LVHHN First Pennsylvania Hospital Named
"100 Best Companies to Work For" by FORTUNE Magazine

On January 8, Lehigh Valley Hospital and Health Network (LVHHN) was named among the nation’s “100 Best Companies to Work For” by FORTUNE magazine for 2007. LVHHN is the first ever Pennsylvania hospital recognized and the first ever Pennsylvania non-profit organization selected to the list since the national ranking began in 1998. LVHHN is number 80 on the 2007 list and one of only ten Pennsylvania-based employers ever to make the list.

“This honor reflects our organization’s culture and the outstanding care delivered to our community everyday by the people who make up that culture,” said Elliot J. Sussman, MD, LVHHN’s President and CEO. “The dedication, creativity, knowledge and experience of our physicians, nurses, administrators and staff help to create a culture of caring that strives for excellence, and we are grateful to them for achieving this honor.”

“The 100 Best Companies to Work For” list is compiled for FORTUNE by the Great Place to Work Institute headquartered in San Francisco, Calif. The rankings are based on an evaluation of the policies and culture of each company, and the opinions of the company’s employees. The employee opinion score, which makes up two-thirds of the total score, comes from at least 400 randomly selected employees who respond to a 57-question survey. The remaining one-third of the score is based on an evaluation of company and employee demographics, pay and benefits programs, and culture.

Among the items measured leading to LVHHN’s selection to the “100 Best Companies to Work For” list are:

... Keeps employees informed about important issues and changes
... Does a good job of assigning and coordinating people
... Genuinely seeks and responds to suggestions and ideas
... Involves people in decisions that affect their jobs or work environment
... Makes opportunities available for training or development to improve professionally
... Feel you make a difference here
... Proud to tell others you work here
... Feel good about the ways the company/organization contributes to the community

Continued on Page 3
It’s a typical morning at Lehigh Valley Hospital.

You arrive in the lounge and log on to Lastword to print a patient list. The service is huge. Four of your patients admitted overnight are still in the Emergency Department waiting for beds, and so is the elderly man with abdominal pain that you admitted yesterday.

Your beeper goes off. Your patient who had surgery last month was short of breath and called 911, but LVH was on ambulance diversion, so he was taken to Sacred Heart. The internist there has no records and needs information.

You head to the ED to see a consultation, an elderly woman on a litter in the hall. The place is wall-to-wall with uncomfortable patients and tired families. “It’s been a crazy night,” the nurse says, “and the hospital census is already at 105%.”

You take the elevator upstairs to start rounds. It’s going to be a busy day, but you figure if you start at the top and work your way down, at least you have gravity on your side . . .

* * * * * * * * * *

Ah, yes, a typical morning. But what can you do except keep taking care of your patients the way you always have? No one can do anything to change the situation, right?

Actually, it turns out there are a few things we physicians can do to help ease the bed crunch and make life a little easier for ourselves and for our patients. Here are some ideas:

**Focus on early discharge.**
Even a few hours can make a big difference. “Crunch time” for beds starts about 11 a.m., when surgery patients start leaving the OR and admissions begin to arrive, so if you have a patient slated for discharge, see her first (even if she’s on a lower floor), so that your other patient waiting in the ED can get upstairs a little sooner.

Consider ordering labs for the evening before, utilizing the **Impacts Discharge Priority** for labs and radiology, so the results are there in the morning. And discharge paperwork can be started the day before when you may have a little more time. Better yet, consider evening discharge for some patients. And communicate discharge plans early and often to patients, families, and staff to make sure all arrangements are in place.

**Use the Express Admit Units.** Docs at Muhlenberg can now take advantage of what their Cedar Crest colleagues have already learned: your patients can bypass the crowded ED and get a quick start on admission testing and treatment, with orders you can enter from your office.

**Take advantage of new weekend OR blocks.** It’s Friday, and you have an inpatient who needs a colon resection. Consider booking the case for Saturday morning, instead of waiting until Monday (when the schedule is probably full anyway).

* * * * * * * * * *

What is the hospital doing to help? The Capacity Throughput Council is working to make sure all departments are at peak efficiency to help our patients move through the system without delays. ED expansion is underway. The new Observation Units will open this month with protocols to help optimize care for eligible patients. And the Automated Discharge Instruction system will be made easier to use.

Members of the Medical Staff can help by paying attention to those aspects of “throughput” that we control.

One other way we can help: Think about bottlenecks in the system that always seem to keep your patients in the hospital an extra hour or extra day, whether it’s a service that is not available on weekends, or a process that just takes too long. E-mail your ideas to me and I’ll talk to those who can make improvements. All of us, and especially our patients, stand to benefit.

Linda L. Lapos, MD
Medical Staff President
Physician Assistance Program Expanded to Cover Office Staff of Medical Staff Members

Effective January 1, 2007, the behavioral health counseling services of Preferred EAP became available to the office staff of LVHHN Medical Staff members.

Preferred EAP is the group that operates the hospital’s Employee Assistance Program as well as the Medical Staff Physician Assistance Program.

People come to Preferred EAP for a wide variety of reasons. The most common ones are:

- Marital or relationship difficulties
- Depression and anxiety
- Alcohol or drug abuse
- Family problems
- Stress from work or personal concerns

If you are unsure about whether the EAP is an appropriate resource for assistance with a personal problem, please call and speak with Preferred EAP staff before making an appointment.

Eligibility

All office staff employees of LVHHN Medical Staff members are now able to use the services of Preferred EAP and are encouraged to do so when the need arises.

Making an Appointment

To make an appointment, call Preferred EAP’s office at 610-433-8550 between 9 a.m. and 4 p.m., Monday through Friday, and identify yourself as an employee of a LVH Medical Staff member.

Preferred EAP will ask you for some general information, including a brief description of the problem, so that an appointment can be scheduled with an appropriate counselor.

Number of Visits and Costs

Although the number of visits will vary with the nature and severity of the problem, up to five 50-minute sessions with Preferred EAP are available to employees of Medical Staff members at no cost. These sessions are used to assess needs and, when appropriate, provide brief counseling. About half of Preferred EAP’s clients resolve their problem within the five-visit benefit.

However, if there is a need for further service or treatment after five visits, a referral will be made to a private practitioner or community resource. The cost of these services may be partially covered by your health insurance plan.

For more information or if you have questions regarding this service, please call Preferred EAP at (610) 433-8550 or (800) 327-8878 or visit their website at www.PreferredEAP.org.

Continued from Page 1

MaryKay Grim, LVH’s Senior Vice President for Human Resources, told employees gathered for the announcement that they help LVH excel in areas that FORTUNE considers important. Those include the employee newsletter and interactive forums conducted by senior managers for employees to attend, a shared governance model to provide a say in decision making, tuition reimbursement programs and initiatives, a free health care plan, shared success bonuses, and rewards and recognition for significant accomplishments and going above and beyond to come up with quality-improvements and patient safety ideas. “While all of these programs and initiatives are important components of our culture, your skills and attitude are what make LVHHN a great place to work,” Mrs. Grim told the employees. “By attracting and keeping the best people, we can provide the kind of quality care the members of our community deserve.”

The ranked list of the “100 Best Companies to Work For” was published in the January 22 issue of FORTUNE magazine.
News from CAPOE Central

New PCA Pumps – What it means to you

In February, new PCA pumps will be deployed throughout the hospital. Ordering PCA will essentially remain unchanged. You will notice several different terms in the detail and comment sections, as noted below.

<table>
<thead>
<tr>
<th>Old Terminology</th>
<th>New Terminology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bolus (on initiation)</td>
<td>Loading dose</td>
</tr>
<tr>
<td>Continuous rate</td>
<td>Basal rate</td>
</tr>
<tr>
<td>PCA dose</td>
<td>Patient bolus</td>
</tr>
<tr>
<td>Delay interval</td>
<td>Delay bolus interval</td>
</tr>
<tr>
<td>One hour limit</td>
<td>Number bolus per hour</td>
</tr>
<tr>
<td>Bolus (during therapy)</td>
<td>Clinician dose</td>
</tr>
</tbody>
</table>

A few TPN Tips

- Please remember to re-order TPN through the web form, and not directly in LastWord.
- When editing or re-ordering TPN from a previous day, please do not hit the ‘Recalculate’ button. If you do, the volume entry will revert back to the generic volume 25ml/kg.
- Also, please remember to never use the Back button (upper left on intranet screen) when on the TPN screens. If a change must be made after saving, the edit button should be used.

It’s Getting Closer – Lab Cum reports will be going away

As of March 2007, the nightly Lab Cum reports will no longer be printed. Cumulative lab reports will still be available in the EHMR system after D/C to facilitate dictations. The decision to eliminate the printing of these reports was approved by the Medical Executive Committee in June, 2006, and reaffirmed during the December 2006 meeting. With ubiquitous use of the online system and the Viewer, the need for these reports to be printed daily has been eliminated. Remember you can view results older than seven days by changing the “Display Options” in the “Viewer Definitions” area.

If you have any questions regarding these issues, please contact Don Levick, MD, MBA, Physician Liaison, Information Services, at 610-402-1426, or pager 610-402-5100 7481.

Annual Tuberculosis Skin Test Reminder

At its September 6, 2005 meeting, the Medical Executive Committee approved a requirement that all Medical Staff and Allied Health Staff members would receive annual Tuberculosis skin testing (PPD Mantoux). Since January 1, 2006, practitioners have been required to self-report compliance through directed questions on the initial and reappointment applications to the Medical Staff and Allied Health Staff.

Although the next Medical Staff biennial reappointment will not take place until 2008, members of the Medical Staff are reminded that they are required to obtain an annual PPD test this year.

If you are unable to obtain PPD testing in your private practice setting, arrangement may be made through Employee Health during walk-in hours.

Rapid Response Team Update

Effective March 1, 2007, the Rapid Response Team (RRT) will assume responsibility for the initial evaluation of patients with acute stroke-like symptoms occurring on any inpatient area. The RRT Physician will then communicate with the attending physician and, if indicated, the neurologist covering stroke phone. If you have any questions regarding this issue, please contact Michael J. Pistoria, DO, Division of Hospital Medicine/General Internal Medicine, at 610-402-8045.
Change to “Welcome to Medicare” Physicals

Beginning in January 2007, ultrasound screening for aortic aneurysm will be covered for at-risk patients as part of their “Welcome to Medicare” physical.

The incidence and prevalence of vascular disease are on the rise, given the growing elderly population. Abdominal aortic aneurysms may be asymptomatic for years, yet as many as one in three eventually ruptures if left untreated. The prognosis for ruptured AAA is poor with over half of the people dying before reaching a hospital; therefore, patients’ benefit from early detection. Ultrasound of the abdomen is a simple, safe approach that is accurate and reliable in detecting AAAs and now Medicare will pay for a one-time ultrasound screening for AAA, for beneficiaries who meet at least one of the following criteria:

- Has a family history of abdominal aortic aneurysm
- Is male, age 65-75
- Has smoked at least 100 cigarettes in his lifetime

For your patient to receive this benefit, you must provide the patient with a referral for an ultrasound screening as a result of their initial preventive physical examination.

If there is a positive finding on the screening, the following is recommended:

- If the AAA is 3-4 cm – annual diagnostic studies should be ordered if you choose to follow the patient yourself.
- If the AAA is >4cm – a referral to a vascular surgeon should be ordered.

Vascular surgeons have partnered with primary care physicians in managing patients with vascular disease for more than 50 years and have excellent outcomes in AAA repair.

If you have any questions regarding this issue, please contact Sallie Urffer, Director, Division of Vascular and Metabolic Health, at 610-969-2584 or 610-402-CARE.

New Physician Assistant Regulations

As you may be aware, the Pennsylvania State Board of Medicine’s New Physician Assistant Regulations were recently published in final form in the Pennsylvania Bulletin.

These regulations contain changes for both the Physician Assistant as well as the Supervising Physician. Over the next few months, members of the Medical Staff Services Department will be reviewing these changes to determine how they will be incorporated at Lehigh Valley Hospital.

It is important to note that any additional privileges which may be added to the Physician Assistant’s written agreement as a result of these new regulations DO NOT automatically become effective within Lehigh Valley Hospital. Any changes or additions to hospital Allied Health Staff privileges must be submitted to Medical Staff Services as they will require approval by the Credentials Committee, the Medical Executive Committee, and the Boards of Trustees before these privileges can be exercised.

If you have any questions regarding this issue, please contact Ruth M. Davis, Director of Medical Staff Services, at 610-402-8975.

Sixth Triennial Physician Recognition Dinner

Mark your calendar! The sixth triennial Physician Recognition Dinner will be held on Saturday, March 31, at the Holiday Inn Conference Center in Fogelsville, Pa. Plan to attend the event to celebrate with your colleagues and recognize those who will be celebrating 25 and 50 years of service on the hospital’s Medical Staff. Invitations will be mailed later this month. Stay tuned!
Construction Update

With the ongoing construction at Lehigh Valley Hospital, the following information may be helpful for you and your patients when visiting the Cedar Crest & I-78 campus:

**Physician Parking**
Physicians are requested to park in Lot 6 (adjacent to the helipad) or Lot 5 (behind the MRI) if they have been provided with access to that lot. On Tuesdays, when there is an increase of physician traffic due to grand rounds, the gate to Lot 5 is raised between 7:30 and 9:30 a.m., to allow for physician overflow.

If Lots 5 and 6 both become full, or if a physician forgets or misplaces his/her badge, physicians should park in the five-story parking deck on Levels 1-3. Due to the upcoming construction of the two-story West Parking Deck, physicians should refrain from parking in front of the hospital. Physicians are also reminded that they should **not** use valet parking.

**Emergency Department Renovations**
Work will begin this month to expand the Emergency Department. The first phase will be to fence off a portion of the Emergency Parking Lot and establish a new covered walkway into the Emergency Department.

**Kasych Pavilion**
Crews are working to finish exterior windows and glazing. Interior work includes continuation of mechanical/electrical/plumbing rough-ins. Stud work and drywall work have begun on levels one, two and three. Work has begun on elevator cards and platforms.

**Highway Improvements**
Beginning this month, road work is expected to begin along Cedar Crest Boulevard, beginning at Fish Hatchery Road. The first stage will include tree trimming and relocating utility poles along Fish Hatchery Road. Future work will include adding turning lanes, updating signs, enhancing storm drainage and repaving. The projected completion of this construction is November 2007.

**Patient and Visitor Parking Just Got Easier**
Today, the Cedar Crest & I-78 campus has more parking available than before and there is more to come. The new two-story East Front Parking Deck is now open. The lower level is being used for valet parking. The upper level is for valet parking overflow, patient, visitor, and handicap parking. Please encourage all patients and visitors to use the five-story parking deck with free shuttle service to the front entrance and the two-level deck in front of the hospital.

**Site Work Renovations**
Storm water piping work continues along the south campus ring road and in the area of the southwest berm that borders LVH property and its neighbors. Work along the southwest berm will continue throughout the winter, weather permitting. Work has begun in the regional basin in front of the hospital along I-78.

*To get the latest construction update or if you have any questions, please call 610-402-CARE.*
Patients’ Rights Update

The Department of Health and Human Services Centers for Medicare and Medicaid Services (CMS) recently revised the hospital conditions of participation (COPS) 482.13A regarding patient complaints and grievances. These changes required the hospital to establish a process for prompt resolution of patient complaints and grievances. CMS has defined a complaint as a patient service/care issue that is resolved at the time and point of service by the staff involved with the patient, i.e., physician, nurse, care management, etc., and does not require additional follow-up. However, a grievance is a formal or informal, written or verbal complaint that is made by the patient or patient designee related to a service/care issue that is not resolved promptly by staff present or received after the care has been delivered. A grievance requires a written response to the patient within seven business days by the Director of the unit (for nursing grievances) and/or Department Chair or their designee (for physician grievances).

Why is this important to you? As physicians, the communication between you and the patient and you and your colleagues are crucial to both patient care and patient satisfaction. This directly correlates to the two physician questions on Press Ganey (the patient satisfaction survey tool): “Physician’s concern for your questions and worries” and “How well the physician kept you informed.” Addressing the patients’ questions and concerns at the point of care allows them to become a teachable moment rather than a potential source of dissatisfaction and ultimately a grievance.

For more details, please refer to the Grievance Policy in the Administrative Manual, which is available on-line through the hospital’s intranet homepage under “RESOURCES” – “Applications.” If you have any questions, please call Kim Badillo or Stephanie Genovese in the Department of Service Excellence at 610-402-8222.

Documentation Improvement Tip of the Month

The principal diagnosis is defined as the condition established after study to be chiefly responsible for admission of the patient to the hospital. This would also pertain to patients who died right after admission. The documentation of "Death" as the principal diagnosis is an uncodable condition. The physician needs to document the etiology for the patient’s death or cardiac/respiratory arrest. If this information is not in the medical record, a physician query will be sent to the attending physician for clarification.
Darbepoetin alpha ICU Study

This is a prospective, single arm study to evaluate the erythropoietic responsiveness, as measured by change in reticulocytosis, associated with once weekly administration of 100 mcg darbepoetin alfa (Aranesp®) in patients admitted to the intensive care unit with hemoglobin < 11g/dL. The study will also be looking at red blood cell transfusion requirements and change in hemoglobin levels from baseline. Study participation will begin on the third day of admission to the ICU and will last up to 43 days while in the ICU. Any patients with active bleeding, hemolysis, red blood disorders, or prior treatment with ESPs will not be allowed to participate.

Principal Investigator:
Daniel E. Ray, MD, Division of Pulmonary/Critical Care Medicine

Study Coordinator: Sharon Kromer, RN, BSN, Department of Medicine—Research

If you have any questions regarding this study, please call the Department of Medicine Research office at 610-402-1592 or 610-402-1635. For study referrals, please page the coordinator on call at 610-402-5100 0999.

Training Compliance

As part of our ongoing pursuit of excellence in our clinical research enterprise, Lehigh Valley Hospital and Health Network instituted the requirement for completion of training in human research subject protection by all investigators and their staff by January 1, 2007. Six months prior to this deadline, the Research Participant Protection Office (RPPO) provided access to training through the Collaborative IRB Training Initiative (CITI) program. This training takes approximately three hours to complete on-line. Unfortunately, not all investigators and their staff have completed this required training. Therefore, effective January 1, 2007, completion of the CITI training program by an investigator and his/her staff will be required before a new research application from that investigator can be accepted by the IRB Office.

If you have any questions regarding this issue, please contact the Research Participant Protection Office at 610-969-2525.

News from the Libraries

Reminder – LVHHN Digital Library Services provides access to e-books. To connect, go to the hospital’s intranet homepage, click on “Departments” – “Non-Clinical” – “Library Services” – “Electronic Books – Browse by subject.”

Just to name a few, available books include:

× Schwartz – Principles of Surgery. 2004
× Harrisons – Principles of Internal Medicine. 2004
× Kaplan & Sadock’s – Comprehensive Textbook of Psychiatry. 2004
× Institute of Medicine – Preventing Medicine Errors. 2007

If you have any questions, please call Library Services at 610-402-8410 or 610-969-2263.
Raquel M. Pasimio, MD, Division of Pediatric Subspecialties, Section of Cardiology, was recently notified by the American Board of Pediatrics that she successfully passed the 2006 Pediatric Cardiology Certifying Examination and is now certified in Pediatric Cardiology.

Dr. Pasimio, who joined the hospital’s Medical Staff in April 2006, is in practice with Children’s Heart Center of Northeastern PA.

Charles J. Scagliotti, MD, Division of General Surgery, was recently notified by the American Board of Surgery that he successfully completed the 2006 Recertification Examination and is now recognized as Recertified in Surgery.

Dr. Scagliotti has been a member of the hospital’s Medical Staff since July 1976. He is in private practice with Dale A. Dangleben, MD.

Eric P. Wilson, MD, Chief, Division of Vascular Surgery, was recently notified by the American Board of Surgery that he successfully completed the 2006 Recertification Examination and is now recognized as Recertified in Surgery.

Dr. Wilson, who joined the hospital’s Medical Staff in January 2001, is in practice with Peripheral Vascular Surgeons, PC.

7-Tower Now Opened at LVH-Muhlenberg

7-Tower, the new 12-bed unit at LVH-Muhlenberg, opened on January 8. The unit, which is capable of monitoring 10 telemetry patients, will serve medical 23 hour observation patients as well as Medical/Surgical patients.

Tami Meltsch is the Director of the new unit. The phone number for the unit is 484-884-7180; the fax number is 484-884-7195.
Upcoming Seminars, Conferences and Meetings

Emergency Medicine Grand Rounds
Emergency Medicine Grand Rounds are held on Thursdays, beginning at 8 a.m. (unless otherwise noted) at various locations. Topics to be discussed in February will include:

**February 1 – Temple University School of Medicine**
- Emergency Medicine Resident Wellness Day

**February 8 – LVH-M 4th Floor Classroom**
- Resident Lecture Series – Amy Aldrich, DO
  - “Pediatric Respiratory Illness” – Vivian Kane, MD
  - “Electrolyte Abnormalities” – Colleen Wladyslawski, MD
- Rosen’s – Gavin Barr, Jr., MD

**February 15 – EMI – 2166 S. 12th Street**
- Gameshow – “Who Wants to be an ED Physician” – Tony Werhun, MD, and Perry Fooskas, MD
- Resident Lecture Series – Shawna Murphy, DO
  - “Acute Renal Failure and Dialysis” – Michael Weigner, MD
- Rosen’s – Gavin Barr, Jr., MD

**February 22 – EMI – 2166 S. 12th Street**
- Annual GME Report – J.P. Orlando, Administrative Director of Medical Education
- Resident Lecture Series – Monisha Bindra, DO
- “Emerging Infectious Diseases” – Jennifer White, MD
- Rosen’s – Gavin Barr, Jr., MD

For more information, please contact Dawn Yenser in the Department of Emergency Medicine at 484-884-2888.

Family Medicine Grand Rounds
Family Medicine Grand Rounds are held the first Tuesday of every month from 7 to 8 a.m., in the Educational Conference Center #1 at Lehigh Valley Hospital – Cedar Crest & I-78, located in the Anderson Wing across from the Library, and teleconferenced to the Educational Conference Center, Room B, at LVH-Muhlenberg, unless otherwise noted. The topic for this month is as follows:

**February 6** – “What Makes Primary Care of Children with Sickle Cell Different from Routine Well Child Care?” – Lesley A. Simpson, MD, Division of Pediatric Subspecialties, Section of Hematology-Medical Oncology

For more information, please contact Sue Turi in the Department of Family Medicine at 610-969-4894.

Geriatric Trauma Conference
The next Geriatric Trauma Conference will be held on **Wednesday, February 7**, beginning at noon, in Classroom 1 in the Anderson Wing at Lehigh Valley Hospital – Cedar Crest & I-78. The topic of discussion will be:

“Pulmonary Disease in the Elderly” – Daniel E. Ray, MD, Division of Pulmonary/Critical Care Medicine

For more information, please contact Marie Locher, Trauma Development, at 610-402-8464.

Institutional Review Board Lecture Series
The Research Participant Protection Office is offering instructional sessions. The topic and dates for February are as follows:

- “How to Differentiate Human Subject Research from QA/QI Project” – Classroom 2, Anderson Wing, Lehigh Valley Hospital – Cedar Crest & I-78
  - February 5 — 7:30 a.m.
  - February 21 — 2 p.m.

For more information, contact Lisa Gogel in the Research Participant Protection Office at 610-969-2525.

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 videoconferenced to the to the First Floor Conference Room at LVH-Muhlenberg. Topics to be discussed in February will include:

Continued on next page
Continued from Page 10

... February 6 – “Update in Acute Coronary Syndromes: How to sort out the wheat from the chaff in ACS and during my Training” – David A. Cox, MD, Division of Cardiology

... February 13 – “My Experience in Africa” – Linda Kornfeld, MD, Internal Medicine Resident

... February 20 – “Neurology Update” – Gary W. Clauser, MD, Division of Neurology

... February 27 – TBA – Michael J. Moritz, MD, Section of Transplantation Surgery

For more information, please contact Theresa Marx in the Department of Medicine at 610-402-5200.

Neurology Conference
The Division of Neurology conferences are held on Thursdays, beginning at noon. All conferences this month will be held in Classroom 1, in the Anderson Wing at Lehigh Valley Hospital, Cedar Crest & I-78, and teleconferenced to the First Floor Conference Room at LVH-Muhlenberg. Topics to be discussed in February will include:

... February 1 – “Parkinson’s Disease” – Peter J. Barbour, MD

... February 8 – “Non-Motor Complications of Parkinson’s Disease” – Peter J. Barbour, MD

... February 15 – Division of Neurology meeting

... February 22 – “Restless Leg Syndrome” – Peter J. Barbour, MD

For more information, please contact Sharon Bartz, Program Coordinator, Neurosciences and Pain Research, at 610-402-9008.

OB/GYN Grand Rounds
The Department of Obstetrics and Gynecology holds Grand Rounds every Friday morning from 7:15 to 8:15 a.m., in the Auditorium of Lehigh Valley Hospital – Cedar Crest & I-78, unless otherwise noted. Topics to be discussed in February will include:

... February 2 – Gynecologic Tumor Board

... February 9 – Mock Oral Boards – No Grand Rounds

... February 16 – OB M&M

... February 23 – Journal Club

For more information, please contact Teresa Benner in the Department of Obstetrics and Gynecology at 610-969-4515.

Pediatric Grand Rounds
The Department of Pediatrics holds Grand Rounds every Tuesday, beginning at 8 a.m., in the Educational Conference Room #1 at Lehigh Valley Hospital – Cedar Crest & I-78, unless otherwise noted. Topics to be discussed in February will include:

... February 6 – “Abnormal Head Shapes” – Mark Dias, MD, Professor of Neurosurgery, Vice Chair Clinical Neurosurgery, Chief of Pediatric Neurosurgery, Milton S. Hershey Medical Center

... February 13 – “Type II Diabetes in Children” – Arnold H. Slyper, MD, Division of Pediatric Subspecialties, Section of Endocrinology

... February 20 – “Inflammatory Bowel Disease” – Puneet Gupta, MD, Division of Pediatric Subspecialties, Section of Gastroenterology

... February 27 – TBA

For more information, please contact Kelli Ripperger in the Department of Pediatrics at 610-969-2540.

Psychiatry Grand Rounds
The next Department of Psychiatry Grand Rounds presentation will be held on Thursday, February 15, beginning at noon (registration at 11:45 a.m.) in the Educational Conference Center, Rooms C and D, at LVH-Muhlenberg. The topic of discussion will be:

“New Medical Treatment of Alcohol Dependence” – James Hegarty, MD, MPH, Vice Chair and Professor, Department of Psychiatry, Penn State College of Medicine

For more information, please contact Tammy Schweizer in the Department of Psychiatry at 610-402-5255.

Continued on next page
Spine Conference

Conferences relating to interesting spine cases are held the first Wednesday of every month beginning at 7 a.m. Attendees typically include spine surgeons, neurosurgeons, physiatrists, pain management specialists, radiologists, among others. All clinicians are invited to bring interesting cases to this meeting.

The next Spine Conference will be held on Wednesday, February 7, in Educational Conference Room #1 in the Anderson Wing of Lehigh Valley Hospital, Cedar Crest & I-78.

For more information, please contact James C. Weis, MD, Division of Orthopedic Surgery, or Lorraine Pasieka, Clinical Coordinator, at 610-973-6339.

Surgical Grand Rounds

Surgical Grand Rounds are held on Tuesdays, beginning at 7 a.m., in the Auditorium of Lehigh Valley Hospital – Cedar Crest & I-78, and via videoconference in the First Floor Conference Room at LVH-Muhlenberg. Topics to be discussed in February will include:

... February 6 – “When Bad Things Happen to Good Surgeons: Avoiding Electrosurgical Misadventures During Laparoscopy” – Roger C. Odell, Chairman, Encision, Boulder, Col.

... February 13 – “The Scar Beyond the Burn” – Sigrid A. Blome-Eberwein, MD, Division of Burn/Trauma-Surgical Critical Care/Plastic Surgery

... February 20 – “Management of the Injured Urethra” – Matthew Janiga, MD, Urology Resident, Penn State University

... February 27 – “Combat Trauma” – Steven Thomas, MD, Chief Plastic Surgery Resident

For more information, please contact Cathy Glenn in the Department of Surgery at 610-402-7839.

Papers, Publications and Presentations

Roberto CM Bergamaschi, MD, PhD, Division of General Surgery and Medical Director, Minimally Invasive Surgery Program, co-authored the article, “Laparoscopic Colorectal Surgery,” with General Surgery resident, Troy Hixson, MD, which appeared in European Surgery (2006;38:390-392).

Indru T. Khubchandani, MD, Division of Colon and Rectal Surgery, was an invited guest at the Association of Surgeons of India Conference at Varanasi, India, from December 25-30, 2006. Dr. Khubchandani gave a keynote address at the main congress hall on “Squamous Cell Cancer of the Anal Canal.” At the Associated Meeting of the Association of Colorectal Surgeons of India, he gave a lecture on “Pruritus Ani, Story of Anal Itch.”

The Association of Colorectal Surgeons of India initiated the Khubchandani Oration which was titled “Current Status of Laparoscopy in Colorectal Surgery.”

Michael J. Moritz, MD, Chief, Section of Transplantation Surgery, co-authored two award winning abstracts and papers selected by the World Transplant Congress in July 2006. Both articles – “Pregnancy Outcomes in Solid Organ Transplant Recipients with Exposure to Mycophenolate Mofetil or Sirolimus” and “Successful Transplantation of Kidneys from Deceased Donors with Acute Renal Failure: Three-year Results” – were published in Volume 82, 2006 of Transplantation.

Robert X. Murphy, Jr., MD, Division of Plastic Surgery/Hand Surgery/Burn and Plastic Surgery Residency Program Director, Johnny Chung, MD, Division of Plastic Surgery, and Michael Bain, MD, former Plastic Surgery resident, co-authored the article, “A Triangular Pattern for Botox Forehead Rejuvenation,” which appeared in the September 2006 issue of Aesthetic Surgery.
Who’s New

This section contains an update of new appointments, address changes, status changes, resignations, etc. Please remember to update your directory and rolodexes with this information.

Medical Staff

New Appointments

Eduardo Lara-Torre, MD
Center for Women’s Medicine
Lehigh Valley Hospital
17th & Chew, P.O. Box 7017
Allentown, PA 18105-7017
610-402-1600    Fax: 610-402-7797
Department of Obstetrics and
Gynecology
Division of Gynecology
Section of Ambulatory Gynecology
Provisional Active

Arnold H. Slyper, MD
Pediatric Specialists of the Lehigh Valley
Lehigh Valley Hospital-Muhlenberg
2545 Schoenersville Road
Third Floor
Bethlehem, PA 18017-7384
484-884-3333    Fax: 484-884-3366
Department of Pediatrics
Division of Pediatric Subspecialties
Section of Endocrinology
Provisional Active

Address Changes

John Jaffe, MD
Lehigh Valley Physician Hospital Organization
1605 N. Cedar Crest Blvd.
Suite 411
Allentown, PA 18104-2323
610-969-0199    Fax: 610-969-0008

John S. Ziegler, DDS
124 N. 15th Street
Allentown, PA 18102-3608
610-435-3230

Suite Number and Fax Number Change

LVPG-Float Pool
Jennifer L. Dupre, DO
Frank G. Finch, MD
Stacey L. Lacey, MD
Amy T. Miller, DO
1605 N. Cedar Crest Blvd.
Suite 602
Allentown, PA 18104-2371
610-439-7506    Fax: 484-664-2290

Telephone Number Change

Chris CN Chang, MD
Phone: 610-402-7999

Change of Primary Address

Clifford H. Lyons, MD
LVPG-Float Pool
1605 N. Cedar Crest Blvd.
Suite 602
Allentown, PA 18104-2371
610-439-7506    Fax: 484-664-2290

Practice Changes

Jorge V. Perez De Armas, MD
Afterhours Physician Coverage Group
1240 S. Cedar Crest Blvd.
Suite 410
Allentown, PA 18103-6218
610-402-5200    Fax: 610-402-1675

Karan D. Singh, MD
Medical Associates of Monroe County
239 East Brown Street
East Stroudsburg, PA 18301-3005
570-421-3872    Fax: 570-421-8345

Continued on next page
Continued from Page 13

**Change of Status and Practice**

Crystal A. Maksimik, DO  
LVPG-Hospitalist Services  
1240 S. Cedar Crest Blvd.  
Suite 412  
Allentown, PA 18103-6218  
610-402-5369 Fax: 610-402-5959

From: Department of Medicine  
Division of General Internal Medicine  
Provisional Limited Duty  
To: Department of Medicine  
Division of Hospital Medicine/General Internal Medicine  
Provisional Active

**Change of Status**

Stuart A. Schwartz, DDS  
Department of Surgery  
Division of Oral and Maxillofacial Surgery  
From: Associate  
To: Honorary Status

**Resignations**

Frank J. Altomare, Jr., MD  
Department of Radiology-Diagnostic Medical Imaging  
Division of Diagnostic Radiology  
Section of Nuclear Medicine

Robert K. Bryan, DDS, MS  
Department of Dental Medicine  
Division of Orthodontics

Sara C. Karabasz, DMD  
Department of Dental Medicine  
Division of Orthodontics

Johanna H. Klaassen, MD  
Department of Psychiatry

Ronald A. Krisch, MD  
Department of Psychiatry

Lori M. Proctor, DPM  
Department of Surgery  
Division of Podiatric Surgery

Charles D. Saunders, MD  
Department of Surgery  
Division of Urology

John J. Scaffidi, Jr., MD  
Department of Obstetrics and Gynecology  
Division of Primary Obstetrics and Gynecology

Thomas J. Tanzosh, DMD  
Department of Dental Medicine  
Division of General Dentistry

Adriaan J. vanGaalen, MD  
Department of Obstetrics and Gynecology  
Division of Primary Obstetrics and Gynecology

Karen K. Yeo, DDS  
Department of Dental Medicine  
Division of Prosthodontics

**Allied Health Staff**

**New Appointments**

Lori A. Clark, CRNA  
Certified Registered Nurse Anesthetist  
(Lehigh Valley Anesthesia Services, PC – Thomas M. McLoughlin, Jr., MD)

Sean B. Conkle, OTC  
Orthopedic Technologist Certified  
(Coordinated Health – Emil J. DiIorio, MD)

Alfredo P. Curtis  
Anesthesia Technical Assistant  
(Lehigh Valley Anesthesia Services, PC – Thomas M. McLoughlin, Jr., MD)

Michelle E. Karol  
Anesthesia Technical Assistant  
(Lehigh Valley Anesthesia Services, PC – Thomas M. McLoughlin, Jr., MD)

Continued on next page
Continued from Page 14

Susan A. Kunsman, CRNA
Certified Registered Nurse Anesthetist
(Lehigh Valley Anesthesia Services, PC – Thomas M. McLoughlin, Jr., MD)

Matthew P. Law, PA-C
Physician Assistant-Certified
(Nephrology/Hypertension Associates of Lehigh Valley – Arthur L. Levine, MD)

Daniel B. Taylor, CRNP
Certified Registered Nurse Practitioner
(Surgical Specialists of the Lehigh Valley – James F. Reilly, MD, MBA)

Jacaline P. Wolf, CRNP
Certified Registered Nurse Practitioner
(Brndjar Medical Associates, PC – Jon E. Brndjar, DO)

Change of Supervising Physician

Erin M. Thompson, PA-C
Physician Assistant-Certified
(Lehigh Valley Heart & Lung Surgeons)
From: Fernando M. Garzia, MD
To: James K. Wu, MD

Change of Supervising Physician and Group

Elizabeth A. Kamp, PA-C
Physician Assistant-Certified
From: The Head & Neck Center PC – Edward A. Tomkin, DO
To: Neurology & Sleep Medicine, PC – Jeffrey D. Gould, MD

Additional Supervising Physician

Constance A. Molchany, CRNP
Certified Registered Nurse Practitioner
(Vascular Health Services – Nelson P. Kopyt, DO & Matthew H. Corcoran, MD)
Additional Supervising Physician – John E. Castaldo, MD

Removal of Supervising Physician

Suzanne Menniti, PA-C
Physician Assistant-Certified
(Lehigh Valley Family Health Center – Abby S. Letcher, MD)
Removal of – Eric J. Gertner, MD

Resignations

Daniel P. Graves, CPNP
Certified Pediatric Nurse Practitioner
(LVPG-Pediatrics)

Maria A. Slog, PA-C
Physician Assistant-Certified
(Allen Ear Nose & Throat Associates)

William J. Waldron, CRNA
Certified Registered Nurse Anesthetist
(Lehigh Valley Anesthesia Services, PC)

SAVE THE DATE

Lehigh Valley Hospital
Resident Graduation
Friday, June 8, 2007
6 p.m.
DeSales University Center
Medical Staff Progress Notes

Linda L. Lapos, MD
President, Medical Staff

Matthew M. McCambridge, MD
President-elect, Medical Staff

Donald L. Levick, MD, MBA
Past President, Medical Staff

John W. Hart
Vice President, Medical Staff Services

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

Medical Executive Committee

Scott W. Beman, MD
Gregory Brusko, DO
Michael J. Consueos, MD
Wayne E. Dubov, MD
Peter E. Fisher, MD, MBA
John P. Fitzgibbons, MD
L. Wayne Hess, MD
Michael W. Kaufmann, MD
Sophia C. Kladias, DMD
Richard A. Kolessky, MD
Robert Kricun, MD
Linda L. Lapos, MD
Donald L. Levick, MD, MBA
Edgardo G. Maldonado, MD
Matthew M. McCambridge, MD
Thomas M. McLaughlin, Jr., MD
William L. Miller, MD
Victor R. Risch, MD, PhD
Deborah W. Sundlof, DO
Elliot J. Sussman, MD
Ronald W. Swinfard, MD
Gary W. Szylowsky, MD
John D. Van Brakle, MD
L. Kyle Walker, MD
Michael S. Weinstock, MD
Patrice M. Weiss, MD
John F. Welkie, MD
James T. Wertz, DO
Robert E. Wertz II, MD
Thomas V. Whalen, MD
Matthew J. Winas, DO

We’re on the Web!
Visit the Medical Staff Services website through the hospital’s Internet Homepage at:
www.lvh.org and select “Professionals”

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

Articles should be submitted by e-mail to janet.seifert@lvh.com or sent to Janet M. Seifert, Medical Staff Services, 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 contact Mrs. Seifert by e-mail or phone at (610) 402-8590.