

# Medical Staff NEWS

**LMHS MEDICAL STAFF ANNUAL MEETING  
MONDAY, SEPTEMBER 12, 2005, 6:00 P.M.  
HARBORSIDE EVENT CENTER**

## MEDICAL STAFF DISASTER PLAN

*Purpose: To organize multiple needs requiring physician involvement and provide adequate medical staff support to provide patient care during a disaster.*

### **I. Designated Medical Staff Disaster Center**

- The Disaster Control Center of each hospital is designated as the command post for physician assignments and related issues. If this area should have damage, another area will be designated.
- A Medical Director will be assigned by the Chief Medical Officer to assess and coordinate physician coverage at each hospital.
- The disaster center for physician assignments will be directed by the Medical Directors and staffed by the System Director, Medical Staff Services, and other Medical Staff personnel as needed.
- The functions of the disaster center will be to coordinate physician assignments with the hospital command center and the Emergency Department. (The Emergency Department will be responsible only for patient triage.) Activities will be coordinated with input from Medical Staff leadership.

### **II. Physician Disaster Preparedness Coverage**

- Physician coverage for disaster preparedness

- will be designated by each specialty Emergency Department call roster.
- A current Medical Staff Disaster Book and box of supplies will be available for each hospital. Medical Staff roster, Executive Committee roster and Emergency Department specialty call rosters will be available to contact physicians.
- Each specialty physician on Emergency Department backup call will be responsible to provide care as Team-A. The Medical Director at each hospital will be responsible for assessing and coordinating the number of physicians needed in the hospital prior to a hurricane. Team A physicians are to remain to provide appropriate patient care until additional physicians (Team B) are able to travel and arrive to provide coverage for patients.
- In the event of immediate disaster, physicians should report immediately to nearest healthcare facility. If phones are out of service, physicians are asked to report immediately to the nearest healthcare facility.

### **III. Medical Staff Responsibilities**

- In the event of a disaster, the Medical Staff officers and Department Chairmen should assist Medical Staff Services to review physician coverage. Physicians will be called to respond to provide care as needed.

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 HPMC Nursing Units • Continuing Medical Education

- During or following a disaster, physicians should contact the Medical Staff disaster center by coming to the hospital or calling with a report of their availability and how they can be reached.
- Physicians reporting for duty are asked to report without being called and encouraged to bring personal items to stay at the hospital for a short while.
- It is recommended that physicians make arrangements to send their families out of town and away from the disaster area. If it is not possible for families to leave, accommodations may be provided at the hospital (to be coordinated with the Disaster Registration Center - HPMC in Employee Entrance Lobby; LMH in Main Lobby; and CCH in Outpatient Registration off main lobby - for billeting assignments).

#### **IV. Communication to Physicians During a Disaster**

- Medical Staff Services and Public Affairs will be responsible for periodic updates on the status of a disaster and on issues as they pertain to the entire Medical Staff.
- Designated distribution points will include: Emergency Department, Nursing Units, Physician Lounges.

#### **V. Physician Assistance**

- Medical Staff Services will be responsible for working with the Medical Staff leadership in organizing any special assistance for the Medical Staff on a personal and professional basis.

#### **VI. Credentialing Volunteer Physicians**

- The System President, Medical Staff President or their designee(s) may grant disaster privileges upon presentation of the following:
  - Disaster volunteer physicians (who are not members of CCH or LMHS Medical Staffs) will be asked to complete a questionnaire and show identification, i.e., his/her driver's license, hospital picture ID badge, etc.
  - A current license to practice and a valid picture ID issued by state, federal, or regulatory agency.
  - Physicians will have medical licensure verified as soon as possible.
  - Each volunteer physician will be issued a wristband for identification. They will be given a brief orientation, map of the hospital and list of resource people.
  - Volunteer physicians will be given assignment by Medical Staff disaster center.
  - When the disaster situation no longer exists, temporary disaster/emergency privileges automatically terminate.

## **JCAHO REQUIREMENTS FOR IMPROVEMENT COMPLIANCE**

### *Action Plan approved by the LMHS and CCH Performance Improvement Committees*

The Joint Commission Evidence of Compliance Report was submitted July 19, 2005. The Evidence of Compliance requires that these elements be measured for four months using a randomized medical record audit of 70 medical records for each element. A minimum of 90% compliance on each of these elements must be achieved to remove the Requirements for Improvement. Failure to meet the requirement can impact our accreditation status. Your support and attention to this matter is appreciated. The process is as follows:

1. Each non-compliant occurrence will generate a letter to the physician.
  - a. History and Physical compliance
  - b. Post-op Note compliance (all elements)
  - c. Procedure Note compliance
  - d. Physician Unsafe Abbreviations
  - e. Emergency Department Documentation on admitted patients
  - f. Completed LPG/LCC Transfer Form to the Emergency Department.
2. The physician will be requested to attend the next scheduled LMHS and/or CCH Performance Improvement Committee upon receipt of three letters.
3. The physician or physician extender will be referred to the Medical Executive Committee for failure to appear before the Performance Improvement Committee.
4. The physician or physician extender will be referred to the Medical Executive Committee should he/she receive an additional three letters.

# UTILIZATION MANAGEMENT PLAN REVISION

*Mark Greenberg, MD & Ann Friel*

A revision to the LMHS 2005 Utilization Management Plan, approved by LMH/HP and CCH Medical Staff Executive Committees and the Board of Directors, gives Case Managers the authority to clarify admission orders and/or convert a patient status from OP Observation to IP admission.

## **The revision states:**

Case Managers are authorized to use the hospital's medical necessity criteria to clarify the correct admission status, via a formal order in the medical record without notifying the physician, when the physician's order doesn't clearly state the level of care the physician intended and/or the patient is receiving. The Case Manager will document the correct terminology via a written order.

Case Managers, using nationally recognized InterQual criteria, will review all patients in OP Observation status. If/when a patient meets inpatient admission criteria the physician will be notified. The Case Manager may change patient status from Observation to Inpatient via a formal order in the medical record to be co-signed by the physician.

Rationale: A recent communication from Florida Medical Quality Assurance Inc. (FMQAI), the Medicare Quality Improvement Organization for the state of FL., prompted the revision. FMQAI notified hospital providers, via a March 15, 2005 letter, that CMS is monitoring Medicare charts for

the presence of a formal admission order. FMQAI states cases that lack clarification of the admission status have a high potential for being denied reimbursement. An admission order to location, to a physician, or just the order "admit" does not indicate inpatient status and therefore falls into the denial process. Suggested wording includes either "admission to inpatient status" or "place patient into observation status." Also, we know that status mismatches between hospital and physician billing are coming under increased scrutiny.

For this reason it's in our best interest to correct status ambiguity and/or level of care confusion prior to billing in order to avoid payment recoupment in the future.

## **Case Managers will assist to ensure that:**

- Your initial order regarding patient status, when viewed by external reviewers, leaves no doubt concerning your decision to formally admit the patient to inpatient status or place him/her in outpatient observation
- Patients are converted from OP Observation to IP status in a timely manner based on InterQual, the medical necessity criteria utilized by Medicare and Medicaid

If you would like additional information on this subject please contact Ann Friel at 573-5516. As always, thank you for your support.

## UPIN NUMBERS

*Attention: Physician Office Personnel*

Medical Staff Services receives many phone calls each day for UPIN numbers.

Listed below are two websites to obtain UPIN numbers:

**<http://upin.ecare.com>**

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

**(then click on the search button, put in name)**

## NET ACCESS

Net Access is the browser-based application that allows physicians and staff secure access to patient (including in-patient, out-patient and ED visits) lab, rad, micro results, dictated reports, and demographic information over the Internet. If you haven't logged on, or have any questions, please contact Karen Mueller, Information Systems Physician Liaison at 343-7841 or [karen.mueller@leememorial.org](mailto:karen.mueller@leememorial.org) or pager 930-6635.

## LEE CARDIAC CARE IS NOW THE HEART AND VASCULAR INSTITUTE

What's in a name? The right name means everything when you are a national leader in cardiac and vascular care. That's why Lee Cardiac Care recently decided to change its name. As of now, Lee Cardiac Care is officially the Heart and Vascular Institute.

The LMHS cardiac team identified the need for a name change several years ago. "Lee Cardiac Care simply didn't reflect the range and breadth of the System's services," says Kathy Shierling, RN, executive director, Heart and Vascular Institute.

The recent HealthPark expansion project provided an excellent opportunity to make a System-wide name change and add vascular in the title. "Vascular disease is one of the most under treated

and undiagnosed areas in Southwest Florida," says Kathy. "You can't treat the heart in isolation from the vascular system. Sophisticated vascular surgeries and treatments are provided at all three of our acute care hospitals."

LMHS is the area's cardiovascular leader, providing a variety of state-of-the-art heart health services – diagnostics, interventional cardiology, cardiovascular surgery, specialized hospital care, and rehabilitation services.

"The new name conveys our position as the community's leader in cardiac and vascular care as well as the quality and excellence of our services and facilities," says Kathy. Look for the new Heart and Vascular signs to go up soon around the System.

## PPT PROCESS UPDATE

On February 14, 2005 the pre-procedure testing department began a new process to reflect our goals of improving patient flow, increasing patient and surgeon satisfaction and decreasing the number of cancellations on the day of surgery.

The average PPT appointment before February was one hour in addition to the wait time for the appointment. Now the average appointment time is 30 minutes and the wait time has improved. Patients compliment us daily regarding their short visit through our department.

The day of surgery cancellation percentage at Lee

Memorial Hospital has declined from 4.4% in February to 2.7% in June. This decline is due to the PPT RNs assessing the patients, determining the needs of the patients, and following through with the surgeons and anesthesiologist earlier in the process. We are currently in the process of tracking this same data for HealthPark.

We continually make improvements to better serve our customers and want to thank everyone for their support and patience. We also invite any questions, concerns or suggestions for improvement. Please contact either Debbie Mittica at 334-5855 or pager 930-3735, or Liefje Marshall at 334-5046.

## LEE CENTER FOR WEIGHT MANAGEMENT ANNOUNCES A NEW PEDIATRIC PROGRAM

Lee Health Solutions is pleased to announce an exciting eight-week weight management program for children aged 12-17 years old. The program, in collaboration with the Cape Coral Wellness Center, consists of one-hour group exercise sessions three times per week and a weekly group nutrition class by a registered dietitian. Topics to be discussed in the nutrition class include healthy food choices,

lifestyle changes, portion control and eating out guidelines. Weekly weight and body fat analysis will be completed. This affordable, comprehensive program is only \$250.00.

Please have your patients call 573-5720 for more information or to schedule.

## RESTRICTED TO ID

During the interim when IMA ID is not able to “officially” cover Lee Memorial Hospital, Dr. MB Saunders will be available for phone consults. This process will be required on any antibiotic / antifungal medication that is currently designated as restricted to ID. Pulmonologists, trauma physicians, and intensivists will be able to prescribe these restricted agents during this period.

## LEE DIABETES CARE EXPANDING TO BONITA SPRINGS

Lee Health Solutions is pleased to announce that Lee Diabetes Care will be offering diabetes education at Bonita Community Health Center starting in August. To introduce the classes to Bonita Springs, Lee Diabetes Care will offer a free 4-hour program in August and September. Basic diabetes management, including meal planning, medication therapy, monitoring and prevention of complications will be reviewed in this lecture.

Once American Diabetes Association Recognition is achieved for this site, the comprehensive classes will be initiated. The comprehensive classes consist of 10 hours of initial education and quarterly individual follow-up with a certified diabetes educator. Medicare and most commercial insurances do cover the cost of the comprehensive program. For more information or to have your patients schedule the diabetes class, please have them call 239-573-5727

## LOCATION CHANGE FOR THE PAIN MANAGEMENT CENTER

*Drs. Mahaney, Micovic and Acosta*

Effective July 20th, The Pain Management Center at CCH has moved to a new location within CCH. The new address is 708 Del Prado Blvd., Suite 7. The Pain Management Center phone numbers and the scheduling phone number have remained the same. Call The Pain Management Center at CCH, 772-6492. Call The Outpatient Center at HealthPark Commons, 985-3640. The Scheduling

number has remained the same - 573-5410. The Pain Management Center has a new simplified referral process and a phone call is not needed when you use their simple physician referral form. For a supply of these forms, please call Whitney Andreu at 466-4236 or e-mail [whitney.andreu@leememorial.org](mailto:whitney.andreu@leememorial.org)

## HPMC NURSING UNITS RENOVATION CONTINUES

### **MPCU Returns To Its Permanent Home On 3 West**

- On Monday, 8/15/05, MPCU patients and staff on 5 West will return to their permanent home on 3 West.
- The phone numbers for MPCU will remain the same.

### **SPCU Temporarily Moves To 5 West**

- On Monday, 8/22/05, SPCU – 4th floor will temporarily move to 5 West so renovation of the 4th floor can begin. The phone numbers for SPCU will not change when they move to 5 West.
- Renovation is estimated to take 6 weeks, and should be complete by October 3rd, at which time SPCU will return to the 4th floor.

## **SPCU Patients To Be Monitored By Heart Central**

During the 6-week period that SPCU will be located on 5 West, those patients will be monitored by Heart Central, which is also housed on 5 West. Heart Central is staffed 24/7 by two trained monitor technicians on each shift who continuously monitor the patients' heart rhythms, and are able to immediately contact the nursing staff when there is a cardiac issue via the nursing zone phones. The nursing staff will be able to pull up cardiac rhythms

as needed under the Phillips browser icon on the computer. Instructions for the use of the Phillips browser icon are located on each computer. As all of these changes take place, the computer system will be simultaneously updated to accurately reflect the room numbers assigned to the transferred patients. Physicians may also check at the nurse's station on each floor if they are unsure of a patient's location. Call Vickie Hettenbaugh, Director, PCUs with questions, 432-3589 or pager 930-4980

## **CONTINUING MEDICAL EDUCATION**

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### **"PREIMPLANTATION GENETIC DIAGNOSIS: THE ETHICS OF SCREENING EMBRYOS FOR GENETIC DISEASE AND GENDER PREFERENCE"**

Craig Sweet, MD

**Wednesday, September 7, 2005**

6:30 – 7:30 p.m.

HealthPark Medical Center Room 1A

RSVP for Dinner by September 6 – 573-5680

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### **"SLEEP APNEA"**

Razak Dosani, MD, FACP, FCCP

**Tuesday, September 13, 2005**

6:30 – 7:30 p.m.

Lee Memorial Hospital Auditorium

Co-sponsored with Southwest Florida Regional Medical Center

RSVP for Dinner by September 12 – 573-5680

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### **"THE SPECTRUM OF HEEL PAIN: DIAGNOSIS AND TREATMENT"**

Joseph Grillo, DPM, FACFAS

**Thursday, September 22, 2005**

6:30 – 7:30 p.m.

Lee Memorial Hospital Auditorium

RSVP for Dinner by September 20 – 573-5680

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### **"IRB REVIEW OF PEDIATRIC RESEARCH"**

Pam Fowler, RN, BS, CIM

**Wednesday, September 28, 2005**

HealthPark Medical Center Room 201 & 203

12:00 – 1:00 p.m. – The Pediatric Ethics

Committee

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### **"NOSOCOMIAL PNEUMONIA"**

Dennis Maki, MD

Ovid O. Meyer Professor of Medicine

Head, Section of Infectious Disease

University of Wisconsin Medical School

**Thursday, September 29, 2005**

Gulf Harbour Golf & Country Club

7:00 – 8:00 p.m.

RSVP by September 27 – 574-0397

For LMHS Physicians and Pharmacists

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### **FMA MANDATORY EDUCATION IN 05**

"Prevention of Medical Errors, HIV/AIDS and Domestic Violence"

**Saturday, September 24, 2005 - SWFRMC**

**Saturday, November 12, 2005 - CCH**

**Saturday, December 3, 2005 – LMH**

ALL 3 COURSES ARE OFFERED ON ALL 3

DATES: 7:45 a.m. – 12:15 p.m.

BREAKFAST AND 4 CME CREDITS

RSVP – 573-5680

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If you have questions or would like to submit an article to Medical Staff News, please contact

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