according to Vincent Tallarico, vice president, planning:

Changing Demographics. The aging of the baby-boom generation and the rapid growth in the number of

people ages 85 and older assure continued demand for health care services, while the emergence of Hispanics and Asian Pacifics as the fastest-growing ethnic groups (a trend observed locally also) places new demands on providers.

Upward Cost Pressures. Care management will be used increasingly to reduce costs and improve outcomes, as overall health care spending continues to climb.

HMOs Under Siege. Many are losing money and find themselves under continuous attack from consumers and providers. Nevertheless, the HMO penetration rate continues to climb. In the Lehigh Valley, the total rate as of December 1997 was 29 percent (compared to a 38 percent rate statewide, and a 48 percent rate in Philadelphia and its suburbs). Based on recent growth trends in the region, HMO penetration in the Valley could reach as high as 50 percent by the year 2002.

Managing Medicare and Medicaid. The Balanced Budget Act of 1997 significantly reduced federal payment to hospitals for Medicare patients, while the rate of growth in Medicaid spending has declined.

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LEHIGH VALLEY
HOSPITAL AND
HEALTH NETWORK

IT'S A NEW YEAR— What Did *YOU* Plan for 1999?

The holidays are over, it's 1999 and time to start over with a clean slate, right? While the pundits ponder the New Millennium, Joe and Jane Q-Public are doing what they can to make the last year of the century healthier and happier. Before the holidays, public affairs staff asked members of LVHNN if they had made a New Year's resolution for 1999. If the following responses are any indication, the tradition is alive and well throughout the network. Maybe they'll inspire you to make a constructive change in your life. If so, let us know. Meanwhile, public affairs will catch up with these employees in December to see if they stuck to their words.



"Bring out the positive in everyone I interact with. It's so important to make people feel appreciated."

— **BETH PERRIN**, clinical dietitian for pediatrics and psychology

"Write letters to radio stations, asking them to air talk shows that deal with more informative and non-controversial subjects such as gardening, home improvement and health. I'm very frustrated with the misinformation on the radio about politics and the lack of solutions."

— **BILL LEINER JR., R.N.**, patient care coordinator, adult psychiatry, 17th & Chew



"Maintain a healthy lifestyle, spend more time with my grandchildren and travel more."

— **GLORIA GRAZIO**, staff assistant, Adult Transitions



"Spend more time with my family now that I'm finished with school."

— **BARRY MITCHNECK, R.N.**, patient care coordinator, emergency services, CC



"Make a concerted effort to quit smoking this year...a habit I've had for 30 years. I know it won't be easy, but I'm going to give it my best shot."

— **MARTY TINSMAN**, director, care management systems, MHC

"To make sure everybody enjoys my wedding, and to build a future with my new husband. I'm getting married in June."

— **KIMBERLY BROUGHAL**, discharge planner/case manager, MHC



ABOUT OUR PEOPLE...



Jeanne Tilghman, president of the Allentown Auxiliary of Lehigh Valley Hospital, was elected secretary/treasurer of the Pennsylvania Association of Healthcare Auxiliaries' (PAHA) board of directors last May. In addition,

she will be installed in October as president of the Eastern Region of the PAHA. Both appointments are for two years.

Betty Anton, LVH director of volunteers, has been elected president of the Central Chapter of the Society of Directors of Volunteer Services, an affiliate of the Hospital and Healthsystem Association of Pennsylvania.



John Stavros, senior vice president of marketing and planning for LVHNN, was recently elected

president of the Spirit of Women Foundation, which was created by LVH and its hospital partners, PREVENTION magazine and Medimetrix Unison to promote research, education and new program development in women's health issues. Stavros joined LVHNN in 1992, after serving as director of marketing at the University of California, San Diego.

Mary Ann Gergits, research team leader in the department of medicine, was selected by the Association of Clinical Research Professionals (ACRP) to serve on its national committee that develops and critiques questions for the certification exam for clinical research coordinators. This committee of eight professionals is responsible for the entire certification and recertification processes for ACRP.

Kimberly Bartman, R.N., patient care coordinator, 4C, has been inducted into the Phi Kappa Phi national honor society at Kutztown University, where she is earning her B.S.N. degree. A 3.8 average or above is required for membership in the society. Bartman has been on staff at LVH for nearly nine years. ■

Strategic Planning Effort

Continued from page 1

Consumers as change-makers. They're demanding more attention to quality measures and service.

Integration and consolidation. The trend will continue, but integrated delivery systems will have to show benefits more clearly to providers and payers.

Growth of group practices. More physicians are joining groups, and physician management companies are expanding to support these practices.

Information investment. Information technology remains a fundamental priority, particularly in the development of "practical" technologies like electronic medical records, enhanced data warehousing and centralized scheduling.

Growth in complementary medicine. Mainstream medicine is becoming more accepting of alternative medicine therapies like herbal medicine and acupuncture, among others.

Key Themes Identified

As local and national developments were studied, management considered what they might mean for LVHNN's organizational priorities and employees' work focus. "We determined that our organizational priorities would remain the same, but the balance needed to shift slightly," Sussman said. "OI, our functional plan, member satisfaction and PennCARE are the proper paths to follow, or more appropriately, the right trails to blaze, as we head into the new millennium."

Five key themes emerged, as a way to focus work on those priorities: the need to create or enhance a seamless continuum of care across all locations and

levels; the importance of measuring outcomes of care and the development of measurement tools; a continuing focus on long-term financial goals; more investment in developing the work force; and communication.

"From there, it was a relatively short step to decide that clinical innovation and service excellence would be our bridge to these areas of focus," Sussman said. "Distinguishing our organization in these ways ensures that we are capturing the spirit of our founder Leonard Pool's dream to provide the best health care services available anywhere, right here in the Valley."

The decision provides guidelines for capital and operating budgets, he said. Priority will be placed on the development of better care management to encourage clinical innovation, through better integration of the care continuum from clinical, operational and financial perspectives; better information and systems; and refining and growing the "clinical core." Priority will also be placed on developing a greater customer focus and service orientation to encourage service excellence, through an increased understanding of the community and substantial investment in employees and physician leaders.

"Our organization has come a long way; our strategy discussions have come alive," Sussman said. "We are learning about our work, our work force and our environment, to make the best sense of all we do. The more people who are involved, the better — for LVHNN and for the community." ■

by *Mary Alice Czerwonka*

NEXT MONTH: What it all means to LVHNN employees.

*A Celebration of
Community
100 YEARS*

Share the History...

Join LVHNN and its community and corporate partners in a year-long "Celebration of Community — 100 years." Affix a logo sticker like the one above to invitations, fliers, stationery, posters—any piece of printed communication your department uses this year—to remind your colleagues, friends and neighbors of the rich heritage of this community.

To receive your supply of stickers, call public affairs at 317-4814.

Share the history. Celebrate the community.

Details will appear in February's *CheckUp* on how to obtain specialty stationery, notecards, posters and banners.

Biomedical Engineering Pumps Up Working Wonders Savings

SOME PEOPLE CALL HIM MR. HORIZON. OTHERS CALL HIM PUMP MAN. OH, AND A FEW CALL HIM BY HIS REAL NAME...DAVE.

So what's in a name? A \$22,500 Working Wonders reward if he's going by Mr. Horizon.

Under that moniker, Dave Heckman, a biomedical engineer who services infusion pumps, saved the hospital about \$435,000. "I was working 10 hours a day repairing Horizon IV pumps, but the pumps would just come back bad or something else would go wrong," Heckman said. "It got to the point where more than 125 pumps were failing each month."

But alas! Hope was on the horizon. All the Pump Man had to do was, uh, pump some people for information. By creating the E-mail address, MrHorizon@aol.com, he surveyed the failure rate of Horizon IV pumps at other medical facilities and initiated a national network of support among biomedical technicians.

After Heckman informed the manufacturer of his findings, the company invited him to its Dallas, Texas, plant for a "technology exchange." Heckman worked with the manufacturer's head technician to identify design flaws and faulty repair procedures. "Through meticulous research and talking with other technicians



Biomedical engineer Dave Heckman, aka Pump Man/Mr. Horizon, earned a name for himself through Working Wonders.

on the Internet, I was able to expose a lot of problems that the manufacturer was not aware of," Heckman said.

As a result, the manufacturer initiated a nationwide recall of defective equipment, revamped its production and quality control processes and redesigned its pumps. To help alleviate the problem at LVH, the company provided 200 pumps to the hospital, free of charge.

"Regular visits and follow-up calls continue to be made by the manufacturer in an effort to maintain quality control," Heckman said. "Most importantly, the quality of care for the patients has been greatly enhanced."

So has the quantity of green stuff in his coworkers' wallets. Heckman shared the wad of Franklins and Grants with his biomedical team, which includes Jim McCawley, Tom Keill, Tod Cook, Joe Shambo, Dave Brown, Tom Fichter, Glen Fuhrman, Dennis Fetters and Raymond Smith. Everybody cashed in at least \$2,000 and probably even coined a few more nicknames for Heckman. Maybe Buddy, Pal, Best Friend?

"I was like 'Thanks for the raise!'," joked Jim McCawley, a technician at 17th & Chew. "But really Dave deserved every penny. It makes me want to think of Working Wonders ideas and return the favor."

In fact, that's just what the biomedical engineering crew has been doing. "Our team has agreed to share all of our Working Wonders rewards, no matter who initiates project," Heckman said. "That way, we're all part of the process, and the savings will multiply in the end."

It's working too. "We don't only service equipment, we do a lot of research and track the trends," Heckman said. "We can often pinpoint the money savings."

The team submitted seven Working Wonders ideas by Christmas and is already brewing more in the New Year. Heck, with Working Wonders, who needs Santa Claus? ■

by Pamela Maurer

LVH AND MHC MEDICAL STAFFS MERGE

IN A HISTORICAL ACT OF UNITY, THE MEDICAL STAFFS OF LEHIGH VALLEY HOSPITAL AND MUHLENBERG HOSPITAL Center voted on Dec. 17 to merge, forming the largest medical staff organization in the Lehigh Valley region, with nearly 1,200 members. The merger was approved by the boards of both hospitals early this month.

A medical staff transition team of physician and administrative members from both hospitals started meeting in October 1997 to plan the merger.

The current medical staff leadership, also known as the "troika," includes David Caccese, M.D., general internal medicine, president; Robert Murphy Jr., M.D., plastic and reconstructive surgery, past-president; and Edward Mullin Jr., M.D., urology, president-elect. They will hold these offices until December 2000.

In addition, four at-large members were elected to represent MHC on the medical executive committee: Linda Blose, M.D., general internal medicine; John Lang, D.O., anesthesia; John Mannisi, M.D.; cardiology; and Hugo Twaddle, M.D., general internal medicine.

"A merged medical staff is a major step toward aligning physicians throughout LVHHCN, with the ultimate goal of improving patient care," Caccese said. "This will encourage and foster clinical program development and improve communication between physicians in Lehigh and Northampton counties." ■

by Rob Stevens

• TIME DOES NOT HEAL ALL WOUNDS •

The New Wound Care Center® at MHC Can Help

WHEN 77-YEAR-OLD MARILYN BOEHM FIRST DETECTED THE WOUNDS ON HER LEG, SHE DIDN'T THINK MUCH OF IT. "I thought I could clear them up myself," she said.

But two months later, they were getting worse. "I didn't know what was going on," said Boehm, who has vascular disease. "It felt like my leg was on fire. Something had to be done."

Her doctor put her on oral antibiotics, but the wounds weren't healing. Then she was admitted to Muhlenberg Hospital Center for intravenous antibiotics, but she needed more aggressive treatment.

Her answer: The new Wound Care Center® at Muhlenberg Hospital Center, the only specialized wound facility in the region. Opened in October, the center offers a comprehensive, multidisciplinary wound care management through individualized, aggressive treatment programs and education about prevention.

"Patients at the center are evaluated to determine any underlying condition, such as diabetes, that might inhibit the natural healing process," said vascular surgeon Marc Granson, M.D., medical director of the center. "Then our team of podiatrists, vascular surgeons, plastic surgeons, general surgeons, endocrinologists, nurses and many others work together to heal the wound."

Nearly 5 millions Americans suffer from non-healing chronic wounds, often a result of diabetes, atherosclerosis, vascular disease or immobilization. The Wound Care Center® expects to treat at least 275 patients this year, and reduce the incidence of serious infections, gangrene and even amputation from non-healing wounds.

The center is affiliated with Curative Health Services of Hauppauge, N.Y., the largest nationwide network of wound care specialists with more than 170 wound care centers. "If we have a particularly difficult case, we can tap into the resources of the network and brainstorm with other wound care center staff," said Peg Cowden, program director of the Wound Care Center®. "Plus, we have access to research, and they continue to train us and keep us ahead of the game."

The center goes beyond traditional approaches such as dressing changes and wound cleansing. Only available through Curative, patients at MHC can receive a more innovative treatment, called PROCUREN®. This topical solution is made from the patient's blood by extracting growth factors from the platelets, which promotes the growth of skin, soft tissue and blood vessels at the wound site.

According to Curative, wound care centers have a healing rate in excess of 80 percent. At MHC, Boehm got the care she needed before her ulcers became worse. Every week, for eight weeks she went to the Wound Care Center® for debridement and education about prevention, diet and exercise. "They taught me about skin care and what to look for," Boehm said. "If it comes back, I'll know exactly what to do next time."

Home Care also helped Boehm with dressing changes. "They showed me how to do it and watched me to make sure I did it right," Boehm said. "I had good care. Believe me, I did. The wound and the pain are all gone." ■

by Pamela Maurer



Lou Liebhaber, COO

Lou Liebhaber

Issues & Initiatives

Issues & Initiatives is a series of activities providing employees with information about current health care issues at Lehigh Valley Hospital and Health Network.

We are pleased to include a new feature, "Letters to Lou." If you have an issue, question or comment for Lou Liebhaber, chief operating officer, send your letter to him, and it might appear in a future issue of CheckUp, space permitting, along with Lou's response. Letters must be relevant, constructive and signed by their author. We reserve the right to alter letters for purposes of clarity or space. —THE EDITOR

Innovation and Service Distinguish LVHHN from Others

DURING THE WEEKS BETWEEN THANKSGIVING AND CHRISTMAS, THE NEWSPAPERS AND TELEVISION WERE filled with advertisements for a variety of gifts, services and household items. Many ads made price the distinguishing feature among competitors. Product quality and customer service were rarely mentioned over price, if they were even mentioned at all.

Some health care providers also take a low-cost position when promoting their services, saying little about the quality and customer satisfaction they promise their patients. That's OK if all they want is an image as a "cut-rate" organization.

But that's not Lehigh Valley Hospital and Health Network's strategy for serving our community. In living up to Leonard Pool's vision as a superior regional hospital, we're building a legacy of clinical innovation and service to our community. And this will remain our focus today, tomorrow and far into the next century.

In his bestseller "In Search of Excellence," management guru Tom Peters advises organizations to "stick to the knitting" to succeed in the highly competitive business world. By focusing on our mission to creatively meet the medical needs of our community as they continue to evolve, LVHHN will remain the health care leader in our region.

And innovation and excellent customer service will distinguish us from those organizations in our service area whose mission often seems to be more about cost-saving than lifesaving.

Designing the Future of Health Care

Our projection of the future health needs of our community envisions an increasing shift from inpatient to outpatient settings, requiring significant investments in facilities and information services. The design of the Fred Jandl Family Pavilion (the former East Building at CC), Health Center at Trexlertown, 17th & Chew site and Children's Hospital project at MHC will enable us to provide health services to hospitalized and ambulatory patients and healthy consumers in an accessible, efficient and friendly manner as their needs change over time.

This approach dates back to 1994 when our creative colleagues in patient care services designed the "ideal patient encounter," a concept that grew into our patient centered care and PRIDE initiatives. While the setting for receiving medical services and information may change, LVHHN remains committed to planning and providing health care of the highest quality wherever it is most convenient and appropriate for our customers.

Providing Excellent Member Satisfaction

Clinical innovation and service excellence go hand-in-hand to create outstanding member satisfaction. Our community, medical staff colleagues and each other deserve our utmost respect and uppermost expert efforts to make each "moment of truth" a fulfilling and memorable experience. Whether the setting is clinical, support or administrative, the PRIDE behaviors and principles of patient centered care will continue to guide our actions. Our environment may undergo non-stop change, but our core commitment to our customers remains intact and solid.

We take our customers' opinions to heart, and are engaged in a cycle of continuous improvement based on feedback from our patients and physicians, mainly through our Press, Ganey surveys.

The centralized scheduling function at Muhlenberg Hospital Center is a valuable example of how we're responding to our customers' needs for arranging diagnostic studies at their convenience. Because of the success of the redesigned process at MHC, this "one-stop shopping" strategy will soon be implemented at LVH, assuring a more positive experience for our physicians and patients.

There are countless other examples of great customer service throughout our network, many more that you are aware of or than I can fit in this column. Share them with your colleagues and friends, so they'll understand our efforts and become advocates for LVHHN.

Achieving Best Practices at the Right Price

Our ambulatory surgery unit and pharmacy department are standout examples of how to achieve best clinical practice while remaining cost competitive

within their peer group. Both services operate at the 25th percentile of their peer groups nationally in costs and have superior outcomes.

Operations improvement has required this kind of innovation since its launch some six years ago, and we must continue to achieve this delicate balance of giving superior care at the right price. This strategy is clearly in the best interests of our patients, physicians and staff, and has earned us many honors and recognition for our commitment to service quality.

Networking Excellence

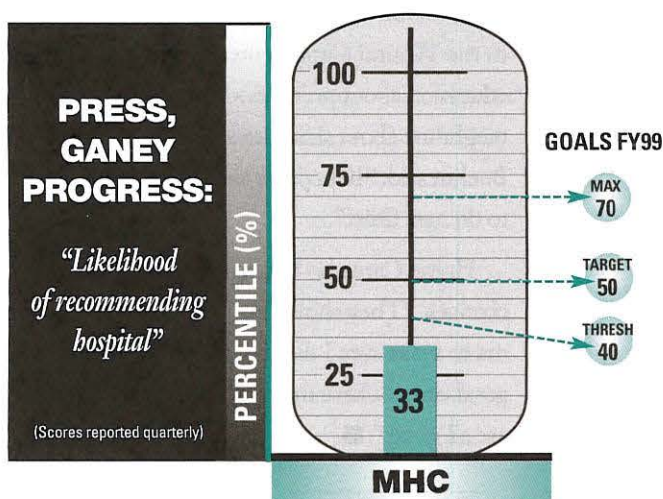
The PennCARE integrated delivery system has been cited nationally as one of the most unique responses to the challenges of managed care. This network of alliances provides valuable opportunities for the PennCARE partners to share best practices and collaborate in developing long-term strategies to improve the health of our high-risk populations.

PennCARE recently signed a contract with the Penn State/Geisinger Health Plan to provide health services to as many as 5,000 covered lives in the northern tier of the network, as well as to new subscribers in Lehigh and Northampton counties, where the health plan will soon begin marketing its insurance products.

LVHHN will benefit from this new partnership through inpatient volume increases in our hospitals, which has been our experience from PennCARE's contract with Aetna/U.S. Healthcare. This is networking at its best!

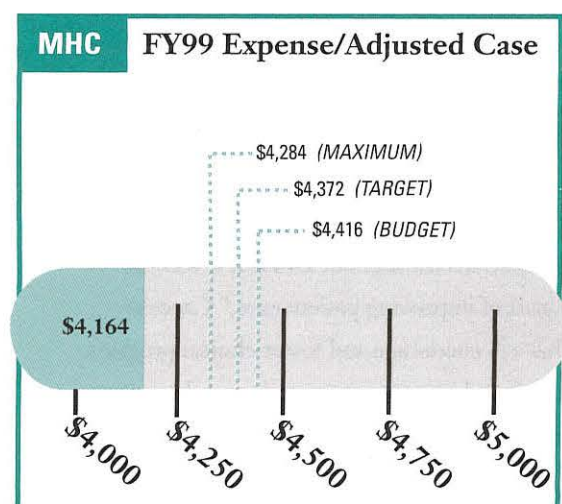
As we start the new year, it's exciting to look ahead with anticipation to the challenges and opportunities facing us. Are there risks involved? Yes, plenty. Are we ready and able to face uncertainty as we search for creative ways to carry out our mission? Yes, because we have the talent in our staff and physicians. This was Leonard Pool's vision when he founded the Cedar Crest site. By focusing on this vision throughout our network, we are forging links between a noble tradition and a legacy of excellence and innovation at LVHHN. ■

Happy New Year!



MHC SHARED SUCCESS PLAN PROGRESS (as of November '98)

LVH's progress will be reported in February's CheckUp.



December's Service Star

A Comfort in Time of Grief

IN THE OPEN HEART UNIT WHERE THE PACE IS BRISK AND THE CLIMATE IS OFTEN stressful, it's sometimes difficult to do the little things that mean so much to a patient and his family.

A few months ago, Kim Szep, R.N., was caring for a critically ill heart patient, trying to do everything possible to help him stay alive. "With managing bedside lab work, administering IV medications and taking care of his urgent needs, it wasn't unusual to have no time for the small, comforting things," Szep said.

The man's family was completely distraught. "They couldn't fathom that he was mowing the grass 24 hours ago, and now he was going to die," Szep said. "They were in terrible denial and shock."



Ellen Kosciolek, R.N.

After caring for her own patients, Ellen Kosciolek, R.N., December's Service Star, stepped in to help care for Szep's patient and comfort his family. "She bathed the patient, shaved him, changed his ventilator tube tapes and straightened the room," Szep said. "The patient's wife was so grateful that she started to cry."

The man eventually died, "but in those simple acts, Kosciolek, embodied the spirit of PRIDE in many ways," Szep said. "She became directly involved with the family and focused on their personal and special needs. She treated them with the utmost dignity in a highly professional manner...she truly cared." ■

by Pamela Maurer



THE CARING TREE

Pediatric care coordinator Loretta Gogel, R.N., and pediatric patient Stephanie Sarge, 12, sit in front of The Caring Tree during the holiday season. Sarge helped decorate the ornaments on the tree. Spearheaded by the Professional Nurse Council Community Outreach, The Caring Trees at Cedar Crest & I-78, 17th & Chew and MHC benefited more than 40 employees in need. People contributed by choosing a tag off the tree, which listed a gift they could donate. "We noticed on E-mail an increasing amount of requests to help employees," said Gloria Hamm, chair of the council. "We decided we must take care of our own." ■

CLINICIANS RESEARCH BEST PRACTICES

THE PRACTICE OF USING SALINE SOLUTION WHEN SUCTIONING PATIENTS ON VENTILATORS WAS AS ROUTINE AS breathing itself.

For years, LVH critical care nurses and respiratory staff have injected saline into patients' breathing tubes prior to suctioning their pulmonary secretions.

Saline was thought to liquefy mucous and improve the removal of secretions, in turn helping the ventilator work better. It was a standard of care in many hospitals.

That ended recently at LVH, due largely to the work of the Med/Surg Subcommittee of the Patient Care Services Outcomes Research Committee (PCSORC), which looked into the safety and effectiveness of this practice.

"Using an evidenced-based approach, we did an extensive literature review and found 14 research articles that examined the practice of routine saline instillation into artificial airways. The findings were very clear and revealed that this routine practice is not recommended and can actually be harmful to patients," explained Karen Williams, R.N., patient care specialist and chairperson of the subcommittee.

According to Williams, there has been a growing body of knowledge since the 1970s that, in most cases, adding saline is harmful to ventilator patients. "It introduces bacteria, which can cause pneumonia, decreases oxygen saturation and doesn't help liquefy mucous," she noted.

So, if there's been research advising against using saline, why has it continued for all this time?

Good question, Williams said. But she admits that in her many years as a critical care nurse and later as



Suzanne Smith, R.R.T., (left) and Karen Williams, R.N., review the teaching poster for withholding normal saline when suctioning ventilator patients.

an instructor at Allentown College, she has seen and taught the same questionable practice.

"It's something you learn in nursing school. We did it because many of our practices are often based on tradition and habit, which is handed down from one generation to the next," she added.

Nurses in LVH's general intensive care unit examined this practice back in 1988, according to Louise "Ozzie" Oswald, the unit's director then and now. She recently pulled from her files an article from the American Journal of Critical Care Nursing, written in 1985, that suggested the practice could be changed. The idea lay dormant at LVH for nearly 10 years, "because we didn't have research staff at the hospital to carry out our own study of the literature before changing the practice," Oswald recalled.

Today, the efforts of LVH's service line subcommittees, such as the med/surg group from the PCSORC, and a growing awareness throughout LVH of the cost of health care delivery, make challenging and changing routine practices more accepted. For example, reducing saline use will save the hospital "several thousand dollars per year,"

Williams said. The project is being evaluated as a Working Wonders proposal.

In early December, Williams and her colleague Suzanne Smith, R.R.T., and a team of respiratory therapists and committee members began educating the staff on the critical care units about the practice change. Teaching posters are displayed in each unit to remind staff to "Break a Habit," that saline is harmful and should be used only under certain circumstances.

This project was encouraged and supported by a \$1,000 grant Williams and Research Specialist Mae Ann Fuss received from the Southeastern Pennsylvania Chapter of the American Association of Critical Care Nurses. This research and the practice redesign have also been shared at forums, such as the Cardiovascular Symposium at LVH in September, Sigma Theta Tau International Consortium at East Stroudsburg University in October, and Williams is scheduled to present it at the Eastern Nursing Research Symposium in New York City in April.

Fuss and Yvonne Bryan, LVH researcher and chair of the PCSORC, are enthused about the subcommittee's effort to ensure that patient care practices reflect the current state of the science and are not ritualistic.

"By encouraging caregivers to question what they do on a day-to-day basis and to utilize the scientific evidence to make changes, we can discover and design best practices," Fuss said. "The saline instillation project is serving as a template for other subcommittees to change clinical practices for routine chest percussion, naso-gastric tube placement and male catheterization." ■

by Rob Stevens

Lehigh County Medical Society
Alliance presents...

"Laughing in Louisiana" A Mardi Gras Celebration

A night of
hilarious comedy
and authentic
Cajun fun!



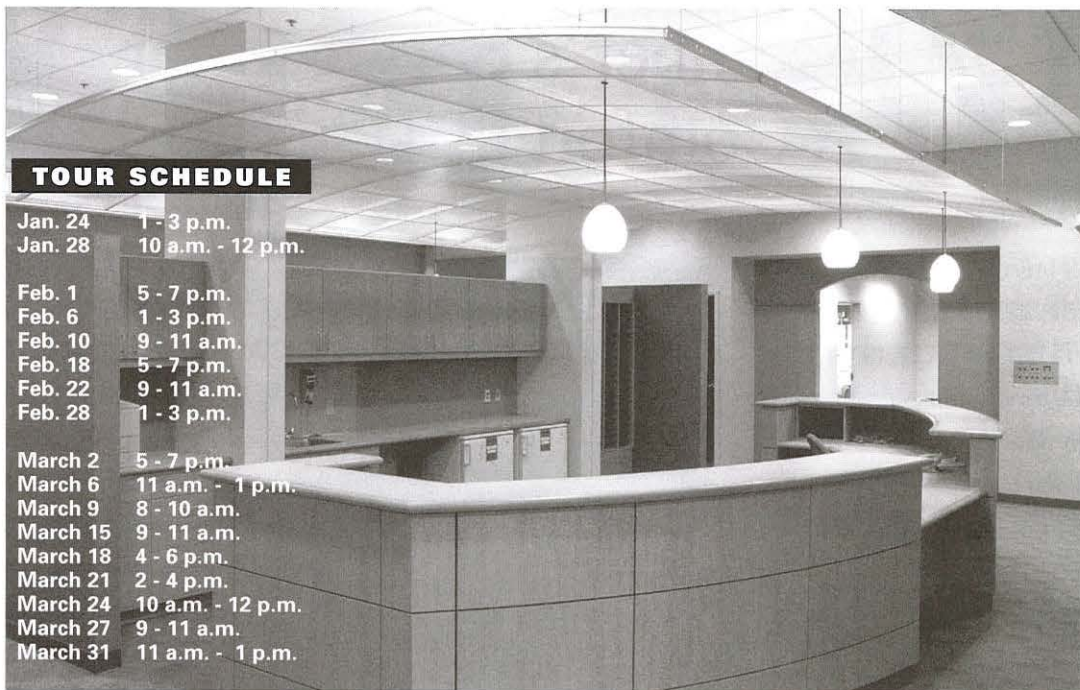
FEATURING...

- The comedy of 5-time Philly's Best Comic, **Big Daddy Graham**
- **Live Jazz Music**
- **Cajun grazing Buffet**
- **Silent Auction with a New Orleans flair**

BROOKSIDE COUNTRY CLUB
FEBRUARY 12 • 7 p.m.
TICKETS: \$50 PER PERSON
(casual chic; no denim)

Proceeds benefit the new Salvation Army Family Hope Center playground construction fund. The Family Center provides shelter, children's day care and social support for women and children in crisis.

For tickets and information, contact
Gina Reckard 366-7366 or GMRMOM@aol.com



TOUR SCHEDULE

Jan. 24	1 - 3 p.m.
Jan. 28	10 a.m. - 12 p.m.
Feb. 1	5 - 7 p.m.
Feb. 6	1 - 3 p.m.
Feb. 10	9 - 11 a.m.
Feb. 18	5 - 7 p.m.
Feb. 22	9 - 11 a.m.
Feb. 28	1 - 3 p.m.
March 2	5 - 7 p.m.
March 6	11 a.m. - 1 p.m.
March 9	8 - 10 a.m.
March 15	9 - 11 a.m.
March 18	4 - 6 p.m.
March 21	2 - 4 p.m.
March 24	10 a.m. - 12 p.m.
March 27	9 - 11 a.m.
March 31	11 a.m. - 1 p.m.

The team station of Trexlertown Medical Center (TMC)—a family practice at LVH's new Health Center at Trexlertown—appears calm as the facility awaits occupancy. On Jan. 3-5, however, this tranquil scene turned into a bevy of activity as nearly 350 of TMC's patients toured the new office. The family practice officially opened its doors for patient care on Jan. 11. Other services currently available at the Health Center are lab services through Health Network Laboratories and health promotion classes and programs. The Health Library and Learning Center will be open in early February and additional services, including women's health, will be added throughout the year. To register for a tour of the Health Center, call 402-CARE.



Anesthesiologist
Edgardo Cruz, M.D.,
died suddenly
Nov. 6, 1998.
He joined LVH's
medical staff in 1974.

A Holiday Tribute in Memory of Dr. Cruz

In a season of loving and giving, it could not go without remembering the very thoughtful, generous and loving Dr. Cruz.

This was a man who was always giving to others. He was such a thoughtful person to go out of his way, to pick up all types of baked goods to bring to the O.R. He shared these with others. The echo of his voice could be heard, stating, "Please, have some goodies."

He was always busy about the O.R.s helping everyone, including the O.R. nurses, anesthesiologists, and his own anesthesiologists.

I am sure he is busy in heaven, scampering about in the same thoughtful way. Losing Dr. Cruz was our loss and heaven's gain.

— Mary Ellen Beechan, C.R.N.A.

NOTICE ILLEGAL or UNETHICAL BEHAVIOR



LVH's has a new resource for employees—a confidential COMPLIANCE HOTLINE.

If you witness the violation of a law or regulation:

- Speak with your supervisor or manager
- Speak with your department director or vice president
- Seek guidance from your human resources consultant
- Speak with employee ombudsman **Maryann Bulishak**, ext. 8808
- Speak with corporate compliance officer **Beverly Snyder**, ext. 5210

If the issue remains unresolved, call the toll-free hotline
1-877-895-2905

SERVICE ANNIVERSARIES

Congratulations to the following employees on their January 1999 service anniversaries! Thank you for your continuing service to Lehigh Valley Hospital and Health Network.

Thirty-Five Years of Service

Eleanor R. Haas
Adolescent Psych Unit

Thirty Years of Service

Nancy J. Beidler
TLC Moderate Care

Twenty-Five Years of Service

Kathleen M. White
OB Maternal Fetal Medicine

Phyllis R. Fox
HBSNF

William M. Thompson
Information Services Development

John H. Koshland
Pulmonary

Darlene G. Matthias
Cancer Program

Twenty Years of Service

Denise L. Kuntz
Cardiac Cath Lab

Janice G. Cudlic
Obstetrics

Sally J. Getz
GICU

Barbara J. Hallowell
Clinical Services Administration

Cynthia L. Baglini
Client and Ancillary Services

Kalean S. Schneck
MHC Home Care Skilled Nursing

Robin L. Miles
Obstetrics

David L. Feist
Security

Diane K. McKeever
Microbiology

Denise R. Schuler
Pulmonary

Susan L. Ruth
Operating Room

Rhonda J. Nagy
Mental Health/Retardation

Donna B. Wells
Supply Distribution Services

Fifteen Years of Service

Joseph M. Groller
Shock/Trauma Unit

Valerie L. Wagner
Operating Room

Ruth F. Palmisano
6N Adult Psychiatry Unit

Gregory A. Snyder
Pharmacy

Richard S. Reitz
Sterile Processing

Ten Years of Service

Joan D. Kressley
Neonatal ICU

Susan J. Nonnemacher
5C Medical/Surgical Unit

Vicki E. McIntosh
Transitional Open Heart Unit

Janice Waller
Labor & Delivery

Sandra J. Cornog
Neonatal ICU

Stacey Yonak
Nursing Float Pool

Anastasia Vansuch
Histology

Joann I. Geslak
Operating Room

Kathy C. Hsu
Clinical Nursing Program

Sharon Petrusky
Labor & Delivery

Linda A. Flemming
Midwives Birthing Suites

Patricia M. Schlegel
Speech & Hearing

Lori J. Wilson
Psychiatric Rehabilitation

Leonard J. Snyder
Ambulatory Surgical Unit - OR

Patricia Sotak
Ambulatory Surgical Unit - OR

Rebecca L. Meinhart
Partial Hosp Adolescent Psych

Bala B. Carver
Pathology

Eileen T. Bannon
Cancer Program

Carmen Rosario-Seaman
Pediatric Unit

Theresa M. Carfara
Community Health

Wanda I. Montanez
5C Medical/Surgical Unit

Deborah D. Dilliard
Medical Records

Ricky A. Farley
Plant Engineering

Ruth A. Held
Department of Family Practice

Joan T. Bauer
Admitting Office

Richard G. Riccio
Shock/Trauma Unit

Mary Ellen Kinek
Obstetrics

Five Years of Service

William L. Miller
Department of Family Practice

Jane M. Kuehner
Limited Duty-LVHSD

Jennifer N. Bowman
Labor & Delivery

Joseph P. Lyons
General Administration-EXEC

If you have news or a story idea for **CheckUp This Month**, send your suggestion by the 20th of the month for publication in the following month to Rob Stevens, editor, public affairs, 1770 Bathgate, using interoffice mail or e-mail. **CheckUp This Month** is an employee publication of Lehigh Valley Health Network's public affairs department. For additional information, call 317-4814. Lehigh Valley Health Network is an equal opportunity employer. M/F/D/V

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