Diagnostic Care Center Initiates New and Improved Scheduling Process

Lehigh Valley Hospital is pleased to announce that the process for scheduling diagnostic examinations and tests in the Diagnostic Care Center, located in the Jaindl Family Pavilion at Cedar Crest & I-78, has changed from calling the individual clinical areas to calling a single phone number in the new Centralized Scheduling area. In addition, the hours for scheduling appointments have expanded to 7 a.m. to 7 p.m.

Now, when you need to schedule tests in Non-invasive Cardiology (Heart Station), Neurodiagnostics, Pulmonary Functions, Nuclear Medicine, Sleep Disorders Center, and Pre-admission Testing, please call either (610) 402-TEST (8378), or out of area call 1-877-402-TEST (8378). These numbers should also be used to schedule Non-invasive Cardiology (Heart Station) and Neurodiagnostic tests at 17th & Chew.

The new Centralized Scheduling area is staffed by trained representatives who will be able to schedule any of the services performed in the areas listed above. In addition, registration information will be collected by the Centralized Scheduling staff, which will pre-register the patient and dramatically speed the intake process once the patient arrives for his/her exam.

If you have any questions about this new process, please call Lisa Coleman, Director of Support Services, at (610) 402-8066, or Mark Holtz, Vice President of Operations, at (484) 884-4710.

Patient Reservations

Good News! The process to make a reservation to schedule a patient for the Operating Room, the Special Procedure Unit, or the Ambulatory Surgery Unit has become much easier. For more information and a handy reference, please refer to Page 7.

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Direct Admit Process Change

The process for calling in reservations for those patients requiring admission to the hospital directly from home or the physician's office (DIRECT ADMITS) for Lehigh Valley Hospital, Cedar Crest & I-78 and/or 17th & Chew has changed. Beginning Monday, April 3, 2000, please call the Bed Management Department at (610) 402-4508. Patient demographic information with regard to name, sex, date of birth, social security number, admitting physician, family physician/primary care physician, referring physician, clinical and insurance information will still be required. Please include the type of bed needed for admission (med-surg, med-surg telemetry, low-level monitor, or high level).

This change in process will allow the physician and office staff direct and timely communication with Bed Management and eliminate the need for Patient Access to transfer calls to Bed Management to determine bed availability. This change does not affect elective admissions to the hospital. Again, the number to call for Direct Admits to Cedar Crest & I-78 or 17th & Chew is (610) 402-4508.

If you have any questions or problems, please contact one of the following individuals:

- Lisa Romano, Manager of Bed Management, (610) 402-5150
- Lisa Coleman, Director of Support Services/Scheduling, (610) 402-8066
- Mark Holtz, Vice President of Operations, (484) 884-4554

Process Flow for Direct Admission from a Diagnostic Testing Area

For an unstable patient in a diagnostic testing area who urgently needs to be admitted, the following process is to be followed:

The referring physician or his/her designate should contact the LVH Transfer Center at (610) 402-6100 or pager 5100-1516. This area is staffed by a triage nurse 24 hours a day, seven days a week.

The following information will be taken during the call:

- The patient’s name, age, and diagnosis
- The name of the admitting physician and the referring physician
- Planned treatment modalities: ventilator, bipap, swan-ganz, a-line, titrating drips, dialysis
- Isolation needs (contact vs. negative airflow)
- The need for cardiac monitoring/type of bed needed (med/surg, low-level monitored, high-level monitored)
- If known, demographic and insurance information

A bed will be assigned by the triage nurse based on the above information.

The triage nurse will notify the receiving unit and determine if the bed is ready or not ready.

Every attempt will be made to assign a ready bed.

If the assigned bed is not ready, the patient will be transported to PACU (recovery room) until the bed is available.

If PACU is full or unable to hold the patient, the patient will be transported to the Emergency Department and held until the bed is available.

If you have any questions regarding this process, please contact Lisa Romano, Manager of Bed Management, at (610) 402-5150 or pager 5100-1159.
Primary Care and Referring Physicians

Several years ago, in an effort to improve service to physicians, a process was implemented to automatically fax patients' medical record reports to the primary care and referring physician as soon as the report is transcribed into the LastWord system. With great numbers of physicians requesting this service, turnaround time for receipt of patient reports in the primary care and referring physicians' practices has been tremendously improved. However, the success of this process depends entirely upon obtaining the names of the primary care physician and the referring physician during the reservation and registration processes.

Recently, physician practices may have noticed that when making a patient reservation, the names of both the referring physician and the patient's primary care physician have been requested. (The referring physician is the doctor who referred the patient to your practice, and may or may not be the same as the primary care physician.) By gathering this information, the hospital can continue to provide the referring physicians and the primary care physicians with the reports they have requested for their patients. Therefore, when making patient reservations, please have this information available for the reservation personnel. Your cooperation is very much appreciated.

Nuclear Medicine Update

Federal and State regulations governing the medical use of radioactive materials define a misadministration as one involving administration of a radiopharmaceutical (1) to the wrong patient, (2) involving the wrong route of administration, or (3) administration of a radiopharmaceutical other than the one intended or prescribed. Misadministrations compromise patient care, as well as representing significant violations of our radioactive materials license conditions.

Prevention of misadministrations requires diligence by all parties with respect to making certain that the clinical objective of all diagnostic exams or radiopharmaceuticals are understood and met.

Toward this end, all referrals for radiopharmaceutical-based procedures must be made by prescription. Also, please stress to your patients that they present the prescription to the attending Nuclear Medicine technologist at the time of their exam. No procedure will be performed without a prescription.

Thank you for your attention to this issue. If you have any questions, please contact Bernard Valasek, Nuclear Medicine Technologist (Cedar Crest & I-78), at (610) 402-8383, or Ross Applebaum, Chief Technician, Nuclear Medicine (Muhlenberg), at (484) 884-2235.

Ultrasound Department Relocates

On April 5, the Ultrasound Department at Cedar Crest & I-78 relocated to the main Radiology Department adjacent to CT scan on the second floor of the hospital. To schedule an ultrasound, please call (610) 402-8080. For information and inquiries, please call (610) 402-5232 or (610) 402-7867.
West Nile Virus Alert

The Pennsylvania Department of Health (PA DOH) and the Department of Environmental Protection, along with other state agencies and local governments, have developed a proactive laboratory-based surveillance and prevention and control program to limit the impact of the West Nile virus (WNV) in the Commonwealth. Pennsylvania's program has three parts -- education and outreach, surveillance, and, if the surveillance program determines there is a risk, the control of mosquitoes.

Clinical Criteria: Arboviral infection, including West Nile virus, may result in a febrile illness of variable severity associated with neurologic symptoms ranging from headache to meningitis or encephalitis. Arboviral encephalitis cannot be distinguished clinically from other central nervous system (CNS) infections.

Signs and Symptoms include:

- Headache
- Fever
- Confusion or other alteration in sensorium
- Meningismus
- Nausea and vomiting
- Cranial nerve palsies
- Paresis or paralysis
- Convulsions
- Sensory deficits
- Abnormal movements
- Altered reflexes
- Coma of varying degrees
- Rash

Occurrence: Late summer or early fall.

Reservoir: Primarily birds.

Transmission: Mosquito.

Information: A Pennsylvania Department of Health website containing basic information about West Nile Encephalitis is worth visiting at www.WestNile.state.pa.us. The website has been established to provide the clinician and the public with background information and regular updates. There is also a Citizen Fact Sheet that may prove useful for distribution in your offices for patient inquiries on the virus and methods of prevention. The fact sheet is available by contacting the Infection Control Department at (610) 402-0680 or on the web site listed above.

Prevention: Reduce the number of mosquitoes through various measures intended to limit breeding ground for mosquitoes. Older individuals are to be cautioned to protect themselves with appropriate clothing and repellents when venturing into areas with high mosquito populations such as salt marshes or wooded areas.

To Diagnose West Nile Fever

1) Blood
   1 red top tube (10 ml)
   Send for West Nile Virus Encephalitis (WNV) antibody testing (collected less than 8 days after onset of symptoms).

2) CSF
   5 ml spinal fluid
   Send for West Nile Virus Encephalitis (WNV) antibody testing.

Note: Spinal fluid for West Nile virus should also be sent for viral culture, bacterial culture, and glucose/cell count/protein/lactate level, since WNV mimics other more common causes of meningitis or encephalitis.

Estimated turnaround time for results:

- Blood 3-5 days
- CSF 3-5 days

If you have any questions regarding this issue, please contact Terry Burger, Manager, Infection Control, at (610) 402-0685.
Vaccine Information Statements -- Legal Requirements for Use

Vaccine Information Statements (VIS) must be provided for any vaccine that is covered by the Vaccine Injury Compensation Program. As of June 1999, VIS must be used for the following vaccines:

- Tetanus
- Pertussis
- Polio
- Hepatitis B
- Haemophilus influenzae type B
- Rotavirus (this vaccine has been withdrawn from the market)
- Measles
- Mumps
- Rubella
- Varicella

All providers of vaccines must give out a VIS at the time of each vaccination, prior to the administration of the vaccine. A VIS is a one-page (two-sided) information sheet, produced by the CDC, informing vaccine recipients (or their parents or legal representatives) of the benefits and risks of the vaccine. This is a requirement of the National Childhood Vaccine Injury Act of 1986.

Every time one of these vaccines is given—regardless of what combination it is given in—regardless of whether it is given by a public health clinic or a private provider—regardless of how the vaccine was purchased—regardless of the age of the recipient—the appropriate VIS must be given out at the time of the vaccination.

VIS's exist for several vaccines not covered by the National Childhood Injury Act. These VIS's must be used when the vaccine given has been purchased under CDC contract. The legal basis for this is not the Vaccine Injury Act, but the "Duty to Warn" clause in CDC's vaccine contracts. VIS's in this category (as of January 2000), and the dates they were issued, are:

- Influenza: 6/1/99
- Hepatitis A: 8/25/98

Pneumococcal Polysaccharide: 7/29/97
Lyme disease: 11/1/99

After giving the VIS prior to vaccination, the provider must document in the patient's permanent medical record the following:
- Which VIS was given
- Date of publication of the VIS
- Date the VIS was given.

The following information must also be documented either in the patient's permanent medical record or in a permanent office log:

- The name, address, and title of the person who administered the vaccine
- The date of administration
- The vaccine manufacturer
- The vaccine lot number

VIS's can be obtained from one of the following:

- The Internet. All current VIS's are available on the Internet at two websites—the National Immunization Program (www.cdc.gov/nip), and the Immunization Action Coalition (www.immunize.org).
- State Health Department.
- National Immunization Information Hotline. Call 1-800-232-2522
- CDC's "Fax-Back" System. Anyone wanting a single copy of a VIS can call 1-888-232-3299 and, when prompted, enter document number 130011. A NIP "Resource Request List" will be faxed to you, from which you can order VIS's as well as other NIP documents.

If you have any questions concerning the use of VIS's, please call the Infection Control Department at (610) 402-0680.
Who's New

Joan Dougherty, Office Manager
George W. McGinley, MD
Allentown Medical Center
401 N. 17th Street
Suite 103
Allentown, PA 18104-5052
(610) 821-9454
Fax: (610) 433-8778

Nellie Kiefer, Office Manager
Lehigh Valley Women's Health Care Alliance
1575 Pond Road
Suite 104
Allentown, PA 18104-2250
(610) 398-7848
Fax: (610) 398-2220

On April 10, notification was mailed regarding the annual assessment due for 2000 for continued membership in the Greater Lehigh Valley Independent Practice Association, Inc. Each physician member is responsible for one annual assessment of $250.00, which was due by May 10, 2000. If you have any questions, please contact Eileen Hildenbrandt, Coordinator, Lehigh Valley Independent Practice Association, Inc., at (610) 402-7423.
Good News! The process to make a reservation to schedule a patient for the Operating Room, the Special Procedure Unit, or the Ambulatory Surgery Unit has become much easier. It just takes one phone call...

**RESERVATION SCHEDULING PHONE NUMBER**

<table>
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<tr>
<th>Cedar Crest &amp; I-78</th>
<th>484-884-4545</th>
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**RESERVATION SCHEDULING FAX NUMBER**

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<tr>
<th>Cedar Crest &amp; I-78</th>
<th>484-884-4432</th>
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Cedar Crest & I-78 only: After 4:30 p.m., to schedule a patient for the Operating Room the following day, contact the OR at 610-402-8668 and notify Bed Management for patient information at 610-402-8062.

17th & Chew only: After 4:30 p.m., to schedule a patient for the Ambulatory Surgery Unit the following day, contact the OR at 610-402-2231 and notify Bed Management for patient information at 610-402-8062.

Muhlenberg only: After 4 p.m., to schedule a patient for the Operating Room the following day, contact the OR at 484-884-2436.

Muhlenberg only: After 4 p.m., to schedule a patient for the Special Procedure Unit the following day, contact the House Supervisor through the Page Operator by dialing 610-402-8999. The Supervisor will take the required information and will inform Admitting of the add-on for the next day.

**PRE-ADMISSION TESTING**

May be scheduled at the time of reservation or arranged separately by calling:

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<th>Phone</th>
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<tr>
<td>610-402-TEST (8378)</td>
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<tr>
<td>484-884-4545</td>
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</tbody>
</table>

**CENTRAL DOCUMENT PROCESSING (CDP)**

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<tr>
<th>Cedar Crest &amp; I-78</th>
<th>Phone</th>
<th>Fax</th>
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</thead>
<tbody>
<tr>
<td>610-402-4203</td>
<td>610-402-1824</td>
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<tr>
<td>17th &amp; Chew</td>
<td>610-402-3408</td>
<td>610-402-3413</td>
</tr>
<tr>
<td>Muhlenberg</td>
<td>484-884-2576</td>
<td>610-861-8946</td>
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CDP will collect and collate required documents (H&P, Release, etc.) several days prior to the scheduled admission. This will facilitate the process for the patient on the day of admission. Documents are required 48 hours prior to the procedures. Documents may be:
- Dropped off in the CDP department
- Deposited in the CDP boxes located at each site
- Faxed to the appropriate number listed above
FOCUS is published quarterly for the office staffs of physicians on the Medical Staff of Lehigh Valley Hospital. Articles for the next issue should be submitted by July 15, 2000, to Janet M. Seifert, Medical Staff Services, Lehigh Valley Hospital, Cedar Crest & I-78, P.O. Box 689, Allentown, PA 18105-1556.

For more information, please call Janet at (610) 402-8590.