Medical Staff Newsletter

RADIOLOGY CORNER
Reminder to all physicians and physicians’ office staff: the Radiology Department relocated to the Collier Wing in September, 2015.
  • When sending patients for imaging procedures/services at Hendrick Medical Center, patients should be directed to the Jones Building Admissions for the check-in process. The physical address is 1924 Pine Street.

*If you have any questions, please call Centralized Scheduling at 325-670-4270, Jones Admission at 325-670-4423, or Radiology at 325-670-2101.*

If you are approached to perform research and the person requesting to do the research does not have a completed approval document on HMC letterhead with the signature of Greg Perry, PharmD., then the research has not been approved to be carried out at Hendrick. Even if they have an IRB approval letter that is consistent with the IRBs listed on the Federal Wide Assurance it still is not approved at HMC.

*Please have them contact Greg Perry for further discussion at 325-670-5550.*

Blue Cross
It has been confirmed that Hendrick Health System entered into a new multi-year agreement with Blue Cross to provide in-network access to Hendrick services, effective March 1. The BlueAdvantage HMO plan, found on the federal exchange, will remain out-of-network at Hendrick.

*If you have any questions, please contact Jim Lowery, director of managed care, at (325) 670-3889 or by email at jlowery@ehendrick.org.*

Clinical Informatics continues to work with physicians to provide the necessary tools and resources they need to effectively manage patient care. Currently a video library is under construction to help with Fluency Direct voice recognition. This will consist of short, easy, concise and basic video lessons on different parts of dictating using Fluency. The videos can be accessed anytime physicians need new or refresher information. More information will be forthcoming. For now, please continue to call Randy Uthe at 670-2233 for any needs pertaining to Fluency and Randy Uthe or Ruth Hutchins at 670-2906 to assist in physicians’ workflow enhancement.

Additionally, contact Ruth Hutchins for convenience of order set creation. Order sets can streamline order entry during rounding and discharge. Call 670-2906 to schedule one on one sessions.

There will be an American Heart Association conference at Hendrick on 03/07/16, in the Shelton Building Auxiliary Conference Center, 2000 Pine Street, Abilene, Texas, entitled, Elements of High Quality—STEMI and Stroke Conference. Professional credit will be available for physicians, physician assistants, nurse practitioners, nurses, and EMS. The AHA is providing the credit for this event. For more information and to register for this event, use this link: https://learn.heart.org/activity/4165595/detail.aspx Contact Martee Tebow in Performance Improvement, 325-670-3648, if you have questions or need assistance.
Talmadge Trammell, M.D. was selected Physician of the Quarter.

There will be a reception on Thursday, March 10, 2016, at 2 p.m. in the Auxiliary Conference Center. Please join us to congratulate Dr. Trammell.

Active Staff
William H. Nesbitt, M.D.
Cardiology
1201 North 18th St.
Abilene, TX 79601
Phone: 325-793-3100
Fax: 325-793-3195
NPI 1386608370

Reenu Eapen, M.D.
Pediatric Cardiology
1850 Hickory St.
Abilene, TX 79601
Phone: 325-670-6690
Fax: 325-670-6593
NPI 1881663342

New Address/Phone
Mariela Agosto-Rivera, M.D.
Internal Medicine
TeamHealth Hospitalist Group
1900 Pine St., Room 6409
Abilene, TX 79601
Phone: 670-6410
Fax: 670-6454
Dr. Agosto-Rivera is no longer an internist in private practice but is now a full time hospitalist.

G. Noel Chant, M.D.
Cardiology
1150 N. 18th St., Suite 400
Abilene, Texas 79601
Phone: 670-4694
Fax: 670-4688
Dr. Chant now works at Hendrick Cardiac Rehab and is no longer at Cardiology Consultants.

New Allied Health Professionals
Robert Scott Scarnechia, CRNA
Primary Sponsoring Physician: Jeremie Perry, M.D

Zika Update
Zika virus is a mosquito-borne disease that is currently causing outbreaks in much of Central and South America. Though this disease tends to be mild (only about 1 in 5 infected individuals will show signs and symptoms of disease), there is growing concern over the link between Zika and infants born with microcephaly to Zika-infected mothers. At this time, CDC guidance is centered around pregnant women and women who may become pregnant and the prevention of this disease. Providers are encouraged to take a thorough travel history as well as history of vector exposure in individuals presenting with fever, rash, joint pain, or conjunctivitis. CDC is encouraging everyone to reduce the risk of mosquito bites to prevent transmission of this disease.

For more information, please see www.cdc.gov or call the Infection Prevention Department at 670-4300.

CMS is starting to reject diagnoses provided by physicians because of lack of specificity. ICD 10 coding is required by CMS and ICD 10 coding requires greater specificity in the diagnosis and procedure documentation.

If CMS denies payment to the hospital, it is only a matter of time before it impacts physician office billing.

Examples:
- **Chronic kidney disease**: requires stage
- **CHF**: requires type and acuity
- **Pneumonia**: requires bacterial, viral, aspiration, causative organism if known, can say presumed bacterial
- **Angina**: must specify stable or unstable
- **Sepsis**: specify where the infection originated and the causative organism, if known.
  
  *For example, did the patient have a UTI, cellulitis, or pneumonia which caused the sepsis.*

*If you need help with clinical documentation/specificity, you may contact the Clinical Documentation Information (CDI) Coordinators: Julie Snow, RN, BSN 670-6571 or Tess Tolentino, RN, BSN, 670-6511. Dr. Toby Williams is the CDI physician advisor.*

Physicians must report their calendar year 2015 PQRS (Physician Quality Reporting System) scores by March 31, 2016. Failure to do so will result in CMS penalizing 2% of calendar year 2017 Medicare revenue. For more information use the following link: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Downloads/2015-EHRReportingMadeSimple.pdf

Solu-Medrol Shortage
Solu-Medrol supplies at Hendrick are almost depleted. Buyers for Hendrick Pharmacy Services have been instructed to purchase more hydrocortisone injection and dexamethasone injection. Some clinical pearls to be aware of when selecting an alternative to Solu-Medrol:

- **Glucocorticoid** = anti-inflammatory.
  - Dexamethasone/betamethasone – little to no mineralocorticoid activity = high doses do not cause edema, etc, excellent anti-inflammatory.
  - Mineralocorticoid = salt, fluid retention.
    - Hydrocortisone – more mineralocorticoid, less glucocorticoid, increased edema, fluid retention.

*Solu-Cortef is recommended by Greg Perry, PharmD. Contact Greg at 670-5550*