

July 2010

Keeping U up to Speed.

DNV Accreditation Approved!

LMHS has been notified by DNVHC that we are now NAIHO-accredited. With the notification of this accreditation, DNVHC will be our accreditation body. LMHS is discontinuing our accreditation with The Joint Commission following a LMHS leadership recommendation and approval by the Board of Directors.

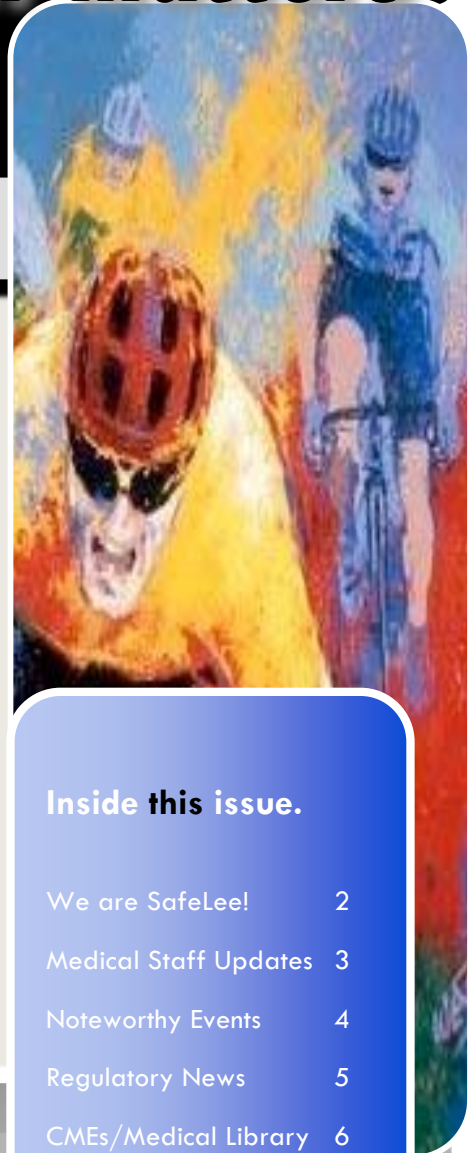
As you are aware, the announcement several years ago that DNVHC achieved deemed status as an accrediting body for CMS gave hospitals the opportunity to consider them as an alternative to The Joint Commission accreditation.

Over the past year and a half, an in-depth analysis and comparison of the two accrediting organizations occurred. The recommendation was to seek accreditation from DNVHC and to assess their survey process while maintaining Joint Commission accreditation.

DNVHC met one of our strategic goals to improve care through the application of a quality management system - ISO 9001. DNVHC certifies health care institutions as ISO 9001 compliant. ISO 9001 certification has an international reputation for high quality.

The DNVHC survey occurred at the end of May and was followed immediately with an AHCA validation survey. The DNVHC survey process was very thorough and the AHCA validation survey was favorable for DNVHC.

In summary, DNVHC is now our accreditation body. The next survey will be in May of 2011 and we will begin our journey to implement the ISO 9001 quality management system.



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Please give a warm welcome to Our Newest Medical Staff Members.



Claudio A. Ferreira, D.O.
Ophthalmology
Eye Centers of Florida
LMH



Charina Yango, M.D.
Family Practice
Inpatient Consultants of Florida
CCH, GCMC, HPMC, LMH

SafeLee in Our Hands.

TOP Priority: *Improving Inpatient Standards*

With input from the medical staff, medical departments, specialists and physician leaders, we have been working to improve the medical care of hospitalized patients who are attended by hospitalists.

The Departments of Medicine and the Medical Executive Committees have approved higher standards for inpatient care. In addition, the Departments of Medicine have revised their ED call back-up systems to provide more stability and consistency.

LMHS has entered into accountable, contractual relationships at each facility for hospitalist services. These contracts include standards that build upon those set by the medical staffs. By providing 24/7 in-house physician coverage, we will improve response times, outcomes and the entire patient experience.

We are pleased to announce that our partners in inpatient care are Cogent Healthcare at HP and LMH and the Hospitalist Group of Southwest Florida at CCH and GCMC. We are asking each of these groups to focus their resources at their designated facilities as part of the contracting relationship. Thank you for your support during this transition.

LMHS' contracted hospitalists will be in-house 24/7 to provide care. The groups will also be required to:

- Communicate with primary care physicians upon admission, discharge, and significant changes in a clinical condition
- Evaluate patients before ordering consultations (except under special circumstances)
- Limit caseload to 20 patients per physician
- Maintain telephone response time to departments and floors within 10 mins
- Respond to the ED and ICU in person within 30 minutes and to the floors within 60 mins
- Admit all pregnant patients less than 20 weeks gestation who have a primary medical diagnosis
- Obtain consultation with an intensivist upon admission to the unit and limitation of clinical management to general internal medicine
- Limit the number of consultations to those necessary to achieve appropriate medical care of the patient

24/7



We Are Getting In The Zone!

According to the Archives of Internal Medicine/AMA, an 18-month observational study of medication administration by nurses revealed that the occurrence and frequency of interruptions were significantly associated with the incidence of procedural failures and clinical errors.

This study directly observed nurses during medication administration and discovered that each interruption was associated with a 12.1% increase in procedural failures and a 12.7% increase in clinical errors. Interruptions occurred in more than 50% of administrations with error severity increasing with interruption frequency.

At LMHS, we understand that by minimizing unnecessary interruptions we can reduce medication errors. Our nursing units are making changes in the medication preparation areas to add "Do Not Disturb" zones to support our core value of patient safety.

Patient First – Every Time.

Medical Practice Updates.

Individual Changes

Christopher Calcagni, D.P.M.

Solo Practitioner, Podiatry
1212 Country Club Blvd #301
Cape Coral, FL 33990
Phone 239-573-1505
Fax 239-573-1744

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Office: 4040 Palm Beach Blvd.
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Florence Doman, M.D.

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2776 Cleveland Ave., #8228
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Phone 239-334-5837
Fax 239-334-5266

Eric W. Jones, M.D.

PPC, Pediatrics
9350 Camelot Drive
Fort Myers, FL 33919
Phone 239-481-5437
Fax 239-481-0570

Asjad Khan, M.D.

Lauren Speas, A.R.N.P.
Pediatric Endocrinology
5216 Clayton Court
Fort Myers, FL 33907
Phone 239-274-5660
Fax 239-274-5669

Jonathan D. Robbins, Psy.D.

Solo Practitioner, Psychology
1560 Matthew Drive, Unit F
Fort Myers, FL 33907
Phone 239-333-8994
Fax 239-277-1993

Theresa Buckley, C.N.M.

Lee OB/Gyn Associates
16271 Bass Road
Fort Myers FL 33908
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Fax 239-481-3251

P. Lynne Campbell, A.R.N.P.

Cerebrovascular Specialists
9981 S. HealthPark Dr., #120
Fort Myers, FL 33908
Phone 239-343-8830
Fax 239-343-8833

Alejandrina Montas, P.A.

Dr. Suresh Chavakula
5050 Mason Corbin Court
Fort Myers, FL 33907
Phone 239-482-2280
Fax 239-482-2281

Rolando Otero, M.D.

Olga Fraga, M.D.

Fort Myers Pediatrics
8381 Riverwalk Park Blvd,
#202
Fort Myers, FL 33919
Phone 239-689-5561
Fax 239-689-5958



Group Changes

Pediatrix Medical Group of Florida

Neonatology

Deogracias L. Caangay, M.D.
Shahid Sultan, M.D.
William F. Liu, M.D.
Mohamed M. Faisal, M.D.
Ivan F. Abril, M.D.
Kultar Singh, M.D.
Iman Fares, M.D.
Lorna E. Forchin, A.R.N.P.
Marilyn M. Farley, A.R.N.P.
Deanna E. Overbeck, A.R.N.P.
Elaine Pao, A.R.N.P.
Nannette M. Albright, A.R.N.P.
April A. Felton, A.R.N.P.

The Hospitalists Group of SW FL

Hospitalist Medicine

877-226-0282

LPG @ College Pointe

Family Practice/Internal Medicine

Charles G. Briseno Jr., M.D.
Darren R. Jacobs, D.O.
Aldith M. Lewis, D.O.
Dan W. Pulsipher, D.O.
Sebastian J. Dralans, M.D.
Manuel A. Garcia, M.D.
Bruce Lipschutz, D.O.
Phone 239-343-9100
Fax 239-343-9108

What's **Happening** Around Here?

Download **DynaMed on your** **PDA.**

Lee Memorial Health System has licensed **DynaMed** for physicians and other health care professionals to use primarily at the point of care.

This evidence-based database used in many medical schools and hospitals world-wide provides clinically-organized summaries for nearly 3,000 disease and condition topics, incorporating over 800 drug topics. **DynaMed** editors monitor the content of over 500 medical journals, using a rigorous 7-step methodology for selecting and critically appraising each selected article. **DynaMed** is updated daily and is available on a PDA device, iPhone, Blackberry and other hand-held devices. **DynaMed** is found on our Medical Library Website on IntraLee (on Databases page), where it can be accessed without passwords and at <http://www.leememorial.org/medlibrary>. Please contact medlibrary@leememorial.org to request a password for remote access or to request serial number for download for your iPhone or other hand-held device.



History in the Making: **Hyperbaric Chamber leaves** **CHCC Building**

On August 2nd, LMHS brings together the wound care and hyperbaric medicine teams at LMH and GCMC to Plantation Road. John Bishop, M.D., Robert Casola, D.O. and Robert Kupsaw, M.D. will lead this team to provide state-of-the-art care.



Pain Medication Dispensing

A Challenge for Nursing Facilities

Late last summer, the DEA clarified the code of federal regulations addressing the dispensing of pain medications to nursing facility patients. "A pharmacist may dispense a controlled substance listed in Schedule II...only pursuant to a written prescription signed by the practitioner..." This clarification has caused some delays in providing pain relief for patients being admitted to the HealthPark Care and Rehabilitation Center from the hospital.

For evening and weekend admissions, studies across the nation report delays of 24-48 hours for pain medication administration due to the need to obtain the authorization in the absence of the signed prescription. In recognizing this challenge, LMHS Case Managers are working closely with physicians to write these prescriptions at the time of discharge. If you would like additional information regarding these DEA regulations, please contact your case manager, or Nancy Zant, HPCRC Administrator, at 433-4647.

Restraints: When?

DNV has cited LMHS for non-compliance with the Medicare Conditions of Participation (COP) for the use of restraints. The system's policy and procedures will be strictly enforced in the future.

Florida's AHCA and Medicare (CMS) now tightly regulate the use of restraints. It is the philosophy of LMHS to work towards providing a restraint free environment to reduce the overall use of restraints through the utilization of alternative/least restrictive methods. The patient has the right to be free from any form of restraints that are not medically necessary or are used as a means of coercion, discipline, convenience, or retaliation by staff.

Physicians may delegate the ordering of restraints to PAs or ARNPs as allowed by State and Federal Regulations.

For "medical/surgical" restraints (restraint used to promote medical/surgical healing):

- Pre-printed restraint order sheet will be used.
- PRN orders are not allowed.
- An order for the restraint must be obtained within 12 hours of initiating restraint use.
- Complete restraint orders include type of restraint, criteria/rationale for restraint use, duration of use, signature, and date and time for all entries.
- The patient must be evaluated within 24 hours.
- Reassessment and a new restraint order occur no less than once each calendar day.

For "behavioral health emergencies" (an unanticipated outburst of violent, aggressive, destructive behavior that poses an imminent danger to the patient and/or others):

- The pre-printed restraint order sheet will be used and no PRN orders for restraints are allowed.

The patient must be evaluated face to face and an order written within one hour of restraint application.

Face to face evaluation is done to evaluate the following:

- The patient's immediate situation, the patient's reaction to the intervention, the patient's medical and behavioral condition, and the need to continue or terminate the restraint or seclusion.

If the face to face evaluation is conducted by an ARNP or PA, they must consult the attending physician or other licensed independent practitioner who is responsible for the care of the patient as soon as possible after the completion of the one hour face to face.

The maximal duration of the order is as follows:

- One hour (age 0-8), Two hours (age 9-17), Four hours (age 18 and older)

Orders must include type of restraint, criteria/rationale for restraint use, duration of restraint with signature, date and time for all entries.

- Re-evaluation in person must occur every four hours (age 0 to 17) or every eight hours (age 18 and older).
- Restraint must be discontinued at the earliest possible time regardless of the length of time identified in the order.

Documentation requirements - When restraint is used, there must be documentation in the patient's medical record of the following:

- The one-hour face-to-face medical and behavioral evaluation if restraint is used to manage violent or self-destructive behavior.
- A description of the patient's behavior and the intervention used.
- Alternatives or other less restrictive interventions attempted (as applicable).
- The patient's condition or symptoms that warranted the use of the restraint.
- The patient's response to the intervention(s) used, including the rationale for continued use of the intervention.

LMHS Launches Patient Scheduling Portion of Epic

LMHS went live this month with the patient scheduling portion of Epic—the health system's community-wide electronic medical record. The Central Scheduling department will use this patient scheduling software component of Epic, called Cadence, to schedule procedures for several departments: Cardiovascular, Radiology, Rehab Therapy, Neurology, Respiratory, Sleep Disorders, Breast Health Center, ALS Clinic, Asthma Health Management and Nutrition. Other decentralized scheduling departments using Cadence include Pain Management, the Catheterization Labs, Lee Health Solutions and the Regional Cancer Center.

Cadence is a major milestone in the implementation of the electronic medical record!

LPG offices are already using Cadence, and the program will be installed in LPG specialist offices by the end of 2010. Most are also using Epic's Electronic Medical Record. LMHS also intends to begin offering Cadence and the Epic EMR system to physicians in the community who are not employed by Lee Memorial Health System.

Cadence is more intuitive and user-friendly, and also has advanced capabilities that will be utilized in the future, which will ultimately benefit patients by ensuring that the correct procedure is being scheduled at the correct location. In the future, Cadence will also enable physicians to check online to see what tests and procedures have been scheduled for their patients.

Epic is already installed in the ERs at CCH, HPMC and LMH. The system will be launched at GCMC by mid-2011. If you have any questions, please contact Sylvia Smith, System Director of Central Scheduling, at Sylvia.Smith@LeeMemorial.org or Renee Graham, Business Systems Analyst, at Renee.Graham@LeeMemorial.org.



LMHS Continuing Medical Education.

Unusual Community Cases Admitted to the Pediatric Intensive Care Unit

Pediatric Grand Rounds
Roberto Monge, M.D., RRT, FAAP
Medical Director, Pediatric Critical Care Medicine
The Children's Hospital of Southwest Florida
Thursday, August 12, 2010
6:30 - 7:30 PM
HPMC Room HP1B
RSVP for CME & Dinner
by August 10th
573-5680



Chlamydia and Gonorrhea Update

Kenneth E. Johnson, Jr., D.O.,
F.A.C.O.O.G.
Associate Professor, OB/GYN & Public
Health
Monday, August 16, 2010
6:00 - 7:00 PM
GCMC Community Room
RSVP for CME & Dinner
by August 13th
573-5680
Supported by LabCorp

Preventing Medication Errors to Improve Patient Outcomes

Connie Hogrefe, Pharm.D.
Pharmacy Clinical Director, LMHS
Wednesday, August 18, 2010
6:30 - 8:30 PM - 2 CME Credits
LMH Auditorium
RSVP for CME & Dinner
by August 16th
573-5680



Legislation, Medicaid and Health Care Reform for the Florida Pediatrician

Louis St. Petery, M.D.
Executive Vice-President Florida Pediatric
Society
Wednesday, August 25, 2010
7:15 - 8:15 PM
HealthPark Medical Center Room HP1B
RSVP for CME & Dinner by August 23rd -
573-5680

Code S: Updates on Management of Cerebrovascular Disease

Nima Mowzoon, M.D.
Florida Neurology Group
Thursday, August 26, 2010
6:30 - 7:30 PM
LMH Auditorium
RSVP for CME & Dinner
by August 24th
573-5680



Pediatric Grand Rounds Online

View Pediatric Grand Round
lectures and receive CME credit
For Physicians Only

www.leememorial.org

Click on Medical Staff
Continuing Medical Education
User name: doctor
Password: doctor1

Save the Date!

Infectious Disease Update

Saturday, October 30, 2010
Sanibel Harbour Marriott Resort & Spa
4 CME Credits
Call for Brochure - 574-0397
Earn up to 9 CME credits/contact hours

Road to Recognitions.

In Memory of Wallace "Wally" Dawson, M.D.

Family Practice

June 29, 1935 – June 6, 2010

Dr. Dawson died June 6, 2010 at the Masonic Home of Florida. He served in the US Navy and moved to Cape Coral in 1963 joining Dr. Robert Tate in the first Cape Coral clinic. He was a member of the medical staff of Lee Memorial Hospital since 1964 and Cape Coral Hospital since 1977. Dr. Dawson was president of the Lee County Medical Society in 1973, and had been both a member and past president of the Cape Coral Rotary Club. He was a pioneer in starting Cape Coral Hospital and served on its Board of Directors. Known as the "whistling doctor", he often sang to calm and lighten the mood.



Reminder: New Annual Medical Service Awards Program

The Lee County Medical Society recognizes that this community has numerous physicians that deserve recognition for all their accomplishments. The Annual Medical Service Awards is a new program recognizing physicians in five categories of citizenship, research, education, ethics, and lifetime achievements for their contributions to our medical community.

To nominate someone, please click on the link at <http://www.leecountymedicalsociety.org/>
This year's deadline: August 31, 2010



June's Physician of the Month

Roberto Monge, M.D.

Pediatric Intensive Care/Pediatric
Emergency Medicine
Pediatric Hospitalists & Intensivists

Medical Staff Member since April 2003



Patient First – Every Time.



LEE MEMORIAL HEALTH SYSTEM

P.O. Box 2218, Fort Myers, Florida 33902

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Lee Memorial Hospital: Phone & Fax Numbers Changing



Lee Memorial Hospital Main #343-2000 Effective August 2, 2010

Lee Memorial Hospital phone and fax numbers will change in the coming weeks. Fax numbers will change July 22nd and phone numbers will change Aug 2nd to the 343 exchange. The main hospital line and the main department phone and fax numbers will be forwarded.

New main department phone numbers and main fax numbers will be provided to all physician offices and can also be found on IntraLee, the LMHS internal website, under the News and Links section.

Please direct any questions to the IS Help Desk at 343-7900 or HelpDeskLMHS@leememorial.org

Medical Staff Matters is a publication of the Lee Memorial Health System. Please direct all inquiries to Yvonne O'Brien at yvonne.obrien@leememorial.org.