



**February, 2000 • Volume 12, Number 2**

**In This Issue . . .**

A Message Regarding Length of Stay	Page 3
Dedication Held for Jaindl Family Pavilion	Page 4
LVH/MHC Medical Staff Reappointment	Page 4
News from Health Information Management	Page 5
Suspension Process at a Glance	Pages 5 & 6
Illegible Handwriting	Page 6
Lehigh Valley Hospice - Making Each Day Count	Page 6
MHC Construction Update	Page 7
Helwig Diabetes Center Opens Two New Locations	Page 7
Good Shepherd Specialty Hospital-Allentown	Page 8
Congratulations!	Page 8
Papers, Publications and Presentations	Page 9
Upcoming Seminars, Conferences and Meetings	Page 9
Who's New	Pages 10-12
News from CEDS	Pages 13-15



**From the  
President**

*"May we have eyes to see those who are rendered invisible and excluded, open arms and hearts to reach out and include them, healing hands to touch their lives with love, and in the process heal ourselves."*

From the vision statement of the Volunteers in Medicine Clinic - Hilton Head, South Carolina

**Colleagues:**

Recently, Ed Mullin, Medical Staff President-elect, and I visited Dr. Jack McConnell at the first Volunteers in Medicine Institute to see the first "free clinic" which was established to provide care for the working uninsured. We were very impressed by this clinic and the philosophy that is the foundation on which it is built. Dr. McConnell is a truly stimulating physician, who has provided the enthusiasm and drive that lead to the establishment of this clinic almost five years ago. The clinic is now functioning with a primarily volunteer staff to provide over 13,000 visits annually to the working uninsured in the Hilton Head, S.C. area.

The benefits of such a clinic providing care for the working uninsured include the following:

- Provides volunteer physicians with the professional satisfaction of being able to provide medical care to a group of individuals who really need care.
- Frees the local hospitals of the financial burden of caring for individuals who need care but are not covered by medical insurance.

(Continued on Page 2)

# PROGRESS NOTES

## Medical Staff

(Continued from Page 1)

- Provides much needed care for people who work, pay taxes, and need care but don't have medical insurance.
- Provides preventive care and ongoing care for patients with chronic illnesses who otherwise would probably not receive care, thus preventing the requirement for expensive hospital care in the future.
- Builds community spirit and enthusiasm for a process that benefits a significant portion of the citizens of that community.

After seeing this firsthand, I believe our medical staff, hospital, and community should seriously investigate the possibility of setting up such a voluntary "free clinic" in the Lehigh Valley to provide care for the many individuals and their families who need care, but at present are not able to access this care due to their lack of medical insurance. I would like to solicit your advice and input as we continue to investigate whether we, as a medical staff, should seriously ponder proceeding with such a project.



At our General Medical Staff meeting in December, Zelda Greene and Sue Cassium made a presentation about the IMNET system that has been implemented in the Medical Record Department. This system allows the entire patient record, including handwritten documents, to be scanned onto laser disks for future retrieval and review. In addition, the system will allow "on line" signing and completion of charts from all terminals throughout the hospital, as well as from the offices of medical staff members who have access to the LVHHN computer network. After the General Medical Staff meeting, a live presentation and teaching session was provided for interested medical staff members.

In the near future, the system will be activated so that we will be able to sign our medical records without going to the Medical Record Department. This should make it easier for us to complete our charts after patients are discharged. I would encourage members of the medical staff to go to the Medical Record Department to learn the simple process that will allow them to complete their charts "on-line." The staff in the record room is ready to help us learn how to use the system. It only takes a few minutes to learn the simple steps.



In late January, a number of physicians attended a demonstration of a computerized physician order entry system. I believe the physicians who saw this system were very impressed with the potential opportunities which such a system

can provide, both to increase the efficiency of the care which we deliver to our patients, and to reduce the errors which may occur with our present manual system. Representatives from Montefiore Hospital in the Bronx, where this system has been in operation, were in attendance to answer our questions. It is working well there, and physicians apparently feel that it improves the efficiency of their rounding on hospitalized patients. Those of us who attended this presentation feel that "computerized physician order entry" is the "wave of the future." We should seriously consider moving ahead to investigate such a system in the future. Although the hospital may not be prepared to make the financial commitment to such a system right now, I think we should devote more effort to discovering the feasibility of implementing a "computerized order entry system" for LVH/MHC.

The recent Institute of Medicine Report describes the frequency of mistakes and errors that occur in hospitals to our patients. The report documents statistics that suggest that one of the major causes of injury and death in the United States is **being hospitalized!** Complications that occur to our hospitalized patients are costly and are frequently not reimbursed by hospitalization insurance. I believe that computerized physician order entry would go a long way in helping to reduce these costly errors and misadventures.

#### **Sit, Answer and Touch!**

Remember, when you are making hospital rounds to sit at your patient's bedside, ask for their questions, answer their questions, and make physical contact with the patient.

By the time you read this article, the **physician viewing room** in the Radiology Department at Cedar Crest & I-78 will have moved from its old location to much more physician friendly quarters on the second floor of the Jaindl Family Pavilion. The new facility should make it easier and more convenient for physicians to review their patients' x-rays.

#### **EMAIL**

Once again, I'd like to encourage all members of the Medical Staff to read their email regularly or to designate a staff member to be your appointed a "surrogate" who can read and print out your email messages for you on a daily basis. If you or your staff need help in assigning a "surrogate," please call Information Services at (610) 402-8303.



As many of you are already aware, the financial picture at LVH/MHC has not been very positive over the past several months. This has occurred in spite of the fact that admissions at LVH are above budget. I know many of us find the hospital

(Continued on Page 3)

(Continued from Page 2)

to be full and very busy. How can the hospital be "losing money" when the beds are all full and we have trouble getting patients into the hospital? The answers appear to be that "length of stay" for inpatients is still too long and costs for the care we provide are too high.

The hospital administration is extremely concerned by these troubling trends. The Senior Management Council and your medical staff leadership have been involved in serious discussions to address these alarming financial results. I can assure you that these trends are serious and present major concerns for the financial viability of the LVH/MHC. These same trends have occurred nationally to other similar institutions. If unchecked, these negative financial trends will result in major changes in the appearance of hospitals and health care institutions nationwide.

Our hospital administration will be addressing these issues with members of the medical staff in the very near future. For now, I can assure you that these trends are serious and will require serious solutions. The medical staff of Lehigh Valley Hospital and Muhlenberg Hospital Center will need to be involved in this process and will need to be committed to help solve these problems. If we are to have a viable and functioning hospital to care for our patients and our community, the administration will need the support of the medical staff to make the changes that will be necessary to solve these problems.

I hope you have a good February. Winter is more than one-third over. Biking season will be here soon.



David M. Caccese, MD  
Medical Staff President

### For Your Calendar

Quarterly meetings of the LVH/MHC General Medical Staff for this year will be held on the following Mondays:

- ◆ March 13                      ◆ June 12
- ◆ September 11                ◆ December 11

All meetings will begin at 6 p.m., in the Auditorium of Lehigh Valley Hospital, Cedar Crest & I-78. All members of the Medical Staff are encouraged to attend.

## A Message Regarding Length of Stay

Colleagues:

As we attempt to put our organization in a more favorable financial position, our primary emphasis is on the length of stay (LOS) of our hospitalized patients. For the current fiscal year ending June 30, 2000, our targeted average LOS for all payers for the first six months of FY 2000 was 4.59. Our actual average LOS for the first 6 months of the current fiscal year was 4.93. This represents a shortfall of 0.34 days per admission. Our projected average LOS for the entire fiscal year 2000 was 4.52 days. If we continue at our current pace, our average LOS shortfall by the end of the current fiscal year will be 0.41 days per admission. If we multiple this by the anticipated number of admissions, this represents an excess 12,596 hospital days.

This represents \$2.4 million in unnecessary staffing and supply expenses. This shortfall will prevent us from implementing new strategic initiatives, purchasing new equipment, and starting new programs that in the past have allowed us to be on the cutting edge of medical care.

The staff of Care and Resource Management is committed to doing whatever they can to help you move your patients through the hospital in a safe and cost-effective manner. Please talk to case managers and work with them to jointly plan the discharge disposition of your patients. To achieve all of our goals, we need your help.

Thank you.

Sincerely,



Robert J. Laskowski, MD  
Chief Medical Officer



Paula Stillman, MD  
Senior Medical Director  
Care and Resource Management

The 4<sup>th</sup> Edition of the **Medical Staff Handbook** has been published and is now available in Medical Staff Services and in the Medical Staff Lounge, both on the first floor of Lehigh Valley Hospital, Cedar Crest & I-78.

## ***Dedication Held for Jaindl Family Pavilion***

Emphasizing its importance as a community asset, Pennsylvania Governor Tom Ridge joined Lehigh Valley Hospital and Health Network's (LVHHN) board of trustees in dedicating the new Fred Jaindl Family Pavilion on Thursday, January 6, 2000.

"The opening of the Jaindl Pavilion launches a new legacy of health care for the Lehigh Valley," Governor Ridge said.

The five-story, 260,000 square foot health care facility offers inpatient medical and surgical care, the Center for Mother and Baby Care, and outpatient diagnostic services.

"This is among the most advanced and patient-friendly centers of its kind," said Elliot Sussman, MD, LVHHN's President and CEO. "This next generation of care means that patients and their families who pass within these walls will receive the very best health care in our region."

Kathryn P. Taylor, LVHHN's chairperson of the board, stressed the need to invest in improving health care for the community. "This building was designed with the needs of the community in mind, reflects extensive community input and was built with community resources."

A centerpiece of the building is the Center for Mother and Baby Care, which includes labor and delivery on the third floor, and the mother-baby, neonatal intensive care unit (NICU) and pediatric intensive care unit (PICU) on the fourth floor. Labor and delivery offers 12 birthing suites, a massage tub and whirlpool, and a day room for patients to relax with visitors. Ten suites, three perinatologists and four neonatologists are also available for mothers with high-risk pregnancies and special needs.

The fourth floor offers care for mothers after delivery and a nursery for newborns. There are 27 private family rooms with bassinets for babies and sleeping chairs for dads.

For those needing specialty care after delivery, the hospital's Level III NICU is the largest in the region with the most experienced staff. The Lehigh Valley's first PICU, a result of a partnership with The Children's Hospital of Philadelphia, will be completed this spring for children who would otherwise have to travel out of town for treatment.

The Express ER on the second floor will treat everything from simple cuts to broken bones -- conditions that require attention but are not critical. The goal of this service is to treat and discharge patients in an hour or less. The second floor also houses the Center for Critical Care which is a 28-bed complex

composed of the medical, surgical and trauma neuro intensive care units, and a dedicated state-of-the-art Burn Center, the only one of its kind in the region.

The first floor Diagnostic Care Center will offer a central computerized scheduling system to coordinate pre-registration between doctor's offices.

The Heart Care Group, the area's largest group of cardiologists and cardiac surgeons, will combine two of their offices into one on the fifth floor, scheduled to open in March.

### **LVH/MHC Medical Staff Reappointment**

In compliance with the regulations of the Pennsylvania Department of Health, the Medical Staff and Hospital Bylaws, and the standards of the Joint Commission on Accreditation of Healthcare Organizations, each member of the hospital's Medical Staff must be reappointed a minimum of once every two years.

On March 2, this year's reappointment process will be put into motion when the Reappointment Packets will be mailed to over 1,000 members of the Medical Staff. Each packet will contain a five-page Application for Reappointment to the Medical Staff, a copy of the addressee's current privilege sheet, an insurance participation form, a malpractice claims report, a self-addressed return envelope, and to simplify the process, a Checklist has been included to assist in completing the information.

Although much of the information on the application is preprinted, it is of paramount importance that you review ALL the information, make changes where necessary, and complete any missing data. Before returning the application, please take a moment to review the Checklist to make sure all the information is complete and all the required documents have been attached to the application. Your prompt attention to this matter is both requested and appreciated.

If you have any questions regarding the reappointment process, please contact Karen Fox, Credentialing Coordinator, in Medical Staff Services at (610) 402-8957.

## ***News from Health Information Management***

Universal Chart Order - The Medical Record Committee was asked to review the current universal chart order. The committee sent out questionnaires to 100 physicians with a 61% response. Overall, the respondents felt that the current chart order meets their needs. However, concern was expressed that charts are not maintained in the same order on the various hospital units. Committee members from Patient Care Services assumed the responsibility of assuring that the universal chart order is followed the same on all the units.

Verbal/Telephone Orders - One of the hospitals in the area, recently surveyed by the Joint Commission on Accreditation of Healthcare Organizations, was given a Type I deficiency for verbal orders not being signed and dated within the designated times.

The Bylaws of the Common Medical Staff of Lehigh Valley Hospital and Muhlenberg Hospital Center comply with regulatory agency requirements. According to the Medical Staff Rules and Regulations:

### *Verbal Orders*

"A physician shall not give a verbal order except in an emergency situation. When a verbal order is taken in an emergency, it must be counter-signed by a practitioner within twenty-four (24) hours. If the practitioner is not the attending physician, he or she must be authorized by the attending physician and must be knowledgeable about the patient's condition."

"A member of the Medical Staff may, but is not required to, sign the order of another member of the Medical Staff or resident physician. A resident physician may sign for another resident physician on his or her same PGY level or below."

### *Telephone Orders*

"Telephone orders must be signed within twenty-four (24) hours."

"A member of the Medical Staff may, but is not required to, sign the order of another member of the Medical Staff. A resident physician may sign for another resident physician on his or her same PGY level or below."

Document Imaging Update - The Health Information Management (HIM) Department made a presentation of the document imaging historical records and electronic signature at the December General Medical Staff meeting and provided

physician demos before, during, and after the meeting. Those physicians participating in the demos were enthusiastic and eager to have the system implemented. Many physicians have been exposed to the system when performing chart reviews. A large physician group is piloting the electronic signature component prior to rollout to the entire medical staff.

Any physicians who have not been exposed to the Document Imaging System and would like to schedule a demo may call Susan Cassium, Operation Coordinator, Medical Records, at (610) 402-4451.

Document Imaging Incomplete Chart Transition Processes - Medical records for inpatient, ambulatory and observation cases are scanned into the document imaging system within 48 hours following discharge. The scanned record is designated as the "legal medical record." The paper record, after it has been imaged, is labeled "scanned medical record." Physicians are alerted to some of the changes in the paper medical record as indicated by signs posted in the HIM Department:

1. *Final Cum Lab Results* - Results after patient discharge are not filed into the paper medical record.
2. *Diagnostic Results* - Results after patient discharge are not filed into the paper medical record.
3. *Corrections to the paper Medical Record* - HIM staff should be alerted of any corrections to the medical record so that the imaged record may be updated.
4. *Additions to the paper Medical Record* - Progress notes and other forms are available for additions to the medical record. HIM staff should be alerted of any additions to the medical record so that the imaged record may be updated.

The HIM staff will assist you in obtaining any information that is not included in the medical record at the time of completion.

If you have any questions or concerns regarding these issues, please contact Zeldia Greene, Director, Health Information Management, at (610) 402-8330.

## ***Suspension Process At a Glance***

- One week prior to suspension, notification letters of incomplete/delinquent charts are mailed to the physicians' offices. Additional delinquent items not included on the list are dictations for histories and physicals, operative reports, and discharge summaries of patients discharged through Monday prior to the Wednesday suspension.
- On Monday of suspension week, records are pre-pulled and deficiencies validated.

(Continued on Page 6)

(Continued from Page 5)

- On Tuesday of suspension week, physicians' offices are notified by telephone/fax of records that will be delinquent on the following day (Wednesday).
- Any deficiencies for which the physicians' offices have been notified as becoming delinquent on Wednesday will result in suspension of admitting/surgical privileges if not completed by 3:00 p.m.
- Courtesy phone calls are made by Medical Staff Services to advise the **individual physician and all members of the group practice** that they have been placed on suspension and that if the charts are not completed by 7:00 p.m. of that day (Wednesday), all electives for the next day will be cancelled.

If you have any questions regarding this process, please contact Zelda Greene, Director, Health Information Management, at 610-402-8330.

## ***Illegible Handwriting***

At its January meeting, the Medical Executive Committee endorsed the proposed mechanism for addressing physicians whose handwriting is illegible in the medical record, which was presented by Robert J. Laskowski, MD, Chief Medical Officer.

The proposal suggests an initial three-month phase-in period for physicians to become compliant in one of the following ways: write legibly, print name after signature, or initial all orders/notes followed by the use of a rubber stamp (to be provided at no charge by administration).

Monitoring will occur via the random review of charts by the Medical Record Department. If the practitioner's name is not clearly in adherence with the policy, it will be deemed incomplete, and the physician will be notified to come to Medical Records to complete the chart. If more than three episodes of non-compliance occur, the issue will be referred to the Medical Record Committee. In addition, nurses will be encouraged to file an "Event Report" (formerly referred to as a PERTS form) if they cannot read a signature. Any resulting "sanctions" will be handled in a manner consistent with current policies on medical records.

If you are identified by the Medical Record Committee as having illegible handwriting, a rubber stamp will be ordered for you free of charge. To obtain a rubber stamp, please contact Janet M. Seifert in Physician Relations at (610) 402-8590.

## ***Lehigh Valley Hospice - Making Each Day Count***

Many people, faced with terminal illness, choose to remain at home . . . surrounded by family members and friends. Lehigh Valley Hospice provides a way for families to stay together and live as normally as possible while helping them to cherish each remaining day.

Lehigh Valley Hospice strives to treat the person, not just the illness. Hospice organizes a plan of home care through a medically supervised interdisciplinary team of professionals. Members of the Hospice care team include a medical director, nurses, home health aides, physical therapists, occupational therapists, speech therapists, social workers, counselors, pastoral care, and volunteers.

Working closely with the attending physician, the Hospice team provides the support and resources needed to help family members care for the patient at home. The family is always considered an important Hospice team member.

In general, hospice services are provided for the last six months of life. Continuity of care is emphasized and the same team members will remain on the case whenever possible. Routine visits will be arranged according to the plan of care established by the team to meet the needs of the patient and family.

Lehigh Valley Hospice is an important resource for physicians involved in the treatment of terminal patients. Services are designed to augment, not replace, the physician's role. Physicians must approve all treatments and therapies rendered to a patient.

When a patient's symptoms cannot be managed in the home, most insurance plans have an inpatient benefit allowing the Hospice patient to receive inpatient care as needed. Lehigh Valley Hospice is one of only a few hospices in Pennsylvania to operate and staff its own inpatient facility within a hospital. The eight-bed Hospice Inpatient Unit is located at Lehigh Valley Hospital, 17<sup>th</sup> & Chew. The unit consists of single rooms decorated with homelike furnishings and a family lounge. The Inpatient Hospice team provides acute symptom management, terminal care, and respite care. Visitation and resources are available for family members and loved ones 24 hours a day.

For more information about Lehigh Valley Hospice, please call (610) 402-2166.

## ***MHC Construction Update***

### **First Floor, Main Corridor**

As you may be aware, many new construction activities are underway at Muhlenberg Hospital Center. These improvements include the construction of a new Central Utility Building that will provide services for heating and air conditioning needs, a new addition that will provide centralized psychiatry services, a new medical office building, and soon to begin, a Pediatric Specialty Care Center.

On January 10, various construction activities began within the main hospital first floor corridor as part of this program. These activities are essentially minor in scope of work and will progress as to minimize the disruption of the day-to-day operations. The first construction activity will be the building of a rigid temporary construction barrier (wall tunnel) within the hallway area extending from the cafeteria to the first set of fire doors by the staff elevators as phase one. The second phase will extend from the elevators to the Doctor's Lounge.

The barrier will still provide passage to all building occupants and will be designed to provide adequate passage for items such as patient beds, walkers, wheelchairs, food trays, linen carts, etc. However, the barrier will reduce the hallway by less than one-half of its current width leaving approximately four and one-half feet of area for occupant use and passage. This restriction may hinder the passage of two larger items such as food carts, patient beds, etc., from passing one another if approaching from opposite directions.

Everyone's cooperation is requested in looking ahead and being courteous in yielding to one another in providing the right of way to ensure safe, unobstructed passage. The maximum length of each phase of the barrier system will be less than 80 feet and will have various step-in "doorways" which will also help to eliminate the need to completely back-out of a "phased" area.

The work to be performed behind this barrier system will include but not be limited to the removal and possible replacement of items such as existing cellulose ceiling panels, lighting fixtures, fire protection sub-ceiling (treated as asbestos), various abandoned mechanical and wiring systems.

Please be assured that this is a temporary situation in which each phase should only take two to three weeks to complete.

### **MHC MRI Link Closure**

On January 10, the link between the MRI Center and Muhlenberg Hospital Center was closed for approximately three months during construction of the new psychiatric

building. This also means the underground tunnel leading to the medical office building will not be passable. MRI patients will only be able to enter through a temporary door located on the Bon Ton side of the MRI Center. Security will valet park outpatient vehicles. Detailed instructions and a map will be mailed to outpatients prior to their appointments. All inpatients will be transported via ambulance. If you need to access the MRI Center, the best way is to use the canopied exit on the second floor by the Cardiac Cath Lab, go down Campus Drive, and around the MRI building to the temporary gray door.

### **Physician Parking**

Effective January 10, parking for physicians is available in the area outside the cafeteria or in the temporary stone parking lot located at the rear of the 2597 MOB.

Thank you for your cooperation during this construction period.

## ***Helwig Diabetes Center Opens Two New Locations***

The Helwig Diabetes Center is pleased to announce the opening of two new clinical sites for outpatient diabetes education. In addition to the existing locations at 17<sup>th</sup> & Chew and the Health Center at Trexlertown, educational sessions are now available at Muhlenberg Hospital Center and at the John and Dorothy Morgan Cancer Center.

Along with the expansion to multiple sites, changes have been made to include more group teaching situations in order to streamline the services and accommodate patients in a more timely fashion. However, individualized sessions will remain available for patients for whom group instruction is not appropriate.

For more information about the Helwig Diabetes Center, please contact Deborah Swavely, Director, at (610) 402-4738.

### **Routine Treadmill Stress Testing on Weekends**

Routine treadmill stress tests are now available on weekends in the Heart Station at Lehigh Valley Hospital, Cedar Crest & I-78. In addition to submitting the request in the usual manner, please provide the name of the physician to do the stress test with the assurance that the performing physician is aware of the test and will be available to arrive on time. If you have any questions, please contact Audrey Lichtenwalner, RN, Director, Clinical Services, at (610) 402-8924.

## **Good Shepherd Specialty Hospital- Allentown: READY...SET...GO!**

### **READY...**

All of the construction on 6C and 6A is completed. The medical/surgical units have been significantly upgraded with compressed air for ventilators, emergency power outlets at each bedside and 14 new cardiac monitored beds.

### **SET...**

All of the policy and procedures manuals were created, medical staff bylaws and committee structure is in place, and 100 new members of the medical staff have been appointed temporary privileges. All of the key management staff is in place and an outstanding staff of all ACLS, ICU and rehab nurses have been hired and oriented.

### **GO...**

The Specialty Hospital has been granted a license from the Department of Health as an acute medical/surgical hospital and is open for business. Our first two patients were admitted on January 20.

### **WHAT'S NEXT?**

The Specialty Hospital will seek its HCFA Certification so it can get paid. The goal is now to establish a 25-day length of stay over the next six months with an average daily census of six patients.

Stop by for a tour...

### **ANY QUESTIONS?**

The following individuals can answer your questions:

- Stephen C. Matchett, MD, GSSH-A Medical Director, at (610) 439-8856 or pager (610) 920-7225
- Jane Dorval, MD, GSSH-A Medical Staff President, at (610) 776-3340 or pager (610) 830-2793
- Joseph Pitingolo, GSSH-A Administrator, at (610) 402-8559 or pager (610) 830-4389
- Linda Dean, Administrative Consultant, at (610) 402-8963 or pager (610) 830-3110
- Nancy Hardick, GSSH-A Medical Staff Affairs, at (610) 402-8962

Effective immediately, Stephen K. Klasko, MD, has taken a leave of absence from his position as Chairperson of the Department of Obstetrics and Gynecology. It is anticipated that this leave will last approximately three months which will enable him to return to lead the department through what promises to be challenging and exciting times.

Fortunately for the department and the institution, we are blessed with a talented group of physicians and administrators. Vincent R. Lucente, MD, will serve as Acting Chairperson until Dr. Klasko's return.

During this interim period, please work with Dr. Lucente and the rest of the department to continue to enhance Lehigh Valley Hospital's role in the care of women in the Lehigh Valley through our Department of Obstetrics and Gynecology.

## **Congratulations!**

**Michael R. Goldner, DO**, Division of General Internal Medicine, was recently notified that he was elected to Fellowship in the American College of Physicians - American Society of Internal Medicine.

**Indru T. Khubchandani, MD**, Division of Colon and Rectal Surgery, was honored as an Honorary Member of the Association of Colon and Rectal Surgeons of India at the annual meeting of the Society held on December 29, in Madurai, India.

**Gary G. Nicholas, MD**, Division of Vascular Surgery/Trauma-Surgical Critical Care and Program Director of the General Surgery Resident at Lehigh Valley Hospital, recently passed the Surgical Critical Care recertification examination offered by the American Board of Surgery.



## **Papers, Publications and Presentations**

**John G. Pearce, MD**, Chief, Section of Mammography, and Director of Breast Imaging at Breast Health Services, has been invited by the American Board of Diagnostic Radiology to be an examiner for the year 2000 Radiology Specialty Boards to be held in May in Louisville, Kentucky. Dr. Pearce is a Professor of Clinical Radiology at Pennsylvania State University.

**Howard S. Selden, DDS**, Division of Endodontics, authored a paper, "Periradicular Scars: A Sometimes Diagnostic Conundrum," which was published in the December issue of the *Journal of Endodontics*.

## **Upcoming Seminars, Conferences and Meetings**

### **Medical Grand Rounds**

Medical Grand Rounds are held every Tuesday beginning at noon in the auditorium of Lehigh Valley Hospital, Cedar Crest & I-78, and via videoconference in the First Floor Conference Room of Muhlenberg Hospital Center, and in the Video Teleconference Room (formerly the Medical Staff Lounge) at 17<sup>th</sup> & Chew.

Topics to be discussed in February will include:

- February 1 - Safe Sex: A Cardiology Viewpoint
- February 8 - Preventing Cardiovascular Disease in Diabetes
- February 15 - Special Considerations in the Assessment and Management of Heart Disease in Women
- February 22 - Breast Cancer Prevention
- February 29 - Update in Irritable Bowel Syndrome

For more information, please contact Diane Biernacki in the Department of Medicine at (610) 402-5200.

### **Department of Pediatrics Conference**

"Office Diagnosis of Failure to Thrive" will be presented by Edisio Semeao, MD, Division of Gastroenterology and Nutrition, Children's Hospital of Philadelphia, on Tuesday, February 29, beginning at 8 a.m., in the auditorium of Lehigh Valley Hospital, Cedar Crest & I-78.

For more information, please contact Kelli Ripperger in the Department of Pediatrics at (610) 402-2540.

## **Trends in the Treatment of Peripheral Vascular Disease**

"Trends in the Treatment of Peripheral Vascular Disease," a symposium sponsored by the Circulatory Center, will be held on Saturday, February 5, 2000, from 7:30 a.m. to 12:15 p.m., in the Auditorium of Lehigh Valley Hospital at Cedar Crest & I-78.

Cardiologists, cardiothoracic surgeons, radiologists, and vascular surgeons will benefit from this program.

Controversies in peripheral angioplasty from the perspectives of a cardiologist, vascular surgeon, and interventional radiologist will be discussed. State-of-the-art and national trends will be presented by David Katz, MD, JD, Senior Director of Medical Affairs with the Advisory Board Company.

For additional information, please contact Sherry Haas in Care Management Systems at (610) 402-1770.

### **On the Move . . .**

- On Friday, January 21, the Vascular Lab moved to the second floor of the Jaindl Family Pavilion. The Radiology Department will now handle patient test scheduling. The telephone number for scheduling is (610) 402-8080. Outpatients should be directed to report to the Radiology Reception Desk on the second floor of the main hospital at Cedar Crest & I-78. If you have any questions regarding the Vascular Lab, please contact Alice Madden, Director, at (610) 402-8821.
- On January 21, the Radiology File Room, the Radiology Viewing Room, and the Physician Viewing Room relocated to the second floor of the Jaindl Family Pavilion.

## Who's New

### Medical Staff

#### Appointments

**Emil Chuang, MD**

CHOP-Pediatric Gastroenterology  
Children's Hospital of Philadelphia  
Division of Pediatric GI and Nutrition  
34<sup>th</sup> Street and Civic Center Blvd.  
Philadelphia, PA 19104-4303  
(215) 590-3630  
Department of Pediatrics  
Division of Gastroenterology  
Site of Privileges - LVH & MHC  
Provisional Active

**Julie A. Gubernick, MD**

Medical Imaging of LV, PC  
Lehigh Valley Hospital  
Cedar Crest & I-78  
P.O. Box 689  
Allentown, PA 18105-1556  
(610) 402-8088  
Fax: (610) 402-1023  
Department of Radiology/Diagnostic Medical Imaging  
Division of Diagnostic Radiology  
Site of Privileges - LVH & MHC  
Provisional Active

**Robert P. Klym, MD**

Medical Imaging of LV, PC  
Lehigh Valley Hospital  
Cedar Crest & I-78  
P.O. Box 689  
Allentown, PA 18105-1556  
(610) 402-8088  
Fax: (610) 402-1023  
Department of Radiology/Diagnostic Medical Imaging  
Division of Diagnostic Radiology  
Section of Neuroradiology  
Site of Privileges - LVH & MHC  
Provisional Active

**Maureen C. Persin, DO**

In practice with Matthew S. Bartelt, DO  
65 E. Elizabeth Avenue  
Suite 420  
Bethlehem, PA 18018-6506  
(610) 865-1755  
Fax: (610) 867-5101  
Department of Medicine  
Division of General Internal Medicine  
Site of Privileges - LVH & MHC  
Provisional Active

**Edward J. Rosenfeld, MD**

Lehigh Valley Medical Associates  
1255 S. Cedar Crest Blvd.  
Suite 2200  
Allentown, PA 18103-6256  
(610) 437-9006  
Fax: (610) 437-1942  
Department of Medicine  
Division of General Internal Medicine  
Site of Privileges - LVH & MHC  
Provisional Active

**Allen J. Samuels, MD**

East Penn Rheumatology Associates  
701 Ostrum Street  
Suite 501  
Bethlehem, PA 18015-1155  
(610) 868-1336  
Fax: (610) 882-1133  
Department of Medicine  
Division of Rheumatology  
Site of Privileges - LVH & MHC  
Provisional Active

#### Appointment to Medical Staff Leadership Position

**William F. Iobst, MD**

Department of Medicine  
Division of Rheumatology  
Position: Associate Program Director  
Internal Medicine Residency Program

#### Address Changes

**LVPG-Neonatology**

➤ Ian M. Gertner, MD  
➤ Leonard M. Golub, MD  
➤ Shantha V. Mathews, MD  
➤ Marijo A. Zelinka, MD  
Lehigh Valley Hospital  
Cedar Crest & I-78  
P.O. Box 689  
Allentown, PA 18105-1556  
(610) 402-7632  
Fax: (610) 402-7600

**Robert W. Miller, MD**

LVPG-Pediatric Pulmonology  
Allentown Medical Center  
401 N. 17<sup>th</sup> Street  
Suite 311  
Allentown, PA 18104-5064  
(610) 402-3720  
Fax: (610) 402-3742

**Practice and Address Change**

**Amil M. Qureshi, DO**  
LVPG-Pediatrics  
Lehigh Valley Hospital  
Cedar Crest & I-78  
P.O. Box 689  
Allentown, PA 18105-1556  
(610) 402-6700  
Fax: (610) 402-6744

**Telephone/Fax Change**

**L. Kyle Walker, MD**  
LVPG-Pediatrics  
(610) 402-6700  
Fax: (610) 402-6744

**Status Change**

**Orest Balytsky, DMD**  
Department of Dentistry  
Division of Endodontics  
From: Provisional Active  
To: Associate

**Sarah J. Fernsler, MD**  
Department of Pediatrics  
Division of Behavioral Pediatrics  
From: Associate  
To: Affiliate

**Miguel A. Gonzalez, MD**  
Department of Family Practice  
From: Active  
To: Affiliate

**David G. Jones, MD**  
Department of Surgery  
Division of Ophthalmology  
From: Associate  
To: Affiliate

**William J. Kitei, MD**  
Department of Surgery  
Division of Ophthalmology  
From: Associate  
To: Affiliate

**William J. Liaw, DO**  
Department of Family Practice  
From: Active  
To: Affiliate

**Clifford H. Lyons, MD**  
Department of Family Practice  
From: Provisional Active  
To: Affiliate

**Mari A. McGoff, MD**  
Department of Medicine  
Division of General Internal Medicine  
From: Provisional Associate  
To: Affiliate

**Michael G. Nekoranik, DO**  
Department of Medicine  
Division of Pulmonary  
From: Associate  
To: Affiliate

**Rajen P. Oza, MD**  
Department of Medicine  
Division of Hematology/Medical Oncology  
From: Affiliate  
To: Provisional Active  
Site of Privileges - MHC

**Sally Ann Rex, DO**  
Department of Family Practice  
From: Active  
To: Affiliate

**Eugene M. Saravitz, MD**  
Department of Surgery  
Division of Ophthalmology  
From: Associate  
To: Affiliate

**One-Year Leave of Absence**

**James J. Boylan, MD**  
Department of Medicine  
Division of Gastroenterology

**Jeaninne M. Einfalt, DO**  
Department of Medicine  
Division of General Internal Medicine

**Keith S. Turner, MD**  
Department of Medicine  
Division of Gastroenterology

**Additional One-Year Leave of Absence**

**Dennis W. Kean, MD**  
Department of Pediatrics  
Division of General Pediatrics

**Charles R. Levine, MD**  
Department of Surgery  
Division of Orthopedic Surgery

**Resignations**

**William L. Bollman III, DO**  
Department of Family Practice

**George I. Chovanes, MD**  
Department of Surgery  
Division of Neurological Surgery  
Section of Neuro Trauma

**Eve L. Gillespie, MD, PhD**  
Department of Medicine  
Division of Cardiology

**Doreen Goring, DO**  
Department of Family Practice

**Asim S. Khan, MD**  
Department of Medicine  
Division of Rheumatology

**Farha S. Khan, MD**  
Department of Medicine  
Division of Endocrinology/Metabolism

**Yasin N. Khan, MD**  
Department of Anesthesiology  
Division of Pain Management

**Zafar M. Magsi, MD**  
Department of Medicine  
Division of General Internal Medicine

**Robert A. Morrow, MD**  
Department of Surgery  
Division of Neurological Surgery  
Section of Neuro Trauma

**Bonnie Osterwald, MD**  
Department of Obstetrics and Gynecology  
Division of Primary Obstetrics and Gynecology

**Rudolph J. Preletz, MD**  
Department of Surgery  
Division of General Surgery

**Bruce M. Rodenberger, MD**  
Department of Obstetrics and Gynecology  
Division of Primary Obstetrics and Gynecology

**Catharine L. Shaner, MD**  
Department of Pediatrics  
Division of General Pediatrics

**James G. Showalter, MD**  
Department of Psychiatry

**Stephen H. Sinclair, MD**  
Department of Surgery  
Division of Ophthalmology

**Richard N. Stein, MD**  
Department of Pediatrics  
Division of General Pediatrics

## Allied Health Professionals

### Appointments

**Suzanne D. Amant, PA**  
Physician Extender  
Physician Assistant - PA  
(Gastroenterology Associates Ltd. - Michael H. Ufberg, MD)  
Site of Privileges - LVH & MHC

**Kathy S. Battles, PA-C**  
Physician Extender  
Physician Assistant - PA-C  
(Muhlenberg Primary Care, PC - Michael Ehrig, MD)  
Site of Privileges - LVH & MHC

**Cheryl H. Bitting, CRNP**  
Physician Extender  
Professional - CRNP  
(Lehigh Valley Hospital - Department of Medicine - John P. Fitzgibbons, MD)  
Site of Privileges - LVH & MHC

**Melissa J. Linn, PA**  
Physician Extender  
Physician Assistant - PA  
(Coordinated Health Systems - Michael F. Busch, MD)  
Site of Privileges - LVH & MHC

**Constance A. Molchany, CRNP**  
Physician Extender  
Professional - CRNP  
(Lehigh Valley Hospital - James W. Jaffe, MD)  
Site of Privileges - LVH & MHC

**Dennis J. Quinn, PA-C**  
Physician Extender  
Physician Assistant - PA-C  
(Coordinated Health Systems - Brett P. Godbout, MD)  
Site of Privileges - LVH & MHC

**Nicole C. Schock, CRNP**  
Physician Extender  
Professional - CRNP  
(Muhlenberg Hospital Center - Department of Medicine - Gavin C. Barr, MD)  
Site of Privileges - LVH & MHC

**Karen M. Williams, CRNP**  
Physician Extender  
Professional - CRNP  
(Lehigh Valley Hospital - John P. Fitzgibbons, MD)  
Site of Privileges - LVH & MHC

# THE CENTER FOR EDUCATIONAL DEVELOPMENT AND SUPPORT

February, 2000

## Symposia:

**2/5/2000 Trends in the Treatment of Peripheral Vascular Disease** will be held from 7:30 - 12:15 at LVH-CC Auditorium. Topics covered will be Diagnosis and Treatment of Peripheral Vascular Disease - The National Scene; Endovascular Surgery, An Essential Technology for Vascular Surgeons in the 21<sup>st</sup> Century; Credentialing and Privileges for Peripheral Vascular Interventions; Peripheral Vascular Disease: An Integrated Approach. To register, please contact Sherry Haas at 610-402-1770.

## News from the Library

### OVID/PubMed Training.

To schedule a one-on-one OVID (MEDLINE) training session, call Barbara Iobst in the Health Sciences Library at 610-402-8408. She can also instruct you in the use of PubMed, a free, Web-based MEDLINE service offered by the National Library of Medicine.

### New Publications- CC Library

"Clinics in Geriatric Medicine" Subject: Stroke Vol. 15, No. 4

"Clinics in Perinatology" Subject: Fetal and Neonatal Physiologic Measurements" Vol. 26, No. 4

"Clinical Obstetrics and Gynecology" Subjects: Controversies in Obstetrics and Controversies in Gynecology Vol. 42, No. 4

### New Publications- 17 & Chew Library.

"Psychiatric Clinics of North America" Subject: Emergency Psychiatry Vol. 22, No. 4

### New Publications- MHC Library

"Dental Clinics of North America" Subject: Advances in Sports Medicine Vol. 44, No. 1.

## Library Hours

**CC & I-78 Library** - 8:30 a.m.-5:00 p.m.,  
Mon.-Fri. (telephone: 610-402-8410)

**17 & Chew Library** - 9:30 a.m.-3:30 p.m.,  
Mon.-Fri. (telephone: 610-402-2263)

**MHC Library** - 9:00 a.m.-1:00 p.m.,  
Mon.-Fri. (telephone: 610-861-2237)

## News from the Office of Educational Technology

If you're looking for material to integrate into your teaching curriculum, check out Gold Standard Multimedia Network's Integrated Medical Curriculum-imc ([www.imc.gsm.com](http://www.imc.gsm.com)). This online resource provides information and education on Human Anatomy, Physiology, Microscopic Anatomy, Radiologic Anatomy, Cross-Sectional Anatomy, Essentials of Immunology, The Doctor's Dilemma, and Clinical Pharmacology. The best part about this exceptional resource is that it's free!

Using imc, you can dissect cadavers online, examine cellular biology, animate physiologic processes, and examine radiographs. You can explore challenging and controversial medical ethical issues, test your medical knowledge with online quizzes, and earn continuing education credits.

Gold Standard Multimedia's **ime** is especially valuable for medical students, but interns, residents, and practicing physicians will find it a useful source for medical information.

And if you're looking for more teaching resources, remember to check the Medical Resources section of LVH's intranet (within the hospital). Just click on **Education & Training Resources** from the dropdown menu (or go directly to:

[http://www.lvh.com/WebPublic/Cntr\\_Educ/ceds/](http://www.lvh.com/WebPublic/Cntr_Educ/ceds/) and select **Medical Resources**.

### **Computer-Based Training (CBT):**

Computer Based Training (CBT) programs are available for LVHVN staff. Topics covered by the CBT programs include: Access 2.0, PowerPoint 4.0, Windows NT 4, Word 97, Excel 97, Access 97, PowerPoint 97, Lotus 1-2-3 Millennium, WordPerfect 8, PHAMIS LastWord Inquiry Only commands, and E-mail GUI (check with your I/S analyst to see if you have the GUI e-mail).

When I/S upgrades your PCs from Windows 311 to Windows NT, your office automation software will also be upgraded. Prepare for this upgrade by attending CBT sessions. Any questions about the NT upgrade should be directed to your I/S analyst.

**CBT at LVH-CC** takes place in Suite 401 of the Cancer Center (the computer training room).

The schedule for LVH-CC is:

2/1/2000	8am - 12pm
2/8/2000	12pm - 4pm
2/22/2000	12pm - 4pm
2/29/2000	8am - 12pm
3/7/2000	12pm - 4pm
3/21/2000	12pm - 4pm
3/28/2000	8am - 12pm

**CBT at MHC** takes place in the computer training room (in the main hospital building just off the lobby). The schedule for MHC is:

2/15/2000	8am - 12pm
3/14/2000	8am - 12pm

At each site, twelve slots are available for each session.

To register, please contact Bonnie Schoeneberger via e-mail or at 610-402-1210 telling her which session you want to attend. Include a second choice in case your first is already filled. You will receive an e-mail confirming your choice within two business days.

We will be adding more CBT programs to our curriculum. We will announce any additions via e-mail. If you have any questions, please contact Craig Koller at 610-402-1427 or e-mail.

### **Announcements:**

Thanks to the efforts of Jon E. Brndjar, DO, LVH's Director of Osteopathic Medical Education, as of January 2000, Osteopathic physicians attending departmental grand rounds, tumor boards, and selected other peer-reviewed meetings and conferences will be granted AOA Category 1B CME credits, that can be applied toward both state licensing and AOA requirements.

Additionally, AOA continues to recognize "Life Support" courses (BLS, ACLS, PALS, NALS, ATLS) as eligible for AOA Category 1A credits.

To receive these AOA credits, Osteopathic physicians must continue to sign activities attendance forms as they have in the past. At the end of the calendar year, CEDS will send out the appropriate paperwork to document attendance. Please page or email Jon E. Brndjar, DO. (pager 1458) or Bonnie Schoeneberger (610-402-1210) with any questions.

*Any questions, concerns or comments on articles from CEDS, please contact Bonnie Schoeneberger 610-402-1210*

# Education Schedule

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<b>February 2000</b>						
		<b>1</b> 7am Surgical Grand Rounds CC-Aud 8am Pediatric Grand Rounds- 17-Aud 12noon Medical Grand Rounds- CC-Aud	<b>2</b>	<b>3</b> 7am Emergency Grand Round-1251SC-308C 12noon Combined Tumor Board JDMCC-CR1A/B	<b>4</b> 7am GYN Tumor Board 17-Aud 12noon Breast Tumor Board JDMCC-CR1A/B	<b>5</b> 7:30am Trends in the Treatment of Peripheral Vascular Disease CC-Aud
<b>6</b>	<b>7</b> 12noon C/R Tumor Board JDMCC- CR1A/B	<b>8</b> 7am Ambulatory Clinical Guideline Dev-SON-Conf Room 7am Surgical Grand Rounds-CC-Aud 8am Pediatric Grand Rounds-17-Aud 12noon Medical Grand Rounds-CC- Aud	<b>9</b> 12noon Pulmonary Tumor Board JDMCC-CR1A/B	<b>10</b> 12noon G.I. Tumor Board JDMCC-CR1A/B	<b>11</b> 7am OBGYN Grand Round-17-Aud 12noon Pediatric Noon Conf-17-Aud 12noon Breast Tumor Board JDMCC-CR1A/B	<b>12</b>
<b>13</b>	<b>14</b>	<b>15</b> 7am Surgical Grand Rounds CC-Aud 8am Pediatric Grand Rounds-17-Aud 12noon Medical Grand Rounds-CC- Aud	<b>16</b>	<b>17</b> 12noon Combined Tumor Board JDMCC-CR1A/B	<b>18</b> 7am OBGYN Grand Round-17-Aud 12noon Breast Tumor Board JDMCC-CR1A/B	<b>19</b>
<b>20</b>	<b>21</b> 12noon C/R Tumor Board JDMCC- CR1A/B	<b>22</b> 7am Surgical Grand Rounds-CC-Aud 8am Pediatric Grand Rounds-17-Aud 12noon Medical Grand Rounds-CC- Aud 12noon Urology Tumor Board JDMCC-CR1A/B	<b>23</b>	<b>24</b> 12noon Combined Tumor Board JDMCC-CR1A/B	<b>25</b> 7am OBGYN Grand Round-17-Aud 12noon Pediatric Noon Conf-17-Aud 12noon Breast Tumor Board JDMCC- CR1A/B	<b>26</b>
<b>27</b>	<b>28</b>	<b>29</b> 7am Surgical Grand Rounds CC-Aud 8am Pediatric Grand Rounds-17-Aud 12noon Medical Grand Rounds-CC- Aud				<b>Page 15</b>

Cedar Crest & I-78  
P.O. Box 689  
Allentown, PA 18105-1556

Non-Profit Org.  
U.S. Postage  
PAID  
Allentown, PA  
Permit No. 1922

---

**Medical Staff Progress Notes**

David M. Caccese, MD  
President, Medical Staff  
Edward M. Mullin, Jr., MD  
President-elect, Medical Staff  
Robert X. Murphy, Jr., MD  
Past President, Medical Staff  
John W. Hart  
Vice President  
Rita M. Mest  
Director, Medical Staff Services

Janet M. Seifert  
Physician Relations  
Managing Editor

**Medical Executive Committee**

Linda K. Blose, MD  
Karen A. Bretz, MD  
David M. Caccese, MD  
Luis Constantin, MD  
Thomas D. DiBenedetto, MD  
Domenico Falcone, MD  
John P. Fitzgibbons, MD  
Michael W. Kaufmann, MD  
Mark A. Kender, MD  
Stephen K. Klasko, MD  
Robert Kricun, MD  
Robert J. Laskowski, MD  
Richard L. London, MD  
Alphonse A. Maffeo, MD  
John A. Mannisi, MD  
John W. Margraf, MD  
Eric J. Marsh, DMD  
James L. McCullough, MD  
William L. Miller, MD  
Edward M. Mullin, Jr., MD  
Brian P. Murphy, MD  
Robert X. Murphy, Jr., MD  
John D. Nuschke, MD  
Michael D. Pasquale, MD  
Harvey B. Passman, DO  
Victor R. Risch, MD  
Michael Scarlato, MD  
John J. Shane, MD  
Elliot I. Shoemaker, MD  
Elliot J. Sussman, MD  
Hugo N. Twaddle, MD  
John D. VanBrakle, MD  
Michael S. Weinstock, MD

***Medical Staff Progress Notes***  
is published monthly to  
inform the Medical Staff of  
Lehigh Valley Hospital and  
employees of important  
issues concerning the  
Medical Staffs.

Articles should be submitted  
to Janet M. Seifert, Physician  
Relations, Lehigh Valley  
Hospital, 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 call Mrs.  
Seifert at (610) 402-8590.