



# Progress Notes

# MEDICAL STAFF

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## From the President

Many of you are aware of the recently publicized study on the incidence of HIV-positivity among the selected group of our patients. This information should reinforce the need for strict adherence to Universal Precautions in patient care. In addition, the study will help us with educational efforts in decision-making about testing and counseling, for both patients and personnel.

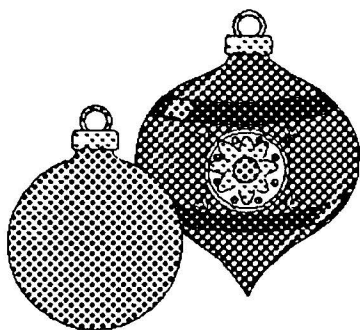
The issue of testing of healthcare workers continues to be controversial, with ill-defined guidelines. There remains considerable confusion even at the federal level about what the appropriate indications and parameters for testing should be. In the meantime, we will have to use a common sense approach, in recommending testing to both our patients and fellow providers. The AIDS Activities Office (778-2400) remains available to assist with hospital patients.

The Department of Obstetrics and Gynecology was recently informed that its residency program has been fully accredited for four years. It is interesting to note that one of the stipulations by the Residency Review Commission was finding 24-hour faculty in-house coverage of the obstetric service. This is obviously a very positive development for both the Department of Obstetrics and Gynecology and the institution as a whole. The department and its leadership are to be congratulated for their efforts.

Best Wishes to all for a Happy and Healthy Holiday Season and New Year!

Sincerely,

John Jaffe, M.D.  
President, Medical Staff



## Medical Assistance Caution

The Department of Public Welfare offers the following reminder with regard to Medicaid patients.

It is important that providers seeing Medical Assistance recipients check the person's Medical Services Eligibility (MSE) card each time a service is provided. Unlike private or governmental health insurance plans, Medical Assistance issues a new MSE card semi-monthly to the majority of eligible recipients to ensure that ineligible persons do not receive services.

Therefore, a recipient's identification number can change each time cards are issued. Department of Public Welfare regulations state that providers are responsible for checking the identification number and effective date on the MSE card and for making sure that services are furnished to the person named on the card.

If a patient who says he or she is eligible for Medical Assistance services cannot produce an MSE card, the provider may refuse treatment, unless the service requested is urgent or an emergency. If treatment is provided to an ineligible patient, the provider is responsible for all unrecovered costs.

## Aegis Informational Sessions Scheduled

You may have read about Aegis in **Medical Economics**. You may have seen the video. Now, you are invited to attend an informative session about the **Aegis Retirement Program**. Learn why physicians and business owners across the country are making Aegis the cornerstone of their retirement plans.

Two informational sessions have been scheduled for Thursday, December 19, in the Carl Anderson Wing Boardroom on the third floor of the LVHC site. The first session will begin at 11 a.m.; the second will start at noon. Lunch will be served at both sessions.

If you are interested in attending one of these informative and useful seminars, please contact Janet M. Laudenslager, Coordinator, Physician Office Practice Services, at 778-2780. Please make your reservations at your earliest convenience as seating is limited.



## Cardiac Rehab News

Phase I of the Inpatient Cardiac Rehabilitation Program was implemented on October 1, 1991. The program focuses on all medical and surgical cardiac inpatients. To access patients into the program, physicians should initiate an order on the Physician Order Sheet for Inpatient Cardiac Rehabilitation.

If you have any questions regarding this program, contact Christy Singley, Director, Cardiac Rehabilitation Unit, at 776-8855.

## ExpressCare

Effective November 18, 1991, **ExpressCare** officially opened at The Allentown Hospital site. ExpressCare is a separate area of the Emergency Department, located on the first floor in the area formerly occupied by ICU, and allows for the expeditious care of non-urgent emergency patients. The present hours of operation are 1 to 9 p.m., Monday through Friday. Patients are considered Emergency Department patients with the full complement of services available, if needed.

*A special "Thank You" to Charles W. Umlauf, M.D., for the lovely White Spruce tree which has added a touch of holiday spirit to the Medical Staff Lounge at TAH site.*

## Medical Clearance for Electroconvulsive Therapy

In accordance with the Electroconvulsive Therapy (ECT) policy, medical consultants are required to document "medically cleared for ECT" on the Physician Order Sheet prior to administration of ECT.

If you have any questions regarding this policy, please contact Farhad Sholevar, M.D., Medical Director, 6S, at 435-4562.



### *Addition of CK to Chem 20 Admission Profile*

At the request of several physicians, the laboratory will add CK to the current Chem-20 admission profile as of January 1, 1992. This CK will not be available on the inpatient profile. If you require daily or periodic CK's, order them individually, as is the current practice. This CK on the Chem-20 profile is an excellent but expensive methodology, therefore, initial use should be as a screening test. Please keep in mind that the DAX profile instrument is not available 24-

hours a day. The reference range for this screening CK is 30-230 U/L and will run 20-25% higher than the current individually ordered "bench" method.

If you have any questions regarding this issue, please contact either Gerald E. Clement, Ph.D., Director, Toxicology/Chemistry/Immunology, at 776-8150, or Jan Gushen, Supervisor, Chemistry, at 776-8174.

## Laser News

### *KTP In-Services and Laser Lab Courses*

For your convenience, the Microsurgery/Laser Laboratory at the LVHC site has established KTP 532nm laser inservices during the months of December and January. Any credentialed laser user who has not been inserviced on the KTP surgical laser is invited to attend one of these sessions. This brief inservice consists of an explanation of the KTP 532nm laser and hands-on experience. Sessions will be held as follows:

- \* Tuesday, December 17 from 9:30 to 11 a.m.
- \* Wednesday, December 18 from 1 to 2:30 p.m.
- \* Wednesday, January 8 from 1 to 2:30 p.m.
- \* Monday, January 13 from 1 to 2:30 p.m.
- \* Wednesday, January 15 from 1 to 2:30 p.m.

- \* Monday, January 20 from 9:30 to 11 a.m.
- \* Wednesday, January 29 from 9:30 to 11 a.m.
- \* Friday, January 31 from 9:30 to 11 a.m.

For those interested in obtaining credentialing for laser use, an instructional course is offered through the Microsurgery/Laser Laboratory. This course is offered monthly and consists of three, four-hour sessions. The first two didactic meetings include laser physics, safety, and clinical applications. The third session includes individualized instruction in the use of the CO<sub>2</sub>, Nd:YAG, and KTP surgical lasers. CME credits for 12 hours, Category I are awarded upon completion. Course dates are available through June of 1993.

For more information regarding either the KTP inservices or laser course dates, please contact the Microsurgery/Laser Laboratory at 776-8977.

### *Mandatory Eye Exam Deadline Extended*

The Laser Safety Committee has extended the date for all laser credentialed attending physicians and residents for mandatory eye examinations, as required by Laser Policy #7101.00. The deadline has been extended to Tuesday, December 31, 1991.

Eye exams are at the physician's own expense, and a report of the ophthalmologic exam should be forwarded to the Medical Staff Office upon completion.



The Health Sciences Library recently announced three new programs which are now available at the LVHC site. The new programs include:

**CANCERLIT (CD Rom Product)**

Database - NCI CANCERLIT-English language citations. Published by Aries Systems, September, 1991. Content includes English language article citations published by the National Cancer Institute between January, 1987 and September, 1991. Updated quarterly.

**ILIAD (Expert System)**

A decision support and medical diagnostic tool for Internal Medicine. Two modes -- consultation or simulation. Allows for access to its knowledgebase of over 1,000 diseases and 5,600 manifestations. Interactively teaches differential diagnosis and optimal patient workup strategies.

**COMPU-SAP VI (Computer Version of SESAP VI)**

Computerized Surgical Education and Self-Assessment Program No. 6 consisting of two sections -- patient management problems and multiple choice questions. This

program is a measure of cognitive knowledge, evaluated through the multiple choice format. It also measures judgment ability through the patient management problem component.

**Recent Acquisitions**

New book acquisitions at TAH site include:

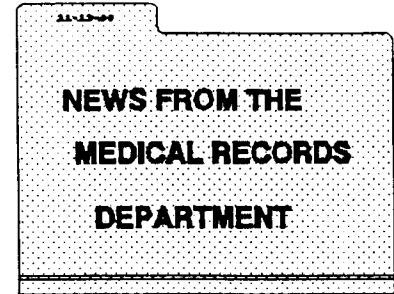
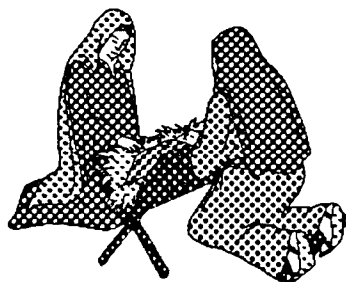
Cady. **Surgery of the Thyroid and Parathyroid Glands.** 3rd ed. W.B. Saunders, 1991.

Elkayam. **Cardiac Problems in Pregnancy: Diagnosis and Management of Maternal and Fetal Disease.** 2d ed. Alan R. Liss, 1990.

Recent book acquisitions at LVHC include:

**DRGs: Diagnosis Related Groups: Definitions Manual.** Version 9.0, published by 3M Healthcare Info for HCFA, 1991.

**Directory of U.S. Hospitals, 1991.** (Unlike other directories that provide only address information, this directory supplies information on the top five DRGs for each hospital plus some financial data.)



**Suspensions**

Physicians are reminded of their duty to complete records in a timely manner. Failure to do so can adversely affect patient care and unnecessarily delay reimbursement for the Hospital and the physician.

The Medical Staff Bylaws call for corrective action to be taken when a physician continues to fail in his/her duty to complete records in a timely manner. Such action falls into the following categories:

1. **Weekly Suspension:** Occurs when the physician has failed to complete the history and physical examination report within 24 hours after admission, failed to dictate the procedure and findings within 24 hours after admission to the Hospital, or failed to complete the medical record within 15 days of the date of discharge. This suspension of all admitting, treating, consultative, and operating privileges affects the offending practitioner AND all

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Other members of his/her group practice. All elective cases scheduled for the following day are immediately canceled. Reinstatement of emergency, admitting, treatment, consultation, and surgical privileges occurs immediately upon completion of the delinquent record.

**2. Six-month Review:**

The Medical Executive Committee, upon the Medical Records Committee's recommendation for corrective action, reviews the activities of those physicians who have had three or more suspensions during a six-month period, six or more suspensions during a two-year period, or any suspension which exceeds 30 days in length. The Medical Executive Committee may recommend a letter of warning be sent to the offending practitioner, or that he/she be placed on probation. Continued offenses following a letter of warning can result in probation. Continued offenses following probation can result in the termination of Medical Staff membership.

**3. Reappointment:** The number of suspensions occurring in the review period are considered

when making a recommendation for continuation or termination of Medical Staff membership.

## Radiology Reminder

In an attempt to decrease the number of canceled adenosine studies, physicians are requested to please provide their patients with specific food and medication fasting instructions prior to the study. Copies of the detailed procedure for adenosine studies were mailed to appropriate specialties of the Medical Staff. If you did not receive a copy and wish to have one, please contact Nuclear Medicine at 776-8383.

## Research Advisory Committee - Request for Proposal

The Research Advisory Committee (RAC) meets quarterly to review clinical/epidemiological research proposals (requests for funding) submitted by the Medical and Professional Staff of TAH--LVHC. The next meeting of the RAC is January 29, 1992.

All proposals submitted by January 13, 1992 will be reviewed at the January 29

meeting. For further information and proposal guidelines, please contact James F. Reed III, Ph.D., Director of Research, at 776-8889.

## Transcranial Doppler Results Reporting

Effective December 16, 1991, Transcranial Doppler Results Reporting will be available on the Hospital Information System (HIS) at the LVHC site.

If you have any questions regarding this issue, please contact Alice E. Madden, Manager, Vascular Lab, at 776-8824.

## New Medical Director of Perfusion Named

Effective December 1, 1991, Mark N. Martz, M.D., has resigned his position as Medical Director of Perfusion. David A. Gordon, M.D., has been appointed to assume the Medical Director responsibilities for the Department of Perfusion.

### Quote of the Month

*"To win without risk is to triumph without glory."*

## New Forms for Insulin Infusion Protocol

A revised, pre-printed Physician's Order Sheet, titled "Insulin Infusion Protocol," is now available. These replace all existing "white sheet" copies and previous pre-printed order sheets, and may be ordered through the Pic & Pac System, DO-62.

Physicians please take note that this protocol is designed to be used for diabetic patients who are critically ill, NPO and receiving tube feedings or TPN. It is not intended to be used on patients in diabetic ketoacidosis (DKA).

The revised "Bedside Glucose Monitoring Flow Sheets, NSG-194" is available through the print shop. The revised form includes the insulin infusion protocol. This protocol should be yellowed or crossed out if the patient is not on an insulin drip or if the insulin drip differs from the "Insulin Infusion Protocol."

If you have any questions regarding this issue, please contact Larry N. Merkle, M.D., chief of Endocrinology, at 820-9557.



## Tumor Registry News

The Tumor Registry of the Comprehensive Community Cancer Center is not only a depository of cancer information but also serves as a source of information for reporting data to interested physicians in evaluating results of cancer treatments, epidemiology of cancer, etc. In the past, numerous physicians have utilized the expertise of the tumor registrars in helping to perform various studies.

In addition to assisting physicians with these studies, tumor registrars also perform a number of other functions. In order that tumor registrars may complete these other duties while meeting the needs of physicians who request assistance, requests for studies should now be directed to Mark A. Gittleman, M.D., Director, Comprehensive Community Cancer Center, who will delegate requests appropriately.

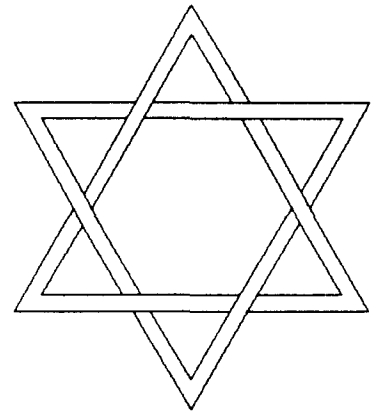
If you have any questions regarding this issue, please contact Dr. Gittleman at the Cancer Center at 778-2582.

## Lost and Found

The Security Department has assumed the responsibility for handling lost and found items. A member of Security may be reached 24 hours per day through the page operator at 776-8999.

## Blood Pressure Screenings Scheduled

The Professional Nurse Council will conduct free blood pressure screenings in the lobbies of both hospital sites on Monday, January 13, 1992. Screenings are scheduled for 3:30 to 5:30 p.m. at TAH site, and from 5:30 to 7:30 p.m. at the LVHC site.



### *Our Quality Policy*

*Our commitment is to quality in everything we do. This can only be achieved if we provide services that conform to clearly understood requirements. We are dedicated to continuous improvements in our work processes. Our approach is based on "Prevention" and the concept of "Do it right the first time."*

*Equal Opportunity Employer  
M/F/H/V*

## Employee Activities Committee Announces Changes

Effective December 1, 1991, the Employee Activities Committee switched to a new photo developing company, Guardian Photo, which necessitates a change in the procedure for developing film. The new procedure is as follows:

- \* Film to be developed should be dropped off in one of the Guardian Photo drop-off boxes located in the Snack Bar on the ground floor at TAH site, and in the Vending Area off the main lobby at LVHC site.
- \* Payment for film processing (**CHECKS ONLY -- NO CASH**) payable to Guardian Photo should be placed in the envelope along with the film.
- \* Additional instructions are located directly on the drop-off boxes.
- \* Developed film may be picked up in the Human Resources office at the appropriate site. Hours for pick up are 8:30 to 10 a.m. and 2 to 4 p.m., Monday through Friday.

Film will **no longer** be sold in Human Resources.

## Movie and Amusement Park Discount Tickets

Movie and amusement park tickets will be available in Human Resources at both sites. Hours for ticket purchases are 8:30 to 10 a.m. and 2 to 4 p.m., Monday through Friday. Payment for tickets must be made by check payable to **Employee Activities Committee**.

## Mack Trucks Implements Predetermination Review Program

Effective November 16, 1991, Mack Trucks, Inc., implemented a Predetermination Review Program for its **UAW bargaining unit** employees, retirees under the age of 65 and their dependents. This program is in addition to Mack Trucks existing Predetermination Review Program for its non-bargaining employees and retirees under age 65 which began in October 1990.

The new program, which will be administered by Cost Care, Inc. of Huntington Beach, Calif., includes:

- \* Hospital Predetermination (excluding maternity cases)
- \* Continued Hospital Stay Review
- \* Focused Surgical Review

- \* Home Health Care Management
- \* Case Management

Under the program, for non-emergency admissions, the **physician** should call Cost Care at the toll-free number (1-800-248-2339) **approximately three weeks** prior to an admission and provide information pertaining to the necessity of the hospital admission along with the anticipated length of stay. Emergency admissions should be communicated to Cost Care within 48 hours after admission. For selected surgical procedures listed below, the physician should call Cost Care approximately three weeks prior to the scheduled surgery to allow time for a second opinion, if necessary.

- \* Coronary artery bypass
- \* Bunionectomy
- \* Cataract surgery
- \* Hemorrhoidectomy
- \* Any spinal or disk surgery
- \* Joint surgery
- \* Laparotomy
- \* Hysterectomy
- \* Tonsillectomy, adenoidectomy and/or tympanotomy/myringotomy
- \* Herniorrhaphy
- \* Cholecystectomy
- \* Prostatectomy
- \* Varicose vein surgery
- \* Non-cosmetic deviated septum and/or mucous resection

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Decisions for all hospital admissions or listed surgical procedure requests are communicated by Cost Care to physicians, hospitals and patients within one business day.

**Admissions or listed surgical procedures which bypass or are not approved under the Predetermination Review process may be subject to denial or reduction in payment to you for physician services.**

If you have any questions about the Predetermination Review Program, call Cost Care at 1-800-248-2339.

## Congratulations!

**Daniel D. Goldfarb, M.D.**, psychiatrist, was recently informed by the American Board of Psychiatry and Neurology that he successfully completed the examination for certification in the medical subspecialty of Psychiatry with Added Qualification in Geriatric Psychiatry.

**Leonard M. Golub, M.D.**, neonatologist, was recently informed by the American Board of Pediatrics that he successfully completed the Certifying Examination in Neonatal-Perinatal Medicine.

**Mark H. Grim, D.M.D.**, oral surgeon, and his wife, Tami, welcomed their first child on

October 22, 1991. Sean Thomas Grim weighed 5 lbs., 14 oz., and was 17 3/4 in. at birth.

**Edward F. Guarino, M.D.**, plastic surgeon, was recently informed that he has successfully completed the requirements for certification and has become a Diplomate of the American Board of Plastic Surgery.

**Robert X. Murphy, Jr., M.D.**, plastic surgeon, was also informed by the American Board of Plastic Surgery that he has successfully completed the requirements for certification and has become a Diplomate of the Board.

**Glen L. Oliver, M.D.**, ophthalmologist, recently attended the Annual Meeting of the Eye Research Institute (ERI), Boston, Mass., where he was elected to the Board of the Eye Research Institute for a three-year term. The ERI has now become affiliated with Harvard Medical School which makes it the largest eye institute in the world.

## Publications, Papers and Presentations

**Herbert L. Hyman, M.D.**, gastroenterologist and senior consultant in gastroenterology, will serve as Program Director for a meeting of the Divisions of Internal Medicine/Family Practice at Richmond Memorial Hospital, Richmond, Va., on December 17. Dr. Hyman will

present "*Issues in the Treatment of Irritable Bowel Syndrome.*"

**Peter A. Keblish, M.D.**, chief of Orthopedic Surgery, was a guest speaker at the **Issues in Orthopedic Implant Technology** meeting held in Marco Island, Fla., early last month. His topic was "*Patella Retention vs. Re-Surfacing.*" Dr. Keblish was also a participant in the **Current Controversies in Total Knee Arthroplasty** symposium held in Toronto, Ontario. He spoke on "*Valgus Knee Corrections from Lateral Approach*" and "*Long-term Survivorship of a Mobile Bearing Knee System.*"

**James G. McHugh, M.D.**, vice chairman of the Department of Emergency Medicine and Medical Director of the Lehigh Valley Poison Center at TAH site, recently presented a lecture at the Poison Center's Annual Toxicology symposium. His lecture focused on the toxicity of common poisonous plants and the recommended treatment of patients exposed to these specific plants.

Additionally, **Frank G. Finch, M.D.**, Emergency Department physician at TAH site and Associate Director of Lehigh Valley Poison Center, also lectured at the Poison Center's symposium. Included in his topic of "*Medical Management of the Poisoned Patient*" were several case reports which illustrated the most frequently encountered toxic agents.



## Upcoming Seminars, Conferences, and Meetings

### Physician Seminars - New Visit Codes Training

Pennsylvania Blue Shield, in cooperation with the Pennsylvania Medical Society (PMS), has scheduled seminars to discuss with physicians reporting of the new visit codes. This aspect of Physician Payment Reform will require greater physician involvement in coding decisions.

Seminars have been scheduled on December 16 in Harrisburg, and on December 18 in Philadelphia and Pittsburgh.

However, through the efforts of Regina Fina and Kathy Stolz from the office of Tamar D. Earnest, M.D., general surgeon, and Linda Lapos, M.D., colon and rectal surgeon, meetings have been scheduled for Tuesday, December 17, from 1 to 2 p.m., and from 3 to 5 p.m. in the Auditorium at the LVHC site.

Physicians or their office managers are strongly encouraged to attend one of these sessions in order to understand how to use the new coding system. Registration for the meetings held at the LVHC site is required.

Beginning in January, meetings for physicians and their office staff have been scheduled

regarding Medicare Payment Reform. For more information, contact PMS at 1-800-228-7823.

### Medical Grand Rounds

Pharmacology in Critical Care Patients will be presented by Bart Chernow, M.D., Physician-in-Chief, Sinai Hospital, Belvidere at Greenspring, Baltimore, Md., on Tuesday, December 17, beginning at noon, in the LVHC Auditorium.

For more information, contact the Department of Medicine at 776-8200.

### Primary Care Seminars

What's New In Dermatology will be presented by Alan H. Schragger, M.D., dermatologist and senior consultant, on Wednesday, December 18, from 10 a.m. to noon, in the Auditorium at TAH site.

Management of Hyperlipidemia will be presented by Larry N. Merkle, M.D., chief of endocrinology, on Wednesday, January 8, 1992, from 10 a.m. to noon, in the Auditorium at the LVHC site.

Urinary Incontinence will be presented by Edward M. Mullin, Jr., M.D., urologist, on Wednesday, January 15, from 10 a.m. to noon, in the Auditorium at TAH site.

For more information, contact the Department of Medicine at 776-8200.

## Physician Practice Opportunities

\* Slots are currently available for the Brown Bag suite at Kutztown Professional Center.

\* Office Space Available - Share large medical office near LVHC. Fully furnished and staffed. Multiple line phone system. Computerized billing available.

For more information, contact John W. Hart, Vice President, at 776-8968.

\* For Sale - Medical-Professional Office Building on Cedar Crest Boulevard, just minutes from both The Allentown Hospital and Lehigh Valley Hospital Center sites. Plenty of parking. Ideal for physician.

\* 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.

\* Springhouse Professional Center, 1575 Pond Road. Lease or sale of space. 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.

\* Office space available -- for sale or sublease. Medical-professional office building on South Cedar Crest Boulevard, just minutes from both The Allentown Hospital and Lehigh Valley Hospital Center sites. 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 more information, contact Joe Pilla, POPS Representative, at 778-9647.

## 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

**Jeffrey L. Gevirtz, MD**  
(Valley Urology Group)  
1251 S. Cedar Crest Blvd.  
Suite 305-D  
Allentown, PA 18103  
(215) 432-7760  
Department of Surgery  
Division of Urology  
Provisional Active

#### Change of Address and Telephone Number

Division of Geriatrics  
(Francis A. Salerno, MD)  
1243 S. Cedar Crest Blvd.  
Suite 1500  
Allentown, PA 18103  
(215) 778-9890

#### Change of Practice

Mark D. Rader, MD  
(Bethlehem Obstetric Associates, Ltd.)  
701 Ostrum Street  
Suite 203  
Bethlehem, PA 18015  
(215) 691-3603

#### Change of Status

**David J. Barillo, MD**  
Department of Surgery  
Division of Plastic Surgery  
From Active/LOA to Active

**Terry J. Robbins, MD**  
Department of Medicine  
Division of Dermatology  
From Courtesy to Referring

**Rey Velasco, MD**  
Department of Pediatrics  
Division of General Pediatrics  
From Active to LOA

**John M. Wapner, MD**  
Department of Surgery  
Division of Ophthalmology  
From Active to Courtesy

#### Additional Privileges

**George A. Arangio, MD**  
Department of Surgery  
Division of Orthopedic Surgery  
CO<sub>2</sub> and YAG Laser Privileges

**Michael F. Busch, MD**  
Department of Surgery  
Division of Orthopedic Surgery  
CO<sub>2</sub> and YAG Laser Privileges

#### Resignation

**Jay S. Cohen, DMD**  
Department of Dentistry  
Division of Endodontics

#### Allied Health Professionals

#### Appointments

**Alicia A. Bosha**  
Physician Extender  
Technical Category  
Anesthesia Technical Assistant  
(Allentown Anesthesia Associates)

**Karen A. Furey, CRNA**  
Physician Extender  
Professional - CRNA  
(TAH Anesthesiology - Ramon J. Deeb, MD)

**David R. Hanssen**  
Physician Extender  
Technical Category  
Anesthesia Technical Assistant  
(Allentown Anesthesia Associates)

**Catherine A. Mulutzie, RN**  
Physician Extender  
Professional - RN  
(John J. Cassel, MD)

**Carol A. Priest**  
Physician Extender  
Technical Category  
Anesthesia Technical Assistant  
(Allentown Anesthesia Associates)

#### Resignation

**Phyllis M. Carney-Marzen, RN**  
Physician Extender  
Professional - RN  
(Kenneth J. Toff, DO)

*Happy Holidays from the staff of Medical Staff Services and Physician Office Practice Services!*

*Medical Staff Progress Notes is published monthly to inform TAH-LVHC Medical Staff and employees of important issues concerning the Medical Staff. Articles should be submitted to Janet M. Laudenslager, Coordinator, Physician Office Practice Services, TAH site, by the first of each month. If you have any questions regarding the newsletter, please call Ms. Laudenslager at 778-2780.*



# P & T HIGHLIGHTS

The Allentown Hospital - Lehigh Valley Hospital Center  
PHARMACY DEPARTMENT

James Giardina, R.Ph., M.S. - Editor

The following actions were taken at the November 11, 1991  
Pharmacy and Therapeutics Committee meeting.

## DURATION, RENEWAL AND MODE OF DELIVERY FOR RESPIRATORY MEDS

The Committee approved a policy which establishes medication standards and Metered Dose Inhaler (MDI) Standards as a protocol. Patients who meet protocol standards will be continued on treatments as long as standards are met - Renewal is not required so long as the order is written "per protocol." Patients who do not meet standards will be continued up to 72 hours - No renewal reminder will be given. Patients who fit MDI standards and who are ordered on aerosolized medications will be converted to the equivalent MDI, and instructed in its use (order change will be written by Respiratory Therapist).

## FORMULARY ADDITIONS REQUESTS

**Beractant (Survanta, Ross)** is a modified natural surfactant preparation derived from bovine lung tissue. Beractant is indicated in the Prevention and Treatment of Respiratory Distress Syndrome (RDS) in premature infants. Beractant is administered endotracheally as soon as possible after birth or after the diagnosis of RDS. The dose of 4ml/Kg may be repeated after six hours if indicated, up to a maximum of four doses total. Systemic absorption which, is possible in RDS patients, has not been demonstrated. Beractant is metabolized in the lungs. Beractant costs \$594.00 per 8ml vial. A concurrent usage evaluation will be instituted for this agent.

## RIBAVIRIN USAGE EVALUATION

The results of the Ribavirin usage evaluation for the 90/91 Respiratory Syncytial Virus season were presented. 11 of 12 treated patients met criteria. This is the highest compliance rate in the 3 years of study. Treatment days ranged from 3 to 5 days with a mean of 3.75 days. Results and Conclusions will be sent to Pediatrics for comment and follow-up.

## P & T RESPONSIBILITY IN ADR'S

National statistics show that 10-20% of the population experience Adverse Drug Reactions (ADR's) and 3-5% are admitted to hospitals for treatment of these reactions. Although some reactions are unpreventable, many are avoidable. While the above statistics should be sobering, the important point is that patients suffer from adverse reactions. The committee discussed its responsibility in monitoring ADR's. The primary reason for monitoring ADR's is to improve quality of care through reaction pattern or trend identification. This information is then used to make formulary decisions, to recommend suggested administration guidelines, to further reduce the emergence of ADR's, and to notify the FDA when novel, high frequency, or severe reactions occur.

BLANKET POST OP RENEWAL ORDERS

The Committee discussed how these orders should be handled, given that they are often unclear, putting patients at risk and causing regulators to frown.

The Committee decided that orders to "Resume, renew or continue pre-op meds" would not affect the current stop date calculated from the most recent specific order. For these orders, a specific renewal is required.

Orders which specify at least the drug will be treated as renewals and a new stop date calculated.

Again, blanket renewal orders are often unclear. All Prescribers are encouraged to review the specific drugs which should be continued as well as other therapies, treatments and dietary orders.

STOP ORDER POLICY CHANGES

The Committee accepted a proposal to calculate stop dates (for orders which don't specify numbers of doses/days) from the next 1400 hour time encountered. By way of example, an antibiotic ordered at 1500 on Monday would have its stop date calculated beginning at 1400 on Tuesday. This change will put consistency into the two independent systems (Pharmacy and Nursing) which are currently used, and will decrease phone calls for missing doses when the stop dates don't agree.

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