

Medical Staff Progress Notes

Volume 4, Number 6
June, 1992



From the President

We are continuing to investigate the possibility of developing some type of managed care vehicle such as an IPA or PPO for the Medical Staff. Requests for proposals have been sent out to consultants, and the list has been reduced to several "finalists."

As discussed previously, the idea is to form a physicians group open to all active members of our Medical Staff which could then be marketed to purchasers of our care. This kind of hospital-wide Medical Staff arrangement is becoming increasingly popular elsewhere and serves the needs of both the Medical Staff as well as helping to control costs for third party payers.

Last month, I mentioned a new committee -- the Clinical Operations Group -- consisting of senior management, elected and salaried Medical Staff Leadership, as well as Nursing Administration. Initial meetings have proved quite fruitful in examining broad, over-arching issues and problems facing our hospital today.

Another "matrix" group has been formed to study existing problems in the Operating Suite. This committee --

the Surgical Action Team -- is composed of the Acting Chairman and Acting Associate Chairman of the Department of Surgery, as well as representatives from Nursing and Management who interact with the Operating Room at various levels. Again, the goal is to integrate the needs of clinicians with improved functioning of the institution. Assisted by a consultant, this group has quite well-focused goals and is optimistic about resolving some of the long-standing difficulties which have developed in the utilization of this high intensity area.

A new idea we are working on in conjunction with the Lehigh County Medical Society is the development of mini-internships for Board members. This would allow Trustees to spend one, two, or three days working closely with one physician which may include carrying a beeper and responding to after-hour calls. We feel this would provide individual Board members with a more realistic idea and appreciation of what our everyday lives and practices are like. Please contact Medical Staff Services at 402-8968 if you are interested in participating.

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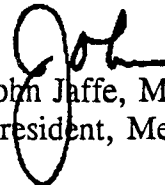
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The Physicians' Health Programs of the Pennsylvania Medical Society continues to function actively. This is an advocacy program designed to assist in managing physician impairment of all types -- drug, alcohol, and psychiatric. A variety of services are offered such as family counseling, monitoring during recovery, and funding to help the impaired physician to re-enter the medical field after treatment. For more information regarding Physicians' Health Programs, call the Pennsylvania Medical Society at 1-800-228-7823. All proceedings are confidential.

Locally, our Physician Wellness/Support group continues to meet on a bi-weekly basis. As described previously, the sessions have been organized in small groups to discuss stressful problems faced by medical professionals in every day practice. The meetings are led by a psychologist who serves as a facilitator for the group. For more information, contact Medical Staff Services.

Best wishes to all for an enjoyable summer!


John Jaffe, M.D.
President, Medical Staff

Hospital Introduces New Telephone Exchange

On June 1, a new and exciting change took place at Lehigh Valley Hospital -- the 402 telephone exchange replaced the assortment of telephone exchanges previously used, providing one unique telephone exchange for the entire hospital system.

Although very few problems have surfaced within the system since the changeover, a number of problems have been reported by several companies with their own telephone systems who have not yet entered the 402 exchange into their systems.

Should you become aware that a caller from outside the hospital is unable to dial into the hospital using the new 402 prefix, please notify the hospital telephone repair line immediately at 402-8866.

Also, please note, that the following phone numbers have **not** been changed to the 402 prefix:

Fairgrounds Surgical Center - 821-2020
HealthPage - 821-2140
Wellness Center (HealthCounts) - 821-2150

If you have any questions regarding the new telephone exchange, please contact Paul L. Klee, General Manager, HealthPage, at 821-2140.

New Telephone Number for Spectrum Apothecary

Effective June 1, the telephone number for Spectrum Apothecary, located at 1230 S. Cedar Crest Boulevard, has been changed to 402-8444. Please change your records.

Observation Status Update

Consultations for Observation patients should be handled as emergent consultations as defined in the Medical Staff Bylaws. These consults require a four-hour response and physician-to-physician communication. This will allow for timely release of the patient if he or she no longer requires observation.

If you have any questions regarding appropriate use of Observation, please contact Susan Lawrence, Director, Integrated Quality Assessment/Resource Utilization Management, at 402-2414.

Pre-Admission Testing Now Available at 17th & Chew Location

In an effort to improve access for physicians and their patients, the hospital has opened a Pre-Admission Testing Department at the 17th & Chew location. The department is located in the Allentown Medical Center, 401 N. 17th Street, Suite 111.

Pre-Admission staff is available Monday through Friday, from 7 a.m. to 4:30 p.m. Although testing can be performed any time during these hours, to better serve your patients, staff from

Anesthesiology, Admissions, and ancillary departments will be available within the Pre-Admission Testing Department between 10:30 a.m. and noon for convenient "one-stop" Pre-Admission procedures.

If you have any questions regarding this new service, please contact Terri Ceci-Miorelli, Supervisor, Pre-Admission Testing, at 402-8877, or John A. Horoski, Director, Patient Access Services, at 402-8340.

Independence Day Observation

As the Fourth of July falls on a Saturday this year, the hospital will observe the holiday on Friday, July 3. Please make a note of this for scheduling purposes.

In observance of the Independence Day holiday, the Outpatient Laboratory hours will be as follows:

Friday, July 3 - All locations (17th & Chew, Cedar Crest & I-78, and 1210-S. Cedar Crest Boulevard) hours from 8 a.m. to noon.

Friday, July 4 - All locations will be closed.

Decisions Near the End of Life

Several sessions have been scheduled for the Decisions Near the End of Life program for July, August, and September. Sessions scheduled at Cedar Crest & I-78 will be held in the QES Classroom on the third floor of the Anderson Wing; sessions scheduled at 17th & Chew will be held as listed. Following is a list of the sessions which will run through September.

Session XIII - 7:30 to 8:30 a.m.,
Cedar Crest & I-78 (Registration
deadline - June 30)

July 28
August 4
August 11
August 18

Session XIV - 7:30 to 8:30 a.m., 17th
& Chew, O.R. Conference Room
(Registration deadline - June 30)

July 30
August 6
August 13
August 20

Session XV - 4:30 to 5:30 p.m., Cedar
Crest & I-78 (Registration deadline
June 30)

July 30
August 6
August 13
August 20

Session XVI - 7:30 to 8:30 a.m.,
Cedar Crest & I-78 (Registration
deadline - August 15)

September 8
September 15
September 22
September 29

Session XVII - 7:30 to 8:30 a.m., 17th
& Chew (Registration deadline -
August 15)

September 10*
September 17*
September 24*
October 1 - Room 902 (School of
Nursing)
* Cafeteria Conference Room

Session XVIII - 4:30 to 5:30 p.m.,
Cedar Crest & I-78 (Registration
deadline - August 15)

September 10
September 17
September 24
October 1

Participants are expected to attend each of the four modules in the appropriate session. If you have any questions or wish to register, please call Gale Brunst in the Critical Care Office at 402-8450.

Medical Staff Progress Notes is published monthly to inform the Lehigh Valley Hospital Medical Staff and employees of important issues concerning the Medical Staff. Articles should be submitted to Janet M. Laudenslager, Coordinator,

Physician Office Practice Services, 17th & Chew, by the first of each month. If you have any questions regarding the newsletter, please call Ms. Laudenslager at 402-2780.

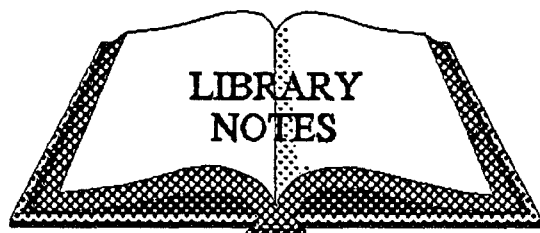


LABORATORY UPDATE

Phlebotomy Procedure Requests

Regulatory and safety issues prevent the use of the Clinical Laboratory as a phlebotomy draw station.

All requests for phlebotomy and phlebotomy procedures must be performed in an appropriate area such as the outpatient laboratories or pre-admission testing areas.



Summer Guidelines

During the summer months, the library staff is particularly busy orienting new residents and Work/Study students. Due to the increased demands placed on the library staff and the library's equipment, the following guidelines will be effective during the summer months:

- * Use of the library's equipment to do MEDLINE searches will be restricted to individuals with a valid hospital ID card.
- * Searchers should limit themselves to 20 minute searches, if possible.
- * Individualized MEDLINE instructions will not be available; however, group orientations will be offered.

New Policies to be Enforced July 1

Effective July 1, the following general library policies will be enforced:

- * Fines on overdue materials will be billed.
- * Telephone renewals of materials will not be accepted.
- * The cost of replacing lost library materials will be charged to the borrower.
- * Charges will be levied for excessive use of the libraries' photocopiers and for the replacement of lost photocopy cards.
- * Charges for interlibrary loan requests that exceed two per month will be billed to the requestor.

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Recent Acquisitions

Recent library acquisitions at Cedar Crest & I-78 include:

Nyhus. *Mastery of Surgery*. 2d ed. Little Brown, 1992.

Clearfield. *Case Studies in Gastroenterology for the House Officer*. Williams & Wilkins, 1991.

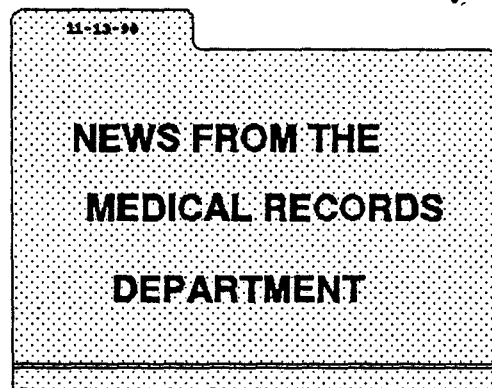
Hallock as editor. *Fasciocutaneous Flaps*. Blackwell, 1991.

Recent library acquisitions at 17th & Chew include:

Hoekelman. *Primary Pediatric Care*. 2d ed. Mosby, 1991.

Crum. *Genital Papillomaviruses and Related Neoplasms*. Raven, 1991.

Fanaroff. *Neonatal-Perinatal Medicine*. 5th ed. Mosby, 1991.



- * Easi-clip fasteners are being attached to medical records in order to maintain chart order.
- * Physicians will receive courtesy reminder phone calls if operative reports are not dictated within 48 hours of the procedure.

If you have any questions regarding these issues, please contact Donna Miller, Data Specialist, at 402-8340.

Strategies for Avoiding and Controlling Hemorrhage and Anemia Without Blood Transfusion

Attached to this issue of *Medical Staff Progress Notes* is a copy of *Strategies for Avoiding and Controlling Hemorrhage and Anemia Without Blood Transfusion* which was

provided to the hospital by the Philadelphia Area Hospital Liaison Committee of Jehovah's Witnesses.

This document has been reviewed and approved for distribution by Janine Fiesta, J.D., B.S.N., Senior Vice President, Department of Legal Services/Risk Management. If you have any questions regarding this issue, please contact Mrs. Fiesta at 402-8201.

News from Radiology

The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requires documentation of appropriateness of examination on all requests for diagnostic studies done in the hospital. To comply with this requirement, many attempts have been made to encourage attending physicians and housestaff to document the appropriate information on requests for diagnostic studies.

However, through the Radiology Department's Quality Assurance Project, a deficiency in compliance of this documentation was found.

At a recent meeting attended by William W. Frailey, M.D., Vice President, Medical Affairs, and Headley S. White, Jr., M.D., Senior Vice President, Medical and Academic Affairs, and the clinical chairmen, a decision was made that following an appropriate educational endeavor, diagnostic examinations in the Radiology Department **will not be performed if the appropriate reason is not documented on the request.** Concurrence of the Medical Staff leadership and the Medical Executive Committee was also obtained.

Michael H. Geller, M.D., Chairman, and Walter J. Dex, M.D., Vice Chairman, Department of Radiology/Diagnostic Medical Imaging, will provide an appropriate educational process to the clinical departments and incoming housestaff. Lisa Exten, Imaging Administrator, will meet with the nursing staff regarding this issue.

Upon completion of this educational process and following a trial period, communication will be made to all those concerned regarding the effective date after which requests for diagnostic examinations in the Radiology Department will not be honored unless there is appropriate clinical information.

As in the past, requests for diagnostic examinations should be written on the order sheet with appropriate information accompanying the request on the order sheet. The unit clerk will transcribe the information and the ordering physician's name in the HIS system.

If you have any questions regarding this issue, please contact Dr. Geller at 402-8088 or Dr. Dex at 402-2214.

Pool Trust Approves Funding

At the May 6 meeting of the Dorothy Rider Pool Health Care Trust, the Trustees approved funding in the amount of \$25,000 to support Regional Symposium Series IV. This series will

consist of 20 symposia and will feature nationally recognized speakers who will provide key information on new technology, and new diagnostic and treatment techniques for the healthcare professionals of this region. Pool Trust funding will support speakers' fees and travel.

Congratulations!

Thomas D. Meade, M.D., orthopedic surgeon, and his wife, Anne Marie, welcomed a baby son on May 6. Christopher Michael weighed 8 lbs. 4 oz., and was 22 in. long. He was welcomed home by his brother, Daniel Joseph, and sister, Melissa Angelle.

Rita M. Mest, CMSC, Medical Staff Coordinator, was recently elected President-elect of the Southeastern Pennsylvania Chapter of the National Association of Medical Staff Services.

This organization provides support and continuing education for Medical Staff Services professionals representing approximately 50 hospitals in Pennsylvania.

Mrs. Mest, who is a Certified Medical Staff Services Coordinator, is also active at the State level, having just completed a term as secretary on the Board of Directors. Mrs. Mest has been Medical Staff Coordinator at Lehigh Valley Hospital since 1988.

Publications, Papers and Presentations

Herbert L. Hyman, M.D., gastroenterologist, was a recent guest speaker at Grand Rounds at the VA Medical Hospital, Miami, Fla., where he presented **Irritable Bowel with Emphasis on the Biophysiological Approach**.

Peter A. Keblish, M.D., chief of Orthopedic Surgery, was a guest speaker at the Pennsylvania Orthopaedic Society Spring Meeting held recently in Naples, Fla. He presented **Role of Unicompartamental Arthroplasty and Cemented vs. Cementless TKA**.

Dr. Keblish also served as a faculty member for **The Cutting Edge of Total Knee Arthroplasty** course sponsored by the Southern California Orthopedic™ Institute held recently in Carlsbad, Calif. His topics were

Comparison of Patellar Retention and Patellar Replacement in LCS Mobile Bearing TKA: A Prospective Comparison and The Lateral Approach in Valgus TKA.

In addition, Dr. Keblish spoke to the Arthritis Support Group of the Lehigh Valley on the **Current Status of Arthritis Surgery**. He also presented **Rationale and Selection of Prosthetic Types in Mobile Bearing Total Knee Arthroplasty (TKA)** at the Southern New Jersey Orthopaedic Society Spring Meeting held in Atlantic City, N.Y.

Indru T. Khubchandani, M.D., colon and rectal surgeon, was the guest speaker at the Annual Meeting of Ohio Valley Society of Colon and Rectal Surgeons in Cincinnati, Ohio. He delivered a lecture commemorating Dr. Altmeir and presented data on a modified procedure originally described by him at the University of Cincinnati for prolapse of the rectum.

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Along with Dr. Josef Fischer, Professor of Surgery and Chairman of the Department at the University of Cincinnati, Dr. Khubchandani participated on a panel on surgical management of inflammatory bowel disease.

The president of the Ohio Valley Society of Colon and Rectal Surgeons is Dr. Mahinder Matta, a graduate of the Colon and Rectal Surgery residency program of Lehigh Valley Hospital.

Robert Kricun, M.D., and Elliot I. Shoemaker, M.D., radiologists, and George I. Chovanes, M.D., and Harry W. Stephens, M.D., neurosurgeons, co-authored the original paper **Epidural Abscess of the Cervical Spine: MR Findings in Five Cases**. The article, which was published in the May 1992 issue of the **American Journal of Roentgenology**, describes in detail the MR characteristics of these unusual spinal abscesses.

Thomas D. Meade, M.D., orthopedic surgeon, served as a visiting professor at Thomas Jefferson Hospital where he presented **Lateral Ankle Instability in the Athlete** during Grand Rounds.

Glen L. Oliver, M.D., ophthalmologist, recently attended the annual meeting of the Schepens International Retinal Society held in Boston, Mass., where he presented a paper, **Bilateral Retinal Arteritis with Multiple Aneurysmal Dilatations with Posterior Uveitis**. A case report was presented along with discussion of management.

Wayne K. Ross, M.D., forensic pathologist, was a guest speaker at the Advanced Police/Medical Death Investigation seminar held recently in Atlanta, Ga. His topics included **Blunt Force Injuries, Sharp Force Injuries, and Mechanical Asphyxia**.

Upcoming Seminars, Conferences, and Meetings

Department of Pediatrics

Grand Rounds will be held on Tuesdays, June 16, June 23, and June 30, all beginning at 8 a.m., in the Auditorium of Lehigh Valley Hospital, 17th & Chew.

Differential Diagnoses of Red Eye will be presented by Donalson Manley, M.D., Wills Eye Hospital, On Friday, June 26, beginning at noon.

For more information, contact Beverly Humphrey in the Department of Pediatrics at 402-2540.

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Department of Psychiatry

Psychiatric Management of the Alzheimer's Patient will be presented by Gary L. Gottlieb, M.D., Associate Chairman of Psychiatry, University of Pennsylvania, on July 16 in the Auditorium of Lehigh Valley Hospital, Cedar Crest & I-78.

As lunch will be provided, pre-registration is requested. For more information or to register, please call Lisa in the Department of Psychiatry at 402-2810 by July 6.

Physician Practice Opportunities

* For Sale or Lease -- Medical- Professional Office Building on Cedar Crest Boulevard, just minutes from Cedar Crest & I-78 and 17th & Chew. Plenty of parking. Ideal for physician.

* For Sale or Lease -- Springhouse Professional Center, 1575 Pond Road. Ideal for physician's office. Two suites available -- one with 2,540 sq. ft.; one with 2,514 sq. ft. Will finish space to specifications.

* For Sale or Lease -- Medical-professional office building on South Cedar Crest Boulevard, just minutes from Cedar Crest & I-78 and 17th & Chew. 3,560 total sq. ft. Ample parking, security/fire alarms installed. Ideal for physician group.

* For Sale -- Professional Office Building on West Broad Street, near the Allentown/Bethlehem border. 4,500 sq. ft. with plenty of parking on corner lot.

* For Lease -- Slots are currently available for the Brown Bag suite at Kutztown Professional Center.

* For Lease -- Share large medical office near Cedar Crest & I-78. Fully furnished and staffed. Multiple line phone system. Computerized billing available.

* For Lease -- Specialty practice time-share space available in a comprehensive health care facility. Riverside Professional Center, 4019 Wynnewood Drive, Laurys Station. Half- or full-day slots immediately available.

* For Lease -- Share medical office space at Riverside Professional Center in Laurys Station. Ideal for solo or small group practice.

For more information, contact Joe Pilla, POPS Representative, at 402-9647.

WHO'S NEW

The Who's New section of *Medical Staff Progress Notes* contains an update of new appointments, address changes, newly approved privileges, etc.

Please remember that each department or unit is responsible for updating its directory, rolodexes, and approved privilege rosters.

Medical Staff

Appointments

Edward E. Geosits, DO
(College Heights OB/GYN, PC)
3131 College Heights Blvd.
Allentown, PA 18104
(215) 437-1931
Department of Obstetrics and
Gynecology
Provisional Active

Elizabeth Goff, MD
(Family Pediatricians, Inc.)
Allentown Medical Center
401 N. 17th Street, #109
Allentown, PA 18104
(215) 435-6352
Department of Pediatrics
Division of General Pediatrics
Provisional Active

Ellen M. Joyce, MD
(College Heights OB/GYN, PC)
3131 College Heights Blvd.
Allentown, PA 18104
(215) 437-1931
Department of Obstetrics and
Gynecology
Provisional Active

David M. Perry, MD
(Emmaus Medical Associates, Inc.)
111 E. Harrison Street
Emmaus, PA 18049
(215) 967-4147
Department of Medicine
Division of Family Practice
Provisional Courtesy

Michael A. Rossi, MD
(Cardiology Care Specialists)
3340 Hamilton Blvd.
Allentown, PA 18103
(215) 433-6442
Department of Medicine
Division of Cardiology
Provisional Active

Additional Privileges

Robert H. Biggs, DO
Department of Medicine
Division of Cardiology
Insertion of Permanent Pacemakers

Craig R. Reckard, MD
Department of Surgery
Division of General Surgery
Section of Transplantation Surgery
Incision and Drainage of Abscess

Change of Status

Benjamin M. Kraynick, MD
Department of Surgery
Division of Orthopedic Surgery
From Courtesy to Emeritus Courtesy

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Telephone Number Changes

Allentown Anesthesia Associates, Inc.
(Karen A. Bretz, MD, Domenico
Falcone, MD, Dorothy I. Hartman,
MD, Samuel M. Lerner, MD,
Alphonse A. Maffeo, MD, Carmen B.
Montaner, MD, Toeruna S. Widge,
MD, Wen-Shiong Yang, MD)
(215) 402-8810

**Allentown Infectious Diseases
Services, Inc.**
(Mark C. Knouse, MD, Minh Ly T.
Nguyen, MD, Luther V. Rhodes III,
MD, John H. Samies, MD)
(215) 402-8430

**Candio, Feldman, Kovacs and
Guillard, PC**
(Joseph A. Candio, MD, Larry B.
Feldman, MD, Paul Guillard, MD,
Robert J. Kovacs, MD)
(215) 402-8950

Dean F. Dimick, MD
(215) 402-1150

Tamar D. Earnest, MD
(215) 402-8490

Kevin J. Farrell, MD
(215) 402-8445

Lehigh Neurology
(Peter J. Barbour, MD, John E.
Castaldo, MD, Lawrence P. Levitt,
MD, Alexander D. Rae-Grant, MD,
Christopher J. Wohlberg, MD)
(215) 402-8420

**Lehigh Valley Pain Management,
Inc.**
(Yasin N. Khan, MD)
(215) 402-8216

Linda L. Lapos, MD
(215) 402-1095

Craig R. Reckard, MD
(215) 402-8506

Michael Rhodes, MD
(215) 402-8445

Practice Disassociation

Daniel M. Silverberg, MD
No longer associated with Valley
Urology Group (effective July 6, 1992)
New address for Dr. Silverberg:
7150 Hamilton Boulevard #327
P.O. Box G
Trexlerstown, PA 18087

Resignation

Neil W. Culligan, MD
(Neurological Services, Inc.)
Department of Medicine
Division of Neurology

Chung H. Kim, MD
Department of Radiation Oncology

Gregory J. McGinley, DO
(Mertztown Community Medical Center)
Department of Medicine
Division of Family Practice

Allied Health Professionals

Resignation

Susan (Deutscher) Rego, PhD
(Department of Psychiatry)
Associate Scientific
Psychologist

**Chairmen of Departments
and Chiefs of Divisions and Sections
and Unit/Lab Medical Directors
1992-1993**

MEDICAL STAFF OFFICERS

President	John S. Jaffe, MD	01/01/91 - 12/31/92
President Elect	Joseph A. Candio, MD	01/01/91 - 12/31/92
Past President	Charles J. Scagliotti, MD	01/01/91 - 12/31/92
Secretary	Ronald A. Lutz, MD	01/01/91 - 12/31/92
Treasurer	John J. Shane, MD	01/01/91 - 12/31/92

DEPARTMENTS/ DIVISIONS/ SECTIONS

ANESTHESIOLOGY

Alphonse A. Maffeo, MD	Chairman
Ramon J. Deeb, MD	Vice Chairman

DENTISTRY

John S. Ziegler, DDS	Chairman
George F. Carr, DMD	Vice Chairman
Dominic P. Lu, DDS	Program Director
Shirley A. Nylund, DMD	Asst. Program Director

Divisions/Sections

Chiefs

Endodontics	Mark Eisner, DMD
General Dentistry	Charles A. Kosteva, DDS
Orthodontics	Sara Karabasz, DMD
Pedodontics	Hugh J. O'Donnell, DDS
Periodontics	Thomas J. McKee, DMD
Prosthodontics	Peter T. Davis, DDS
Special Care	Russel S. Bleiler, DDS

EMERGENCY MEDICINE

Ronald A. Lutz, MD
James G. McHugh, MD

Chairman
Vice Chairman

Divisions/Sections**Chiefs**

Emergency Medicine

Ronald A. Lutz, MD

**Prehospital Emergency
Medical Services**

George E. Moerkirk, MD

MEDICINE

John P. Fitzgibbons, MD
Richard H. Snyder, MD

Chairman
Vice Chairman/
Program Director

Mark H. Mishkin, MD

Student Mentor

Chief Medical Resident

Diane Montella, MD
Imtiaz Alam, MD

Divisions/Sections**Chiefs****Associate Chief**

Allergy

William A. Tuffiash, MD

Cardiology

D. Lynn Morris, MD

Norman H. Marcus, MD

Dermatology

Arthur C. Sosis, MD

Endocrinology/Metabolism

Larry N. Merkle, MD

**Family Practice
Home Care**

Howard A. Silverman, MD

Dale T. Bowen, MD
Fred D. Fister, MD

Gastroenterology

Carl F. D'Angelo, MD

General Internal Medicine

David M. Caccese, MD

Charles A. Gordon, MD

Geriatrics

Francis A. Salerno, MD

David P. Carney, MD

Hematology/Medical Oncology

David Prager, MD

Infectious Diseases

Luther V. Rhodes, III, MD

Nephrology

Joseph C. Guzzo, MD

Neurosciences

Peter J. Barbour, MD

Occupational Medicine

Jeffrey E. Burtaine, MD

**Physical Medicine
and Rehabilitation**

(Vacant)

Joseph J. Grassi, MD

Pulmonary

Joseph E. Vincent, MD

Rheumatology

Albert D. Abrams, MD

OBSTETRICS AND GYNECOLOGY

Robert V. Cummings, MD
Ernest Y. Normington, MD
Stephen K. Klasko, MD

Chairman
Vice Chairman, Medical Affairs
Vice Chairman, Education

PATHOLOGY

John J. Shane, MD
Raymond A. Rachman, MD

Chairman
Vice Chairman

Clinical & Anatomic
Forensic
Neurosciences

John J. Shane, MD
Isidore Mihalakis, MD
Brian W. Little, MD

PEDIATRICS

John D. VanBrakle, MD
Dennis W. Kean, MD

Chairman
Vice Chairman

Divisions/Sections**Chiefs**

Allergy

Jerome Dunn, MD

Behavioral Pediatrics

Sarah J. Fernsler, MD

Cardiology

Louis W. Hansrote, MD

Development & Rehabilitation

Karen E. Sentt, MD

General Pediatrics

Russell B. Puschak, MD

Neonatology

Ian M. Gertner, MD

Neurology

Martha A. Lusser, MD

PSYCHIATRY

Michael W. Kaufmann, MD
Susan D. Wiley, MD

Chairman
Vice Chairman

RADIATION ONCOLOGY

Victor Risch, MD
Charles F. Andrews, MD

Chairman
Vice Chairman

**RADIOLOGY/DIAGNOSTIC
MEDICAL IMAGING**

Michael H. Geller, MD
Walter J. Dex, MD
Robert Kricun, MD

Chairman
Vice Chairman
Residency/Fellowship
Program Director

Divisions/Sections**Chiefs**

Diagnostic Radiology

Michael H. Geller, MD

Nuclear Medicine

Stuart A. Jones, MD

SURGERY

Walter J. Okunski, MD
William W. Frailey, MD
Gary G. Nicholas, MD
Michael Rhodes, MD
Gary G. Nicholas, MD

Lester Rosen, MD

Walter J. Okunski, MD
Michael Rhodes, MD

Acting Chairman
Acting Associate Chairman
Associate Vice Chairman
Assistant Vice Chairman
Gen Surgery Program Director/
Education Director
Colon/Rectal Program Dir./
Research Director
Plastic Surg. Program Dir.
Trauma Program Director

Chief Surgical Residents

Mark D. Jessen, MD
Mark A. Zelkovic, MD
Patrick J. Erwin, MD

Divisions/Sections**Chiefs****Associate Chief****Cardio-thoracic Surgery**

Geary L. Yeisley, MD

Farrokh S. Sadr, MD

Colon/Rectal Surgery

John J. Stasik, MD

James A. Sheets, MD

General Surgery
Pediatric Surgery
Surgical Oncology
Transplantation Surgery

Gerald Sherwin, MD
Andrew B. Walker, MD
Mark A. Gittleman, MD
Craig Reckard, MD

Mark Gittleman, MD

Neurosciences

Robert A. Morrow, MD

Mark C. Lester, MD

Ophthalmology

Harry W. Buchanan, IV, MD

Shari M. Roth, MD

Oral/Maxillofacial Surgery

Ronald DiLeo, DDS

Mark Grim, DMD

Orthopedic Surgery
Podiatry

Peter A. Keblish, MD
David P. Steed, DPM

Peter M. Anson, MD

Otolaryngology

(Vacant)

John D. Harwick, MD

Plastic/Reconstructive Surg

Walter J. Okunski, MD

Geoffrey G. Hallock, MD

Trauma
Burn
Surgical Critical Care

Michael Rhodes, MD
Kevin J. Farrell, MD
Kevin E. Glancy, MD

Glen H. Tinkoff, MD
Walter J. Okunski, MD

Urology

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P&T Highlights

June, 1992

The following actions were taken at the May 11, 1992 P & T Committee meeting.

FORMULARY ADDITION REQUESTS

When You're 'Sertraline-ly' Depressed —

Sertraline (Zoloft, Pfizer) - is a selective serotonin reuptake inhibitor (SSRI) indicated for the treatment of depression. Sertraline's half life is shorter than fluoxetine's, yet Sertraline is given once daily.

Unlike Fluoxetine, Sertraline is metabolized to an inactive metabolite via the liver. Sertraline has not been studied extensively in patients with impaired renal or hepatic function. It is primarily metabolized to an inactive ingredient, and consequently should be used with extreme caution in hepatically impaired patients.

The most common side effects tend to be dose dependent and include nausea (26%), diarrhea (18%), dry mouth (16%), headache (20%) and insomnia (16%). Sertraline is highly protein bound and has the potential for interactions with other highly protein bound drugs; hence patients should be monitored closely for altered effects or side effects.

The potential for serious, sometimes fatal reactions, exists when SSRI's are given together with monoamine oxidase inhibitors (MAOI), therefore, it is recommended that Sertraline not be given together with or within 14 days of discontinuing MAOI. Similarly, a 14 day washout is suggested after stopping Sertraline before initiating an MAOI.

Sertraline's dose ranges from 50 - 200mg daily taken with a meal. Therapy should be initiated at 50mg and should be titrated at weekly intervals.

TABLE 1: Cost Comparison of Selected Antidepressants

Drug	Cost	Usual dose/day	Cost/day
Sertraline 50mg	\$1.53	50-200	\$1.53 - \$3.16
Sertraline 100mg	\$1.58	50-200	\$1.53 - \$3.16
Amitriptyline 50mg	\$0.01	50-150	\$0.01 - \$0.06
Fluoxetine 20mg	\$1.63	20-80	\$1.63 - \$6.52

Isosorbide Mononitrate (ISMN) (Ismo, Wyeth-Ayerst) - is the major active metabolite of Isosorbide Dinitrate (ISDN) and is indicated in the prevention of angina pectoris in patients with CAD.

ISMN's advantages over ISDN are its complete bioavailability, its lack of first pass metabolism

and active metabolites, and its apparent lack of tolerance development (when dosed BID Q7H, with a 17 hour drug free interval). ISMN does not require dosage adjustment in geriatric patients or patients with renal/hepatic impairment.

The most common adverse effects are headache (38%), dizziness (5%) and nausea and vomiting (4%). ISMN's vasodilating effects may be additive when given with other vasodilators; marked orthostatic hypotension has occurred when ISMN is given with Calcium Channel-Blockers and other Organic Nitrates. Because BID meds are given to our inpatients at 0900 and 1800 hours, Physicians are asked to specify the times of administration i.e. 0900 and 1600.

ISMN was approved for a 6 month therapeutic evaluation.

TABLE 2: Cost Comparison for Selected Vasodilators

Drug	Hospital Cost/dose	Retail Cost/dose	Usual dose per day	Hospital Cost/day	Retail Cost/day
ISMN 20mg	\$0.005	\$0.60	40	\$0.01	\$1.20
ISDN 20mg	\$0.02	\$0.30	20-160	\$0.08-\$0.24	\$0.30-\$1.48
NTG Cap 6.5mg	\$0.04	\$0.04	5-27	\$0.04-\$0.72	\$0.04-\$0.72
NTG Patch 0.2mg/hr	\$0.01	\$1.15	2.5-15	\$0.01	\$1.15

When you feel your sore throat in your wallet

Clarithromycin (Biaxin, Abbott) - is a macrolide antibiotic indicated in upper and lower respiratory tract and uncomplicated skin and soft tissue infections caused by susceptible organisms. Clarithromycin possesses a greater spectrum of activity than Erythromycin (e.g. H.Flu, Moraxella, Chlamydia) with fewer GI side effects, as compared to base or stearate. There are no studies comparing Clarithromycin to EES, which is the macrolide used at Lehigh Valley Hospital for all non-bowel prep orders. Clarithromycin is rapidly absorbed and is metabolized to an active metabolite; both active forms are excreted in the urine. Hepatic and severe renal impairment require dosage alteration. The most common side effects include diarrhea, nausea, abnormal taste, abdominal pain, and headache. Clarithromycin is contraindicated

in pregnancy and in patients allergic to Erythromycin or other macrolides. Clarithromycin increases serum levels of theophylline and carbamazepine, and because of its similarity to Erythromycin, caution should be used in giving it together with agents metabolized by the Cytochrome P-450 system.

The usual dose of Clarithromycin is 250 to 500mg twice daily given without regard to meals (consult package insert and hospital susceptibility data for specific doses, susceptibility and anticipated tissue/fluid levels.

Given the increased cost over traditional macrolide therapy, Clarithromycin was approved to the formulary for the following specific uses:

- Where a macrolide is indicated *and* where the patient is intolerant of EES.
- As monotherapy to replace a multiple drug regimen (i.e. Legionella and H.Flu in COPD).
- In MAI patients intolerant to the traditional four drug regimen.

TABLE 3: Cost Comparison for Clarithromycin and EES

Drug	Cost	Usual dose/day	Cost/day
EES 400mg	\$0.11	1200-3200	\$0.33-\$0.88
Clarithromycin 250/500	\$2.12	500-1000	\$4.24

IT MAKES YOU WHAT?

Allergy documentation policy

Allergy documentation for hospital patients has long been a problem. Information is kept in multiple places, rarely compared for accuracy and completeness, and includes intolerances without distinction from allergies. The following process for *inpatients* was agreed to by a Pharmacy & Therapeutics Task Force, approved by the Physician IS and Pharmacy & Therapeutics Committees as part of the PHAMIS implementation.

Key features are:

- Physician is responsible to identify drug allergies *and symptoms* on the Doctor's Order Sheet on the Admission orders. Symptom documentation will allow for distinction between allergies and intolerances.

- Nurse independently verifies and documents the drug allergy information on the Doctor's Order Sheet.
- Physician reconciles discrepancies on the order sheet.
- Pharmacist enters allergies and symptoms into the computer system.
- Nurses have ability to view but not change drug allergies.
- System will perform conflict checking.

Because of the potential problems with delayed implementation, it was suggested that early implementation of this change be sought. More will follow.

P&T Highlights is a monthly publication of the Pharmacy Department of Lehigh Valley Hospital, Allentown PA 18105.

James Giardina, RPh,
Editor

Lehigh Valley Hospital is an equal opportunity employer. M/F/H/V

Formulary Rejection — A Pearl on Pearles

Benzonatate (Tessalon, Ciba-Geigy) - a non-narcotic antitussive indicted for the symptomatic relief of cough was rejected for formulary addition. Benzonatate appears to offer little advan-

tage over Dextromethorphan and was very infrequently used when it was previously on the formulary.

Drug Usage Evaluation Calendar

The committee reviewed and approved a tentative schedule of drugs to be reviewed in the coming 8 months. Drugs included are

Clozapine, Ondansetron, Piperacillin, Dobutamine, Theophylline, Flumazenil, and several others. Specific criteria will be developed against which to compare usage, with the goal being to improve use if it is judged by the Committee to be necessary.

Adverse Drug Reaction Corner

116 reports were received during the four month period December 91 - March 92, which represent an almost 300% increase over the same period last year. One serious reaction was

reported - it was attributed to Haloperidol, used to treat agitation. Besides the more usual extrapyramidal symptoms, the patient experienced respiratory distress and hypertension, which resulted in transfer to a critical care unit for observation and management.

Philadelphia Area Hospital Liaison Committee Of Jehovah's Witnesses

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February 1, 1992

ATTEN: Risk Manager
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TO WHOM IT MAY CONCERN:

Times change and medical advancements continue to improve many aspects of medical practice. This has proven true with non-blood medical management. We believe you will find the enclosed document, "Strategies For Avoiding And Controlling Hemorrhage And Anemia Without Blood Transfusion", helpful. This document has the following attributes:

Alternatives - A current listing of medical devices, drugs, and new or improved techniques which have significantly increased the strategies of non-blood medical management.

Bibliography - This provides a quick reference to the source material which elucidates the alternative. This will assist a physician in locating the original article in his hospital library or medical data base.

One hospital was so impressed with the "ALTERNATIVES" document that they have posted one in their emergency room. When a trauma victim arrives, Witness or non-Witness, they consult the list and determine which alternatives are applicable. Some have asked for additional copies in order to distribute to all key personnel or the entire medical staff. We would be pleased to provide you with additional copies of the document as well.

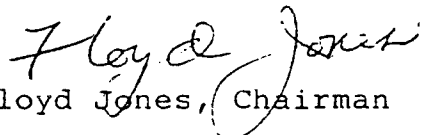
Page 2 of 2

February 1, 1992

Strategies for Controlling Hemorrhage

Jehovah's Witnesses would like to thank you for your cooperation in providing quality alternatives to practice non-blood medical management.

Very truly yours,


Floyd Jones, Chairman

PHILADELPHIA AREA
HOSPITAL LIAISON COMMITTEE

P.S. - FREE HLC SERVICES:

- (1) Inservice presentations
- (2) Physician referral service for consultation or transfer
- (3) Sourcing service for alternative non-blood strategies
- (4) Free patient consultation

STRATEGIES FOR AVOIDING AND CONTROLLING HEMORRHAGE AND ANEMIA WITHOUT BLOOD TRANSFUSION

1. SURGICAL DEVICES AND TECHNIQUES TO LOCATE AND ARREST INTERNAL BLEEDING:

- a. Electrocautery
- b. Laser Surgery ^{1, 2}
- c. Argon Beam Coagulator ³
- d. Gamma Knife Radiosurgery ⁴
- e. Microwave Coagulating Scalpel ⁵
- f. Shaw Hemostatic Scalpel ⁶
- g. Endoscope ⁷
- h. Arterial Embolization ^{8, 9}
- i. Tissue Adhesives ¹⁰

2. TECHNIQUES AND DEVICES TO CONTROL EXTERNAL BLEEDING & SHOCK:

- a. For Bleeding:
 - (1) Direct Pressure
 - (2) Ice Packs
 - (3) Elevate body part above level of heart
 - (4) Hemostatic Agents (see below)
 - (5) Prompt surgery ^{11, 27}
 - (6) Tourniquet
- b. For Shock:
 - (1) Trendelenburg/shock position (patient supine with head lower than legs)
 - (2) Medical Antishock Trousers (M.A.S.T.)
 - (3) Appropriate volume replacement after bleeding controlled

3. OPERATIVE AND ANESTHETIC TECHNIQUES TO LIMIT BLOOD LOSS DURING SURGERY:

- a. Hypotensive Anesthesia ¹²
- b. Induced Hypothermia ¹³
- c. Intraoperative Hemodilution ^{14, 15}
- d. Hypervolemic Hemodilution ^{16, 17}
- e. Intraoperative Blood Salvage ^{18, 19}
- f. Mechanical occlusion of bleeding vessel ^{20, 21}
- g. Reduce blood flow to skin ²²
- h. Meticulous hemostasis ^{23, 24, 25, 26}
- i. Preoperative planning: ^{24, 25}
 - (1) Enlarged surgical team/Minimal time ²⁷
 - (2) Surgical positioning ^{24, 28}
 - (3) Staging of complex procedures ²⁹

4. BLOOD-OXYGEN MONITORING DEVICES AND TECHNIQUES THAT LIMIT BLOOD SAMPLING:

- a. Transcutaneous Pulse Oximeter ³⁰
- b. Pulse Oximeter ³¹
- c. Pediatric microsampling equipment ^{32, 33}
- d. Multiple tests per sample—Plan Ahead! ^{32, 34}

5. VOLUME EXPANDERS:

- a. Crystalloids
 - (1) Ringer's Lactate
 - (2) Normal Saline
 - (3) Hypertonic Saline ³⁵
- b. Colloids
 - (1) Dextran ³⁶
 - (2) Gelatin ³⁷
 - (3) Hetastarch ^{38, 39}
- c. Perfluorochemicals
 - (1) Fluosol DA-20 ⁴⁰

6. HEMOSTATIC AGENTS FOR BLEEDING/CLOTTING PROBLEMS:

- a. Topical:
 - (1) Avitene
 - (2) Gelfoam
 - (3) Oxycel
 - (4) Surgicel
 - (5) Many others
- b. Injectable:
 - (1) Desmopressin ^{41, 42}
 - (2) ε-Aminocaproic Acid ⁴³
 - (3) Tranexamic Acid ⁴⁴
 - (4) Vitamin K ⁴⁵
- c. Other Drugs:
 - (1) Vasopressin ²²
 - (2) Conjugated Estrogens ⁴⁶
 - (3) Aprotinin ⁴⁷
 - (4) Vincristine ⁴⁸

7. THERAPEUTIC AGENTS AND TECHNIQUES FOR MANAGING ANEMIA:

- a. Stop the bleeding!
- b. Oxygen support
- c. Maintain intravascular volume ⁴⁹
- d. Iron Dextran (Imferon) ⁵⁰
- e. Folic Acid
- f. Vitamin B-12
- g. Erythropoietin ^{51, 52, 53, 54}
- h. Nutritional support
- i. Immunosuppressive agents if indicated ^{54, 55}
- j. Perfluorocarbon solutions (Fluosol-DL) ⁴⁰
- k. Granulocyte-Colony Stimulating Factor ⁵⁶
- l. Hyperbaric Oxygen Therapy ^{57, 58}
- m. 10/30 rule for minimum red cell level has no scientific basis ^{49, 59, 60}

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