

medical staff news

PUBLISHED FOR THE MEDICAL STAFF OF SWEDISH MEDICAL CENTER

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July 2018

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NEWS

Board Approves Admission Order Authentication, Campus Department Chief Amendments

The Board of Trustees has given final approval to a bylaws amendment requiring admission orders be authenticated prior to patient discharge. The amendment was adopted by the medical staff earlier and is a CMS requirement impacting hospital reimbursement. The Board also accepted the medical staff's revisions to the duties of the campus department chiefs. Medical staff governance documents are available on [Swedish Online](#).

Annual Primary Campus Designation Election Coming Soon

Each year Swedish medical staff members have an opportunity to change their primary campus designation. This designation determines the campus elections members are eligible to vote in and which offices they are eligible to hold. All Swedish staff will be given information via email on their current primary campus designation and instructions for making a change. No action is necessary to retain the existing designation. Once the deadline passes no changes may be made until the following year. The primary campus designation is not applicable at the Edmonds medical staff.

Transfusion Service Lab (TSL) To Perform Additional Testing

Coombs, (direct and indirect), ABO Rh, elution, maternal hemorrhage fetal screen and red cell antibody titer tests are now being performed in the Transfusion Service Laboratory instead of main lab at the First Hill, Cherry Hill, Ballard, and Issaquah campuses. 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, it will be reflexed tested to IgG and complement subparts. Questions? Please contact [Kirsten Alcorn, M.D.](#)

Removing Transfused Status from Epic for Blood Components

Blood product status no longer shows as "Transfused" in results review. It shows as "Issued." The only statuses that show in Epic are crossmatched, issued or returned. [Click here](#) for more information. To determine if a blood product was transfused, look for documentation in the flow sheets (blood transfusion record and OR blood transfusion record) and in summary (Blood Management). Note: This will affect all campuses except Edmonds. Questions? Please contact [Kirsten Alcorn, M.D.](#)

Insurances Accepted | Swedish.org Provider Profiles

We are excited to share that accepted insurances plans are now displayed on Swedish.org 'Find a Doctor' provider profiles, allowing patients to filter and search with this additional data element. Industry data shows 93 percent of patients want this feature on our website to find the right providers for their needs and preferences. [Continue reading](#).

IV Iron Ordering Instructions Available

IV iron may now be ordered via the 'IV Iron Replacement – Adult' order panel only. Click [here](#) for instructions. Use oral iron for all patients unless you have concern for GI tolerance or need for large iron dose prior to discharge. Defer IV iron replacement to outpatient setting unless the patient meets one of the exceptions. Order sets for IV iron and Iron per Pharmacy protocol have been eliminated.

Pharmacy and Therapeutics Committee Report

Therapeutic interchanges

The P&T Committee has approved therapeutic interchange for [potassium](#) and oxycodone oral formulations. Brimonidine 0.2% ophthalmic solution will replace the 0.1% and 0.15%. [Ipratropium](#) MDI inhaler will be replaced with ipratropium 0.02% inhalation solution. Scopolamine patches are limited to one-time orders for PONV. Alvimopan limited to 10 doses. Read the [June newsletter](#) or visit the [P&T website](#) to learn more.

Interchange of Potassium Oral Formulations Announced

Effective July 19 the tablet, liquid, and effervescent dosage forms of potassium will be interchangeable to meet the patient's needs. The tablet can be split in half or dissolved in water for patients who have difficulties swallowing. The effervescent tablet is reserved for enteral tube administration. Potassium solution is restricted to pediatrics (under 18 years old) who cannot swallow tablets with or without administration modification. The powder packet will be non-formulary. Click [here](#) to review the interchange and [here](#) for enteral tube administration instructions of the effervescent tablet.

Lead Protective Wear Policy and Procedure Approved

A new, well-defined lead protective wear [policy/procedure](#) is available online. Please take a moment to read it. [Continue reading.](#)

New Code Sepsis Policy in Effect

During the regional sepsis collaborative held in May, campus-based sepsis teams began planning for local implementation of a new Code Sepsis process in all hospital Emergency Departments. Our Sepsis Steering Team felt strongly that this process was needed to ensure urgent treatment and resuscitation for sepsis patients since 71 percent of our mortality indicated sepsis was present on admission. [Continue reading.](#)

U.S. Food and Drug Administration Authorizes Blood Test for Concussion Evaluation

On behalf of the Clinical Program Services (CPS) Neuroscience Institute and the neuro trauma focus group, this message is to provide clarification on the functionality of the recent FDA release of the Banyan Brain Trauma Indicator (BTI) a blood test to assist in the detection of brain bleed in adults. We have heard questions and confusion about the role this test plays in identification and management of TBI. [Continue reading.](#)

Welcome New Medical Staff Members

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

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

There's Still Time to Register for the *Swedish SummeRun & Walk for Ovarian Cancer* on July 15!



Join us for the 25th Annual *Swedish SummeRun & Walk for Ovarian Cancer* on Sunday, July 15 at the Swedish First Hill Campus. Funds raised benefit the [Rivkin Center for Ovarian Cancer](#) and its work supporting ovarian cancer research, high-risk prevention and early detection screening, and ovarian and breast health education in an effort to save women's lives. Celebrate and support those affected by ovarian cancer by joining one of our largest teams: Team Swedish/Team Mehta, or one of

the many incredible Swedish teams! If you are unable to attend, you can still show your support by registering as a virtual participant. [Register today!](#)

CME

Swedish Continuing Medical Education Opportunities

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



Medical Staff News: swedishmedicalstaffnews@swedish.org

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

Physician Profiles: <http://www.swedish.org/for-health-professionals/professional-resources/managing-your-physician-profile>

Swedish for Medical Professionals: <http://www.swedish.org/for-health-professionals>

Current CME Listings : <http://www.swedish.org/cme>

Swedish Foundation: <http://www.swedishfoundation.org/>

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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...

Insurance

Accepted insurance plans for each provider are entered in two ways:

- *Employed SMG/SMC providers:* Accepted plans have been automatically populated based on current Swedish insurance contacts, and this data can still be updated and managed manually if needed through the Kyruus ProviderMatch portal below.
- *Affiliate providers:* Accepted plans must be manually managed by the provider or practice manager through the Kyruus ProviderMatch portal below.

How to manage your provider profile

Please take the following steps to make sure the insurances accepted data, and the rest of your provider profile, is configured correctly.

1. Review the insurances accepted data in the [Kyruus ProviderMatch portal](#) with your clinic administrator, or other designated administrator who may have access to this portal, to ensure the content is accurate. Providers or administrators can request ProviderMatch access to manage their profile at provider.directory@providence.org.
2. [Review these tips](#) on how to build a profile that will drive the most interest and activity.

Our Patient and Provider Engagement Center, along with Digital & Innovation and Healthcare Intelligence teams will be working on continued improvements and new features over time in the “Find a Doctor” tool to ease the way of patients searching for providers. If you have specific feedback we’d love to hear it – please send it to provider.directory@providence.org.

Thank you for helping us provide a more personalized provider directory for our patients.

Find your doctor

Search a name, specialty, or keyword > Search location

Show only providers accepting new patients

Choose gender

FEMALE MALE

Search health plans accepted

Please contact the practice directly to confirm your health plan is accepted

Lead Protective Wear

Highlights include:

- Prior to donning, each user of lead protective wear must check its integrity—the absence of tears, rips, perforations, permanent creases or folds. If not intact, put a “Do Not Use” tag on it and inform your department lead point person or manager.
- If visibly dirty, take your usual patient equipment cleaning product and wipe it down (e.g., with purple sani-wipes).
- Check to see if it has had its 2018 annual check as evidenced by means a purple dot affixed to it. If you don’t see a purple dot, notify your department lead point person or manager.
- Store on a hanger or by the shoulder straps on a peg.

Code Sepsis

[Here](#) you will find a recent status update reported by each campus for Code Sepsis implementation. Please reach out to your campus representatives for more information or concerns.

Campus	Campus Lead	Physician Lead	Executive Sponsor	Campus Quality Program Manager
First Hill	Staci Hartmann <i>R.N. Manager, ICU</i>	David A. Peters, M.D. <i>Emergency Medicine</i>	Elizabeth Wako, M.D. <i>CMO</i>	Curtis Camp
Cherry Hill	Greg Cunningham <i>R.N. Manager, ICU</i>	David A. Peters, M.D. <i>Emergency Medicine</i>	Derel Finch, M.D. <i>CMO</i>	Lynn Elder
Edmonds	Catherine O'Keefe <i>R.N. Manager, ICU</i>	Kurt Harmon, M.D. <i>Surgery</i>	Sandeep Sachdeva, M.D. <i>CMO</i>	Pam Martino
Issaquah	John Viglo <i>Interim ED Mgr</i>	Matthew Frederick, D.O. <i>Emergency Medicine</i>	Joel Wassermann, M.D. <i>CMO</i>	Deborah Franke
Ballard	Brittney S. Johnson <i>R.N., ED</i>	Meghan Schott, M.D. <i>Emergency Medicine</i>		Greer Fowler

Blood Test for TBI

The Banyon BTI works by identifying and measuring the levels of two brain-specific protein (UCH-L1 and GFA) that appear in the blood within 12 hours of a brain injury when bleeding has occurred. The test results are available within three to four hours.

The Banyon BTI can help providers decide whether or not to do a CT scan, potentially avoiding unnecessary CTs which can be unrevealing in mTBI, costly, and exposes the patient to radiation. Just as CT scans don't diagnose concussion, neither does the Banyon BTI. The Brain Association of America published the following comment from a brain injury medicine specialist "While an important breakthrough in the field, the threshold for detecting brain injury using the Banyon BTI is set to the finding of positive results on CT scans, which occurs in the minority of mild TBIs. The majority of concussions have negative CT studies and thus the Banyon BTI may not indicate brain injury when, in fact, the patient has sustained an mTBI."

The Banyon BTI does not eliminate the need for proper observation, diagnoses, and intervention from licensed medical professionals after brain injury.

For more information contact [Michael Erickson, M.D.](#), associate director, Swedish Sports Medicine Program Fellowship.