



ROCHESTER
GENERAL HOSPITAL
MEDICAL & DENTAL STAFF

APRIL 2009

Forum

A NEWSLETTER ESTABLISHED AND COMPLETED BY THE 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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24/7 PHYSICIAN
HOTLINE NUMBER
922-4414

DIRECT ADMISSION
NUMBER:
922-7333

2009 Quarterly Staff Meetings

6/19, 9/18, 12/18

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

50% attendance recommended
for all attending Physicians

PRESIDENT'S MESSAGE

Spring is in the air, the time of rebirth and renewal. It's the time of year when the robins return, our surroundings turn from gray to green and the days get longer, warmer and brighter.

It strikes me that this time of the year parallels what we have been experiencing here at Rochester General. So many positives are occurring and although we are not where we want to be in terms of patient care and service, things have improved dramatically. One only needs to look at our patient satisfaction scores, both on the floors and in the Emergency Department to see that things are improving. New services are growing all around us. We recently celebrated having completed over two thousand robotic procedures at RGH. Lithotripsy has added a new dimension to kidney stone care at RGH and the volumes have increased to the point where service times will be expanded and the new observation unit under the direction of Dr. Robin Dick has already improved patient flow and care through the ED; the only complaint I've heard regarding this wonderful new service is that we need more of it and administration is moving to double the available beds used in this process. Rochester General's volumes have been high and on a regular basis we are moving to create additional patient care space by opening beds and solarium on many floors. Physicians are being recruited, new models of care are being explored and attempts are being made to improve physician morale by improving the quality of care we render to our patients and the supports we offer our physicians and staff. It certainly is an exciting time to be at Rochester General Hospital.

No early spring is without its late winter storms and our hospitals parallel here has to do with the economy and the budget shortfalls at the state and federal levels. As Mark Clement has stated so eloquently, we are responding to those financial challenges and I believe our administration has done this in conjunction with the Medical Dental Staff in a thorough and thoughtful way to assure patient safety and service while ensuring our financial success.

In the spirit of growth and renewal I am happy to report that Dr. Atul Gupta, an interventional radiologist, and Dr. Brian Watkins, a surgeon, have agreed to join the Medical Dental Staff as appointees of the President and Executive Committee of MDS. You will recall we made a proposal to our medical and hospital boards to expand by two appointees to increase physician participation in



Richard Constantino, MD
President

Continued on page 7.

Congratulations!



Gerald Gacioch, MD
*Recipient of 2009
Father George Norton
Physician Excellence Award*

Nine physicians were nominated for this prestigious award.

William Bowen, MD
Anthony DiBenedetto, MD
Gerald Gacioch, MD
Sudhir Giriappa, MD
Ronald Robinowitz, MD
Ravi Singh, MD
Williams Rolls, MD
Robert Tatelbaum, MD
Joel Yellin, MD

Patient Care Services appreciates all of our physicians for helping Rochester General Hospital live the Magnet Vision.

Congratulations!



Jonathan Scott, RPA-C
Surgery/General Surgery
*Rochester General Hospital
Patricia Lewis
Adjunct Staff Award of
Clinical Excellence 2009*

MDS created this award of clinical excellence to be presented to one adjunct staff member annually. This individual will be recognized by the MDS as excellent in patient and family care, collaborative with the healthcare team, and serve as a role model to other healthcare professionals. This award is named to memorialize Patricia Lewis who provided exemplary high level, competent, compassionate care and was a leader whose efforts yielded much recognition for RGH.

*Physician Services at Rochester General Health System
Invite You to Join us for the Medical and Dental Staff*

Spring Physician Social

Tuesday, May 5, 2009

5:30pm-8:30pm

Monroe Golf Club

The Vista Ballroom

155 Golf Avenue, Pittsford, NY 14534

**Get reacquainted with colleagues and meet the newest members
of the Medical and Dental Staff**

Enjoy delicious hors d'oeuvres, pasta, carving stations and desserts

Please call 922-9435 by April 30, 2009 to RSVP

A Message From Mark Clement

By Mark Clement, President & CEO Rochester General Hospital, President Rochester General Health System

As you will recall, in December we announced that Rochester General Health System would enter into a strategic alliance with Rochester Institute of Technology that could reap great benefits for both organizations, and for our community, as the fields of science, technology and medicine continue to converge. At that time, RIT President William Destler and I announced that a Joint Steering Committee with representatives from both institutions would be formed to develop the framework and some guiding principles for this alliance. I am delighted to devote this "Forum Article" to update you-our medical and dental staff-on the progress we have made to date in shaping this important Strategic Alliance.

In January, the Joint Steering Committee was formed, comprising representatives from both organizations. Richard Freeman, MD, is representing RGHS as co-chair, joined by RIT's Sr. Vice President for Academic Affairs and Provost Jeremy Haefner, Ph.D. Other RGHS representatives include: Linda Becker (representing our Board of Directors); Richard Gangemi, MD; Ronald Kirshner, MD; Ralph Madeb, MD; Robert Mayo, MD; Bob Nesselbush; Ralph Pennino, MD; Hugh Thomas; and Ed Walsh, MD.

The Steering Committee is charged with four major tasks:

1. Develop a formal agreement or memorandum of understanding that will be presented to both Boards in April and will define, memorialize and guide the relationships which make up the Alliance during the initial start up and development phase.
2. Identify and recommend near term opportunities for collaboration, in which RIT faculty and RGHS physicians and staff can work together to achieve immediate, tangible results and begin to build a foundation of relationships.
3. Develop a formal, long term Strategic Plan, complete with mission and vision statements, as well as annual goals.
4. Serve as the initial governance structure to guide the early stages of the partnership, recognizing that the governance structure will likely evolve as the partnership develops and matures.

Over the past several weeks, the Steering Committee has been actively engaged in substantive discussions and is identifying immediate opportunities for meaningful and exciting collaboration in the areas of Education, Research and Shared Services. Each of these areas rep-

resents a great opportunity for both RGHS and RIT to strengthen and expand upon programs that will enable us to further elevate our level of quality and service. Here are some highlights from these initial discussions:

Education:

- Physician Assistant Program: Our system currently provides training for approximately one-half of RIT's PA students. Committee discussions have centered on the interest in creating Surgical Training and Masters Degree Specialty programs for PA's. We are also exploring the possibility of increasing the number of rotations for PA students to provide a broader, more encompassing experience.
- Other areas of educational collaboration include opportunities for development of new internships in many of the Life Sciences programs including Biomedical Photography and Medical Illustration. We are also exploring the use of RIT co-op students to work and learn in a wide array of technical, business and clinical roles and positions throughout our system.

Research:

- Drs. Walsh, Pichichero and Freeman recently spent an entire day at RIT at the invitation of Dr. Don Boyd, Vice President for Research, for an orientation to the research interests and capabilities of RIT faculty. Many possible collaboration areas were identified in discussions with faculty from the RIT School of Life Sciences; the Chester F. Carlson Center for Imaging Science; the Golisano College of Computing & Information Sciences; the Kate Gleason College of Engineering; and the National Technical Institute for the Deaf.
- The Steering Committee's Workgroup on Research, co-chaired by Dr. Walsh and Dr. Boyd, will identify the most promising projects for immediate partnership.

Shared Services:

- Many exciting opportunities for sharing services are being explored in early discussions. Examples include several potential areas in which RGHS can provide clinical services to RIT such as with student health, and the use of RIT's vast educational resources to assist RGHS with staff and corporate training.
- As a shared service to our community, RGHS and RIT are also sponsoring - in partnership with



Continued on page 4.

Hard-Core

By James Briggs MSPT, CMP

Outpatient Staff Physical Therapist at Rochester General Hospital

Do you have back pain or deal with patients suffering from back pain? Fitness experts say to train the core! Pilates, yoga, weight training, aerobics all accomplish this, but how does your "core" measure up? Are you sure that you're truly using your core during athletic or recreational endeavors? The body has the unique ability to accomplish complex movements in a number of ways which may or may not be biomechanically safe or anatomically and physiologically sound. Are we utilizing our musculoskeletal systems correctly or do we allow our bodies to take the path of least resistance? The core is made up of the transversus abdominis and multifidus musculature. They each have direct attachments to the lumbar spine and can therefore influence spinal stability. EMG studies have shown that there is core muscle activation detected milliseconds before any voluntary movement of the extremities suggesting a preparatory feed-forward mechanism to stabilize the trunk before movement. Similar studies have shown that patients with their first episode of acute low back pain do not have automatic core muscle recovery after the cessation of pain. The feed forward mechanism lags behind and leaves a void in the stabilizing system of the spine causing undue stress and motion.

There is a common belief that sit-ups will alleviate or prevent back pain which is untrue. The rectus abdominis has no direct attachment to the spine and can only flex the spine but without providing segmental stability or precise rotation at each vertebral level. Such things as occupational, athletic and recreational endeavors place our spines in static positions or cause us to move in ways that may influence the overall health of our spine. Muscular and postural imbalances can result in a frank injury or evolve into a cumulative trauma scenario which in turn may inhibit our core muscles from functioning correctly. That translates to missing time in the gym, at work, or recreationally. Additionally, there are people who are taking part in sports and various forms of exercise that are not able to stabilize their pelvis with novel movements or activities. Therefore, they learn a pattern of "substitution" to achieve the movement goal without truly stabilizing the spine with correct "core" musculature. The core muscles are but one of the various tissues that may be the cause of the complex and sometimes confusing origin of low back pain.

The physical therapists at the Rochester General Health System believe that education and prevention are the keys to good health. A healthy back doesn't just "give out". Usually a cascade of often asymptomatic maladaptive postures and movements lead to injury. Our goal is to identify and educate against those factors and help manage or abolish those symptoms. Our therapists' perform a thorough evaluation for each patient, determines disturbances in movement patterns, identifies precipitating causes, and utilizes non-manipulative manually based techniques, therapeutic exercise, neuromuscular training, and modalities to achieve the patient's individual functional goals. We practice at our Ridgeview Place clinic on Ridge Road (922-7100), Midtown Athletic Club clinic on East Highland Drive (244-9580), and our newest clinic at 10 Hagen Drive in Linden Oaks (922-9700). We are committed to providing each individual with a specific rehabilitation program tailored to their functional needs and working closely with our physicians to make our patients among the healthiest in the area.

Message From Mark Clement, continued

Constellation Brands, Excellus Blue Cross Blue Shield, Eastman Kodak Company and Wegmans - "Innovative Approaches to Health Care Delivery and Design," a series of Health Policy Symposia beginning this spring to advance the "conversation" among community, business and health leaders on health care delivery, design and financing reform. The first event in the series will be held in April, and will feature Stuart H. Altman, PhD, Dean and Professor, The Heller School for Social Policy and Management, Brandeis University, a national expert on health care financing, who will speak on the topic: *"Health Care Challenges for the Future."*

The work the Steering Committee has accomplished in a relatively short time is exciting, and represents just the first step in the development of what I am confident will be a long standing and fruitful collaboration between two highly respected and nationally recognized institutions. I am more encouraged today than ever about the potential of this new relationship, and the opportunities it will present for our physicians, staff and the patients and community we serve.

Thanks to all of you for your support of this effort, and for all that you do each and every day to deliver outstanding care to patients throughout our system. Your good work continues to be reflected in the letters and comments I receive from patients, staff and members of our community. That very positive feedback strengthens my belief and represents real evidence that we are well on our way of achieving our vision of being the provider of choice in our region!



Rochester General Hospital ED: A SAFE Center of Excellence

By George P. Glessner III, Office Manager

The initial response a victim of rape or sexual assault receives when seeking health care or reporting the crime has a profound influence on that individual's subsequent recovery. In 2008 Rochester General Hospital's Emergency Department became a DOH designated SAFE (Sexual Assault Forensic Examiner) Center of Excellence for the care of both adult and pediatric sexual assault victims. There are 39 SAFE Centers of Excellence statewide and with the addition of RGH's SAFE Center; there are 2 in the local area. Established as part of the Sexual Assault Reform Act (SARA) which went into effect February 2001 all SAFE Centers must meet standards that have been established by Department of Health. These standards include having specially trained Sexual Assault Forensic Examiners (SAFEs) who are certified by the Department of Health. These SAFEs must be available 24 hours a day either on site or on call. Our SAFE Center of Excellence is staffed with nurse practitioners who have successfully completed at least 40 hours of didactic and clinical training as well as a competency-based post-course perceptorship. They are certified to perform forensic examinations and collect evidence in sexual assault or abuse cases. The 9 person team is led Julia Bianca, PNP and Elaine Daily, NP.

The RGH ED SAFE program and its SAFEs provide compassionate, patient-centered care to victims of sexual assault in a setting that provides emotional support and reduces further trauma to the patient. The SAFE program team works closely with local rape crisis victims advocates as



sell as other health care providers, police and prosecutors to form an interdisciplinary team. The results of this collaborative team effort are better outcomes for the victims; comprehensive high quality health assessment and treatment; better collection and preservation of evidence; and, an increased chance of arrest and conviction of the perpetrator of the crime. Our SAFE nurse practitioners ensure the quality of collection, documentation, preservation and custody of physical evidence as well as, when called upon, provide expert testimony. In addition to compassionate care and technical expertise, the SAFE program team participates in data collection regarding the incidence of sexual assault victims seeking treatment in hospital emergency departments. In 2008, 88 sexual assault victims were treated at Rochester General Hospital Emergency Department's SAFE Center of Excellence. The majority of these victims were between the ages of 13 and 19. Having the availability of compassionate, clinically competent, and technically experts to provide care to this patient population is the first step to successful healing after the trauma of sexual assault and is therefore, another example of the Excellence Every Day that is the Emergency Department at Rochester General Hospital.

New Method for Obtaining Ethics Consultations

By C. Chris Reynolds, MD
Committee Chair

As you may know, Dr. David Lee resigned as Chair of the RGH MDS Ethics Committee. In his place, Drs. Carl "Chris" Reynolds, Anil Job, Waseem Sajjad of the Rochester General Hospitalist Group will be jointly Chairing the Ethics Committee and taking call for ethics consultations.

The Ethics Committee is a Committee of the Medical & Dental Staff which reports to the RGH MDS Medical Board and the President of the RGH MDS. The Bylaws dictate that it shall be an interdisciplinary body that provides an environment for the deliberation of ethical issues. Its composition shall include, but shall not be limited to, representatives of major Hospital departments. The goals of this Committee are to assist its members and other invited participants in understanding the ethical dimensions of their clinical experiences and to provide educational opportunities to the Hospital community on clinical ethical issues.

If you ever have a clinical ethics concern and want the help of the RGH Ethics Committee, please call the Admitting Office (922-7333). Provide information about your concern and someone from the Ethics Committee will contact you within 24 hours. Emergency consults can also be handled immediately if needed, by the physician on call.

Also, if you are interested in becoming a member of the multidisciplinary Ethics Committee, please contact Mary Fortman at Mary.Fortman@rochestergeneral.org.

CHANGES TO YOUR RGH DIRECTORY

For those of you who have access to the ViaNet, 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

NEW MEMBERS

Robert Fortuna, MD 913 Culver Rd	Department of Pediatrics Rochester NY 14609 585-654-5432
Sarika Kadam, MD 1425 Portland Ave #287	Department of Medicine/Internal Medicine Rochester NY 14621 585-922-5067
Elizabeth Murray, DO 1425 Portland Ave Box 238	Department of Emergency Medicine & Pediatrics Rochester NY 14621 585-922-4097
Brigid O'Rourke, RPA-C 1425 Poortland Ave Box 143	Department of Orthopaedic Surgery Rochester NY 14621 585-922-3963
Edward Piotrowski, MD 1415 Portland Ave #245	Department of Surgery/General Surgery Rochester NY 14621 585-922-4518
Ferdinand Rico, MD 1415 Portland Ave #245	Department of Surgery/General Surgery Rochester NY 14621 585-922-4518
Anna Rothstein, MD 1580 Elmwood Ave	Department of Ophthalmology Rochester NY 14620 585-244-2580
Elizabeth Scarlett, MD 1425 Portland Ave Box 238	Department of Emergency Medicine & Pediatrics Rochester NY 14621 585-922-4097
Michelle Sheehan, NP 1425 Portland Ave #127	Department of Cardiac Services/Cardiothoracic Surgery Rochester NY 14621 585-922-4188
Sandra Beirne, MD 1425 Portland Ave Box 238	Department of Emergency Medicine/Pediatrics Rochester NY 14621 585-922-4097
Lynn Brazee, NP 1425 Portland Ave #247	Department of Medicine/Internal Medicine Rochester NY 14621
Deepa Camenga, MD 601 Elmwood Ave Box 777R	Department of Emergency Medicine/Pediatrics Rochester NY 14642 585-275-1333
Leigh Anne Chandler, NP 2066 Hudson Ave	Department of Medicine/Geriatrics Rochester NY 14617 585-922-2800
Amelia Cleveland, MD 1415 Portland Ave #400	Department of OB/GYN Rochester NY 14621 585-922-4200
Craig Durie, NP 125 Lattimore Rd #270	Department of Surgery/Colon/Rectal Surgery Rochester NY 14620 585-244-5670
Kathleen Hayden, MD 2300 W. Ridge Rd	Department of Family Practice/Internal Medicine & Pediatrics Rochester NY 14626 585-453-0334
Saad Jamshed, MD 1425 Portland Ave Box 223	Department of Medicine/Hematology/Medical Oncology Rochester NY 14621 585-922-4020
Miyeon Oh, MD 2180 Empire Blvd	Department of Medicine/Internal Medicine Webster NY 14580 585-787-2233
Michael Pichichero, MD 1815 S. Clinton Ave #360	Department of Pediatrics Rochester NY 14618 585-568-8330
Paul Rapoza, MD 2300 W. Ridge Rd	Department of Family Practice/Internal Medicine & Pediatrics Rochester NY 14626 585-453-0334

NOW Available the New RGH MDS Member Directory

please call the Medical Staff Office at
922-4259 or email
marylou.mckeown@rochestergeneral.org
to obtain your copy

CHANGE TO INACTIVE

- Christopher Rutledge, CRNA** – Department of Anesthesiology
- Jason Schwalb, MD** – Department of Surgery/Neurosurgery
- Thomas Stephenson, MD** – Department of Radiology
- Carol Coy, NP** – Department of Psychiatry
- Alberto DaConceicao, MD** – Department of Radiation Oncology
- Christina Hatfield, RPA-C** – Department of Orthopaedic Surgery
- Carol Lee, NP** – Department of Medicine/Internal Medicine



President's Message, cont.

MDS activities. We are excited that these two energetic and forward thinking individuals will be joining us in the management of MDS activities. I also would like to take this time to thank doctors Robert Tatelbaum and Richard Speisman, who have served the Executive Committee as representatives of our RGH chiefs and have done a remarkable job; it is greatly appreciated. There is also a rebirth of our ethics committee. Dr. Lee so capably led this process for many years and responsibility for the Ethics Committee is now shared by Dr. Chris Reynolds, Dr. Anil Job and Dr. Waseem Sajjad. They are working as a unit to provide not only ethics related consultations but also to create a forum for discussion and education about ethics. We greatly appreciate their willingness to take on this very important MDS Committee activity.

Keeping with our theme of growth and rebirth, I am happy to report that the Medical Dental Staff initiatives have grown to and been capped at fourteen. The steering committee met last month to identify goals and objectives and outcome measures and their enthusiasm and energy was unbridled. I'll report next month on changes that have already begun as a result of this process to improve patient care and safety.

As part of another ambitious endeavor, doctors Cindy Christy, Rob Mayo and myself will be attending one departmental meeting each month and hope to have touched all departments in the next seven to ten months. If you have a particular issue that your department would like us to address, please contact Mary Lou McKeown to get this on our agenda.

The Executive Committee of the Medical Dental Staff, particularly Pam Sullivan, has been diligently working to identify a summer event for the

Medical Dental Staff that would be attractive to all segments of our MDS population; this is certainly a challenge. We are currently considering a summertime sporting event with a picnic of sorts, but would certainly welcome your input in this regard. I also wanted to mention that our MDS dinner attracted 266 individuals and plans are already underway for next year's event. Again, we would welcome your input.

Again, I recognize that not every-

thing at RGH is perfect or as evolved yet as it is going to be, but certainly things are improving and I for one believe that we are in the springtime of our rebirth and renewal. Have a great month!

P.S. I promised myself not to include the corny analogy that spring has led to the return of the robins and at RGH one of the most welcome robins returning is Dr. Dick. Well, I guess I did include it.

SUMMER STUDENT INTERNSHIPS

3-week, part-time student volunteer internships available for a variety of service positions, including:



- Assisting nurses and/or techs on Nursing Units
- Cafeteria, Food Services & Menu Delivery
- Clerical Roles/Tasks
- Gardening/ Grounds-keeping
- Greeting/ Escorting Roles
- Patient Discharge and Transport
- Visiting with Patients
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- Would like to learn more about healthcare careers

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or call Mrs. Polito at (585) 922-2927 for an application.

GRIPA Connect ePrescribing

Available to GRIPA Clinically Integrated Physicians

Did you know that in addition to all the standard features of e-prescribing products, GRIPA Connect ePrescribing offers several unique features that enhance collaborative patient care by the physicians participating in the GRIPA Connect Clinical Integration (CI) Program?

- **Single Patient Record** – Everyone in the CI Program works with the same patient information without fragmentation. If the cardiologist adds aspirin to the active medication list, it appears for the primary care physician as well.

- **Clinical Context** – GRIPA Connect gives providers tools to manage patient care efficiently. ePrescribing is part of a suite of tools that includes patient-specific alerts and laboratory information to assist the provider in making the best clinical decision.

- **FREE** – There is no charge for ePrescribing – it is provided as part of GRIPA Connect CI.

- **Expert Support** – GRIPA's local support team includes a nationally published expert on e-prescribing. GRIPA is proactively working with local and national leadership in the pharmacy community to support e-prescribing deployment in the Rochester Area.

In addition to the features exclusive to GRIPA Connect, ePrescribing offers many standard features with an enhanced focus on clinical usability such as:

- **Fewer Windows** – The patient profile view has more information at hand with less clicking needed and fewer windows to navigate through.

- **Medication Reconciliation Tools** – A variety of medication management tools such as automatic medication history retrieval, clinical medication list, and patient medication list make reconciliation manageable.

- **Web Access** – Prescribing can be done wherever the GRIPA Connect Portal can be accessed

- **Smart Functions** – Intelligence is embedded throughout the application in small but useful ways including memory of previous prescriptions, allowing multiple prescriptions to be renewed at once, and more.

- **Mail Order Support** – Patients that are eligible for mail order are automatically matched to the mail order pharmacy. The RGHS mail order pharmacy is available as a pharmacy choice.

- **Transition Support** – GRIPA works with you to ensure that any transition from a previous e-prescribing system to GRIPA Connect ePrescribing is as smooth as possible. Every office is unique; every transition is customized for the needs of the office.

We are currently in the process of training provider offices and putting them up live on the ePrescribing application. Call GRIPA Provider Relations at (585) 922-1525 to learn more about GRIPA Connect ePrescribing or schedule a training.



Efforts are underway to include even more data, such as additional information from the RGHS system, into the GRIPA Connect Portal.

OFFICE IN THE SPOTLIGHT

Office of Michael Dobmeier, M.D.

Congratulations to Dr. Michael Dobmeier and his office staff for being selected as a GRIPA Connect Office in the Spotlight. This column features GRIPA Connect Clinical Integration offices who are finding the GRIPA Connect Web Portal useful for patient care.

"The GRIPA Connect Web Portal is very useful," says Dr. Dobmeier who is also a member of the GRIPA Connect Clinical Integration Committee. "I especially like the Patient Alerts and lab and xray reports. They are good reminders for all of us."

Su Gillette, Medical Secretary agrees. "The portal is easy to navigate. We print out the patient alerts at the end of each day for the patients we will see the next day," she says.



Members of the practice include: seated: Dr. Michael Dobmeier; standing left to right: Anita Morales, Practice Manager; Su Gillette, Medical Secretary and Peggy Parker, R.N.

GRIPA
Connect
Clinical Integration

Physicians coming together
for all the right reasons