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# Seymour Street Journal



What's news...

From the Offices of Stuart Markowitz, MD and Stacy Nerenstone, MD

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*September 4, 2016*

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*"If you want others to be happy,  
practice compassion.*

1990-The first intracardiac and intracoronary

*If you want to be happy,  
practice compassion."*

*-Dalai Lama*

ultrasound in Connecticut was performed by Drs.  
Linda Gillam and Ray McKay.

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[youtube](#) and [twitter](#)

## Chief's Corner

- [Dr. Jack Greene](#), Hartford HealthCare Regional Vice President of Medical Affairs for the Hartford Region and Hartford Hospital

### Just Ask Us!

We have put in place a dedicated email box for the medical staff, called "Ask Jack." The emails will be picked up each day, and I will be responsible for making sure that you receive feedback. Send your concerns to [askjack@hhchealth.org](mailto:askjack@hhchealth.org).

In addition, there is a dedicated email box to ask questions of [Dr. Stu Markowitz](#). Send your questions or comments to [StuandYou@hhchealth.org](mailto:StuandYou@hhchealth.org), and you'll get a response from Stu within 10 days.

### Thanks To All of You for the Superb Epic Go-live

*Dr. Rocco Orlando and Dr. Jack Greene*

We want to give a great **big THANK YOU** to the medical staff for your diligence and sacrifices in preparing for our EPIC go-live.

We pushed the button to bring up EPIC at Hartford Hospital at 8:01 AM on Saturday, August 20. The preparation allowed for a superb go-live.

We also want to thank you for your patience as we work through some of the kinks and adjust to the significant change in how we do much of our work. The positive attitudes and collegiality in helping one another has been extraordinary. We are quite fortunate to have such a great medical staff.

Thank you all again for being part of such a major change which will enhance our ability to seamlessly provide outstanding care for our patients.

Among so many to thank, we also want to give tremendous recognition to **Dr. Marc Palter** (with great assistance from his colleagues **Drs. Spencer Erman and Fadi Hammami**) for the amazing discretionary effort in shepherding the medical staff through the go-live.

### Message from the United States Surgeon General, Dr. Vivek Murthy, About the Opioid Crisis

Dear colleague,

I am asking for your help to solve an urgent health crisis facing America: the opioid epidemic. Everywhere I travel, I see communities devastated by opioid overdoses. I meet families too ashamed to seek treatment for addiction. And I will never forget my own patient whose opioid use disorder began with a course of morphine after a routine procedure.

It is important to recognize that we arrived at this place on a path paved with good intentions. Nearly

two decades ago, we were encouraged to be more aggressive about treating pain, often without enough training and support to do so safely. This coincided with heavy marketing of opioids to doctors. Many of us were even taught (incorrectly) that opioids are not addictive when prescribed for legitimate pain.

The results have been devastating. Since 1999, opioid overdose deaths have quadrupled and opioid prescriptions have increased markedly, almost enough for every adult in America to have a bottle of pills. Yet the amount of pain reported by Americans has not changed. Now, nearly 20 million people in America have a prescription opioid use disorder, contributing to increased heroin use and the spread of HIV and hepatitis C.

I know solving this problem will not be easy. We often struggle to balance reducing our patients' pain with increasing their risk of opioid addiction. But as clinicians we have the unique power to help end this epidemic. As cynical as times may seem, the public still looks to our profession for hope during difficult moments. This is one of those times.

This is why I am asking you to pledge your commitment to turn the tide of the opioid crisis. Please take the pledge at [www.TurnTheTideRx.org](http://www.TurnTheTideRx.org). Together here, we will build a national movement of clinicians to do three things:

- First we will educate ourselves to treat pain safely and effectively. [\*\*A good place to start is this pocket card with the CDC Opioid Prescribing Guideline.\*\*](#)
- Second, we will screen our patients for opioid use disorder and provide or connect them with evidence-based treatment.
- Third, we can shape how the rest of the country sees addiction by talking about and treating it as a chronic illness, not a moral failing.

Years from now, I want us to look back and know that, in the face of a crisis that threatened our nation, it was our profession that stepped up and led the way. I know we can succeed because health care is more than an occupation to us. It is a calling rooted in empathy, science, and service to humanity. These values unite us. They remain our greatest strength.

## **Worse than death?...Dependence**

**By Dr. Ross Albert**, chief of the division of palliative medicine at Hartford Hospital, and the medical director for the Hartford HealthCare at Home Hospice teams. [Pallimed.org](http://Pallimed.org): Aug 14

Every so often, you come upon a study that validates your clinical practice and approach. This was my feeling when I read the research letter "[States Worse Than Death Among Hospitalized Patients With Serious Illness.](#)" (JAMA Internal Medicine. Published online August 1, 2016.)

This study out of Philadelphia surveyed 180 hospitalized patients with serious illness on their views of various health states, and how severe or unacceptable they considered them. What was fascinating was that the scale used was based on death as the benchmark on their Likert scale: "worse than death, neither better nor worse than death, a little better than death, somewhat better than death, or much better than death."

The study revealed that in this group of patients with advanced cancers, heart failure, and COPD, health states with significant dependence on machines and on care from other people were frequently deemed "Worse than death." Greater than 60% of respondents rated bowel and bladder incontinence, bedbound state, and ventilator dependence equal to, or worse than death. For comparison, their findings showed that wheelchair bound state, constant moderate pain, and being home bound were deemed equal to, or worse than death less than 15% of the time.

How can we incorporate this study into our practice? The study and author discussion remind us that

discussing goals of care in the context of simply being alive or not is insufficient. When providers continue treatments that at best would lead to a state of living that patients and families would find worse than dying, they are not practicing person-centered care. As any card-carrying palliative care provider would note, goals of care discussions must continue to focus on patient's values and preferences, hopes and worries. This study helps to validate our approach, and continues to build the literature base in our increasingly evidence-based field.

## ***From the President of the Medical Staff***

***- Dr. Stacy Nerenstone, President of the Hartford Hospital Medical Staff***

### **Come Hear Consumer Reports' Dr. John Santa Speak About OpenNotes**

Dr. John Santa, director of the Consumer Reports Health Ratings Center, will speak on Tuesday, September 27 at 6 p.m. in Gilman Auditorium about OpenNotes, an national initiative to give patients access to the ambulatory notes written by doctors, nurses and other clinicians after a clinical appointment or discussion. The Consumer Reports Health Ratings Center focuses on explicit approaches evaluating and comparing health services, products, institutions and practitioners.

HHIC is looking to adopt OpenNotes, allowing patients to see their clinical documentation, within the next 6-12 months via MyChartPlus.

Please plan on attending, and bringing your questions and concerns about this program, which is now in more than 50 organizations in 35 states, reaching 10 million patients.

#### ***Save the Dates:***

#### **Town Hall Meeting - September 15**

Please join us as we discuss matters of interest to the medical staff.

6:45-7:45 am in the Gilman Auditorium with a light breakfast 6:15am

#### **End of Summer Event at the New Britain Museum of American Art - September 16**

You and your guest are invited to join the Officers and other members of the Hartford Hospital Medical Staff for this special evening to socialize and enjoy each other's company at the New Britain Museum of American Art on **Friday, September 16** from 6-9 pm.

We will have exclusive admission to the gallery spaces including the works of Howard Pyle, Frederic Rodrigo Gruger, N. C. Wyeth, Norman Rockwell, to name a few. The menu will vary depending on the inspiration of the chef at Riverhouse Catering. The evening will feature heavy appetizers, small plates bursting with bold flavors and sweet endings as well as wine, beer and beverages.

Cost is \$50 per person. Dress is cocktail attire. Please respond by August 22. To reserve your space you may drop off your check or credit card form at the Medical Staff Office or mail to: Hartford Hospital Medical Staff Office, 80 Seymour Street, Hartford, CT, 06102-5037, Attention: NBMAA. If you plan to bring a guest, please indicate the name of your guest when registering.

If you have any questions, you may call Cathleen Aquino at 860.972.6167.

***Please put this on your calendar - and join your friends and colleagues for an enjoyable evening.***

## ***From the Hospital President***

***Dr. Stu Markowitz, Senior VP, HHC, and Hartford Region President***

### **Epic Implementation a Major Challenge; Once Again, Our Staff Stepped Up**

Hartford Hospital reached a critical milestone in August with the very successful go-live of the Epic electronic health record system. Epic was implemented at several other Hartford HealthCare organizations earlier this year and will go live at Backus and the Hospital of Central Connecticut in 2017. Once Epic is totally in place, our system will take another giant step forward in providing patients with the five ones: one registration, one relationship, one standard of care, one medical record and one bill. We will be more fully integrated as a system, which will improve care coordination and with that, patient outcomes and patient satisfaction.

The implementation of Epic was a major challenge. Staff members had to juggle their already-busy schedules to first, help structure the system to fit the needs of our hospital workflows and then, to train and practice to use it effectively. It truly has been a massive undertaking. For example, imagine mapping the workflows of our Emergency Department, which has more than 106,000 patient visits annually, or our pharmacy, which manages hundreds of thousands of prescriptions a year. In building the system to fit our complex institution, our staff members had to analyze each step in patient care pathways so that information will flow accurately and easily in the new system.

In addition, consider this: We deployed 575 new carts on the floors; 300 wall arms and PCs; more than 1,400 microphones and bar code readers; and 170 other devices. More than 6,000 total devices had to be validated for compliance with Epic.

And while training and practicing to work with Epic, our staff continued to care for patients with very complicated health issues. Our patient transfer volumes continued to grow, and the complexity of cases continued to increase. And as usual, our staff continued to perform admirably and with great compassion and dedication. While we did make some minor adjustments to our elective volume during the go-live, as a major trauma center and tertiary care center, our volumes remained strong.

I am immensely proud of our staff and very grateful for their commitment and hard work. This transition has not been easy. But once again, our staff stepped up to a major challenge to improve patient care, which is what it's all about. Although we still may encounter some glitches with our new medical record system, I have complete confidence that we will continue to make our hospital an even better place to receive care.

## ***Top News***

### **Congratulations on going live with Epic!**

***Dr. Spencer G. Erman, HHC Associate Chief Medical Informatics Officer***

Each of you has played a part in our success, and we thank you. Epic has dubbed the Hartford Hospital, Institute of Living and Natchaug Hospital go-live as "one of the smoothest". That doesn't mean it was perfect, but that the "bumps in the road" have been bubbled up and resolved without

detriment to patient care.

What were the contributing factors to our success? Good planning, preparation, practice and our strong culture. Training provided 152 unique courses in 32 rooms with over 2,500 classes over the past several months. We now have 11,570 unique users in Epic including about 8,000 clinical users.

The Epic team recognized that our H3W culture was extraordinarily effective in paving the way for communications and teamwork during the transition to Epic. Our H3W behaviors enabled efficient communication flows throughout the organization via daily huddles, leader rounding and planned meetings. Providers and staff leveraged all 10 behaviors with each other to ask and answer questions to drive Epic understanding and deliver excellent patient care.

Thanks again for your discretionary effort as we continue our journey to deliver on our vision to be most trusted for personalized coordinated care.

### **Hartford HealthCare separates CEO, president roles; Jeffrey Flaks to serve as president**

Elliot Joseph, Hartford HealthCare's president and CEO since 2008, will relinquish the former title to chief operating officer Jeffrey Flaks.

Flaks will retain his COO title and shed his previous executive vice president title. The changes will take effect Oct. 1. Flaks will now have responsibility for the direction of clinical operations at the five hospital system.

Joseph, who will remain CEO, said in a statement that the shakeup in corporate duties "recognizes the remarkable evolution and maturation of Hartford HealthCare."

"As our organization matures, we must adapt our roles and processes to reflect our capabilities and priorities," he said.

### **Hartford Hospital's Helen & Harry Gray Cancer Center Named One of 100 Great Oncology Programs**

Becker's Hospital Review has named Hartford Hospital and its Helen & Harry Gray Cancer Center in its 100 hospitals and health systems with great oncology programs for 2016.

We are one of two in Connecticut to be so named, and one of only seven in all of New England.

### **Staffing Changes**

Hartford HealthCare announced title changes and additional duties for two of its senior vice presidents:

- **Tracy Church**, chief Human Resources officer, has been named chief administrative officer, and will add executive vice president to her title.
- **David Whitehead**, chief strategy and transformation officer, will have more oversight of network growth, new venture development and community benefit. He will also add executive vice president to his title.

**Elizabeth ("Beth") Ciotti** has been named vice president for the new Center for Patient Access. The objective of this center is improve access for patients within and across HHC, between HHC hospitals and others. Ciotti, who has previously worked at Hartford Hospital as the manager of bed

management and the transfer center, will join us Sept. 26.

**David Fichandler** has accepted the new position of director of Initiative Integration for Hartford Hospital, effective September 12. Fichandler will collaborate on strategic projects for the vice presidents and will be responsible for working with the executive sponsors and directors for BSC initiatives to develop and execute implementation plans.

## Universal Flu Prevention

Every individual who works, learns and volunteers at HHC is required to receive a flu shot or an approved medical or religious exemption by Nov. 1.

The deadline for submitting medical or religious exemption in Oct. 1. Individuals with existing religious and medical exemptions do not need to reapply.

The use of FluMist nasal spray vaccine no longer satisfies there HHC influenza vaccine requirement because it has been show to be ineffective.

Questions may be addressed to [fluguru@hhchealth.org](mailto:fluguru@hhchealth.org).

To learn more visit the [Flu Prevention](#) page of HHC Connect, <http://hhconnect.org/flu>

## Excellence

### IOL Staff Publishes Article in the American Journal of Psychiatry About Biomarkers in Psychiatric Illness

**MDs Godfrey Pearlson, Elena Ivleva, Matcheri Keshavan and Carol Tamminga**, and PhDs Brett Clementz, John Sweeney, Jordan Hamm and Lauren Ethridge recently published a research article in the **American Journal of Psychiatry** entitled "Identification of Distinct Psychosis Biotypes Using Brain-Based Biomarkers."

The article represents the results of a five-site consortium (of which IOL is one site) that is attempting to reclassify major psychiatric illnesses based on biological abnormalities, rather than symptoms reported by patients.

The main take-home point is that traditional symptom classifications such as "schizophrenia" and "bipolar illness" show no unique biological signatures. Rather, new, biologically-defined diagnostic entities known as "Biotypes" emerge, with characteristic abnormalities that offer novel treatment targets. This is analogous to the revolution in clinical medicine in the 19th century, when traditional entities such as "fever" or "chest pain" began to be classified into separate diseases with unique causes.

### Drs. Underhill, Sadiq, Kiernan and McKay Perform First Two TAVR Procedures in CT on High Risk Patients

On August 4, **Drs. David Underhill, Immad Sadiq, Francis Kienan and Raymond McKay** performed the first two TAVR procedures in Connecticut using the Edward's S3 as part of the recently approved Partner 3 trial on patients with severe aortic stenosis who were considered at risk for conventional surgical aortic valve replacement.

In both patients, the procedure was successful with complete abolishment of their aortic valve gradient and with no evidence of paravalvular aortic insufficiency. All patients with aortic stenosis, regardless of their risk for conventional surgery, can now be considered as potential TAVR candidates.

### Three Medical Education Awards Presented

Three awards were recently presented at the UConn Health Center during the Dean's Symposiums to residents and a medical student who completed research projects at Hartford Hospital. The award winning research projects are:

- **1st prize at UCHC Dean's Symposium for residents:** Electronic Sepsis Alerts and a Supplemental Care Team and its Impact on Patient Outcomes: A prospective study, Dr. Xuan Wang
- **3rd prize at UCHC Dean's Symposium for residents:** Impact of a Geographic Observation Unit on Readmission Rates and Escalation of Care, Dr. B. Considine
- **1st prize at UCHC Dean's Symposium for medical students:** CQI in Glycemic Control in Geriatric patients

### Recent Publications By Our Staff

"Enhancement of psychosocial treatment with D-cycloserine: Models, moderators, and future directions." Otto, M. W., Kredlow, M. A., Smits, J. A. J., Hofmann, S. G., Tolin, D. F., de Kleine, R. A., van Minnen, A., Evins, A. E., & Pollack, M. H. (2016). *Biological Psychiatry*, 33, 737-745.

[.Phenazopyridine for Evaluation of Ureteral Patency: A Randomized Controlled Trial.](#) Propst K, Tunitsky-Bitton E, OSullivan DM, Steinberg AC, LaSala C. *Obstet Gynecol.* 2016 Aug;128

["Development and validation of a laparoscopic hysterectomy cuff closure simulation model for surgical training."](#) Tunitsky-Bitton E, Propst K, Muffly T. *Am J Obstet Gynecol.* 2016 Mar

### Accepted for presentation:

**NSQIP Data Helps Identify Key Patient Subset for Post-Operative VTE Reduction,** C. Lewis, J. Portereiko, R. Spillane, J. Encarnacion, S. Grable, S. Stohler, *American College of Surgeons, NSQIP Annual Meeting, 7/16/16, San Diego.*

**ACS NSQIP Unites Multidisciplinary Professionals to Improve Patient Outcomes.** Orlando Kirton, Jay A. Encarnacion, Samantha Grable, Joseph Portereiko, Witold Waberski, Karyn Butler, Devin Chambers, Aimee McDaniel-Laut, Linda Wood, Patricia Sobieski, Rocco Orlando. *To be presented at the American College of Surgeons October 2016.*

**The effect of different classes of oral anticoagulants and antiplatelets in elderly falls at a Level One Trauma Center.** Wilson, R, Brown S, Lapidus G, Klein E, McQuay J, Joseph D. *To be presented at New England Surgical Society, Boston, MA, 9/16.*

## Research and Academics

### Foundations of Trust: Connecting Our Community to Research

## October 25 and 26

Hartford HealthCare and The Office for Human Research Protections (OHRP) are hosting a Research Community Forum on Tuesday and Wednesday, October 25 and 26, at the Hartford Marriott Downtown Hotel in Hartford, Connecticut. This will be a two day event full of exhibits, keynote presentations, interactive workshops and networking at its finest.

**Tuesday, October 25** features a symposium style format focused on ethical issues of engaging community participation in research. The keynote speaker Camille Nebeker, Ed.D., M.S., is considered an expert in applying human research ethics in emerging technologies. Her presentation for this event is: "Connected and Open Research Ethics: Ethical Research Using Personal Health Data." Several break-out sessions are available in various topics including: the impact of recent federal updates, community engaged participatory research, patient powered research as well as mobile health engagement.

**Wednesday, October 26** is a workshop-style interactive day providing an opportunity for the research community to engage with staff from the Federal Office for Human Research Protections (OHRP). This program will explore various key aspects of human research protection including the direct perspective of former participants.

*This event has been approved for CME and CIP credits.*

[Click here for more information.](#)

## The Hartford Healthcare Cancer Institute Presents: The Basics of Bone Marrow Transplant Lecture Series

6-7 p.m., Hartford Hospital Cancer Center, Taylor Conference Rooms

### ***Sept. 23: Optimal Work-up for HCT Patient***

Memorial Sloan Kettering Cancer Center Lecturer to be announced

### ***Oct. 24: Post-transplant Care for Autologous HCT Recipients: Can We Bring Patients Back Home Earlier?***

Memorial Sloan Kettering Cancer Center Lecturer to be announced

### ***Nov. 28: Post-transplant Care for Allogeneic HCT Recipients: Can We Bring Patients Back Home Earlier?***

Memorial Sloan Kettering Cancer Center Lecturer to be announced

The lecture can also be viewed via videoconference ([meet.cancer@video.hhchealth.org](mailto:meet.cancer@video.hhchealth.org)) at the following locations:

- Backus Hospital, MOB Conference Room
- MidState Medical Center, Conference Room IV
- The Hospital of Central Connecticut Cancer Center, Conference Room A
- Windham Hospital, Johnson Room

Lectures are CME-eligible. For more information, please contact Andrea Dash at [Andrea.Dash@hhchealth.org](mailto:Andrea.Dash@hhchealth.org).

## SAVE THE DATE: 32nd Annual Cardiovascular Symposium

October 5

7:30 a.m.-3:30 p.m.

Connecticut Convention Center, Hartford

Information and registration: [harthosp.org/CVSymposium](http://harthosp.org/CVSymposium)

Please register for this event by calling 1.855.442.4373.

### **SAVE THE DATE: DPH Mandated Education for Physicians**

**October 15**

Backus Hospital will be sponsoring a State Mandated Lecture Series on Saturday, October 15, beginning at 8 a.m. This all-day program will include one hour lectures on each of the DPH mandated lectures for re-licensure for physicians.

Topics covered will be Risk Management, Sexual Abuse, Domestic Violence, Infectious Disease, Pain Management, Mental Health, and Culture Competence.

All disciplines and provider levels are invited regardless of hospital affiliation. Please look for additional information to follow.

### **SAVE THE DATE: Foundations of Trust: Connecting Our Community to Research**

**October 25-26**

Hartford HealthCare is sponsoring a national conference with OHRP entitled "Foundations of Trust: Connecting Our Community to Research."

We look forward to engaging all our colleagues and research partners in this exciting event occurring in Hartford.

Click the link to view the symposium website and register: <https://hartfordhealthcare.org/symposium>

### **SAVE THE DATE: 2nd Annual Blood Management Symposium**

**Friday, Nov. 11, 7 a.m.-3:30 p.m., Heublein Hall**

CME credits are pending. A brochure and registration form will be sent out shortly.

For any questions, please contact Erica Thompson at 860-972-5766.

## ***Accepting New Patients? We Can Help***

### **Help New Patients Find You**

Hartford HealthCare offers physicians a free powerful tool to help reach potential patients. The system-wide "Find A Doctor" search feature on our website helps potential patients connect with appropriate physicians when they need care.

Patients' searches lead to doctors' online profiles, which are based on information physicians provide to the Medical Staff Office. Details on education, specialty, office locations, languages spoken, biography and any promotional videos are displayed, helping patients make vitally important decisions in choosing a physician.

The HHC Planning and Marketing team is committed to making sure this online information is correct. Please spend a few moments reviewing your profile at [HartfordHealthCare.org/verify](http://HartfordHealthCare.org/verify). Click the "Physician Feedback Form" on the right hand side of your profile to submit changes.

You will need your NPI number to verify your identity. The "Accepting New Patients" filter is set as the

default to help patients connect with physicians who are taking new patients. If you are no longer accepting new patients, please let us know. Changes to your profile will be made within three business days.

## **Operational Update**

### **Save the Date for the 2017 Black & Red Benefiting Neuroscience**

Save Saturday, January 28, 2017, for Hartford Hospital's annual gala, the Black & Red. The Hartford HealthCare Neuroscience Institute at Hartford Hospital will be honored at the event, which will feature entertainment by Fitz & The Tantrums.

Funds raised through the 2017 Black & Red will help create the platform to further enhance the research and outcome measurements that will elevate the breadth and depth of neuroscience services in Connecticut. Tickets for the hospital's signature fundraiser will go on sale in the coming months.

See our Sponsorship Opportunities Guide to find out about all event sponsorship options. The deadline to sponsor is Friday, December 16. For questions, contact Carla Burgess, director of development, at [carla.burgess@hhchealth.org](mailto:carla.burgess@hhchealth.org) or (860) 972-1932. For event updates, visit [giving.harthosp.org/blackandred](http://giving.harthosp.org/blackandred).

### **General Internal Medicine Meeting-Save the Date**

**November 1 - Pond House Cafe**

*"Zika virus and new emerging bacteria" - Dr. Jack Ross*

Dinner will be provided.

### **Reminder! Do Your ALICE Armed Intruder Training**

**Deadline extended to December 31.**

Link to training: <http://hhchelp.hhchealth.org/kinetic/login.jsp>

### **Educational Events and Programs Calendar Available**

[Click here to download.](#)

The Hartford Healthcare Cancer Institute has published an Educational Events and Programs Calendar listing all programs and support groups available this fall.

### **Patients in Need of Financial Assistance**

Do you know a patient who is in need of financial assistance?

Hartford HealthCare can provide help to patients in need. Learn more about the program and how to assist patients on HHC Connect: <https://intranet.hartfordhealthcare.org/inside-hhc/patient-support>

## Remind a Colleague: Wash In, Wash Out

All health care workers and patients should feel comfortable reminding any other health care worker to sanitize regardless of their role. This should always be done in a courteous and constructive manner. All health care workers should respond courteously and gratefully when reminded.

If you remind another health care worker to sanitize, and he or she responds with irritation or hostility, please notify their department chief, [Dr. Jack Greene](#) or [Dr. Jack Ross](#), who will communicate with them to prevent recurrences.

## Improving Doctor-to-Doctor Communication: TigerText

### A Free Tool To Help You

We all want to do what is best for our patients. Problems in communication between hospital providers, consultants, and community providers has been identified as a major source of dissatisfaction for both patients and physicians. And it can lead to gaps in patient care.

Hartford Hospital has invested in a tool to help providers improve communication. It is a HIPAA compliant texting service called TigerText, and we are offering it to the medical staff at no charge.

TigerText allows a provider to send brief text messages, with patient identifiers, to another provider on the system. Examples of texts include quick reports of a procedure, notification of discharge, questions about medications, etc. There is an option to alert people if you are on vacation, and the notices that are sent are marked as read when they are opened by the recipient.

We are anxious for all of our Medical Staff to enroll in this free application. It is VERY easy to use, even for those of us who have problems with new technology. We urge everyone to register and get on this useful and HIPAA compliant system today-it will make your job easier and improve patient safety.

- Here is a TigerText Request form with directions on how to get TigerText: [You can download the form here](#)
- For further help with this, feel free to contact [John.Rogalsky@hhchealth.org](mailto:John.Rogalsky@hhchealth.org) (860-972-3207).
- Any problems not resolved by the TigerText Help line can be referred to [Dr. Marc Palter](#) at [Marc.Palter@hhchealth.org](mailto:Marc.Palter@hhchealth.org).

### TigerText Support

For Hartford Hospital users, TigerText support can be obtained by calling the Hartford HealthCare help desk at 860-545-5699 and choosing option #6; or by calling TigerText Pro support directly at 650-564-4722.

For issues related to password recovery, a helpdesk call is required and will be routed to the Mobility team.

## Hartford Hospital Media Coverage

### Media Coverage Wrap-Up

**Dr. Deborah Feldman** appeared live on FOX 61 on Aug. 19 to talk about a new study that suggests women who are pregnant and take acetaminophen are likely to have children with ADHD.

[https://youtu.be/fndy\\_UGGtnY](https://youtu.be/fndy_UGGtnY)

**Dr. Scott Hannan**, program director for the School Refusal Program at the Institute of Living's Anxiety Disorders Center, appeared live on FOX 61 Sept. 2 talking about a clinical trial he is doing on school anxiety.

**Dr. Michele Petrucelli** appeared live on FOX CT on Aug 14 talking about heat dangers.

<https://youtu.be/o6nEVe4OBN>

**Dr. Andrew Salner** was interviewed on WNPR's "Where We Live" discussing medical marijuana, and physician certification.

**Dr. Andrew Salner** was interviewed on WTIC AM radio about Becker's Hospital Review recognizing the HHC Cancer Institute as one of the Top 100 Great Oncology Programs in the country for 2016.

<https://soundcloud.com/hartford-healthcare/dr-salnerbeckers-review-top-100-cancer-centers/s-Dx9LJ>

**Dr. Laura Saunders** will be participating in the Hartford Courant Conversations on "Navigating the Social Age: Our Love/Hate Relationship with Social Media" on October 18 at the Connecticut Science Center.

**Dr. Patricia (Trish) Sheiner** spoke on FOX 61 about the importance of organ donation on Aug.

19. <https://youtu.be/Z3Q1cJtUSSA>

## Connect to Healthier on NBC-CT

HHC's two-minute "Connect to Healthier" segment airs each Sunday at 9:20 a.m. and it's posted fresh each Monday on HHC Connect, our Intranet.

- **Hartford Hospital Global Health Initiative** and the great volunteer work of our staff: August 20. <https://youtu.be/0voGcxXsA1I>
- A FAMILY IS THANKFUL TO THE LIFE-SAVING TEAM AT HARTFORD HOSPITAL AFTER THEIR FATHER COLLAPSED AFTER A RUPTURED ABDOMINAL AORTIC ANEURYSM. <https://youtu.be/rkcGMtLju-s>
- **Total Shoulder Outpatient Surgery** - Roy Davidson had the region's first total shoulder outpatient surgery. He did not stay overnight, but had surgery and was able to go home the same day. His story highlights newer options in surgical pain treatment; many patients have to stay in the hospital for pain control, but newer, longer-lasting nerve blocks mean fewer prescriptions for potentially addictive narcotics. Those who are candidates for this kind of surgery are able to go home sooner. This two-minute segment airs each Sunday on NBC-CT at 9:20 a.m. [Watch it here.](https://youtu.be/VoiE7VWeUXU)<https://youtu.be/VoiE7VWeUXU>
- **Errace - "Everyone Run/Ride Against Cancer Every Day."** Together, Dr. Andrew Caputo and his wife Allyson launched the ERRACE organization to raise awareness and money for cancer rAugust 28.
- **Nerve blocks for headache** - Kate Wizeman is pregnant with her first child, but migraine pain made pregnancy unbearable. She went to six different doctors seeking help when she finally met HHC headache specialist **Dr. Brian Grosberg**, who gave her a new option: nerve blocks. [Watch it here.](#)
- **TAVR** - Dr. George Paul was too frail for open heart surgery but had severe aortic stenosis that was causing his heart to fail. He was one of Hartford Hospital's first patients to undergo TAVR, a minimally invasive choice for valve replacement. Four years later, Dr. Paul is an active 97 year old who appreciates his second chance at life. [Watch it here.](#)

- **A Grateful Patient** - John Myers didn't know that his heart was failing. In just nine days, he survived two heart attacks and would undergo quadruple bypass surgery at Hartford Hospital. Watch him read a special poem to the team at cardiac rehab that helped him through such a difficult time. [Watch it here.](#)
  - **NAVY MEDICAL OFFICERS TRAIN AT HARTFORD HOSPITAL** - Medical Officers with the U.S. Navy could train anywhere in the world... and they choose Connecticut. Four times a year, medical officers with the US Navy head to Hartford Hospital and the Center for Education, Simulation and Innovation... or CESI. [Watch it here.](#)
  - **Don't let Parkinson's hold you back.** How dancing can help!  
<https://hartfordhealthcare.org/services/movement-disorders-center/service-locations>
  - **Hartford HealthCare at Home** Opens Doors in Bloomfield  
<https://hartfordhealthcare.org/about-hartford-healthcare/news-press/hhc-at-home-opens-in-bloomfield>
- Can texting save lives?** You can help. Become a volunteer!  
<http://www.crisistextline.org/join-our-efforts/volunteer/>
- **HHC plain language initiative** and helps it make sense to an external audience:  
<https://www.dropbox.com/s/h7rdmaf027b1bph/060816%20CTH%20Plain%20Language%202.mov?dl=0>

## Upcoming News Service Content; Share Your Stories

The Hartford HealthCare News Service is actively creating content with media partners across the state. Please let us know if you have great patient stories to share. Share your stories with us so we can share them to a wider audience.

### [Connect to Healthier](#)

Sundays in the 9 a.m. hour, we broadcast a two minute health segment on NBC CT.

### [Medical Rounds](#)

Partnership with WFSB. Weekly live interview from the HHC studio at 5:45 p.m.

### [HealthCare Matters radio program](#)

Every month, Elliot Joseph highlights an important health care related topic with nationally recognized experts on CBS affiliate WTIC-am, NewTalk 1080, Connecticut's largest and most popular talk radio station

### [Healthier Connections](#)

Monthly partnership with FOX CT.

### [CT STYLE](#)

Monthly partnership with WTNH.

HHC YouTube page: <https://www.youtube.com/user/HartfordHospitalCT>

[Link to contact information across the system: Hartford HealthCare Media Relations Team](#)

## Voices of Our Patients

### Kudos to Dr. Rachana Kanaujia

*Dr. Kanaujia,*

*Thank you so much for the care and compassion that you showed our mother, Carol Mann. We have all been impressed with the professionalism, courtesy, and sensitivity that you and your staff gave us.*

*You all helped us through the most difficult time of our lives and we will be forever grateful. You in particular, helped us make tough decisions and gave us knowledgeable, wise medical opinions.*

*Please convey our heartfelt thanks to everyone on the second floor of Conklin. You gave my mother the dignity she deserves. We are lucky to have all of you at Hartford Hospital.*

*Gratefully,  
The family of Carol Mann*

## CME Applications

### Interested In Hosting a CME Event?

In order to ensure that your educational event meets the standards established by the ACCME and the CSMS, the HH CME department has established the following deadlines for submission of CME applications.

*To ensure a timely review of your application, we strongly recommend advance planning for all events.*

- Complete applications for a recurring series such as Grand Rounds must be submitted **at least 4 weeks prior** to the planned activity.
- For a conference, course, or symposia, a complete application must be submitted **at least 12 weeks prior** to the event. We strongly encourage activity planners to contact the HH CME department at least 6 to 12 months prior to the date of the course in order to begin the planning process.

We have developed educational resources to assist planners with the application process. Please contact the HH CME office at [ContinuingEd@HHHealth.org](mailto:ContinuingEd@HHHealth.org) or (860) 972-5816 to schedule an appointment with our team to discuss your CME needs.

### State Mandated CME Renewal Available Free To HH Doctors through HealthStream LMS

State mandated CME for physician license renewal is available free on the Hartford Hospital HealthStream Learning Management System.

You will need your Employee ID to access HealthStream. If you need the CME Programs, but do not have a HealthStream ID, a Temporary ID can be provided for you.

Please email [HealthStream@HHHealth.org](mailto:HealthStream@HHHealth.org) and request an ID and password for CME Courses. You will receive an email with the ID, password and instructions for accessing the courses.

To access HealthStream, use the link from the intranet, or click [here](#). Once you login, click on the Catalog tab and search for CME to view the available courses.

Once you have passed the post-test and evaluation, you will be awarded a printable CME certificate. Your CME will also be maintained and easily self-service accessed on the HealthStream site, should you need a copy in the future.

Please note that your Risk Management required activities through MRM will provide your Risk Management CME.

## HH In the News

### Many docs wary of Medicare reimbursement shift

*Hartford Business Journal: August 15*

The Medicare Access and CHIP Reauthorization Act that Congress passed last year, better known as MACRA, represents a major change in how doctors will be paid for treating Medicare patients.

The Centers for Medicare & Medicaid Services is looking at quality and cost in the new system, said Matthew Katz, CEO and executive vice president of the Connecticut State Medical Society. "If you save the system money, you get added payment," he said. "If you cost the system money, compared to a benchmark, you lose some money. That's essentially the structure."

Between 4 and 9 percent of a provider's Medicare reimbursement in the next few years will be based on two new reimbursement structures in MACRA from which physicians will choose: The merit-based incentive payment system, or MIPS; and alternative payment models, or APMs.

For missing performance thresholds, there will be maximum penalties of up to 4 percent in 2019, 5 percent in 2020, 7 percent in 2021, and 9 percent in 2022 and beyond, AMA said. Exceeding the performance threshold, physicians can earn bonuses on a sliding scale, with the highest bonus at least as high as the highest penalty for that year, AMA added.

**Dr. Courtland Lewis**, an orthopedic surgeon in the Hartford HealthCare Bone & Joint Institute at Hartford Hospital, is already operating under an APM through a bundled-payment program. While his group has made significant cost improvements to patients' overall care, specifically post-discharge as more patients rehab at home instead of inpatient rehabilitation facilities, the group hired two nurses to help patients navigate from presurgery through 90 days postsurgery.

However, the group still is not able to hit Medicare price targets, meaning it's costing more to manage the program than the group is getting back through it and it won't get any easier under MACRA as price targets adjust, Lewis said. Lewis thinks the answer is to pilot alternative-payment models until there's a high level of confidence they'll work in the real world across different geographies and patient populations. He also fears MACRA's impact on solo and small practices. The logistics of participating in such programs are substantial, he said.

"It takes resources, it takes people," Lewis said. "If you're in a big practice like I am, even though it's single-specialty practice, you've got a prayer of a chance because we've got some folks whose job it is to help us collect the information."

## In the HHC System

## **Area hospitals get \$1.4 million in Medicare settlement**

**Republican-American: Aug. 25**

Five hospitals in the region collectively received more than \$1.4 million last year as part of a \$1.5 billion settlement with Medicare involving hundreds of hospitals nationwide.

The Centers for Medicare & Medicaid Services recently disclosed how much 2,022 hospitals were paid in June 2015 to settle long-running Medicare disputes in response to a Freedom of Information Act request filed by Kaiser Health News. The data show that 22 Connecticut hospitals received payments totaling about \$25 million.

**Hartford Healthcare was given almost \$8.6 million across five hospitals, including \$3.5 million for Hartford Hospital, \$3.4 million for The Hospital of Central Connecticut and \$1 million for William W. Backus Hospital.**

Bristol Hospital received the most out of the region's hospitals (\$609,429) while Sharon Hospital was given the second largest amount of \$546,338 the data show. Griffin Hospital in Derby placed third with a payment of \$151,956, followed by Waterbury Hospital getting \$128,036 and New Milford Hospital receiving \$12,956.

John Dempsey Hospital in Farmington received \$4 million, the largest amount of any hospital in the state.

Other Connecticut hospitals receiving the largest amounts include: Greenwich Hospital, \$2 million; Hospital of Saint Raphael in New Haven, \$1.9 million; Middlesex Hospital in Middletown, \$1.6 million; Bridgeport Hospital, \$1.1 million; and Norwalk Hospital, \$954,724. Danbury Hospital was given \$626,787, the data show.

Nationwide, New York Presbyterian Hospital received the largest payment (almost \$16 million) followed by North Shore University Hospital in Manhasset, N.Y., which got \$14.5 million.

The payments came after the government offered in 2014 to pay the hospitals 68 percent of the value of inpatient claims ensnared in Medicare hearings and appeals, some for years. The \$1.5 billion payout settled 346,000 claims for reimbursement for treating Medicare patients on or before Oct. 1, 2013.

## **Headache Specialists Explore Underlying Causes, Personalized Treatments**

### **Hartford Magazine**

For years, migraines have been poorly understood and challenging to treat effectively. A major treatment obstacle has been the subtlety of how they present and what causes them. Brain tumors and aneurysms, a weakening of blood vessels, which both can cause severe headaches, are easier to detect and that has given neurologists and oncologists a place to start treatment.

But migraine headaches, which can come on suddenly, often with vision loss or disturbances, sensitivity to light and sound, and tingling in arms and legs, all in advance of a severe throbbing headache frequently accompanied by lightheadedness, nausea and vomiting.

Even without treatment, the estimated 38 million migraine sufferers in the United States alone typically get back to their daily lives within 72 hours after an attack. Yet after experiencing a first migraine, the biological odds are that sufferers will have more. For some, the attacks will be rare; for others they may occur several times a month.

Headaches, with more than 300 types now identified, have been "an intangible" in medicine, mostly because the scientific understanding is still developing, said **Dr. Brian Grosberg**, a neurologist and headache specialist who directs the Hartford HealthCare Headache Center.

Grosberg is among the new wave of medical specialists working to improve the lives of all headache sufferers, but particularly those whose headaches are debilitating.

"A migraine isn't just a headache," Grosberg said. "It's a neurological condition with a constellation of symptoms that people experience."

Despite recent advances in the treatment of migraines, what actually causes them is not fully understood. Why more women than

"A multi-disciplinary approach is needed in order to provide an optimal level of care for each patient," Grosberg said, "because no two people with headache or migraine have the same preferences" when it comes to treatment. Hartford HealthCare is one of 60 centers nationwide approved by the FDA to offer acute migraine patients seeking relief the option of trying transcranial magnetic stimulation.

## *Health Care News In the Region*

### **UConn Med School's new curriculum reflects changes in health care**

**Hartford Business Journal: Aug 18**

The UConn School of Medicine is launching a new curriculum for the newly arrived class of 2020 to reflect rapid changes in health care, according to report in UConn Today.

The new four-year program is called MDelta, "Making a Difference in Education, Learning, and Teaching Across the Curriculum." It has three stages: exploration, clinical immersion and transformation.

Each student will be assigned to a primary care physician in an outpatient practice at UConn Health to gain clinical care experience and follow the health of patients over three years. They also will be assigned to teams for a long-term hospital rotation in Hartford, seeing a diverse population.

Students will gain inpatient and outpatient experiences, from internal medicine to surgery, to prepare them for their sub-internship, critical care and emergency medicine rotations, and their transition to a residency "bootcamp" course, UConn Today said.

The goal of the new curriculum is to produce doctors, innovators and scientists of the future who have outstanding skills in clinical care, research and scholarship, UConn said.

The new curriculum also centers around individual and team-based learning at every turn. Students will rely daily on their in-depth REALM (Remote Active Learning Materials) to prepare for their team-based learning experiences, patient case studies and clinical skills training. The online materials include reading assignments, online videos, games, case studies, and interactive educational tools.

Students will also become skilled on the use of the electronic medical records.

The class of 2020 includes 100 medical and 49 dental students, the largest ever.

## *Hot Topics in Health Care*

## **How Does Connecticut Measure Up In Fight Against Cancer?**

**CT News Junkie: Aug 23**

Connecticut is getting mixed reviews in its fight against cancer, according to a new report from the American Cancer Society Action Network.

Connecticut scored well in six of the 10 public policy areas that can help fight cancer, including tobacco cessation services, tobacco tax levels, palliative care, increased access to health coverage through Medicaid, oral chemotherapy fairness, and funding for breast and cervical cancer screenings.

Nationally, the report found that only four states met six out of the 10 benchmarks measured. Maine and Massachusetts are the only two states to meet seven out of the 10 benchmarks. Oral chemotherapy fairness legislation is the most met benchmark with 42 states and the District of Columbia considered "doing well."

In Connecticut, the report highlights its failing to adequately fund state tobacco control and prevention program funding, leaving many of those who want to quit smoking without a tool to help them kick the deadly addiction, and opening the door for youth to pick up a cigarette for the first time.

## ***Coming Events***

### **World Suicide Prevention Day**

**September 9 (Friday)**

### **The Hartford Medical Society Presents "The Upcoming Presidential Elections"**

**September 14 (Wednesday)**

Presented by Attorney Kevin F. Rennie

Town and County, 22 Woodland Street, Hartford

5:30 p.m. Registration & Cocktails (cash bar)

6:15 p.m. Dinner, followed by program

Registration is \$20/member, \$35/guest or non-member, and includes cash bar, dinner, and presentation. If you have questions please call the HMS office at (860) 586-7573.

### **Medical Staff End of Summer Event**

**September 16 (Friday)**

6-9 p.m., New Britain Museum of American Art

Join the Medical Staff Officers and your colleagues from the Hartford Hospital Medical Staff for a unique opportunity to socialize and enjoy each other's company. More details to follow!

## **Hartford Hospital Auxiliary Benefit Golf Tournament**

**September 19 (Monday)**

The 27th annual Hartford Hospital Auxiliary Benefit Golf Tournament will be held on **Monday, September 19**, at Tumble Brook Country Club in Bloomfield.

This year's beneficiary is the Department of Nursing Education and Research. For more information about the golf tournament or to make a donation the silent auction and raffle, please contact Lori Flaks at [lbflaks@yahoo.com](mailto:lbflaks@yahoo.com) or Amy Steinberg at [asteinberg74@gmail.com](mailto:asteinberg74@gmail.com).

## **SAVE THE DATE: October 25-26: "Foundations of Trust: Connecting Our Community to Research."**

Hartford HealthCare is sponsoring a national conference with OHRP entitled "Foundations of Trust: Connecting Our Community to Research."

We look forward to engaging all our colleagues and research partners in this exciting event occurring in Hartford.

Click the link to view the symposium website and register: <https://hartfordhealthcare.org/symposium>

## **The Hartford Medical Society Presents "Civil War Hospital Newspapers"**

**October 26 (Wednesday)**

Presented by Dr. Ira Spar

Town and County, 22 Woodland Street, Hartford

5:30 p.m. Registration & Cocktails (cash bar)

6:15 p.m. Dinner, followed by program

Registration is \$20/member, \$35/guest or non-member, and includes cash bar, dinner, and presentation. If you have questions please call the HMS office at (860) 586-7573.

## **General Internal Medicine Meeting**

Save the Date- November 1

Pond House Cafe

"Zika virus and new emerging bacteria"

Dr Jack Ross- Dinner Provided

## **Department of Medicine 2nd Annual Blood Management Symposium**

**Friday, Nov. 4, 7 a.m.- 4 p.m.**

**Heublein Hall**

No charge. Light breakfast and lunch will be served.

**5 hours CME for medical professionals**

To register, call 1.855.HHC.HERE

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