

# Progress Notes

Published for the Medical Staff  
and Advanced Practice Clinicians  
of Lehigh Valley Health Network

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## FROM THE PRESIDENT



### Medical Staff Satisfaction Survey

This past winter, members of the LVHN Medical Staff were asked to participate in the 2009 Medical Staff Satisfaction Survey. I wanted to use my column this month to share the results of the survey with our **Progress Notes** readers. As many of you know, we have been surveying the Medical Staff every two to three years since 1994 to find our strengths and weaknesses.

In 2003 and 2006, we used the Jackson Organization to conduct our Medical Staff satisfaction surveys. The questions administered by the Jackson Organization in 2003 and 2006 were nearly identical from survey to survey, were on a scale from one to five, and allowed percentile and Mean comparisons between the two surveys. Since our last survey in 2006, the Jackson Organization was acquired by HealthStream Research. HealthStream uses a core survey with 35 standard questions very similar to those from our previous two surveys. However, answers to the core questions are based on a four-point scale. As a result, the switch permits percentile comparisons from previous

surveys, but not the Mean score comparisons. Nevertheless, the decision was made to migrate to the core survey which enables comparisons with the HealthStream Research database which includes 676 hospitals and over 40,000 physician respondents. In addition to the 35 core questions, we were able to add six custom questions to the survey.

The survey was conducted from November 25 to January 18. Of the 1,217 Medical Staff members who received the survey, 635 returned it for a response rate of 52%. People who know more about surveys than I do tell me this is an excellent response rate. By comparison, in 2006, the response rate was 34%. Clearly, more physicians participated in the survey now as compared to 2006.

When looking at percentiles, with respect to "Overall Satisfaction" – the 2009 survey found our Medical Staff to be in the 91<sup>st</sup> percentile. By comparison, in 2006, we were

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in the 83<sup>rd</sup> percentile, and in 2003, we were in the 64<sup>th</sup> percentile nationally. When asked the question – “Overall, how satisfied are you with THIS hospital?” – 97% of the Medical Staff were either satisfied or very satisfied placing us in the 91<sup>st</sup> percentile nationally. When asked – “Overall, how satisfied are you with NURSING CARE?” – again, 97% of the Medical Staff were either satisfied or very satisfied which places the LVHN Medical Staff in the 93<sup>rd</sup> percentile nationally. One of the most telling questions was “Would you recommend this hospital to your family and friends if they needed hospital care?” The results were remarkable – 99% of respondents indicated they definitely would or probably would which placed us in the 96<sup>th</sup> percentile when compared to the HealthStream database. (Please refer to the following article for more information regarding survey results.

Of course, we are not perfect. The core group of questions did reveal areas where there are opportunities for improvement. Specifically, scheduling inpatient and outpatient surgeries as well as Emergency Department efficiency were areas identified by the survey as areas that could be improved. The department chairs of both areas are appreciative of the feedback and are working with Medical Staff leadership to enact processes to improve efficiencies in these areas.

If you have any questions about the survey, please contact me, Mike Pistoria, Linda Lapos or John Hart in the Medical Staff Services Office at 610-402-8980.

Happy Summer!

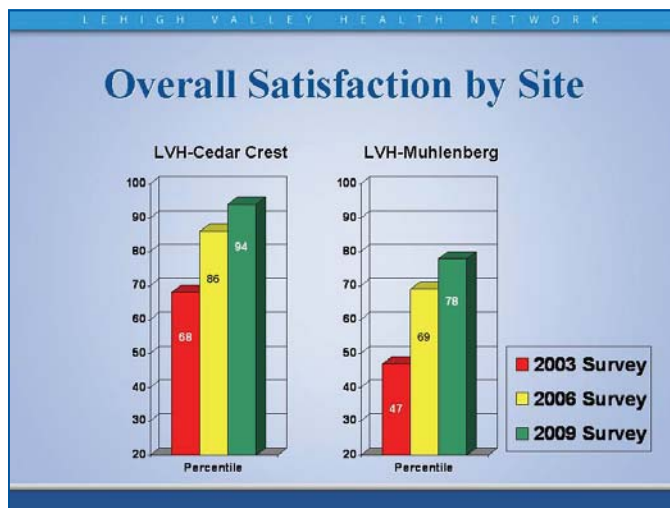
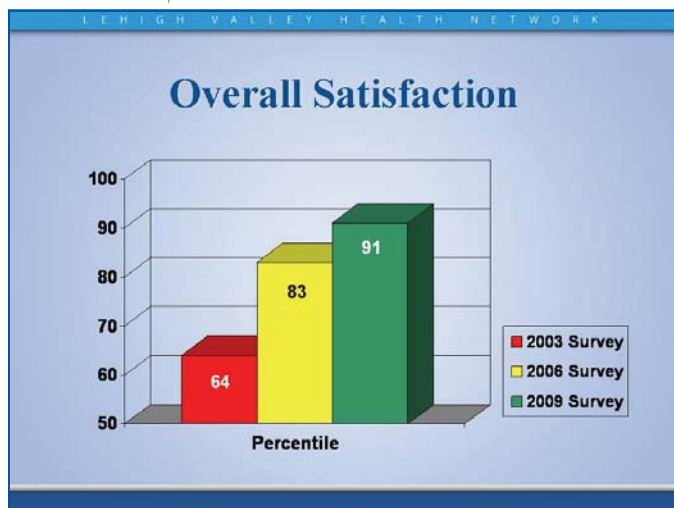
*Matthew M. McCambridge, MD*

Matthew M. McCambridge, MD  
Medical Staff President

## MEDICAL STAFF SATISFACTION SURVEY 2009 RESULTS

**52%  
Response  
Rate**

In conjunction with Lehigh Valley Health Network, HealthStream® Research conducted a survey of the LVHN Medical Staff from November 25, 2009 through January 18, 2010. With a 52% response rate, 635 Medical Staff members completed the survey. Following are several charts representing overall satisfaction, key drivers of overall satisfaction, overall indicators, the top five areas by percentile, and areas of opportunity for improvement.



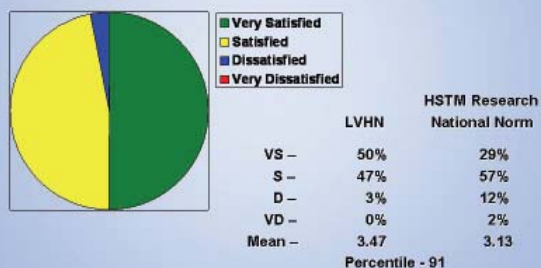
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## Key Drivers of Overall Satisfaction

Survey Item	Current Period				
	Adj N	Correlation With Overall Satisfaction	Your Mean	HSTM Research National Mean	Percentile Rank
22. QUALITY IMPROVEMENT: Efforts to continuously improve quality.	611	0.63	3.38	3.12	87
1. SKILL: Administration's ability to manage the hospital.	593	0.60	3.35	3.13	74
25. CONSISTENCY: Efforts to maintain a high quality of care which is consistent across all shifts and floors.	583	0.60	3.38	3.05	91
27. Overall, how satisfied are you with NURSING CARE?	580	0.60	3.46	3.10	93
24. SAFE CARE: Efforts to provide safe and error-free care to patients.	605	0.57	3.46	3.20	89
2. COMMUNICATION WITH PHYSICIANS: How well the administrative staff communicates with physicians.	611	0.56	3.13	3.06	55
23. SECURITY: Efforts to provide a safe and secure environment for staff and patients.	610	0.56	3.50	3.25	92
3. RESPONSIVENESS: Administration's responsiveness in addressing issues important to patient care.	582	0.54	3.19	3.03	66
18. PEER REVIEW: Ability to manage credentialing, recredentialing, limitation or privileges, poor physician performance, etc.	548	0.52	3.25	3.13	73
28. Would you recommend this hospital to your family or friends if they needed hospital care?	617	0.50	3.80	3.41	95

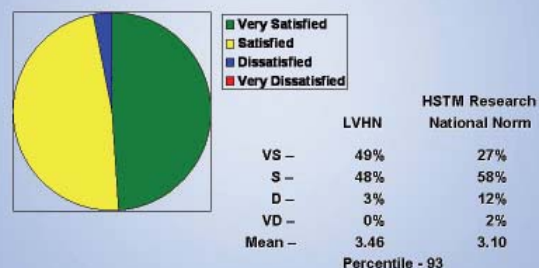
### Overall Indicators

Overall, how satisfied are you with THIS hospital?  
(AdjN=626)



### Overall Indicators

Overall, how satisfied are you with NURSING CARE?  
(AdjN=580)

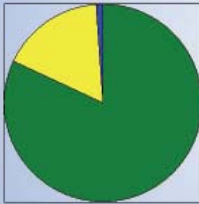


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## Overall Indicators

Would you recommend this hospital to your family or friends if they needed hospital care? (AdjN=617)

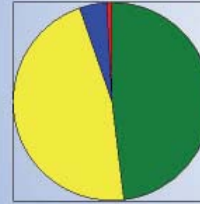


■ Definitely Would  
■ Probably Would  
■ Probably Would Not  
■ Definitely Would Not

	LVHN	HSTM Research National Norm
DW –	82%	54%
PW –	17%	36%
PWN –	1%	8%
DWN –	0%	2%
Mean –	3.80	3.41
	Percentile - 96	

## Top 5 Areas by Percentile

POSTING OF CLINICAL INFORMATION: How quickly lab, x-ray, consults, and reports get into the chart. (AdjN=598)

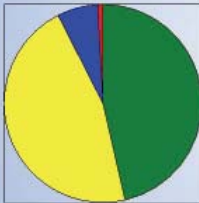


■ Very Satisfied  
■ Satisfied  
■ Dissatisfied  
■ Very Dissatisfied

	LVHN	HSTM Research National Norm
VS –	48.0%	32.3%
S –	46.7%	53.9%
D –	4.5%	11.0%
VD –	.8%	2.7%
Mean –	3.42	3.16
	Percentile - 93	

## Top 5 Areas by Percentile

AVAILABILITY OF MEDICAL EQUIPMENT: Availability of state-of-the-art equipment. (AdjN=557)

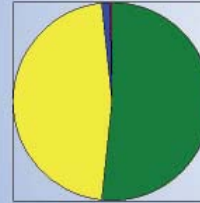


■ Very Satisfied  
■ Satisfied  
■ Dissatisfied  
■ Very Dissatisfied

	LVHN	HSTM Research National Norm
VS –	46.3%	28.6%
S –	46.3%	57.0%
D –	6.5%	11.6%
VD –	.9%	2.7%
Mean –	3.38	3.11
	Percentile - 92	

## Top 5 Areas by Percentile

SECURITY: Efforts to provide a safe and secure environment for staff and patients. (AdjN=610)

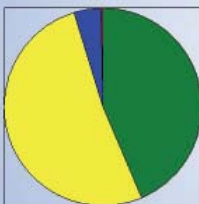


■ Very Satisfied  
■ Satisfied  
■ Dissatisfied  
■ Very Dissatisfied

	LVHN	HSTM Research National Norm
VS –	51.6%	35.4%
S –	46.6%	58.9%
D –	1.5%	4.6%
VD –	.3%	1.1%
Mean –	3.50	3.29
	Percentile - 92	

## Top 5 Areas by Percentile

CONSISTENCY: Efforts to maintain a high quality of care which is consistent across all shifts and floors. (AdjN=583)

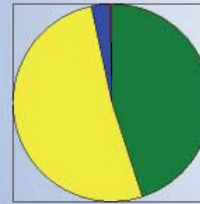


■ Very Satisfied  
■ Satisfied  
■ Dissatisfied  
■ Very Dissatisfied

	LVHN	HSTM Research National Norm
VS –	43.6%	28.7%
S –	51.6%	55.8%
D –	4.5%	12.8%
VD –	.3%	2.7%
Mean –	3.38	3.11
	Percentile - 91	

## Top 5 Areas by Percentile

NURSING SKILL: Competency of nursing staff. (AdjN=535)



■ Very Satisfied  
■ Satisfied  
■ Dissatisfied  
■ Very Dissatisfied

	LVHN	HSTM Research National Norm
VS –	45.0%	30.6%
S –	51.6%	57.6%
D –	3.0%	10.3%
VD –	.4%	1.6%
Mean –	3.41	3.17
	Percentile - 90	

As was mentioned in the article **From the President**, the survey did reveal areas with opportunity for improvement. Those include: scheduling inpatient surgery, scheduling outpatient surgery, and efficiency of the Emergency Department. Processes to improve these areas will be developed by the appropriate departments.

If you have any questions regarding the results of the Medical Staff Survey, please contact Matthew M. McCambridge, MD, Medical Staff President, or John W. Hart, Vice President, Medical Staff Services, at 610-402-8980.

# LEHIGH VALLEY HOSPITAL JOINS NATIONAL CANCER INSTITUTE NETWORK



The National Cancer Institute (NCI), part of the National Institutes of Health, has selected Lehigh Valley Hospital and the John and Dorothy Morgan Cancer Center as one of 14 new sites in the NCI Community Cancer Centers Program (NCCCP). The NCCCP research subcontract is worth nearly \$2.5 million dollars over the next two years and is being matched by LVHN funds to achieve the following goals:

- To increase the quality of the patient experience across the continuum of cancer care. In particular, to expand multi-disciplinary consultation (MDC) services to establish a new standard of care for the newly diagnosed cancer patient.
- To expand the electronic health record to achieve at least three objectives: increase access to the cancer patient EMR by providers; enhance the electronic infrastructure to track, monitor, and report on cancer quality indicators; and to develop a national annotated biospecimen repository on which stands the hope of expanding personalized cancer treatments targeted specifically to the patient's malignancy.
- To increase access to cancer clinical trials, especially by underserved populations.
- To enhance the cancer survivorship experience, and to integrate palliative care early into the cancer care plan.
- To do all of this and also to reduce disparities in access to and treatment for cancer among underserved populations.

Currently, LVHN provides comprehensive cancer care to patients served by both LVH-CC and LVH-M. With NCCCP support, the cancer center at LVH-CC will be able to create “neighborhood cancer centers” at LVH-17 and perhaps at other sites in the Allentown community. At least 14 new jobs will be created including bicultural and bilingual community

health care workers, patient navigators, interpreters, financial counselors, nurses and nurse practitioners. Working with community partners such as

Latinos for Healthy Communities and the Lehigh Coalition for Cancer Control, they will facilitate access for persons in the Hispanic community to primary care practices, as well as to the screening and diagnostic centers at 17<sup>th</sup> Street for breast cancer (Breast Health Services) and cervix cancer (Center for Women's Medicine). Although initial disease emphases will be on breast and cervix cancer, multi-disciplinary consultation services will be available also for on-site evaluation of patients with other newly diagnosed cancers. Radiation and chemotherapy will be administered at the Cancer Center; however, it is the goal of the program to return the patient to their “neighborhood cancer center” for continuing cancer follow-up within the context of the patient centered medical home.



According to Gregory R. Harper, MD, PhD, Physician Director for the NCCCP at LVH, “This award not only recognizes the strengths that LVH and the Cancer Center bring to the NCCCP, but, more importantly, represents an opportunity to transform cancer care in our community. There are only 30 such centers in the country; for LVHN, the opportunity to work directly with the National Cancer Institute in partnership with other high quality cancer programs around the country will transform cancer care in our community – particularly in quality of care and access to clinical cancer research – while also working towards eliminating barriers to cancer care for underserved populations in our community.”



Debbie Salas-Lopez, MD, MPH, LVH's Principal Investigator for the NCCCP, emphasizes that this program will help strengthen the relationship between the cancer center at Lehigh Valley Hospital and the patient's primary care physician. “What we want is to be able to improve the delivery of culturally and language appropriate care with these the ‘neighborhood cancer centers’ and this grant allows us to do that.”

For a list of all sites in the network, visit [ncccp.cancer.gov](http://ncccp.cancer.gov).

# LVHN RANKED ON BEST PLACES TO WORK IN HEALTHCARE LIST

Lehigh Valley Health Network is one of the “100 Best Places to Work in Healthcare” according to a list compiled by Becker’s Hospital Review. The health network was in company with organizations such as Johns Hopkins Hospital, Cleveland Clinic and Mayo Clinic.

According to Becker’s, the organizations on the list demonstrated excellence in providing a work environment that promotes teamwork, professional development and quality patient care. Becker’s took into account nominations and research while compiling the list.

Becker’s cited the following reasons for Lehigh Valley Health Network’s ranking:

- No payroll deduction for health care and prescription drug programs for full-time employees
- Health and dental benefits for domestic partners
- A wellness program that gives employees \$700 annually to use toward exercise and healthy lifestyle classes
- A “Well U” program which teaches employees ways to improve their wellness habits
- An incentive program tied into achieving patient satisfaction goals. The program offers bonuses to colleagues who achieve a positive performance evaluation when health network goals are met.

## PHYSICIAN DOCUMENTATION

### Excisional Debridement (Code 86.22)

This topic is one of the most common query generators at LVH due to lack of specifics in the documentation. Documentation clarification is required to meet coding compliance, coding accuracy and reflect proper severity of illness for your patient.

#### **Official ICD-9-CM guideline definitions:**

**Excisional Debridement** – “The surgical removal or cutting away of devitalized tissue, necrosis or slough by means of cutting away of tissue, not minor scissors removal of loose fragments.”

**Non-Excisional Debridement** – “The removal of necrotic, devitalized tissue or slough by means of flushing, brushing or washing (irrigation).”

#### **TIP – Documentation of Debridement should specify three things:**

- **Excisional or Non-Excisional** (based on above definitions)
- **Site**
- **Depth** of the tissue debridement

The significant MS-DRG weight assignment and reimbursement errors that may result from improper documentation and resulting code assignment has made code 86.22 (Excisional Debridement) a prime target for Recovery Audit Contractors (RAC).

Please be sure to routinely document the above details in your debridement procedure notes, progress notes, and discharge summaries.

If you have any questions regarding this issue, please contact John P. Pettine, MD, Lead Coach, Clinical Documentation Improvement Process, via email at [john.pettine@lvhn.org](mailto:john.pettine@lvhn.org).

# NEWS FROM HEALTH INFORMATION MANAGEMENT

## Enterprise Content Management

In an effort to move toward *Enterprise Content Management* (one repository for storage of clinical and administrative documentation), Information Services and Health Information Management have been working toward transitioning to a new Electronic Historical Medical Record (EHMR) and Medical Record Management (MRM) system. As well as being a repository for the legal medical record, providers will utilize this system to review and complete medical record deficiencies (dictations, signatures, text editing, etc.).

At the time of transition, medical record deficiencies created in the *current EHMR* will not be moved to the new system. Providers are encouraged to keep all deficiencies up-to-date in the *current EHMR* to avoid having to complete deficiencies in two systems.

EHMR training to access the legal medical record, as well as completing medical record deficiencies, will be available to providers through individual educational sessions conducted by the Information Services Department and eLearning for those unable to attend sessions. Tentative “Go Live” is scheduled for August, 2010.

## Medical Record Documentation

In addition to serving as a tool for patient care, the medical record is a legal documentation of the care patients receive at LVHN. This includes both demographic (patient name, etc.) and clinical documentation. **Labels are not to be placed over entries for correction of information.**

### Correcting paper documentation entries:

- Draw a single line in black ink through the incorrect entry, keeping the original entry legible.
- Document “error in charting” at the top of the entry.
- Enter legal signature or initials, date, time, reason for change, and professional credentials of the person making the correction.

### Late entries:

- Identify the new entry as a “late entry”.
- Enter a current date and time – do not attempt to give the appearance that the entry was made on a previous date or at an earlier time.
- Sign the entry, including name and professional credentials.
- Identify or refer to the date and circumstance for which the late entry is written.
- When making a late entry, document as soon as possible. There is no time limit for writing a late entry, however, the longer the time lapse, the less reliable the entry.

### Addendum:

- Write “addendum” and state the reason for creating the addendum, referring back to the original entry.

- Include a signature and professional credentials.
- When writing an addendum, complete as soon as possible after the original note.

## Medical Record Forms

Over the past several years, providers have created provider-specific documentation forms (progress notes). Because of the vast number of individualized progress notes, the hospital units are unable to stock all of these forms on the units. When rounding, please make sure that you have an adequate supply of provider-specific documentation forms.

## Electronic Death Certificate Completion (eCedent)

Following an extensive training program for providers and hospital staff, **eCedent**, the web-based on-line death certificate application was implemented at LVHN on May 10, 2010. If you are not yet registered with eCedent, forms may be obtained from Health Information Management (Medical Records) at LVH-Cedar Crest or LVH-Muhlenberg.

## Outpatient Diagnostic Orders

**Diagnostic Orders** (scripts) – Utilized for diagnostic tests and prescriptions (lab, x-rays, EKG’s, etc.). All diagnostic orders require an order/script, except routine mammography.

- When ordering outpatient diagnostic medical studies, the reason for the test must be specified to show medical necessity. It can be a known diagnosis, a suspected condition or a symptom. Incomplete or inaccurate scripts (missing diagnoses, missing 5<sup>th</sup> digit from a diagnosis code, incorrect diagnoses) may cause delays in service and proper reimbursement.
- Avoid such reasons as *follow-up to surgery, follow-up, post-op, pre-admission testing, post-trauma, family history of, to check medication, auto accident, patient on oxygen, Baseline for therapy*. These diagnoses are unacceptable to insurance companies and Medicare and result in denial of reimbursement.

If you have any questions, please contact Zelda Greene, Administrator, Health Information Management, at 610-402-8330.



# INSULIN SLIDING SCALES — THE END IS NEAR

## Get Ready for Insulin Sensitivity Factor Correction

Sliding scale insulin (SSI) will soon be removed from the adult CAPOE order sets. SSI has been shown to be an ineffective, retroactive approach to hyperglycemia that is not based on individual patient responses and may result in dangerous fluctuations in glucose values. The American Diabetes Association (ADA), the American Association of Clinical Endocrinologists (AACE) and The Joint Commission (TJC) discourage the use of SSI and recommend either IV insulin or scheduled subcutaneous insulin with basal insulin, correctional insulin, and nutritional insulin to achieve inpatient hyperglycemia control.

For simple, short term use, correctional insulin scales by Insulin Sensitivity Factor (ISF) can be used in place of sliding scale insulin. “Insulin Sensitivity Factor” represents how many mg/dL that 1 unit of insulin will reduce a patient’s blood glucose value. For example, an obese Type 2 patient may need 1 unit to drop their BG 10- 20 points, vs. a thin, elderly patient may experience a 60-80 mg/dl drop in BG from 1 unit of insulin. Correctional scales provide a safer, more individualized approach to correcting out of target blood glucose values. As with SSI, ISF correction alone will not prevent hyperglycemia and often needs to be accompanied by scheduled basal/bolus insulin components. The insulin SQ order sets are an easy and effective solution to ordering the recommended basal, correctional and nutritional insulin components. In CAPOE, whether ordering correction scales by ISF alone, or as part of the insulin SQ order sets, the prescriber selects the appropriate ISF scale from available options (10 through 80mg/dl scales). There is no need to type in BG values. The scales are built based on the selected ISF and recommended inpatient pre-meal target BG < 140mg/dl.

Ideally, ISF scales are based on “the 1800 rule,” a formula that involves dividing a patient’s total daily insulin needs (based on prior insulin doses or body weight) into 1800. The order set text associated with each of the correction factors can be used as a quick guide to safely select an option based on patient factors.

For patients who are eating, note that CAPOE defaults ISF scales to be given AC (before meals). The provider can change the frequency, but keep in mind that HS correction should be done cautiously to prevent nocturnal hypoglycemia. If HS correctional insulin is desired, consider placing a separate ISF scale for HS: one that gives half as much correction as during the day (i.e., if receives 20 mg/dL correction in the day, use the 40 mg/dl scale at HS).

Improving inpatient hyperglycemia management and diabetes care is important for our patients. A variety of helpful resources are available. Watch for new CME eLearning courses on diabetes and new web references (with pre-calculated ISF, insulin to carb ratios, and basal insulin doses) coming soon. Pocket cards with dosing formulas, review information and inservices are also available.

If you have any questions regarding this issue, please contact Gretchen A. Perilli, MD, Division of Endocrinology, at pager 610-402-5100 8398, or Joyce Najarian, RN, MSN, CDE, Inpatient Diabetes Coordinator, Helwig Diabetes Center, at 610-402-1731 or via email.

TAO - Inbasket

Enter Order Set

NOVOLOG INSULIN CORRECTION BY ISF-MEALS

Ordered By: PAPER, CHART, U Order Mode: [X] Viewed: Y State: Expanded Page: 1 of 1

Signed By: PAPER, CHART, U Ht(cm): 177.80 Wt(kg): 84.64 11MAY10

View Order Set Ref

Order Description	Start Date	Time
<input type="checkbox"/> 10 MG/DL-SEVERE INSULIN RESISTANCE	20MAY10	0908
<input type="checkbox"/> 20 MG/DL-VERY INSULIN RESISTANT/SEPTIC	20MAY10	0908
<input type="checkbox"/> 30 MG/DL-INSULIN DOSE FOR OBESE/INFECTED	20MAY10	0908
<input type="checkbox"/> 40 MG/DL-MOD INSULIN DOSE FOR AVG ADULT	20MAY10	0908
<input type="checkbox"/> 50 MG/DL-MODERATE TO LOW DOSE INSULIN	20MAY10	0908
<input type="checkbox"/> 60 MG/DL-THIN/ELDERLY/RENAL PT-INSULIN	20MAY10	0908
<input type="checkbox"/> 70 MG/DL-INSULIN SENSITIVE PATIENTS	20MAY10	0908
<input type="checkbox"/> 80 MG/DL-VERY SENSITIVE TO INSULIN	20MAY10	0908

Guide to using this Order Set.

- > Check the box next to the desired order.
- > Press the Collapse button to view only selected orders.
- > To change the start date or time, type exact date or time.

Complete Prev Next Page Collapse Expand Back

Add new Orders Change Discontinue Priority Reorder Sort or Filter View inactive

Verify Order Detail/Extra Audit Delete View Charted Intervention:

4K16 79 20May10 9:08am OCSET51 CC JVI470 \$PMLV



# 2009 ANTIBIOGRAMS ARE HERE!

The new antibiograms can now be found on the intranet at Resources – General – Antibiogram. The antibiograms can also be found within the **Lehigh Valley Hospital Antimicrobial Formulary & Empiric Antimicrobial Therapy Guide** which is accessible from the intranet under Departments – Clinical – Pharmacy.

## A few points to take into consideration:

- Locally, cefepime has better coverage for *Pseudomonas* than piperacillin/tazobactam. Except for covering *Enterococcus*, you can get equal or greater coverage empirically by using cefepime+metronidazole compared to piperacillin/tazobactam.
- Local susceptibilities show cefazolin to be superior to fluoroquinolones or sulfamethoxazole/trimethoprim for the treatment of *E. Coli*. 1 out of 5 *E. Coli* isolates is resistant to either a fluoroquinolones and/or sulfamethoxazole/trimethoprim.
- Ampicillin/sulbactam has a 50% susceptibility for *E. Coli* and should not be used except for the criteria based indications found in CAPOE.
- Please remember the difference between asymptomatic bacteriuria and a urinary tract infection; especially in catheterized patients. Asymptomatic bacteriuria is one of the greatest areas of over-utilization of antibiotics.
- Ciprofloxacin and levofloxacin have identical Gram negative coverage, but ciprofloxacin does not cover gram positive organisms, such as *S. Pneumoniae*. Please reserve levofloxacin use for treatment where *S. Pneumoniae* coverage is needed.

If you have any questions regarding antibiograms or antimicrobial stewardship, please contact Jarrod W. Kile, RPh, at 610-402-2389.



## LVHN DIGITAL LIBRARY

### Your Digital Reference Shelf: eBooks!

Don't leave your exam room to search for a textbook. Consult good resources from home when you get an emergency call. Check that rash against a color dermatology atlas. eBooks are there whenever and wherever you need them with online access at your fingertips. Search the entire contents, use the table of contents or flip through the index. Listed below are new eBooks that have been added and bring the total number of resources on the digital reference shelf to over 400 books.

Forty new eBooks have been added to our collection. Following is a sampling:

- *Surgical Exposures in Orthopedics*
- *Heart Failure*
- *William's Hematology*
- *Bonica's Management of Pain*
- *Fitzpatrick Color Atlas & Synopsis of Dermatology*
- *Atlas of Osteopathic Techniques*
- *Harris Diseases of the Breast*
- *DeVita's Cancer*
- *Hurst's The Heart*
- *Yamada Principles of Gastroenterology*

To get to the eBooks, go to the Digital Library homepage (from the intranet, click Find Fast/Library Services) and click on the subject category for the books you are interested in viewing. Click on the title or icon of the book you want to see.

For more information, contact Linda Schwartz, Director, Library Services, at 610-402-8410.

# ETHICS CORNER

## Ethical Conversations in CT Scanning: What are you telling your patients?

The routine use of CAT scanners has dramatically improved the ability of physicians to provide care to their patients. Physicians in the United States order 70 million CT scans annually. This advance in technology has come at a price. The chance of allergic reaction, complications from extravasation and nephropathy are considerations when performing scans with IV contrast. The risk of radiation exposure to our patients is another legitimate concern. Articles published in the *Archives of Internal Medicine* a few months ago have the medical community as well as our patients asking questions about the increased risk of developing cancer associated with CT scan usage. Many physicians would refute the exact percentages mentioned in the articles. Nevertheless, it cannot be ignored that data is demonstrating an increased risk to our patients from a test we are routinely ordering. This begs the question: Should physicians be actively initiating discussions with our patients about the risks and benefits of CT scans? It is routine practice to obtain written consent for invasive procedures. The CT scanner does not break the skin, but patients and doctors may be forced to deal with unintended outcomes from this study. The actual risk and percentage of CT scan related cancers is debatable – but appears to be present. While it can also be argued that a myriad of environmental and occupational hazards may contribute to increased risk of cancer, physicians are facilitating this particular exposure.

Are we then ethically bound to have a thorough conversation with our patients regarding the potential ramifications of CT scans? Is it our duty to obtain informed consent, at least verbally, from patients for whom we are ordering a CT scan? We have a responsibility as physicians to inform our patients about their disease processes, medications we prescribe and other important issues. Would it not follow that we should provide counsel, to the best of our ability, regarding potential side effects of CT scanning as well? The ultimate question is: If I were going to order this test on my family member and they asked me about risk and benefits, how would I explain it to them? Some would argue that patients may not wish to undergo the study because they would be “scared.” This is a concern but, after a discussion with the provider, it is their right to refuse if they wish. The physician should be ready to explain the possibility of an adverse outcome if patients choose not to have a study. Patients need to weigh the risks of this possibility and acknowledge it to their providers.



I would again point out that some of our colleagues would argue the effects of CT scans are conjecture and extrapolation. The indisputable fact in the discussion is that a perceived correlation between CT scan exposure and increased cancer risk exists and physicians should be willing to discuss this with patients. These paragraphs are intended to encourage physicians of different specialties to investigate the literature concerning this topic and be willing to discuss these issues with their patients.

If you have any questions regarding this issue, please contact Robert D. Barraco, MD, MPH, Chair of the Ethics Committee, at [robert\\_d.barraco@lvhn.org](mailto:robert_d.barraco@lvhn.org).

# CONGRATULATIONS



**Marna R. Greenberg, DO, MPH**, Department of Emergency Medicine, Director of Research, recently completed her Masters in Public Health through Johns Hopkins University, Bloomberg School of Public Health. Dr. Greenberg has been a member of the Medical Staff since July, 1994. She is in practice with LVPG-Emergency Medicine.



**Michael J. Pistoria, DO**, Medical Staff President-elect, and Division of General Internal Medicine, Section of Hospital Medicine, was the recipient of the 2010 Dean's Special Award for Excellence in Clinical Teaching at Lehigh Valley Hospital. Dr. Pistoria was selected to receive the award by the fourth year medical students from Drexel University College of Medicine. He was presented with the award at the Drexel University College of Medicine's Commencement on Friday, May 21. Dr. Pistoria has been a member of the Medical Staff since September, 1999. He is in practice with LVPG-Hospitalist Services.

## ADVANCED PRACTICE CLINICIANS UPDATE

At the quarterly meeting of the Advanced Practice Clinicians (APC) held on Thursday, April 22, members of the APC staff elected a new President-elect and three at-large members of the APC Executive Council. In addition, **Brian J. Damweber, PA-C**, who has served as President-elect for two years, was installed as the new President. Current and newly elected members of the APC Executive Council include:

### President



**Brian J. Damweber, PA-C**  
Lehigh Area Medical Associates  
(2-year term)

### President-elect



**Paul J. Evans, CRNA**  
Lehigh Valley Anesthesia Services  
(newly elected - 2-year term)

### Secretary/Treasurer



**Wendy J. Prutsman, CRNP**  
LVPG-Maternal Fetal Medicine  
(appointed by Executive Council on May 19, 2010)

### At-Large Seats:



**Judith Brooks, CRNP**  
LVPG-Medicine  
(newly elected – term ending April 30, 2011)



**Michelle Hartzell, PA-C**  
LVPG-Emergency Medicine  
(term ending April 30, 2011)



**James C. Miller, CRNA**  
Lehigh Valley Anesthesia Services  
(newly elected – term ending April 30, 2012)



**Eugenia V. Pearson, CRNP**  
Lehigh Valley Heart & Lung Surgeons  
(term ending April 30, 2011)



**Angela R. Pistoria, PA-C**  
Surgical Specialists of the Lehigh Valley  
(term ending April 30, 2012)



**Gary A. Tarola, DC**  
Chiropractic Associates of the Lehigh Valley  
(term ending April 30, 2012)

In addition, **Wendy J. Prutsman, CRNP**, LVPG-Maternal Fetal Medicine, was newly elected to an at-large seat with her term ending April 30, 2013.

The mission of the APC group is to support, advocate, promote, facilitate and integrate the professional interests of Advanced Practice Clinicians who maintain active clinical privileges within Lehigh Valley Health Network.

The Executive Council meets on a monthly basis and general APC membership meetings are held quarterly on the fourth Thursday of the month. The next APC Quarterly membership meeting will be held on Thursday, July 22, at 5:30 p.m., in Kasych ECC Rooms 7 and 8.

For more information or if you have any questions regarding the APC Executive Council, please contact Brian Damweber, PA-C, President, via email at [brian.damweber@lvhn.org](mailto:brian.damweber@lvhn.org) or at pager 610-402-5100 2804, or John W. Hart, Vice President, Medical Staff Services, at 610-402-8980.

# PAPERS, PUBLICATIONS AND PRESENTATIONS



**Robert D. Barraco, MD, MPH**, Chief, Sections of Geriatric and Pediatric Trauma; **P. Mark Li, MD, PhD**, Chief, Division of Neurological Surgery; and **Michael D. Pasquale, MD**, Chief Division of Trauma-Surgical Critical Care, were co-authors of the article – “Odontoid Fractures in the Elderly: Should We Operate?” – which was published in *The Journal of TRAUMA® Injury, Infection, and Critical Care*, Vol. 68, Number 3, March 2010.



**Daniel F. Brown, MD**, Department of Pathology and Laboratory Medicine, Vice Chair, Network Affairs, was a co-author of two abstracts which he presented at the American Academy of Neurology Annual Meeting held in Toronto, Canada in mid-April. The titles of the abstracts were “Diverse Clinical Presentations in Adults with Carnitine Deficiency” and “Peripheral and Central Nervous System (PNS and CNS) Involvement in the Primary Carnitine Deficiency of Adults.”



**Eric J. Gertner, MD, MPH**, Division of General Internal Medicine; Judith N. Sabino, Diversity/Cultural Liaison; Erica Mahady, Organizational Development Consultant; Lynn M. Deitrick, RN, PhD, Medical Anthropologist, Department of Community Health, Health Studies and Education; **Jarret R. Patton, MD**, Medical Director, Outpatient Pediatrics; MaryKay Grim, Senior Vice President, Human Resources; James F. Geiger, Senior Vice President, Operations; and **Debbie Salas-Lopez, MD, MPH**, Chair, Department of Medicine, were co-authors of the article – “Developing a Culturally Competent Health Network: A Planning Framework and Guide” – which was published in the May/June 2010 issue of the *Journal of Healthcare Management*.



**Yasser K. Khalil, MD**, Division of General Internal Medicine, Section of Hospital Medicine; **Michael J. Durkin, MD**, Division of Cardiology; and **Martin E. Matsumura, MD**, Division of Cardiology, were co-authors of the article – “A Comparison of Assessment of Coronary Calcium vs. Carotid Intima Media Thickness for Determination of Vascular Age and Adjustment of the Framingham Risk Score” – which was published in the April, 2010 issue of *Preventive Cardiology*.



**Nelson P. Kopyt, DO**, Chief, Division of Nephrology, lectured at two recent meetings of the National Kidney Foundation. The first lecture was “Rationale for CKD Clinic,” which he presented at a multi-disciplinary symposium on Chronic Kidney Disease on April 13, in Orlando, Fla. The second lecture – “Cardiovascular Risk Prevention in Diabetes and CKD” – was presented at The Cardiac-Kidney-Diabetes Health Threat conference held on April 24, in Pittsburgh, Pa.



**Scott J. Lipkin, DPM**, Chief, Division of Podiatric Surgery, and Director of the Research Participant Protection Office, presented four lectures and a poster at the annual meeting of the Association for the Accreditation of Human Research Protection Programs (AAHRPP) held April 12-14, in Atlanta, Ga. He organized and moderated a full-day workshop titled “Training Clinicians to meet their Research Responsibilities” and presented three lectures during the workshop. The lectures were titled “The Impact of Organizational Infrastructure on Successfully Training Clinicians to Meet their Research Responsibilities,” “Investigator Responsibilities and the Risk of Noncompliance,” and “A Practical Approach toward Training Clinicians to Meet their Research Responsibilities – the Hospital Perspective.” During the general meeting, he presented a lecture titled “Educational Activities that Enhance the Human Research Protection Program.” The poster was titled “Additional Research Protections for Individuals with Cognitive Impairment,” which highlighted one of the five areas of distinction awarded to LVHN by AAHRPP.



**William L. Miller, MD**, Chair, Department of Family Medicine, presented a plenary titled “The Acme® Patient-Centered Medical Home (“Beep Beep”®) at the Society for Teachers of Family Medicine 43<sup>rd</sup> Annual Spring Conference held April 27, in Vancouver, British Columbia.

At this same national conference, the following members of the Department of Family Medicine presented the following:

**Drew M. Keister, MD, Jeffrey S. Mathieu, MD, Abby S. Letcher, MD**, and **Julie A. Dostal, MD**, Vice Chair, Education (LVH), and Residency Program Director, presented “Lessons Learned from Transforming One Residency Clinic Into Three Patient-Centered Medical Homes.”

**Dr. Keister, Dr. Dostal and Elissa Foster, PhD**, Medical Educator, presented a poster titled “A Novel Method of Evaluating Competency in Information Literacy.”

**Dr. Keister** also presented “Pioneering Partnerships in Primary Care to Augment Medical Student Competency in Patient-Centered Medical Home Principles.”

**Malaika S. Stoll, MD**, and **Jeffrey Sternlieb, PhD**, presented “Designing and Implementing an Administration and Leadership Portfolio in a P4 Residency Program.”

**Dr. Sternlieb** also presented “Making a House a Home: Learning Reflective and Empathy Skills for Patient-Centered Care.”

**Holly L. Binnig, MD**, presented a poster titled “A Three-Tiered Model for Maternity Care in Family Medicine.”



# UPCOMING SEMINARS, CONFERENCES AND MEETINGS

## General Medical Staff Meeting

The quarterly meeting of the General Medical Staff will be held on **Monday, June 14**, beginning at **6 p.m.**, in **ECC Rooms 7 and 8** on the first floor of the Kasych Family Pavilion at Lehigh Valley Hospital, Cedar Crest & I-78. The meeting will be videoconferenced to the Educational Conference Center, **Rooms C and D**, at LVH-Muhlenberg.

The agenda for the meeting will include the election of five at-large members for the Medical Executive Committee, a review of proposed changes to the Medical Staff Bylaws, an overview of the results of the recent Physician Satisfaction Survey, and a presentation of the proposed Medical Staff budget for FY 2011.

All members of the Medical Staff are encouraged to attend.

## GLVIPA Quarterly Membership Meeting

The quarterly membership meeting of the Greater Lehigh Valley Independent Practice Association will be held on **Monday, June 28**, beginning at **6 p.m.**, in the hospital's **Auditorium at Cedar Crest & I-78**, and teleconferenced to the **Educational Conference Center, Rooms C & D**, at **LVH-Muhlenberg**.

Please note that the September GLVIPA General Membership meeting has been changed from Tuesday, September 28, to Monday, September 27. Time and location remain the same.

For more information, please contact Mary Ann Curcio, Coordinator, GLVIPA, at 610-969-0423.

## Save the Date

"Obstetrics and Gynecologic Ultrasound: Hot Topics for Good Practice" will be held on Friday, September 24, and Saturday, September 25, at Lehigh Valley Hospital – Cedar Crest.

Special guest faculty will include Anthony Vintzileos, MD, Winthrop University Hospital, Kolawole Oyelese, MD, Jersey Shore University Medical Center, and Anna Parsons, MD, University of South Florida. Additional details will be available in the conference brochure. Stay tuned!

## Emergency Medicine Grand Rounds

Emergency Medicine Grand Rounds are held on Thursdays, beginning at 8 a.m. at various locations. Topics to be discussed in June include:

June 3 – LVH-M ECC Rooms C and D

- "What a Pain; Pain Management in the ED" and "Things I Didn't Know Coming Out of Residency" – Brandon Lewis, DO, Chair, Department of Emergency Medicine, St. Joseph Health System, Texas
- Rosen's Club – Gavin Barr, Jr., MD
- "Fever Without a Source - > 2 months to 2 years old" – Lee Larussa, MD

June 10 – LVH-M ECC Rooms C and D

- "Hospice and Palliative Medicine for the Emergency Physician" – Daniel Ray, MD
- "Who Wants to be an ED Physician" – Perry Fooskas, MD, and Tony Werhun, MD

June 17 – LVH-M Banko Building

- "STD/PID" – Mehdy Yavari, DO
- "Travel Related Illness" – Bock Moyes, DO
- "New Year Class Expectations" – Kevin Weaver, DO and Gavin Barr, Jr., MD

June 24 – EMI – 2166 S. 12<sup>th</sup> Street

- Rosen's Club – Gavin Barr, Jr., MD
- M & M – Kevin Weaver, DO and Andrew Miller, DO
- Administrative Hour – David Burmeister, DO

For more information, contact Dawn Yenser in the Department of Emergency Medicine at 484-884-2888.

## Family Medicine Grand Rounds

The next Family Medicine Grand Rounds will be held on Tuesday, June 1, from 7 to 8 a.m., in Kasych ECC Room 9 at LVH-Cedar Crest, and teleconferenced to ECC Room A at LVH-Muhlenberg.

Resident Research will be presented.

For more information, contact Dorothy Jacquez in the Department of Family Medicine at 610-969-4965.

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## Medical Grand Rounds

Medical Grand Rounds will be held at Noon in the Auditorium at LVH-Cedar Crest and teleconferenced to ECC Room B at LVH-Muhlenberg and the VTC Room at LVH-17 as follows:

- June 1 – “Department of Medicine – Year in Review” – Debbie Salas-Lopez, MD, MPH, Chair, Department of Medicine

This will be the last grand rounds until they resume again on Tuesday, September 7. Have a nice summer!

For more information, contact Becky Sherman in the Department of Medicine at 610-402-8045.

## Neurology Conferences

The Division of Neurology conferences will begin at Noon in the Lehigh Neurology Conference Room, 1250 S. Cedar Crest Blvd., Fourth Floor, on the following Thursdays in June. Each program will also be videoconferenced to the Lehigh Neurology office on the LVH-Muhlenberg campus.

- June 3 – “Controversies in Atypical Antipsychotics” – Mireille Meyerhoefer, MD, Division of Adult Inpatient Psychiatry/Psychiatric Ambulatory Care
- June 10 – “Update from the International Stroke Conference” – Yevgeniy Isayev, MD, Division of Neurology
- June 17 – “Update in Neurointerventional Radiology” – Darryn Shaff, MD, Section of Neurointerventional Radiology/Cardiovascular-Interventional Radiology
- June 24 – Division Meeting

For more information, contact Sharon Bartz, Conference Coordinator, at 610-402-9001.

## Nutrition Grand Rounds

Nutrition Grand Rounds are held monthly at Noon for physicians, nurses, pharmacy staff, allied health staff, and any other interested patient care providers. The topic for June is as follows:

- June 8 – “Oncology” – Jenn Brennan, RD, LDN, CSO; Janine Gilboy, RD, LDN, and Suresh Nair, MD, Division of Hematology-Medical Oncology – Location: Auditorium, LVH-Cedar Crest; First Floor Conference Room, LVH-Muhlenberg; VTC Room, LVH-17

For more information, contact Kimberly Procaccino, Director of Nutrition, at 610-402-8609.

## OB/GYN Grand Rounds

The Department of Obstetrics and Gynecology will hold Grand Rounds from 7:15 to 8:15 a.m., in Kasych ECC Room 8 on the following Fridays in June:

- June 4 – Faculty Meeting with the Residents – Thomas Hutchinson, MD, Chair, Department of Obstetrics and Gynecology
- June 11 – OB M & M
- June 18 – Faculty Development – Krista Hirschmann, PhD
- June 25 – New Rotation Goals and Objectives for Faculty and Residents – Craig Koller, MEd

For more information, contact Teresa Benner in the Department of Obstetrics and Gynecology at 610-969-4515.

## Pediatric Grand Rounds

The Department of Pediatrics will hold Grand Rounds at 8 a.m., in ECC Room 1 on the first floor of the Anderson Wing at LVH-Cedar Crest on the following Tuesdays in June:

- June 1 – TBA
- June 8 – “Adult Learning” – Elaine Donoghue, MD, and Amy Smith
- June 15 – “HYPE Documentary” – Sarah Stevens, MD, MPH, and Jenna Azar
- June 22 – “Non-Immune Hydrops in a Preterm Infant” – Erika Yench, MD
- June 29 – TBA – Mark Diaz, MD

For more information, contact Kelli Ripperger in the Department of Pediatrics at 610-969-2540.

## Psychiatry Grand Rounds

The next Department of Psychiatry Grand Rounds will be held on Thursday, June 17, beginning at Noon (registration at 11:45 a.m.) in ECC Rooms C and D at LVH-Muhlenberg.

“Integrated Model for Behavioral Health Care in a Medical Practice” will be presented by Susan D. Wiley, MD, Vice Chair, Department of Psychiatry, and Teresa Duda, LCSW, Social Workers and Behavioral Health Specialist.

For more information, please contact Tammy Schweizer at [tammy.schweizer@lvhn.org](mailto:tammy.schweizer@lvhn.org) or by phone at 610-402-5766.

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## Spine Conference

Conferences relating to interesting spine cases are held on the first Wednesday of each month at 7 a.m. Clinicians are invited to bring interesting cases to the meeting. The next Spine Conference will be held on June 2, in Kasych ECC Room 10 at LVH-Cedar Crest.

For more information, contact James C. Weis, MD, Co-Chief, Division of Spine Surgery, or Laura Warner, Clinical Coordinator, at 610-973-6338.

# CONTINUING MEDICAL EDUCATION UPDATE



The network continues to shine with many noteworthy Continuing Medical Education (CME) activities. The most recent Feather Lecture, by James Wolliscroft, MD, Dean of the University of Michigan School of Medicine on the topic of the future of medical education, is just one

example of the high-quality CME events occurring at LVHN. In FY09, LVHN offered 599 CME accredited activities, reaching over 8,300 physician attendees and over 10,000 non-physician attendees. Additionally, 175 Continuing Nursing Education (CNE) activities reached over 2,500 nurses as well as many non-nurse clinicians.

Current trends in CME indicate a decline in the number of educational grants received from pharmaceutical and device companies. This climate may result in reductions in the availability of funds, decreased award amounts, and more cumbersome applications. However, we are very fortunate to have generous supporters, such as the Dorothy Rider Pool Health Care Trust, the Fleming Trust, and our many funded Chairs, that have stepped up to fill the gap left in industry sponsorship.

Nationally, the Accreditation Council for Continuing Medical Education (ACCME) has stressed the need for CME to be based on needs identified through quality or performance improvement processes that effect positive change in physician competence and performance, or in patient outcomes. The emphasis on inter-professional training, also strongly encouraged by the ACCME, is reflected in the diversity of attendees at our CME/CNE events. CME/CNE continues to provide value to medical staff members by keeping them informed of the latest developments in medical care, patient safety, and quality efforts. In addition, these events highlight many of our physicians who are regional and national leaders in their fields of expertise.

A few upcoming conferences include:

- Hypothermia After Cardiac Arrest – August 28, 2010
- Pain Symposium – September 21, 2010
- 2<sup>nd</sup> Annual OB/GYN Ultrasound – September 24, 2010
- S.T.A.B.L.E. – Physician course – September 24, 2010

For a list of CME accredited activities occurring within Lehigh Valley Health Network, visit the Events Calendar at [www.lvhn.org/lvh/education/Professional\\_Education](http://www.lvhn.org/lvh/education/Professional_Education)

If you have any questions regarding the CME/CNE accreditation process or suggestions for CME/CNE topics, please contact Jane Grube, Associate Director, Continuing Education, at 610-402-2398.

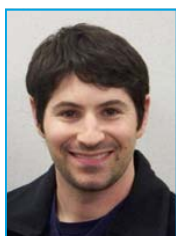


# Who's New

*This section contains an update of new appointments, address changes, status changes, resignations, etc. Please remember to update your directory and rolodexes with this information.*

## Medical Staff

### New Appointments



**Gregory Gafni-Pappas, DO**  
LVH-M Emergency Medicine  
Lehigh Valley Hospital-Muhlenberg  
2545 Schoenersville Road  
Fifth Floor  
Bethlehem, PA 18017-7384  
Phone: 484-884-2888 Fax: 484-884-2885  
Department of Emergency Medicine  
Division of Emergency Medicine  
Provisional Limited Duty



**Adam C. Miller, DMD**  
Laurence H. Stone, DDS  
311 Hyde Park  
Doylestown, PA 18092-6603  
Phone: 215-230-7667 Fax: 215-230-9210  
Department of Dental Medicine  
Division of General Dentistry  
Provisional Active

### Status Change to Honorary Status

**Robert L. Grunberg, MD**  
Department of Medicine  
Division of Nephrology  
From: Active To: Honorary Status

**Martha A. Lusser, MD**  
Department of Pediatrics  
Division of Pediatric Subspecialties  
Section of Neurology  
From: Active/LOA To: Honorary Status

**John J. Mecca, MD**  
Department of Family Medicine  
From: Affiliate To: Honorary Status

### One-Year Leave of Absence

**Stephen A. Volk, MD**  
Department of Medicine  
Division of Hematology-Medical Oncology

### Six-Month Leave of Absence

**Frank L. Scholes III, DMD**  
Department of Dental Medicine  
Division of General Dentistry

### Change of Address

**Brian P. Burlew, MD**  
**Ross N. Futerfas, MD**  
**Keith A. Craley, PA-C**  
**Pulmonary Medicine, PC**  
Bethlehem Medical Arts Center  
5325 Northgate Drive  
Suite 209  
Bethlehem, PA 18017-9416  
Phone: 610-625-8898 Fax: 610-625-8899

**Ya-Yu Lee, MD**  
**LVP-G-Diabetes & Endocrinology**  
2663 Schoenersville Road  
Bethlehem, PA 18017-7308  
Phone: 484-895-4440 Fax: 484-895-4450

### Practice Change

**Brian L. Fellechner, DO**  
(No longer with Good Shepherd Physician Group)  
VSAS Orthopaedics  
2649 Schoenersville Road  
Suite 101  
Bethlehem, PA 18017-7317  
Phone: 610-317-3440 Fax: 610-317-3443

**Danny C. Liaw, MD, PhD**  
(No longer with LVP-G-Hospitalist Services)  
LVH Department of Medicine  
Lehigh Valley Hospital  
Cedar Crest & I-78  
P.O. Box 689  
Allentown, PA 18105-1556  
Phone: 610-402-5200 Fax: 610-402-1675

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**Jennifer L. Mariotti, DO**

(No longer with LVPG-Medicine)  
Lehigh Valley Physician Practice  
Lehigh Valley Hospital  
17<sup>th</sup> & Chew, P.O. Box 7017  
Suite 101  
Allentown, PA 18105-7017  
Phone: 610-969-4370 Fax: 610-969-3023

**Brent M. Nickischer, DO**

Saucon Creek Patient Care LLC  
4801 Saucon Creek Road, Suite 110  
Center Valley, PA 18034-9065  
Phone: 610-625-9090 Fax: 610-625-9020

**Joseph J. Zienkiewicz, DO**

(No longer with Community Physician Practice Growth Initiative)  
Lehigh Family Medicine Associates  
1251 S. Cedar Crest Blvd., Suite 102A  
Allentown, PA 18103-6212  
Phone: 610-402-3940 Fax: 610-402-3950

Members of the LVPG-Hospitalist Services at LVH-Muhlenberg recently merged with several members of Muhlenberg Primary Care, PC to form a new practice which will be known as:

***LVHN Hospital Medicine at Muhlenberg***

***Physicians:***

**Michael J. Ehrig, MD**  
**Jeffrey R. Faidley, MD**  
**Melissa A. Geitz, DO**  
**Michael R. Goldner, DO**  
**Clinton C. Holumzer, MD**  
**Jeffrey M. Hostetter, DO**  
**Najma Khanani, MD**  
**Anil Kumar, MD**  
**Larry L. Levin, MD**  
**James T. McNelis, DO**  
**Wayne F. McWilliams, MD**  
**Ahmad M. Mizyed, MD**  
**Daniel T. Mulcahy, DO**  
**Gonzalo E. Pimentel, MD**  
**Patricia A. Quinlan, MD**  
**Bhavesh D. Satashia, MD**  
**Timothy E. Steckel, MD**  
**Lino Rafael O. Trinidad, MD**  
**James T. Wertz, DO**

***Allied Health Staff:***

**Karen L. Ferrey, PA-C**  
**Jessica A. Gross, PA-C**  
**Amy N. Keeler, PA-C**  
**Barbara L. Morici, PA-C**  
**Christy M. Niemkiewicz, PA-C**  
**Amy L. Pena, PA-C**  
**Lori A. Quick, PA-C**  
**Aaron E. Robertshaw, PA-C**  
**Kimberly A. Soleymani, PA-C**  
**Nicole R. Sansone, PA-C**

***Address and Phone Numbers:***

2545 Schoenersville Road  
Second Floor  
Bethlehem, PA 18017-7384  
Phone: 484-884-9677 Fax: 484-884-9297

The remaining members of ***Muhlenberg Primary Care, PC*** will remain unchanged:

**Brooks Betts II, DO**  
**Gnanaprakash Gopal, MD**  
**Jennifer L. Keller, DO**  
**Theodore Kowalyszyn, MD**  
**Christine Potterjones, MD**  
2101 Emrick Blvd.  
Suite 100  
Bethlehem, PA 18020-8001  
Phone: 610-868-4000 Fax: 610-868-4033

**Linda P. Augelli-Hodor, DO**  
**Jyoti G. Gopal, MD**  
**Hugo N. Twaddle, MD**  
2649 Schoenersville Road  
Suite 201  
Bethlehem, PA 18017-7326  
Phone: 610-868-6880 Fax: 610-868-5333

**Gavin C. Barr, MD**  
**John P. Pettine, MD**  
2649 Schoenersville Road  
Suite 100  
Bethlehem, PA 18017-7236  
Phone: 610-868-6880 Fax: 484-895-4740

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## Practice Name Change

**Arthur E. Fetzer, MD**

**David L. Clair, MD**

**Jonathan B. Bingham, MD**

From: Fetzer-Clair Urology Associates

To: **Fetzer-Clair-Bingham**

1230 S. Cedar Crest Blvd.

Suite 302

Allentown, PA 18103-6227

Phone: 610-770-0616 Fax: 610-770-0587

**Gregory M. Singer, MD**

From: Upper Macungie Medical Center

To: **Gregory M. Singer, MD, PC**

227 S Route 100

Allentown, PA 18106-9212

Phone: 610-366-1000 Fax: 610-366-1050

## Resignations

**Anne L. Moch, MD**

Department of Radiology-Diagnostic Medical Imaging

Division of Diagnostic Radiology

(Medical Imaging of LV, PC)

**Islam A. Shahin, MD**

Department of Radiology-Diagnostic Medical Imaging

Division of Diagnostic Radiology

Section of Cardiovascular-Interventional Radiology

(Medical Imaging of LV, PC)

**Robert J. Sutton, DDS**

Department of Dental Medicine

Division of General Dentistry

## Allied Health Staff

### New Appointments



**Jaime E. Broesicke, CRNP**

*Certified Registered Nurse Practitioner*

Good Shepherd Physician Group

850 S. Fifth Street

Allentown, PA 18103-3308

Phone: 610-776-3278 Fax: 610-776-3326

Supervising Physician: Phillip R. Bryant, DO



**Ann M. Fegley, OTC**

*Orthopaedic Technician Certified*

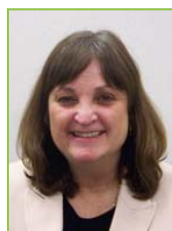
Coordinated Health

2300 Highland Avenue

Bethlehem, PA 18020-8920

Phone: 610-865-4880 Fax: 610-997-7171

Supervising Physician: Jon D. Hernandez, MD



**Pamela J. Flenders, CNM**

*Certified Nurse Midwife*

LVP-G-Maternal Fetal Medicine

Lehigh Valley Hospital

Cedar Crest & I-78, P.O. Box 689

Allentown, PA 18105-1556

Phone: 610-402-8510 Fax: 610-402-1328

Supervising Physician: William E. Scorza, MD



**Keith D. Micucci, CRNP**

*Certified Registered Nurse Practitioner*

LVP-G-Emergency Medicine

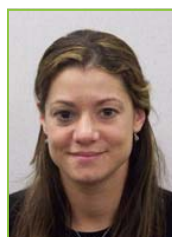
Lehigh Valley Hospital

Cedar Crest & I-78, P.O. Box 689

Allentown, PA 18105-1556

Phone: 610-402-8130 Fax: 610-402-7160

Supervising Physician: Richard S. MacKenzie, MD



**Jaimee L. Ramsden, CRNP**

*Certified Registered Nurse Practitioner*

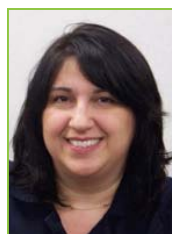
College Heights OBGYN Associates

1245 S. Cedar Crest Blvd., Suite 201

Allentown, PA 18103-6267

Phone: 610-437-1931 Fax: 610-433-8791

Supervising Physician: Amy M. DePuy, MD



**France L. Reed, CRNP**

*Certified Registered Nurse Practitioner*

Lehigh Valley Bariatric Medicine Office

1251 S. Cedar Crest Blvd., Suite 104A

Allentown, PA 18103-6205

Phone: 610-402-2500 Fax: 610-402-2506

Supervising Physician: Harpreet K. Singh, MD



**Andrew M. Seamans**

*Pacemaker/ICD Technician*

Biotronik Inc

6024 Jean Road, Suite B4

Lake Oswego, OR 97035-5333

Phone: 800-547-0394 Fax: 503-635-9936

Supervising Physician: Sultan M. Siddique, MD

*Continued on next page*

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**Judy Werynski**

*Lithotripsy Technician*

Keystone Mobile Partners

2701 Blair Mill Road, Suite 30

Willow Grove, PA 19090-1041

Phone: 215-675-9900 Fax: 215-675-4096

Supervising Physician: Daniel M. Silverberg, MD



**Helen M. Wolfe**

*Perfusion Assistant*

Perfusion Care Associates, Inc

P.O. Box 3447

Allentown, PA 18106-0447

Phone: 610-402-1278 Fax: 610-402-0013

Supervising Physician: James K. Wu, MD

**Additional Supervising Physician**

**John K. Taber, PA-C**

*Physician Assistant-Certified*

(OAA Orthopaedic Specialists – Jeffrey R. McConnell, MD)

Addition of: Coordinated Health – Christopher F. Wagener, MD

**Removal of Supervising Physician**

**Jodi L. Hyndman, CRNP**

*Certified Registered Nurse Practitioner*

(VSAS Orthopaedics – Thomas D. DiBenedetto, MD)

Removal of: HealthWorks – Carmine J. Pellosie, DO

**Resignations**

**Sharon L. Bailey, RN**

*Registered Nurse*

(The Heart Care Group, PC)

**Elizabeth A. Kamp, PA-C**

*Physician Assistant-Certified*

(Neurology & Sleep Medicine, PC)

**Dante M. Palumbo, PA-C**

*Physician Assistant-Certified*

(OAA Orthopaedic Specialists)

LEHIGH VALLEY HEALTH NETWORK

## 2010 Special Events | Save the Dates



A PASSION FOR BETTER MEDICINE™



610-402-CARE LVHN.org

**49th Annual Summer Festival**  
LVH-Muhlenberg  
August 18-21

**15th Annual Nite Lites Gala**  
Coca-Cola Park  
Saturday, September 25

For more information regarding these events, please contact Amy Burrows in Development at 610-402-9123.

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**Progress Notes** is published monthly to inform the Medical Staff, Advanced Practice Clinicians, and employees of Lehigh Valley Health Network of important issues concerning the Medical Staff and Advanced Practice Clinicians.

Articles should be submitted by e-mail to [janet.seifert@lvhn.com](mailto:janet.seifert@lvhn.com) or sent to Janet M. Seifert, Medical Staff Services, Lehigh Valley Health Network, Cedar Crest & I-78, P.O. Box 689, Allentown, PA 18105-1556 by the 15th of each month.

If you have any questions about the newsletter, please contact Mrs. Seifert by e-mail or phone at (610) 402-8590.