

# CMO REPORT

FROM THE DESK OF

Amy Tucker, MD, MHCM, Chief Medical Officer, Upstate University Hospital  
Associate Dean for Clinical Affairs, College of Medicine

# UPSTATE

UNIVERSITY HOSPITAL

February 6, 2023

## 2022 Annual Education & Flu Vaccination Reminder

Please be sure you have completed your 2022 Annual Education and have received your flu shot. Missing these two items may put your privileges at risk.

### 2022 Annual Education - REQUIRED by 12/15/22

The Upstate 2022 Annual Education for credentialed Medical Staff is available online at: [https://www.upstate.edu/medstaff/forms/annual\\_education.php](https://www.upstate.edu/medstaff/forms/annual_education.php).

The updated syllabus and post-test are both housed on this site; a score of 80% or greater is required to pass.

If you have questions about the education content, would like to leave feedback, or need your test reset to try a second time, please call 315-464-5733 or email us at [medstaff@upstate.edu](mailto:medstaff@upstate.edu).

### 2022 flu vaccination - REQUIRED by 12/01/22

Proof of vaccination must be provided to Employee/Student Health.

To submit your information, you may upload it to the Employee/Student Health Portal at: <https://eshportal.upstate.edu/>.

If you have not yet been vaccinated for flu in 2022:

- You may receive a seasonal flu vaccine at Employee Health at either campus if you have an Upstate Badge ID. Appointments can be made through Employee/Student Health portal.
- You may also choose to get a flu shot at the Outpatient Pharmacy.

Please check with Employee Student Health ([ESHealth@Upstate.edu](mailto:ESHealth@Upstate.edu)) regarding your vaccine information if you believe that they should already have received it.

Please stay out of trouble! Make sure you have these two items complete!

## Fire Safety Education

By Beth Erwin

DNV is requiring that Fire Safety Training and Education be more detailed than ever. It must include all personnel, including clinicians, in perioperative and procedural areas. In addition to the attached educational PowerPoint, drills will need to be completed in all the ORs and procedural areas.



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## Upstate Awarded \$1.1 Million to Establish a Suicide Prevention Center

By Darryl Geddes

Upstate Medical University has been awarded \$1.1 million in federal funds to establish a Suicide Prevention Center, an umbrella center under which its current programs and outreach can be coordinated and supported.

The Upstate Suicide Prevention Center would provide better access to effective prevention and treatment strategies for high-risk youth and young adults in Central New York. Its primary mission would be to create and foster a continuum of care, from primary prevention to case identification to early intervention to recovery-based treatment.

The Suicide Treatment Center, which will be led by Robert Gregory, MD, professor of psychiatry and behavioral sciences, is the newest of Upstate's ground-breaking initiatives in this area.

In 2017, Gregory started the Psychiatry High Risk Program (PHRP) for suicidal youth and young adults (ages 14 through 40 years), an innovative program focused on transformational healing and recovery, using an evidence-based treatment called dynamic deconstructive psychotherapy, which was also developed at Upstate. The PHRP was recently awarded the designation as "a best practice in suicide prevention" by the national Suicide Prevention Resource Center.

Some common conditions addressed through the PHRP include depression, anxiety, PTSD, addictions, eating disorders, bipolar disorder, and borderline personality disorder. Treatment is based upon the most up-to-date understanding of the causes of these disorders, including both neurocognitive and psychosocial contributions, and aims towards transformational healing and building inner resilience leading to recovery. For more information, call 315-464-3117.

## Pharmacy Shortage and Backorder Updates

By Peter Aiello and Joe Burczynski

Recent pharmaceutical supply chain disruptions have increased national drug shortages dramatically, which can compromise or delay medical treatment and increase the overall risk of medication errors. Raw material shortages, manufacturing and quality problems, transportation delays and low profit margin product discontinuations have become routine.

The Chief Medical Officer and Upstate Pharmacy leadership are seeking to keep our Upstate clinicians informed about the most critical drug shortages affecting our organization and offer substitutions whenever possible. Please see the information below. We will provide updates as they are available.

| Drug                      | Description  | Possible Product Alternative Recommendations |
|---------------------------|--|--|
| <b>CURRENT BACKORDERS</b> |  |  |
| Ketamine                  | Backorder across all strengths available. Pharmacy is receiving sporadic shipments of various vial sizes currently. Depending on | Benzodiazepines<br>Barbiturates<br>Propofol  |

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|   |  |  |
|---|--|--|
|   | hospital-wide usage and drug availability there may be times when pharmacy may not be able fulfill orders for this agent and alternative therapy will need to be selected.   | Etomidate<br>Opioids   |
| Albuterol 5mg/1mL (concentrated) vials and 2.5mg/0.5mL ampules        | Backordered from the sole-source manufacturer, Nephron Pharmaceuticals. Resolution delayed, currently unknown.   | Small quantity of 2.5mg/0.5mL ampules available for hyperkalemia patients. Utilize 2.5mg/3mL (standard concentration) albuterol for all other uses at this time. |
| BCG vials   | Backordered, small sporadic releases from manufacturers on an inconsistent basis.  | None   |
| Lidocaine with epinephrine  | Backordered across all strengths available. Some backorder releases have shipped from manufacturers, contact the pharmacy for current inventory available for use.<br><br>Please be patient when obtaining vials – currently not loaded to most Pyxis machines to conserve supply. | Lidocaine without epinephrine<br>Bupivacaine with epinephrine  |
| Epinephrine 1mg/10mL bristojet syringes (emergency syringes)          | Backordered, currently have supply to stock emergency carts. Should any changes occur, additional information will be provided by pharmacy through resuscitation committees.   | <b>If necessary</b> – As has been utilized previously – epinephrine vials + 10mL syringe and diluent.  |
| Sodium bicarbonate bristojet 50meq/50mL syringes (emergency syringes) | Backordered, currently have intermittent supply coming into the pharmacy.  | <b>If necessary</b> – Substitute sodium bicarbonate 50meq/50mL vials instead of syringes.  |
| <b>RESOLVED BACKORDERS</b>  |  |  |
| Antibiotic suspensions  | Pharmacy able to obtain most antibiotic suspensions (amoxicillin, amoxicillin-clavulanate, cephalexin, etc.). Some outpatient/chain pharmacies may still have supply issues for outpatient prescriptions.  | If concern that patient may not be able to obtain an outpatient prescription, please contact the community pharmacy prior to sending a prescription.             |
| Iohexol (Omnipaque) 240mg vials                                       | Resolving, GE Healthcare allocating supply to hospitals at this point.   | Utilize different vial sizes and working with our colleagues in Radiology to conserve supply.  |

## Clinical Documentation Improvement (CDI) Tip for February 2023

By the CDI Physician Advisory Group

Query Response & Follow Up - Query response is best achieved by ensuring documentation is updated in the medical record through updating the most recent Progress Note or Discharge Summary. CDI has a dedicated query escalation procedure followed by each CDI Specialist and includes our CDI Physician Advisors to offer both an opportunity to bridge the gap between clinicians and ensure timely response to CDI queries. Please see the attached tip sheet for more information. For questions, please contact the CDI Hotline at 315-464-5455.

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## Primary Care Education Session

By Darcy DiBiase

The next Primary Care Task Force Session will be held online on Wednesday, February 8, from **12:15 pm – 1 pm**. Dr. Robert Carhart, Associate Professor of Medicine, will present “Keeping Heart Failure Patients Out of the ED”.

To access this presentation, please visit:

<https://upstate.webex.com/upstate/j.php?MTID=mdc00c2970fe5beaa8db514ee57dc9009>.

The Primary Care Task Force Education sessions are held virtually on the second Wednesday of the month, from 12:15 pm – 1 pm. Future presentations include:

- April 12: Savio John, MD – Patients with Cirrhosis
- May 10: Daniel Thomas, MD, MPH – Update on Management of Melanoma and Other Skin Cancers

## Coffee with the CMO

All Upstate clinicians are invited to join me for “Coffee with the CMO” on Friday, February 10, from **7:30 am – 8:30 am**, in the **Upstate Cancer Center Conference Rooms (C1076 A/B/C)**. An open Q&A will follow. Coffee and breakfast snacks will be provided. Mark your calendar and email Darcy DiBiase, Primary Care Liaison, at [DiBiaseD@upstate.edu](mailto:DiBiaseD@upstate.edu) to reserve your spot!

## Welcome New Clinicians!

Please join me in offering a warm welcome to the following new clinicians at Upstate Medical University:

### ANESTHESIOLOGY

Elizabeth Desimone, NP

### NEUROSURGERY

Cynthia Pyrtle, NP

### OTOLARYNGOLOGY

Amy Wilson, NP

### EMERGENCY MEDICINE

Lisa Vignogna, MD

### OB/GYN

Maximilian Klein, MD  
Jocelyn Peet, NP  
Sarah Schoch-Storie, MD  
Michelle Auerbach, DO

### PEDIATRICS

Robyn Borsuk, MD  
Gregory Goldstein, MD

### MEDICINE

Alexis Messak, NP  
Kara Nave, NP  
Tuncay Delibasi, MD  
Sarosh Janjua, MD

### ORTHOPEDICS

Freddie Edelman, DPM

### PSYCHIATRY

Emily LePage, NP

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## Exceptional Teacher Recipient for February 2023

By Dr. Lawrence Chin



Dr. Jennette Ball, Assistant Professor of Cell and Developmental Biology and College of Health Professions (CHP) – Physical Therapy is the February 2023 recipient of the Exceptional Moments in Teaching recognition.

The Norton College of Medicine recognizes exceptional teachers with the monthly [“Exceptional Moments in Teaching”](#) program. Honorees are selected via student assessments from courses and clerkships.

Recognized teachers – including medical faculty, residents, nurses and other educators – are those who challenge students and provide an exceptional learning experience. Congratulations Dr. Ball!

Comments from Dr. Ball’s students:

*“Dr. Ball is an excellent teacher and makes very complicated material simple to understand. I like how she reduces content to very basic levels and then builds it up to more complicated levels. I also appreciate that she frequently checks for understanding before moving in between topics, as it can be easy to lose students if there are not opportunities to ask questions.”*

*“Dr. Ball was very accommodating about meeting with me outside of class and her regular office hours when I needed assistance. She took a lot of time to explain material to me, help me with study tips and resources, and overall was just an excellent educator who played a critical role in my understanding of course material.”*

*“Dr. Ball makes medical school fun. I attend every session that she runs, and my knowledge grows because of her. Phenomenal professor!”*

*“She makes the topics so easy to understand. I love that she breaks down the lectures into shorter videos, making it easier to focus on the objectives separately. She is clear with her language, and I love that she includes the root words to help us better understand the structures and their functions.”*

## Outstanding Physician Comments

Comments from grateful patients receiving care on the units and clinics at Upstate:



**Adult Medicine:** Dr. Lynn Cleary has the best combination of attributes desirable in a doctor. She’s knowledgeable – and just as important, caring, and has been so for me and my wife for 40 years! She’s a real asset.

**Dental Service:** Dr. Patrick Smith – so patient and very kind.

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**ED at Community:** Dr. Hannah Charland – professional, kind, friendly, always looked at me when we talked. Dr. Risa Farber-Heath was so considerate and listened and showed genuine care. Dr. Risa Farber-Heath was so compassionate and truly listened to my concerns. Dr. Eric Hojnowski – extremely competent, knowledgeable, and caring regarding my issues.

**ENT at Community:** Dr. Mitchell Gore – very kind.

**Family Medicine:** Dr. Clyde Satterly has been my doctor for years, since when he had his own practice. He's the best doctor in the area. He knows me so well and remembers everything you tell him. Dr. Rupali Singla is very attentive and thorough.

**Family Medicine at Community:** Dr. Bushra Atta Ur Rehman takes the time with each patient and is very detail oriented which is excellent for a doctor. Excellent experience with Dr. Maryanne Arienmughare – attentive, genuine, and comprehensive addressing all of my questions. Dr. Maryanne Arienmughare – wonderful! Would highly recommend this practice. Dr. R Eugene Bailey listened and communicated well. Dr. Igor Kraev is one of the best doctor's I've ever had! Very thorough, pays attention to details, and truly cares about his patients. Dr. Sana Zekri is the best! Takes time to explain everything you ask him. Very personable and instills trust. Dr. Sana Zekri is very caring and thorough, always does a great job listening to patient concerns, and always is available for questions. Dr. Sana Zekri – great, patient, thorough, excellent! I feel very fortunate to be a patient in this practice. Highly recommend!

**GYNONC MI:** Very satisfied with Dr. W Douglas Bunn. He is a kind and caring man. Dr. W Douglas Bunn – caring approach. Dr. W Douglas Bunn – best care! Dr. Mary Cunningham is professional and precise and a top oncologist. So lucky to have her. Thank you!! Would feel comfortable recommending Dr. Mary Cunningham to a friend. Dr. Mary Cunningham – explains medical situation well, shows concern, is most competent. Dr. Mary Cunningham – reassuring. Dr. Mary Cunningham – great! Dr. Mary Cunningham – thorough and patient. I have 100% trust.

**Inclusive Health Services:** Dr. Angana Mahapatra is an excellent doctor. Dr. Angana Mahapatra – caring and very concerned of her patients.

**Joslin Center for Diabetes:** Dr. Runa Acharya looked up my test results and ordered additional blood work. Dr. Barbara Feuerstein – patient, concerned, supportive, exceptional physician. Dr. Robert Izquierdo is always kind and gentle, he explains everything. I always feel like I am his only patient as he never seems rushed but listens to what I am saying. I wish all doctors were like him.

**Multidisciplinary Programs Can. Ctr.:** Dr. Kristin Kelly listens to concerns, explains rationale for proposed treatments, details risks and expected outcomes. Dr. Gloria Morris is a gem. What could be a difficult topic to understand, genetics, she makes easy to understand with examples, clarifying explanations and warmth.

**Nephrology Clinic:** Dr. Ramya Bhargava was very kind and helpful. Dr. Syed Bukhari – knowledgeable and seemed to show genuine concern. Would recommend him to others. Dr. Kriti Devkota is always personable, highly professional, thorough and always demonstrates a strong integrity. Dr. Kriti Devkota really takes the time to explain lab details and is

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very compassionate about my health. I'm very pleased with **Dr. Kriti Devkota**.

**Neurology CC:** **Dr. Shahram Izadyar** gave us the full time.

**Pediatric After Hours at Community:** **Dr. Marissa Smith** was very good.

**Pediatric Cancer Center:** **Dr. Andrea Dvorak** has been my doctor and always takes her time in answering my questions or my mom's questions. Very caring in her work. **Dr. Andrea Dvorak** is an amazing doctor that is extremely knowledgeable, relatable, and caring.

**Pediatric Multispecialty Clinic:** **Dr. Robert Hingre** was very personal, addressed him and centered the visit around his needs and understanding, interacted and stayed engaged with him. Felt like an uncle with their nephew.

**Pediatric Surgery:** **Dr. Jennifer Stanger** is always very professional, compassionate and caring. We are more than comfortable with her advice. She is an excellent practitioner, we can't say enough about her.

**Pulmonology Clinic:** **Dr. Birendra Sah** – most impressed that he was aware of my background and was obviously extremely competent. I hope to continue to work with him as needed.

**Rheumatology Clinic:** **Dr. Hiroshi Kato** – very kind and concerned, available for any problems, and follows up like he says he will. Wonderful! **Dr. Hiroshi Kato** always treats you with respect and as if you were his only patient. For the most part, I only trust him for my health care. **Dr. Patrick Riccardi** – first time I felt comfortable with a doctor, explained everything so I understood first time, I was actually looked at and touched to see if any inflammation, great doctor! I am always impressed with **Dr. Jianghong Yu's** compassion for my physical and emotional care. **Dr. Jianghong Yu** is very nice and always can explain my situation clearly. She helped understand my health issue and the best ways to improve my health condition.

**Surgery-General:** **Dr. Michael Archer** was very succinct, forthright, and approachable.

**Surgery – UH LL022:** **Dr. Moustafa Hassan** is an excellent physician with a great "bedside manner". **Dr. Amie Lucia** is always pleasant, informative, and answers all questions.

**Surgical Subspecialties at CC:** I have enjoyed being a patient of **Dr. Timothy Shope**.

**SUNY Upstate – Virtual:** **Dr. Gennady Bratslavsky** – excellent care! **Dr. Joseph Jacob** has a very good bedside manner. He puts you at ease and explains things clearly. He listened to my questions and answered them clearly. He treats me with respect. I was extremely impressed by the care and engagement shown by **Dr. Carlos Muniz**. He also called our other doctor to ensure consistency.

**UHCC – Neurology:** **Dr. Robert Beach** is great. I always feel like I'm in good hands and trust that he is doing everything he can to help me. **Dr. Anuradha Duleep** is one of the best doctors that I have seen in the twelve years that I have been dealing with a condition that at this point has no name. She listened to everything my wife and I had to say, admitted

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when things were outside of her area of expertise, is willing to help me find what is going on, offered valuable insights into what she believes may be going on, is going to be working with my current healthcare team to help find solutions, is sending me to people that she thinks may benefit my care but most of all she legitimately cares. That showed when on Sunday she left a message below the lab reports to explain what the lab tests were showing. I went into that appointment expecting little but came out with so much more. **Dr. Anuradha Duleep** is an outstanding physician on many counts. One of Upstate's, if not Central New York's, best!

**University Cardiology:** **Dr. Robert Carhart** is the best. If a Cardiologist knows who Redd Fox is, then he is ok in my book.

**University Center for Vision Care:** **Dr. Samuel Alpert** - consummate professional. **Dr. Robert Fechtner** was very good about explaining the procedure and answering questions. **Dr. Stephen Merriam** is excellent. He included her in her care and answered her questions in a way she could understand. I love **Dr. Stephen Merriam's** interaction with his patients. We've followed **Dr. Stephen Merriam** (and his father). They work so well together and seem to genuinely care for their patients. Prior to being **Dr. Preethi Ganapathy's** patient, having glaucoma and cataracts, I had trouble driving at night. Consequentially, when longer nights arrived, I tried to get home before it got dark. Cataract surgery and proper medications improved my night vision and eye pressure, resulting in a new life after dark. Thanks to **Dr. Preethi Ganapathy** for her diagnosis and care. **Dr. Robert Swan** is amazing. You can really tell that he cares about his patients' well-being. **Dr. Robert Swan** is the best! **Dr. Robert Swan** is a great doctor. He always shows genuine concern regarding my eye condition.

**University Geriatricians:** **Dr. Andrea Berg** – personable, explains things thoroughly, answers my questions, and is very compassionate. **Dr. Andrea Berg** is the most relatable, respectful, and compassionate doctor I have ever met with. My husband, who is a mental health professional and was with me, wholeheartedly agrees. She took the time I needed and had several very helpful suggestions. She is just the best! **Dr. Vikrant Tambe** is caring, concerned, well informed, and among the best physicians I have had the privilege to know.

**University Internists:** **Dr. Tingyin Chee** – listens, suggests, helps me choose the right treatment, explains why she feels the correct treatment for me. **Dr. Vincent Frechette** – extremely knowledgeable and kind. **Dr. Vincent Frechette** is an extremely good listener and always explains any procedures or plan of care. **Dr. Vincent Frechette** really took time to listen to my concerns. Talking with **Dr. Vincent Frechette** during my visit calmed my anxiety. He is a very compassionate doctor. **Dr. Vincent Frechette** is an asset to your practice and he is a gift to the medical community in Central New York. Not only is he a knowledgeable physician, he is also very personable and he is a great listener, making him a well rounded caregiver who connects well to his patients. **Dr. Vincent Frechette** sets the example of what a good doctor should be! I am fortunate that he is my personal physician. **Dr. Vincent Frechette** always impresses me. I feel very fortunate that **Dr. Vincent Frechette** has been and continues to be my primary doctor. I feel that I could not have a better doctor concerned about me and my health. **Dr. Vincent Frechette** was thorough and explained carefully. **Dr. Vincent Frechette** always shows a lot of compassion and concern when I visit his office. I feel he spends enough time with me and answers any questions I may have. **Dr. Vincent Frechette** – the time he takes let's you know that he is focused directly on you and your issues. Professional and personal! I honestly think that **Dr. Vincent Frechette** has been the perfect fit for me and the rare health issues that I have and the challenges diagnosing them and treating them as effective as possible. **Dr. Kaushik Govindaraju** is a warm and confident man. He explains what he is doing and what he is observing. His bedside manner is caring. He asks questions that get to the route of any concerns. Also, I enjoy

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chatting with him about life in general. **Dr. Kaushik Govindaraju** is enormously precious to me. **Dr. Matthew Hess** – very patient and thorough.

**University Pediatric and Adolescent Center:** We are always impressed by **Dr. Joshua Bonville**. We like him for his professionalism, level of care, and his confidentiality. **Dr. Karen Teelin** has always went above and beyond. She is so kind and caring.

**Upstate Brain and Spine Center:** I really like **Dr. Harish Babu's** sense of humor! **Dr. Timothy Beutler** has always been honest and open with us. **Dr. Lawrence Chin**, love him, he understood my problem and listened, gave me great recommendations on how he was going to treat my illness.

**Upstate Pediatrics:** **Dr. Jaclyn Siskind** is seriously just a gem. I love how personal she is and remembers us. We feel just like family. I am so thankful for just the small talk she had with my daughter – it meant the world to us showing she cared.

**05A: Dr. Crystal Whitney** always visited.

**06A: Dr. Ilona Chepak** was very kind, attentive, and compassionate (as well as professional) during my stay.

**6<sup>th</sup> Floor at Community Hospital:** A special thanks to **Dr. Timothy Damron's** excellent surgical skills, wealth of knowledge and extraordinary care as I continue this journey to become cancer free. I'd also like to thank **Dr. Mitchell Brodey** for his persistence in tending to the matter of my infection. It takes a team and I'm fortunate enough to have a great one!

**08E: Dr. Joseph Jacob** – concern and care was excellent!

**09F: Dr. Grahame Gould** was amazing in every way. I have seen many doctors through the years and he is definitely one of the best.

**11E: Dr. Jennifer Stanger** – very impressive, gave great detail and explanations, knowledgeable and respectful.

~Amy

thank you

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## CDI Tip of the Month – CDI Query Response & Follow Up

Query is a communication tool or process used to clarify documentation in the health record for documentation integrity and accuracy of diagnosis/procedure/service code(s) assignment.

**Queries may be answered by Nurse Practitioners, Physician Assistants, Residents, Fellows, or Attending Physicians**

*CDI queries at Upstate are always directed to an Attending Physician who has been responsible for care of the patient during the inpatient encounter.*

### Where to Find a Query

**Attending Physicians:** queries are located in Epic In-Basket

**NP, PA, Residents & Fellows:** queries are located in the Epic Sidebar Activity

*If you cannot locate a query, please reach out to a CDI Physician Advisor or Specialist for assistance.*

### CDI Query Follow Up Practices

*Query follow up is a standardized process for consistency and performed in accordance with the CDI Query Escalation Procedure.*

|                               |   |
|-------------------------------|---|
| <b>Business Day 1</b>         | Query is placed, no follow up performed   |
| <b>Business Day 2</b>         | If no response, CDS will Secure Chat most recent provider (NP, PA, Resident, or Fellow) of record to alert there is a query & request response by close of business day   |
| <b>Business Day 3 &amp; 4</b> | If query remains unanswered, CDS will e-mail Attending and any other current providers involved in patient care (NP, PA, Resident, or Fellow) for response, including CDI Physician Advisor & CDI Leadership  |
| <b>Business Day 5</b>         | If no response is received by Business Day 5, Attending of record is issued No Response, including CDI Physician Advisors, CDI Medical Director, and Chief Medical Officer  |
| <b>Retrospective Queries</b>  | For any queries placed after discharge, an e-mail will be sent to Attending of record (NP, PA, Resident, or Fellow will be included if Discharge Summary is not cosigned) to request response. If the provider is unavailable, please e-mail back with an expected date or time frame for response. |

### Query Responses

Responses by Attendings and Nurse Practitioners provided directly on the query are sufficient to satisfy response.  
*Best practice is to update documentation within the medical record.*

Responses by Physician Assistants, Residents, and Fellows must be placed within the medical record to ensure an Attending can review and cosign documentation.

## EXCEPTIONAL MOMENTS IN TEACHING



The Norton College of Medicine recognizes exceptional teachers with the monthly “Exceptional Moments in Teaching” program. Honorees are selected via student assessments from courses and clerkships. Recognized teachers—including medical faculty, residents, nurses and other educators—are those who challenge students and provide an exceptional learning experience.

**Jennette Ball, DC**, an assistant professor of Cell and Developmental Biology and CHP-Physical Therapy at Upstate Medical University is the **February 2023** recipient of the **Exceptional Moments in Teaching recognition**.

### COMMENTS FROM DR. EDINGER’S STUDENTS:

*“Dr. Ball is an excellent teacher and makes very complicated material simple to understand. I like how she reduces content to very basic levels and then builds it up to more complicated levels. I also appreciate that she frequently checks for understanding before moving in between topics, as it can be easy to lose students if there are not opportunities to ask questions.”*

*“Dr. Ball was very accommodating about meeting with me outside of class and her regular office hours when I needed assistance. She took a lot of time to explain material to me, help me with study tips and resources, and overall was just an excellent educator who played a critical role in my understanding of course material.”*

*“Dr. Ball makes medical school fun. I attend every session that she runs, and my knowledge grows because of her. Phenomenal professor!”*

*“She makes the topics so easy to understand. I love that she breaks down the lectures into shorter videos, making it easier to focus on the objectives separately. She is clear with her language, and I love that she includes the root words to help us better understand the structures and their functions.”*



# Fire Safety

## Fire Prevention in the Operating Room and Procedural Areas



Sara LaPointe MSN, RN, CNOR  
January 2023

control group within

the organization or a public fire department.

15.13.3.9.3 Emergency procedures shall be established for controlling chemical spills.

15.13.3.9.4 Emergency procedures shall be established for extinguishing drapery, clothing, or equipment fires.

15.13.3.10 Orientation and Training.

15.13.3.10.1 New operating room/surgical suite personnel, including physicians and surgeons, shall be taught general safety practices for the area and specific safety practices for the equipment and procedures they will use.

# Learning Outcomes

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After completing this activity, the participant will be able to:

1. Identify the locations where a fire may occur
2. Identify the three components of the fire triangle
3. Identify fire prevention interventions
4. Describe the fire risk assessment



# Patients

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## All patients

A fire can potentially occur on or in any patient who enters an OR in which an ignition source is present, and that is essentially all patients.

## Take a Team Approach

# Fire Triangle



Know Your Role in Preventing Surgical Fires

- Ignition source: frequently under the control of the surgeon or the assistant, with a lesser amount of influence by the scrub person.
- Oxidizer: usually under the influence of the anesthesia professional
- Fuel: primarily influenced by the RN circulator, and is also under the influence of the scrub person and the surgeon because they are responsible for draping and the use of sponges and other flammable materials.

# Team Effort

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- Nurses
- Surgical techs
- OB techs
- Surgeons
- Residents
- Medical Students
- Assistants
- Environmental Services associates
- Administration team members



# Fire Prevention Assessment

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- Perform before the start of the procedure during time-out when asking if anyone has any questions or concerns.
- All members of the team participate.
- Think about/discuss:
  - Is an alcohol-based prep agent or other volatile chemical being used preoperatively?
  - Is the surgical procedure being performed above the xiphoid process?
  - Is open oxygen or nitrous oxide being administered?
  - Is an electrosurgical unit, laser, or fiber-optic light cord being used?
  - Are there other possible contributors?

# Ignition Sources

- Anything that provides enough energy to start a fire - visible spark or just heat at a temperature high enough to cause a fire to ignite
  - Electrosurgical unit (ESU)
  - Defibrillator
  - Electrical equipment
  - Argon beam coagulator
  - Power tools (eg, drills, burrs)
  - Laser
  - Fiber-optic light

# Controlling Ignition Sources: Interventions

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- Placement of the bovie pad takes place before the patient is draped on a large muscle mass close to the surgical site.
  - This placement provides for the least amount of resistance in the electrical circuit, as does keeping the active electrode cords from coiling. These actions decrease the heat produced and the amount of power required to accomplish cauterization.
- Storing the ESU pencil in a safety holster when it is not in use
  - This helps to keep the ignition source and the fuel separated and decreases the potential for accidental activation of the active electrode.
- Keeping the surgical drapes or linens away from the activated ESU
  - This helps to keep the ignition source and the fuel separated and decreases the potential for accidental activation of the active electrode.
- Moistening drapes or placing absorbent towels and sponges in close proximity to the ESU active electrode is recommended.
  - Moistening the drapes increases the temperature required for the towels, drapes, or sponges to ignite

# Controlling Ignition Sources: Interventions

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- Keep the ESU active electrode away from oxygen or nitrous oxide
  - Oxygen and nitrous oxide both create an oxygen-enriched environment in which a lower temperature is required to cause ignition.
- Keep the active electrode tip clean
  - Less power is required and the electrode will perform better.
- Use only active electrodes or return electrodes that are manufacturer-approved for the type and model of ESU being used
  - Others may not fit correctly and thus require a higher energy level or may even create sparks at the connection.
- Do not use red rubber catheters or packing materials as protective covers or as insulators on the active electrode tip.
  - Use only approved insulators because the other products may melt or even catch fire during the procedure.
- The active electrode should be activated only when in close proximity to the target tissue and away from other metal objects.
  - These objects could conduct heat or cause arcing, thereby providing the spark to cause a fire.

# Controlling Ignition Sources: Interventions

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- Inspect minimally invasive electrosurgical electrodes for impaired insulation; remove electrode from service if not intact.
  - If the insulation is not intact because when activated, a spark may be created at the point of the break in insulation
- Use “cut” or “blend” settings instead of coagulation and use the lowest power setting for the ESU.
  - they use less power and create less sparking
- Only the person controlling the active electrode activates the ESU.
  - This can help to avoid accidental activation, which may result in a fire away from the surgical site.
- Remove the active electrode from the electrosurgical or electrocautery unit before discarding.
  - When the tip of the device has been removed, these devices cannot cause sparking or remain at an increased temperature that could result in a fire.
- Have water or saline and the appropriate type of fire extinguisher available, in case of a fire



# Controlling Ignition Sources: Interventions

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- Use a laser-resistant endotracheal tube when using a laser during upper airway procedures.
  - Laser-resistant endotracheal tubes help to decrease the potential for a fire because they have a very high ignition point.
- Place wet sponges around the endotracheal tube cuff if the surgeon is operating in close proximity to the endotracheal tube.
- Only the person controlling the laser beam activates the laser.
  - This can help to avoid accidental activation, which may result in a fire away from the surgical site.
- Before using the laser, the team member should verify that water and the appropriate type of fire extinguisher are available. It is better to be prepared than to regret not being prepared in these situations.
- Place the light source in standby mode or turn it off when not in use.
- Inspect light cables before use and remove them from service if broken light bundles are visible.

# Controlling Ignition Sources: Interventions

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- Inspect electrical cords and plugs for integrity and remove from service if broken.
  - To prevent sparking resulting in a fire
- Check biomedical inspection stickers on equipment for a current inspection date and remove the equipment from service if not current.
  - Electrical safety and prevention of fire
- Do not bypass or disable equipment safety features and follow manufacturer's recommendations for use.
  - The way the safety features have been tested and verified
- Keep fluids off of electrical equipment.
  - When water and electricity mix, there may be sparks and electrical shocks created that can cause either a fire or an electrocution

# Oxidizers

## Gases that can support combustion

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- Oxygen
- Oxygen-enriched environment
- Nitrous oxide

# Controlling the Oxidizer: Interventions

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- Tent drapes to allow for free air flow.
- Keep the oxygen percentage as low as possible.
- Use an adhesive incise drape.
- Evacuate the surgical smoke from small or enclosed spaces.

# Controlling the Oxidizer: Interventions

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- Inform the surgeon that an open oxygen source is being used (when used).
- Stop supplemental oxygen or nitrous oxide before and during the use of an ignition source.
- Check the anesthesia circuits for possible leaks.
- Turn off the oxygen at end of each procedure.
- Evacuate the surgical smoke from small or enclosed spaces.
- Pack wet sponges around the back of the patient's throat.
- If oxygen is being used, suction the patient's oropharynx deeply before using the ignition source.



# Controlling the Oxidizer: Interventions

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- Oxygen delivery during head, face, neck, and upper chest surgery:
  - Do **not** use open delivery of 100% oxygen.
  - Intubate or use a laryngeal mask airway if supplemental oxygen needed.
  - If oxygen is greater than 30% via open delivery, use 5 L to 10 L of air/minute under the drapes.
- **Exceptions:**
  - Patient verbal response required during surgery (eg, carotid artery surgery, neurosurgery, pacemaker insertion)
  - Open oxygen delivery required to keep the patient safe

# Fuels

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- Patient
- Personnel
- Drapes
- Gowns
- Towels
- Sponges
- Dressings
- Tapes
- Linens
- Head coverings
- Shoe covers
- Collodion
- Alcohol-based skin preparations
- Human hair
- Endotracheal tubes

# Controlling Fuels: Interventions

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- Use moist towels around the surgical site when using a laser.
- Use water-based ointment and not oil-based ointment in facial hair and other hair near the surgical site.
- During throat surgery, use moist sponges as packing in the throat.
- Prevent pooling of skin prep solutions.
- Remove prep-soaked linen and disposable prepping drapes.
- Allow skin-prep agents to dry and fumes to dissipate before draping.
- Allow chemicals (eg, alcohol, collodion, tinctures) to dry.

# CMS Regulations: Alcohol-Based Skin Preps

- Products are packaged for controlled delivery with clear directions that must be followed.
- Documentation of implementation of fire prevention practices must be present in the patient's medical record.
- Personnel must demonstrate practice of the policies and procedures.

# Fire - Responsibilities

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- RACE!
- Actions may be different depending on where the fire is within the OR and if it involves the patient and/or equipment.



# Code RED

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**R---**Rescue anyone in immediate danger to a safer area.

**A---**Activate the fire alarm system at any of the red pull stations and report the fire via telephone (call 4-5555 at Downtown Campus, call 2211 at Community Campus). Give your name, location of fire, and any injuries. Do not hang up until told to do so.

**C---**Contain the fire by closing any doors that can be safely closed around the area with the fire

**E---**Evacuate the area

# Fire - Responsibilities

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- Alert team members
- Stop the flow of gases to the patient
- Extinguish the fire by using water or saline
- Remove burning material from patient
- Assess for secondary fires
- Assess the patient for injuries

# Fire - Responsibilities

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- Notify appropriate personnel
- Assign liaison to family
- Complete an occurrence report
- Gather all involved materials, supplies, and equipment

# Upstate Fire Policies

Fire Safety Procedures

Operating Room/Procedure Area/Anesthesia Fire Safety

Evacuation Annex

Electrosurgery

Surgical/Invasive/Procedural Preparation of the Skin

# References

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Centers for Medicare & Medicaid Services. *State Operations Manual. Appendix A—Survey Protocol, Regulations and Interpretive Guidelines for Hospitals*. [http://cms.gov/manuals/Downloads/som107ap\\_a\\_hospitals.pdf](http://cms.gov/manuals/Downloads/som107ap_a_hospitals.pdf). Accessed October 28, 2018.

Clarke JR, Bruley ME. Surgical fires: trends associated with prevention efforts. *Pa Patient Saf Advis*. 2012;9(2):130-135.

ECRI Institute. New clinical guide to surgical fire prevention. Patients can catch fire—here's how to keep them safer. *Health Devices*. 2009;38(10):314-332.

Guideline for a safe environment of care. In: *Guidelines for Perioperative Practice*. Denver, CO: AORN, Inc.

Guideline for safe use of energy-generating devices. In: *Guidelines for Perioperative Practice*. Denver, CO: AORN, Inc.

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# The End