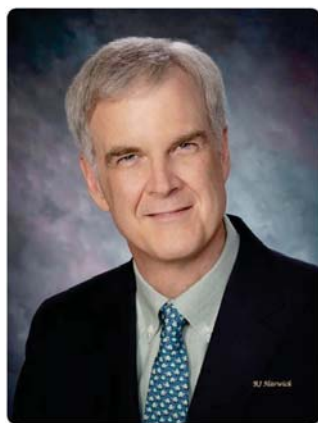


# Progress Notes

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

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## FROM THE PRESIDENT

**"I have a dream . . ."**



Welcome to **Progress Notes** in its new digital format – economical and environmentally friendly. So far, the trees are lovin' it. Make a note to check for **Progress Notes** in your LVHN email account. You can forward it to your home email address or read paper copies which still will be available in the Medical Staff Lounges at both sites. Make an effort to stay connected to this source of (sometimes) important information. Yep – another change in process. Change seems like our new norm.

Late August marked the 50<sup>th</sup> anniversary of the March on Washington and Martin Luther King, Jr.'s "I have a dream" speech. Against a backdrop of a need for change and high, negative emotions, King delivered a message of nonviolence, of hope for equality and a better life for his children – all framed by the recurring statement, "I have a dream." At the September Medical Executive and General Medical Staff meetings, the doctors in attendance were encouraged to take a few

minutes to think about Dr. King's message in the context of their aspirations for healthcare and to jot down *their* "dream" for the next 3-5 years. We, too, are in the midst of a major shift in America – this time, in the financing and delivery of healthcare. If our patients are our focus, then we will need to bring hope to our colleagues and advocacy to our patients.

I'm encouraged by the responses of the almost 80 doctors who took the time to record their "dreams." Just about all were hopeful in their tone and constructive in their content. They touched on a variety of topics, ranging from the doctor-patient relationship, the value of time, improving patient access, the benefits and challenges of technology, reducing the burdens of government and insurance regulations and the needs of specific populations – just to name a few.

*Continued on next page*

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There were several readily identifiable themes:

- A strong commitment to our traditional ideals: compassionate care with quality, without judgment, greed or self-promotion; “doing the right thing, not the easy thing.”
- Timely interventions to tackle disease and “seamless” coordination dependent on good communication and effective data systems.
- Many comments about the desire to allow easier and more timely access to services with reduced financial burdens to patients, couched in a common sense balance between “wants and needs.”
- A desire for patients to be able to take a more active role in their health, through education and self-management support.
- Commitments to affordable, universal health care and more rapid restructuring of the U.S. health care system.
- Concern for patients with mental health, obesity, chronic illness, asthma; children and those facing the end of life.
- Flexibility in meeting the needs of our physician workforce, promoting well-being and financial equity.

We’ll take some time to visit some of these themes in greater depth in future issues of **Progress Notes**. In the meantime, we have posted the comments received in their entirety on the Medical Staff Services webpage of the intranet (found under the “Resources” tab).

Thanks to all who participated in this exercise. It is encouraging to see the quality of the insights that were shared. Despite the “noise” in the system, it is clear that our doctors want the best for their patients, their colleagues, our community – and themselves. For any dream to become a reality, it takes a willingness to have the necessary conversations, set goals and keep working at them despite the obstacles.

This month, think about starting just one conversation about your dream. How would you invite others to share your dream? What would the next step be? I’ll leave you with a quote from Gail Devers: “Keep your dreams alive. Understand to achieve anything requires faith and belief in yourself, vision, hard work, determination, and dedication. Remember all things are possible for those who believe.”



Robert J. Motley, MD  
Medical Staff President

## Medical Staff Dues Deadline – October 15, 2013

On October 1, final notices were emailed and faxed to members of the Medical Staff who have not yet paid their annual Medical Staff dues. As stated in the Medical Staff Bylaws – Article IV, Section A, #3. DUES – “. . . Any member whose dues are not paid in full by October 15 shall be considered to have voluntarily resigned from the Medical Staff effective as of that date and shall not entitle the member to the provisions of the Fair Hearing and Appellate Review Process . . .”

In order to avoid **automatic resignation** from the Medical Staff as mandated by the Bylaws, your check **MUST BE RECEIVED** in Medical Staff Services **NO LATER THAN 5 P.M.**, on **Tuesday, October 15.**

Please forward your check – payable to **LVHN Medical Staff** – and mail it to Janet Seifert, Medical Staff Services, Lehigh Valley Hospital, Cedar Crest & I-78, P.O. Box 689, Allentown, PA 18105-1556.

If you have any questions regarding Medical Staff dues, contact Janet Seifert in Medical Staff Services at 610-402-8590.

# ALLSPIRE HEALTH PARTNERS

On September 18, Lehigh Valley Health Network (LVHN) announced that it has entered into an alliance with six other systems to form **AllSpire Health Partners**. The new consortium will carry out joint activities in the areas of patient care services, research and education to enhance the value of health care that communities receive.

AllSpire Health Partners was created for the implementation of the Triple Aim which, as defined by the Institute for Healthcare Improvement, consists of: improving the experience for the patient, improving the health of the population and creating more affordable health care. As the paradigm of health care delivery is currently evolving, the era of fee-for-service medicine is shifting to a value-based model of care, delivery and reimbursement.

The member systems are:

- **Atlantic Health System** (Morristown, NJ)
- **Hackensack University Health Network** (Hackensack, NJ)
- **Lancaster General Health** (Lancaster, PA)
- **Lehigh Valley Health Network** (Allentown, PA)
- **Meridian Health** (Neptune, NJ)
- **Reading Health System** (Reading, PA)
- **WellSpan Health** (York, PA)

While traditional partnerships remain important, there is a greater opportunity to leverage the combined intellectual assets of AllSpire Health Partners to elevate the quality of care, reduce the cost and move toward a regional population health focus.

**This partnership is not a merger;** it is an alliance with some of the nation's best health systems to achieve very specific goals. Day-to-day roles at Lehigh Valley Health Network in administering the best care possible to patients and the community will not change. LVHN will continue to adhere to its high standards of care and remain one of the best places to work in the country.

For more information regarding AllSpire, visit the newly created website at [www.AllSpireHealthPartners.org](http://www.AllSpireHealthPartners.org) or contact Brian A. Nester, DO, Chief Strategy Officer, at 610-402-7544, or Ronald A. Swinfard, MD, President and Chief Executive Officer, at 610-402-7505.



## PAPERS, PUBLICATIONS AND PRESENTATIONS



Members of the Department of Emergency Medicine – **Steven P. Frei, MD**, and **David B. Burmeister, DO**, Chair, along with Jesse F. Coil, DO, former Emergency Medicine resident, co-authored an article – “Frequency of Serious Outcomes in Patients with Hypertension as a Chief Complaint in the Emergency Department” – which was published in *The Journal of the American Osteopathic Association*, September 2013, Volume 113, Number 9.



Several members of the Department of Emergency Medicine – **Marna R. Greenberg, DO, MPH**; Megan C. Urquhart, DO, former resident; Jessica K. Eynor, DO, resident; **Charles C. Worriow, MD**, **Nicole Gesell, DO**, Bernadette Porter, Scholarly Activities Coordinator; and **Andrew C. Miller, DO** – co-authored an article – “I Can’t Move My Face! A Case of Bilateral Facial Palsy” – which was published in *The Journal of the American Osteopathic Association*, October 2013, Volume 113, Number 10.



**Jayme D. Lieberman, MD, MBA**, Division of Trauma-Surgical Critical Care/General Surgery, and **Michael D. Pasquale, MD**, Chair, Department of Surgery, and Division of Trauma-Surgical Critical Care/General Surgery/Burn, co-authored a chapter – “Abdominal Compartment Syndrome” – which appears in the book, *Abdominal Wall Reconstruction*.



In addition, **Joseph J. Stirparo, MD**, Division of Trauma-Surgical Critical Care/General Surgery, along with **Dr. Pasquale**, co-authored a chapter – “Antibiotics in Abdominal Wall Reconstruction” – which also appears in the book, *Abdominal Wall Reconstruction*.

# PHYSICIAN DOCUMENTATION

## Learn New Documentation Requirements for ICD-10

By now, you are aware that ICD-10 goes into effect on October 1, 2014, and will affect all providers. Since it is a brand new classification system, including changes to all diagnostic codes and all inpatient procedure codes, there is a lot to learn for all providers in the next year. The consequences of not being able to submit claims to insurers due to lack of required documentation are significant.

Acute MI (STEMI and NSTEMI), Acute Respiratory Failure, and Stroke are a few of the most common diagnoses used at LVHN. These have been determined to be at risk for accurate ICD-10 documentation and coding, due to new documentation specificity requirements.

The tables pictured to the right show you exactly what you will need to document in relation to these diagnoses. It is never too early to start documenting these concepts so that you are prepared on October 1, 2014.

LEHIGH VALLEY HEALTH NETWORK

### Acute MI and NSTEMI: ICD-10 Documentation Concepts & Changes in specificity

ICD-9 Diagnosis Code	ICD-10 Documentation Concept	Change in Specificity
Acute Subendocardial MI (NSTEMI)	MI subclassification	• Specify Non-ST elevation
	*Encounter/ Episode of care	• Specify initial • Specify subsequent
Acute MI (STEMI)	MI subclassification	• Specify ST elevation
	*Encounter/ Episode of care	• Specify initial • Specify subsequent
	Identify specific artery involved	• Specify left main coronary artery, LAD, RCA, circumflex, etc.

\*Initial/Acute= < 4 weeks from onset

\*Subsequent= Within 4 weeks of a previous MI

\*Old= > 4 weeks from onset

LEHIGH VALLEY HEALTH NETWORK

### Acute Respiratory Failure & Stroke ICD-10 Documentation Concepts and Changes in Specificity

ICD-9 Diagnosis	Documentation Concept	Change in Specificity
Acute Respiratory Failure	Type of Failure	• Specify hypoxic • Specify hypercapnic
Cerebral infarction/ Stroke (non-hemorrhagic)	Identify type	• Specify thrombotic, embolic, or unspecified occlusion
	Identify affected precerebral or cerebral artery	• Specify MCA, ACA, PCA, cerebellar artery, etc.
	Laterality	• Specify left or right

If you have any questions, please contact John Pettine, MD, FACP, CCDS, Director, LVHN Clinical Documentation Improvement Program, at [john.pettine@lvhn.org](mailto:john.pettine@lvhn.org).



# THE TWO MIDNIGHT RULE - THE NEW PARADIGM FOR ENSURING AN APPROVED INPATIENT STAY

In August of this year, the Centers for Medicare and Medicaid Services (CMS) came out with the Inpatient Prospective Payment System (IPPS) Final Rules. Included in this was a change in how CMS and, therefore, their auditors will view inpatient admission. In this iteration of the IPPS rules, CMS has shifted the focus of their reviews to time. As a result, the new rule is based on a two midnight benchmark. The rule states:

***“The decision to admit as INPATIENT must be based on the expectation that the stay will span two midnights.”***

As part of the rule, the admit order must specifically state that ***the patient is being admitted as an inpatient***. In addition, the order must be placed at or before the time of admission and reflect the attending physician who is caring for and has knowledge of the patient. Authentication of the inpatient order prior to the time of discharge by the attending of record is required if the order was not placed by the attending provider.

**Physician Certification** is required for **all inpatient admissions** and should include:

- **The reason for inpatient services** - The medical reason(s) that inpatient services are required as documented in the chart
- **Estimated time the patient will require hospitalization** – based on the two midnight expectation
- **Plans for post-hospital care**, if appropriate

This can be accomplished by providing a **certification statement** at the end of the H&P in the following format:

***Mr. X is a \_\_ year old male with (condition). He will require at least (x) days of (treatment) in the hospital. Upon discharge he will need (services).***

An example is:

***Mr. X is a 90 year old male with acute chronic systolic heart failure. He will require at least 3 days of aggressive intravenous diuresis. Upon discharge he will likely need outpatient cardiac rehab.***

Compliance with the order requirements and certification documentation will assist in securing the appropriate reimbursement for the care provided.

The following are some clarifications to assist you in appropriate utilization of the rule:

- Time spent in outpatient observation can be used toward the two midnight benchmark if documentation supports the need for inpatient admission and the order is placed at the time the determination is made that an additional midnight is required and inpatient admission is appropriate.
- Stays for social or scheduling reasons do not qualify as medically appropriate reasons for an extended stay or a conversion to inpatient.
- Without a reasonable expectation of a two midnight stay, even admissions to the ICU should be placed in observation status.
- Procedures on the Medicare Inpatient Only List are exempt from this rule and should be placed in inpatient status regardless of their length of stay.

The Case Managers and Physician Advisors will be available to answer questions and assist you to ensure the necessary documentation is in place. However, it is the responsibility of all physicians to provide this documentation to ensure that reimbursement is appropriate.

Thank you for your cooperation. If you have any questions regarding this information, please contact Scott M. Brenner, MD, Medical Director, Case Management, at [scott.brenner@lvhn.org](mailto:scott.brenner@lvhn.org) or by phone at 610-402-7632.

# 2013 ANNUAL COMMUNITY INFLUENZA CAMPAIGN NEEDS YOU!

This year's Annual Community Influenza Campaign will be held on **Saturday, November 9, at Dorney Park**, and on **Sunday, November 10, at Coca Cola Park** (Iron Pigs Stadium) from **9 a.m. to 3 p.m.**, both days. Physicians who are able to provide medical support for adult patients and who can volunteer for a four-hour shift at one of the clinics are encouraged to join this year's Flu Crew.

Physician volunteers are needed both days for the 8 a.m. to Noon shift and the 11 a.m. to 3 p.m. shift.

To volunteer, please register by calling 610-402-CARE (2273).

## Key Points

- Physicians provide medical support and answer questions about the flu vaccine. Information from the CDC will be provided to help with questions.
- There is a four-hour shift minimum – AM shift (8 a.m. to Noon) and PM shift (11 a.m. to 3 p.m.).
- If you need to cancel, please call 610-402-CARE two weeks prior to the clinic.
- All volunteers will receive a Flu Crew t-shirt.



Please note: Prior to attending the Community Flu Campaign, volunteers are strongly encouraged to receive their flu vaccination at one of the Colleague Forums, from a department peer vaccinator, or during Employee Health Services walk-in hours (see below).

For more information regarding this volunteer opportunity, please contact Michael J. Consuelos, MD, MBA, Vice Chair, Department of Pediatrics, at [michael.consuelos@lvhn.org](mailto:michael.consuelos@lvhn.org) or by phone at 610-969-2536.



As was the policy last year, all colleagues who potentially have patient contact are required to get a flu shot. All Medical and Allied Health Professional Staff are considered to have patient contact. Those who cannot be vaccinated because of a valid medical or religious reason must

submit an exemption request, obtainable from any Employee Health Services office, by **November 12**. These individuals must be granted an exemption or be vaccinated by **December 1**. Failure to comply with the immunization policy will result in a written warning. All Medical and Allied Health Professional Staff and other staff with patient contact who are not vaccinated or granted an exemption within two weeks of the warning, will be subject to termination.

For more information regarding the policy, please contact Carol Guanowsky, Director, Employee Health Services, at 610-402-8869.

## Employee Health Services Walk-In Hours

### Lehigh Valley Hospital – Cedar Crest

Mondays – 7 to 8 a.m.; 1:30 to 4 p.m.  
Tuesdays – 1 to 3 p.m.  
Wednesdays – 7:30 to 8:30 a.m.  
Thursdays – 1:30 to 4 p.m.  
Fridays – 7 to 8 a.m.

### Lehigh Valley Hospital-Muhlenberg

Mondays – 1:30 to 4 p.m.  
Tuesdays – 7 to 10 a.m.  
Wednesdays – 2 to 4 p.m.  
Thursdays – 7 to 10 a.m.  
Fridays – 8 to 10 a.m.

# CONGRATULATIONS



**Jennifer L. Koch, DMD**, Division of General Dentistry, was awarded the Academy of General Dentistry (AGD) Fellowship Award during the AGD Annual Meeting and Exhibits, held June 27-30, in Nashville, Tenn.

The AGD Fellowship Award is presented to dentists who seek to provide the highest quality of dental care by remaining current in their profession. To accomplish this goal, Dr. Koch completed 500 hours of continuing dental education, passed a comprehensive exam, and fulfilled three years of continuous membership in the AGD. As a Fellowship Award recipient, Dr. Koch joins more than 6,900 active AGD Fellows who have gone above and beyond the basic requirements to care for their patients' oral health.

Dr. Koch has been a member of the Medical Staff since July, 2007. She is in private practice in Bethlehem.



**Nauman Islam, MD**, Division of Cardiology, was recently certified in Advanced Heart Failure and Transplant Cardiology by the American Board of Internal Medicine. He is also board certified in Cardiovascular Disease and Internal Medicine, both by the American Board of Internal Medicine. Dr. Nauman has been a member of the Medical Staff since August, 2011. He practices with Lehigh Valley Heart Specialists.



**Harvey B. Passman, DO**, Department of Family Medicine, was recently recertified in Geriatric Medicine by the American Board of Family Medicine. He is also certified in Family Medicine by the American Board of Family Medicine. Dr. Passman has been a member of the Medical Staff since September, 1981. He is in practice with Parkland Family Health Center.



## LVHN DIGITAL LIBRARY

### DSM-5 Available Now from the Digital Library

**DSM-5**, the most widely used psychiatric reference in the world, is now available through Psychiatry Online, via the Digital Library.

Along with a categorical classification of separate disorders, the disorders included in **DSM-5** were revised to stimulate new clinical perspectives, since mental disorders do not always fit completely within the boundaries of a single disorder. This new structure corresponds with the organizational arrangement of disorders planned for ICD-11, which is scheduled for release in 2015.

Additional enhancements include:

- Representation of developmental issues related to diagnosis.
- Integration of scientific findings from the latest research in genetics and neuroimaging.
- Consolidation of autistic disorder, Asperger's disorder, and pervasive developmental disorder into autism spectrum disorder.
- Streamlined classification of bipolar and depressive disorders.
- Restructuring of substance use disorders for consistency and clarity.
- Enhanced specificity for major and mild neurocognitive disorders.
- Transition in conceptualizing personality disorders.

Additional **DSM®** titles available through Psychiatry Online include *DSM-IV-TR®*, *DSM-IV-TR® Handbook of Differential Diagnosis*, and *DSM-IV-TR® Casebook and its Treatment Companion*.

Besides **DSM-5**, Psychiatry Online includes textbooks, journals, self-assessment tools, news and patient education materials.

To access **Psychiatry Online** through the Digital Library's Homepage, go to **Find Fast/Library Services** and click on **Psychiatry Online**.

If you have any questions about this resource, contact Library Services at 610-402-8410.

# ETHICS CORNER

## Ethics Teaching Tools for Students and Residents

With the advent of our USF SELECT program clerkships has come a reminder of the responsibility to teach healthcare ethics to all our learners. At first, this seems like a large task. Some may think it best taught by others who are expert in the area. To some degree, these both are true as far as formal teaching of the topic and case analysis. But studies have shown students are also taught ethics and professionalism on a daily basis by all those who interact with them.

In order to make it a bit easier to incorporate ethics teaching at the case-based, bedside level, there are several resources out there that are available. This is not an all-inclusive list, but just meant to be a beginning. The first I would like to explore is the AMA Virtual Mentor from the AMA Journal of Ethics. (<http://virtualmentor.ama-assn.org/site/cases.html>) This website does not require membership. The cases, which are listed alphabetically, are varied in topic and are complete with commentary and references. Issues are archived over 14 years. This is an invaluable website to enhance ethics education.

The next set of resources is aimed at surgeons. The Ethical Surgeon ([www.ethicalsurgeon.org](http://www.ethicalsurgeon.org)) is a website repository of cases developed by a recently graduated surgical resident. This is not reviewed by any society or accrediting body, but has interesting cases and commentary. It is designed as a discussion forum.

The American College of Surgeons has several offerings for members and non-members. There are publications for purchase to include “Ethical Issues in Clinical Surgery,” a casebook with extensive discussion on every case. The SCORE (Surgical Council on Resident Education) curriculum has recently been revised to cover these cases using a standardized method of Ethical Decision Making, SFNO (Stakeholders, Facts, Norms, Options). Issues in Surgical Ethics (<http://www.facs.org/education/SURGERYethicsarticles.html>) is a series of articles for which you can receive CME credit. It is a quarterly-offered series of ethical challenges embedded in clinical scenarios which are based on actual clinical stories.

In Obstetrics and Gynecology, there is a textbook titled “Ethics in Obstetrics and Gynecology.” The American Congress of Obstetricians and Gynecologists (ACOG) Committee on Ethics is very active with Committee Opinions on various topics available online in PDF format. The International Federation of Gynecology and Obstetrics (FIGO) has a bioethics curriculum available in PDF format online ([http://www.figo.org/publications/ethical\\_guidelines/Bioethics\\_Curriculum](http://www.figo.org/publications/ethical_guidelines/Bioethics_Curriculum)). There are cases, questions and assessment as well as ethical analysis and references. Their ethical guidelines are available as well. ([http://www.figo.org/publications/miscellaneous\\_publications/ethical\\_guidelines](http://www.figo.org/publications/miscellaneous_publications/ethical_guidelines))

The American Academy of Pediatrics (AAP) has a curriculum guideline and modules available online in PDF format (<http://www2.aap.org/sections/bioethics/default.cfm>). The University of Michigan also has sample cases online (<http://www.med.umich.edu/pec/private/cases.htm>) from its Pediatric Ethics Committee. There are books as well to include “Clinical Ethics in Pediatrics” eBook.

Our dental residents have quite extensive resources at their disposal. The American Dental Student Association (ASDA) posts cases and articles online (<http://www.asdanet.org/ethics/>). The American College of Dentists has a dental ethics website ([www.dentalethics.org](http://www.dentalethics.org)) with online courses. There is an American Society for Dental Ethics with its own website (<http://www.societyfordentalethics.org>). There are also several textbooks available to include the one we use here for our curriculum, “Ethical Questions in Dentistry.”

As you can see, there is no loss for educational resources and tools to help us in areas we may not be so comfortable. We just need to bring ethics into our daily teaching and case discussion wherever applicable. Our learners depend on it as do our patients.

If you have any questions regarding this or any other Ethics topic, please contact Robert D. Barraco, MD, MPH, Chair, Ethics Committee, at [robert.barraco@lvhn.org](mailto:robert.barraco@lvhn.org).





# THE RETAIL PHARMACY VIEW

## Most Medications Safe for Lactating Mothers

According to a report from the American Academy of Pediatrics, most medications and vaccinations are safe for nursing mothers and infants. “The benefits of breast-feeding outweigh the risk of exposure to most therapeutic agents via human milk,” the authors write. Prescribers should consider the following factors:

- Mothers need for drug
- Potential effect on milk production
- How much drug excreted in milk
- Extent of infant oral absorption
- Potential adverse effects to the infant based on age and health

They recommend a visit to the website – LactMed – for an online database.

Certain classes of medications require excessive scrutiny:

- Antidepressants, Anxiolytics, Antipsychotics
- Smoking cessation, Substance abuse prevention
- Pain medications
- Dopamine antagonists, hormonal manipulations, herbal treatments ( Up to 43% of lactating women used herbal products of which there is little data of efficacy or safety)
- Agents used in diagnostic imaging.

## eCigarette Use Skyrockets Among U.S. Middle and High School Students

Between 2011 and 2012, eCigarette usage has doubled among U.S. middle and high school students. 90% of smokers start in their teens. Nicotine is a highly addictive substance whether it comes from the eCigarette or a conventional one. They are not marketed for therapeutic use, therefore, they are unregulated by the FDA so their components and possibly harmful constituents are suspect.

## Anxiety Medications Use Higher Among Caregivers

According to a report by a third party insurance provider, caregivers are 29% more likely to use anti-anxiety medication. They are more likely to view their own health as poor and have a higher proportion saying they are unhappy.



### New Drugs:

- **Mirvaso Gel:** *Brimonidine*: Facial erythema of Rosacea
- **Tivicay** 50mg Tablet: *Dolutegravir*: HIV Treatment

### New Generics:

- **Lansoprazole, Amoxicillin, Clarithromycin Kit:** Prevpac – Ulcer treatment due to H.Pylori
- **Temozolomide** 5, 20, 100 140 180 & 250mg: TEMODAR

If you have any questions or need additional information regarding any of these topics, contact Jay Needle, RPh, Manager, Health Spectrum Pharmacy – LVH-Muhlenberg via e-mail at [jay.needle@lvhn.org](mailto:jay.needle@lvhn.org) or by phone at 484-884-7004.



# UPCOMING SEMINARS, CONFERENCES AND MEETINGS

## Cardiology Grand Rounds

Cardiology Grand Rounds will be held on **Friday, October 4**, from Noon to 1 p.m., in the Auditorium at LVH-Cedar Crest and teleconferenced to ECC Room A at LVH-Muhlenberg.

**“Troponins”** will be presented by Allan S. Jaffe, MD, Consultant, Division of Cardiovascular Diseases; Director, Clinical Core Laboratory Services; and Professor of Medicine, Mayo Clinic College of Medicine.

For more information, contact Kathy Gaspari in the Department of Medicine at 610-402-8024.

## Family Medicine Grand Rounds

Family Medicine Grand Rounds will be held on **Tuesday, October 1**, from 7 to 8 a.m., in Kasych ECC Room 10 at LVH-Cedar Crest, and teleconferenced to ECC Room A at LVH-Muhlenberg.

**“Cultural Awareness”** will be presented by Judith Sabino, LVHN Diversity/Cultural Awareness Liaison.

For more information, contact Laurie Kuchera in the Department of Family Medicine at 610-969-4970.

## Medical Grand Rounds

Medical Grand Rounds are held on Tuesdays, from Noon to 1 p.m., in the hospital Auditorium at LVH-Cedar Crest unless otherwise noted. Topics for October include:

- **October 1 – “Key Issues in the Diagnosis and Management of Primary Hyperparathyroidism”** – Marc Vengrove, DO, and **“Endocrine Testing”** – Gretchen Perilli, MD, and Roberta Hower, RN
- **October 8 – “What Our Patients Say about Their Experience – Satisfaction or Quality?”** – Anthony Ardire, MD, MPH, Senior Vice President, Quality and Patient Safety
- **October 15 – “DOM Quality Updates: Nephrology”** – Henry Schairer, Jr., MD
- **October 22 – “Update on Pulmonary Medicine”** – Brian Civic, MD, Jessica Boehmler, MD, and Dana Kretschman, MD

For more information, contact Kathy Gaspari in the Department of Medicine at 610-402-8024.

## Neurology Conferences

The Division of Neurology conferences are held on Thursdays, from Noon to 1 p.m., in the locations listed. Topics for October include:

- **October 3 – “MS Update”** – Dmitry Khaitov, MD – Location: Lehigh Neurology Conference Room, 1250 S. Cedar Crest Blvd., Fourth Floor, and videoconferenced to Lehigh Neurology Bathgate Office and Kasych ECC Room 9
- **October 10 – “Epilepsy and Inflammation”** – John R. Pollard, MD, Assistant Professor of Clinical Neurology, and Director, Clinical Neurophysiology Fellowship, Hospital of the University of Pennsylvania – Location: LVH-Cedar Crest Auditorium and videoconferenced to Lehigh Neurology Conference Room, 1250 S. Cedar Crest Blvd., Fourth Floor and Lehigh Neurology Bathgate Office
- **October 24 – “Cervicogenic Headaches”** – Ali Shah, MD – Location: Kasych ECC Room 7 and videoconferenced to Lehigh Neurology Conference Room, 1250 S. Cedar Crest Blvd., Fourth Floor and Lehigh Neurology Bathgate Office
- **October 31 – “Guillain-Barre and CIDP”** – Jay D. Varrato, DO – Location: Lehigh Neurology Conference Room, 1250 S. Cedar Crest Blvd., Fourth Floor, and videoconferenced to Lehigh Neurology Bathgate Office and Kasych ECC Room 5

For more information, contact Chrissi Kent, Coordinator, Stroke Center/Neurosciences, at 610-402-8375.

## OB-GYN Grand Rounds

The Department of Obstetrics and Gynecology Grand Rounds are held on Fridays from 7 to 8 a.m., in Kasych ECC Room 8. Topics for October include:

- **October 11 – “Obstetrics Quality Assurance”** – David McLean, MD
- **October 18 – “Social Media Professionalism in the Medical Community”** – Richard Boulay, MD, and Craig Koller, MEd
- **October 25 – “Genetic Counseling in Gynecology”** – Carolyn Scott, MD, Nicole Agostino, DO, and Tara Namey

For more information, contact Julie Gualano in the Department of Obstetrics and Gynecology at 610-969-4515.

*Continued on next page*

## Pediatric Grand Rounds

The Department of Pediatrics will hold Grand Rounds on Tuesdays at 8 a.m., in Kasych ECC Room 6, unless otherwise noted. Topics for October include:

- **October 1 – “Outpatient Coding”** – Richard Lander, MD, Chair, Section on Administration and Practice Management, American Academy of Pediatrics
- **October 8 – PICU Topic** – Amy Lindmark, DO
- **October 15 – “Sinusitis”** – Sanjeev Vasishtha, MD, and Hilary Koprowski, MD – Location: Kasych ECC Room 7
- **October 22 – “HCAHPS – Provider Role Satisfaction or Quality Metric?”** – Anthony Ardire, MD, MPH
- **October 29 – “Hypoplastic Left Heart Syndrome: Fetus to Young Adult”** – Louis Hansrote, MD

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

## Spine Conference

Conferences relating to interesting spine cases are held the first Wednesday of each month beginning at 7 a.m. Clinicians are invited to bring interesting cases to the meeting.

The next Spine Interesting Case Conference will be held on **Wednesday, October 2**, in Kasych ECC Room 6 at LVH-Cedar Crest.

For more information, contact James C. Weis, MD, Co-Chief, Division of Spine Surgery, or Lori Zimmerman, Nursing Manager, at 610-973-6271.

## Surgical Grand Rounds

Surgical Grand Rounds are held on Tuesdays, from 7 to 8 a.m., in the Auditorium at LVH-Cedar Crest and teleconferenced to the First Floor Conference Room at LVH-Muhlenberg.

Topics for October include:

- **October 1 – “Reducing Your Professional Liability Risk and Enhancing Your Practice”** – Todd R. Bartos, Esq., Stevens & Lee, P.C., Lancaster, Pa.
- **October 8 – “Surgical Fire Prevention: First Risk Assessment”** – Jill Hanisak, CRNA, and Jeanne Luke, MSN, RN, CNOR, Lehigh Valley Anesthesia Services
- **October 15 – “Acute Compartment Syndromes”** – Anna Soltys, MD, Chief Surgical Resident

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

## Emergency Medicine Institute – Life Support Classes

Upcoming life support classes sponsored by the Emergency Medicine Institute (EMI) are listed below:

### Advanced Cardiac Life Support (ACLS)

ACLS renewal classes will be held from 8 a.m. to Noon, at the Emergency Medicine Institute located at 2166 S. 12<sup>th</sup> Street, Allentown, on the following dates:

- November 25
- December 4, 5, 9, 10
- January 2, 3, 31

In addition, a two-day provider course will be held on January 8 and 9, from 8:30 a.m. to 4 p.m., at the Emergency Medicine Institute.

### Pediatric Advanced Life Support (PALS)

PALS renewal classes will be held at the Emergency Medicine Institute on the following dates and times:

- November 11 – 1 to 4 p.m.
- November 12 – 9 a.m. to Noon
- November 13 – 10 a.m. to 1 p.m., 1 to 4 p.m., 4 to 7 p.m., and 7 to 10 p.m.
- December 9 – 1 to 4 p.m.
- December 10 – 10 a.m. to 1 p.m., 1 to 4 p.m., 4 to 7 p.m., and 7 to 10 p.m.
- December 11 – 9 a.m. to Noon

Registration information and a list of additional classes are available on the EMI website. To access the website from the LVHN Intranet homepage, select “Departments” – “Non-Clinical” – “EMI.”

For more information regarding these classes, contact Christine Ash at the Emergency Medicine Institute at 610-969-0299.



# CHANGES TO MEDICAL STAFF BYLAWS AND RULES AND REGULATIONS

*The following revisions to the Medical Staff Bylaws and Rules and Regulations received approval by the Medical Executive Committee on May 7, 2013, the General Medical Staff on June 10, 2013, and the Boards of Trustees of Lehigh Valley Hospital and Lehigh Valley Hospital-Muhlenberg on September 4, 2013.*

## ARTICLE VII - TEMPORARY PRIVILEGES/LEAVES OF ABSENCE

### SECTION B – SHORT TERM LEAVE OF ABSENCE

1. **Request for Short Term Leave:** If a Medical Staff Member or AHP anticipates that he/she will not exercise clinical privileges for a period of more than two (2) weeks but less than six (6) months, the practitioner may request a voluntary short term leave of absence. To request a short term leave of absence, the practitioner shall forward a completed Application for Short Term Leave of Absence to Medical Staff Services and the relevant Department Chair. The practitioner shall specify the reasons for and the length of the short term leave of absence in the Application. Short term leaves of absence may be granted for a term of more than two (2) weeks and less than six (6) months.
2. **Process:** A Medical Staff Member or AHP's request for a short term leave of absence shall be forwarded by the Department Chair with a recommendation to the Medical Staff Services Office for approval by the President of the Medical Staff. The President of the Medical Staff shall either approve or deny the request and indicate the starting and ending dates for the short term leave of absence. Should the recommendations of the Department Chair and the President of the Medical Staff differ, the matter shall be referred to the Medical Executive Committee for consideration and final action. The Medical Executive Committee's decision shall be considered final and the practitioner shall not be eligible for further review under the Fair Hearing and Appellate Review process. During the period of the short term leave, the practitioner's clinical privileges are to be held in abeyance and the practitioner is to be considered a Medical Staff Member or AHP without privileges. All other Medical Staff or AHP credentialing responsibilities, including license, malpractice coverage, DEA certificate, board certification, etc., must be maintained during the short term leave.
3. **Termination:** The Medical Staff Member or AHP must, at least one (1) week prior to the termination of the short term leave of absence, or may at any earlier time, request a reinstatement of privileges. The practitioner shall provide a written summary of the relevant activities completed during the leave. Upon receipt of the practitioner's request for reinstatement, the Medical Staff Services Office shall, if applicable, forward to the practitioner a Physical Capacities Checklist. The practitioner shall submit the Physical Capacities Checklist confidentially to the Employee Health Office of the Hospital. The practitioner's request for reinstatement shall be processed by the Medical Staff Services Office and forwarded to the President of the Medical Staff for approval. The Medical Staff Services Office may also request additional information from the

practitioner regarding the practitioner's relevant activities completed during the short term leave. The short term leave of absence will be considered terminated only after the President of the Medical Staff has approved the request. If the Medical Staff President does not approve a request for reinstatement of privileges, the practitioner shall remain on short term leave. The practitioner may subsequently request reinstatement of privileges pursuant to these Bylaws. In the event the short term leave is extended in this manner for a period of six (6) months, the practitioner must submit an Application for Leave of Absence, which shall be processed in accordance with these Bylaws.

4. **Extension:** Prior to the end of the approved short term leave of absence, a Medical Staff Member or AHP may request an extension of the short term leave of absence. The practitioner's request must state the reasons for the extension and shall be processed as a request for a short term leave of absence pursuant to these Bylaws, provided that the cumulative short term leave period (including the extension) is less than six (6) months. If the cumulative requested leave period totals six (6) months or more, the practitioner must submit an Application for Leave of Absence to Medical Staff Services and the relevant Department Chair, which shall be processed pursuant to these Bylaws.

### ~~SECTION B - C - LEAVE OF ABSENCE~~

1. **Request for Leave:** Any Medical Staff Member or AHP may request a voluntary leave of absence. To request a leave of absence, a ~~Medical Staff Member~~ practitioner shall forward a completed Application for Leave of Absence ~~from the Medical Staff to Medical Staff Services and~~ the relevant Department Chair. The ~~Medical Staff Member~~ practitioner shall specify the reasons for and the length of the leave of absence in the Application. Leaves of absence may be granted for a minimum of six (6) months and up to an initial maximum term of two (2) years.
2. **Process:** A Medical Staff Member ~~or~~ AHP's request for a leave of absence shall be forwarded by the Department Chair, with a recommendation, to ~~the Credentials Committee~~ be processed in the manner in which a request for appointment is processed under these Bylaws and, as applicable, the Allied Health Professional Administrative Policy. ~~The Credentials Committee shall forward the request with its recommendation to the Medical Executive Committee.~~ The Medical Executive Committee shall forward the request to the Governing Bodies with its recommendation. The Governing Bodies shall either approve or deny the request and indicate the starting and ending dates for the leave of absence. During the period of the leave, the ~~Medical Staff Member~~ practitioner's clinical privileges, prerogatives and responsibilities are to be held in abeyance and the ~~Medical Staff Member~~ practitioner is to be considered a Medical Staff Member or AHP ~~of the Medical Staff~~ without privileges.

*Continued on next page*



3. **Termination:** The Medical Staff Member **or AHP** must, at least ninety (90) days prior to the termination of the leave of absence, or may at any earlier time, request a reinstatement of privileges. **The practitioner shall provide a written summary of the relevant activities completed during the leave.** Upon receipt of the ~~Medical Staff Member practitioner's~~ request for **reinstatement**, ~~to terminate the leave of absence~~, a reappointment application will be forwarded to the ~~Medical Staff Member practitioner.~~ ~~The Medical Staff Member shall provide a written summary of the relevant activities during the leave.~~ ~~The Medical Staff Member practitioner's~~ reappointment application shall be processed pursuant to ~~the Medical Staff~~ **these Bylaws and, as applicable, the Allied Health Professional Administrative Policy.** The leave of absence will be considered terminated only after the Governing Bodies have approved the application.
4. **Extension:** At least ninety (90) days prior to the end of the approved leave of absence, a Medical Staff Member **or AHP** may request an extension ~~to the leave of absence~~. The request must state the reasons for the extension. This request shall be **processed in the manner in which a request for appointment is processed under these Bylaws and, as applicable, the Allied Health Professional Administrative Policy.** ~~reviewed by the Credentials Committee, the Medical Executive Committee, and the Governing Bodies.~~ An extension to the previously granted leave of absence shall become effective upon approval of the Governing Bodies. The maximum **term of the** leave of absence shall be three (3) years. Thereafter, the expiration of the three (3) year period shall result in the voluntary relinquishment of **any appointments and staff privileges under these Bylaws and, as applicable, the Allied Health Professional Administrative Policy.** ~~and Medical Staff membership.~~ Such termination of **appointments and privileges and/or loss of membership** is not subject to review under the Fair Hearing and Appellate Review Process **or Article V of these Bylaws.** In order to be considered for appointment **as a** ~~to the Medical Staff Member or AHP~~ thereafter, such ~~Medical Staff Member practitioner~~ shall be required to request an appointment application form and be processed through the credentialing processes of the Hospitals as would any new applicant for appointment. All of the terms and conditions of these Bylaws, ~~and the Rules and Regulations~~ **and, as applicable, the Allied Health Professional Administrative Policy** shall be applicable to ~~a resigned member's~~ **the practitioner's** application for appointment including, without limitation, the ~~Medical/Allied Health Hospital Staff Development Plan of the Hospital.~~

## ARTICLE XII – DEPARTMENTS

### SECTION A - DEPARTMENTS, DIVISIONS AND SECTIONS

The Departments of the Medical Staff shall be organized as follows:

2. Department of Dental Medicine which shall include the following Divisions: Endodontics, General Dentistry, Orthodontics, Pediatric Dentistry, Periodontics, and Prosthodontics ~~and Special Care.~~

7. Department of Pathology and Laboratory Medicine which shall include the Division of Anatomic Pathology.
- a. The Division of Anatomic Pathology shall include the Sections of **Bone and Soft Tissue Pathology, Breast Pathology, Cytopathology, Dermatopathology, Gastrointestinal Pathology, Genitourinary Pathology, Gynecologic Pathology, Hematopathology and Clinical Laboratory Medicine, Histopathology, Medical and Forensic Pathology, Molecular Pathology, Neuropathology, Pediatric Pathology, Pulmonary and Endocrinology Pathology, Renal Pathology, Transfusion Medicine and HLA and Transplantation Pathology.**

## ARTICLE XVI - MISCELLANEOUS

### SECTION B - REVIEW

~~These Bylaws and the Rules and Regulations shall be reviewed by the Medical Staff at least annually at a general meeting of the Medical Staff. This review shall be accomplished by a report of the Bylaws Committee to the Medical Staff at least annually at a general meeting of the Medical Staff.~~

*The following revisions to the Medical Staff Rules and Regulations received approval by the Medical Executive Committee on June 4, 2013, the General Medical Staff on June 10, 2013, and the Boards of Trustees of Lehigh Valley Hospital and Lehigh Valley Hospital-Muhlenberg on September 4, 2013.*

## Part II: MEDICAL STAFF RULES AND REGULATIONS

### H. RECORDS

#### II. Completion of Medical Records

4. Medical Record completion time frame requirements:  
**(g) Home Care Orders – (PA Form 485) – must be completed within seven (7) days.**

### N. TRANSITIONAL SKILLED UNIT

1. Patient Care:
- (b) The initial visit by a Medical Staff Member must occur within a time frame appropriate to the patient's condition, but not more than ~~forty-eight (48)~~ **seventy-two (72)** hours after admission.

If you have any questions regarding these changes, contact Karen Fox in Medical Staff Services at 610-402-8957.

# ADVANCED PRACTICE CLINICIANS UPDATE



## Meet the APC Staff

A member of the LVHN Allied Health Professional Staff since October, 2000, **Michele Hartzell, PA-C**, is this month's featured Advanced Practice Clinician.

A member of LVPG-Emergency Medicine, Michele loves the fast paced, variety of patient care as an Emergency Medicine physician assistant. There is no such thing as a typical day in the Emergency Department (ED), and each day brings her new and interesting challenges. Michele primarily practices at the LVH-Muhlenberg site. She frequently provides care in the section of the ED called the Rapid Assessment Unit (RAU). Utilization of a RAU avoids the traditional wait time required with initial nursing triage. Instead, all patients are brought directly back to a room in the RAU to expedite care. In the RAU, Michele will greet and assess the patient with a team present including a nurse, technical partner, and registration member. This process reduces redundancy and streamlines information gathering. Her clinical assessment will then determine further testing and therapy. Depending on the therapy needed, the patient may be moved to an Internal Disposition Area (IDA) where Michele may treat minor illness or complete a number of procedures including laceration repair, dental blocks, splint placement, or reduction of a fracture requiring local anesthesia. When Michele identifies a patient with a more severe illness in the RAU, the patient will be transferred to the main ED. When Michelle practices at LVH-17<sup>th</sup> & Chew ED, where a RAU is not utilized, she works side by side with the attending physician treating patients with all levels of triaged illness severity.

Michele is involved in several leadership positions as a member of the LVPG Advisory Board, Patient Safety, ED Collaborative Leadership Council, and the Advanced Practice Clinician Executive Council. Since 2011, she has been the Director of Quality for APCs in the Division of Emergency Medicine. As a leader, Michele was instrumental in developing a process for patients to receive results of outstanding cultures obtained in the Emergency Department. APCs use evidence based protocols developed to notify and treat all patients with positive cultures which resulted after discharge. Michele continues to oversee this process.

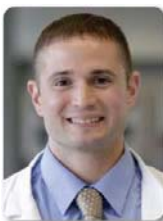
Michele received her Bachelor of Science degree from Pennsylvania State University and her Master of Science in Physician Assistant Studies from Allentown College of St. Francis de Sales. Her passion for the logistics of delivering

cost effective, quality care has led Michele to pursue her Master's degree in Business Administration at DeSales University.

In her spare time, Michele loves to travel with her husband, Archie. Two of their favorite travel destinations in the United States are Manhattan, NY, and Key West, Fla., however, they love traveling abroad as well. Michele met her husband, who is a physician assistant with VSAS Orthopedics, at DeSales University where they were lab partners as they attended Physician Assistant school.

## APC Safe Harbor Clinic

As a group, Advanced Practice Clinicians (APC) are comprised of a very diverse group of professionals who all share one thing in common. All APCs were created to deliver care to the population, or parts of the population, that previously were not fortunate enough to get care. In that spirit, the APC



Committee has set out to open the first known APC driven free and charitable clinic in the country. Under the leadership and direction of **Brett Feldman, PA-C**, who practices with LVPG Hospital Medicine at Cedar Crest, and the sponsorship of the Department of Medicine, the group has opened a clinic to serve the homeless at the Safe Harbor Shelter in Easton, Pa.

The goal of the APC Safe Harbor Clinic is to provide basic care to the homeless and those at risk for homelessness in the Safe Harbor shelter. For those patients who desire this outcome, the ultimate goal is to link them into permanent care with LVHN as well as help to connect all who qualify with public assistance. The APC Safe Harbor Clinic is set up to provide all medications, laboratory testing, and diagnostic studies to the patients completely free of charge. It is funded by charitable contributions.

The APC Safe Harbor Clinic is open every Tuesday and staffed entirely by volunteers who include not only APCs but also physicians, nurses and case managers. A cohort from Medical Staff Services and Human Resources will be assisting Safe Harbor clients in resume building and job interviewing skills. Although the idea and opening of this clinic was spearheaded by the APC Committee, nine other departments at LVHN played an integral part in making this dream a reality. It is a small testament to the strong character of the individuals who collectively form our network.

# Who's New

*This section contains an update of new appointments, address changes, status changes, resignations, etc. Please remember to update your directory with this information.*

## Medical Staff

### New Appointments



**Joanne E. Castillo Rivera, MD**

Cetronia Primary Care  
Lehigh Valley Physician Group  
250 Cetronia Road  
Suite 115  
Allentown, PA 18104-9147  
Phone: 610-395-0307 Fax: 610-395-0950  
Department of Family Medicine  
Provisional Active



**Brian A. Caswell-Monack, DO**

Lehigh Valley Family Health Center  
Lehigh Valley Physician Group  
1730 Chew Street  
Allentown, PA 18104-5595  
Phone: 610-969-3500 Fax: 610-969-3605  
Department of Family Medicine  
Provisional Active



**Jill R. Crosson, DO, MBA**

OAA Orthopaedic Specialists  
250 Cetronia Road  
Second Floor  
Allentown, PA 18104-9168  
Phone: 610-973-6200 Fax: 610-973-6546  
Department of Family Medicine  
Section of Sports Medicine  
Provisional Active



**Hai-Yen T. Nguyen, MD**

OBGYN Associates of the Lehigh Valley &  
Carbon County  
Lehigh Valley Physician Group  
1611 Pond Road  
Suite 401  
Allentown, PA 18104-2256  
Phone: 610-398-7700 Fax: 610-398-6917  
Department of Obstetrics and Gynecology  
Division of Obstetrics/Gynecology  
Provisional Active



**Eugene F. Roginsky, Jr., DMD, MD**

Panossian Facial and Cosmetic Surgery, LLC  
1247 S. Cedar Crest Blvd.  
Suite 300  
Allentown, PA 18103-6358  
Phone: 610-628-1228 Fax: 610-432-2332  
Department of Surgery  
Division of Oral and Maxillofacial Surgery  
Provisional Active



**Tricia L. Royer, DO**

Lehigh Valley Infectious Diseases Specialists  
Lehigh Valley Physician Group  
1250 S. Cedar Crest Blvd.  
Suite 200  
Allentown, PA 18103-6271  
Phone: 610-402-8430 Fax: 610-402-1676  
Department of Medicine  
Division of Infectious Diseases  
Provisional Active



**Scott M. Wheatley, MD**

LVH Pediatric Intensive Care  
Lehigh Valley Physician Group  
Lehigh Valley Hospital  
Cedar Crest & I-78, P.O. Box 689  
Allentown, PA 18105-1556  
Phone: 610-402-7632 Fax: 610-402-7600  
Department of Pediatrics  
Division of Critical Care Medicine  
Provisional Active



**David A. Winand, MD**

Peripheral Vascular Surgeons of LVPG  
Lehigh Valley Physician Group  
1259 S. Cedar Crest Blvd.  
Suite 301  
Allentown, PA 18103-6260  
Phone: 610-402-9400 Fax: 610-402-9420  
Department of Surgery  
Division of Vascular and Endovascular  
Surgery  
Provisional Active

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## **Medical Staff Leadership Appointments**

### **Department of Surgery**

#### **David A. Winand, MD**

Chief

Division of Vascular & Endovascular Surgery

#### **Alan Berger, MD**

Associate Chief

Division of Vascular & Endovascular Surgery

## **Changes to Departmental Assignment**

#### **Larry L. Levin, MD**

(Muhlenberg Primary Care)

Department of Medicine

Division of General Internal Medicine

Removal of: Section of Hospital Medicine

#### **Wayne McWilliams, MD**

(Muhlenberg Primary Care)

Department of Medicine

Division of General Internal Medicine

Removal of: Section of Hospital Medicine

#### **Edward J. Rosenfeld, MD**

(Edward J. Rosenfeld, MD)

Department of Medicine

Division of General Internal Medicine

Removal of: Section of Hospital Medicine

#### **Hermann C. Schumacher, MD**

(Lehigh Neurology)

Department of Medicine

Division of Neurology

Addition of: Section of Neurocritical Care

## **Resignations**

#### **David Allen, DO**

(The Heart Care Group, PC)

Department of Medicine

Division of Cardiology

#### **Anderson B. Collier III, MD**

(Pediatric Specialists of the Lehigh Valley)

Department of Pediatrics

Division of Pediatric Subspecialties

Section of Hematology-Medical Oncology

#### **Quincy D. Gerrald, DO**

(LVH-M Emergency Medicine)

Department of Emergency Medicine

Division of Emergency Medicine

#### **Sarang S. Mangalmurti, MD**

(The Heart Care Group, PC)

Department of Medicine

Division of Cardiology

#### **Joel J. Martinez-Ramirez, MD**

(Centro de Salud)

Department of Medicine

Division of General Internal Medicine

#### **Christy A. Salvaggio, MD**

(LVP-G-Emergency Medicine)

Department of Emergency Medicine

Division of Pediatric Emergency Medicine/Emergency Medicine

#### **William J. Strimel, DO**

(Lehigh Valley Heart Specialists)

Department of Medicine

Division of Cardiology

#### **Arunpriya Vadivelu, MD**

(Allentown Medical Associates)

Department of Medicine

Division of General Internal Medicine

#### **Thriveni R. Vellore, MD**

(Muhlenberg Primary Care)

Department of Family Medicine

#### **Joseph J. Zienkiewicz, DO**

(Lehigh Family Medicine Associates)

Department of Family Medicine

## **Practice Changes**

#### **Joseph F. Ciecko, DO**

(No longer at Lehigh Northampton Family Medicine – practice closed)

MacArthur Family Medicine

*Lehigh Valley Physician Group*

3691 Crescent Court East

Whitehall, PA 18052-3498

Phone: 610-434-9561 Fax: 610-434-5122

*Continued on next page*



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**Susan S. Matta, DO**

(No longer at Muhlenberg Behavioral Health)  
LVHN-M Mental Health Clinic  
*Lehigh Valley Physician Group*  
2604 Schoenersville Road  
Bethlehem, PA 18017-3592  
Phone: 610-691-8028 Fax: 610-954-0608

**Matthew M. Miller, DO**

(No longer at LVHN Hospital Medicine at Muhlenberg)  
LVPG Hospital Medicine at Cedar Crest  
*Lehigh Valley Physician Group*  
Lehigh Valley Hospital  
Cedar Crest & I-78, P.O. Box 689  
Third Floor Anderson Wing  
Allentown, PA 18105-1556  
Phone: 610-402-5369 Fax: 610-402-5959

**David L. Schwendeman, MD**

(No longer at Muhlenberg Behavioral Health)  
LVHN-M Mental Health Clinic  
*Lehigh Valley Physician Group*  
2604 Schoenersville Road  
Bethlehem, PA 18017-3592  
Phone: 610-691-8028 Fax: 610-954-0608

**Practice Name Changes**

From: Coopersburg Medical Associates  
To: Lehigh Area Medical Associates of LVPG-CMA  
*Lehigh Valley Physician Group*  
3800 Sierra Circle  
Suite 115  
Center Valley, PA 18034-8476  
Phone: 484-664-2480 Fax: 484-664-2483

**Robert E. Budinetz, MD**

**Jeffrey A. Debuque, DO**

**Ioana Nistor, MD**

**William R. Swayser, Jr., DO**

From: George A. Kirchner, DDS  
To: Dr. Brandon M. Walsh and Dr. George A. Kirchner  
1251 S. Cedar Crest Blvd.  
Suite 304A  
Allentown, PA 18103-7986  
Phone: 610-432-7767 Fax: 610-432-1931

**George A. Kirchner, DDS**

**Brandon M. Walsh, DMD**

From: Lehigh Area Medical Associates

To: Lehigh Area Medical Associates of LVPG Allentown

*Lehigh Valley Physician Group*

1255 S. Cedar Crest Blvd.

Suite 2200

Allentown, PA 18103-6257

Phone: 610-402-2200 Fax: 610-402-2624

**Anthony P. Buonanno, MD**

**Vipul D. Makwana, MD**

**Christopher D. Newman, MD**

**Jose E. Santiago-Rivera, MD**

**Margaret S. Tretter, DO**

**Shailesh M. Unjia, MD**

**Eric A. Paulson, PA-C**

**Eileen K. Souder, CRNP**

**Phone Number Correction**

**Chirag J. Kalola, MD**

**Jaime E. Broesicke, CRNP**

Advanced Spine Center

1250 S. Cedar Crest Blvd.

Suite 400

Allentown, PA 18103-6224

Phone: 610-402-3560 Fax: 610-402-3355

**Allied Health Staff**

**New Appointments**



**Brandon J. Egner, PA-C**

*Physician Assistant-Certified*

The Heart Care Group, PC

Jaindl Pavilion, Suite 500

1202 S. Cedar Crest Blvd.

P.O. Box 3880

Allentown, PA 18106-0880

Phone: 610-770-2200 Fax: 610-776-6645

Supervising Physician: Prasant Pandey, MD



**Samantha E. Evans, PA-C**

*Physician Assistant-Certified*

Lehigh Valley Physician Practice

Lehigh Valley Physician Group

Lehigh Valley Hospital

17<sup>th</sup> & Chew, P.O. Box 7017

Suite 101

Allentown, PA 18105-7017

Phone: 610-969-4370 Fax: 610-969-3023

Supervising Physician: Cheryl A. Bloomfield, MD

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**Christine D. Franciscovich, CRNP**

*Certified Registered Nurse Practitioner*

LVP-G-Neonatology

Lehigh Valley Physician Group

Lehigh Valley Hospital

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

Allentown, PA 18105-1556

Phone: 610-402-7632 Fax: 610-402-7600

Supervising Physician: Wendy J. Kowalski, MD



**Bryce A. Hilmo, PA-C**

*Physician Assistant-Certified*

VSAS Orthopaedics

1250 S. Cedar Crest Blvd.

Suite 110

Allentown, PA 18103-6224

Phone: 610-435-1003 Fax: 610-435-3184

Supervising Physician: Lawrence E. Weiss, MD



**Sarah L. Luther, RN**

*Registered Nurse*

Lehigh Valley Heart Specialists

Lehigh Valley Physician Group

1250 S. Cedar Crest Blvd.

Suite 300

Allentown, PA 18103-6381

Phone: 610-402-3110 Fax: 610-402-3112

Supervising Physician: Nainesh C. Patel, MD



**April M. Navarra, PA-C**

*Physician Assistant-Certified*

Muhlenberg Primary Care

Lehigh Valley Physician Group

2649 Schoenersville Road

Suite 100

Bethlehem, PA 18017-7236

Phone: 610-868-6880 Fax: 484-895-4740

Supervising Physician: Jyoti G. Gopal, MD



**Anna B. Simon, CRNP**

*Certified Registered Nurse Practitioner*

Careworks

Lehigh Valley Physician Group

365 S. Cedar Crest Blvd.

Allentown, PA 18103-3600

Phone: 484-664-2046 Fax: 484-664-2047

Supervising Physician: Wendy Rush-Spinosa, MD

## **Changes of Supervising Physician**

**David N. Chowns, Jr., CCP**

*Perfusionist*

(Perfusion Care Associates, Inc.)

From: James K. Wu, MD

To: Timothy S. Misselbeck, MD

**Ann Marie Miller**

*Certified Genetic Counselor*

(Cancer Risk and Genetic Assessment Program – Nicole M. Agostino, DO, Matthew W. Martinez, MD)

From: Anderson B. Collier III, MD

To: Philip M. Monteleone, MD

**Robert M. Mimari, CCP**

*Perfusionist*

(Perfusion Care Associates, Inc.)

From: James K. Wu, MD

To: Timothy S. Misselbeck, MD

**Ralph M. Montesano, CCP**

*Perfusionist*

(Perfusion Care Associates, Inc.)

From: James K. Wu, MD

To: Timothy S. Misselbeck, MD

**Tara L. Namey**

*Certified Genetic Counselor*

(Cancer Risk and Genetic Assessment Program – Nicole M. Agostino, DO, Matthew W. Martinez, MD)

From: Anderson B. Collier III, MD

To: Philip M. Monteleone, MD

**Kristina L. Potsko, PA-C**

*Physician Assistant-Certified*

(Lehigh Valley Heart and Lung Surgeons)

From: Gary W. Szydlowski, MD

To: Timothy S. Misselbeck, MD

**Michael Quinn, CCP**

*Perfusionist*

(Perfusion Care Associates, Inc.)

From: James K. Wu, MD

To: Timothy S. Misselbeck, MD

**Kailin T. Slowick, CRNP**

*Certified Registered Nurse Practitioner*

(Pediatric Specialists of the Lehigh Valley)

From: Arnold H. Slyper, MD

To: Laurissa L. Kashmer, MD

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**Louis R. Verdetto, CCP**

*Perfusionist*

(Perfusion Care Associates, Inc.)

From: James K. Wu, MD

To: Timothy S. Misselbeck, MD

**Helen M. Wolfe**

*Perfusion Assistant*

(Perfusion Care Associates, Inc.)

From: James K. Wu, MD

To: Timothy S. Misselbeck, MD

**Joseph J. Zimak, CCP**

*Perfusionist*

(Perfusion Care Associates, Inc.)

From: James K. Wu, MD

To: Timothy S. Misselbeck, MD

**Removal of Supervising Physician**

**Corrine M. Fillman**

*Certified Genetic Counselor*

(LVPG-Maternal Fetal Medicine – Albert P. Sarno, Jr., MD, MPH)

(Cancer Risk and Genetic Assessment Program – Nicole M. Agostino, DO, Matthew W. Martinez, MD)

Removal of: Anderson B. Collier III, MD

**Change of Practitioner Category**

**Laura L. Zitzer, CRNP**

From: Certified Nurse Midwife

To: Certified Registered Nurse Practitioner

(Center for Women's Medicine – Joseph E. Patruno, MD)

**Resignations**

**Deborah W. Busch, CRNP**

*Certified Registered Nurse Practitioner*

(Scott A. Rice, MD Pediatrics)

**Adrienne L. Dickson, CCP**

*Perfusionist*

(Perfusion Care Associates, Inc.)

**Lori Rice, CRNP**

*Certified Registered Nurse Practitioner*

(Pulmonary Associates of LVPG)

**Tina M. VanBuren, CNS**

*Clinical Nurse Specialist*

(Pulmonary Associates of LVPG)

**Kyle E. Zehr, PA-C**

*Physician Assistant-Certified*

(VSAS Orthopaedics)

**APC Annual Dues Deadline – October 15, 2013**

On October 1, final notices were emailed and faxed to Advanced Practice Clinicians who have not yet paid their annual dues. In order to avoid automatic resignation from the Allied Health Professional Staff, your check must be RECEIVED in Medical Staff Services **NO LATER THAN 5 P.M., on TUESDAY, OCTOBER 15, 2013.**

Please forward your check – payable to **LVHN Advanced Practice Clinicians** – and mail it to Gloribel Nieves, Medical Staff Services, Lehigh Valley Hospital, Cedar Crest & I-78, P.O. Box 689, Allentown, PA 18105-1556.

If you have any questions regarding APC dues, contact Gloribel Nieves in Medical Staff Services at 610-402-8984.

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*Access the Medical Staff Services website  
from the LVHN internet at  
[www.lvhn.org](http://www.lvhn.org)*

*From the black top menu bar, select  
“For Health Professionals” then select “Services for  
Members of the Medical Staff”*

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

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

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