



M E D I L I N E

A MEMORIAL HOSPITAL COMMUNITY RELATIONS PUBLICATION

MAY 2011

BEST PLACES to work in **PA**₂₀₁₀



Sally Dixon

MESSAGE FROM SALLY...

I am pleased to announce that Dr. Terry York has agreed to serve as the interim Chief Medical Officer (CMO) for Memorial Hospital. In this role, Dr. York will oversee Medical Affairs, Medical Education and Quality. Dr. York became a member of the Hospital medical staff in 1994 when he joined Miller DiPietro Associates. He has held many leadership positions over the years and is currently the president of the Memorial Hospital medical staff and a Hospital Board member.

Dr. York will devote several hours per month to the CMO role and will continue to work as a radiologist for Miller DiPietro.

Please help me to thank Dr. York for his continued support of Memorial Hospital.

*Sincerely,
Sally J. Dixon
President and CEO*

Welcome Dr. Daoko!

Dr. Joseph Daoko has joined York Heart and Vascular Specialists (YHVS). Dr. Daoko specializes in both invasive and non-invasive cardiology procedures, including diagnostic cardiac catheterizations, trans-thoracic echocardiograms, trans-esophageal echocardiograms and stress testing.

Additionally, he specializes in performing cardiac MRI procedures, which is a new technology in the cardiovascular field.

“I am looking forward to bringing cardiac MRI services to Memorial,” said Dr. Daoko. “Cardiac MRI technology will provide a great benefit to patients in our community. A cardiac MRI can detect heart diseases that cannot be diagnosed, or are sometimes misdiagnosed, using traditional diagnostic procedures, such as ultrasound and angiogram.”

Dr. Daoko completed his residency in Internal Medicine and a fellowship in Cardiology at Seton Hall University in New Jersey. Additionally, he completed specialized training in cardiac MRI at New York-Presbyterian Hospital’s Weill Cornell Medical Center. Previously, Dr. Daoko was the director of cardiac MRI and the outpatient cardiac clinic at Saint Michael’s Medical Center in New Jersey.

In his free time, Dr. Daoko enjoys traveling and reading. Some of his favorite topics are history, ancient civilizations and world-changing events.

Since moving to the area, he and his wife, Sarah, and their two daughters are enjoying life in York. “This is a nice area and there is much to do with my family.”



Emergency Department Begins CPOE

Memorial Hospital’s Emergency Department recently started using a computerized physician order entry (CPOE) program through Wellsoft. Physicians in the Emergency Department are able to enter orders for medications and Laboratory and Radiology testing into the Wellsoft software system. The orders are then distributed to the corresponding department in real-time.

(continued on page 2)

Make the Call, Don't Miss a Beat



As a member of the Spirit of Women Hospital Network, Memorial Hospital is joining with the U.S. Department of Health and Human Services' Office on Women's Health to launch the new Make the Call, Don't Miss a Beat campaign. The three-year effort of the Office of Women's Health will include public service announcements for television, radio, print and outdoor advertising and the internet.

The aim is to educate, engage and empower women and their families to learn the seven most common symptoms of a heart attack and encourage them to call 9-1-1 as soon as those symptoms arise. These symptoms include:

- Chest pain, discomfort, pressure or squeezing
- Shortness of breath
- Nausea
- Light-headedness or sudden dizziness
- Unusual upper body pain, or discomfort in one or both arms, back, shoulder, neck, jaw or upper part of the stomach
- Unusual fatigue
- Breaking out in a cold sweat

A woman suffers a heart attack every minute in the United States. Yet according to a 2009 American Heart Association survey, only half of women indicated they would call 9-1-1 if they thought they were having a heart attack and few were aware of the seven most common heart attack symptoms. For more information on the campaign, visit www.womenshealth.gov/heartattack.

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("Emergency Department Begins CPOE", continued)

"The computerized order entry system eliminates a lot of paperwork and phone calls that take time. It connects departments with each other instantly. Associates can see what procedure is ordered to be fully prepared, saving time and energy," said Annetta Comstock, Wellsoft administrator in the Emergency Department.

Prior to using the new CPOE system, orders were written on a clipboard by physicians and delivered to designated areas in the Emergency Department to start testing or procedures. Certain medication requests were manually faxed to the Pharmacy to be filled.

"The program automatically reconciles medication orders to make sure they will not cause an allergic reaction with other medicine the patient is currently taking," said Annetta. "It also automatically calculates the dosage for pediatric patients based on their weight."

The CPOE system is compatible with other software used at Memorial, including Paragon, the Picture Archiving and Communications System (PACS) and the Laboratory system (SOFT). It tracks and documents results from tests, which appear in the patient's electronic record and are color-coded to indicate when they are complete. From the patient's bedside, physicians and nurses can instantly see what is currently being performed and the results of other tests.

"When a procedure or test is started, the system captures a start time and the time when it is complete," said Annetta. "We were unable to capture those details prior to this system."

The Wellsoft program also verifies all charts are complete and signed before electronically sending the record to Alpha, the electronic medical record storage system.

"We had a very smooth start for the program. After the physicians and nursing staff saw how easy and efficient CPOE can be, they were all very pleased," said Annetta.

Use Teach Back Technique with Patients

Only 50 percent of patients understand health care instructions provided to them. Of those, patients accurately implement instructions only 47 percent of the time. You can improve disease outcomes by practicing the "teach back" technique with your patients.

The "teach back" technique asks in a non-shaming way for your patient to explain in his or her own words what was understood. Start with an explanation or demonstration of a concept. Next, assess understanding by asking your patient to "teach back" the concept. Provide clarification and reassess understanding until the patient demonstrates mastery. Refrain from asking a yes/no question such as "Do you understand?" Instead, ask your patient to say the information in his or her own words. For example, say "I want to be sure I explained everything correctly. Can you please explain it back to me?"

The "teach back" and repetition process must occur together to ensure patient understanding and enhance self-management of a disease process. Try implementing these steps to improve patient understanding:

- Slow down and break the message into short statements
- Use plain language
- Segment education into two to three concepts
- Use teach back to ensure understanding prior to introducing additional concepts
- Focus on key points that help the patient manage the disease at home
- Emphasize what the patient should do
- Show or draw pictures
- Minimize information about anatomy and physiology

To learn more about this health literacy skill go to: www.ahrq.gov/qual/literacy/healthliteracytoolkit.pdf.



Congratulations, Dr. Matylewicz!



Dr. Robert Matylewicz has passed the 2010 American Board of Addiction Medicine (ABAM) Certification Examination. He received his board certification certificate as a “Diplomate of the American Board of Addiction Medicine” in a ceremony during the 2011 American Society of Addiction Medicine (ASAM) Medical-Scientific Conference in April. Dr. Matylewicz is a primary care physician at Susquehanna Trail Family Medicine and Main Street Family Medicine. He also practices addiction medicine and is the medical director at Clarity Way in Hanover, PA. Dr. Matylewicz treats all aspects of addiction and is available for consultation at all locations.



MEDICAL STAFF INFORMATION CHANGES

Ali Bakhshalizadeh, M.D.
Voluntary Resignation

Riffat S. Mahmud, M.D.
New Address
York Internal Medicine
310 Pine Grove Commons
York, PA 17403
741-5959 • Fax 741-3995

Changes Regarding Physician Signatures

Stamped signatures on outpatient request forms are no longer accepted unless the form is also signed by the physician with the stamp used for legibility purposes. Signatures must be legible and if not, the name should be printed under or beside it. Electronic signatures are accepted. Please call Jeri Lowery, Patient Registration manager, at 815-2797 if you have any questions.

Documentation Tips

When documenting **gastrointestinal bleeding (GI Bleed)**, please be specific in identifying the bleeding site or disease. For example, write *diverticulosis with bleeding* or *gastric ulcer with bleeding*. If you have questions, please call the medical coders at 815-2391.

Please follow these instructions regarding **verbal orders**:

- Verbal orders should only be given if absolutely necessary – not when a physician is in-house.
- Verbal orders will be taken over the phone for any direction or clarification provided to a nurse for a patient.
- If a verbal order must be given, it must be signed within 24 hours by the physician giving the order, the attending physician or the physician’s partner.
- During a patient’s stay, nursing staff will flag verbal orders for ease in identifying these during rounds.

If you have any questions regarding verbal orders, please call Faith Zeigler, director of Health Information Services, at 849-5306 or Bernadette Emig, Medical Affairs coordinator, at 849-5781.

Regarding a patient’s **discharge orders**, please remember the following:

- A discharge order is needed for every patient leaving the hospital, whether the patient is being transferred or going home.
- Discharge orders must be written on the day of discharge.

Please call Faith at 849-5306 with any questions regarding discharge orders.

PLEASE REMIND YOUR PATIENTS TO PRE-REGISTER

One call scheduling and pre-registration

717-815-2351

Pre-registration appointment cards are available for your office by calling Jeri Lowery at 815-2797.



MEDICAL STAFF ADDITIONS

Joseph Daoko, M.D.

York Heart & Vascular Specialists
1600 Sixth Avenue, Suite 105
York, PA 17403
849-5576 • Fax 718-9972
Specialty: Cardiology

Rajesh Mohan, M.D.

York Heart & Vascular Specialists
1600 Sixth Avenue, Suite 105
York, PA 17403
849-5576 • Fax 718-9972
Specialty: Cardiology

Sailaja Nootheti, M.D.

Allergy & Asthma Consultants
1620 S. Queen Street
York, PA 17403
843-6663 • Fax 852-0670
Specialty: Allergy / Immunology

Rory O'Neill, D.O.

EMP of York
325 S. Belmont Street
York, PA 17403
849-5370 • Fax 849-5731
Specialty: Emergency Medicine

William E. D. Yeaman, D.P.M.

Beech Tree Podiatry
1546 E. Market Street
York, PA 17403
843-0896 • Fax 854-6519
Specialty: Podiatry

Health Care Heroes Honored

Susan Luchka, director of clinical education at Memorial Hospital, was named Nurse of the Year at the Healthcare Heroes awards event sponsored by Central Penn Parent magazine in March.

Other members of the Memorial family honored at the event were:

- Dr. Eric Barr, Family Medicine Associates of York, a finalist for Physician of the Year.
- Dr. Julie Drolet, Women's Institute for Gynecology and Minimally Invasive Surgery, a finalist in the Women's Health and Wellness Hero category.



Susan Luchka, center, with past Nurse of the Year winners Terri Epler, left, and Marcia Feehan

Memorial Hospital was also a finalist in the Children's Healthcare Advocate category and Mike Henry from the Mailroom was named Memorial's Hospital Hero.

"Congratulations to Susan, Dr. Barr and Dr. Drolet on their recognition. We are fortunate to have such well-respected health care providers as part of the Memorial family," said Sally Dixon, Memorial Hospital president and CEO.

The awards competition distinguishes Central Pennsylvania's outstanding physicians, nurses, volunteers, health educators, employees and organizations making a difference in health care.

Application for Appointment

The physicians listed below have recently applied for medical staff appointment and/or privileges at Memorial Hospital. If you have any information concerning these applicants that may assist the Credentials Committee, please provide that information to Bernadette Emig, Medical Affairs coordinator, or Mark Amalfitano, D.O., chairperson of the Credentials Committee.

Kelly S. Gidusko, M.D.
Anesthesiology

Chanh T. Huynh, M.D.
Hematology/Oncology

Ravichandran Suppiah, M.D.
Anesthesiology

Restraint Order Review

When ordering restraints, please remember the following information:

- All restraint orders must contain the following elements: date and time, reason for restraint, type of restraint, site of restraint and physician signature.
- Bright yellow restraint order stickers are available on all units. Please ask the charge nurse if you have questions about completing the sticker.
- Unit secretaries and nurses will not transcribe restraint orders that are incomplete or inaccurate.
- Restraints may never be ordered for PRN use.
- Restraint orders must be renewed every 24 hours, or with each episode or restraint, whichever comes first.
- Type of restraint: DO NOT order side rails x 4 and limb restraints together; choose only one.

Welcome to Malvena McLeod



Memorial's new outpatient dietitian in Community Health and Wellness, Malvena McLeod, is a registered dietitian with over 20 years of experience in nutrition. She provides outpatient nutrition counseling for needs such as diabetes and heart disease as well as the nutrition segment of outpatient diabetes education classes.

In addition to outpatient services, Malvena is also writing nutrition articles for the York Daily Record, assisting with community health programs, such as KidShape®, and providing nutrition information at health fairs.

Before joining Memorial, Malvena worked as a nutritionist with the Women, Infants and Children (WIC) program through the Community Action Program of Lancaster County. She is a graduate of Penn State University and has served 20 years in the Army Reserves.

“Everyone is really friendly,” said Malvena. “The atmosphere here is one of helping others. People treat other associates and patients as their own family.”

Physicians may refer a patient by completing the Medical Nutrition Therapy Certificate of Medical Necessity form and faxing it to Malvena at 849-5693. Patients with diabetes, heart disease, hypoglycemia, hypertension, gastroesophageal reflux disorder (GERD) and other conditions listed on the form may be referred. If you have questions about outpatient nutrition counseling, please call Malvena at 849-5507.



Change to Hospice Care Rules

The Centers for Medicare and Medicaid Services (CMS) has changed the Hospice care rules, which went into effect on January 1. Patients must have a face-to-face visit if they have received hospice services for more than 180 days. The Hospice medical director is required to assess a patient prior to the patient entering their third benefit period at 180 days (barring discharge and re-admittance). This face-to-face visit with the Hospice medical director is required to certify that the patient meets the criteria for continued Hospice care. The patient's own physician continues to provide orders for care and services.

Questions regarding this new requirement can be directed to Memorial Hospital's White Rose Hospice at 843-8051.

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MDRO – An Approved but Undesirable Abbreviation

by K. Barry Wentland, D.O.

An MDRO is a Multiple Drug Resistant Organism, which is a microbe resistant to one or more classes of antimicrobials. These are most often bacteria, with MRSA being the most common. MDROs cause increased mortality from infection, longer hospital stays and obscene increases in healthcare costs. The emergence of MDROs is a global problem exacerbated by global travel. Like earthquakes, hurricanes and tornadoes on a macro level, MDROs prove that nature is impossible to control on a micro level. The best we can do is to minimize the devastation.

Statistics indicate that local healthcare-associated infections caused by MDROs increased from 23 percent in 2009 to 34 percent in 2010. Throughout the United States, alarms sound to warn of the spread of “ESKAPE” organisms. These are bacteria that are adapting and able to escape any and all antibiotics. ESKAPE organisms include *E faecium*, *S aureus*, *K pneumonia*, *A baumannii*, *P aeruginosa*, and *Enterobacter* species. The strategy of using a bigger gun has failed since these microbes have developed resistance to every antibiotic targeting them. The hope of an antibiotic solution has faded, but still it is disconcerting that there are no antibiotics in the developmental pipeline to target gram negative resistant organisms.

Because of the morbidity and at least 99,000 U.S. deaths annually associated with MDROs, the prevention and control of MDROs is a patient safety priority. What can you do? Start by washing your hands, and then join the “campaign to prevent antimicrobial resistance in the healthcare setting” organized by the Centers for Disease Control and Prevention (CDC).

Key components of the war on drug-resistant organisms include antibiotic stewardship and following infection prevention policies. The damage caused by inappropriate antibiotic prescription use is illustrated in this statistic: an outpatient given an antibiotic has a fourfold increased likelihood of contracting an infection with an antibiotic resistant organism over the following 12 months. Antibiotic stewardship is summed up in the CDC’s initiative “Get Smart – Know When Antibiotics Work.” Prescribe appropriately for the right indication, with the right drug, at the right dose, for the right duration. At Memorial Hospital, a Pharmacy department initiative will help to promote the culture (pun intended) of antibiotic stewardship.

Infection prevention strategies include optimizing glucose control, wearing gloves and personal protection equipment (PPE), adhering to isolation and other infection control policies, and performing hand hygiene.

More on the CDC campaign to “Prevent Antimicrobial Resistance in the Healthcare Setting” will be made available at the June 2011 medical staff meeting.

