

Forum

A NEWSLETTER ESTABLISHED AND COMPLETED BY THE MEDICAL & DENTAL STAFF OF ROCHESTER GENERAL HOSPITAL
MORE OF YOUR MONTHLY UPDATES CAN BE FOUND AT <http://www.rochestergeneral.org/mds>

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JEANNE GROVE, DO, EDITOR

24/7 PHYSICIAN HOTLINE NUMBER

922-4414

DIRECT ADMISSION NUMBER:

922-7333

CALL THE HOSPITALIST
FOR YOUR PATIENT

922-7444

2011 Quarterly Staff Meetings

6/17, 9/16, 12/16

7:30 - 9:00 a.m. Twig Auditorium

**50% attendance recommended
for all attending Physicians**

Message from the MDS President

Think *Pink*

Follow these instructions. Close your eyes. Think of the color **pink**. What do you see? Wait...think again... think **pink**...ask yourself again...what do you see? As you concentrate on thinking **pink**, read these quotes.

"Now let me bring you up to speed. We know nothing! You are now up to speed."

"We shall see who is the one that will be saying nonsensical things that are sensing of nonsense."

"What do you think this is? No, it only looks like a tape recorder. It is actually a pen! So you can write with it and no one will know. Bingo!"

Are you thinking of the same pink that I am? Here is one last quote and clue. "Compared to Clouseau, Attila the Hun was a Red Cross volunteer."

These humorous quotes come from a few of the eleven different movies that comprise The Pink Panther series. The first movie debuted in 1963 and the most recent was produced in 2009. Initially, The Pink Panther was so popular that both a TV and cartoon series were produced in the 1960's and 70's. Notwithstanding the popularity of the Pink Panther, pink flamingos successfully compete for front of mind imagery in pink American pop culture. Valentine's Day also packs a powerful pink punch as well.

Depending on your frame of reference and environmental influences your pink thoughts may have been worlds away from the trivial amusements mentioned above. For the politically aware among us, you may have thought about the women's anti-war organization named Code Pink. This organization was launched on November 17, 2002 in opposition to President Bush's declaration of war against Iraq. Closer to home CODE PINK means a birth without an attending physician at the Newark Wayne Community Hospital Emergency Department. At Strong Memorial Hospital CODE PINK means an infant abduction. What a dreadful miscalculation of terminology! In one locale, CODE PINK means the joyous birth of a new citizen while in the other the same words communicate the devastating disappearance of a cherished child. At Rochester General Hospital an infant abduction is CODE 77 while law enforcement agencies throughout the nation all use the standardized term Amber Alert. Like a perverse game of Uno, health care workers must decipher



Dr. Robert Mayo,
President RGH MDS

NEW CRITICAL CARE DIVISION

We are pleased to announce the creation of an integrated Critical Care division within the Department of Medicine at RGHS.

This new organization will enhance the quality and consistency of the critical care services we provide to our patients - furthering our efforts to operate as One Great Health System.

The new division will include members of the Department of Medicine, as well as critical care specialists in Surgery and other disciplines from across RGHS. By establishing a centralized Critical Care division, we can more effectively focus and standardize our critical care services and processes to better support the increasing number of critically ill patients within and outside of RGH and NWCH. The RGHS Critical Care Division will also be available to assist our 'partner' independent affiliated hospitals in the secondary service area in strengthening their critical care capabilities through telemedicine, on site consultation, and enhanced educational opportunities in collaboration with RGHS critical care physicians.

This division will serve much like a center of excellence, ensuring that superb care is consistently

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delivered to every critically ill patient, at every encounter, every time. Having a centralized Critical Care division will also provide a stronger, more collaborative resource for our exceptional nursing staff in our ICUs and other critical care areas to further enhance teamwork and improve patient outcomes.

Leading the Critical Care division will be Dr. Todd Sheppard who is currently an attending physician in the Pulmonary and Critical Care division of the Department of Medicine. Prior to joining RGH in 2008, Dr. Sheppard was Assistant Professor of Medicine at the University of Pittsburgh Medical Center. Dr. Sheppard received his M.D. degree from the College of Physicians and Surgeons at Columbia University and completed his training in Pulmonary and Critical Care Medicine at the University of Illinois.

This enhanced commitment to providing unparalleled service to our critically ill patients brings us another step closer to achieving our vision to be the community's healthcare provider of choice. We look forward to providing you with future updates on the new Critical Care division as we bring it to full operation over the next few months.

Message from the MDS President, continued

the red thread of meaning as one term transitions from colors to numbers and back again.

The mental gymnastics required to navigate through this terminology conundrum greatly increases the risk of misunderstanding at critical times when clear and unmistakable communication is needed most. This risk is highlighted by a well publicized case from Oregon. A per diem nurse was working in a hospital where CODE BLUE meant security stat (the guys in blue). To her CODE BLUE meant cardiac arrest. Her misuse of the local code resulted in a significant delay in stat cardiac resuscitation because security officers responded to her CODE BLUE distress call instead of the cardiac arrest team. A miscommunication so basic and so fundamental seems nearly intolerable. What is our remedy?

The antidotal principles most meaningful in this case and for our own unclear terms are simplification and standardization. For the past 1.5 years the Monroe County Medical Society in collaboration with Strong Memorial Hospital, Unity Health System, Highland

Hospital, Lakeside Hospital, and Rochester General Health System has been working on a regional wide effort to simplify and standardize emergency terminology in our regional healthcare environment. The terminology has been simplified by using clear language and standardized across the collaborating institutions. For example, instead of CODE RED the announcement will be Fire Alert (location added).

Clear language is known to reduce anxiety, improve response times, and increase efficiency and collaboration between team members, patients and visitors. Rochester General Health System will be launching these new terms on Wednesday, July 27th. The terms are included in the Forum for your review and study. Please distribute them to your office staff, partners and team members. I believe this effort will be well worth the small investment in time it will require to implement and follow. After all, if your CODE BLUE or CODE PINK or CODE BROWN is called who do you want to respond?

New RGH Senior Leadership Position & Appointment

Brian D. Jepson, President of Rochester General Hospital

I am pleased to announce the promotion of Dr. Robbin Dick to the position of Vice President of Clinical Efficiency & Flow. This position reports directly to me with a liaison relationship to the RGH Vice President Medical Director.



This position has been created to provide dedicated executive direction and support to the organization in three critical performance areas:

- Utilization Management,
- Clinical Efficiency and
- Patient Flow.

The following care delivery functions will have primary or dual reporting relationships to this position: the medical observation unit, patient flow, lean six sigma, clinical efficiency, bed assignment, admission and discharge process, system care management, complex care committee, readmission committee, system utilization/denials management, physician contract liaisons, and medical necessity. Within each of these functions, we have Annual Performance Goals that all RGH leaders are expected to support. By establishing this position, we are able to ensure that our leaders will have the clear direction needed to contribute to the advancement of these goals. Additionally, it supports our important efforts to implement an integrated care delivery model across RGH and the health system.

Dr. Robbin Dick currently serves as the Senior Medical Director for Observation Services and Patient Throughput. This well-deserved promotion provides an opportunity to extend and expand Robbin's current leadership efforts in support of our objective to build and maintain the safest, most efficient care delivery process possible. Under Robbin's leadership, we will continue our focus on patient safety, reducing length of stay, and creating additional inpatient capacity to support future growth.

Please join me in congratulating Robbin on his promotion and wishing him all the best in his new role.

MDS Profile

Committed Clinician and Clergyman, Peter W. Bushunow, M.D.

Dr. Peter Bushunow is an oncologist in the Lipson Cancer Center here at RGHS. He attended medical school at Washington University in St. Louis, MO and completed his fellowship in Oncology at SUNY Upstate. His clinical interests include neuro-oncology, and the management of nausea in oncology patients. He has published several articles related to these interests and is the Director of Clinical Trials at the Lipson Cancer Center.



Dr. Bushunow is also a devoted Orthodox Christian. One year ago he was ordained a Deacon in the Holy Protection Orthodox Church. As a member of the clergy, he is required to follow, as much as possible, the sacred traditions of the Church. These traditions are derived from the Old Testament and demonstrate outward expressions of devotion to God, for example, uncut hair and beards. This explains why Dr. Bushunow has noticeably changed his hair style over the past year. Outside of the hospital, you will see Dr. Bushunow in a cassock -- a traditional long robe. Ordination to the clergy is an important step for Dr. Bushunow, who has been a life-long active member of his church.

We commend him for his commitment to being both a leader and a servant in his church community and for his contributions to excellent patient care here at RGHS.

Pharmacy Student Preceptors Recognized

Mindee Hite, Pharm.D. (RGH), Cori Wyman, Pharm.D. (GRIPA), and Kevin Silinskie, Pharm.D. (RGH) were recently recognized by St John Fisher College & Wegmans School of Pharmacy for their leadership, service, and involvement in Precepting Pharmacy Students. Dr Hite received the highest award, the 2011 Health System Student Preceptor of the year. Dr Wyman and Dr Silinskie were nominated for Preceptor of the year. St John Fisher has over 400 Pharmacist Preceptors and less than 5% are nominated. **Congratulations to Mindee, Cori, and Kevin.**



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Community Physician Program

TRAINING REQUIREMENTS FOR CARE CONNECT

As you know, Rochester General Health System will be transitioning to Care Connect, an Electronic Medical Record (EMR) system beginning this fall. On November 5, we will go live with our first implementation of Care Connect at Rochester General Hospital (RGH).

A key requirement of all new Care Connect users, including physicians, is that they are proficiency-certified based on standardized testing developed by Epic, our EMR software vendor. This certification ensures that we maintain the highest standards of safety and quality on behalf of all of our patients. As an RGH Medical and Dental Staff member, you will be required to be trained and certified on Care Connect in order to practice at the hospital after November 5, 2011.

We are writing well in advance to let you know that our aim is to make this process as easy and convenient for you as possible. RGHS is creating a Care Connect training and certification program designed to meet the specific requirements of our Medical and Dental Staff. This training will be provided free of charge, enabling you to receive continuing education credits at no personal expense. In addition to the specific EMR training, we will also offer support resources to assist you with computer and keyboarding skills, if needed.

The Care Connect training will be conveniently centralized at our new Riedman Campus and will begin in early September. The program will consist of a combination of classroom training and eLearning modules. With 19 dedicated training rooms and a variety of flexible scheduling options, you will be able to select the training dates and times that are most suitable to you.

We are currently in the process of finalizing our training plans and schedules and will provide you with further details about the classes, total required training hours and scheduling options in June. In the meantime, if you have any questions, please don't hesitate to contact either one of us directly.

As physicians ourselves, we recognize that it's not easy to add these types of additional requirements to our busy schedules. We also understand that this change will take some time to adjust to. Please know that we sincerely appreciate your commitment to do what is necessary to support our successful transition to Care Connect. We are confident that this early investment of your time will result in significant benefits over the long-term as we dramatically improve our ability to communicate, collaborate and operate more efficiently and effectively as One Great Health System.

Influenza Season Update

Alexandra V. Yamshchikov M.D., Hospital Epidemiology
Linda Greene, R.N., Director, Infection Prevention



This message is to provide an update on influenza activity in the greater Rochester area, and to give guidance regarding continuation of screening and vaccination against influenza in our patient community here at RGHS. Although we are nearing the end of influenza season for 2011 with significant declines in flu activity being reported by the NYS and county health departments, we continue to diagnose new influenza cases in patients tested through our RGHS laboratories at a rate of 1-6 new diagnoses per day.

Based on these trends, RGHS Hospital Epidemiology and Infection Prevention is recommending continuing to offer influenza vaccination to our inpatients and outpatients through the end of May to offer maximal protection to our patients, particularly those considered high risk for influenza complications, as the influenza season winds down over the next several weeks. The RGHS laboratories will also continue to offer rapid influenza testing throughout the month of May to facilitate diagnosis of any residual cases of influenza in our community.

Please contact Hospital Epidemiology or Infection Prevention with any questions or concerns.

CHANGES TO YOUR RGH DIRECTORY

For those of you who have access to the RGHSNet, don't forget the on-line directory in Departments and Medical & Dental Staff. For those of you who do not have access to the ViaNet, there is a monthly excel directory available for you upon request. Contact Mary Lou McKeown at 922-4259 or marylou.mckeown@rochestergeneral.org. And Finally, when you are in CCS you will find a full directory under VIEW and STAFF DIRECTORY for your use.

RGH MDS Welcomes the Following New Members

Carla Culhane, NP, Dept of Surgery/Urological Surgery
 1202 Driving Park Ave #5, Newark, NY 14513
 (315) 359-2690

Leslie Kaiser, NP, Dept of Medicine/Geriatrics
 1550 Empire Blvd - Hill Haven, Webster, NY 14580
 (585)922-2214

Barbara Kircher, MD, Dept of Cardiac Services/Cardiology
 2365 S. Clinton Ave #100, Rochester, NY 14618
 (585) 442-5320

Christopher LeBerth, RPA-C, Dept of Surgery/Urological
 1425 Portland Ave #173, Rochester, NY 14621
 (585) 922-3458

Lorin Meyer-Gebo, NP, Dept of Medicine/Geriatrics
 1550 Empire Blvd - Hill Haven, Webster, NY 14580
 (585)922-2214

Amy McLean, RPA-C, Dept of Surgery/General Surgery
 1425 Portland Ave #173, Rochester, NY 14621
 (585) 922-3458

David Rempe, MD, Dept of Neurology
 601 Elmwood Ave Box 645, Rochester, NY 14642

Debra Schipper, NP, Dept of Medicine/Geriatrics
 1550 Empire Blvd - Hill Haven, Webster, NY 14580
 (585)922-2214

Dawn Schmitt, NP, Dept of Medicine/Geriatrics
 1550 Empire Blvd - Hill Haven, Webster, NY 14580
 (585)922-2214

Robert Shelly, MD, Dept of Medicine/Internal Medicine
 Refer & Follow, 6692 Middle Rd #2100, Sodus, NY 14551
 (315) 483-1199

Judith Sobowale, MD, Dept of Medicine/Internal Medicine
 Refer & Follow, 800 Carter St., Rochester, NY 14621
 (585)-338-1400

CHANGE TO INACTIVE

Mary Ellen Alescio, NP
 Farid Berenji, MD
 Patricia Beverly, CNM
 Aaron M. Cook, DMD
 Norman Gray, Jr., MD
 Nicholas Loffredo, RPA-C
 Brenda Lyaski, NP

Gopiram Pansari, MD
 Regina Rodrigues-Garvin, MD
 Jennifer Rothschild, MD
 Margaret Sims, RPA-C
 David Spector, MD
 Thomas Urschel, PA
 Terry Yonker, NP

Community-Wide Plain Language Codes

MONROE CO. MEDICAL SOCIETY TERMINOLOGY	RGHS ADAPTATION	OLD RGH CODE	CONDITION
Fire Alert (followed by location)	Fire Alert (followed by location)	Code Red	Fire alarm received
Fire Alert Confirmed (followed by location)	N/A		Actual fire condition
Code Team (followed by location)	Code Team (followed by location)	Code Blue	Adult cardiac/respiratory emergency
Pediatric Code Team (location)	Pediatric Code Team (location)	Code Blue	Pediatric cardiac/respiratory emergency
Amber Alert	Amber Alert	Code 77	Infant/Toddler Abduction (can't walk unaccompanied)
Assistance Needed ... STAT or Security) (location)	Assistance Needed STAT ... Security or Engineering) (location)		Behavioral/Uncontrolled person incident
Critical Security Incident (location)	Critical Security Incident (location)	Code Orange	Critical Security Incident (weapon, bomb threat, active shooter)
Lockdown	Lockdown	Code Brown	Facility Lock Down and/or Shelter in Place
Command Center Activated-(leadership to respond or place) RGH	Command Center Activated-(Hospital Command Center Team report to ____) Medical-external Medical-internal Engineering	Code Yellow	Disaster (Internal or community, natural or manmade)
Command Center Activated-(leadership to respond or place) NWCH	Command Center Activated-(Obs Council to report to____)	Code Yellow	Disaster (Internal or community, natural or manmade)
Decontamination Team Alert			Hazardous Material Spill/Release-Decontamination Needed
Missing Person (location with description)	Missing Person (location with description)		Missing person of any age other than Amber Alert.
All Clear			Situation resolved



AMERICAN ACADEMY OF
FAMILY PHYSICIANS



Dear Healthcare Professional Colleague-

Pertussis – a vaccine-preventable disease - is killing vulnerable infants.

Pertussis (“whooping cough”) outbreaks are occurring all over the country, but most notably in California. Newborns and infants are especially hard hit by this disease. While disease can occur in all ages, infants less than 12 months are at highest risk for severe disease and death.

Infants begin their pertussis immunization series (Diphtheria-Tetanus-Acellular Pertussis or “DTaP”) at two months, however maximum protection is not achieved until the primary series is completed. Adolescents and adults are recommended to be immunized with a booster dose - “Tdap” – for adolescents this is preferably given at age 11-12 years.

Vaccinate parents, siblings, grandparents and caregivers of infants with Tdap.

The Centers for Disease Control and Prevention’s Advisory Committee on Immunization Practices (ACIP) recently made significant changes on the use of the adolescent and adult pertussis vaccine to increase vaccine coverage and protect vulnerable infants. These changes were made after review of safety and immunogenicity data, especially in age groups for which Tdap is not licensed. This letter supports those recommendations, and is a call to action for healthcare professionals to heed them.

ACIP now recommends use of Tdap in adults age 65 years and older and undervaccinated children ages 7 to 10 years and ACIP now recommends giving Tdap regardless of interval since last tetanus or diphtheria containing vaccine. By being vaccinated, close contacts of infants create a protective “cocoon” for newborns and infants who either cannot yet be vaccinated or have not completed their initial vaccine series. Studies have indicated that 75%-83% of infant pertussis cases with a known source exposure were caused by an infected household member. Parents and siblings are the most common source, with 55% of cases in infants linked to an infected parent.

Educate the families you care for about why it’s important to be up-to-date with Tdap vaccinations and where Tdap can be obtained. Offer Tdap vaccine especially to post-partum/breastfeeding women and families, if possible, before discharge from the hospital or birthing center. According to ACIP and the American College of Obstetricians and Gynecologists, a clinician may choose to administer Tdap to a pregnant woman in the 2nd or 3rd trimester in certain circumstances, such as a community pertussis outbreak.

Protect your patients – be vaccinated with Tdap yourself!

Previous outbreaks in newborn populations have been linked to exposure from infected healthcare workers. As healthcare professionals, we have a duty to promote patient safety and public health. Do not risk the health of your most vulnerable patients – get your Tdap vaccine, too.



Clinical Integration Contract with Monroe County

GRIPA is pleased and proud to announce a Clinical Integration contract with Monroe County covering their local employees and dependents.

This is a significant opportunity for the GRIPA network as it further demonstrates the increasing trend of employers to directly contract with a provider network of hospitals and physicians and represents another milestone in the success of GRIPA's Clinical Integration and the Accountable Care Medical Program. Demonstrating successful results with the employees for Monroe County as well as GRIPA's other contracted members increases the opportunity for more contracts. In addition, the likelihood of gain share goes up significantly. This contract will bring more members into the network, which will significantly benefit the Rochester General Health System, the specialists, and other ancillary providers.

GRIPA now has Clinical Integration contracts covering the local employees and dependents of :

- Rochester General Health System,
- LiDestri Food and Beverage,
- Paychex, and
- Monroe County

Clinical Integration promotes and supports coordinating care of members with chronic and other high-cost conditions; connecting GRIPA's Care Management Services in collaboration with physicians' offices to achieve a patient-centered care model engaging members in measurable improvement in quality and cost of care outcomes as reflected in our GRIPA Accountable Care Program Measures. Our GRIPA Care Managers are available to assist you in coordinating care for these members and can be reached at 585-922-1520.

To help identify contracted members that are in need of services and out of compliance with Accountable Care Medical Program measures, GRIPA offers Patient Outreach Reports. The use of these real time reports by the physician practices will have a tremendous impact on how the GRIPA network performs. Physician support and the patient outreach reports improve the quality of care by identifying those patients out of compliance with guideline-directed care; appropriate office visits or treatment goals. Accruing from this is a secondary benefit of adding to practice revenues by reaching out to these patients and filling "gaps in the schedule" most efficiently; as appropriate care indicates. We encourage offices to run this report weekly. By mid May, Monroe County employees and their dependents, in addition to all other contracted members, will be identified on the GRIPA Patient Outreach Reports if they are non compliant for services targeted by the GRIPA Accountable Care Medical Program. This report can be accessed through the GRIPA Connect Portal. We will be following up with physicians who need access or are having trouble running this report to ensure the network performs successfully.



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Care Connect Community Physician Program

In partnership with GRIPA, RGHS is pleased to be among the many health systems in the country to extend this best-in-class EMR and Practice Management (PM) offering to our RGHS-credentialed community physician practices.

If you have not already received an invitation you will be receiving one shortly to come and learn about the Care Connect, EPIC Electronic Medical Record System on Tuesday, June 7th from 5:30 – 8:30 pm and Wednesday, June 8th from 7 - 9 am at Mario's Italian Restaurant where you will see demonstrations and get information on pricing, features and benefits.

RSVP by June 1st to GRIPA Provider Relations at 585-922-1525.

CONGRATULATIONS!

GRIPA would like to congratulate **Mary Susan Napoleon, MD** on receiving The Dr. John Davis Physician Excellence Award!

This prestigious award to be presented to one Physician annually recognized by Patient Care Services staff as excellent in patient and family care, collaborative with the healthcare team, and committed to the mission of Newark Wayne Community Hospital and DeMay Living Center. The award is named "The Dr. John Davis Physician Excellence Award" to honor our dear friend, collaborator, advisor and comforter to patients, physicians, nurses and all who came to know him.