

# MEDSTAFF NEWSLETTER

UPSTATE UNIVERSITY HOSPITAL

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## A LETTER FROM

## THE MEDICAL EXECUTIVE COMMITTEE

Dear Colleagues,

We, the members of your Medical Executive Committee, are reaching out to you to solicit your support and patience during these very difficult times. Most of you have been following the latest sequence of events as they focus on a change in the institutional leadership.

At this point, there are undoubtedly more questions than answers, and more feelings of concern than reassurance. In this early phase of uncertainty it is particularly important to resist the urge to speculate, but instead rely on information provided from our representatives within the institution, who will undoubtedly put things into perspective as time passes.

Each of us is guided by core values. As members of the medical staff of this

educational institution, we strive for excellence in our daily lives. What has occurred at the highest level of our leadership strikes deeply into one's sense of personal integrity.

A thoughtful clinician from our past once said: "Autograph your work with excellence." In the midst of this turmoil, it is most important to go back to one's roots: Upstate Medical University is rich in history, academic excellence and education. The institution stands strong when it comes to preparing future health practitioners who will look after the sickest of patients. Quite simply, the success of Upstate is a function of your individual commitment and dedication. "The mission of SUNY Upstate Medical University is to improve the health of the communities we serve through education, biomedical research and

health care." Daily, within our institution, there are uncountable examples of commitment to health and safety of care to patients, engagement in excellence and collaboration.

It is particularly important during times like these that one stays focused on what really matter: taking care of our patients, nothing more and nothing less.

Thank you,

The Medical Executive Committee

On behalf of your Medical Staff Leadership I would like to extend my sincere wishes for a warm and meaningful Holiday Season and a peaceful winter break with family, friends and loved ones. A very big and sincere 'Thank You' to all caretakers at both campuses of Upstate University Hospital for their daily contributions and service to our patients and the important collegial support of each other.

Sincerely, Bettina Smallman, MD



Bettina Smallman, MD

Welcome to our new Chief Medical Officer (CMO)

Anthony P. Weiss, MD, MBA

Dr. Anthony Weiss comes to Upstate from Massachusetts General Hospital, where he was the Quality Chair of Psychiatry and Chair of Clinical Policy and Records. Following completion of his bachelor's in pharmacology and toxicology, and his doctorate in medicine from University of Wisconsin School of Medicine, Dr. Weiss completed his training at Massachusetts General Hospital, and served as a member of the Harvard Medical School faculty. Dr. Weiss also holds a master's degree from Harvard Medical School in Boston, and an MBA, summa cum laude, from Babson College in Wellesley, MA. Dr. Weiss' role as CMO at Upstate encompasses both campuses.



## OUR POTENTIAL

### Anthony P. Weiss, MD, MBA

Greetings and Happy Holidays!

I am excited to be here and am so grateful for the extremely warm welcome I have received as a new part of the Upstate family. I have been lucky to have had the chance to meet with so many of you already, and look forward to meeting and working with so many more of you in the weeks and months ahead.

In my visits with people around the hospital I am often asked about my initial impressions as a newcomer to the organization and the region. In reflecting on this a bit (psychiatrists do a lot of reflecting), I can sum it up in three points:

1. This is a fundamentally good organization, with a long and proud history of progressive healthcare, an important academic mission, and a passionate and dedicated staff
2. There is extraordinary potential to become a *truly great* organization, but we are far from this goal at present
3. It is our ethical duty to reach that potential, as for many patients we are their only option for care. The people of Syracuse deserve the best possible healthcare we can provide.

Change. There is so much change occurring right now and so much uncertainty, that it can make the status quo seem like a safe option, a viable option. Staying put is neither safe nor viable. As we've seen with many other organizations, hospitals that do not innovate in the way they deliver care cannot continue to provide excellent care, and some cannot even survive the intense financial pressures of this era. We must rekindle the academic spirit and progressive past to develop new solutions to the challenges we face.

But with so many challenges facing us, where do we start? My strong belief is that we need to begin with us. We need to focus first on the wellbeing of the employees here at Upstate, and on our ability to work together to provide care for the patients who entrust their lives to us.

Our potential as an organization will be equal to our ability to answer "yes" to the following three questions:

1. Am I treated with dignity and respect by *everyone* I encounter at Upstate?
2. Am I given the knowledge, tools and support I need in order to make a contribution to Upstate *that brings meaning to my life?*
3. Has someone at Upstate noticed the contribution I've made?

I didn't invent these questions and they are not fluff or psychobabble. They are the guiding principles of Mr. Paul O'Neill, former Treasury Secretary of the United States and longtime CEO of ALCOA (a multi-billion dollar aluminum corporation). It is his strong conviction, confirmed by bottom line results over recognized several decades, that the best outcomes are achieved when staff are treated with dignity, get fulfillment from their work and are for their efforts. If it works for the business of aluminum making, it must work for the business of people caring.

Ask yourself these three questions. Can you say yes to all of them? I want to work for a hospital where the answer is yes 100% of the time. I hope that others share this goal and will work with me to help achieve this.

Wishing you, and all who bring meaning to your life, a joyous holiday season.

Wishing us all a happy and healthy new year.

## UPSTATE UNIVERSITY HOSPITAL WELCOMED DNV ACCREDITATION ON OCTOBER 8-11, 2013

Here is the summary of our CMS survey findings. As you will see some findings are specific to providers (highlighted in red), some relate to other staff, and others apply to the facility.

- Quality Management System: control of documents at department level. This finding is related to consistency of department level documents and the ISO quality management system
- Performance Data: Did not have practitioner quality data in mid level files yet. We have started this process for the providers as that was a citation the previous year
- **History and Physical: blanks in documentation and recent addition to process (attestation statement) that not all staff could speak to**
- Staffing Management: orientation of different categories of staff is confusing at best- needs to be streamlined
- Medication Management: review of orders, use of protocols, unsecured medication cabinets
- **Surgical Services: Operative report missing documented elements**
- **Anesthesia Services: completion of Pre anesthesia assessment, documentation blanks pre and post assessments. Requested and granted appeal regarding completion of assessment by non anesthesia provider as this was validated by anesthesia attending prior to surgery**
- Patient Rights: "Important Message from Medicare" not in medical records admission and/or discharge
- Patient Rights: Advance Directives process not clear to all levels of staff
- **Restraint/Seclusion: order clarification as incorrect orders were ordered**
- Infection Prevention and Control: clean /dirty questions- ripped chair, taped door knob, nitrogen cylinders covered with protective wrap that was not cleaned between cases, toilet paper storage
- **Medical Records: dating, timing, legibility**
- Life Safety Management: Fire extinguisher on helipad, fire doors, smoke alarms not audible
- Safety Management: no signage on door to state biohazard waste, mold on wall in physical plant areas



### Welcome New Medical Staff Members & Advance Practice Clinicians

Rajamani Battula, MD	Anesthesiology
Theresa Baxter, NP	Anesthesiology
Mark Cady, MD	Anesthesiology
Chun-Huai Chao, MD	Anesthesiology
Vandana Sharma, MD	Anesthesiology
Edward Robison, DDS	Dental Surgery
Nicole Gero, MD	Emergency Medicine
Marcie Barbato, NP	Family Medicine
Andrea Berg, MD	Medicine
Albert Nayeri, MD	Medicine
Erin Hill, MD	OB/GYN
Kathleen O'Brien, CNM	OB/GYN
Rajeev Seth, MD	Ophthalmology
Joseph Concilla, DPM	Orthopedics
Jaclyn Ireland, PA	Orthopedics
Harleen Sidhu, MD	Pathology
Anthony Weiss, MD	Psychiatry
Katherine Walia, MD	Psychiatry
Lauren Warren, PhD	PM&R
Patrick Shin, MD	Radiology
Brian Burgoyne, MD	Radiology
Adriane Arnold, PA	Surgery
Michael del- Rio, MD	Surgery
Aiav Jain, MD	Surgery
Edward Yee, MD	Surgery
Akram Al-Theblah, NP	Urology

## A MESSAGE FROM THE PHARMACY

Hydrocodone/acetaminophen combination tablets (Lortab/Vicodin/etc) are no longer being manufactured with 500mg of acetaminophen. Instead, only tablets containing 325mg of acetaminophen are being produced and will be available. This is part of an overall effort to reduce risks for acetaminophen overdosing.

As such and with approval by the Pharmacy and Therapeutics Committee, pharmacy will begin to substitute orders for Lortab 5mg/500mg with Lortab 5mg/325mg. This will likely start in the coming week as we exhaust our available supply of Lortab 5mg/500mg. Furthermore, we will plan to remove Lortab 5mg/500mg from Webcais.

Any questions can be directed to Christopher Miller, Pharm.D., BCPS Associate Director of Clinical Pharmacy Services  
[millechr@upstate.edu](mailto:millechr@upstate.edu)

Epic will become our EMR for the Downtown Campus on March 1, 2014. From that point forward, all documentation, orders and billing will be done using Epic. You must be trained to use the inpatient Epic system and will not be able to participate in patient care without this training.

Training will occur in January and February. There are 2 main tracts for training:

- If you are ambulatory trained already, you will need to complete a 6 hour class.
- If you do not have ambulatory training, you will need to complete a 12 hour course (spread over 3 classes)

Within each tract, there are 2 versions of the courses- 1 for non-surgeons and 1 for surgeons.

To schedule yourself, please go to the Epic website from any hospital computer [epic.upstate.edu](http://epic.upstate.edu). From there, either go to the provider or the training areas and look for inpatient provider training. The direct link is <http://epic.upstate.edu/intra/training/inpatient-training/uh-provider.php>. Choose the appropriate courses to see the available dates and times and then click on the class you want to complete the sign up. If you are ambulatory trained- there is only 1 course to sign up for. If you have not gone to Epic training in the past (at this hospital) you will need to sign up for 3 classes. Finally- please note there are pre-requisites for each course that you must complete.

### FAQs:

- What if I have a question about courses or signing up? We have set up a help line 464-epic
- What if I won't be seeing a patient in the hospital until next September and won't remember my training? We will be teaching Epic year round (although not with as many courses). You can delay your training until before you need to take care of a patient in the hospital (you will need to make sure there is a class you can sign up for). Please note, however, you will not be allowed to do any clinical work without training after March 1- If I you have an unexpected patient that arrives before your training, you will need to find a colleague to take over their care. Also please note, If there is any chance you will need to be in the hospital before August, please train now. we will be training Community Campus physicians and new residents and may not have available training times for you.
- What if I have used Epic elsewhere? You will still need to complete the full course at this time.
- I am an ambulatory physician and never have inpatients. What do I need to do? Likely you do not need additional training. Some clinical areas bridge outpatient and inpatient areas such as infusion area and you will need limited training for that. Please call the help line to find out what you must do.
- I only see patients at Community, what do I do? Please do not sign up at this time. This period is for UH providers. We will announce CC training in the coming months. If you sign up now, we won't have enough spots for the UH providers.

**PLEASE SIGN UP AS SOON AS POSSIBLE!!!!**

Space and times are limited- if you want to have the most flexibility finding appropriate times, you need to sign up NOW!!!

As always feel free to contact me with any questions at [seidbern@upstate.edu](mailto:seidbern@upstate.edu) or (315) 464-7507

### MEC MEMBERS

**Bettina Smallman, MD;** Medical Staff President, Chair, Medical Executive Committee (Pediatric Anesthesiology)  
**Mitchell Brodey, MD;** Medical Staff Vice-President (Medicine)  
**Robert Kellman, MD;** Medical Staff Vice-President (Otolaryngology)  
**Satish Krishnamurthy, MD;** Medical Staff Treasurer (Neurosurgery)  
**Colleen E. O'Leary, MD;** Medical Staff Past President (Anesthesiology)

**MEMBERS AT LARGE**  
**Sharon Brangman, MD;** (Medicine)  
**Tamer Ahmed, MD;** (Pediatric Surgery)  
**Timothy Creamer, MD;** (Medicine)  
**David Halleran, MD;** (Colo-rectal Surgery)  
**Leslie Kohman, MD;** (Thoracic Surgery)  
**Kara Kort, MD;** (Surgery)  
**Guillermo Quetell, MD;** (Plastic Surgery)  
**Irene Sills, MD;** (Pediatric Endocrinology)  
**Mike Sun, MD;** (Orthopedic Surgery)  
**Zulma Tovar-Spinoza, MD;** (Neurosurgery)

**APC ELECTED MEMBER**  
**Lisa Cico, NP;** (Surgery)

### EX-OFFICIO, NON VOTING MEMBERS

**Nancy Daoust, MS, FACHE;** Interim Chief Administrative Officer, Upstate University Hospital at Community General  
**Gregory Eastwood, MD;** Interim President, SUNY Upstate Medical University  
**Beth Erwin, CPCS, CPMSM;** Director, Medical Staff Services  
**Sarah Fries, NP;** Associate Director of Nursing for Advanced Practice Services  
**William Grant, EDD;** Interim Associate Dean for Graduate Medical Education  
**Bonnie Grossman, MD;** Associate Medical Director (Emergency Medicine)  
**John McCabe, MD;** Chief Executive Officer (Emergency Medicine)  
**Regina McGraw, JD;** Senior Managing Counsel  
**Katie Mooney, RN, MS, NEA-BC;** Chief Nursing Officer  
**Paul Seale, FACHE;** Chief Operating Officer

**AD HOC, NON VOTING MEMBERS**  
**Robert Carhart, MD;** Chair, Credentials Committee (Medicine)  
**David Duggan, MD;** Medical Director and Dean, College of Medicine, SUNY Upstate Medical University; (Medicine)  
**Louise Prince, MD;** Chair, CQI Committee & Chief Quality Officer (Emergency Medicine)

<mailto:askmec@upstate.edu>