

# medical staff news

PUBLISHED FOR THE MEDICAL STAFF OF SWEDISH MEDICAL CENTER

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[News](#)  
[Kudos](#)

[PolicyWonk](#)  
[Philanthropy](#)

## NEWS

### **Revision and Retirement of Order Sets Underway**

Order sets are critical for high reliability and efficiency of patient care. Swedish has accumulated over 1400 inpatient order sets over the 10 years since our go-live and the work of reviewing and managing the totality is not sustainable. Order set reduction/reconciliation is needed both to allow proper maintenance and to reduce the burden of managing multiple order set variations resulting from updates to standard of practice. [Continue reading.](#)

### **Ambien Linked to Increased Fall Risk**

There is data linking Ambien to an increased risk for falling. At the same time, appropriate bowel care can decrease the need for patients to get up in the middle of the night. Please read the following [suggestions for alternatives to Ambien](#) and these [helpful bowel care guidelines](#). Please be aware that medication choices can carry higher risks for elderly patients—including those at Swedish—and thank you for your focus on providing the most appropriate care for our elderly patients.

### **Transfusion Service Lab (TSL) to Perform Additional Testing**

Beginning immediately the following tests will be performed in the Transfusion Service Laboratory instead of main lab at the First Hill, Cherry Hill, Ballard, and Issaquah sites: Coombs, direct and indirect; ABO Rh; elution; maternal hemorrhage fetal screen; and red cell antibody titer. There is no change to the test order in Epic and test results will now appear in Results Review in the Blood Bank section. When a direct Coombs test result is positive, there will now be a reflex test to IgG and complement subparts. Questions? Please contact [Kirsten.Alcorn@Swedish.org](mailto:Kirsten.Alcorn@Swedish.org).

**Antimicrobial Indications – March 2018 ECO Project** by Jeff Wolff-Gee, M.D., CMIO; Michael Myint, M.D., VPMA and director of quality and patient safety; and John Pauk, M.D., medical director, infectious disease

CMS regulations now include a requirement that the provider specify an indication at the time an antibiotic is ordered in the inpatient setting (including ED). This is consistent with quality and value goals around appropriate antimicrobial use. On March 6, antibiotic orders will be updated at Swedish to comply with CMS requirements. [Continue reading.](#)

### **The Joint Commission Targeting Hand Hygiene Noncompliance**

The Joint Commission recently issued a communication entitled "[Citing Observations of Hand Hygiene Noncompliance](#)" in which it puts hospitals on notice that surveyors will issue deficiency citations for any observation of an individual failure to perform hand hygiene while providing patient care. The agency noted that it has given organizations since 2004 to successfully implement a hand hygiene program to prevent health care-associated infections which number over two million annually in the U.S.

### **Pharmacy & Therapeutics Committee**

The P&T Committee continues to manage drug shortages. The [January newsletter](#) outlines guidance for managing the shortage of injectable hydromorphone, morphine and fentanyl. Several medication infusions will be converted to IV push administration on Feb. 15 due to shortage of mini-bags. Visit the [P&T website](#) to learn about the recent P&T decisions including influenza vaccination in solid transplant patients, restriction of IV acetaminophen, and bowel and sleep medication order sets.

## Functional Restoration Joining Swedish Pain Services

Beginning Feb. 12, Swedish Functional Restoration will become part of Swedish Pain Services (SPS) as a hospital-based ambulatory clinic. All First Hill services will remain in the same location at 600 Broadway (Suite 530) in a newly expanded space. Referrals for services under SPS, including functional restoration, can be ordered in Epic under 'pain0002' or 'FH Pain Services.' Please visit us at <https://www.swedish.org/services/pain-services> for more information on the program.

## Welcome New Medical Staff Members

Welcome practitioners who [joined the Swedish medical staff in January](#).

## KUDOS

*Medical staff members may submit news about awards, recognitions, published articles, media reports, and other professional achievements for consideration in "Kudos" by emailing [Medical Staff News](#).*

## POLICYWONK

### New/Updated Standards

[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."

## PHILANTHROPY

### New Vice President Named for Philanthropic Services, Foundation



Andrea King was recently promoted to VP Philanthropic Services for the Foundation where she will lead the operations, annual giving, planned giving, prospect management and finance teams. She will be a key member of the Foundation's leadership team, serving as a resource to physician leaders to ensure accurate reporting and spending of fundraising dollars.

### Global Health Programs in Summer 2018: Laos, Peru, Morocco

Global Impact, established in 2005, is seeking healthcare practitioners and community members at large to join our students and staff for two weeks in Laos, Morocco and Peru in late August. Our programs focus on global health (clinics, health education and public health infrastructure) in partnership with community-based NGOs. For more information visit [www.seattlecolleges.edu/globalimpact](http://www.seattlecolleges.edu/globalimpact).



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### **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
- Grief and loss
- Home ownership consultation
- Emotional or behavior issues
- Compulsive behaviors
- Caregiver burnout
- Management coaching

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](#). Enter your username, swedish, in order to access the library of work/life tools, trainings, and webinars available to you.

### **And So Forth...**

#### **Order Set Review**

The Provider Champion Team (PCT) will critically review with the intention of removing 270 order sets not used in the last 12 months. In addition, the PCT will communicate with appropriate stakeholders—including the original owners as well as representatives from quality, pharmacy, nursing, and departments—to approve sun-setting.

Ultimately, all order sets must be critically evaluated for perpetuation, consolidation, or elimination. Retired order sets will be archived. Please contact the [Physician Champion Team](#) if you have any questions.

#### **Antimicrobial Indications**

A wide variety of system and local governance groups were engaged including the Swedish Provider Champion Team (PCT), Swedish Antimicrobial Stewardship (AMS) Committee, and the following clinical decision teams: infectious disease, perioperative, hospital medicine, pediatrics, ob-gyn, ED, critical care, and pharmacy governance to review the changes specific to ordering antibiotics. The new workflow was developed, reviewed, and endorsed by the same governance bodies.

The new order composer will now include a set of defaults that should make ordering of antibiotics easy to do, requiring minimal additional steps. In addition, when the reason for the antibiotic is not variable, indications for use will be defaulted in (i.e., in identified pre- and post-operative order sets, the indication for surgical prophylaxis will be pre-checked in those procedures).

More important than compliance with regulatory bodies, we believe this change will also assist us greatly as we provide stewardship services across the system. The pharmacist will be better able to manage correct dosing for the variety of disease states at the local level. We will also be able to better track appropriate antibiotic utilization in the new AMS module in real time.