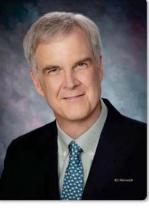
#### Volume 26, Number 10 October 2014

# Progress Notes

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

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# FROM THE PRESIDENT



# Motivation and Incentives — Part 2

ontinuing our discussion from last month about motivation and incentives . . . Complex work like healthcare is dependent on teamwork, healthy work relationships and internal motivators that include: a sense of purpose, the empowerment to solve problems at a local level and opportunities to master challenges and grow professionally over time. A recent article in the Journal of Health Care Management<sup>1</sup> shows that physicians' motivations are more strongly associated with their "work" and their "team" than they are with the larger organization, except where there is significant overlap of "professional cultural" values. This makes sense to me - we are closer to our work and our "work family" since that's where we spend the majority of our time. It is primarily through shared mission and values that we are connected to the larger enterprise. (If you haven't done so recently, take a look at LVHN's Mission and Values statements on the back of your ID badge.)

Effective incentives balance external economic realities with our "professional cultural" values and internal motivators. Incentives that address only "extrinsic" motivators (i.e., "carrots and sticks") "can lead to negative behavior such as disturbed teamwork and 'gaming the system'."2 Many among us could validate the potential inequities of 100% fee-forservice (which can incentivize volume over quality), "cherry picking" of patients who have better insurance coverage or insurance payer withholds that are not tied to evidence-based quality criteria. The practice of medicine lives within a business framework - and it is also a profession. We know that sometimes patient-centered care requires compassion and extra time that isn't always reimbursed proportionately.



So, what incentives do you have built into your practice "culture?" Here are a few that colleagues have suggested: 1) "Catch 'em doing something good" – recognizing front line staff with a thank you note for courteous service or for helping a patient or colleague in need; 2) Recognition lunches – particularly effective while implementing a new workflow (remember, Epic is coming); 3) Opportunities to socialize as a team – maybe a mini-golf or bowling outing at the end of a day or a "bring a dish" picnic at the home of a team member. Note that none of these "incentives" involve large sums of cash, but they provide opportunities for teams to bond, to share and process their experiences, to celebrate or to "bounce back" after a long, hard stretch of work.

For clinicians in groups, here are some other ideas from the "email bag": 1) shared funding of regular meetings (with food) to process clinical reports and patients' suggestions – time to discuss what's going well and what needs improving; 2) rotating "clinical update" sessions where one member of the team briefs others on new clinical developments or ideas for the practice. Some groups invite their newer colleagues to share fresh ideas or to become part of a clinical or quality workgroup (appealing to their needs for purpose, challenge and professional recognition).

Compensation plans can incentivize "group behavior," as long as the process is inclusive, transparent and deemed fair by all members. Clinicians whose work is similar can foster teamwork by sharing portions of their salaries equally (or on an FTE basis). This provides some "give and take" while appealing to their shared (internalized) values of professionalism and accountability to one another. Other groups have accommodated differences in tasks and work capacity (yes, some of us slow down a bit as we age or choose to work part-time while raising our families) by using a "work equivalency" model. Work equivalents have a salary dollar value and are weighted by intensity. For instance, working overnight is weighted more heavily than daytime; a half day of reading studies is weighted less than a half-day office session. Each team member agrees to work a certain number of "equivalents" per month for a given salary level. This builds in both schedule and career flexibility – and helps keep individuals excited about coming to work and contributing. One other doctor wrote that each member of his group has developed a special area of interest while maintaining their shared "core" skills. This has allowed them to have several "local experts" and to learn from each other. They find it energizing.

Incentives are all around us. "Buy one, get one free," "Enter for your chance to win," "Donate now and receive a free...." Incentives are designed to influence our motivations and behavior. As it turns out, most health professionals are more effectively motivated by meaningful work, solving problems with their teams at a local level, ongoing achievement and the professional recognition of their peers – than they are by money or organizational "carrots and sticks." Yes, we need to work hard every day to support our salaries...and we need to listen to those inside professional yearnings that call us to focus on our patients and those with whom we work. They are the "heart" of what we do – and can motivate us to get out of bed each day looking forward to the challenge. I hope you will experiment with some of the incentives described above and get to see the impact they can have on your practice's quality of life over time. Consider starting a discussion with your colleagues or with those clinicians who seem to be really happy in their work.

Have a good month and remember – your stories and feedback are always welcomed!

Bob Motley no

Robert J. Motley, MD Medical Staff President

 Janus K, "The Effect of Professional Culture on Internal Motivation among Physicians in an Academic Medical Center," *Journal of Healthcare Management* 59:4 (July/Aug 2014), 287-306.
 <sup>2</sup> Ibid

# GYNECOLOGIST TO SERVE AS MEDICAL STAFF PRESIDENT-ELECT



Joseph E. Patruno, MD, a member of the Division of Gynecology/Primary Care OBGYN, was recently nominated and elected to serve as Medical Staff President-elect.

Since joining the Medical Staff in September, 2005, Dr. Patruno has served on numerous Medical Staff and departmental committees including Medical Executive Committee, Graduate Medical Education Committee, USF-LVHN Merger Workgroup, as well as the Research Committee and Medical Education Committee of the Department of Obstetrics and Gynecology. He also serves as Chair of the Faculty Education Committee of the Department of Obstetrics and Gynecology.

Dr. Patruno graduated from Dickinson College where he earned a Bachelor of Arts degree in Psychology and Biology. He then completed a two-year Pre-medical Sciences Program at Bryn Mawr College. He received his medical degree from Brown University School of Medicine. Dr. Patruno completed his internship and Obstetrics and Gynecology Residency at Pennsylvania State University – Milton S. Hershey Medical Center. Dr. Patruno is board certified in Obstetrics and Gynecology and is a Fellow of the American Board of Obstetrics and Gynecology (ABOG). He was recently invited to serve as an oral Board Examiner for ABOG. Dr. Patruno is an Associate Clinical Professor on the faculty of the University of South Florida, Morsani School of Medicine. In addition, he is a member of the Association of Professors of Gynecology and Obstetrics, the American Association of Gynecologic Laparoscopists, and the International Pelvic Pain Society.

A member of Lehigh Valley Physician Group, Dr. Patruno practices at the Center for Women's Medicine at LVH-17<sup>th</sup> Street. He also serves as Program Director of the Obstetrics and Gynecology Residency Program.

Dr. Patruno and his wife, Megan, live in Allentown with their three children – Nicholas, Caroline and Daniel.

Looking forward to the next six years as a member of Troika, Dr. Patruno has the following thoughts: "This is a dynamic time for both our network and for healthcare in this country. I look forward to playing a part in the change and specifically watching the network's missions – clinical excellence, cost-effective community focused healthcare, and education – become stronger and more integrated. I am honored to be part of Lehigh Valley Health Network and am humbled in being elected to serve as the Medical Staff President-Elect for this great network."

# MEDICAL STAFF DUES DEADLINE — OCTOBER 15

On October 1, final notices were emailed 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 payment **MUST BE** <u>RECEIVED</u> in the Medical Staff Services office **NO LATER THAN 5 P.M.**, on **OCTOBER 15**.

New this year, Medical Staff dues may be paid using a credit card. Click on the following link which will open the Medical Staff Dues payment screen – <u>LVHN Medical Staff Dues</u>. If you wish to pay by check, please forward your check payable to: **LVHN Medical Staff** and mail 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, please contact Janet Seifert at 610-402-8590 or via email at janet.seifert@lvhn.org.

# **MEDICAL STAFF SERVICES LAUNCHES NEW APP**



Medical Staff Services (MSS) has launched a new on-line staff directory. The internet-based application is targeted at LVHN clinical staff and serves to retrieve Medical and Allied Health staff contact information quickly and accurately via a real-time data feed from the MSS credentialing database. Users can search by name or

practice of any member of the LVHN Medical or Allied Health staff. Results feature cell, pager and office phone numbers and email addresses, as applicable.

The application can be accessed from anywhere there is an available internet connection and requires no downloads. It features a responsive design to serve a wide array of screen sizes, with tablets and Smartphones being the main focus. To get started, visit <u>http://directory.lvhn.org</u> from anywhere internet connectivity is available and log in by using your LVHN user ID (**SUI**) as your username and the default password of **staff2013**. A personalized password can be configured once you are logged in.

If you have any questions or difficulties, please contact Matt Kuzmission in Medical Staff Services at 610-402-1291 or via email at matthew.kuzmission@lvhn.org.

# HAVE YOU RENEWED YOUR LICENSE?

### **DO Licenses**

If you are an osteopathic physician, your Pennsylvania license will expire on **October 31, 2014**. If you have not already done so, please remember to renew your license. If you have not yet received your renewal notice, you may want to contact the State Board of Osteopathic Medicine at 717-783-4858 or click on the following link to print out a license renewal application -

State Board of Osteopathic Medicine

### **MD Licenses**

Pennsylvania MD licenses will expire on **December 31, 2014**. Renewal applications are usually mailed 60 to 90 days in advance of the expiration date to the last address of record provided by the licensee. If your address has changed since your last license renewal and if you have not yet received your renewal application, you may want to notify the Pennsylvania Department of State of your new address. You may also renew your license on-line - <u>https://www.mylicense.state.pa.us/</u>Login.aspx

Medical Staff Services no longer requires a copy of your license renewal as verifications of your updated license are completed on-line.

If you have any questions, please contact Medical Staff Services at 610-402-8900.

# **CMIO UPDATE**

# EHMR / OnBase Upgrade – No Changes for Users

The EHMR application and OnBase will be upgraded during the weekend of **October 25, 2014**. This upgrade is required for compatibility with Epic, in preparation for the 2015 Epic ambulatory go-live. The bulk of changes in this upgrade are behind the scenes to ensure Epic compatibility, and there are no notable differences in how you will use EHMR.

However, the upgrade itself will require a few hours of downtime during the weekend of October 25. Announcements will be forthcoming closer to the go-live date with actual dates and times of the expected downtime. Your patience and cooperation is appreciated during this transition.

If you have any questions regarding this article, please contact Don Levick, MD, MBA, Chief Medical Information Officer, through email at donald.levick@lvhn.org.

# ATTENTION LVHN EMPLOYED PRACTITIONERS— SELECT YOUR BENEFITS FOR 2015

# **Open Enrollment Set for October 10-31**

If you are an LVHN employed practitioner and if you want Choice Plus medical, dental, vision or flexible spending account (FSA) benefits coverage in 2015, you must enroll during Open Enrollment in Lawson. Open Enrollment will be held October 10-31, 2014.

By now, you should have received an Open Enrollment packet at your home address. (If you did not receive one, please call Human Resources at 484-884-3199.) This packet outlines important information related to your 2015 benefits along with other key plan changes. Please review the information carefully before you enroll in benefits.

### **Education Meetings**

To learn more about your 2015 benefits, attend an Open Enrollment education meeting. They will be live in the LVH– Cedar Crest Auditorium and broadcast to LVH-Muhlenberg, LVH–17<sup>th</sup> Street, LVHN–Mack Blvd. and Health Network Laboratories (HNL). Videos of the meeting will be posted on Mission Central and the Human Resources intranet site.

- ▶ Wednesday, October 8 2 p.m.
- ▶ Thursday, October 9 7:30 a.m.

### **Enrollment Help Sessions**

Attend a drop-in help session for assistance with your benefit enrollment in Lawson.

### LVH-Cedar Crest Computer Lab 1

- ▶ Tuesday, October 14 Noon-4 p.m.
- ▶ Thursday, October 16 7-11 a.m.
- > Thursday, October 23 3-7 p.m.
- ▶ Tuesday, October 28 7-11 a.m.

### LVH-M I/S Training Room

- Wednesday, October 22 Noon-4 p.m.
- Wednesday, October 29 7-11 a.m.

### LVH-17th Street Auditorium

- Monday, October 13 Noon-4 p.m.
- > Tuesday, October 21 7 11 a.m.

### LVHN-Mack LVPG Training Room (second floor)

- Friday, October 24 7 11 a.m.
- ▶ Thursday, October 30 Noon-4 p.m.

### Health Network Laboratories, 2024 Lehigh Street, Classroom 1

- ▶ Wednesday, October 15 3-5 p.m.
- ▶ Tuesday, October 21 6:30-8:30 a.m.
- ▶ Tuesday, October 28 6-8 p.m.
- > Thursday, October 30 10 a.m.-2 p.m.

If you have any questions regarding your benefits or open enrollment, please contact Human Resources at 484-884-3199.

# **INFLUENZA VACCINATION UPDATE**



No matter your role in our health network, we all share the same mission – to heal, comfort and care. To do your job to the best of your ability, you first have to take care of yourself. As flu season approaches, one of the

best ways you can help our patients avoid influenza infection is to get a flu shot.

As was the policy last year, all colleagues who have routine or intermittent 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. Those approved for a permanent exemption in prior years do NOT need to request an exemption again this year. 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.

There are several places you can get a free flu shot:

- Employee Health Services locations during walk-in hours
- Vaccination clinics (see article on Page 7)
- On units and in practices that participate in our peer vaccination program
- LVPG membership meetings

For your information, the Influenza Immunization policy may be found in its entirety on the intranet. From the LVHN homepage, select **Departments – Non-Clinical – Human Resources – Policies** and click on "Influenza Vaccine Policy."

Do your part – get a flu shot and help create a safer health network, a more confident workforce and a healthier community. Thank you for your commitment to our colleagues, patients and community, and for helping to make our mission possible.

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

Monday – 7-8 a.m.; 1:30-3:30 p.m. Tuesday – 1-3 p.m. Wednesday – 7:30-8:30 a.m. Thursday – 1:30-3:30 p.m. Friday – 7-8 a.m.

### Lehigh Valley Hospital-Muhlenberg

Monday – 1:30-3:30 p.m. Tuesday – 7:30-10 a.m. Wednesday – 2-3:30 p.m. Thursday – 7-10 a.m. Friday – 8-10 a.m.

# **KNOW YOUR NUMBERS CAMPAIGN**

# **Screenings Help Drive Better Health**



This fall, Lehigh Valley Health Network will launch a voluntary biometric screening program as part of its "Better Health" initiatives aimed at educating colleagues of

their risk for diseases and certain medical conditions. The Know Your Numbers campaign coincides with LVHN's flu vaccination clinics and includes confidential blood pressure (BP) and body mass index (BMI) screenings. Colleagues will also receive educational materials to help them take action to make healthy choices and lifestyle changes. All colleagues are encouraged to get screened at one of the following three ways: at LVHN influenza vaccination clinics; at Employee Health Services during walk-in hours (see Page 6); or through their health care provider. A goal of 70 percent participation is tied to the network's Shared Success Plan (SSP).

As a health care provider to LVHN colleagues, you may be asked to complete a Healthcare Provider Biometric Screening Form. Patient weight, height and BP taken within the past six months will be accepted. Colleagues are responsible for returning the completed form, signed by their provider, to Employee Health Services.

# Flu Vaccination Clinics and Biometric Screenings

#### Lehigh Valley Hospital-Cedar Crest – Kasych Corridor

October 20 – 6:30 a.m. to 6:30 p.m. October 29 – 6:30 a.m. to 6:30 p.m. November 1 – 6-11 a.m. November 13 – 6:30 a.m. to 6:30 p.m.

#### Lehigh Valley Hospital- Muhlenberg – ECC Corridor

October 23 – 6:30 a.m. to 6:30 p.m. October 30 – 6:30 a.m. to 6:30 p.m. November 8 – 6-11 a.m. November 12 – 6:30 a.m. to 6:30 p.m.

Lehigh Valley Hospital-17<sup>th</sup> Street – Center for Healthy Aging October 22 – 6:30 a.m. to 4 p.m.

October 28 - 6:30 a.m. to 4 p.m. November 10 - 6:30 a.m. to 4 p.m. LVHN-Mack Boulevard - Auditorium October 24 – 7:30 a.m. to 4 p.m. October 27 – 7:30 a.m. to 4 p.m. November 14 – 7:30 a.m. to 4 p.m.

LVHN-One City Center – 7<sup>th</sup> Floor, Central Room 1 November 5 – 8 a.m. to 1 p.m.

#### HNL-2024 Lehigh Street

November 3 - 11 a.m. to 5 p.m.

# LVH JOINS ELITE GROUP OF STROKE CARE PROVIDERS IN U.S.



In mid-September, Lehigh Valley Hospital's (LVH) Comprehensive Stroke Center was re-certified as a Comprehensive Stroke Center, joining an elite group of healthcare providers focused on highly-specialized stroke care.

In November, 2012, LVH was the first hospital in Pennsylvania to receive the Gold Seal and the Heart-Check Mark, signifying the highest standard of care for stroke patients according to comprehensive stroke certification guidelines approved by The Joint Commission in collaboration with the American Heart Association/American Stroke Association. This certification recognizes the significant resources in staff and advanced training that comprehensive stroke centers must have to treat complex stroke patients.

Lehigh Valley Hospital has more than 25 percent of patients being transferred in from other health facilities because of its advanced care capabilities.

On August 20, The Joint Commission reviewers completed a two-day recertification survey with no requirements for improvement.

"This is a real testament to the work we've been doing here," says neurologist Yevgeniy Isayev, MD, director of the Lehigh Valley Hospital Stroke Center. "It's a true feeling of accomplishment when The Joint Commission presents a survey with no improvement recommendations. We're humbled by the kind words of the reviewers and committed to continue this hard work to benefit our community."

LVH had been certified as a Primary Stroke Center since 2004. Lehigh Valley Hospital-Muhlenberg has been certified as a Primary Stroke Center since 2006.

# American Heart Association American Stroke Association CERTIFICATION

# Meets standards for Comprehensive Stroke Center

To attain comprehensive stroke center status, LVH had to meet the following additional criteria:

- Dedicated neuro-intensive care unit beds for complex stroke patients
- > 24/7 advanced neurological imaging capabilities
- Annual volume requirements for:
  - Patients with a diagnosis of subarachnoid (referring to the location within the brain) hemorrhage
  - Endovascular coiling or surgical clipping procedures for treating aneurysm
  - IV tPA (a stroke therapy for adults arriving within three hours of incidence) administration to eligible patients
- Coordination of post hospital care for patients
- Use of a peer review process to evaluate and monitor the care provided to patients with ischemic stroke and subarachnoid hemorrhage
- > Participate in stroke research

According to the American Heart Association/American Stroke Association, stroke is the number four cause of death and a leading cause of adult disability in the United States. On average, someone suffers a stroke every 40 seconds; someone dies of a stroke every four minutes; and 795,000 people suffer a new or recurrent stroke each year.

For more information on the American Heart Association/ American Stroke Association's and The Joint Commission's Comprehensive Stroke Center Certification program, visit www.heart.org/myhospital.

# **PHYSICIAN DOCUMENTATION**

# **Specificity Matters**

Please be as specific as possible in your clinical documentation. Less specific diagnoses or the use of symptoms alone (i.e., chest pain) to describe the patient encounter, reason for their admission, and medical necessity may fall short of indicating to third parties the severity of your patient's illness. They may also fall short of explaining why the patient was even admitted or why so many resources were used.

### Example:

78 y.o. w/ h/o stroke with aphasia arrives from SNF with CC: SOB. O2 sat 82% RA, BP 105/70, Temp 100, HR 112, and RR 34. Breathing labored and using accessory muscles. Placed on BiPAP in ED and diagnosed with "RML Pneumonia". BC drawn and placed on three antibiotics on admission. Patient returned to SNF on Day 6.

<u>Diagnoses</u>: **RML Pneumonia**, Afib with RVR, Uncontrolled DM, Prior stroke with aphasia, hypokalemia.

→MS-DRG Assigned: 195 Simple Pneumonia w/o CC/MCC>

→Expected Length of Stay = 3.3 days & Weight (severity) = 0.7095

### TIPS:

1) "RML" or "Lobar" Pneumonia, "CAP", "HCAP" will all get coded as Simple Pneumonia.

2) Specify the causative organism(s) or specific type of pneumonia you are treating.

3) Specify any complications or comorbidities that you are evaluating or treating.

4) Refer to July 2014's *Progress Notes* article for more tips.

### Example:

Same case with more specific documentation:

1. Changed principal diagnosis from "RML pneumonia" to "probable aspiration pneumonia."

1.2 Added <u>Acute Respiratory Failure-Present on</u> <u>Admission as a comorbidity</u> = MCC

**2. MS-DRG** changed from Simple Pneumonia (DRG 195) to higher-weighted (Probable) Aspiration Pneumonia (DRG 177).

→MS-DRG Assigned: 177 Respiration Infection w MCC>>

→Expected Length of Stay = 7.1 days & Weight (severity) = 2.0483

# **Case Impact Summary**

DRG	Relative Weight	GMLOS
195 Simple Pneumonia without CC/MCC	0.7095	3.3 days
177 Respiratory Infection with MCC	2.0483	7.1 days

If you have any questions, please contact John Pettine, MD, FACP, CCDS, Director, LVHN Clinical Documentation Improvement Program, at <u>john.pettine@lvhn.org</u>.

# **ETHICS CORNER**

### Ethics Committee Contacts: Consults and Curbsides...

Often, healthcare providers are uncertain where to turn for advice or answers to ethical questions. They often do not even know if the circumstances they are faced with are actually ethical questions. In these situations, where do we turn at LVHN?

Ethics Committee Consults are the main internal resource to assist with potential ethical questions in patient care. Ethics consultations can be initiated by any hospital staff or patient/family member. An ethics consult does not need a physician order! Even if you are uncertain whether you should call a consult, call 610-402-6000 and provide contact information, patient information, location and your understanding of the issue. An administrative assistant or an Ethics scout will contact you and begin a review of the medical record. If requested, we will make every effort to keep the contact anonymous. The scout will notify a Team Leader of the situation and record review. If the contact occurs at night or on a weekend, a team leader will be notified the next business day. A Team Leader is a member of the Ethics Committee with special training in Ethics and experience in prior consults. The Team Leader will decide if there is a potential ethical issue or not. The Team Leader may decide the case is more appropriate for the OACIS team, the Legal team, or Risk Management and will provide the requester with the recommendation.

Many "ethical problems" turn out to be problems due to a lack of communication. A true ethical dilemma is a conflict between principles or between principles and outcomes. If the Team Leader thinks it is appropriate, he/she may convene a full team for the consult. Usually a team consists of at least three members – a physician and two other members – who can be drawn from a number of specialties including nursing, an allied health professional, or pastoral care. Often a number of team members have done advanced training in clinical ethics.



The team may request a healthcare team/family meeting to address the issues at hand. Ethics team recommendations will be placed in the chart after being discussed with the persons caring for the patient.

As mentioned last month, we will also be piloting a "Curbside for the Bedside" program where Ethics Committee members will be available at a table near the cafeteria and classrooms/auditorium so that anyone will have the opportunity to ask questions that may be troubling them or they are just curious about. The pilots will take place around Surgical and Medical Grand Rounds each month. In the future, we will look to expand to other times and sites if there is sufficient interest.

If you have any questions regarding Ethics, please contact Robert D. Barraco, MD, MPH, Chair, Institutional Ethics Committee, at <u>robert\_d.barraco@lvhn.org</u>.

# **ADVANCED PRACTICE CLINICIAN UPDATE**



### **Meet the APC Staff**

A member of the LVHN Allied Health Professional Staff since December, 2012, **Jessica L. Bowell, PA-C**, is this month's featured Advanced Practice Clinician.

As a physician assistant with LVPG Hospital Medicine at Cedar Crest, Jessica rotates through most floors of the hospital and completes daily rounding responsibilities on patients who are admitted. She examines each assigned patient, discusses care plan information, orders labs and tests, and completes discharges. As a member of the team, each day she works with one of the Hospitalist physicians. However, on 7K, the APC team has particular ownership over the orthopedic floor and they specialize in completing all medical consults and followup visits on the patients. There is also an APC driven effort on the Hospitalist run Observation Unit. Two APCs are assigned to the floor where they round on each patient, review test results, and expedite discharges. This unit has demonstrated a significant decrease in the length of stay of observation status patients. In the afternoons, Jessica completes admissions and new consults to the service. Also, for individual rotations of one or two weeks at a time, the APCs affiliated with LVPG Hospital Medicine at Cedar Crest medically manage patients at the Transitional Skilled Unit at LVH-17th Street.

However, Jessica's day job is only just part of her story. Jessica is a dedicated supporter of the Free Clinic at Safe Harbor in Easton, which is run by Advanced Practice Clinicians. Not only does she donate her clinical skills to the care of patients at the clinic, but she also schedules all APC and physician volunteers to ensure staffing of the clinic each night. Jessica also volunteers her time to teach first year students at DeSales University on their Friday morning rotations. Jessica is a graduate of Pennsylvania State University where she received a Bachelor of Science degree in Nutritional Sciences/Kinesiology. She then earned a Master of Science in Physician Assistant Studies at DeSales University.

In her spare time, Jessica and her fiancé, Joe, enjoy watching Penn State football games together. Recently engaged, Jessica is busy planning her wedding. The couple enjoys outdoor activities together including golfing, hiking, and bike rides. Jessica also loves to read. She is currently reading the books in the *Game of Thrones* series.

# APC Annual Dues Deadline – October 15, 2014

On October 1, final notices were emailed to Advanced Practice Clinicians who have not yet paid their annual dues. In order to avoid automatic resignation from the Allied Health Professional Staff, payment must be **RECEIVED** in the Medical Staff Services office **NO LATER THAN 5 P.M.**, on **WEDNESDAY**, **OCTOBER 15, 2014**.

New this year, Advanced Practice Clinicians' dues may be paid using a credit card. Click on the following link which will open the Advanced Practice Clinicians' Dues payment screen – **LVHN APC Dues Payment**. If you wish to pay by check, please forward your check payable to: **LVHN Advanced Practice Clinicians** and mail 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, please contact Gloribel Nieves in Medical Staff Services at 610-402-8984.

# **UPCOMING SEMINARS, CONFERENCES AND MEETINGS**

### **Medical Grand Rounds**

Medical Grand Rounds will be held on **Tuesday, October** 7, at Noon, in Kasych ECC Room 7 at LVH-Cedar Crest.

**"Imaging Tests for Lower Back Pain"** will be presented by Jeffrey Radecki, MD, Chief, Division of Physical Medicine-Rehabilitation.

For more information, contact Kathy Gaspari in the Department of Medicine at 484-862-3177.

### **Neurology Conferences**

The Division of Neurology conferences are held on Thursdays, from Noon to 1 p.m., in Lehigh Neurology's Conference Room at 1250 S. Cedar Crest Blvd., Fourth Floor, and videoconferenced to Lehigh Neurology's Bathgate Office as well as Kasych ECC Room 4. Topics to be presented in October include:

- October 2 "Headache Update" William B. Young, MD, neurologist, Thomas Jefferson University Hospital
- October 9 Stroke related topic Frank C. Zhang, MD, PhD, Division of Neurology
- October 23 ALS related topic Glenn A. Mackin, MD, Division of Neurology
- October 30 "Epilepsy Update" Michael Sperling, MD, neurologist, Thomas Jefferson University Hospital

For more information, contact Angeline Regis, Coordinator, Neurosciences, at 610-402-9008.

# **Pediatric Grand Rounds**

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

- October 7 "Complicated Pneumonia When the CPG isn't enough" – Liborio LaRussa, MD, Division of General Pediatrics
- October 14 "Lupus" Natalya Fish, MD, Pediatric Rheumatologist, Penn State Hershey
- October 21 "Transitioning Youth: Preparing for Next Steps" – Renee Turchi, MD, Drexel University College of Medicine – Note Location and Time Change – 7-9 a.m., Auditorium (combined with Family Medicine Grand Rounds)

October 28 – "Transition to Adulthood" – Nathan Blum, MD, Section Chief, Behavioral Pediatrics, Children's Hospital of Philadelphia

For more information, contact Cari Coelho in the Department of Pediatrics at 484-862-3131.

# **Surgical Grand Rounds**

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

October 7 – "Child Abuse: What Surgeons Need to Know" – Debra D. Esernio-Jenssen, MD, Division of General Pediatrics and child abuse specialist

For more information, contact Wendy Hess in the Department of Surgery at 484-862-3265.

# 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 3, 4, 8, 9

In addition, a two-day provider course will be held on November 5 and 6, from 8 a.m. to 4 p.m., at EMI.

### Pediatric Advanced Life Support (PALS)

PALS renewal classes will be held from 8 a.m. to 4 p.m., at the Emergency Medicine Institute on the following dates:

- November 14, 18
- December 1, 2

In addition, a two-day provider course will be held on November 19 and 20, from 8 a.m. to 4 p.m., at EMI.

Registration information and a list of additional classes are available on the EMI website - <u>Emergency Medicine Institute</u>

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

# THE MOVE TO EPIC — ONE INTEGRATED SYSTEM — ONE PATIENT RECORD — ONE ALIGNED NETWORK, TO ACHIEVE OUR TRIPLE AIM



### Why Epic? Why Now?

Driven by provider requests and concerns about GE's sustainability, conversations about implementing a new electronic medical record (EMR) for Lehigh Valley Health Network (LVHN) began in December, 2010.

Healthcare has been changing and so have the information system needs at Lehigh Valley Health Network. Yes, LVHN has electronic medical records (EMR) systems – more than two dozen of them. But in this case, more is not better. Frequently, these EMR systems are isolated from each other, creating 'data silos'. While you may know your patient had x-rays recently, it is possible you are not aware that he or she also had an evaluation with another in-network specialist simply because the records systems are not fully connected. In addition, LVHN's largest EMR provider has given notice that it will no longer support the current system within the next two years. The time for action is now.

### **Epic Analysis**

LVHN started with four candidates – GE, Epic, Cerner and Allscripts. Allscripts was the first system off the list because they lack the integration LVHN needs. Cerner opted out of the race which led to two systems – GE and Epic. Using KLAS, the industry leader in customer evaluations of systems, more than 400 LVHN staff and providers reviewed the vendor products from GE and Epic. After two years of research and planning, on March 6, 2013, the LVHN Board of Trustees approved the pursuit of Epic. Because all sources of care will flow through this integrated EMR, the days of hunting for patient information will end. Prescriptions, imaging studies, drug allergies, etc., will be accessible to you and your patients. The information database also will allow LVHN to better analyze trends and identify areas for improvement, further enhancing a patient's care and overall experience with LVHN.

At the heart of the change is the Epic system itself. They have perfected the art of EMR. Each part of the Epic EMR is created for and validated by the department or division it is serving. In two short years, the new EMR will reflect LVHN's needs at that moment, and provide flexibility for growth into the future. With health care constantly changing, Epic will be the single source integrated solution that better positions LVHN for future healthcare delivery and payment models.

If you have any questions regarding Epic, please email Epic@lvhn.org.

# **PAPERS, PUBLICATIONS AND PRESENTATIONS**



### Marna R. Greenberg, DO, MPH,

Department of Emergency Medicine Director of Research, was a co-author of the publication – "Diagnostic Performance

of Cardiac Troponin I for Early Rule-in and Rule-out of Acute Myocardial Infarction: Results of a Prospective Multicenter Trial" – which was published on-line on September 4, 2014 in *Clinical Biochemistry*.



"Recurrent (Stump) Appendicitis: A Case Series," an article co-authored by Rolando Rios, MD, Emergency Medicine resident; Kara Mia Villaneuva, medical student, LVHN/USF Morsani College of Medicine;

Joseph J. Stirparo, MD, Division of Trauma-Surgical Critical Care/ General Surgery; and Kathleen E. Kane, MD, Division of Emergency Medicine, was published on-line on August 27, 2014 in the *American Journal of Emergency Medicine*.

# CHANGES TO MEDICAL STAFF BYLAWS

The following revisions to the Medical Staff Bylaws received approval by the Medical Executive Committee on April 1, 2014, the General Medical Staff on June 9, 2014, and the Boards of Trustees of Lehigh Valley Hospital and Lehigh Valley Hospital-Muhlenberg on September 3, 2014.

### ARTICLE IV - CATEGORIES OF THE MEDICAL STAFF

#### SECTION G - THE HONORARY STATUS

- 1. Honorary Status individuals are not members of the Medical Staff or Allied Health Professional Staff. They may be practitioners who have retired from active Hospital practice, or who are of outstanding reputation, not necessarily residing in the community.
  - (a) Appointment to Honorary Status shall be made by recommendation of the Chief Executive Officer upon the recommendation of the President of the Medical Staff and/or the relevant Chair of the Department.

Honorary Status members may be terminated at any time at the direction of the Chief Executive Officer upon the recommendation of the President of the Medical Staff and/or the relevant Chair of the Department. Such termination shall not be subject to review under the Fair Hearing and Appellate Review Process.

The following revisions to the Medical Staff Bylaws received approval by the Medical Executive Committee on June 3, 2014, the General Medical Staff on June 9, 2014, and the Boards of Trustees of Lehigh Valley Hospital and Lehigh Valley Hospital-Muhlenberg on September 3, 2014.

#### **ARTICLE XI - OFFICERS AND COMMITTEES**

#### **SECTION B - COMMITTEES**

- 2. Designation of Committees:
  - b. Standing Committees and their reporting function are as follows:

Committee	Reports To
Medical Executive	Governing Bodies
Bylaws	MEC <sup>1</sup>
Cancer	MEC
Care Continuum Council	MEC/Performance Improvement Council
Clinical Case Review	Governing Bodies
Code Blue	MEC
Credentials	MEC
Emergency Management	MEC
Ethics	MEC
Finance	General Medical Staff
Infection Control and Prevention	MEC
Infection Control and Prevention Subcommittee	
of the Patient Safety Council	Patient Safety Council
Institutional Review	MEC
Medical Records	MEC
Network Priorities Performance & Improvement	MEC
Nominating	General Medical Staff
Nutrition Support Committee	MEC
Occurrence Analysis	MEC
Performance Improvement Council	Governing Bodies
Permanent Hearing	MEC
Practitioner Health	MEC
Technology Assessment Committee	Network Coordinating Group and Chairs/Troika Committee
Therapeutics	MEC
<sup>1</sup> Medical Executive Committee	Cutium I an and

#### 3. Purposes, Duties, and Membership:

- r. Occurrence Analysis Committee:
  - (i) <u>Purpose:</u> Identify and discuss all occurrences which may have medico legal implications and which demonstrate a developing pattern suggesting investigation.
  - (ii) <u>Duties</u>
    - A. Advise the Risk Manager concerning data gathered by the Committee.
    - B. Analyze unusual occurrences.
    - C. Analyze claims involving allegations of malpractice.
    - D. Advise the Risk Manager on the medical implications of occurrences and claims.
    - E. Make recommendations to the Medical Executive Committee concerning the functions of the Committee-
  - (iii) Membership.

A. Members of this Committee are appointed by the President of the Medical Staff and the Chief Executive Officer.

TITLE CHANGE - Vice President, Medical Staff Services to Senior Vice President, Medical Services

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

# THE RETAIL PHARMACY VIEW

# **Daily Aspirin**

According to the August 6 issue of the Annals of Oncology, taking a Daily Aspirin is the most important thing we can do to reduce cancer after stopping smoking or reducing obesity. Despite the serious side effects, the pros outweigh the cons. If everyone between the ages of 50 and 65 started taking aspirin for 10 years, there would be a nine percent reduction in cancers, strokes and heart attacks in men and seven percent in women. Dr. Leonard Lichtenfeld from the American Cancer Society noted that while the evidence clearly indicates that low-dose aspirin has been shown to reduce incidence and deaths from certain GI cancers, the authors of the article fall short of an absolute push, but give it a strong recommendation.

# Liver injury caused by herbals, dietary supplements



According to a new 10 year study

published in *Hepatology*, liver injury increased from 7 to 20%, most commonly from multivitamins, minerals, calcium and fish oils. Surprisingly while body-building supplements caused prolonged jaundice in young men, death or liver transplantation occurred more frequently among cases of injury from non-body-building supplements. The authors want to inform the public of the potential dangers of using dietary supplements since they require less stringent oversight then conventional pharmaceuticals.

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

# 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**



Olayinka M. Ajayi, MD Muhlenberg Behavioral Health *Lehigh Valley Physician Group* Banko Family Community Center 2545 Schoenersville Road Bethlehem, PA 18017-7384 Phone: 484-884-5783 Fax: 484-884-5757 Department of Psychiatry Division of Child-Adolescent Psychiatry Provisional Active



Arjumand Ali, MD Toselli, Brusko, Garcia & Garcia Surgical Associates *Lehigh Valley Physician Group* 2649 Schoenersville Road Suite 202 Bethlehem, PA 18017-7317 Phone: 610-691-8074 Fax: 610-861-9449 Department of Surgery Division of General Surgery Provisional Active



### Sumita Garg, MD Medical Imaging of Lehigh Valley, PC Lehigh Valley Hospital Cedar Crest & I-78, P.O. Box 689 Allentown, PA 18105-1556 Phone: 610-402-8088 Fax: 610-402-1023 Department of Radiology-Diagnostic Medical Imaging Division of Diagnostic Radiology Section of Neuroradiology Provisional Active



Rebecca L. Hainz, 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



#### Celeste M. Hollands, MD LVPG-Pediatric Surgery

Lehigh Valley Physician Group 1210 S. Cedar Crest Blvd. Suite 1100 Allentown, PA 18103-6241 Phone: 610-402-7999 Fax: 610-402-7995 Department of Surgery Division of Pediatric Surgical Specialties Section of Pediatric Surgery Provisional Active



Pramod K. Mambalam, MD Medical Imaging of Lehigh Valley, PC Lehigh Valley Hospital Cedar Crest & I-78, P.O. Box 689 Allentown, PA 18105-1556 Phone: 610-402-8088 Fax: 610-402-1023 Department of Radiology-Diagnostic Medical Imaging Division of Diagnostic Radiology Section of Mammography Provisional Active



#### Ronald E. Wasserman, MD

Ronald E. Wasserman, MD Lehigh Valley Health Network LVHN-One City Center P.O. Box 1806 Department of Medicine – 9<sup>th</sup> Floor Allentown, PA 18105-1806 Phone: 484-862-3171 Fax: 484-862-3175 Department of Medicine Division of Neurology Provisional Emeritus

Leadership Appointments Medical Directors of Patient Care Units, Laboratories and Programs

**Lori A. Alfonse, DO** Medical Director Breast Health Services

**Priya K. Sareen, MD** Director, Breast Imaging Breast Health Services

### **Practice/Address Changes**

**Deborah A. Bren, DO** From: LVPG Primary Care – Lehighton To: Orefield Medical Center *Lehigh Valley Physician Group* 5074 Kernsville Road Orefield, PA 18069-2320 Phone: 610-395-1993 Fax: 610-395-2516

# Department Chairs Administrative Address Changes

David B. Burmeister, DO LVPG-Emergency Medicine *Lehigh Valley Physician Group* LVHN – One City Center P.O. Box 1806 Department of Emergency Medicine – 9<sup>th</sup> Floor Allentown, PA 18105-1806 Phone: 484-862-3236 Fax: 484-862-3250 J. Nathan Hagstrom, MD LVPG-Pediatrics Lehigh Valley Physician Group LVHN – One City Center P.O. Box 1806 Department of Pediatrics – 8<sup>th</sup> Floor Allentown, PA 18105-1806 Phone: 484-862-3131 Fax: 484-862-3138

#### Thomas A. Hutchinson, MD

LVPG-Obstetrics and Gynecology Lehigh Valley Physician Group LVHN – One City Center P.O. Box 1806 Department of Obstetrics and Gynecology – 8<sup>th</sup> Floor Allentown, PA 18105-1806 Phone: 484-862-3103 Fax: 484-862-3102

#### William L. Miller, MD

LVPG-Family Medicine Lehigh Valley Physician Group LVHN – One City Center P.O. Box 1806 Department of Family Medicine – 8<sup>th</sup> Floor Allentown, PA 18105-1806 Phone: 484-862-3100 Fax: 484-862-3096

#### Michael D. Pasquale, MD

LVPG-Surgery Lehigh Valley Physician Group LVHN – One City Center P.O. Box 1806 Department of Surgery – 9<sup>th</sup> Floor Allentown, PA 18105-1806 Phone: 484-862-3261 Fax: 484-862-3276

### **Debbie Salas-Lopez, MD, MPH** LVPG-Medicine *Lehigh Valley Physician Group* LVHN – One City Center P.O. Box 1806 Department of Medicine – 9<sup>th</sup> Floor

Allentown, PA 18105-1806 Phone: 484-862-3171 Fax: 484-862-3175

### Resignations

Ann T. Holmes, DO Department of Family Medicine (Lehigh Valley Family Health Center) **Provisional Active** 

### Yasser K. Khalil, MD

Department of Medicine Division of General Internal Medicine Section of Hospital Medicine (LVPG Hospital Medicine at Cedar Crest) Active

### Joseph L. Neri, DO

Department of Medicine Division of Cardiology (The Heart Care Group, PC) Active

Juhan Paiste, MD, MBA Department of Anesthesiology Division of Cardiac Anesthesiology (Allentown Anesthesia Associates, Inc) Active

Carolyn S. Scott, MD Department of Obstetrics and Gynecology Division of Gynecology (Allentown Gynecology Associates) Active

# Allied Health Staff **New Appointments**



Timothy J. Buzzelli, CCP Perfusionist Keystone Perfusion Services, PC P.O. Box 161 Mountain Top, PA 18707-0161 Phone: 800-407-1198 Fax: 888-290-7095 Supervising Physician - Timothy S. Misselbeck, MD



### Lauren B. Hoddinott Medical Assistant American Home Medical Equipment & Services Inc. 3325 Hamilton Blvd. Allentown, PA 18103-4536 Phone: 610-841-4986 Fax: 610-841-4987 Supervising Physician - Richard J. Strobel, MD



### Jessica B. Reichard Medical Assistant American Home Medical Equipment & Services Inc. 3325 Hamilton Blvd. Allentown, PA 18103-4536 Phone: 610-841-4986 Fax: 610-841-4987 Supervising Physician - Richard J. Strobel, MD



### Robert S. Rios, CCP Perfusionist Keystone Perfusion Services, PC P.O. Box 161 Mountain Top, PA 18707-0161 Phone: 800-407-1198 Fax: 888-290-7095 Supervising Physician - Timothy S. Misselbeck, MD



# Michael A. Smith, PA-C

Physician Assistant-Certified Lehigh Valley Heart and Lung Surgeons Lehigh Valley Physician Group 1250 S. Cedar Crest Blvd. Suite 310 Allentown, PA 18103-6224 Phone: 610-402-6890 Fax: 610-402-6892 Supervising Physician - James K. Wu, MD



### Lauren E. Stull, PA-C Physician Assistant-Certified OAA Orthopaedic Specialists 250 Cetronia Road Second Floor Allentown, PA 18104-9168 Phone: 610-973-6200 Fax: 610-973-6546 Supervising Physician - Paul F. Pollice, MD



### Melissa N. Yorty, PA-C

Physician Assistant-Certified
Lehigh Valley Urogynecology and Reconstructive
Pelvic Surgery
Lehigh Valley Physician Group
1770 Bathgate Road
Suite 401
Bethlehem, PA 18017-7302
Phone: 484-884-8840 Fax: 484-884-8827
Supervising Physician – Folusho A. Tugbiyele, MD

### **Change of Supervising Physician**

**Steven P. Herzfeld, PA-C** *Physician Assistant-Certified* (Surgical Specialists of the Lehigh Valley)

From: Dale A. Dangleben, MD To: Joseph J. Stirparo, MD

### Practice Name/Address Change

From: Perfusion Care Associates, Inc. To: LVHN Perfusion Services Lehigh Valley Health Network Lehigh Valley Hospital Cedar Crest & I-78, P.O. Box 689 Allentown, PA 18105-1556 Phone: 610-402-1278 Fax: 610-402-0013 Joshua N. Barnes, CCP Joseph M. Castagna, CCP Robert M. Mimari, CCP Michael S. Nicotra, CCP Michael Quinn, CCP Alaeddin M. Taher, CCP Ryan O. Williams, CCP Helen M. Wolfe

### Name Change

From: Deirdre A. Lenahan, PA-C **To: Deirdre A. Russell, PA-C** VSAS Orthopaedics 1250 S. Cedar Crest Blvd. Suite 110 Allentown, PA 18103-6224 Phone: 610-435-1003 Fax: 610-435-3184

### Resignations

Darci L. Brown, PA-C Physician Assistant-Certified (Coordinated Health – Manny S. Iyer, MD)

#### Jason A. Dos Santos, PA-C

Physician Assistant-Certified (LVPG-Emergency Medicine – Jacob N. Erickson, MD)

### Kristan N. Faneck, PA-C

Physician Assistant-Certified (Pulmonary Associates of LVPG – Matthew M. McCambridge, MD)

#### Monica L. Waterloo, PA-C

Physician Assistant-Certified (Moselem Springs Primary Care – Joselito A. Ouano, MD)



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Jarret R. Patton, MD President-elect, Medical Staff

Matthew M. McCambridge, MD Past President, Medical Staff

John W. Hart Senior Vice President, Medical Services

Janet M. Seifert Coordinator, Communications & Special Events Managing Editor

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Access the Medical Staff Services website via the link below:

Medical Staff Services

**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 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.

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