

Physician Newsletter

Warm Welcome to our New Providers!



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CONTINUING MEDICAL EDUCATION ACTIVITY CALENDAR February 2018

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
	Providence Holy Cross CME calendar ON THE WEB: http://california.providence.org/holy-cross/medical-staff-services/calendars/cme/		1 Cardiology Conference ++ ## Focus: Congestive Heart Failure, Pulmonary Hypertension, Pulmonary Embolic Disease 4:30pm - 6:00pm North Building Conf. Rm. C	2 CME – INFLUENZA AND ZIKA INFECTIONS UPDATE ++ North Building Conf. Rooms 12:45pm - 1:30pm Speaker: Thomas C. Casario, M.D. Emeritus Dean and Professor of Medicine Division of Infectious Disease UCI School of Medicine
5	6 CME – HOMELESS AND THE EMERGENCY DEPARTMENT ++ North Building Conf. Rooms 12:45pm - 1:30pm Speaker: Sean Patrick Nordt, M.D., Pharm.D. Associate Dean, Academic Affairs, Gavin Herbert Endowed Professor of Pharmacy, Chief Medical Officer, Chapman University School of Pharmacy	7 Weekly Tumor Board ++ ## 7:30am - 8:30am North Building Conf. Rm. C	8	9 CME – CANNABIS, WHAT EVERY PHYSICIAN SHOULD KNOW ++ North Building Conf. Rooms 12:45pm - 1:30pm Speaker: Jack Patterson, M.D., F.A.C.C Interventional Cardiology Honorary Providence Holy Cross Medical Center
12	13 CME – JUVENILE ONSET DIABETES ++ North Building Conf. Rooms 12:45pm - 1:30pm Speakers: Matthew J. Freeby, M.D. Associate Director of Diabetes Clinical Services Associate Clinical Professor David Geffen School of Medicine at UCLA	14 Weekly Tumor Board ++ ## 7:30am - 8:30am North Building Conf. Rm. C	15	16 CME – ANTIBIOTIC STEWARDSHIP ++ North Building Conf. Rooms 12:45pm - 1:30pm Speakers: Arthur C. Jeng, M.D. Health Services Los Angeles County Associate Clinical Prof. of Med., Geffen School of Medicine UCLA, Div. of Infectious Disease Olive-View UCLA Medical Center
19	20 CME – EPILEPSY AND SEIZURES ++ North Building Conf. Rooms 12:45pm - 1:30pm Speakers: Claude Guy Wasterlain, M.D. Chief, Neurology Service VA Greater Los Angeles HCS Professor and Vice-Chair, Department of Neurology, Geffen School of Medicine at UCLA	21 Weekly Tumor Board ++ ## 7:30am - 8:30am North Building Conf. Rm. C	22	23 CME – ANTICOAGULATION AND ATRIAL FIBRILLATION ++ North Building Conf. Rooms 12:45pm - 1:30pm Speaker: Noel G. Boyle, M.D., Ph.D. Professor of Medicine Director, Cardiac Electrophysiology Labs UCLA Cardiac Arrhythmia Center
26	27 CME – ETHICS, END OF LIFE ++ North Building Conf. Rooms 12:45pm - 1:30pm Speaker: Ellsworth P. Pryor, MD Infectious Disease CME Medical Director Providence Holy Cross Medical Center	28 NOTE: No Tumor Board Cancer Committee Meeting 7:30am North Building Conf. Rm C	QUESTIONS? CALL KARINA IN THE CME OFFICE: (818) 496-4608	

CMA/PRA Category 1 Credits™ ## Satisfies DHS fluoroscopy permit requirement ** Indicates Patient Safety ^^ Indicates Pain Management ●● Indicates Geriatric Medicine
 Providence Holy Cross Medical Center is accredited by the Institute for Medical Quality/California Medical Association (IMQ/CMA) to provide continuing medical education for physicians.
 Providence Holy Cross Medical Center designates these live educational activities for a maximum of 1.0 **AMA PRA Category 1 Credit™**.
 Physicians should claim only the credit commensurate with the extent of their participation in the activity.
 This credit may also be applied to the CMA Certification in Continuing Medical Education.

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This credit may also be applied to the CMA Certification in Continuing Medical Education.

EFFECTIVE IMMEDIATELY: NO CME GRANTED FOR LEAVING EARLY

We have had many instances where attendees sign in and leave or leave a few minutes after the lecture starts. We are now monitoring this and we will no longer award credit to those that leave less than 30 minutes after the lecture has begun.



MEDICAL STAFF ADMINISTRATION
 15031 Rinaldi Street
 Mission Hills, CA 91346
 Phone: (818) 496-4430
 Fax: (818) 496-4701 or-- (818) 496-1633

Medical Staff Calendar

FEBRUARY 2018

January 2018

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

March 2018

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
				1 Diabetes Committee 12:30pm, CRC Surgery Peer Review Comm 12:30pm, CRB Cardiology Conference (UCLA/Olive View) 4:30pm, CRC	2 CME 12:30pm, Conf. Center PSI-90 Committee 12:30pm, ACR Facilities Conf Rm	3
4	5 Medical Executive Committee 12:30pm, Conf. Center	6 CME 12:30pm, Conf. Center	7 Digestive Health Committee 12:30pm, CRC "SPECIAL" Orthopedic Division 5:30pm, CRC	8 IRB 12:30pm, CRC Pediatric Peer Review 12:30pm, CRB Transfusion Committee 12:30pm, CRA	9 CME 12:30pm, Conf. Center	10
11	12 NEO, Conf. Center Pulmonary Division 12:30pm, ACR	13 Infection Control Committee 7:30am, CRC CME 12:30pm, Conf. Center	14 <i>Valentine's Day</i> Cancer Committee 7:30am, CRC Utilization Review Comm 12:30pm, CRC UR AdHoc Task Force 2:00pm, CRC	15 Medical Records Optimization 11:00am, CRB Bylaws Committee 12:30pm, ACR PVASC Committee 12:30pm, CRC	16 CME 12:30pm, Conf. Center	17
18	19 <i>President's Day</i> Department of Medicine 12:30pm, Conf. Center	20 CME 12:30pm, Conf. Center Cardiology/CVS Review Conf 4:00pm, CRC	21 Anesthesia Division (HC) 6:30am, ACR IDPC 12:00pm, CRC Credentials Committee 12:30pm, CRC	22 Department of OB/GYN 12:30pm, CRC Physician Well Being 12:30pm, ACR	23 CME 12:30pm, Conf. Center PSI-90 Committee 12:30pm, ACR	24
25	26 Medicine Peer Review 12:30pm, CRC	27 Trauma Committee 6:30am - 10:00am, CRC CME 12:30pm, Conf. Center	28 Quality Management Comm 12:30pm, CRC UR AdHoc Task Force 2:00pm, CRC		REVISED 02/01/18_jmp	

Meeting Dates are Subject to Change due to observed holidays: Martin Luther King, Presidential, Memorial, Independence, Labor, Thanksgiving, Christmas, New Year's Days
 ACR = Administrative Conference Room CC = Conference Center (A/B/C) FCR = Facilities Conference Room (Support Service Bldg) ST= South Tower 2/3

Sonia Ramos Medical Staff Manager (818) 496-4609	Judith Medina-Perez Med Staff Coordinator (818) 496-4566	Sue Hannon Med Staff Coordinator (818) 496-4610	Elizabeth Charton Med Staff Coordinator (818) 496-1972	Karina Cardona CME Coordinator (818) 496-4608	Madeliene Carlos IRB Coordinator (818) 496-4021
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****All meetings are subject to change. Please refer to the Google Calendar for updates****

EFFECTIVE IMMEDIATELY

No CME Granted For Leaving Early

We have had many instances where attendees sign in and leave or leave a few minutes after the lecture starts. We are now monitoring this and we will no longer award credit to those that leave less than 30 minutes after the lecture has begun.

PHCMC CAMPUS UPDATES

January 26, 2018 & February 01, 2018

- **“POWER DOWN” scheduled Saturday night, February 24, 6pm to Sunday, February 25, 5am**
ALERT! This is a required annual “power down” for Joint Commission that tests our emergency generator system. This is also a DWP project during which they will be replacing transformers that affect our area/facility. Our HRO Tool of BRIEF, EXECUTE, DEBRIEF is in effect to properly plan for this downtime. Key information for all physicians and caregivers:
 - 1) The “power down” affects all buildings and areas of Providence Holy Cross Campus.
 - 2) The Command Center will be opened and stationed in Nurse Staffing Office.
 - 3) The main hospital and campus buildings will be on “RED PLUG” or generator power ONLY during the entire downtime.
 - 4) Back-up generators will be available in the event of an emergency power failure.
 - 5) Emergency and Trauma services are scheduled to remain open during this time, including the heliport, unless otherwise advised by LA County.
 - 6) Patient food services will be modified for earlier dinner service that evening and a cold breakfast on 2/25 as all service power will be unavailable in both kitchen and Bistro.
 - 7) Café Bistro services will be closed. Arrangements are in process to secure a food truck to be available for caregivers on campus that night.
 - 8) Lanterns, light sticks, flashlights will be distributed to areas as designated by Planning Team.
 - 9) Dialysis treatments will be coordinated as usual, using red plug access.

More details will be communicated as we finalize our operations prior to February 24, 2018. For questions, please contact Heidi Lennartz in Administration, 818/496-4788.

- **PARKING UPDATE – Alemany Filming Ends, Friday January 26**
LOT C of the Visitor Parking area has been closed this week due to the High School’s filming project. All visitor lot operations will resume normally the evening of Friday, January 26, after 6pm. Holy Cross is also finishing the installation of the new parking gates and kiosk this next week. Our target opening is February 15, 2018, 6am. Watch for communication updates! To contact Erin, our Parking Manager, call 1-720-261-5566.
- **IN RECYCLING NEWS...**
The City of Los Angeles started the new “recycLA” program in July 2017. PHCMC is expected to implement best practices by February 2018. As a Silver Leed facility since 2011, we want to support this expectation by using light blue recycling containers and by training and supporting use of these containers. The week of January 29th, EVS management will be distributing light blue REPUBLIC recycling boxes throughout the hospital. The containers should be used for aluminum, glass, metal cans, paper, cardboard items – not food or containers with food or fluids. NOTE: The collecting of cans and bottles from waste baskets or trash bins and removal from the facility is especially discouraged. Cans, bottles,

inanimate objects can unknowingly carry bacteria, viruses, fungus, and parasites. Organisms can live for days and months before considered non-transmissible. EVS appreciates your participation with this new program. We will update everyone as new containers are launched in key areas (Conference Center, break rooms, dining areas).

- **ELECTRICAL CORD REPLACEMENTS, PAPER ON WALLS!**

As we prepare our hospital for our Joint Commission Survey (we're in the window!), we are focusing our environmental rounds on electrical extension cords (only those with CAP COVERS) and we are rounding with fire code compliance in mind - like door wedges, paper taped directly onto walls, and equipment blocking medical gases or door closure. If you have concerns about any issues in your areas, please contact FACILITIES for a consultation in your area, 496-9593.

- **EVERBRIDGE MASS NOTIFICATION SYSTEM**

Security will be re-launching time-sensitive emails with a secured web-link (valid for only 72hrs) for caregiver registration in EVERBRIDGE, our mass notification system, in February. These will be sent to Providence Holy Cross caregivers' email every Monday and Thursday for three weeks. The emails will continue unless you update your profile in EVERBRIDGE. Clicking on the link will take you to the EVERBRIDGE web page and prompt you to update your profile. Once in your EVERBRIDGE profile, please update your phone numbers, especially your cell phone number. Be sure to enter your cell phone number into the CELL TXT & CELL PHONE field, specifically. Once updated, you will be ready to receive mass notifications via cell phone, work phone, and work email. Your information is secured within EVERBRIDGE and not available to any third party entity.

ANNUAL TB EDUCATION

Dear Physicians

We have been having difficulty in the recent past with the premature discharge of Suspect Tuberculosis Patients. When an in-patient is being ruled out for TB, a positive AFB has been returned or a know TB patient is readmitted as required we report this immediately to the Department of Health Services TB Control Unit, once the patient has been reported there should only be two avenues for discharge; 1) We have receive an Approved Discharge Plan from the TB Control Unit of Health Services or 2) The positive AFB smear has been returned with a culture result of Mycobacterium other than TB.

As part of our TB process improvement two changes have been made; 1) Tuberculosis will be highlighted in red, on the patients banner, of the EMR, 2) a TB Alert, nursing order communication will be generated by Infection Prevention Department, indicating: TB Alert - Before Patient is Discharged, An Approved Discharged Plan Must be Received Prior to Discharge. Please Contact Case Manager or Discharge Planner". Order will remain in the patient EMR, until patient discharged.

We will continue to educate the staff at Providence Holy Cross related to this issue in hopes that, encouraged Team Work and Communication will prevent the possibility of this issue occurring again.

Thank you for your support in delivering the Best in Patient Care.

Ellsworth Pryor, MD

Medical Director of Infection Control Epidemiology and Infection Control Mgr.

Providence Holy Cross Medical Center

Ken Archulet, RN

Providence Holy Cross Medical Center

Providence Holy Cross Medical Center

VOLUNTEERS NEEDED FOR COMMUNITY SERVICE TEAMS IN GUATEMALA

Providence St. Joseph Health Global Partnerships, formerly known as Providence Health International, has openings for volunteers on three service teams that will be sent to Guatemala this spring.

Please use this form to submit your application. The trip dates are: April 21-29, May 5-13, and May 19-27.

Global Partnerships organizes service opportunities in collaboration with our partner, [Medical Teams International](#), to meet local needs in Chicamán, Guatemala. As part of our strategic plan to improve the health of villages in this area, volunteer teams work in solidarity with each community on projects they own and maintain locally. Volunteers on these three trips might help build catchment systems for water cisterns, install externally ventilated stoves, or create sanitary latrines.

Those selected pay \$1,000 toward the in-country costs and travel; all remaining costs are covered. A limited number of scholarships are available. Volunteers will fundraise for the cost of their in-country project, and participate in three pre-trip orientations and a post-trip debriefing. All participants are expected to participate in daily team reflections, as well as the work experience.

Please note: The hills in Guatemala are steep. A moderate to high fitness level is required; please apply only if you are able to hike 3-5 miles without difficulty.

Priority is given to people who have not already been on a Global Partnerships team. You must be a current employee of the Providence St Joseph Health family of organizations to apply. Accepted applicants will each make a \$500 non-refundable trip deposit and submit materials required by our partner Medical Teams International in order to secure their spots.

Please see the attached [FAQ sheet](#) for more details about these trips. Caregivers who are interested in learning about community health in the developing world are strongly encouraged to apply. Spanish language ability is very helpful but not required. If you have questions, please email [Global Partnerships](#).

CLINICAL LABORATORY NEWS

Providence Holy Cross Medical center

Clinical Laboratory Newsletter

Date 1/29/16

New Chemistry Analyzer and Reference Intervals for Osmolality.

Effective 1/29/16, the Clinical Laboratory will begin using new analyzer

(Advance MicroOsmometer 3220) to run Osmolality test in-house. The Reference intervals will change as outline in table 1.

Table 1. Reference intervals (Normal Range) for Osmolality

Test	Units	Specimen type	Reference Range	
			New	Old
Osmolality	mOsm/kg	Serum	278-305	275-300
		Urine	300-900	300-900

If you have any questions or comments regarding this change, please contact the laboratory (818-496-4392) or John Yamashita (818-496-4412).

PHARMACY NEWS

Newly Approved Therapeutic Interchange Policy

1. Oral Anticoagulant Medications (under Renal Dosing Guidelines)
2. Multi-dose Inhalers (MDIs) to Small Volume Nebulizers (under Nasal/Respiratory Medications)

You can access these policies at the following link: <https://phs-caphcmc.policystat.com/policy/3827595/latest/>

Drug Shortage – Automatic Interchange Protocol

Due to the shortage of morphine and hydromorphone injections the following automatic interchange protocol is currently in place:

1. **Morphine Injection** to Hydromorphone or Fentanyl Injection:

During shortage of Morphine Injection, pharmacists are authorized to switch a Morphine injection order to Hydromorphone injection or Fentanyl injection.

Order Written As	Converted To	
Morphine Injection	1 st Line	2 nd Line * ¹
	Hydromorphone Injection	Fentanyl Injection
2 mg IV any frequency	0.25 mg IV same frequency	20 mCg IV same frequency
4 mg IV any frequency	0.5 mg IV same frequency	40 mCg IV same frequency
* ¹ if patient is allergic to hydromorphone or if there is hydromorphone shortage		

2. **Hydromorphone Injection** to Morphine or Fentanyl Injection:

During shortage of Hydromorphone Injection, pharmacists are authorized to switch a Hydromorphone injection order to Morphine injection or Fentanyl injection.

Order Written As	Converted To	
Hydromorphone Injection	1 st Line	2 nd Line * ¹
	Morphine Injection	Fentanyl Injection
0.25 mg IV any frequency	2 mg IV same frequency	20 mCg IV same frequency
0.5 mg IV any frequency	4 mg IV same frequency	40 mCg IV same frequency
* ¹ if patient is allergic to morphine or if there is morphine shortage		

Joint Commission Cracks Down on Hand Hygiene

<http://www.modernhealthcare.com/article/20180103/NEWS/180109976>

By Maria Castellucci | January 3, 2018

The Joint Commission will now issue a citation to healthcare organizations if during on-site visits surveyors witness an employee fail to follow correct hand hygiene guidelines.

The change, which went into effect Jan. 1, is intended to improve healthcare workers' compliance with proper hand washing. Poor hand hygiene of healthcare employees is considered a major contributor to hospital-acquired infections. About 722,000 hospital-acquired infections occurred in the U.S. in 2011 and about 75,000 people died with such an infection during their inpatient stay, according to the Centers for Disease Control and Prevention.

The Joint Commission has considered hand hygiene for accreditation since 2004. The accreditor requires healthcare organizations to have a hand hygiene program and to show steady improvement in compliance with the guidelines. A healthcare organization can implement guidelines established by either the CDC or the World Health Organization.

Given the fact that hospitals and health systems have been required to have a hand hygiene program for well over a decade, Joint Commission leaders felt it was time to extend the requirement to ensuring organizations have properly trained all employees to follow the program in their day-to-day workflow, said Mary Brockway, director of clinical research and standards at the Joint Commission.

"We felt this was an appropriate time now to make that change," she said.

A surveyor will now issue a requirement for improvement if he or she witnesses a healthcare worker fail to properly wash their hands before or after engaging with a patient. A requirement for improvement by the Joint Commission requires the organization to submit a plan detailing how they will resolve the issue. The commission follows up with the organization to ensure the correction plan has been implemented.

Brockway said surveyors have ample opportunity to witness clinicians interact directly with patients during the accreditation survey, which occurs every three years. Surveyors follow several patients throughout their care journey so they are in units and can observe patient care first-hand.

Healthcare workers' compliance with hand hygiene programs still remains a challenge. The CDC estimates that on average healthcare providers wash their hands less than half of the times they should.

A hectic workday is likely the main culprit of low compliance numbers, said Dr. John Lynch, medical director of the infection control, antibiotic stewardship and employee health programs at Harborview Medical Center in Seattle.

"Healthcare workers are busy," he said. "Even in the perfect world with great healthcare workers, hand hygiene gets missed."

It is also a task that can easily get redundant. For nurses and technicians who have significant direct patient contact, they are required to wash their hands hundreds of times a day.

Buy-in from key leadership can motivate more employees to comply with hand hygiene guidelines, Lynch said. "We know that if the senior physician doesn't wash his or her hands, the resident isn't going to do it," he said.

And it appears the Joint Commission change has gotten leaders' attention. Chris Hermann, president and CEO of hand hygiene technology company Clean Hands Safe Hands, said he has heard from about 150 health systems in the last three weeks who have asked to know more about the new requirement.

The Joint Commission change also supports a workplace where hand hygiene is openly discussed among employees, Lynch said. "You really need to have a culture where everyone plays a role — the person cleaning

the room can call out the attending surgeon (for not washing his or her hands), the fellow can call out the technician, and not respond to it in an offensive way," Lynch said. "In my own experience, people become less sensitive to being called out, and I think the Joint Commission change reflects that."

Medical Board of California – Newsletter

Fake DEA Agents Extortion Scam

Scam artists posing as U.S. Drug Enforcement Administration (DEA) agents are calling California physicians and consumers as part of an international extortion scheme. The scammers target victims who have previously purchased prescriptions by telephone or the internet and identify themselves as DEA agents or other law enforcement. They tell their victims that purchasing drugs over the internet or telephone is illegal and that enforcement action will be taken against them if they don't pay a fine, usually thousands of dollars.

No DEA agent will ever contact physicians or members of the public by telephone to demand money or any other form of payment. If you receive a call such as the one described, refuse the demand for payment and immediately report the threat using the DEA's online form located here: <https://apps.deadiversion.usdoj.gov/esor/>

For more information, the DEA's news release is available here:

https://www.deadiversion.usdoj.gov/pubs/pressreleases/extortion_scam.htm