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Four elected to Medical Executive Committee

Departments holding chief elections this month

The medical staff has elected four members to the Medical Executive Committee (MEC). Members serve two-year terms that begin Jan. 1. Elected were:

Stephen Jacobs, M.D. (Hospital-based medical specialties). Dr. Jacobs is an anesthesiologist with Physicians Anesthesia Service who has practiced at Swedish since 2004. He serves on the Surgery Quality Review Committee and was elected to his second term on the MEC.

Steven Dresang, M.D. (Primary care). Dr. Dresang's specialty is family medicine with obstetrics and is affiliated with the Swedish West Seattle Clinic. He is currently assistant chief of family medicine. Dr. Dresang previously worked in community health and has been a medical staff member since 2001.

Janice Lew, M.D. (Surgery and anesthesia). Dr. Lew is an anesthesiologist with Physicians Anesthesia Service and has been a Swedish medical staff member since 1998. She has served in several cardiovascular leadership roles at Swedish.

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(Elections continued from p. 1)

Peter Casterella, M.D. (Cardiovascular medicine and surgery). Dr. Casterella serves as executive medical director of Swedish Heart and Vascular Clinic. He has also served as department chief and assistant chief for several years. Dr. Casterella joined the medical staff in 2008.

Drs. Lew and Dresang were elected to their first terms on the MEC. Drs. Jacobs and Casterella were both elected to their second terms.

The primary duties of the MEC are to review and make recommendations on medical staff applications, establish and enforce medical staff policy, promote quality patient care, and serve as the medical staff's liaison to hospital administration and the Board of Trustees. The committee includes 11 voting members and several ex officio, non-voting members. It meets monthly. MEC members also required to serve on other medical staff committees, such as credentials, bylaws, or quality committees.

In addition to the election of these leaders, several departments will be holding elections this month for department chief and assistant chief positions. These departments include:

- Anesthesiology
- Family medicine
- Radiology
- Cardiovascular services
- Pathology
- Surgery

MEC requests delay of allied health co-signature amendment

The Medical Executive Committee (MEC) is asking the Board of Trustees to delay final approval of an amendment it previously recommended and which was approved in September by vote of the medical staff. The request for a delay is the result of guidance recently issued by the Centers for Medicare and Medicaid Services (CMS) relating to documentation requirements for Medicare inpatient admissions. (For additional background information see "[CMS IPPS 2014—New Inpatient and Observation Rules.](#)")

The amendment approved by the medical staff this fall would eliminate requirements for physician co-signatures on medical record entries made by allied health personnel, unless required by law. However, since CMS inpatient admission certification requirements are met through physician co-signature of history and physicals, the elimination of this section of the Bylaws may not be possible at this time.

The MEC's request for delay would allow a review of the new CMS requirements and a redrafting of the amendment in order to ease co-signature burdens while still meeting CMS regulations. The Bylaws may only be amended by vote of the medical staff and approval by the Board.



Save the Date

Medical Staff, Community Board & Foundation Board Holiday Party
Friday, December 6
6:00 – 9:00 p.m.
Cherry Hill Conference Center

Children's party held in Pinard Foyer

Medical Staff Leadership Council to meet Nov. 19

MSLC meetings are held quarterly from 6 to 8 p.m. in the Swedish Education and Conference Center at the Cherry Hill campus. The next meeting will be held Tuesday, Nov. 19. All medical staff members are welcome to attend. Dinner is available at 5:45 p.m.

Members may submit topics for the agenda by contacting [Clark Coler, M.D.](#), chief of staff.

Regulatory Compliance Reference Guide for Medical Staff updated

Medical staff members are encouraged to visit the [Continuous Regulatory Readiness & Accreditation](#) page on Swedish Online and stay current on regulatory requirements and expectations. Included in the site is the [Medical Staff Regulatory Compliance Reference Guide](#) that addresses the most common best practices for patient safety with quick questions that often arise during a survey.

Physician responsible to verify site and side prior to procedure

Physicians performing operative or other invasive procedures exposing patients to more than minimal risk are ultimately responsible for ensuring that the correct patient, site, and side have been confirmed prior to the procedure. The policy is also applicable to anesthesia procedures such as pre-procedure blocks.

To review the policy, see “[Verification of Correct Patient, Procedure, and Site/Side.](#)”

When is a verbal order appropriate?

Verbal orders should be used only when it is impossible or impractical for the ordering practitioner to enter it directly into the electronic medical record without delaying treatment. A verbal order may be appropriate, for example, at a time when the practitioner is performing surgery or is away from the care setting with no computer access.

Inpatient MyChart coming to Swedish Dec. 8

MyChart, which offers patients secure online access to portions of their medical record, is currently available to patients in our ambulatory clinics. Beginning Sunday, Dec. 8, MyChart will be offered to patients visiting the emergency departments and admitted to our hospitals. Patients not already on MyChart will receive a MyChart activation code at registration and on their After Visit Summary and will be able to log in and see their lab results and information about their hospital stay after discharge. This will further assist patients in staying engaged in their care, which studies have shown leads to improved patient satisfaction. More information about Inpatient MyChart will be available soon, including an FAQ document for staff. Contact [Stacey Banahan](#) or [Gigi Altaras](#) for more information.

Medical staff must wear photo ID badges

Every medical staff member is required to wear their photo ID badge so that it is obvious and visible, e.g., on the upper body and on the outer layer of clothing, either with a break-away necklace or other clip or fastener. The necklace must be made to break away easily if force is applied to it. Alternative options for wearing the photo ID badge may be made based on safety and sanitation reasons (e.g., surgery staff during operations).

Crutcher named SOI medical director

by Rayburn Lewis, M.D., senior vice president/chief operating officer, Swedish Seattle, Cherry Hill

I am pleased to announce that Dr. James P. Crutcher, Jr. has agreed to accept the position of Medical Director for the Swedish Orthopedic Institute (SOI). In this new role, Dr. Crutcher will provide medical direction and medical oversight for all clinical programs at SOI including peri-operative patient care pathways, orthopedic surgical services, and patient education programs. As Chair of the SOI steering committee, he will work closely with his physician colleagues and nursing management on patient quality and safety programs, as well as outcome measurement initiatives including the American Joint Replacement Registry. He will continue to participate in the total joint bundle planning committee, the Swedish MSK steering committee, and serve as clinical liaison to the orthopedic programs at Ballard, Issaquah, and Edmonds campuses. He will work closely with Jim Santucci, Vice President for the Swedish Orthopedic Institute.

Dr. Crutcher is a fellowship trained orthopedic surgeon who specializes in primary and revision hip and knee replacement. In practice at Orthopedic Physician Associates since 1990, he performs over 400 hip and knee replacement procedures each year. Dr. Crutcher served as Chief of the Department of Orthopedics at Swedish Medical Center from 2004-2008. During his tenure as chief, he helped develop the Swedish Orthopedic Institute, the largest dedicated orthopedic facility in the Northwest. He also served as Orthopedic representative to the Swedish First Hill Medical Executive Committee from 2009-2012.

Please welcome Dr. Crutcher to his new role.

Swedish Neuroscience Institute welcomes three neurosurgeons

Swedish Neuroscience Institute (SNI) is pleased to announce the recent addition of three neurosurgeons, furthering the Institute's offering of world-class neurological care to the Pacific Northwest.

Dr. Johnny Delashaw most recently served as professor and chair of the Department of Neurological Surgery at the University of California, Irvine. Dr. Delashaw is returning to his Northwest roots; he was the professor of neurological surgery, otolaryngology & neurology for 14 years. Dr. Delashaw is recognized as a leading neurosciences researcher and educator. His clinical and research interests include skull base surgery techniques, tumor angiogenesis, cranial nerve physiology, and microvascular physiology. Dr. Delashaw is based at SNI on the Cherry Hill campus and is also seeing patients in Issaquah.

Dr. Charles Cobbs comes to SNI from the University of California, San Francisco (UCSF) Department of Neurosurgery, where he was associate clinical professor and principal investigator for several National Institutes of Health (NIH) studies in brain tumor research. Dr. Cobbs has assumed leadership of SNI's Ivy Center for Advanced Brain Tumor Research following the untimely passing of Dr. Greg Foltz. Dr. Foltz personally recruited Dr. Cobbs, a collaborative colleague, with an eye toward the continuation of Ivy's cutting-edge research. Dr. Cobbs completed his neurosurgical residency at UCSF in 1997 as well as a postdoctoral fellowship in molecular neuro-oncology in 1995, also at UCSF.

Dr. Stephen Monteith brings another cutting-edge technology to SNI: MRI-guided focused ultrasound surgery for intracerebral hemorrhage, for which he has already had two papers accepted for publication. Dr. Monteith completed a vascular/endovascular fellowship at Thomas Jefferson Hospital in Philadelphia and a neurosurgical residency at the University of Virginia Health System. Dr. Monteith is accepting patients at SNI's Cerebrovascular Center on the Cherry Hill Campus as well as the Issaquah Campus.

To refer a patient, call 206-320-2800.

Interpreters and translated documents available to practitioners

Federal law requires recipients of federal funding (Medicaid, Medicare, research funds, etc.) provide language assistance to patients with limited English proficiency (LEP) to assure meaningful access to programs and services. Language assistance includes verbal interpretation and/or written translation to assure that LEP patients can communicate with their providers. Interpretation can be provided through qualified telephonic, video (VRI), or in-person (bilingual staff or agency) interpreters. SMC has many [translated vital documents](#) available online.

Patients with hearing and/or vision loss who require interpretation should also be assessed and provided an interpreter and an assistive device, if needed. Patients who are referred to SMC for procedures or services will have a qualified interpreter scheduled for them while at SMC, but referring physicians should provide for interpretation in their offices as well. To learn more, visit www.LEP.gov and the [Interpreter Services Information Center](#) page online.

Forum to showcase Swedish research

The next Research Investigator Forum will be held on Tuesday, Dec. 3, from 5:00 to 7:00 p.m. in the Glaser Auditorium at First Hill.

Presenting at this forum will be:

- Dr. Charles Cobbs, Director of The Ben & Catherine Ivy Center for Advanced Brain Tumor Treatment (Ivy Center) at the Swedish Neuroscience Institute. Dr.Cobbs will be discussing his own research in developing brain cancer treatments as well as how his lab is advancing the research legacy of Dr Greg Foltz.
- Dr. Ralph Aye, a thoracic surgeon, who has been involved in research at Swedish for many years, including studies related to lung cancer screening and treatment of acid reflux disease.
- Dr. Paul Huang, an interventional cardiologist, who focuses his research on cell-based therapies.
- Dr. Christopher Shuhart, Medical Director of Swedish Bone Health and Osteoporosis, will share information on Bone Health's first clinical trial which has just received approval.

Dr. Mark Reisman will be moderating the event, and we encourage you to join us as we continue to shape the research program to meet your collective goals and needs.

These forums provide an integrative platform to showcase research being conducted at Swedish to fellow investigators, representatives from Senior Leadership, and staff members of the Swedish Foundation Board. Our goal at this upcoming event is to provide an overview of research activities and achievements at Swedish and encourage collaboration and discussion on goals for the coming year. We hope that you will be able to participate.

Dinner will be served at 5:15 and presentations will begin promptly at 5:30 p.m.

Clinical alarms survey responses

Clinical alarms, particularly physiologic monitoring devices, play an integral part in the care provided to our patients. To better understand and then improve work environments and information needs, a recent survey of caregivers was conducted. The survey response exceeded expectations with 410 responses system-wide, and nearly half of survey participants provided additional heartfelt comments. The Medical Device Alarm Safety Subcommittee wishes to thank all who participated in the survey! Generally, caregiver responses confirmed:

1. Staff response is based on alarm criticality but that devices/equipment should differentiate response priority
2. Noise competition is a validated concern since there are frequent false alarms which may cause alarm fatigue
3. Staff respond quickly to alarms.

Swedish is evaluating all aspects of functionality and notifications related to physiologic monitoring devices. More information will be shared in the future. The 2014 Joint Commission National Patient Safety Goal on Medical Device Alarm Safety [Medical Device Alarm Safety](#) will also be addressed in this process improvement.

Swedish recorded CMEs easy to access

Did you know that many Swedish CME courses and series, including grand rounds, are recorded and available to view online at your convenience? Available presentations are located on the CME website and are sorted by topic.

Click on the link below to check out recent recordings: <http://www.swedish.org/RecordedCMEs> All archived recordings are eligible for self-claimed Category II credit.

Examples of recent Grand Rounds -2013 include:

Is it Just a Headache? A Closer Look at Head Injuries in Athletes
Special situations in OB Care: Hepatitis and Opiate Dependence
Evidence-Based Transfusion and Upper GI Bleeds ... and Beyond
Assessment and Treatment of the Dizzy Patient
Communicating with Patients After a Medical Error

Tips for maintaining parking garage security

- Remove all valuables from your vehicle every time you park
- If valuables must be left behind, hide them out of sight several blocks before parking
- Disable internal trunk releases per your owner's manual instructions
- Audible alarms or other theft deterrent devices can be effective
- Security garages are only secure if entering and exiting drivers watch the door fully close behind them every time
- Remote controls for security garages should never be left inside parked vehicles. They provide future access to returning thieves

Medical Staff Services Awareness Week Nov. 3-9



National Medical Staff Services Awareness Week is being observed Nov. 3-9 in recognition of the important role medical staff services professionals play in the nation's health-care system. Please take a moment to thank these individuals who help ensure competency and quality patient care at Swedish.

OB/GYN physicians connect grateful patients to Swedish mission

Referring grateful patients is one of the best ways for physicians to ensure that Swedish has the resources needed to support our important work in providing quality care to patients. The Foundation would like to thank obstetricians/gynecologists, and maternal fetal medicine physicians and staff for their partnership in connecting us with grateful patients who want to give back to Swedish.

“My partners and I get to know our patients very well as we spend a lot of time with them during a high-risk pregnancy,” says Dr. Brigit Brock, Swedish Maternal and Fetal Specialty Center physician. “If we get them through a tough situation, patients are often very grateful. On occasion they mention how appreciative they are or make an overture about giving back. I like to take that opportunity to say, ‘You should consider getting involved with Swedish.’ We explain that we fundraise for many different areas across the hospital and that there are a lot of ways they can help.”

“Sharing a little information about a current philanthropy project, such as the Lytle Center, is another way to gauge a patient's interest in supporting Swedish,” says Dr. Tanya Sorensen, also with the maternal and fetal center. “We feel strongly about doing this because we see a direct link back to our own work. About 50 percent of our patients are on Medicaid. That's a lot of support needed from philanthropy.”

The Foundation has training resources available for physicians who are interested in learning more about our grateful patient program. To receive more information, please contact your Foundation liaison or Jennifer Blume, assistant director, Major Gifts, at 206-386-3348 or jennifer.blume@swedish.org.



Marcus Trufant, former Seattle Seahawk, and Pat Monahan of the Grammy award-winning band Train pose with Dr. Brigit Brock at the Foundation's recent donor event.



Courtney Gregoire, former Gov. Christine & Mike Gregoire, and baby Audrey Lindsay pose with Dr. Tracy Johannsen and Dr. Brigit Brock at the donor event to celebrate the opening of the Lytle Center.

Welcome new medical staff members

Help welcome [practitioners who joined the medical staff in October](#).

To admit a patient to Swedish, call 206-386-6090.

At Your Service: The Physician Assistance Program

The Swedish Physician Assistance Program is a confidential, outside resource available to medical staff members and their families at no cost to support members in addressing:

- Family or marital concerns
- Substance abuse
- Work-life balance issues or other problems
- Emotional or behavior issues
- Compulsive behaviors

The program is always confidential and available 24 hours a day, seven days a week at 800-777-1323. Benefits also include free legal services, childcare and eldercare referrals, identity theft/fraud services and debt management assistance.

Check out the [online tools and resources](#). At the “Work/Life Resources” tab enter the username: “swedish” and the password: “employee” for immediate access. . The username and password provide access for all medical staff members, whether or not employed by Swedish.

CME spotlight

Upcoming CME Conferences

[Transradial Approach: A Case-based and Hands-on Training Course](#)

Friday-Saturday, Nov. 8-9

[Diabetes Management Update 2013](#)

Friday, Nov. 15

[Controversies in Neurological Restoration: Clinical Strategies and Case Presentations](#)

Friday, Nov. 22

[Otolaryngology for the Primary-Care Provider](#)

Friday, Nov. 22

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Like us on Facebook: www.facebook.com/SwedishCME and follow us on Twitter: www.twitter.com/SwedishCME

Standards News

[Click here](#) for a summary of Clinical Standards recently adopted or amended and links to each Standard.

Standards are published as soon as possible after final adoption. All Swedish Standards are accessible at <http://standards.swedish.org> or by going to the Swedish intranet page and clicking on “Standards.”



Swedish Home Page: <http://www.swedish.org>
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