

# Medical Staff NEWS

## JCAHO NATIONAL PATIENT SAFETY GOAL UNSAFE ABBREVIATIONS

*Standardize a list of abbreviations, acronyms and symbols that are not to be used*

### Scope of JCAHO Requirements:

- Applies to all orders and all medication-related documentation that are handwritten, utilize free text entry, or employ pre-printed forms.
- The minimum expected level of compliance for handwritten documentation and free text entry is 90 percent.
- The minimum expected level of compliance for pre-printed forms is 100 percent.
- Surveyors will count occurrences of Do Not Use Abbreviations.
- One occurrence equals one or more “slips” per clinician per record.
- Three occurrences equal a Requirement for Improvement (RFI).
- There is no “partial compliance” for National Patient Safety Goals.

### LMHS Policy:

Proper Use of Abbreviations in Medical Record (Unsafe Abbreviation List) - S10 02 741

### Compliance Tips!

- Unsafe abbreviations and dose expression are not allowed anywhere within LMHS medical records.
- A blue laminated unsafe abbreviation list is on every medical record within the acute care setting, posted on all nursing units and in all dictation / transcription areas of outpatient facilities.
- Dorland’s Medical Abbreviations are the standard reference for abbreviations, with the exception of those on the Unsafe Abbreviation List.

- All parties writing orders in the patient medical records are requested, whenever possible, to personally present their orders to the patient’s nurse, the charge nurse, or unit secretary for immediate review / auditing for unsafe abbreviations and legibility.

### Unsafe Abbreviation List

Unsafe:	Instead Use:
Apothecary measures dram, minim, grains	The “metric system”
µg	“mcg”
q.n.	“nightly”
U or u	“Units”
IU	“Units”
X 3 d	Write out “days” or dates the medication should be provided, e.g. X 3 days
Ss	Spell out “sliding scale”, “one-half” or “1/2”
q.d. qid qod	“daily” or “QAM” or “QPM” “four times daily” or “4x daily” “every other day”
MS MSO <sub>4</sub> MgSO <sub>4</sub>	Write “morphine sulfate” or “magnesium sulfate”
T.I.W. (for three times a week)	Write “3 times weekly” or “three times weekly”
<ul style="list-style-type: none"> <li>• <b>Decimal Point Requirements:</b> No terminal zeroes - 1 mg not 1.0 mg Always use a zero before a decimal point - 0.1 mg. not .1mg</li> <li>• <b>Using the FULL drug name is SAFEST.</b></li> <li>• No shortened drug names - e.g. “Nitro”, “Neo”, “Pitt”, “Levo”, “DPH”. Avoid acronyms and abbreviations - e.g. Tyl #3, T #3, PCN</li> <li>• <b>INDICATIONS FOR DRUG USE is recommended.</b></li> <li>• <b>Prescriber identified by legible signature, or printed last name, or physician ID / dictation number.</b></li> </ul>	

**Your compliance is requested in order to help keep our patients safe!**

I N • T H I S • I S S U E

JCAHO National Patient Safety • Welcome New Physicians • Peer Raves and Recognitions  
Documentation/Coding • Library Notes  
Cape Coral Hospital Clinical Lab Receives CAP Accreditation • Falls Prevention Program  
Neurology Consult Services • Cape Chorale to Raise Funds for Pediatric Speech Therapy  
Continuing Medical Education

# WELCOME NEW PHYSICIANS

*(Approved 01-03-06)*

## **Affiliate Staff (LMHS only):**

- Christine Mackie, M.D. – Family Practice

## **Provisional Staff (CCH & LMHS):**

- Mary J. Betterman, M.D. – Teleradiology
- John K. Chang, M.D. – Teleradiology
- Michele Melotti, M.D. - Teleradiology

## **Provisional Staff (LMHS only):**

- Darren R. Jacobs, D.O. – Family Practice
- Jeannine M. Kubiak, Ph.D. – Psychology

## **Provisional Staff (CCH only):**

- Michael H. Lee, M.D. – Emergency Medicine

# PEER RAVES AND RECOGNITIONS

## **Doctors Supporting Doctors**

Dr. Adam Brenner expresses his appreciation to Dr. Blaise Kovaz, Dr. Dean Goldberg, Dr. Edward Grendys and Denyse Mahoney, PA for their assistance with a critical patient.

On December 30, 2005, the beginning of the holiday weekend, Dr. Brenner was working in the ED at LMH when a patient with a ruptured ectopic pregnancy was admitted. The OB GYN physician on call was caring for another critical patient. Dr. Goldberg, the trauma physician called the GYN Oncology office and Denyse, a GYN Oncology PA was immediately on the scene to assist. While Dr. Grendys was on his way to the hospital to help, Dr. Kovaz, Chairman of the OB GYN Department arrived and immediately brought the patient to the OR where he performed a procedure that saved the patient's life.

Dr. Brenner stated that he appreciated the support from his colleagues and that the communication, immediate medical care and attention made a difference in the patient's outcome.

## **Physician Author**

Dr. Rie Aihara, Trauma Surgeon and Critical Care Specialist, is a contributor to Becker & Stucchi, "Essentials of Surgery, 2006", considered to be a virtual "Bible" in the world of surgery and surgical critical care. She is listed as the first of the contributors, citing that she is a "Trauma Surgeon/Surgical Critical Care Specialist at Lee Memorial Hospital, Fort Myers, FL

## **Cape Coral Hospital Physicians Volunteer at a Hospital in the Dominican Republic**

Dr. Carrasquillo, a CCH surgeon, and Dr. Lozano, a CCH ENT surgeon, are passionate about their work in a hospital in San Juan Dela Magana in the Dominican Republic. A mission group from Orlando arranges the one week mission trips to provide medical care for the indigent population of a town with only 1 hospital for an area of 115 kilometers. In November, Dr. Carrasquillo, Dr. Lozano and Dr. Gates were part of the team that performed 94 ENT and general surgery procedures in 2005. In January 2006, Dr. Gates and Dr. Marcucci returned to the Dominican Republic on a urology mission. Other CCH employees who participate in this mission work include, Cynthia Edwards, CRNA, Kathleen Murray, CRNA and Kim Stillwell, CCH scrub tech.

# DOCUMENTATION/CODING

*Janelle Wissler, RHIA, Data Quality Manager, LMHS*

## KIDNEY DISEASE

New coding guidelines have just been released by Medicare governing the indexing and coding of Chronic Kidney Disease (CKD). The definition is for conditions treated for three months or longer. The National Kidney Foundation successfully lobbied for a code set to eliminate the confusion between chronic

renal insufficiency and chronic renal failure. Failure to use the new terminology may result in physician profiles suffering. The stages of CKD are based on glomerular filtration rate determination. Therefore creatinine screening will be necessary to convert the results into acute renal failure, CKD, or a combination of both.

Stage 1 CKD:	Kidney damage with normal or high GFR (over 90)
Stage 2 "mild" CKD:	Kidney damage with mild GFR decline (60-89)
Stage 3 "moderate" CKD:	Kidney damage with moderate decrease in GFR (30-59)
Stage 4 "severe" CKD:	Kidney damage with severe decrease in GFR (15-29)
Stage 5 CKD:	Very severe kidney damage with GFR less than 15 ml/min. Or Kidney FAILURE with GFR less than 15 ml/min.
Dialysis patients:	Use the term ESRD for which there is a specific code.
Unspecified CKD:	Unknown GFR or Chronic Renal Insufficiency or Chronic Renal Failure.

It is still important to also document the underlying condition that led to the kidney disease, such as hypertension or diabetes.

If our coder encounters a chart missing the above-specified terminology, a query will be sent to the physician for clarification in an effort to obtain the necessary documentation.

Some of our physicians are already doing a wonderful job with these new guidelines, and we are aware that this is brand new information for other physicians. We look

forward to being able to code and bill these cases correctly the FIRST time. Good documentation always makes a coder's day go better.

Janelle can be reached at [Janelle.Wissler@leememorial.org](mailto:Janelle.Wissler@leememorial.org) for any further clarification on this topic, or any other topics physicians would like addressed from a coding/reimbursement standpoint. {Adapted from A Minute for the Medical Staff, Medical Records Briefing and Coding Corner from Clinical Coding and Reimbursement}

## LIBRARY NEWS

The National Library of Medicine enhanced its Consumer Health Database, MedlinePlus, by adding over 100 herbal and supplement monographs in English and Spanish from Natural Standard. Natural Standard is an evidence-based, peer-reviewed collection of information on alternative treatments. Each monograph includes a table of uses of the supplement based on scientific evidence. The herbal or supplement receives a grade ranging from A (strong scientific evidence for this use) to F (strong scientific evidence against this use) for diseases or conditions it treats. In addition, each monograph provides information on dosing, safety, interactions, and selected

references. Many monographs also contain illustrations.

You can find Natural Standard monographs by choosing Drugs & Supplements from the MedlinePlus home page. An A-Z list of herbal and supplement links will appear below the alphabetical index to MedlinePlus's drug information.

To access MedlinePlus, go to IntraLee, Departments, Medical Library, and choose DATABASES. You may also access it from the Medical Library Web page on the Internet at: [www.leememorial.org/medlibrary](http://www.leememorial.org/medlibrary)

## CAPE CORAL HOSPITAL CLINICAL LABORATORY RECEIVES COLLEGE OF AMERICAN PATHOLOGISTS (CAP) ACCREDITATION

The Cape Coral Hospital Clinical Laboratory has been awarded accreditation from the Commission on Laboratory Accreditation of the College of American Pathologists (CAP) based on the results of an on-site inspection that took place in August 2005, under the direction of George Kalemeris, M.D. The laboratory was recognized for providing quality laboratory services.

The Cape Coral Hospital Clinical Laboratory is one of a select group of laboratories that has been evaluated and found to be in compliance with the CAP accreditation standards – rigorous laboratory standards designed to help ensure quality patient care. The CAP's program is the most respected and recognized laboratory accreditation program in the world and has long been the "gold standard" against which others are measured.

## COMING SOON FALLS PREVENTION PROGRAM

Falls are a major cause of morbidity and mortality for older adults. A fall is often a sentinel event. Patients who fall may have a decline in their ability to perform activities of daily living within the first 2 or 3 days following the fall. People come to the Emergency Department for an evaluation and treatment of injuries following a fall.

Older Adult Services in conjunction with the ED and Home Health is piloting a falls prevention program that will start in the spring at Lee Memorial Hospital. The goal is to reduce subsequent falls. When appropriate, patients will be given a referral to Home Health for an in-home evaluation.

On Wednesday, February 22nd, **Michael Raab, M.D.**, a Geriatrician from Older Adult Services, will present a CME dinner lecture entitled "**Prevention of Falls**" at Lee Memorial Hospital in the Auditorium from 6:30 – 7:30 p.m. RSVP by calling 573-5680.

## NEUROLOGY CONSULT SERVICES

In order to provide neurology coverage system-wide, the Neurology section in conjunction with the Florida Neurology Group began a neurology consult service on January 1, 2006.

Neurology Consult Services will provide 24 hours/7 days per week inpatient neurology services at all 3 hospitals.

For physicians who are interested in consulting with this service, consultations can be requested by calling **Neurology Consult Services at 210-7997**.

**In lieu of an Emergency Department neurology call schedule for each hospital campus, the Neurology Consult Service will provide ED and inpatient consultations.**

### **Participating Neurologists include:**

Lane R. Carlin, MD  
Paul F. Driscoll, MD  
Christina M. Diaz, MD  
Chris J. Marino, MD  
William J. Carracino Jr., MD  
Wendy G. Robinson, MD  
Naili Duan, MD  
Harris Bonnette, MD  
Douglas Newland, MD

## LMHS EMPLOYEE "HEALTH MAKEOVER PROGRAM"

If you have an LMHS employee as a patient, a Wellness Case Manager may be contacting you to approve their participation in the new "Health Makeover Program".

LMHS is now offering access to an on-line health risk assessment called "howsyourhealth" to all employees on a voluntary basis. The Web site is [howsyourhealth.com](http://howsyourhealth.com). Employees in the Lee Health Plans who are over 40 can take the assessment one step further and send the form to the Health Advocacy Department and participate in the 1-year health makeover.

After identifying health risks, a Wellness Nurse Case Manager will recommend hospital-based programs such as the Health Solutions Weight Management, Diabetes and Cardiac Prevention classes, lifestyle classes, dietary counseling, "Freedom From Smoking" and Wellness Center participation. Once the risk assessment is completed, the Health Makeover Program will seek approval from the Primary Care Provider.

Lee Memorial Health System's Health Plan is absorbing the costs of these programs to promote healthier lifestyles for employees and hopefully reduce future costs to the health plan by decreasing the likelihood of chronic diseases.

For additional info call **Cindy Auskamp**, Wellness Case Manager, Health Advocacy Department, LMHS at **437-7320**.

## CONTINUING MEDICAL EDUCATION

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### **“MAKING SENSE OUT OF THE TREATMENT FOR CANCER OF THE PROSTATE”**

Ronald Castellanos, M.D.

**Wednesday, February 15, 2006**

Lee Memorial Hospital Auditorium

6:30 – 7:30 p.m.

RSVP for Dinner by February 13th– 573-5680

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### **“PREVENTION OF FALLS”**

Michael Raab, M.D.

**Wednesday, February 22, 2006**

Lee Memorial Hospital Auditorium

6:30 – 7:30 p.m.

RSVP for Dinner by February 20th – 573-5680

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### **“THE MANAGEMENT OF PEDIATRIC ASTHMA IN 2006”**

Bruce Schnapf, D.O.

Associate Professor

Department of Pediatrics

University of South Florida

**Thursday, February 23, 2006**

HealthPark Medical Center Room HP1B

6:30 – 7:30 p.m.

RSVP for Dinner by February 21st – 573-5680

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### **COMING SOON.....**

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### **THE CHILDREN’S HOSPITAL OF SOUTHWEST FLORIDA ANNUAL PEDIATRIC CONFERENCE**

**April 22 and 23, 2006**

### **The Pink Shell Beach Resort & Spa**

Earn 12 CME credits and hear talks on new vaccines in 2006, top 10 infectious disease articles, GERD, sinusitis, UTI’s, sleep apnea, the relationship between autism and epilepsy, evidence-based strategies in well children and dermatology. This year’s speakers include: Dr. Michael Pichichero (Peds ID, NY), Dr. Michael Radetsky (Peds ID, U of NM) and Dr. Benjamin Gold (Peds GI Emory).

For a complete list of faculty and topics, visit the conference Web site:

<http://internet2-dev/childrenhospital/pedconf2006.asp>

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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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