

Physician news

This newsletter is intended to provide physicians with helpful information from Saint Elizabeth Regional Medical Center.

Courtesy of:

Cary Ward, MD
Chief Medical Officer
Charles Reese, MD
Chief of Medical Staff

LOOK before you SPEAK

It is easy to get comfortable when talking with medical colleagues and not pay attention to who else might be able to listen in on sensitive information. Please beware of your surroundings! If you are in a medical unit, the parking garage or an elevator, please take a minute to look and see who might hear some of the protected health information you might be sharing.

Upcoming Events/Reminders

- New Physician Reception Thursday, August 26 • 5:30 pm
Lincoln Country Club
- OB/GYN Committee Mtg • Saturday, August 21 • 8 am • Franciscan Room

Physician Relations Coordinators: **Scott Haas** 219-7091 • **Justin Hartman** 219-7267 • **Vonda Hartsell** 219-7390 • **Vicki Sheridan** 219-5145

CATHOLIC HEALTH
INITIATIVES

**Saint Elizabeth
Regional Medical Center**

555 S 70th Street
Lincoln, NE 68510

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Physician news

August
2010

Quick Notes

- **RRT rates**
Codes continue to decrease. We currently average 30 RRTs/month and average 3 codes outside of CCU each month.

- **SCIP update**
Remember to document beta blocker usage within 24 hrs of surgery. We are currently at 80%, striving for 100%

- **24 Hr H & P Update prior to surgery**
Remember to include the following within 24 hrs:

- H & P reviewed
- Patient examined
- No changes to history



this issue

your patients' satisfaction **p 2**

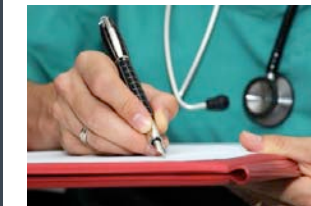
drug shortages **p 3**

infection control note **p 3**

look before you speak **p 4**

Great progress in sign/date/time-*thanks!*

We want to thank you for helping us make great strides in both telephone and verbal orders---getting them signed, dated, and timed within the 48 hour goal mandated by the Joint Commission.



As a reference, in March of this year our compliance rate was at 22%. As of the end of June, we reached 59%! That's a 37% increase!

Please continue to make this a priority; with your help our numbers will reach 100%.

Foam In-Foam Out

At Saint Elizabeth we are educating patient's families, encouraging them to do hand hygiene when they enter and exit the room, as well as reminding all caregivers to do the same. This, as you know, is a serious infection control issue. We are now at 80% with caregivers. We need your help in reaching our goal of 100%.

RELATED NOTES:

- MRSA rates are stable
- C.Diff rates dropped slightly over last year
- Surgical site infection rate for TKA, THA and Spinal surgeries are all below national benchmarks



† Saint Elizabeth Regional Medical Center

Medical jargon --- what patients think

A recent article in the *Wall Street Journal* advises all physicians to get rid of the medical jargon. They say, tell all doctors to stop using MCAT vocabulary words. According to The Centers for Disease Control and Prevention in Atlanta, 9 out of 10 adults have a difficult time following medical advice—mostly because they can't understand it. "This should be a wake-up call to providers to be sensitive to patients' needs for communication, to explain things very carefully, and to make sure they don't use language the patient doesn't understand," says Andrew Karter, a senior research scientist at Kaiser Permanente.

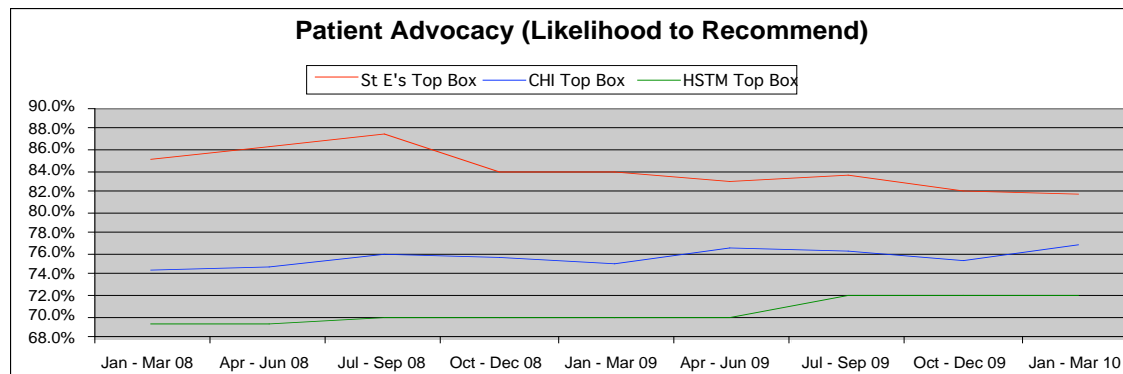
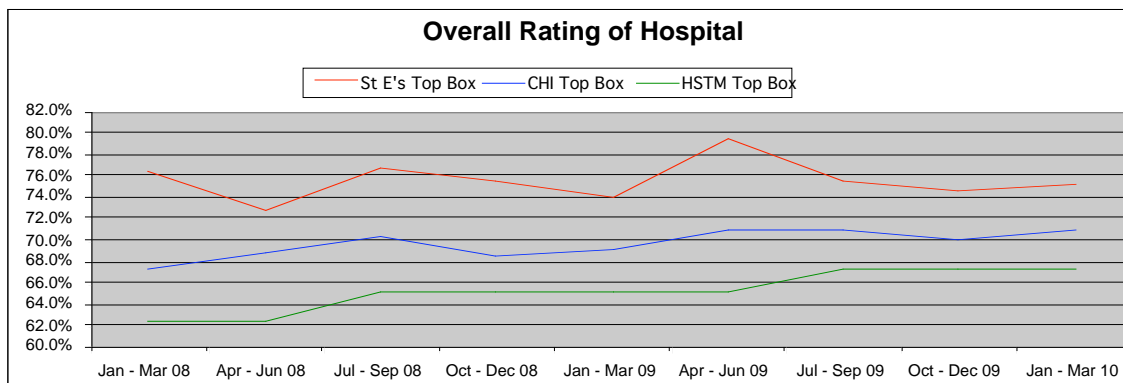
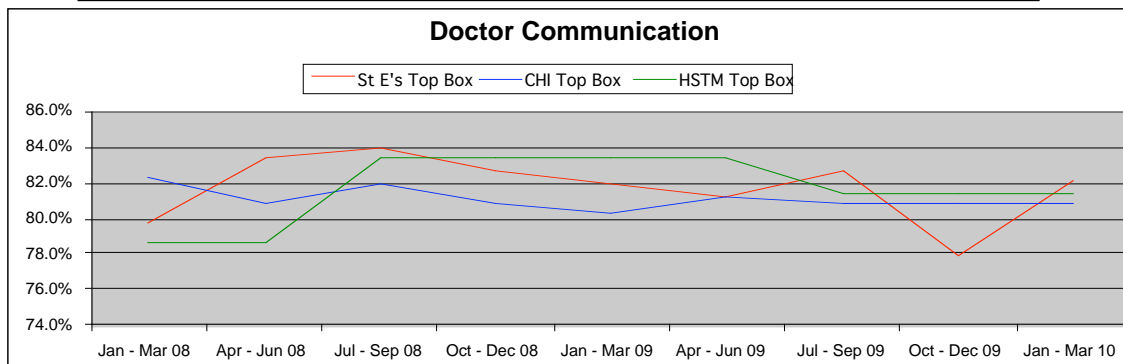


Patient Satisfaction

Doctor Communication, Overall Hospital Rating, and Likelihood to recommend scores are great.

Here are some results we think you will want to know about from the latest Health Stream patient satisfaction data. The graphs below are from the Health Consumer Assessment of Hospital and Provider Services (HCAPS) quarterly data. We want to thank you all for your role in these Patient Satisfaction scores.

Top Box=% of patients who gave the highest rating



Pharmacy Update-Drug Shortages

Questions: Kurt Clyne, Director of Pharmacy, 402.219.7144 or kclyne@stez.org

DRUG	CATEGORY	REASON for SHORTAGE	ESTIMATED RESUPPLY DATE	ALTERNATIVE AGENTS
Kantrex (kanamycin) Injection	Aminoglycoside Antibiotic	Unable to obtain raw materials	Mid to late 2010	Vancomycin & Gentamicin antibiotic solution for banking allograft and autograft
Propofol Injection	Sedative/ Anesthetic/ Ventilator management	An accumulation of particulate matter (Hospira), microbial contamination (Teva) and insufficient production (APP)	June 2010 or later	Midazolam (Versed), dexmedetomidine (Precedex)
Furosemide Injection	Loop Diuretic	1 (Wockhardt) of 2 mfr has discontinued all furosemide; Hospira unknown	Unknown. Receive small allocation	Bumetanide (Bumex)
Intralipid	Fat emulsion	Hospira voluntary recall due to particulate matter found	Unknown	Small inventory left. Prescribers asked to switch from daily use to twice weekly to conserve remaining supply

INFECTION CONTROL

uCatheter Acquired Urinary Tract Infection (CAUTI)

We have NOT had a decrease in the number of CAUTI infections or the number of catheter days since we started our major focus on this issue. This means patients are still not receiving the highest level of care. We ask you to please pay close attention during daily rounds for indications of Foley catheter removal.

uCENTRAL LINES
Our infection rates for Central Line Infections are very low. Thank you for using the full-barrier precautions.

If you have questions about CLIs or any infection, please contact Irene Potter, Infection Control Coordinator at 219.7333 or ikemper@stez.org.

Technology notes - patient tracking

NEW Patient Tracking system color codes location of surgery patients.

As an added convenience for your patients, Saint Elizabeth has a new Patient Tracking system that color codes where each surgery patient is in the surgical process. Families receive a numeric/alpha code to use when checking one of the flat screen TV monitors in the Hospitality Room or the Cafeteria.



SmarTrack® uses words as well as color to identify whether a patient is in pre-op, surgery, recovery, in their room or ready to be discharged.

- Patient in Admitting - Red
- Patient in Short Stay - Blue
- Patient in Surgery - Light Blue
- Patient in Recovery - Yellow
- Patient to Floor or Home - Orange