

medical staff news

PUBLISHED FOR THE MEDICAL STAFF OF SWEDISH MEDICAL CENTER

[Guidelines for Authors](#)

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NEWS

Swedish Medical Staff Meeting Scheduled for March 21

A meeting of the Swedish medical staff will be held Wednesday, March 21, at 6 p.m. in the Swedish Education and Conference Center, Cherry Hill Campus. Dinner will be available at 5:30 p.m. The agenda includes action on two bylaws amendments, an organizational update from Chief Executive Guy Hudson, M.D., and updates from the campus executive committees. All members are encouraged to attend.

New Guidelines for Boarding Admitted Patients in our Emergency Rooms

All Medical Staff should read these

To reliably deliver quality care in Swedish emergency departments, it is necessary to have accepting providers assume active management of admitted patients by four hours, two for Intensive Care Unit patients (the "4/2" rule), after the admission order is signed, regardless of geographic location.

[Continue reading.](#)

Non-physician Admit Notes

All non-physician (APCs and residents) admission notes must be signed by the physician before the patient is discharged from the hospital. This is a regulatory requirement for payment for the hospitalization. Please check your mailbox daily to sign these notes.

Hypoglycemia Post Hyperkalemia Treatment

LIPs should add the revised order set "Adult Hyperkalemia" #407 to their favorites. The order set was recently revised to include a pre-checked order for blood glucose checks prior to and following (q 30 minutes x 2, q hr. x 2) insulin administration as well as an order for hypoglycemia treatment. A recent review of SMC hypoglycemic incidents over a one month period showed a significant number of events related to hyperkalemia treatment with insulin and dextrose. [Review the order set here.](#)

New Morgue Now Open

A new morgue opened March 1 at Swedish First Hill. Called Virchow 2, it is located on the B Floor close to LabCorp. The old morgue, Virchow 1, also on the B Floor is now used only for patients scheduled for autopsies. All other deceased patients will be taken to the new morgue. Questions? Please contact Morgue Services at 206-320-8094.

Contact Swedish Referral Services with all International Patients' Inquiries

Referral Services should be the first point of contact for any inquiries or questions related to international patients received at your clinics. Our team also works with our private-pay teams for all estimates for SMC and SMG. If your team or clinic receives an inquiry, please contact us first at referral@swedish.org or 425-525-6110. We will communicate with the patient and private-pay groups, and work with your teams for providing patients with all needed, advance payments and scheduling. Questions? Visit [Referral Services](#) or contact [Laura Walden](#).

Pharmacy and Therapeutics Committee Report

The P&T Committee has approved use guidelines for IV iron. The new order set will be built in Epic to guide providers through use criteria for adult medical, postpartum, CKD, and bloodless program patients. Read the [February newsletter](#) or visit the [P&T website](#) to learn more about other medication use policies and processes.

Welcome New Medical Staff Members

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

KUDOS

Kevin Wang, M.D., faculty member at the Swedish-First Hill Family Medicine Residency program, has been named a recipient of the National Minority Quality Forum's 2018 40 under 40 Leaders in Minority Health Award! He will travel to Washington, D.C., to receive his award in April.

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

Join Swedish on May 6 for the *Seattle Brain Cancer Walk*

Register now for the 11th Annual [Seattle Brain Cancer Walk](#) on Sunday, May 6 at Seattle Center benefiting [The Ben and Catherine Ivy Center for Advanced Brain Tumor Treatment](#) at the Swedish Neuroscience Institute. Founded in 2008 by a group of committed volunteers and families, the *Seattle Brain Cancer Walk* has raised more than \$5 million for brain cancer research and clinical trials. Celebrate and support those affected by brain cancer by joining a [Swedish Team](#). If you are unable to attend, you can still show your support by registering as a Virtual Walker. Complimentary registration for caregivers, please use code **Swedish2018**. *(To open the links, please use Chrome or Firefox.)*

Support Team Swedish at the Mercer Island Rotary Run on March 18

The Swedish Cancer Institute is a proud sponsor of the 46th annual Mercer Island Rotary Run for colon cancer awareness on Sunday, March 18. To join Team Swedish to participate in one of the running or walking events, visit <http://mercerislandhalf.com/>. Our team name is Team Swedish and the team captain is Denise Gwinn. Contact Denise to receive the code for a discounted registration rate. Once you've registered, send an email to [Denise Gwinn](#) with the event you are running/walking along with your T-shirt size. If you'd like to work at our Swedish booth, the following shifts are available:
Saturday, March 18 Race Expo: 10:30 a.m.-12:30 p.m., 12:30-2:30 p.m. and 2:30-4:30 p.m.
Sunday Race Day: 6:30-8:30 a.m., 8:30-10:30 a.m. and 10:30 a.m.-12:30 p.m. Email your first- and second-choice shift preference to [Denise Gwinn](#).

DragonSlayer Walk to End Sarcoma to be Held April 28



The Swedish Cancer Institute is a proud sponsor of the **14th annual DragonSlayer, Walk to End Sarcoma**, the NW Sarcoma Foundation Event. Each year over 2,000 people gather to support each other and raise funds to defeat the sarcoma dragon. Please join Team Swedish in the walk to end Sarcoma, visit: <https://www.nwsarcoma.org/dragonslaye-preregistration>. Our team name is **Team Swedish** and the team captain is Khadija McNitt. Once you've registered, send an email to [Khadija McNitt](mailto:Khadija.McNitt@swedish.org) with your T-shirt size to get your Team Swedish T-shirt. If you'd like to volunteer at our SCI booth instead of walking, please email [Khadija McNitt](mailto:Khadija.McNitt@swedish.org).

CME

Swedish Continuing Medical Education Opportunities

Swedish offers a variety of accredited CME events, including full-day conferences, online courses and regularly scheduled series. Check out these upcoming events and visit www.swedish.org/cme for a complete list:

- March 16 [Swedish Cancer Institute's Cancer Control Symposium](#)
- March 23 [High-Risk Obstetrics for the Family Medicine Provider](#)
- April 13-14 [LGBTQ Health - Trans* Health Symposium](#)
- April 27-28 [4th Annual Spring Hepatology Update](#)

[Follow this link](#) for information on the Swedish Regularly Scheduled CME Series.



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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...

Boarding Guidelines

Background

Emergency Department boarding, defined as a patient not being physically admitted to the intended inpatient unit within 4/2 hours of the admission order being placed, is one of the most dangerous times in a patient's hospitalization. Delays in care or deviations from standard-of-care monitoring have adverse consequences.

To increase the safety of care of the admitted patient, Swedish Health Services, with medical staff and broad-based collaboration is creating these boarding guidelines with a focus on the 2018 flu season for use in all emergency departments.

Assessment/Recommendation

Time zero is when the ED provider places the admit/transfer order, which should happen only after the accepting provider at the destination campus has been paged.

If boarding orders have not been placed by 4/2 hours, ED HUC pages accepting provider at destination campus to inform them that boarding orders are due.

- If accepting provider is available on campus, they will come evaluate the patient in the ED, place a plan of care in the chart, and place, at a minimum, truncated orders by 4/2 hours.
- If accepting provider is unavailable on campus, SHM will care for the patient during the boarding period for patients being admitted to all medicine/family medicine teams and for neurology/cardiology patients. SHM may provide care for other patients on a case-by-case basis.
- Once orders are requested by the ED HUC, the primary team admitting provider will page the FH SHM Triage doctor at that campus who will assign an SHM provider to see the patient in the ED, place a plan of care, and place truncated orders.
- If accepting provider is unavailable on campus for patients in whom the clinical condition is beyond the scope of practice of SHM, (pediatrics and management of some surgical conditions for example) then the ED provider will place absolutely essential orders as advised by the admitting team.
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Accepting provider must assign themselves as the attending in Epic and contact the ED RN to inform them they have assumed care of the patient. The ED RN/Float RN will release the orders in a timely manner. ED provider will no longer manage the patient.