



Capital Medical Center's

Medical Staff News

2nd Quarter - 2011

Meeting Calendar 2nd Quarter 2011

APR

- 4th- Tumor Board
- 5th- On-Call Committee
- 6th- Board of Trustees
- 11th- Tumor Board
- 12th- Department of Surgery
- 14th- Perinatal Committee
- 18th- Tumor Board
- 19th- Capital Circle of Care
- 20th- Quality Improvement Council
- 25th- Tumor Board
- 25th- Physician Leadership Group
- 27th- Credentials Committee

MAY

- 2nd- Tumor Board
- 4th- Medical Executive Committee
- 4th- Board of Trustees
- 9th- Tumor Board
- 10th- Department of Medicine
- 11th- Cancer Committee
- 16th- Tumor Board
- 17th- Capital Circle of Care
- 18th- Quality Improvement Council
- 23rd- Tumor Board
- 25th- Credentials Committee

JUN

- 1st- Medical Executive Committee
- 1st- Board of Trustees
- 6th- Tumor Board
- 7th- Department of Surgery
- 13th- Tumor Board
- 15th- Quality Improvement Council
- 20th- Tumor Board
- 21st- Capital Circle of Care
- 22nd- Credentials Committee
- 27th- Tumor Board

People

Olympia Orthopaedic Associates, PLLC Offers Comprehensive Spine and Neurological Care at Capital Medical Center

Olympia Orthopaedic Associates, PLLC, is and has always been committed to providing high quality patient care to the residents of Thurston and surrounding counties. Adding a Neurosurgery Department to their practice, they aim to provide more access to patients seeking care with their critically acclaimed Spine Program. *This expert Spine Program helped earn Capital Medical Center a 5-Star rating for spine surgery for 5 consecutive years and a 5-Star rating in back and neck surgery with spinal fusion for 8 consecutive years from HealthGrades, the leading independent healthcare ratings organization. This is an achievement no other hospital in Southwest Washington has managed to earn.*

Dr. Yoshihiro Yamamoto, a neurosurgeon who was previously Medical Director of Neurosurgery at Providence St. Peter Hospital, has joined Orthopaedic Spine Specialists, Dr. Clyde Carpenter and Dr. Andrew Manista. In July of this year, a second neurosurgeon, Dr. Ryan Halpin, will join Olympia Orthopaedic Associates, PLLC. Dr. Yamamoto joined the team in February, bringing his expertise in neurosurgical care for patients with spine disease and those needing brain surgeries. *His skills range from treating benign and malignant brain tumors, to hemorrhagic stroke, normal pressure hydrocephalus, pituitary adenoma, and trigeminal neuralgia.*

Dr. Carpenter and Dr. Manista specialize in patients with complex spinal deformities, including scoliosis surgery in teenagers using the latest techniques. Dr. Carpenter's skills also include artificial disk replacement in the lumbar spine. Capital Medical Center is currently the only hospital in the area that can offer these specialty services.

It is Olympia Orthopaedic Associates' hope that with the addition of a Neurosurgery Department, together with Capital Medical Center, they can further expand upon their mission and goal of providing excellent, quality medical care to the greater community.



Dr. Clyde Carpenter



Dr. Andrew Manista



Dr. Yoshihiro Yamamoto

Service

New E-PRIV Database

CMC has an updated database which allows hospital staff and medical staff access to basic information about your practice at the hospital. The database, E-PRIV, takes limited data from the Medical Staff Services database for informational use only, such as your name, photo, office address, specialty, phone and pager and board certification. It also lists the specific privileges that you are granted at CMC.

You may review your own data from any hospital computer with internet access by clicking on the Internet Explorer icon / the Favorites tab / the Hospital Links folder / the EPriv 4.0 tab. Search by alphabet and there you are!

Please contact the Medical Staff Services office if you see any information needing correction.

P- (360) 956-2595

F- (360) 956-3542

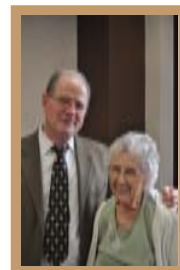
Lazette.wiley@capellahealth.com

Capital Medical Center holds First Annual Joint Camp Reunion

On March 24, 2011, Capital Medical Center held its First Annual Joint Camp Reunion. The event offered 2010 joint replacment patients the opportunity to update staff, physicians, and fellow patients on their progress and activities post surgery.

Roughly 30 patients turned out for the event. Along with staff and physicians, the patients enjoyed putt putt golf, refreshments, and camaraderie. Many patients boasted about the excellent care they received during their stay at Capital Medical Center. Several admitted having had numerous surgeries here and that they would not go anywhere else for their care.

For those who do not know, Capital Medical Center is award-winning for overall orthopaedic services. This achievement is largely due to our great physicians and caring staff.



*Dr. Halpin, Orthopaedic Surgeon
& patient, Elizabeth Lincoln*

New Dietary Supplements Available:

The dietary department has two new oral supplements available for patients.

Enlive - A clear liquid protein supplement that contains 250 calories and 9g protein in each serving. This is a great way to provide our clear liquid patients with the additional calories and protein needed to promote healing. It is also a great substitute for patients who dislike or cannot tolerate Ensure. This supplement is high in carbohydrates and may not be appropriate for some diabetic patients.

Supplemental Cookies – New raspberry filled cookies that contain 200 calories and 6g protein in each cookie. These are great for preventing weight loss in nutritionally high risk patients and are another alternative for patients who dislike or cannot tolerate Ensure. These cookies are high in sodium and carbohydrates and may not be appropriate for some patients on low-sodium or diabetic diets.

These new supplements will be stocked in the kitchen and can be ordered with patient meals or as snacks. Questions? Contact Courtney Larson at ext. 1166 or Jessica Forsman at ext. 4765.



High Dose Rate Brachytherapy now available at Capital Radiation Therapy

Capital Radiation Therapy at Capital Medical Center is pleased to announce that they are now able to treat oncology patients with HDR (High Dose Rate) Brachytherapy. This type of treatment is performed using a remote afterloading machine which delivers high doses of radiation in or near tumors that have been implanted with catheter devices. This type of treatment has been found to be very successful in treating prostate and gynecologic malignancies. It is also beneficial in a select group of breast cancer patients who can be treated with just five days of treatment rather than the typical six week regimen.

Patients who required this type of brachytherapy treatment were forced to travel to Tacoma, Seattle or Portland. We are pleased to announce the availability of an HDR machine in the Olympia – South Sound area. Capital Radiation Therapy is the only radiation oncology facility to have this advanced treatment option available. This service is a welcomed addition to the many advanced treatment options we currently provide as we continue to improve treatment outcomes in our oncology patients.



Capital Radiation Therapy is conveniently located in the physicians' pavilion on the Capital Medical Center campus. For questions or additional information, Dr. Randy Sorum, Chief Radiation Oncologist, can be reached by phoning (360) 596-4872.

Capital Medical Center Campus Parking Changes

As we welcome Olympia Orthopaedic Associates to the Capital Medical Center campus, we need your assistance as we make way for their arrival. The fenced staff parking lot located on the south side of Capital Mall Drive will no longer be available for staff parking effective Friday, May 20th, 2011. We are making progress on the updated parking plan and we will distribute an updated map as soon as it is completed.

In order to serve our **patients as first priority**, the proposed plan will increase patient and visitor parking. Some staff parking will be relocated. The staff parking areas will be located at the North part of the campus in the large staff parking area that already exists. The smaller number of staff parking spaces available toward the East, near Yauger Way will remain until such time as patient and visitor demand grows more. You will also see enhanced signage as we reallocate or relocate certain parking areas.

Again, our main goal is to accommodate our patients and visitors with more convenient parking around our facilities. In order to do this, we need your cooperation to park in the appropriate and allocated spots. We will update you again very soon with a revised parking map and the policy that will address compliance with the assigned parking areas.



Vendor Credentialing

Capital Medical Center has been credentialing vendors for several years now. While this process is not new, we have increased the level to which we utilize this service. We have enlisted the services of REPtrax, a vendor credential management company, to assist in the protection of our patient's safety. Our hospital needs to be aware of who is entering our facility, and for some vendors there may be additional credentials needed for access. REPtrax will manage the credentials of our vendors to ensure our patient rights are respected and that infection control precautions and other organization-specific policies and procedures are followed. REPtrax will provide a uniform source of these credentials and allow them to be available to those in our facility who need access.

The main vendor kiosk can be found in the Material Management Department. In order to ensure that we are meeting the vendor needs of our physicians, we have added a second kiosk to allow vendors to get to surgical cases or other specific areas within our facility in a timely manner. The additional kiosk is located in the operating room on the first floor of the hospital.

Should you have questions or concerns regarding our credentialing process, please feel free to contact Patrick Atkinson, Director of Material Management at (360) 956-2579.



Beers Criteria for Potentially Inappropriate Med Use

This article is the first in a series on the Beers criteria which were developed more than a decade ago by consensus through an extensive literature review with a bibliography evaluated by experts in geriatrics, clinical pharmacology, and psychopharmacology. The criteria identified medications or classes that should generally be avoided because they are either ineffective or they pose unnecessarily high risk for older persons and a safer alternative is available. Also, the criteria identified medications that should not be used in older persons known to have specific medical conditions.

A 2003 update to the Beers criteria identified 48 individual medications or classes to avoid in older adults and 20 diseases or conditions with certain medications to be avoided in those cases. Sixty-six of these potentially inappropriate medications were considered by the consensus panel to have adverse outcomes of high severity.

Potentially Inappropriate Medications (PIMs) are important for elderly patients as thirty percent of hospital admissions may be linked to drug-related problems or drug toxic effects. A study of over 2,000 patients in a Medicare-managed care program found a PIM prevalence of 23%. Those receiving a PIM had a significantly higher total, provider, and facility costs and a higher mean number of inpatient, outpatient, and emergency department visits than comparisons after controlling for other factors. Information on specific PIMs can be found at <https://www.dcri.org/trial-participation/the-beers-list>. Examples will be discussed in the next article of this series along with cautions related to specific diagnoses or conditions.

Fick DM, Cooper JW, Wade WE et al. Updating the Beers criteria for potentially inappropriate medication use in older adults: results of a US consensus panel of experts. Arch Intern Med. 2003;163:2716-2724.

Janet Schade, MS, RPh, is Director of Pharmacy at Capital Medical Center



CRIMSON INITIATIVE

Capella Healthcare has partnered with the Advisory Board Company to implement Crimson, a proprietary, web-based business intelligence platform designed for use by physicians. Crimson has the unique capability of integrating physician quality and utilization data to afford a severity-adjusted view of your practice at Capital Medical Center. It is our goal to help you understand your data and how it might be interpreted so that you are better prepared to correct misconceptions and make necessary improvements.

- ★ It provides a single, integrated source that contains Capital Medical Center data extracted from many disparate sources of information and produces clear and useful profiles for all physicians who practice at the hospital.
- ★ Crimson data is different than any other data that has previously been available - it is more timely, accessible at anytime with a unique login and password, and customizable in terms of comparison selection and exclusions of non-applicable cases where appropriate.
- ★ It provides the capability to compare yourself within and across specialties, adjusting the data to account for differences in patient acuity so that you can compare performance on a level playing field using the APR-DRG grouper.

We have provided the access information to the data below, and where appropriate, will work with you to determine what steps we can take together to improve overall performance related to the quality and efficiency of care. Lastly, CMC will make these data available to any physician who wishes to review their own data.

- ★ We have begun by sharing data with a small pilot group of physicians, and now implementing to all CMC providers with Admitting privileges.
- ★ As with any data set, accuracy improves with use and we anticipate that we will need to correct and refine the data set.
- ★ Common data that will be provided include mortality, complications, core measure compliance, as well as length of stay and readmission rates.

The website link is: <https://pm.crimsonservices.com/CapellaHealthcarePhysicianProfile/login.aspx>

Your user name and first time password were sent to you.

If you have not received your user name, first time password, or you have any difficulty accessing the site and/or any questions about your data, please contact Amber Miller, CQO, at amber.miller@capellahealth.com or 360-704-4744.

Crimson has been utilized in other large hospital systems across the country. It has proven successful in improving the quality of patient care. As such, we truly view Crimson as a valuable tool that will help us provide better care for our patients. We thank you for your continued support in making CMC a top hospital.

Quality

Reminder please.....



Treatments and medications that are experimental or being used as a Humanitarian Use Device (HUD) are required to go through the Investigational Review Board (IRB) process. In the event that a physician would like to pursue one of these options please contact the Chief Quality Officer, Amber Miller at (360) 704-4744 to help facilitate the process.

Thank you!

Finance

YOUR DOCUMENTATION MATTERS!!!

CONGESTIVE HEART FAILURE

To help facilitate reporting congestive heart failure to the highest level of specificity in code assignment it is necessary to answer the following:

- Does the patient have diastolic, systolic or combined diastolic/systolic dysfunction?*
- Is it acute, acute on chronic or just chronic?*
- What is the precipitating factor of the heart failure?*

Complete accurate documentation and code assignment have far reaching benefits for the healthcare system. Specificity in code assignment provides the full picture of treatment rendered and can impact reimbursement for all providers. For example, when a patient comes in with a myocardial infarction with congestive heart failure the difference can be several thousands of dollars based on the type of CHF and if it was documented completely.

DRG 282 (MI)

Final diagnosis: Myocardial infarction, CHF
Reimbursement \$5,856.55
LOS 2.2 days

DRG 280 (MI with major complication)

Final diagnosis: Myocardial infarction
Chronic diastolic congestive heart failure with exacerbation
Reimbursed \$13,437.97
LOS 5.2 days

CODERS CANNOT MAKE ASSUMPTIONS

When a patient presents with a gastrointestinal hemorrhage with resultant "anemia" the coder cannot assume the anemia is due to blood loss without physician documentation. The anemia should be documented blood loss anemia and whether it is acute or chronic.



Capital Medical Center

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