

# MEDICAL STAFF

Huntington Hospital NEWSLETTER

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## From The President



*Half the lies they tell about me aren't true.*

-Yogi Berra

*I have never been hurt by what I have not said.*

-Calvin Coolidge

*I never said most of the things I said.*

-Yogi Berra

I have a cautionary tale to relate to my fellow physicians. The story involves the somewhat naïve usage of Facebook, and an unexpected consequence.

Facebook, a “social networking” service/website was launched in February 2004. As of January 2011, there were 600 million active users. Users may create a personal profile, add other users as friends, and exchange messages, including automatic notifications when they update their profile. Users may join common-interest groups, organized by workplace, school, or other characteristics. The name Facebook derives from the colloquial name for the book given students at the start of the academic year by the Harvard administration to help students to become acquainted. Founded by Mark Zuckerberg, et. al., Facebook was originally restricted to Harvard undergraduates, then expanded to Stanford, Columbia and Yale. It soon included other Ivy League schools, and gradually, most universities in the U. S. and Canada. Facebook incorporated in the summer of 2004 and set up corporate headquarters in Palo Alto, CA. The first investor was Peter Thiel, the co-founder of PayPal.

Facebook launched a high school version in September 2005. Subsequently, membership eligibility expanded to employees of several companies, including Apple and Microsoft. Soon thereafter, Facebook was opened to

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## Summary of the Minutes for MEC

### Executive Committee Meeting

As provided by the Bylaws of the Governing Body and as the designated sub-committee of the Governing Board the following items were presented and approved by the Medical Executive Committee of June 6, 2011 and by the Governing Board on June 23, 2011.

#### PRESIDENT'S REPORT

- The May event report was presented. There were a total of thirteen event reports during the month. No specific trends were identified.

#### ADMINISTRATIVE REPORT

##### Report from Vice-President of Quality and Performance Improvement/CMO:

Dr. Paula Verrette, Vice-President of Quality and Performance Improvement/CMO, reported on the following items:

- MRI Screening  
There has been an increase in the number of patients sent to Radiology for Magnetic Resonance Imaging (MRI) studies with implanted devices (primarily pacemakers). Physicians were reminded to perform a thorough evaluation of the patient prior to ordering an MRI.

##### Report from the Chief Nursing Executive (CNE):

Ms. Bonnie Kass, RN, Vice President/CNE, presented the following two transfer contracts for review and approval: Advanced Surgical and Silver Lake Medical.

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everyone thirteen years and older with a valid email address. According to the May 2011 Consumer Reports, there are over seven million users under age 13. As of April 2011, 41.6% of the U. S. population had a Facebook account (what percent of the adult U. S. population has an account?) And, in March 2011, it was reported that Facebook removes 20,000 profiles a day for various infractions, including spam, inappropriate content, and underage use, as part of an effort to boost cyber security. In October 2007, Microsoft purchased 1.6% of Facebook for \$240 million, giving an implied total value of \$15 billion. By November 2010, Facebook's value was estimated at \$41 billion, making it the third largest U. S. web company after Google and Amazon.

Most of Facebook's revenue comes from advertising. Microsoft is the exclusive partner for serving banner advertising, and therefore, Facebook only serves ads that exist in the Microsoft advertisement inventory. Facebook has a lower click through rate (CTR) for ads than most major websites (CTR=clicking on the ad to open it). Banner ads on Facebook receive 1/5 the number of clicks compared to the web as a whole. This may be due to the younger age of users, the tech-savvy nature of the users to block ads, or that the users spend their time communicating with friends and ignoring advertisements.

Users can create profiles with photos, lists of personal interests, contact information, and other personal data. Users can communicate with friends and other users through private or public messages and a chat feature. They can create or join interests groups and "like pages."

To allay concerns about privacy, Facebook enables users to choose their own privacy settings and choose who can see specific parts of their profile. Facebook requires a user's name and profile picture (if applicable) to be accessible by everyone. Users can control who sees information they have shared, as well as who can find them in searches, through their privacy settings.

Facebook Notes, introduced in August 2006, is a blogging feature that allows tags and embeddable images. A tag is a feature of the photos application, which labels users in a photo. That is, if a photo contains a user's friend, the user can tag the friend in the photo. This sends a notification to

the friend that they have been "tagged," and provides a link to the photo. And, by November 2010, Facebook announced a new "Facebook Messages" service, which combined text messaging, instant messaging, emails and regular messages.

Facebook is seen as one of the "new titans of the internet," challenging even Google with a vision of a web tied together through personal relationships and recommendations, rather than by search algorithms. Facebook has spread itself across other websites by offering members the ability to "like" something – share it with their network – without leaving the web page they are on. The "like" feature allows a user to share another's content with friends. When the user clicks the "like" button on a site, a story appears in the user's friend's News Feed with a link back to the website.

A member of our medical staff and a user of Facebook, recently carried on a "private chat" with his "friends." Neither his profile, nor the content of the chat, personally identified him or mentioned Huntington Hospital. The content of the conversation included reference to his frustration with non-paying patients, and was relatively innocuous. Soon thereafter, an anonymous letter was sent to Huntington Hospital's CEO complaining about the content of the chat, and threatening to go to the media. Shockingly, what seemed innocent and private was interpreted as malicious and provocative. Moreover, the physician was identified in the letter, but not in Facebook, which implies Facebook security is not what it seems, or that one of his "friends" wrote the letter.

I think it is wise to consider all content of Facebook, and other social media, such as MySpace, YouTube, and Twitter, as public knowledge, or at least discoverable. One should be cautious with these web sites, as they are permanent records that may come back to haunt you, or those you care for. Do not consider any information provided as private and secure. Imagine having your conversation spread across the media and out of context. Would any of you go on Dr. Phil?

Lastly, for those who believe in conspiracies, or fear that they exist, and for your entertainment, please go to the following website for an interesting, short Powerpoint presentation:

**[www.albumoftheday.com](http://www.albumoftheday.com)**

**Jim Buese, MD**  
*President Medical Staff*

# Summary of the Minutes

## Executive Committee Meeting

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### Report from the Director of Healthcare Services:

Ms. Gloria Gomez, CPMSM, Director of Healthcare Services, reported on the following items:

- Mock Survey  
A mock survey has been planned for July 27, 2011 to prepare for the upcoming Joint Commission Survey.
- Ongoing Professional Practice Evaluation (OPPE)  
Ms. Gomez is working with the quality management department in an effort to obtain more meaningful data for inclusion in the OPPE process. A summary form has also been created which will allow a listing of all physicians with appropriate findings on the OPPE data so that the department chair can sign off multiple OPPE reports with one signature. Copies of the signature page will be attached to each individual OPPE report. Only OPPE reports with triggers will require a separate signature by the department chair.
- Focused Professional Practice Evaluation (FPPE)/ Proctoring Requirements  
Prior to the Focused Professional Practice Evaluation (FPPE) standards developed by The Joint Commission, the California Medical Association had developed proctoring guidelines for hospitals in California. Those guidelines allowed for reciprocal proctoring and the ability to waive proctoring for specific cases. The new FPPE requirements mandate a term of proctoring for all new members and the proctoring must be performed on site. The residents who graduated from academic facilities will require proctoring as well. Currently, each department has a separate proctoring protocol within their departmental rules and regulations. A suggestion was made to develop a proctoring protocol that outlines the requirements by specialty.
- Category I Continuing Medical Education (CME) for Peer Review  
Ms. Gomez reported that based on information from a recent CME conference, she has arranged via the Continuing Medical Education Committee to grant Category I Credit for the executive session of the committee meetings. She noted that the credit hours

for each committee will be dependent upon the amount of time each committee spends performing peer review.

### IRB STUDIES

New Study Approvals:

- HMH 2011-007: When is the optimal timing for use of extra corporeal membrane oxygenation in children born with diaphragmatic hernias (PI: David Marchosky)
- HMH 2011-009: Incidence of delayed hemothorax in trauma patients greater than 50 years old with rib fractures (PI: James Lee)
- HMH 2011-010: Relevance of FAST scan in evaluation of blunt abdominal trauma in OR decision (PI: Sam Wairiri)
- HMH 2011-012: The Effect of Comorbidities on Trauma Patients (PI: Sanjeev Puri)

### MEDICAL STAFF RESIGNATIONS

- Grushkin, Carl, MD
- Han, Khan, MD
- Iyengar, Srinivas, MD
- Kernstine, Kemp, MD
- Lerner, Gary, MD
- Luedtke, Pia, MD
- Masiello, David, MD
- McAndrews, Paul, MD
- Nam, Howard, MD
- Pesheva, Maria, MD
- Tagle, James, MD
- Vreeland, Thomas, MD

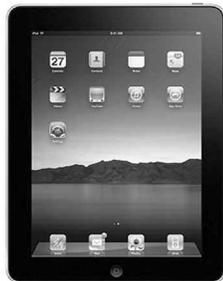
### ALLIED HEALTH PROFESSIONAL RESIGNATIONS

- Aguilar, Ignacio, RNFA
- Cuevas, Maria, Physician Assistant
- Mundy, Charlene
- Sullivan, Lyttle

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## The First Consult App for iPhone/iPad

**F**irst Consult iPhone/iPad app can be used to quickly answer point-of-care questions related to screening, prevention, diagnosis, and treatment of a majority of medical conditions.



The app allows First Consult's content to be stored on your iPhone, iPad, or iPod touch. A data connection is required for the initial content download and content updates, but is not required to use the app itself.

The First Consult app is available free through the Huntington Health Sciences Library's institutional subscription to MD Consult. Before you download the First Consult app, create a Personal Account in MD Consult:

1. Access MD Consult through the library's Sharepoint site from within the hospital.
2. When in MD Consult, click on "Create an Account" on the top right.
3. Complete the registration form, create your username and password, click "Submit" and log out.
4. Search the App store for "First Consult;" when prompted, login using your newly created personal login.

For more information and to watch a demo video about the app go to:  
<http://info.firstconsult.com/iphone-app.html>

For questions about creating your Personal MDConsult login, contact the library at [library@huntingtonhospital.com](mailto:library@huntingtonhospital.com) or 626-397-5161.

## Summary of the Minutes

### Executive Committee Meeting

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#### PRIVILEGE CARD REVISION

- Psychiatry Privilege Sheet

The revisions include the addition of the American Osteopathic Association (AOA) as an approved training program. Revisions also include the addition of proctoring requirements for the following Supplemental Privileges: Child Psychiatry Privileges and Placement of 5150 Holds.

- Radiology Privilege Sheet

The revisions include the addition of criteria and privileging for Pediatric diagnostic radiology (in accordance with the California Children's Services [CCS] criteria).

- Neurology Privilege Sheet

The revisions include the criteria and privileges for Intrathecal Baclofen Trials.

The Medical Executive Committee also recommended that all existing privilege sheets be modified to include the American Osteopathic Association (AOA) training programs as approved training programs.

#### DEPARTMENTAL POLICIES AND PROCEDURES AND ORDER SETS

*For specifics go to Medical Staff Services on Sharepoint (intranet)*

**MEDICINE:** 15 items

**OBSTETRICS AND GYNECOLOGY:** 2 items

#### DEPARTMENT OF PEDIATRICS:

*Postpartum/Nursery/Perinatal High Risk:* 1 item

*Pediatrics/Pediatric ICU:* 2 items

*Neonatal:* 4 items

#### ORGANIZATION WIDE POLICIES AND PROCEDURES: 8 items

**James Shankwiler, MD**  
*Secretary/Treasurer, Medical Staff*



# From the Health Sciences Library...

## Continuing series on electronic books: Books on Cardiology

**C**itrix or Connect login access or by using password access (contact library to set up). The best way to find what ebooks the library subscribes to is to search for them on the library's Online Catalog (upper left of Health Sciences Library Sharepoint page) or browse them by title and by subject using the links under the Electronic Books section (also on Library's SP page).

The library has 15 electronic books in Cardiology.

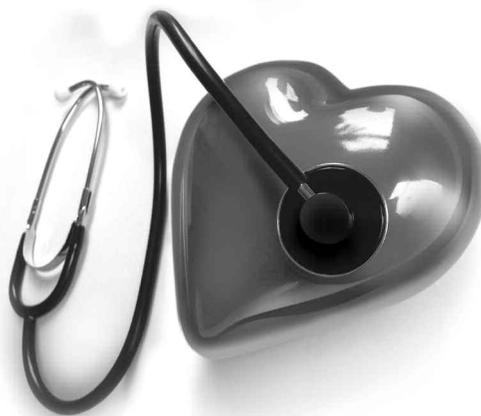
The list below <sup>MDC</sup> denotes books on MD Consult, <sup>O</sup> from Ovid, <sup>AM</sup> from Access Medicine, <sup>G</sup> from Gale. The library online catalog also includes other titles of interest that are freely available on the web (<sup>www</sup> after a title denotes free web access).

Mobile access to MDConsult ebooks is available by navigating your mobile browser to <http://mobile.mdconsult.com> and logging in with your MDConsult offsite login. Mobile access to AccessMedicine book chapters is available by navigating to the chapter of interest and clicking on "Download for Handheld" link on the upper right.

- Acute stroke: evaluation and treatment, 2005 <sup>www</sup>
- Blood thinner pills: your guide to using them safely [Consumer resource] <sup>www</sup>
- Braunwald's heart disease: a textbook of cardiovascular medicine, 9<sup>th</sup> ed., 2011 <sup>MDC</sup>
- Cardiology explained. c2004 <sup>www</sup>
- Clinical electrocardiography: a simplified approach. 7<sup>th</sup> ed., c2006 <sup>MDC</sup>

- Guide to peripheral and cerebrovascular intervention. c2004 <sup>www</sup>
- Hurst's the heart, 12<sup>th</sup> ed., 2007 <sup>AM</sup>
- Inflammatory atherosclerosis : characteristics of the injurious agent. 2002 <sup>www</sup>
- Nadas' pediatric cardiology, 2<sup>nd</sup> ed., 2006 <sup>MDC</sup>
- Post-myocardial infarction depression. 2005 <sup>www</sup>
- Rutherford's vascular surgery, 7<sup>th</sup> ed., 2010 <sup>MDC</sup>
- The Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure. 2003 <sup>www</sup>

If you have any problem accessing these books or have any questions about them, please contact the library at x5161, [library@huntingtonhospital.com](mailto:library@huntingtonhospital.com) or text us at 626-344-0542.



# Physician Informatics

## **Critical Care Unit (CCU) Automating Paper Flowsheet:**

The CCU will be moving from a paper flowsheet to an electronic format on Monday, July 11, 2011. Three new components will be added to support this change, all information viewable in the EMR: 1) an interface from the patient monitors into Meditech 2) IV intake and titration information and 3) Visual Flowsheet. The new monitor interface will pull the patient monitor data directly into Meditech. The IV intake and titration information will be entered into Meditech by the nursing staff. The Visual Flowsheet (VFS) will be additional view-only tool accessed through the Meditech EMR which pulls together pertinent patient information in an easy spreadsheet format. For more information and available training options, please contact **Vera Ma** at **626-397-3908** or [vera.ma@huntingtonhospital.com](mailto:vera.ma@huntingtonhospital.com)

## **Computerized Physician Order Entry (CPOE) Update**

CPOE of medication and non-medication orders began in Maternal Child Health (Labor and Delivery, Maternity, Perinatal High Risk, and Newborn Nursery) on June 13.

## **ED2 Electronic Documentation**

Starting May 9, 2011, the ED2 documentation is now available in the EMR under "Other Reports" as "Emergency Room Visit Note."

## **Medicare e-Prescribing deadline stands, but exemptions are expanded**

A CMS proposal would give physicians more opportunities to claim a hardship exemption and avoid being penalized for failing to meet the June 30 e-Prescribing requirements. Under the current rules, eligible physicians must complete at least 1 e-prescription on 10 unique Medicare patient visits between January 1 – June 30, 2011 to avoid the 1% Medicare pay cut in 2012. The current ruling also had limited exemptions and required physicians to claim exemption by June 30. Many physicians, specialty societies and other organizations, including

the American Medical Association, had requested that CMS expand its list of exemptions to reflect some of the compliance barriers that medical practices face.

The May 26 proposal from CMS would expand the list of exemptions, and give physicians another chance to avoid penalties for those who did not meet the e-prescribing requirements. That proposal also includes developing a website where physicians would have until October 1, 2011 to claim a reason for hardship or noncompliance. The proposal is available for comment for 60 days at [http://www.ofr.gov/ofrupload/ofrdata/2011-13463\\_pi.pdf](http://www.ofr.gov/ofrupload/ofrdata/2011-13463_pi.pdf) and explains the expanded hardship exemptions and supporting information required by CMS to claim them. Further information will be published in the Medical Staff Newsletter when this proposal becomes final.

There is still the opportunity in 2011 to earn an incentive payment of 1% (based on claims submitted no later than February 28, 2012) for all covered professional services furnished from January 1, 2011 – December 31, 2011. To qualify for the e-Prescribing incentive payment, physicians need to use a qualified eRx system (like HuntingtonRx) to: a) generate and transmit 1 or more electronic prescriptions associated with a minimum of 25 unique Medicare patient visits that meet the CMS denominator criteria in 2011 **AND** b) 10% of your Medicare Part B charges for dates of service January 1 – December 31, 2011 must be comprised of specific CPT codes in the denominator of the measure. For a list of the CMS Denominator CPT codes, you can contact **Joe Limmer** at **626-397-3348** or email [joe.limmer@huntingtonhospital.com](mailto:joe.limmer@huntingtonhospital.com).

The proposed ruling does not address the current penalties physicians face in 2013 (1.5% of Medicare revenue in 2013), unless they report at least 25 unique Medicare encounters between January – December 2011. *Due to the volume of public comments from AMA, medical societies and other organizations – CMS may change this penalty requirement as well – but it currently stands as listed.* Huntington Rx and Huntington

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# CME Corner



Please join me in welcoming Bianca Irizarry to the Huntington Hospital family. In her role as CME Coordinator, her two primary functions are to help coordinate and enhance the CME program and to generate reports for ongoing professional practice evaluation (OPPE). I am pleased to inform you that at its last meeting, the CME Committee approved Category I CME credit to the executive session portion of all medical staff meetings, the length of the meeting will determine the number of hours received. Additionally, efforts are underway to automate the CME function. Physicians will have the ability to create their own CME profile and access their activities and generate reports via the internet. You may contact Bianca at 626-397-3770.

## UPCOMING PROGRAMS FOR THE FIRST THURSDAY MEDICAL WORKSHOPS:

**Topic:** Dignity Conserving Care  
**Date:** July 7, 2011  
**Time:** 8:00 am  
**Place:** Research Conference Hall  
**Gap Analysis:** Knowledge Gap and Performance Gap:  
Provide physicians with a better understanding of the importance of dignity conserving care and how to further build on already known skills.

**Objectives:**

1. Understand the basics of dignity conserving care.
2. Understand the role of storytelling in dignity conserving care.
3. Practice dignity conserving care.
4. Outline the various components of cultural/linguistic diversities that relate to patient demographics, diagnosis and treatment.

**Audience:** Primary care physicians, palliative and hospice care  
**Methods:** Lecture with an interactive/group exercise  
**Evaluation:** Post-activity evaluation form  
**Speaker:** Daniel Spurgeon, MD – Huntington Hospital  
**Credit:** 1 AMA PRA Category 1 Credit™

## UPCOMING MEDICAL GRAND ROUNDS:

No Grand Rounds for July, will resume in August

# Physician Informatics

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Health eConnect initiatives are designed to assist you in meeting incentive requirements as well as improve patient safety and practice efficiencies around care collaboration. If you are interested in these programs, future seminars, or have questions, please contact **Rebecca Armato** at 626-397-5090 or email [rebecca.armato@huntingtonhospital.com](mailto:rebecca.armato@huntingtonhospital.com). Other resources that provide information on the federal incentive programs and certified electronic health records are listed below:

### Complete list of ONC-ATCB Certified Electronic Health Records

- <http://onc-chpl.force.com/ehrcert>

### Official web Site to register for Medicare/Medicaid EHR Incentive Programs

- [http://www.cms.gov/EHRIncentivePrograms/20\\_RegistrationandAttestation.asp](http://www.cms.gov/EHRIncentivePrograms/20_RegistrationandAttestation.asp)

### Call, email or stop by the Physician Informatics office

**Physician Informatics Office:**  
626-397-2500 or email:

**Becky Pangburn:**  
[becky.pangburn@huntingtonhospital.com](mailto:becky.pangburn@huntingtonhospital.com);

**Vera Ma:**  
[vera.ma@huntingtonhospital.com](mailto:vera.ma@huntingtonhospital.com);

**Joe Limmer:**  
[joe.limmer@huntingtonhospital.com](mailto:joe.limmer@huntingtonhospital.com)





## Huntington Hospital

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# MEDICAL STAFF

N E W S L E T T E R

July, 2011