

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

May 26, 2023

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. Sometimes substitutions are not possible due to severe supply chain constraints or sole-source manufacturers no longer producing products at all. Please ensure communication with the Pharmacy Department regarding product substitutions recommendations.

Drug	Description of Issue	Substitution Recommendations
Cisplatin	Dire Situation. Backordered, receiving sporadic shipments to maintain patient care needs. Less than 1 week on hand. Please contact Cancer Center pharmacy for specifics.	None
Cardioplegia	Currently on limited allocation	Pharmacy preparing to mix / find alternate sources.
Clindamycin 900mg Premix bags	Backordered, receiving sporadic shipments	Pharmacy to mix patient specific / pigtail until resolves.
Methylprednisolone Intravenous Formulation	Backordered across all strengths, sporadic shipments of various vial sizes are arriving.	Oral corticosteroid formulations: methylprednisolone, prednisolone, prednisone
Hydrocortisone Intravenous Formulation	Backordered across all strengths, sporadic shipments of various vial sizes are arriving.	Oral hydrocortisone
Lidocaine with epinephrine	Remains on backorder across all strengths and formulations. There will be times when pharmacy <u>cannot</u> supply the requested formulation. It is imperative to communicate with the Inpatient Pharmacy if desired strength is not available.	Lidocaine without epinephrine Bupivacaine with or without epinephrine

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B&O Suppositories	<u>No longer manufactured, pulled from the market</u> – ability to order has been removed from Epic as this product is <u>no longer available across both UUH and UCH campuses</u> .	
Ketamine	All strengths remain on backorder as of 3/23/23 with sporadic fulfillment of pending orders across all strengths.	Benzodiazepines Barbiturates Propofol Etomidate Opioids
Methotrexate	Backordered, receiving sporadic shipments at this time, inventory is stable across both campuses at this time 1 month on hand	

Resolved – Carboplatin, Medical Leeches, Ceftriaxone 2gm, Aloxi Syringes, and BCG!

Centers for Disease Control and Prevention Health Alert Related to Suspected Fungal Meningitis

A message from Dr. James Alexander, Medical Director, Onondaga County Health Department...

As you may be aware, the Centers for Disease Control and Prevention (CDC) has issued a Health Alert Network (HAN) Advisory and a Lab Advisory addressing suspected fungal meningitis related to surgical procedures conducted under epidural anesthesia in Matamoros, Mexico. The Onondaga County Health Department has been notified by the CDC that a Syracuse resident underwent cosmetic surgery for gluteal augmentation ("liposuction and Brazilian Butt Lift") at the Riverside Surgical Clinic in Matamoros in April 2023. We have not been successful in contacting this patient despite multiple attempts over the past two days.

This patient may be at risk for fungal meningitis. Please notify the Onondaga County Health Department if you have a patient with suspected fungal meningitis or meningitis. The CDC recommends that any patient with even mild symptoms of meningitis who underwent epidural anesthesia in Matamoros, Mexico undergo an MRI and lumbar puncture as soon as possible. In addition to routine testing of spinal fluid, please consider fungal culture of the CSF, as well as serum and CSF levels of (1,3)-beta-D-glucan. A separate specimen to be forwarded to Wadsworth Center would be helpful, where the potential causative fungus, *Fusarium solani*, can be identified.

Please see attached for more information. For diagnostic and clinical guidance, please visit:

https://funguseducationhub.org/interim-guidance-matamoros-fm-outbreak-5_20_23/.

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New York State Department of Health Statement on Repealing the COVID-19 Healthcare Worker Vaccine Requirement

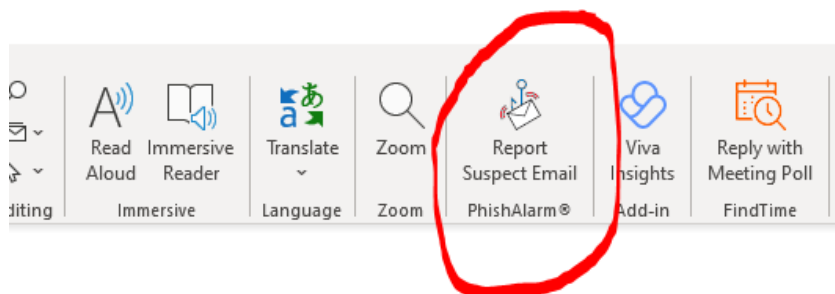
Albany, NY (May 24, 2023): “Due to the changing landscape of the COVID-19 pandemic and evolving vaccine recommendations, the New York State Department of Health (NYS DOH) has begun the process of repealing the COVID-19 vaccine requirement for workers at regulated health care facilities. Throughout the public health emergency, this vaccine requirement served as a critical public health tool, helping to protect both health care workers and the patients under their care. As the repeal of this regulation awaits consideration for approval by the Public Health and Health Planning Council (PHHPC), the Department will no longer enforce the requirement. Please find the Dear Administrator Letter (DAL) to health care providers [here](#).”

Cyber Security Update

By David Hanson

The Healthcare and Higher Education communities are very hot targets for cyber criminals. At Upstate, our patient records, student records, and intellectual property are some of the most sought after and valuable content for cyber criminals. Because of this, we all need to remain vigilant while using Upstate’s information systems. Experts have proven that the most vulnerable and exploited system is Email, which is the primary venue for phishing.

Phishing is the method of obtaining personal information such as username and passwords, account numbers, addresses, social security numbers, or other sensitive information. Typical phishing methods include emulating human resources or banks or offering to make easy money. We all must remain vigilant to protect both Upstate’s and our own personal information. If at any time you suspect an Email is phishing, please do not click on links, open file attachments, or forward to others; instead, report it using the Report Suspect Email or PhishAlarm on your Outlook client (see below).



Data Loss Prevention – Implementation for Upstate Users

By the Upstate IMT Cyber Security Group

The Upstate IMT Cyber Security group has implemented a new software technology called Data Loss Prevention (DLP). The software prevents PHI from being sent off-site in inappropriate ways. This software has been in inspection mode for some time and has indicated sensitive Upstate data is being sent off-site by some users. Once the DLP software is changed to enforcement mode, it will block items with PHI from being sent off-site in an unsecure manner and will

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notify the user for the reason. We are preparing to start blocking this activity from occurring. Once we start blocking, users will get notified that they tried to send data in an inappropriate manner and will be given some direction on how to proceed.

PHILIPS Web View Monitoring Education

By Kris Hebert

We are happy to announce that Philips WebView Remote Monitoring is now available from PCs on the Upstate/Community campus network or from PCs on the Upstate VPN. This project was originally requested by Dr. Angela Wratney, Chief of Children's Critical Care. Dr. Wratney and Dr. Neal Seidberg have assisted with testing and support of this application.

Philips WebView provides remote monitoring of near real-time information and waveforms from Philips monitors that are currently on Central Monitoring. It supports viewing of up to 32 patients at a time. Approximately 1500 users were added to a security group and should now have access. Users should see the grey "Philips Multi-Patient View" icon from the Citrix launch pad while on the Upstate network or VPN. Once the app is launched and the user has logged in with their network username/password, the user will need to select patient setup to select which patients to view.

The vendor user guide is attached for additional information. Please contact the HelpDesk at extension 4-4115 if you would like access and do not see the Philips icon on Citrix. There is also a Mobile CareAssist app that will be rolled out as Phase 2 and is currently being worked on.

CNY Family Care X-Ray PACS System Connected to Upstate PACS System

A message from our colleagues at CNY Family Care...

Great news! CNY Family Care X-Ray PACS system is now connected directly to the Upstate PACS system, so any images from CNYFC can be shared into our system. For referrals, if x-ray images from CNYFC are needed, please call CNYFC referrals staff directly at 315-634-6749. A CD is no longer needed. Other questions? Please contact CNYFC X-Ray Manager Melissa Zaborski at mimhoff@CNYFAMILYCARE.com.

Bedside Procedure Consult Order

By Dr. Angela Love

Effective Thursday, May 18, 2023: a new Procedure Team consult order has been created in EPIC for certain bedside procedures. The Bedside Procedure Consult Order can be used for adult Upstate Hospital patients only. Additionally, to aid in tracking, there is a new Bedside Procedure-UH consult list and treatment team. Please see the attached [tip sheet](#) for more information.

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Clinical Documentation Improvement (CDI) Tip for May 2023

By the CDI Physician Advisory Group



The Discharge Summary is considered a highly important document in the medical record, serving as a summation of hospitalization and communication tool promoting continuity of patient care. Please see this month's CDI tip sheet (attached) outlining Discharge Summary documentation golden rules! For questions, please contact the CDI Hotline at 315-464-5455.

Exceptional Teacher Recipient for May 2023

By Dr. Lawrence Chin



Dr. Shahid Mughal, MD, an assistant professor of medicine at Upstate Medical University's Binghamton Campus, is the May 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. Mughal!

COMMENTS FROM DR. MUGHAL'S STUDENTS:

"Dr. Mughal runs impressive rounds. He is constantly questioning and pushing us to think about what is best for the patient. If any mistakes are made, no one is made to feel at fault — instead, we dive into why the mistake was made and what was the missing information we needed to make the right decision. I learned so much from Dr. Mughal, and I very much appreciated his efforts to teach. His bedside rounds were great too — I learned things about physical exams that I had never even heard of."

"Dr. Mughal demonstrates the utmost emotional intelligence in working with students; he is incredibly patient and kind with every single student. During direct observations, he always made sure to say something the student did well before giving feedback for improvement. During rounds, he would usually let students give their entire presentation and would always ask if we had any questions about each of our patients. He is a fantastic source of knowledge as he stays up to date on all the most recent evidence-based medicine. I can confidently say I felt myself becoming a better physician every day on this service and would apply to UHS Binghamton IM residency purely based on wanting to have Dr. Mughal as my attending in residency to learn from."

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Welcome New Clinicians!

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

ANESTHESIOLOGY

Bradley Gilbert, MD

DENTAL SURGERY

Irina Zagorodny, DMD

EMERGENCY MEDICINE

Rose Solomon, MD

MEDICINE

Oluwakanyinsola Adenusi, MD

Melissa Alt, NP

Sarah Chan, NP

Chaitanya Chandravanka, MD

Sanul Corrielus, MD

Virginia Cronin, NP

Kathryn Dolan, NP

Natalie Elkins, NP

Kaytlyn Flansburgh, NP

MEDICINE (cont.)

Ivayla Geneva, MD

Avrille George, MD

Melissa Gervais, NP

Paige Gordon, PA

Nahed Iskander, MD

Mansur Javaid, MBBS

Tricia Kalwar, MD

Kayla Kneule, NP

Elaine Kriss, NP

Cynthia Law, NP

Sherradyn Mack, PA

Douglas Milano-Johnson, PA

Emma Northrop, NP

Jason Sloane, MD

Melissa Spencer, PA

Michael Tirgan, MD

OB/GYN

Marly Francois, MD

OB/GYN (cont.)

Hilary Marsfelder-Clark, LM

Sara Quinn, MD

ORTHOPEDICS

Jerry Albujar, DPM

David Arndt, DPM

Scott Taylor, DPM

Erica Trimm, PA

PEDIATRICS

Elizabeth Wilson, NP

Psychiatry

Megan Riccobono, NP

Shauna Roloff, NP

Surgery

Wei Li, MD

SOCIAL WORK

Karly Desmond, LMSW

Outstanding Physician Comments

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



Adult Hematology Oncology: Dr. Sam Benjamin – always kind and caring and willing to explain things.

Breast Care Center: Dr. Mashaal Dhir was very sensitive to my situation after surgery. Dr. Mashaal Dhir did the ultrasound at the visit and that was excellent. Dr. Lisa Lai – excellent as always. Dr. Daniel Thomas is a thoughtful and caring provider. Dr. Daniel Thomas took his time and was very friendly. Dr. Daniel Thomas was wonderful – I never felt rushed and he never talked over my head – great conversation regarding my upcoming surgery. Dr. Daniel Thomas is very knowledgeable and took the time to explain the procedure and answer all of my questions.

Breast Care at CC POB: I highly recommend Dr. Jayne Charlamb and her practice. Dr. Jayne Charlamb provided me with excellent care. She examined me thoroughly and explained treatment and referral to geneticist. Dr. Jayne Charlamb made

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me feel at ease and encouraged me to ask questions regarding further treatment. I especially appreciated that **Dr. Jayne Charlamb** offered me a holistic alternative.

Cntr for Devel., Behavior and Gen.: **Dr. Robert Lebel** – very considerate and informative.

Community Campus – Virtual: Would certainly recommend **Dr. Walter Hall!** **Dr. Walter Hall's** conference was outstanding. He explained the diagnosis as well as what he was going to do plus positive and negative of procedure. He asked if I had questions. **Dr. Walter Hall's** presentation was so thorough that my only reaction was how quickly can we get the procedure (operation) scheduled? He, as stated earlier, was outstanding and put me very much at ease.

Dermatology Clinic: **Dr. Joyce Farah**, because of her concern and how she went about performing my procedure.

ED at Community Hospital: **Dr. Hannah Charland** – very caring, very good listener.

Family Medicine: I was very comfortable with **Dr. Natasha Ginzburg**. **Dr. Clyde Satterly** – exceptional caregiver, very attentive, and well-informed. **Dr. Clyde Satterly** always impresses me. By far the best doctor I have ever had. Always listens and has genuine concern for my well-being. Never rushes the appointment. Always leave feeling confident about the care I received.

Family Medicine at Community: **Dr. R. Eugene Bailey** is exceptional. **Dr. Paula Brooks** is easy to talk to and shows genuine concern. **Dr. Kyrsten Wallace** was great! **Dr. Sana Zekri** is wonderful. I admire and respect **Dr. Sana Zekri**. He's bright, intelligent, very well informed, and listens intently, then discusses options and explains situations, courses of action, treatment plans, drug choices, etc. I've only had such an awesome doctor once before in my 70+ years. I can't say enough good about him. He's the best thing that's happened to my health care in all that time. I came into his care with some serious problems and have literally prospered under his care and am doing much better than I've been for years. I highly recommend him to others. **Dr. Sana Zekri** hands down #1 out of the dozens of providers I've interacted with in Upstate. Never had such a top-notch doctor, can't say enough good about him. Probably saved my life too, by being persistent in diagnosis, and helping me get proper treatment, including referrals to the right specialists. Never met a doctor who is so well-informed, attentive, and so very incisive. Don't lose him. He's the best!

GEM: **Dr. Christine Courtney** came by two or three times to explain and instruct. Very pleasant and caring. **Dr. William Paolo** was caring, compassionate, and explained everything very well. **Dr. William Paolo** was caring and compassionate and worked very hard to be sure patients were seen in a timely manner. Excellent physician!

GYNONC MI: **Dr. W Douglas Bunn** – great! **Dr. W Douglas Bunn** and also **Dr. Mary Cunningham** is equally skilled and equally compassionate. **Dr. W Douglas Bunn** seemed very knowledgeable. **Dr. Mary Cunningham** is an amazing healthcare provider.

Inclusive Health Services: **Dr. Angana Mahapatra** is always professional and seems genuinely interested in the lives of her patients. **Dr. Angana Mahapatra** is very concerned and cares about her patients.

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Joslin Center for Diabetes: This was my first-time meeting with **Dr. Tuncay Delibasi** and I couldn't be more happy to have him as my doctor. **Dr. Tuncay Delibasi** was extremely attentive to my needs and forthcoming with my treatment plan. I felt like he really cares about my health and wants to be sure that I am happy and healthy. I have already recommended **Dr. Tuncay Delibasi** to a friend based on my first meeting with him. **Dr. Tuncay Delibasi** – great and caring. **Dr. Ricardo Lundi** shows compassion and understanding while speaking to me in a way I can understand and really takes his time. My patient and doctor relationship with **Dr. Jason Sloane** is a relationship of trust, compassion, and understanding every visit. Makes me feel privileged – my family, friends will travel far as needed to see such a compassion and caring doctor. My life has been hectic waiting for kidney transplant and he's guided me into the best shape of my life at age 50. Please cherish such a wonderful human being. **Dr. Jason Sloane** is very kind and caring. He's amazing! I look forward to my next appointment. **Dr. Jason Sloane** is very knowledgeable and has a wonderful, caring, supportive nature. He is an amazing doctor! **Dr. Jason Sloane** – trust his judgement, followed him from New Hartford, best doctor I've had in 40 years. **Dr. Jason Sloane** always goes above and beyond. He always listens to my concerns and finds the best solutions for me. He's just the best!! **Dr. Jason Sloane** is an excellent listener and a very caring doctor. He always gives me the opportunity to ask questions and to answer so I understand. I was a patient of **Dr. Jason Sloane's** at Slocum Dixon in Utica. He is an excellent doctor so I decided to follow him too Upstate. **Dr. Jason Sloane** – great listener and cares about his patients. **Dr. Jason Sloane** spent several minutes with me and I was super impressed. As a former medical office employee, I appreciate all the time I have with a provider, discussing/evaluating/provider listening to my concerns, asking appropriate questions. He really cares about his patients. I am so glad he came to your location as I was a patient at the former office. Well worth coming to Syracuse to see him. He is excellent! **Dr. Jason Sloane** is very knowledgeable and explains things. He shows great concern with his patients.

Joslin Pediatric Center: **Dr. David Hansen** – very professional and very accommodating. Even took time to help us set up the patient portal.

Multidisciplinary Programs Cancer Center: **Dr. Michael Archer** explained each step in my diagnosis and treatment to my satisfaction, answered all questions, and makes himself available through the treatment. I would highly recommend **Dr. Mashaal Dhir**. **Dr. Kristin Kelly** saved my life. My wife and myself just LOVE her and her entire staff. Please inform her of this. **Dr. Kristin Kelly** – excellent! **Dr. Kristin Kelly** explained her opinion of what she thinks may be needed, was going to ask others what they thought and come up with a possible solution, now we are going forward with what she thinks is best. **Dr. Jesse Ryan** is very caring, compassionate, and has guided us through a difficult journey. **Dr. Jason Wallen** is the best, made me feel good, so comfortable.

Pediatric Multispecialty Clinic: **Dr. Robert Hingre** is excellent. Our experience with him has been excellent. He listens to us, our concerns. He answers our questions. He is very thorough, very friendly, and courteous. An amazing physician! He is very attentive to us and just wonderful! He's an excellent educator as well. We really like him and appreciate the care he is providing for our son. **Dr. Robert Hingre** is what I wish all doctors were like. He is collaborative, not pushy at all, just shares good information and trusts me as a parent to make the right choice. So knowledgeable and so kind. We love **Dr. Robert Hingre**!

Peds Neph, Rheum, Integrative Med: **Dr. Scott Schurman** continues to impress us with his knowledge and insights. We appreciate a doctor with such care. **Dr. Caitlin Sgarlat Deluca** has amazing bedside manner and is overall very sweet and caring for my needs

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Pulmonology Clinic: Dr. Dragos Manta is excellent and we had an excellent visit.

Radiation Oncology: Dr. Brittany Simone – excellent and very accommodating.

Rheumatology Clinic: Dr. Hom Neupane is a great doctor. Dr. Sheetal Rayancha is wonderful. She is willing to spend time answering questions and helping me understand the medication. She is patient and really digs in to find solutions.

SUNY Upstate – Virtual: Dr. Mark Crye is the best! Dr. Andrea Dvorak is amazing. Excellent listener and super helpful and supportive. Dr. Joseph Jacob – terrific job! Dr. Joseph Jacob is awesome – exceptional experience! Dr. Hom Neupane is the BEST! He's so easy to talk to and has so much compassion. Dr. Dmitriy Nikolavsky was wonderful and explained things very clearly. Dr. Dmitriy Nikolavsky made me feel very comfortable. Dr. Jason Wallen listened to me, cared about what I said, and answered all our questions.

Surgery – UH LL022: Dr. Michael Luca – welcoming and sincere. Dr. Michael Luca is awesome all the way around. Dr. Michael Luca is very knowledgeable and personable. He listens and responds to my questions and concerns. I have recommended Dr. Michael Luca to others.

Surgical Subspecialties at CC: Dr. Jeffrey Albright explained everything very well. Dr. Timothy Shope – intelligent, kind, caring, engages.

UHCC – Neurology: Dr. Sara Ali treated me like an adult. She explained everything to me and made sure I understood my options and the potential consequences of not taking my medications regardless of how I feel or how long I have been seizure-free. Dr. Deborah Bradshaw is just so kind and really listens to me. I am fortunate to have Dr. Anuradha Duleep as my neurologist. She is without a doubt the best of the best. I have total confidence in her. She has an incredible depth of knowledge and understanding of my medical problem and has formulated a sensible plan as to how to treat it. She is kind and gentle, and she listens! Kudos, Dr. Anuradha Duleep! Dr. Anuradha Duleep is a very caring and compassionate person. We've never encountered one as caring as her. Dr. Anuradha Duleep takes her time with patients, never seems rushed, and is happy to spend as much time as needed to explain everything. Dr. Sherif Elwan is amazing and I will highly recommend him to anyone who needs a neurologist. Dr. Shahram Izadyar is wonderful, kind, friendly, caring person, answers all of our questions and has helped us through this journey. Dr. Corey McGraw – kindness, compassion, knowledge, experience, and time. Dr. Luis Mejico was very concerned about my wait. Dr. Luis Mejico – good! Dr. Luis Mejico was very thorough in reviewing my history, current symptoms, and examination. Dr. Luis Mejico was excellent. I have liked Dr. Eufrosina Young from our first meeting. She is obviously very intelligent, yet down to earth, and has explained in detail all questions I have asked her. Dr. Eufrosina Young was informative, professional, and extremely thorough. Dr. Eufrosina Young and her team were absolutely phenomenal with me.

University Cardiology: As always, Dr. Robert Carhart continues to do an outstanding job managing my cardiac care. Dr. Robert Carhart – outstanding! Dr. Robert Carhart is amazing and he cares. I trust him completely. Dr. Robert Carhart is a very good and caring doctor. Dr. Robert Carhart – nothing but good experiences. Dr. Robert Carhart is very professional, courteous, friendly, and understanding!

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University Center for Vision Care: Thank you to **Dr. Samuel Alpert** and staff for always making me feel comfortable during my visits! **Dr. Katharine Liegel** – professional and listened to my concerns. **Dr. Stephen Merriam** is an excellent provider that cares for his patients and hears their concerns and helps them to the best of his knowledge. He has helped my daughter the best he can since she was one. **Dr. Stephen Merriam** is the only person I recommend for pediatric eye care. **Dr. Robert Swan** is awesome! **Dr. Robert Swan** has been a caring, professional, knowledgeable physician in leading me through a scary journey with my eyes. **Dr. Robert Swan** – friendly, kind, efficient, has a way of putting you at ease.

University Geriatricians: **Dr. Andrea Berg** was excellent and very caring. **Dr. Andrea Berg** and ALL staff I have encountered are amazing.

University Internists: **Dr. Tingyin Chee** is great. She put me at ease and is very easy to talk to. She is very professional but is also friendly and has a sense of humor, which is important to me. **Dr. Tingyin Chee** is an outstanding physician. **Dr. Tingyin Chee** is a caring physician who is very attentive to details and very professional. She is an excellent physician. **Dr. Tingyin Chee** – always very professional and thorough. **Dr. Vincent Frechette** is likewise the best primary care doctor in Central NY and I consider myself fortunate to have him for my doctor. **Dr. Vincent Frechette** is the BEST! **Dr. Vincent Frechette** is a very kind, caring person who can calm my nerves. **Dr. George Gluz** is a true professional. His caring nature, medical knowledge, and politeness greatly impressed me. I am receiving the best health care possible. **Dr. George Gluz** is a true professional in every aspect of patient care. **Dr. Kaushik Govindaraju** is amazing, so easy to talk to, and so helpful with my many health issues. **Dr. Kaushik Govindaraju** is thorough! I'm delighted to have him on my team. I feel fortunate to have **Dr. Kaushik Govindaraju** as my primary care physician. I am near 81 years old and I find him caring, bright, attentive, willing to answer all questions, etc. **Dr. Kaushik Govindaraju** allowed questions I had and good suggestions. I am very happy to be one of his patients. Have recommended **Dr. Matthew Hess** to many. He is caring, listens, doesn't push things on me, suggests but no push, he takes time, and I feel he really does care. **Dr. Matthew Hess** has a great caring manner. He's a great listener and obviously is a very good doctor. I left knowing that I am in good hands and can trust him. I am so happy to be a patient of **Dr. Matthew Hess**. He spent meaningful time with me, really listening to my needs and responding in a caring and helpful way. He personally called me about my bloodwork results. **Dr. Matthew Hess** is a top-notch physician who listens and cares and is very knowledgeable. **Dr. Matthew Hess** was very astute and engaged. He seemed to genuinely care about my well-being. He listened carefully to me. **Dr. Sarah Lappin** is such a nice person in addition to being a competent doctor. I am thankful **Dr. Sarah Lappin** took the time needed to understand what is going on with me. She then took the steps necessary to find it and treat it. **Dr. Catherine White** is an encouraging doctor who is always helpful to me and made me feel happier after my hospitalization last September 2022.

University Pediatric & Adolescent Center: **Dr. Jessica Mayer** is wonderful!

Upstate Pediatrics: **Dr. Yekaterina Okhman** and the staff are all amazing. **Dr. Jaclyn Sisskind** was amazing at making her feel at ease during her ADHD eval. When she was being anxious and trying to hide herself behind me, **Dr. Jaclyn Sisskind** started sketching some of her favorite book characters onto the exam table paper and chatting with her about her favorite books. She loves to read and draw so she opened right up and started doodling and chatting back with her. She put her at ease and was able to get her to chat about her issues at school without her feeling like she was bad for when she has problems at school.

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May 26, 2023

3West at Community Hospital: Dr. Michael Lioudis – very helpful. Dr. Michael Lioudis – extremely patient with me and explained things best to me. Dr. Ronald Russo was excellent in explaining things.

4North at Community Hospital: Dr. Jeffrey Albright and Dr. MacKenzie Trovato are the best surgeons I've ever had. They care and listen above all else. Dr. MacKenzie Trovato is simply the best.

05B: Dr. Mahmoud Elbermawy was extremely caring and concerned about my care and well-being. He was also concerned about my wife's ability to care for me. He is very concerned and dedicated to the health of his patients. He has a great bedside manner.

06B: Dr. Harvir Singh Gambhir came in on Sunday as soon as I arrived and came in every morning to give me an update. He was very informative and helpful. Dr. Deborah Mann and Dr. Muhammad Malik – rock stars!

6th Floor at Community Hospital: Dr. Palma Shaw was wonderful! She was informative and helpful as well as an excellent surgeon. Wonderful bedside manner.

08G: Dr. Michael Archer is compassionate. He took the time to explain surgery in detail. Dr. Kristin Kelly – attending and responsive.

11E: Dr. John Andrade is amazing and was very thorough. He came to our room multiple times a day to talk to us about what was going on, he was easy to talk to and made me feel comfortable asking any questions. Dr. Ali Hazama – very personal and professional at the same time. We could not be happier with the neurosurgeon on call! Dr. Marcus Rivera – thank you for doing so much and being so patient.

12E: Allah bless Dr. Anthony Mortelliti. The amount of respect this gentleman has is unbelievable. His knowledge and skills are beyond extreme. Thank you for every second of your life that you spend to get to this level of excellence. Thank you so much for all and everything you did for our sick daughter. Thank you, again, wait to get your reward in Jannah (paradise).

Best,
Amy



ALERT —
ADVISORY —
UPDATE —

IMMEDIATE ACTION REQUIRED
PRIORITY BUT NOT FOR IMMEDIATE ACTION
FOR INFORMATION; UNLIKELY TO REQUIRE ACTION

Inpatient and ED Provider(s)

Bedside Procedure Consult Order

Procedure Team



EPIC SYSTEM UPDATE

Overview of Feature / Changes

Effective Thursday May 18th, 2023: A new Procedure Team consult order has been created for certain bedside procedures. The **Bedside Procedure Consult Order** can be used for **adult Upstate Hospital patients only**. Additionally, to aid in tracking there is a new Bedside Procedure-UH consult list and treatment team. See the changes below.

Updated Content

Inpatient and ED UH providers can place the Bedside Procedure Consult Order to the Procedure Team following the process instructions in the order.

Consult for Bedside Procedure(Adult Only)

✓ Accept

✗ Cancel

Priority:

Routine

Routine

STAT

Frequency:

ONCE

At

3/30/2023

Today

Tomorrow

0750

Process Instructions:

Please call/page the consulting provider or service in addition to placing this consult.

Reason for Consult?

CVC (Central Venous Cath)

LP (Lumbar Puncture)

US Guided IV

Paracentesis

Thoracentesis

Punch Biopsy

PICC Line

Indication

Preferred Consulting Provider

On Call Provider

Other (Specify) Provider

Comments:

+ Add Comments

Next Required

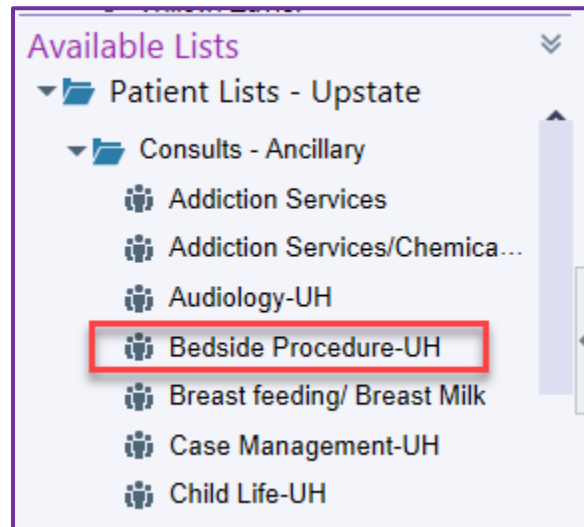
Link Order

✓ Accept

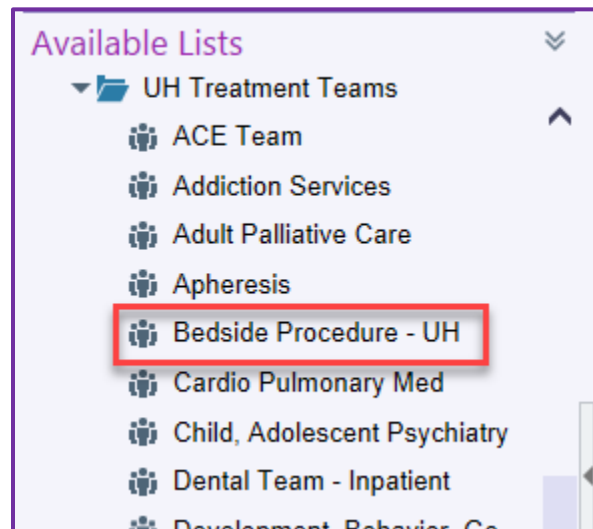
✗ Cancel

Additional information on the next page.

The Bedside Procedure – UH consult list can be found in the Consults – Ancillary Upstate Patient Lists folder.



The Bedside Procedure – UH Treatment Team can be found in the UH Treatment Teams folder.



CDI Tip of the Month – Importance of the Discharge Summary

The Discharge Summary is:

Considered the final diagnostic statement for the entire hospitalization

A communication tool for hospital to community transition used to promote continuity of high-quality patient care and outcomes

The first document hospital coders review when they start coding any given hospitalization

The first document Recovery Auditors review to deny any hospitalization or remove diagnoses

Documentation Golden Rules for the Discharge Summary

Include a complete list of confirmed, possible, likely, and probable diagnoses identified during hospitalization

Ensure diagnoses acknowledged through query are included in the Discharge Summary

Ensure there is no conflicting documentation between what is contained in the Discharge Summary and what has previously been documented in the rest of the medical record

Ensure the Discharge Summary does not introduce new information that is not otherwise present in the medical record

Memory of significant patient information and diagnoses naturally diminish over time. Best practice is to ensure the Discharge Summary is written on the day of discharge.

[CDC's Laboratory Outreach Communication System \(LOCS\)](#)

CDC's Laboratory Outreach Communication System (LOCS)

[CDC's Laboratory Outreach Communication System \(LOCS\) Home](#)

05/18/2023: Lab Advisory: CDC Issues Health Alert for Outbreak of Suspected Fungal Meningitis in U.S. Patients Who Had Surgery in Mexico

**Audience:** Clinical Laboratories**Level:** Laboratory Advisory

On May 17, 2023, CDC issued a [Health Alert Network \(HAN\) message](#) about an outbreak of suspected fungal meningitis among U.S. patients, now hospitalized in Texas, after they had cosmetic procedures under epidural anesthesia in the city of Matamoros, state of Tamaulipas, Mexico. It is currently unknown which organism(s) is causing the outbreak.

Symptoms associated with the fungal meningitis outbreak include fever, headache, stiff neck, nausea, vomiting, photophobia, and altered mental status. Testing cerebrospinal fluid (CSF) may be necessary to diagnose fungal meningitis. For more information, please review the [HAN](#) in detail.

We encourage you to share this message widely with your network(s).

[Opt in to receive updates from the CDC Laboratory Outreach Communication System \(LOCS\).](#)

Resources

- [Meningitis](#)
- [Fungal Meningitis](#)

Questions?

- If you are a clinical or public health laboratory professional, [contact LOCS](#).
- For media inquiries, [contact the CDC Newsroom](#).
- For all other questions, [contact CDC-INFO](#).

Thank you,

The Laboratory Outreach Communication System

Laboratory Outreach Communication System (LOCS) | Division of Laboratory Systems (DLS)

Office of Laboratory Science and Safety (OLSS)

Centers for Disease Control and Prevention (CDC)

LOCS@cdc.gov

www.cdc.gov/locs

Last Reviewed: May 18, 2023



Emergency Preparedness and Response

[Emergency Preparedness and Response Home](#)

Outbreak of Suspected Fungal Meningitis in U.S. Patients who Underwent Surgical Procedures under Epidural Anesthesia in Matamoros, Mexico



Distributed via the CDC Health Alert Network

May 17, 2023, 4:00 PM ET

CDCHAN-00491

Summary

The Centers for Disease Control and Prevention (CDC) is issuing this Health Alert Network Health Advisory about an outbreak of suspected fungal meningitis among U.S. patients hospitalized in Texas after undergoing cosmetic procedures under epidural anesthesia in the city of Matamoros, state of Tamaulipas, Mexico. It is currently unknown which organism(s) is causing the outbreak. A fungal etiology is suspected based on elevated cerebrospinal fluid (CSF) levels of the fungal biomarker (1,3)-beta-D-glucan in at least one patient. As of May 12, 2023, five patients have been diagnosed with suspected fungal meningitis; all have been hospitalized, and one has died. All these patients received epidural anesthesia and underwent cosmetic procedures. Affected patients underwent procedures in at least two clinics in Matamoros, Mexico, including River Side Surgical Center and Clinica K-3. Other facilities might be identified through further investigation.

Healthcare providers and the public should be aware that patients who underwent medical or surgical procedures under epidural anesthesia in Matamoros, Mexico, and who have developed signs or symptoms of possible meningitis (e.g., fever, headache, stiff neck, nausea, vomiting, photophobia, altered mental status) should promptly seek evaluation by a healthcare provider and convey that medical history.

Background

On May 8, 2023, CDC, the Texas Department of State Health Services, and the Cameron County Health Department were notified through the Emerging Infections Network of two female patients hospitalized in Texas with symptoms consistent with meningitis (e.g., headache, fever, photophobia, stiff neck) that began approximately 2–4 weeks after receiving cosmetic procedures under epidural anesthesia at River Side Surgical Center in the city of Matamoros, state of Tamaulipas, Mexico. Two additional female patients hospitalized in Texas developed suspected fungal meningitis 1–8 weeks after undergoing cosmetic procedures under epidural anesthesia at Clinica K-3 in Matamoros, Mexico. CDC, the Texas Department of State Health Services, and the Cameron County Health Department are investigating additional cases that may be associated with this outbreak.

Presenting symptoms included fever and new or worsening headache. Some patients initially had mild symptoms. **The causative organism(s) is currently unknown for this outbreak.** Multiple pathogens can cause healthcare-associated fungal meningitis, and infections may involve multiple pathogens at once.¹ Initial cultures of CSF and blood from the affected patients have been negative for fungi and other pathogens; however, CSF values were notable for significantly elevated white blood cell counts and, in one patient, elevated levels of (1,3)-beta-D-glucan, a biomarker for fungal infection.

Recommendations for Healthcare Providers

- For patients who underwent a medical or surgical procedure under epidural anesthesia in Matamoros, Mexico, after January 1, 2023, and who have developed symptoms consistent with fungal meningitis (e.g., fever, headache, stiff neck, nausea/vomiting, photophobia, altered mental status), healthcare providers should perform brain imaging (i.e., computerized tomography [CT] or magnetic resonance imaging [MRI]) and a diagnostic lumbar puncture (LP) unless contraindicated (e.g., because of skin infection over the puncture site, brain mass causing increased intracranial pressure).
 - Because some patients with fungal meningitis may initially present with mild or non-specific symptoms, healthcare providers should have a low threshold for performing brain imaging and LP.
- Healthcare providers can consider ordering bacterial and fungal cultures of CSF fluid, as well as serum and CSF levels of (1,3)-beta-D-glucan.² Healthcare providers can consider ordering other diagnostic tests including serum and CSF *Aspergillus* galactomannan and fungal polymerase chain reaction (PCR) testing.³
- If fungal meningitis is suspected, treatment should be initiated as soon as possible after obtaining CSF; treatment should not be withheld because of negative fungal culture or (1,3)-beta-D-glucan results. Consultation with an infectious disease specialist is recommended.
- Treatment should involve broad-spectrum antifungal medications that have adequate central nervous system penetration. Dual agent antifungal therapy can be considered and has been used in previous fungal meningitis outbreaks.
- Although vaccines are available to prevent certain types bacterial and viral meningitis, no vaccine is available to prevent fungal meningitis.⁴
- Healthcare providers should immediately report suspected fungal meningitis cases, including those possibly related to this outbreak, to their state or local health department. Contact information for jurisdictional healthcare-associated infection program coordinators is available [here](#).
 - Public health officials who are concerned about potential cases of fungal meningitis associated with this outbreak should contact CDC's Mycotic Diseases Branch (fungaloutbreaks@cdc.gov) during regular business hours and CDC's Emergency Operations Center (eocreport@cdc.gov; 770-488-7100) outside of regular business hours for assistance with recommendations and testing.

Recommendations for Clinical Laboratories

- Fungal and bacterial cultures of CSF should be performed to identify the causative organism; clinical laboratories should be aware that cultures may be negative or take up to 14 days to become positive.
- At this time, no specific pathogen has been identified in this outbreak; however, one patient had very high levels of (1,3)-beta-D-glucan in CSF, which strongly suggests a fungal etiology.⁵ This test can be performed both in blood and CSF but is more sensitive in CSF for diagnosing meningitis.⁶
- The fungal biomarker (1,3)-beta-D-glucan can help in the diagnosis of fungal meningitis; however, this test has several limitations, including:
 - the inability to identify the specific fungal species causing infection,
 - cross-reactivity with certain bacteria and medications,
 - false positivity due to specimen contamination, and
 - the inability to detect certain fungal pathogens.
- PCR testing of CSF for fungal species can be considered; this testing may not be available at most laboratories.
- *Aspergillus* galactomannan testing of serum and CSF can be considered.

Recommendations for the Public

- Patients who had a medical or surgical procedure involving epidural anesthesia in Matamoros, Mexico, since January 2023, should monitor themselves for symptoms (e.g., fever, headache, stiff neck, nausea, vomiting, photophobia, altered mental status) and consider consulting a healthcare professional.
- If patients had a procedure in Matamoros, Mexico, that involved injection of an anesthetic agent into the area around the spinal column (i.e., epidural) since January 2023 and have developed these symptoms, patients should immediately go to a hospital emergency room and tell them about their procedure in Matamoros, Mexico and where they traveled.
- Cancel any elective procedure that involves an epidural injection in Matamoros, Mexico, until there is evidence that there is no longer a risk for infection at these clinics.
- Patients should be aware that [unsafe injection practices](#) can be a serious threat to their health.

- All medical and surgical procedures carry some risk, and complications can occur regardless of where treatment is received. If patients travel to another country for a procedure, they should not delay seeking medical care if they suspect any complication during travel or after returning home. Immediately obtaining medical care can lead to earlier diagnosis and treatment and a better outcome.
- Learn how to minimize risks if patients are considering [traveling to another country for medical care](#).

For More Information

Information about meningitis:

- [Meningitis](#)
- [Fungal Meningitis](#)

Health information for travelers:

- [Mexico Traveler Health](#)
- [Fungal Infections Following Surgical Procedures in Mexico – Alert – Level 2, Practice Enhanced Precautions – Travel Health Notices | Travelers’ Health | CDC](#)
- [Medical Tourism CDC Yellow Book 2024](#) (clinicians)
- [Traveling Abroad for Medical Care](#) (travelers)

References:

1. Smith RM, Schaefer MK, Kainer MA, et al. Fungal Infections Associated with Contaminated Methylprednisolone Injections. N Engl J Med. 2013;369(17):1598-1609. doi:[10.1056/NEJMoa1213978](#) [↗](#)
2. Serological Assays for the Detection of Beta-Glucan – Class II Special Controls Guidance Document for Industry and FDA Staff. U.S. Food & Drug Administration. Accessed 17 May 2023. Available at: <https://www.fda.gov/medical-devices/guidance-documents-medical-devices-and-radiation-emitting-products/serological-assays-detection-beta-glucan-class-ii-special-controls-guidance-document-industry-and> [↗](#) .
3. Klont RR, Mennink-Kersten MASH, Verweij PE. Utility of Aspergillus Antigen Detection in Specimens Other than Serum Specimens. Clinical Infectious Diseases. 2004;39(10):1467-1474. doi:[10.1086/425317](#) [↗](#)
4. Meningitis – Resources for Healthcare Professionals. Centers for Disease Control and Prevention. Accessed 17 May 2023. Available at: <https://www.cdc.gov/meningitis/clinical-resources.html>.
5. Karageorgopoulos DE, Vouloumanou EK, Ntziora F, Michalopoulos A, Rafailidis PI, Falagas ME. -D-Glucan Assay for the Diagnosis of Invasive Fungal Infections: A Meta-analysis. Clinical Infectious Diseases. 2011;52(6):750-770. doi:[10.1093/cid/ciq206](#) [↗](#)
6. Lyons JL, Roos KL, Marr KA, et al. Cerebrospinal Fluid (1,3)-β- d -Glucan Detection as an Aid for Diagnosis of Iatrogenic Fungal Meningitis. J Clin Microbiol. 2013;51(4):1285-1287. doi:[10.1128/JCM.00061-13](#) [↗](#)

The Centers for Disease Control and Prevention (CDC) protects people’s health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national and international organizations.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

HAN Message Types

- **Health Alert:** Conveys the highest level of importance; warrants immediate action or attention.
- **Health Advisory:** Provides important information for a specific incident or situation; may not require immediate action.
- **Health Update:** Provides updated information regarding an incident or situation; unlikely to require immediate action.
- **Info Service:** Provides general information that is not necessarily considered to be of an emergent nature.

###

This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations.

###

[Top of Page](#)

Additional Resources

- [HAN Archive By Year](#)
- [HAN Types](#)
- [Sign Up for HAN Email Updates](#)
- [HAN Jurisdictions](#)

Last Reviewed: May 17, 2023

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.

Shahid Mughal, MD, an assistant professor of medicine at Upstate Medical University's Binghamton Campus, is the **May 2023** recipient of the **Exceptional Moments in Teaching** recognition.

COMMENTS FROM DR. MUGHAL'S STUDENTS:

"Dr. Mughal runs impressive rounds. He is constantly questioning and pushing us to think about what is best for the patient. If any mistakes are made, no one is made to feel at fault — instead, we dive into why the mistake was made and what was the missing information we needed to make the right decision. I learned so much from Dr. Mughal, and I very much appreciated his efforts to teach. His bedside rounds were great too — I learned things about physical exams that I had never even heard of."

"Dr. Mughal demonstrates the utmost emotional intelligence in working with students; he is incredibly patient and kind with every single student. During direct observations, he always made sure to say something the student did well before giving feedback for improvement. During rounds, he would usually let students give their entire presentation and would always ask if we had any questions about each of our patients. He is a fantastic source of knowledge as he stays up to date on all the most recent evidence-based medicine. I can confidently say I felt myself becoming a better physician every day on this service and would apply to UHS Binghamton IM residency purely based on wanting to have Dr. Mughal as my attending in residency to learn from."



PIC iX Multi-Patient View

Quick Guide

Release C.02/C.03

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Second Edition

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The documentation printing date and part number indicate its current edition. The printing date changes when a new edition is printed. (Minor corrections and updates which are incorporated at reprint do not cause the date to change.) The document part number changes when extensive technical changes are incorporated.

Second Edition June 2019

First Edition June 2018

Document Conventions

Bold Typeface

Objects of actions in procedures appear in bold typeface. Note the following example:

Select the **Update** button.

Warnings

Warning

A Warning alerts you to a potential serious outcome, adverse event or safety hazard. Failure to observe a warning may result in death or serious injury to the user or patient.

Cautions

Caution

A Caution alerts you to where special care is necessary for the safe and effective use of the product. Failure to observe a caution may result in minor or moderate personal injury or damage to the product or other property, and possibly in a remote risk of more serious injury.

Notes

A Note contains additional information on the product's usage.

Introduction

The Patient Information Center iX (PIC iX) Multi-Patient View allows you to see patient information, wherever it is convenient for you, by way of a secure application.

Log On

Your IT administrator provides the web site URL, your user name and password. When you access patient data, an entry is added to the PIC iX Clinical Audit Log for additional security. Your system may be configured so that a generic user is logged on at all times, so no additional login is necessary.



Multi-Patient View Main Screen

When you log on, you may see a default Main Screen. The Main Screen can show waves, numerics, and alarms from multiple patients, as they are added to each sector. The amount of data visible in each sector depends on the screen resolution and the size of the sector.

Warning

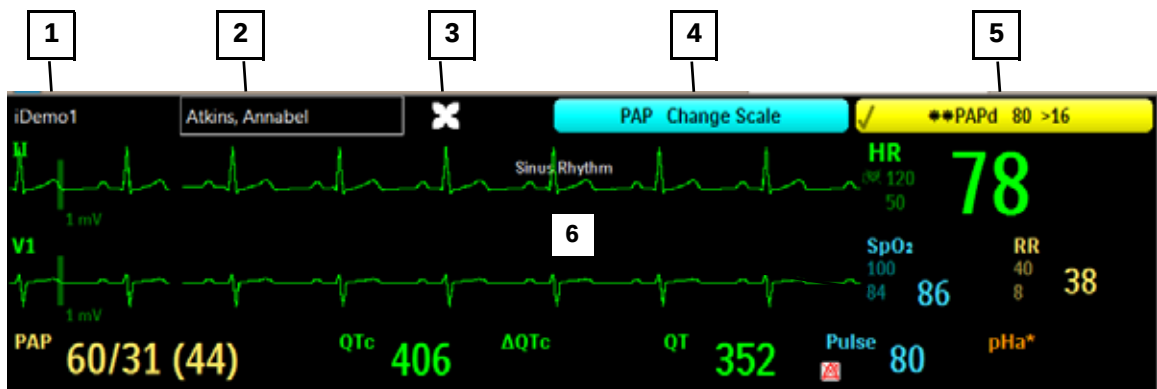
PIC iX Multi-Patient View is not intended for primary alarming. The waveforms are delayed and there are *no* audible alarms.



Main Screen Sector

The Main Screen is divided into an area for each patient, called a sector. The default layout shows two columns, each with four sectors. The top caption bar shows the bed label, patient name, resuscitation status (if added at the monitoring host), and active alarm banners.

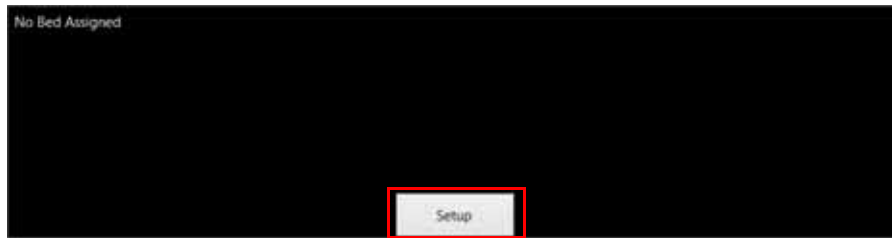
The sector shows current waves and numerics. These are determined by a priority catalog and are not configurable. The amount of data that can display depends on the size of the sector.



- 1 Bed Label
- 2 Patient Name. If the patient is assigned to a patient group, the name is outlined in the assigned group color.
- 3 Resuscitation icon
- 4 Technical/INOP alarms
- 5 Red and yellow patient alarms by priority
- 6 Sector body

Setting Up the Main Screen

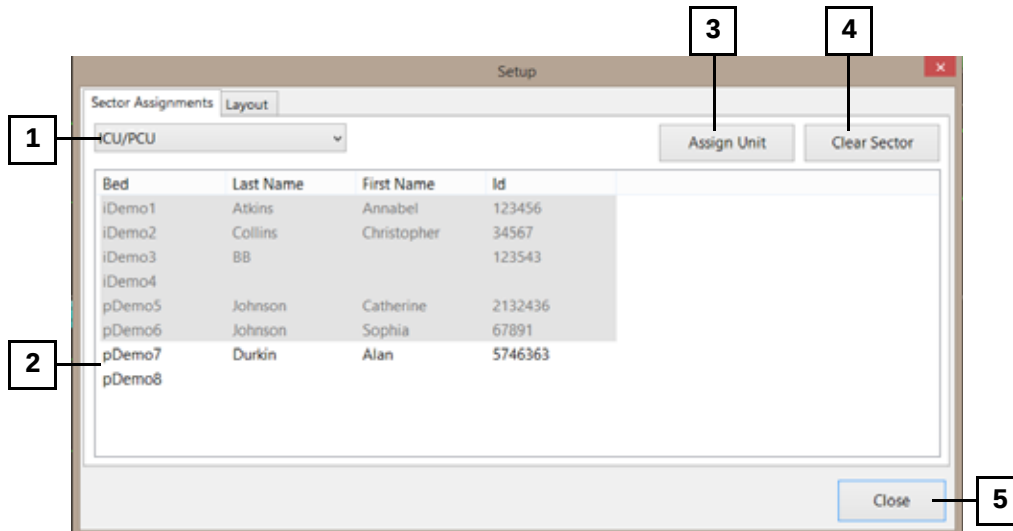
In the Multi-Patient View Main Screen, move your cursor over a sector until the **Setup** button appears. If a patient is already in the sector, a **Patient View** button also appears (see “Patient View” on page 9). To add or change a bed label or change the Main Screen layout, select the **Setup** button in the sector.



The **Setup** window displays two tabs: **Sector Assignments** and **Layout**.

Sector Assignments

Select the **Sector Assignments** tab in the Setup window to assign beds to sectors. From the drop-down list at the top of the window, select units that you have access to on the server. You may need to open a different web site to see patients on a PIC iX servers at different software revisions.



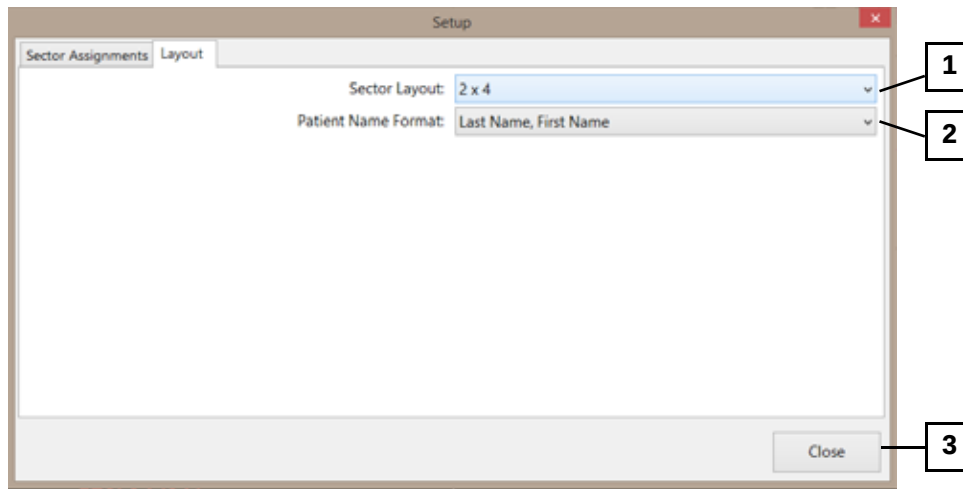
- 1 Select the unit name from the drop-down list to view the list of beds available to assign to a sector.
- 2 Select the bed label to assign to the sector. Bed labels that are already assigned are shaded gray.
- 3 Select **Assign Unit** to assign all sectors of the selected unit. The sectors are assigned starting top to bottom of the first column, in alphabetical order.
- 4 Select the bed and then select **Clear Sector** to clear the bed label from the selected sector.
- 5 Select **Close** or the red X in the top right to close the Setup window.

Layout

Select the **Layout** tab in the **Setup** window to change the number of columns and rows in your Main Screen layout.

Caution

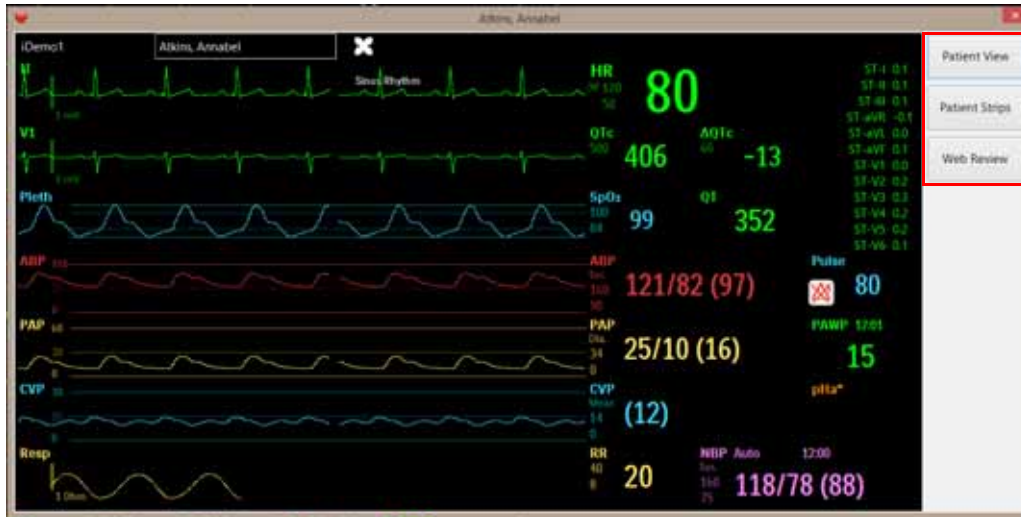
It is possible to make a sector too small to see data or a wave. Only choose the number of columns and sectors that allow for desired viewing of waves and data. This also depends on your screen resolution.



- 1 Select the number of columns and sectors from the **Sector Layout** drop-down list. You can choose from one to four columns and up to eight sectors per column, for a maximum of 32 sectors. The default layout is 2 x 4, two (columns) with four (sectors) per column, for a total of eight sectors.
- 2 Select the format of the patient name from the **Patient Name Format** drop-down list. If you do not want the sector to show patient identification, select **None**.
- 3 Select the **Close** button or the red X in the top right to close the **Setup** window.

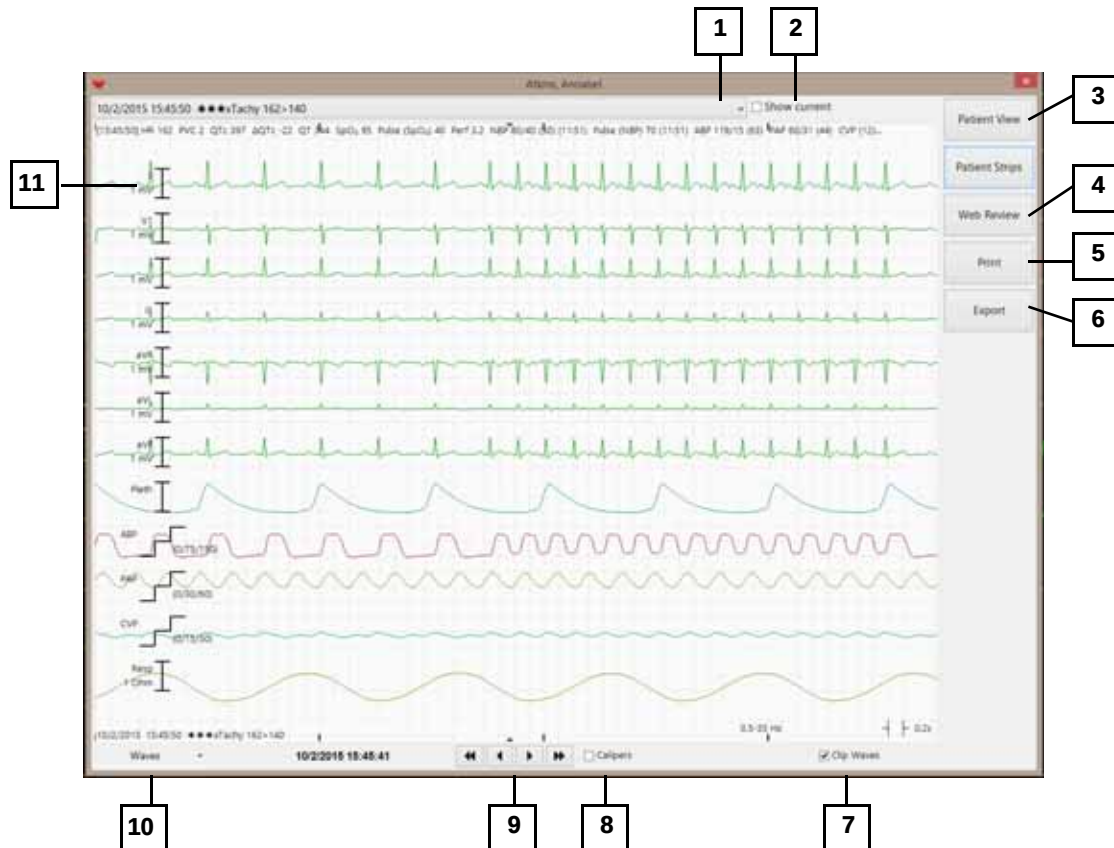
Patient View

After a patient is added to a sector, the **Patient View** button is visible when the sector is in focus. The Patient View provides a detailed view of the waves, numerics, and alarms for measurements that are being monitored. From the Patient View, you can access the Strip chart to annotate, print, or copy strips. You can also view PIC iX Web retrospective data.



Patient Strips

Select **Patient Strips** in the Patient View to review waves associated with the last 20 alarms/events, or to view the most recent stored waves. This application opens with the most recent alarm strip. Annotation can be made and printed or exported.



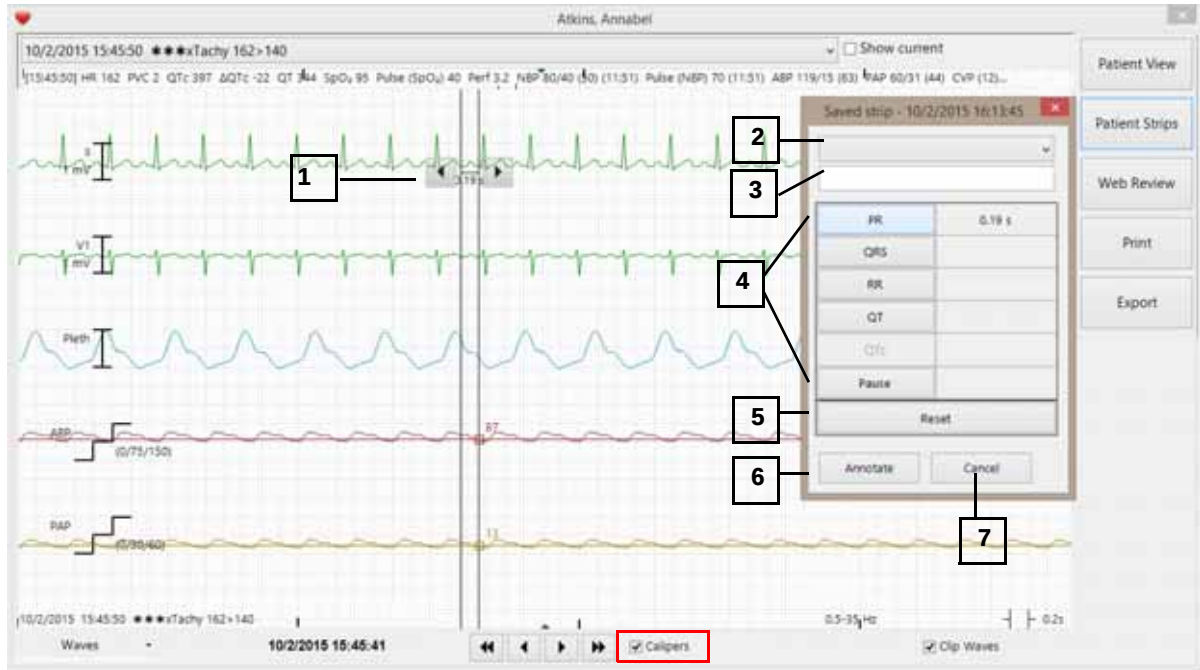
- 1 Select the alarm to view from the drop-down list. Only alarms cached since the time the sector was added are available to view. For older alarms, use Alarm Review in Web Review.
- 2 Select the **Show current** check box to show the most recent stored waves.
- 3 Select **Patient View** to return to Patient View.
- 4 Select **Web Review** to view all stored data in retrospective review applications.
- 5 Select **Print** to send a 30-second strip to the assigned printer.
- 6 If configured, select **Export** to copy and paste the displayed strip to the Electronic Medical Record.
- 7 Select the **Clip Waves** check box to minimize wave overlap. Clear the check box to see full amplitude waves.
- 8 Select the **Calipers** check box to open the electronic calipers (eCalipers) measurement tool. See “Electronic Calipers (eCalipers) Measurement Tool” on page 11.
- 9 Use the right and left arrows to navigate the 30-second strip.
- 10 Select the waves to display from the **Waves** drop-down list. Default is ECG waves.

- 11 Select the calibration bar on the wave to change the wave gain.

Electronic Calipers (eCalipers) Measurement Tool

Select the **Calipers** check box in the strip tile to open the electronic caliper tool for ECG measurements.

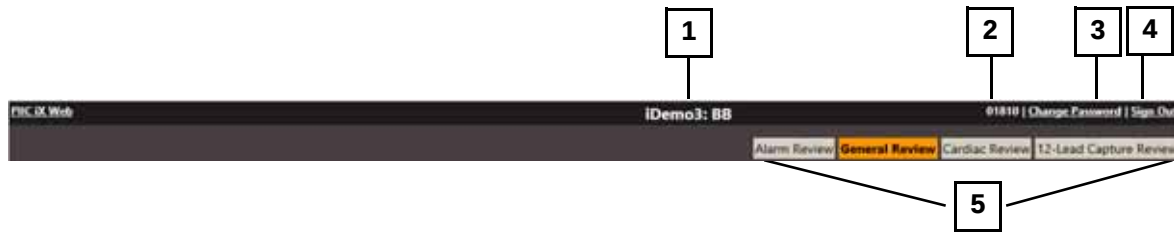
Note — Annotations, comments, and measurements that you enter in Multi-Patient View are *not* stored at the PIC iX Physio Server and are *not* stored locally.



- 1 Click the vertical line where you want to start the caliper measurement, then drag the double arrow to the end point of the measurement.
- 2 Select a label to add to the strip, such as **Complete heart block** or **Atrial Fibrillation**.
- 3 Type up to 30 characters to print on bottom of the strip.
- 4 Select the measurement button on the left to add the value on the right. Choices are: **PR**, **QRS**, **RR**, **QT**, **QTc**, and **Pause**.
- 5 Select **Reset** to clear the measurements.
- 6 Select **Annotate** to add all measured fields to the bottom of the strip.
- 7 Select **Cancel** to close the eCalipers dialog box.

Web Review

The Multi-Patient Web review application opens with Alarm Review. You can choose other review applications in the top right side of the window. The selected review application is highlighted in orange.



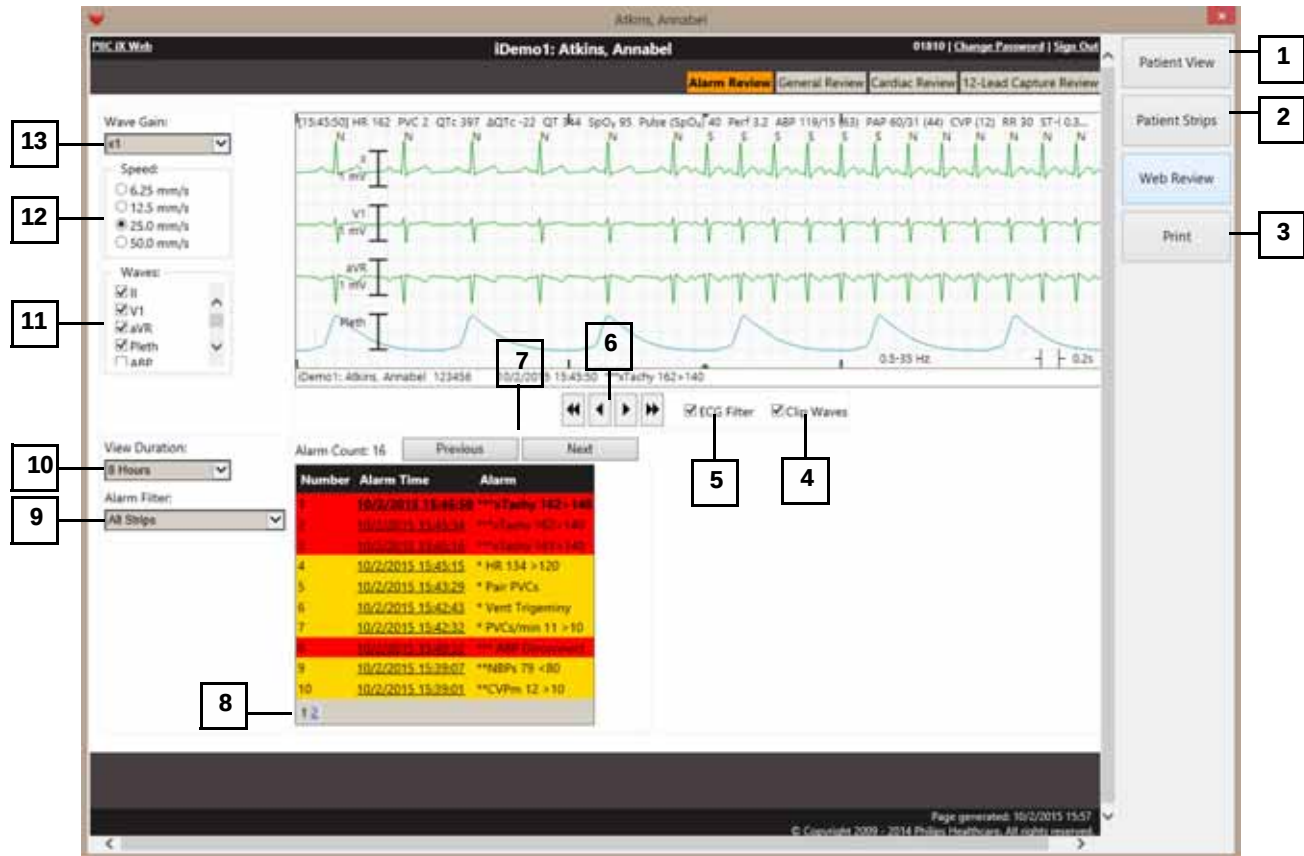
- 1 Selected bed label and Patient Name
- 2 User Name
- 3 Change the user password.
- 4 Log out of Multi-Patient View.
- 5 Select a different application.

Applications

Select	To
Patient Selection	Return to the Patient List to choose a different patient.
Alarm Review	See all alarm strips for a selected View Duration, up to 48 hours.
General Review	View compressed waves, strips, graphic trends or tabular trends, with corresponding alarms and arrhythmia events, up to 7 days.
Cardiac Review	View ECG Full Disclosure, ST Snippets/Map and ECG Statistics in addition to General Review elements.
12-Lead Capture Review	Review all 12-lead ECG captures taken either at the bedside monitor or the PIC iX.
Patient Window	See waves, numerics and alarms of selected patient; view a strip – make caliper measurements and print or copy to a clipboard to paste into patient documentation. Not available on the IntelliVue FlexCare patient monitor.

Alarm Review

Alarm Review displays all stored alarms and saved strips up to 48 hours. The application displays a strip in the top section of the window and a tabular list of alarms on the bottom section of the window. An alarm count above the tabular list corresponds to the selected View Duration and Alarm Filter.



- 1 Select to return to **Patient View**.
- 2 Select to return to **Patient Strips**.
- 3 Select to open a **Print** dialog box that permits printing the strip.
- 4 Select the **Clip Waves** check box to minimize wave overlap. Clear the check box to see full amplitude waves.
- 5 Clear the **ECG Filter** check box to see the ECG wave at 0.05 to 40 Hz. Select the check box to keep the wave on a single flat baseline.
- 6 Use the single- and double-arrow buttons to move through the 30-second strip.
- 7 Select the **Previous** and **Next** buttons to review strips in order, rather than selecting an individual alarm.
- 8 Select a page number to view additional alarms.
- 9 Select the alarm type from the **Alarm Filter** drop-down list, then select the alarm from the tabular list. Default is **All Strips**.

- 10 Select the time period from the **View Duration** drop-down list. Choices are 1 to 48 hours.
Note — To view older alarms, see the Event tile in General Review application.
- 11 Select or clear the check boxes in the **Waves** pane. You can display up to four waves. Default is ECG waves.
- 12 Select the strip wave speed from the **Speed** drop-down list. Default is 25.0 mm/s.
- 13 Select the wave size from the **Wave Gain** drop-down list. Choices are x1 to x4. Default is x1.

General Review

General Review shows all patient monitoring data for up to seven days. You can use multiple data formats to view and correlate two different data types. For example, you can view compressed strips with graphic trends, or view detailed wave strips with alarm and events. The figures and tables in this section describe the tiles and controls that are available in the General Review application.



Tiles Available in General Review

The following tiles are available in the General Review application.

Tile	Definition
Compressed Wave	Default of primary ECG wave compressed for 12-minute duration.
Event	List of all alarms and events for a specific event type, within selected View Duration.
Graphic Trend	Linear trends of selected parameters. Default is Heart Rate.
Strip	Detailed view of waves for a given time period; strip is 30 seconds in duration. See Alarm Review for details of available controls.

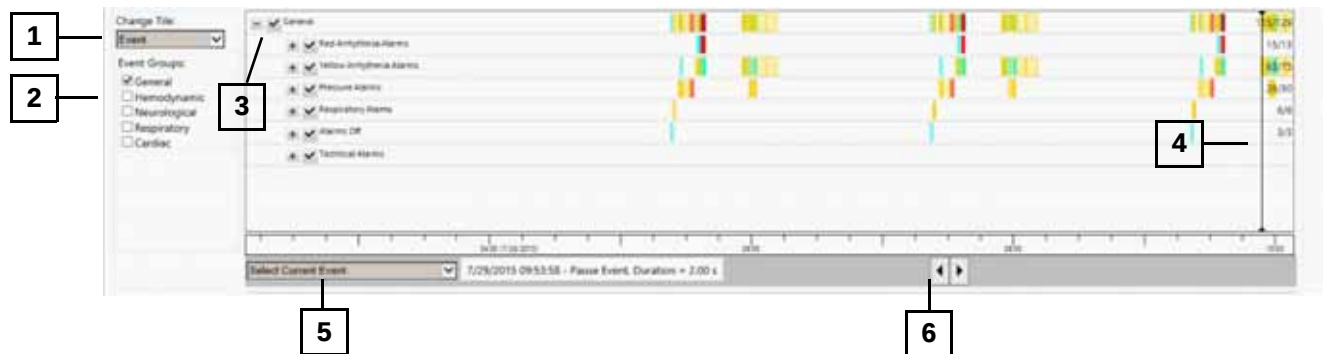
Tile	Definition
Tabular Trend	Displays a list of vital signs sourced during the selected View Duration.
Timeline	Select an area anywhere in the timeline to change the time focus of the displayed data.

Compressed Wave Tile



- 1 Select the Strip view from the **Change Tile** drop-down list.
- 2 Select the duration of the compressed wave view from the **Wave Duration** drop-down list. Default is 12 minutes.
- 3 Select the wave size from the **Wave Gain** drop-down list. Choices are from x1 to x4. Default is x1.
- 4 In the **Waves** panel, select up to four waves to display in the strip. Default is the primary ECG wave.
- 5 Select the double arrows to navigate the compressed wave to a previous or next wave duration, i.e. 12 minutes.
- 6 Select anywhere in the compressed tile to change the time focus to correlate with other data types. A red rectangle indicates the corresponding time selection.

Event Tile



- 1 In the **Change Tile** drop-down list, select the Graphic Trend, Tabular Trend, or Multi-Lead tile.
- 2 In both the top and bottom tile, select the data type to view in the Event Groups pane.
- 3 Select or clear specific events in the selected event group to add or remove events in the view.

- 4 Select anywhere in the tile to change the time focus, shown with a black cursor (thin vertical line).
- 5 Select the list events in view from the Select Current Event drop-down list. Default is the current event based on time focus.
- 6 Navigate to the next or previous event as you view the tile above, such as with the Strip tile or the Compressed Wave tile.

Graphic Trend Tile



- 1 Select Event, Tabular or Multi Lead tile from the **Change Tile** drop-down list.
- 2 Choose the parameter to display on the left side of the tile from the **Left Parameter** drop-down list. HR, if available, is the default.
- 3 Choose the parameter to display on the right side of the tile from the **Right Parameter** drop-down list. SpO2, if available, is the default.
- 4 For the left-side parameter, select the **Show Histogram** check box to display a histogram in addition to the graphic trend.
- 5 Select anywhere in the tile to change the time focus, shown with a black cursor (thin vertical line).

Tabular Trend Tile

	02:30	03:00	03:30	04:00	04:30	05:00	05:30	06:00	06:30	07:00	07:30	08:00	08:30	09:00	09:30	10:00	10:08
HR							120	50	120	120	120	50	120	120	120	80	120
Pulse (SpO2)							80	80	80	80	80	80	80	80	80	80	80
Pulse (ABP)							50	120	120	120	50	120	120	120	58	120	
Pulse (PAP)							140	50	120	120	140	50	120	120	140	98	120
SpO2							85	99	99	99	99	99	99	99	85	99	99
ABP							40	79/40 (151)	121/83 (103)	121/83 (103)	68/29 (39)	122/85 (111)	121/83 (103)		113/74 (90)	121/85 (103)	
RR							20	20	20	20	20	20	20	20	20	20	
PAP							60/31 (44)	25/11 (14)	25/12 (18)	25/12 (18)	60/31 (44)	25/10 (14)	25/12 (18)	25/12 (18)	60/31 (44)	25/11 (17)	25/12 (18)
CI/MI							0	12	12	12	12	12	12	12	12	12	
PVC							0	0	0	0	0	0	0	0	0	0	
ST-I							0.2	0.1	0.2	0.2	0.2	0.1	0.2	0.2	0.2	0.1	0.3
ST-II							0.4	0.2	0.3	0.4	0.4	0.2	0.3	0.4	0.4	0.2	0.4
ST-III							0.1	0.1	0.1	0.1	0.1	0.1	0.0	0.1	0.1	0.0	0.2
ST-wVR							-0.3	-0.2	-0.3	-0.3	-0.3	-0.2	-0.3	-0.3	-0.3	-0.1	-0.3

- 1 In the **Change Tile** drop-down list, select the Tabular Trend, Graphic Trend, or Multi Lead tile.
- 2 Choose the tabular interval from the **Tabular Interval** drop-down list. Default is the NBP interval, which only shows vital signs with an NBP.
- 3 Select any column to change the time focus, indicated with dark gray shading.

Strip Tile

The Strip tile provides a detailed view of waves for a given time period. The strip is 30 seconds in duration. The Strip tile controls are the same as those in the Alarm Review application. See “Alarm Review” on page 13.

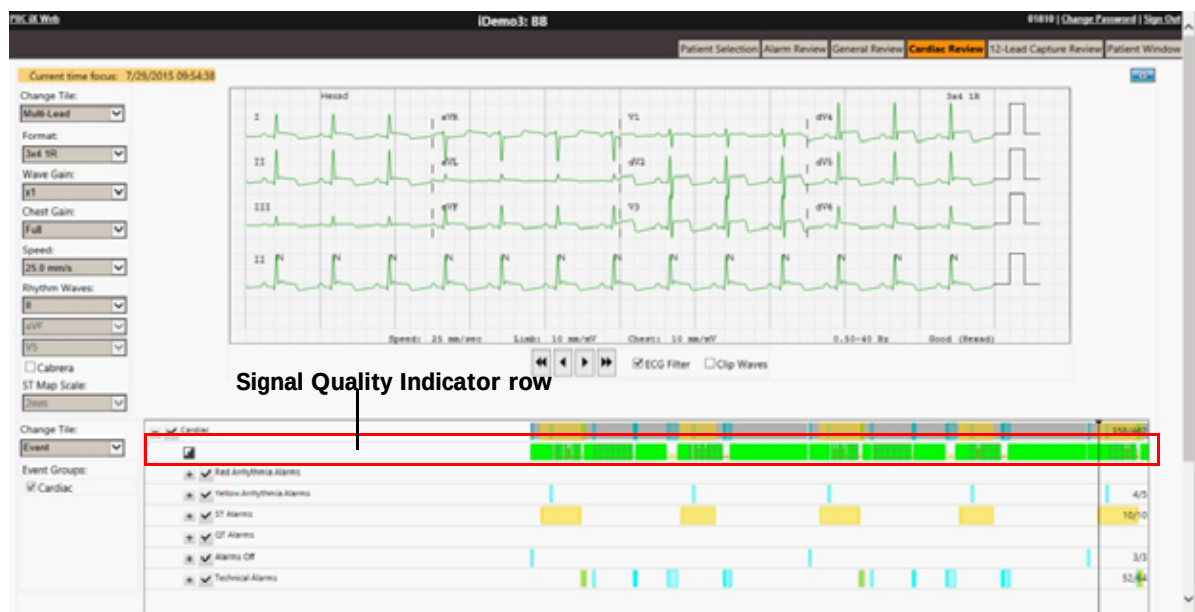
Timeline



- 1 Select the **View Duration** of the Event, Tabular Trend, and Graphic Trend tiles, shown in the white area. Default is 12 hours.
- 2 Select the **Timeline Duration** shown in gray. Default is 24 Hours.
- 3 Select the double arrows to navigate back or forward by one Timeline Duration, up to seven days.
- 4 Select the single arrows to navigate back or forward by one View Duration.
- 5 Select anywhere in the timeline to change the time focus, shown with a black cursor (thin vertical line).

Cardiac Review

Cardiac Review is similar to General Review but includes additional tiles, including Multi-Lead and 12-Lead Full Disclosure, ST Snippets, and ECG Statistics. These additional tiles are described below. For descriptions of the tiles that are also in General Review, see “General Review” on page 14.



Tiles Available in Cardiac Review

Tile	Definition
Compressed Wave	Default of primary ECG wave compressed for 12-minute duration.
Event	List of all alarms and events for a specific event type, within selected View Duration.
Graphic Trend	Linear trends of selected parameters. Default is Heart Rate.
Strip	Detailed view of waves for a given time period; strip is 30 seconds in duration. See Alarm Review for details of available controls.
Tabular Trend	Displays a list of vital signs sourced during the selected View Duration.
Timeline	Select an area anywhere in the timeline to change the time focus of the displayed data.

Tiles Only in Cardiac Review

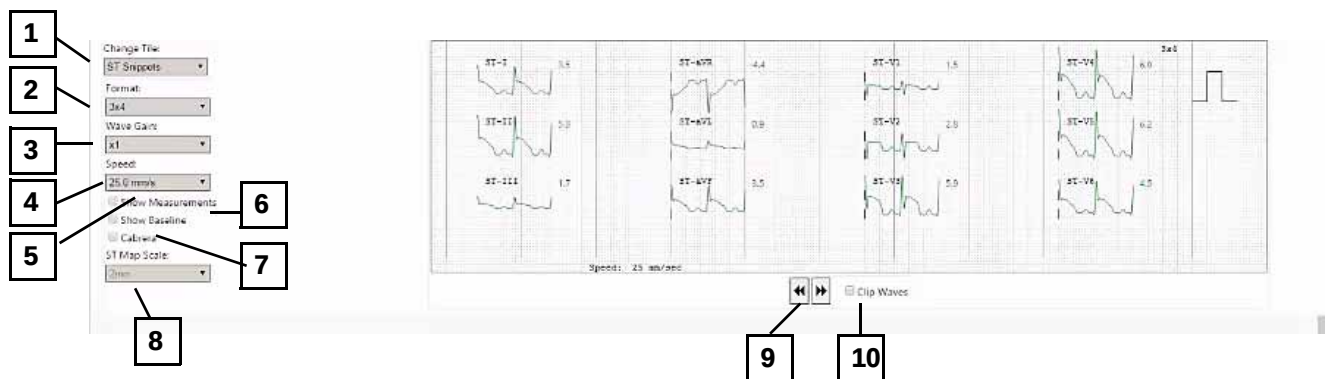
Tile	Definition
Multi-Lead	Displays a retrospective review of waves for all available ECG leads. Multi-Lead or 12-Lead Full Disclosure.
Event tile Signal Quality Indicator row	For Cardiac events, the tile includes a 12-Lead Signal Indicator row (see figure above). Colors represent the signal quality: bright green indicates good quality, yellow for fair, and gray for poor. A grid in the row indicates 10-wire diagnostic ECG waves.
ST Snippets	Displays one-minute averaged ST snippets, shown in Standard or Cabrera Format.
ECG Statistics	Displays all available ECG statistical data generated by the Philips ST/AR algorithm. For example, Percent of time paced, or Atrial Fibrillation, or Heart Rate Variability statistics.

Multi-Lead Tile



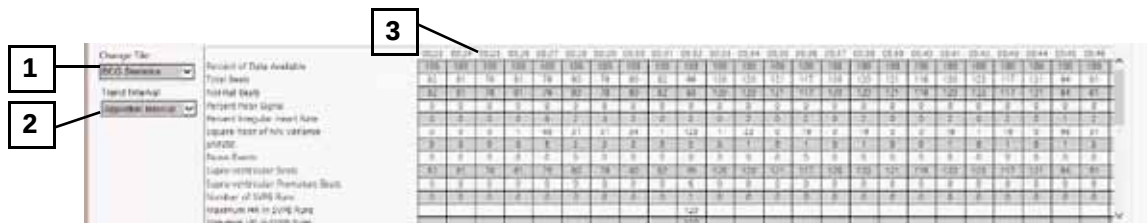
- 1 Select Compressed Wave, Strip, or Multi-Lead tile from the **Change Tile** drop-down list.
- 2 Select the tile layout from the **Format** drop-down list. Default is 3x4 with one rhythm wave (1R).
- 3 Select the wave size from the **Wave Gain** drop-down list. Choices are x1 to x4. Default is x1.
- 4 Select the **Chest Gain**. Based on Wave Gain; choose Half or Full. Default is Full.
- 5 Select the wave speed from the **Speed** drop-down list. Default is 25 mm/sec.
- 6 If the selected format includes a rhythm wave (R), select the 10-second **Rhythm Waves** to display.
- 7 Select or clear the **Cabrera** check box to show Cabrera or Standard format.
- 8 If the selected format includes an ST Map, select the **ST Map Scale**.
- 9 Use the single- and double-arrow buttons to move through the 30-second strip.
- 10 Clear the **ECG Filter** check box to see the ECG wave at 0.05 to 40 Hz.
- 11 Select the **Clip Waves** check box to minimize wave overlap. Clear the check box to see full amplitude waves.

ST Snippets Tile



- 1 Select Graphic Trend, Tabular Trend or Multi Lead tile from the **Change Tile** drop-down list.
- 2 Select the tile layout from the **Format** drop-down list. Default is 3x4 with one rhythm wave (R).
- 3 Select the wave size from the **Wave Gain** drop-down list. Choices are x1 to x4. Default is x1.
- 4 Select the wave speed from the **Speed** drop-down list. Default is 25.0 mm/s.
- 5 Select the **Show Measurements** check box to display ST measurement points with a dotted line.
- 6 Select the **Show Baseline** check box to show the baseline wave and value in yellow.
- 7 Select the **Cabrera** check box to use Cabrera format. Clear the check box to use Standard format.
- 8 If the selected format includes an ST Map, select the scale from the **ST Map Scale** drop-down list.
- 9 Use the arrow buttons to navigate forward and backward in time.
- 10 Select the **Clip Waves** check box to minimize wave overlap. Clear the check box to see full amplitude waves.

ECG Statistics Tile

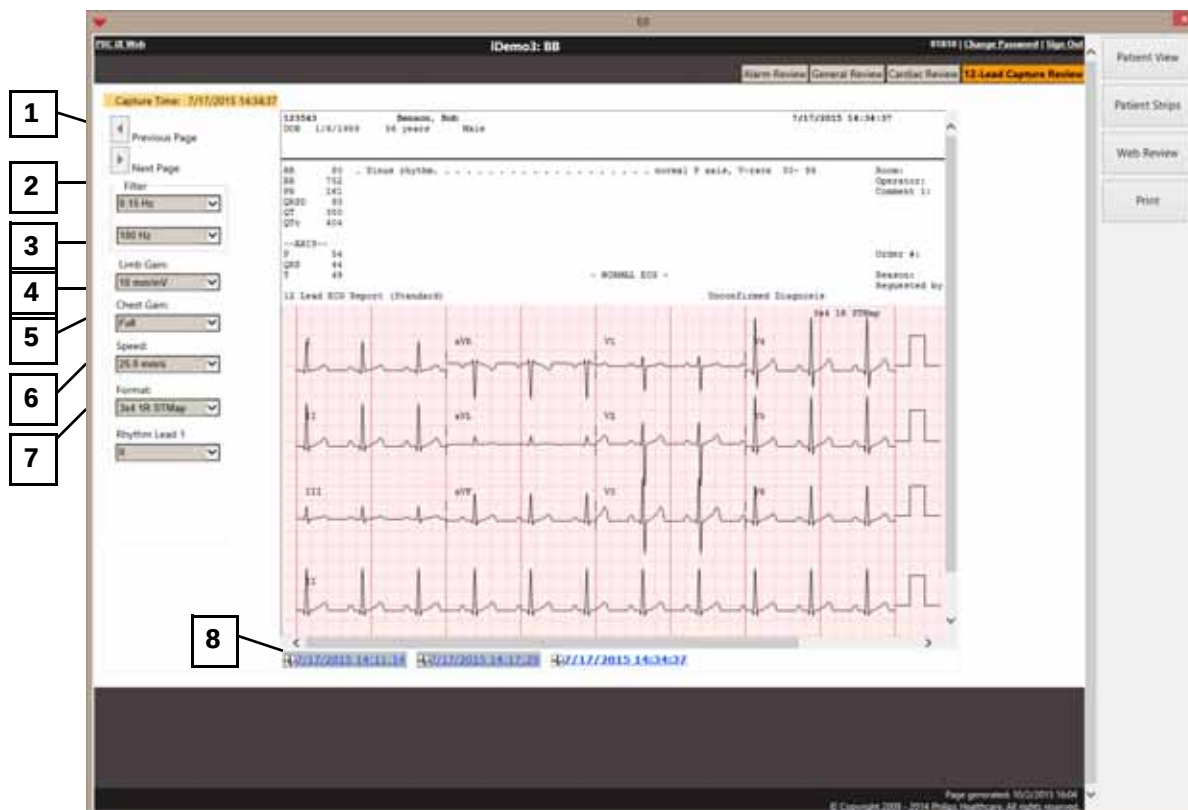


- 1 Select the Graphic Trend, Tabular Trend or Multi Lead tile from the **Change Tile** drop-down list.
- 2 Select the interval of each column in the tile from the **Trend Interval** drop-down list. Some statistics are only available utilizing the default interval of Algorithm Interval, which is generally about one minute.
- 3 Select a column to change the time focus.

12-Lead ECG Capture Review

The 12-lead ECG Capture Review application allows you to review all diagnostic captures within the Philips Patient Monitoring System.

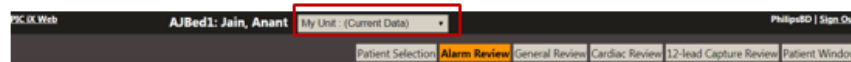
The following figure and table describe the available controls in the 12-lead ECG Capture Review application.



- 1 The **Previous Page** and **Next Page** arrows are only available if the capture requires more than one page.
- 2 Select High and Low pass filters from the **Filters** drop-down list.
- 3 Select limb gain from the **Limb Gain** drop-down list. Choices are from x1 to x4. Default is x1.
- 4 Select chest gain from the **Chest Gain** drop-down list. Based upon Wave Gain; select Half or Full. Default is Full.
- 5 Select the Strip wave speed from the **Speed** drop-down list. Default is 25 mm/s.
- 6 Select the tile layout from the **Format** drop-down list. Default is 3x4 with one rhythm wave (1R).
- 7 Select the 10-second rhythm waves to display from the **Rhythm Waves** drop-down list. Choices depend on the selected format.
- 8 Select the date/time of capture.

Prior Data

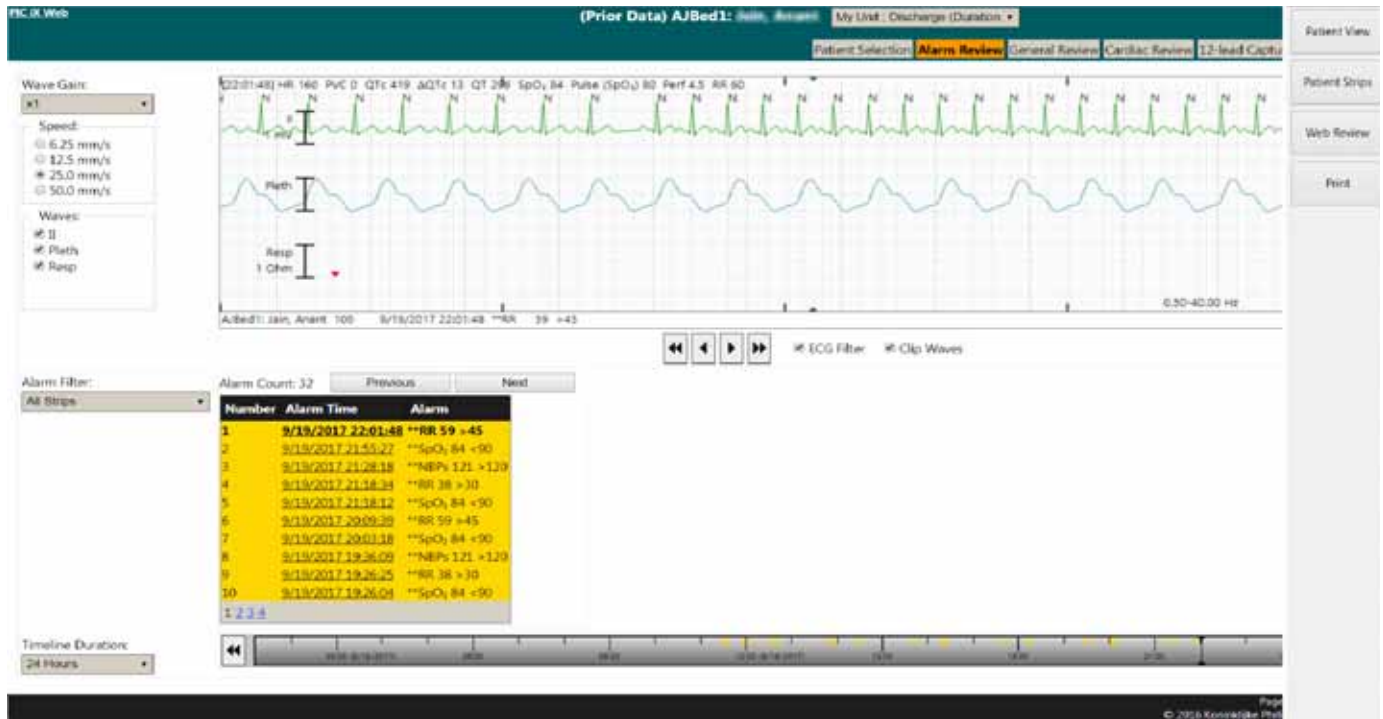
If data has been collected from the monitoring system in more than one patient stay, during either a previous admission or from a different PIC iX unit than the current unit, a drop-down list is displayed next to the name in the applications.



To view data from one stays, select the stay from the drop-down list. Each stay on the list includes the unit and duration of the stay.

The caption bar changes from black to teal and displays **Prior Data** in the caption bar. When you are done reviewing stored data, select the current patient stay from the drop-down list.

PIC iX Multi-Patient View Quick Guide



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