06.22.2016

FROM THE DESK OF: Anthony P. Weiss, MD, Chief Medical Officer,

Associate Dean for Clinical Affairs, Upstate University Hospital



### **Changes to Moderate Sedation Documentation**

Applies to All Physicians

CM C-16 Guidelines for Use of Moderate Sedation and Analgesia

http://www.upstate.edu/policies/documents/intra/CM C-16.pdf

Moderate Sedation Informational

At our last DNV site visit, University Hospital (UH) received two citations relating to the provision of moderate sedation. The first citation addressed medication dosages for moderate sedation cases that were far in excess of those in Lexi-Comp. The second citation noted lack of discharge orders for moderate sedation patients. The remediation plan accepted by DNV includes the development of Drug Administration Guidelines for Moderate Sedation. These were developed by a multi-disciplinary team based on drug data-bases used by UH, community standards and current literature. Monitoring of compliance with the drug guidelines is part of the remediation plan. If during the course of a moderate sedation case the proceduralist believes that the medication dosage must exceed that of the guidelines, there must be documentation of an accepted indication for the higher dosage. The credentialed RN monitor will document the reason in the intra-procedure sedation narrator in Epic. There will be chart reviews to demonstrate the presence of discharge orders to address that part of the DNV citation.

Summary of Changes due to DNV Citation:

- Added drug algorithm as Addendum A
- Documentation of the medication and why dosing exceeds recommended dose must occur by Credentialed Monitor
- Provider privileges to administer moderate sedation may be verified via EPriv
- Applies to both campuses

See below for how the physician documents when exceeding recommended dose of moderate sedation and analgesia along with information regarding running reports.

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# Clinical Documentation Improvement (CDI) Initiative and Provider Handbook Applies to All Physicians

CDI Informational The Upstate CDI Program works to insure that the documentation and subsequent coding related to hospitalized patients is optimized and appropriately risk stratifies the patient's hospitalization. Many of the metrics in which physicians, divisions, departments and hospitals are graded on are risk stratified based on risk of mortality and severity of illness determinations based on risk models. Capturing specific patient co-morbidities with proper documentation especially when present at admission, will properly risk stratify our patients and compensate our observed mortality, length of stay, etc. with what would be expected based on severity of illness.

As July approaches, we have the task of educating a new group of interns. The July effect, an observed increase in mortality during the month of July, which is seen in academic medical centers including Upstate, likely has more to do with this new group of primary documenters that with any observed mortality increase and reveals the importance and power of documenting to the CDI standard.

Therefore the included handbook provides a primer on CDI and the most important co-morbidities to capture. All faculty should instruct their interns and residents to use this handbook to insure that their documentation captures these co-morbidities appropriately.

I want to thank Dr. Glidden for his diligent work in this area and for the effort he has dedicated to creating this superb reference.

### **Body Fluids: Cell Count and Differential** Applies to Downtown Physicians

Body Fluids Informational Body fluid reporting will be revised at the Downtown Campus, as of June 27, 2016.

- Total nucleated cell (TNC) count will be reported instead of WBC.
- The **differential** will include tissue macrophages and lining cells (synovial, mesothelial, ependymal, leptomeningeal) in addition to white blood cells.
- New six-part differential:

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- o % Neutrophils/Bands
- o % Lymphocytes
- o % Eosinophils
- o % Basophils
- o % Monocytes/Macrophages
- o % Lining Cells
- Unusual and less frequent nucleated cells (malignant cells, nucleated RBCs, bronchial cells and other tissue cells) are reported in a comment.

<u>Background</u>: Automated cell counting instruments and manual cell counting methods do not reliably separate WBCs from other nucleated cells. In addition, it is often difficult to differentiate monocytes from macrophages or even from lining cells. Hence, the new reporting will be more consistent.

#### Methodology:

Manual cell count in a hemocytometer (CSF, synovial fluid)

Automated cell count on Iris (other body fluids)

Microscopic review and differential of a Wright-stained cytospin slide of all body fluid samples. As the cytospin concentrates samples, it is possible to do a differential, even if the cell count is zero.

#### Normal Ranges:

	TNC	Neutrophil/Band	RBC
CSF, 0-30 days	$<27/\mu L$		0
CSF, 31 days - 16 years	$<7/\mu L$		0
CSF, >16 years	$<5/\mu L$		0
Synovial Fluid	$<200/\mu L$	<25%	
Serous Fluids	<500/μL	<25%	

If you have any questions, please contact Dr. Katalin Banki, Director of Core Laboratory, at 464-6790.

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### **Folate Assay**

### **Applies to Downtown Physicians**

Starting June 21, 2016, the Folate Assay will be standardized to an upgraded WHO Reference Material (IS 03/178).

- The new standard will ensure more consistent results between different methods.
- Patient results will be lower by 1.0 1.5 ng/mL. The change is more significant in the lower range, where the decrease can approach 50%.
- New normal range: >4.77 ng/mL
- Numerical values will be reported between 2-20 ng/mL.

If you have any questions, please contact Dr. Katalin Banki, Director of Core Laboratory, at 464-6790.

### **UpToDate Anywhere**

### Applies to All Physicians

UpToDate Informational

Folate Assay

Informational

Upstate has invested in UpToDate Anywhere. Now, you can get immediate access to UpToDate whenever and wherever you need it.

UpToDate includes more than 10,500 topics and more than 20 specialties; a drug database (in partnership with Lexicomp®); more than 1,500 patient education topics; over 28,000 graphics; and links to more than 400,000 references.

Take the time to register for UpToDate Anywhere today and gain access to additional benefits!

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- Free Mobile App for your iOS<sup>®</sup> or Android<sup>™</sup> smart device
- Easy access to UpToDate remotely from any computer anywhere with internet access
- Free continuing education credits (CME/CE/CPD) when you research a clinical question
- Bi-weekly clinical update with selected What's New and Practice Changing UpDates

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#### Get Registered— it's easy:

Simply log in to UpToDate from our network in one of the following ways:

- 1. Navigate to <a href="www.UpToDate.com">www.UpToDate.com</a> from any computer or device connected to Upstate's network and click the Log in/Register link in the upper right hand corner.
- 2. Access the Health Science Library and select UpToDate under quick links.
- Off-campus Access is available through the Health Science Library. When you
  access UpToDate under quick links you will be required to enter your Upstate
  credentials.

Your account is linked to your affiliation with. To keep your account active, simply login through our institution's network at least once every 90 days to maintain benefits.

#### **For Support Contact:**

- Library Service Desk: 464-7091
- UpToDate Customer Service:
  - o Email <u>customerservice@uptodate.com</u>
  - o United States and Canada 1-800-998-6374
  - o All other countries 1-781-392-2000

Expert Trainers from Uptodate will be at Upstate June 28th and June 29th to introduce Uptodate Anywhere. Trainers will focus on the Uptodate App, and the enhanced CME interface. Classes are open to all.

Downtown Campus Training Schedule 6/28 8am-9am Class in ET12405a 11am-1pm Table 3:30pm-4:30pm Class in Lib 220

Community Campus Training Schedule 6/29 9-10am Class in the Computer Lab/Library 11am-1pm Table in Cafeteria 2pm-3pm Class in the Computer Lab/Library

Please contact Olivia Tsistinas <u>tsistijo@upstate</u> if you would like to schedule a training outside of the schedule above.

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### **Outstanding Physician Comments**

Applies to All Physicians

Comments Informational Each week we receive written comments from our patients regarding the care we provide within the Hospital. Below are this week's comments from grateful patients receiving care on the units and clinics at Upstate:

Emergency Dept @ Community Campus— Dr. Swaby is a compassionate, informational, empathetic, dedicated doctor who truly cares.

He is a wonderful doctor.

West Inpatient Psychiatry - Dr. Reyes was fantastic.

**Emergency Department** – Dr. Blue was calm, really concerned.

8G- Dr. Sitaraman kept me informed daily as to the neurologist findings.

11G - Dr. Demer went above and beyond to make sure we did the right thing.

**Upstate Pediatrics** – Dr. Kresel – we love her!

Dr. Sisskind and her staff leaves us with peace of mind.

University Center for Vision Care— Dr. Swan was caring and expert.

**Breast Imaging** – Dr. Adhikary and Dr Akhtar explained everything; great bedside manner. **Midwifery Clinic** – Dr. Millar always impresses me.

**Upstate Golisano After Hours Care** – Dr. Kaul came to see my son right at registration to order an x-ray. Very impressed to see that and very pleased. Loved the care she gives to her patients.

Dr. Jones – very informative.

**Upstate Outpatient Surgery Center –** Dr. Swan is a great doctor.

Breast Care Center – Dr. Albert was incredibly kind and thorough in explaining my condition and treatment options. He made a very strong, positive impression on me.

**Upstate Urology** – Dr. Makhuli is very caring and professional.

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