

Addiction symposium headlines fall CMEs

Addictions, ranging from alcoholism to eating disorders, and behavior modifications for uncontrolled or threatening anger will be addressed by a panel of experts at the Addiction and Compulsive Behaviors Symposium Oct. 24 at Western Baptist Hospital.

The event is open to all healthcare professionals, offering five credit hours for physicians and 4.8 hours for nurses. Continuing education credits may be available for other professionals, including counselors, pharmacists and social workers.

Topics and speakers include:

“The 12 Steps – An Insight into the Science, Spirituality and Discipline of How They Work,” Burns Brady, M.D., addiction consultant for The Healing Place in Louisville.

“You Mean I have to be Nice AND Smart?,” James T. Jennings, M.D., medical director of the Kentucky Physicians Health Foundation.

“Post Traumatic Stress Disorder – The Next Level,” Phil Herndon, M.A., clinical director, Center for Professional Excellence, Nashville.

“Eating Disorders as an Addiction,” Tennie McCarty, L.C.D.C., founder, CEO and co-owner, Shades of Hope Treatment Center.

“Chasing the Balloon – A Historical Perspective of the Search for the Addiction Cure,” Robert W. Mooney, M.D., medical director, Willingway Hospital.

Registration begins at 8:30 a.m. in the Baptist Heart Center auditorium. The event concludes at 3 p.m. Register by Oct. 21 by contacting Sherry Jones at (270) 575-2723 or sjones@bhsi.com. The fee is \$30.

Other CMEs for physicians

Evening Tumor Conferences
6:30 p.m. dinners in Meeting Rooms A and B

Sept. 22 Metastatic Disease with Curative Intent
Alexander Parikh, M.D.

Oct. 27 Management of Non-invasive Breast Cancer
Speaker to be announced

Welcome new physicians

Cardiothoracic Surgery

Nicholas M. Lopez, M.D.

Orthopedic Surgery

Clint Hill, M.D.

Brian Kern, M.D.

K. Brandon Strenge, M.D.

Radiology

Eric Hatfield, M.D.

Amy Oberhelman, M.D.

Neurology

Jacqueline Carter, M.D.

Obstetrics-Gynecology

Amber Savells, M.D.

Hospital Medicine

Kenneth Afenya, M.D.

Smithson Ahiabuike, M.D.

Ramesh Alwarappan, M.D.

Glenn Puertollano, M.D.

Web site to aid in recruitment

The list of new physicians shows the fruits of many efforts by the recruitment department to continue to meet the medical needs of the region, said Pat Harrod, director of physician relations.

To aid in recruitment, a Web site for potential physicians and recruitment firms has been posted at choosewesternbaptist.com.

Not only is it important for the physician to have quick, thorough access to placement opportunities,” Harrod said, “but also the spouse is able to get a sense of the community.”

Visit the new site to see the showcase of practice opportunities and community highlights. “Lifestyle is what new graduates are looking for,” Harrod said.

Officers, committees forming

Medical staff officers and committees are forming for 2010.

Janice Barrett, Medical Staff coordinator, provides this update:

Officers – Nominations are being accepted for president-elect and director of surgery service.

Committees – William Conkright, M.D., is the new chair of Research

Oversight Committee, and Peter Locken, M.D., is chairing Advanced Practice Professionals Committee.

Others interested in working on committees should notify Barrett at (270) 575-2551.

Coming soon

The Medical Staff soon will have a department page on BEN, featuring by laws, documents, policies, procedures and meeting announcements.

Census list training now available

Patient census lists soon will be available for printing only from Physician Portal.

The lists will replace those currently generated by The Precision Alternative, placed in the Physician Lounge before morning rounds.

Before the TPA list disappears, physicians need to be trained to print and customize the list to accommodate preferences. Schedule training with Peggy Setinsek or Stephanie Koon in Clinical Informatics at (270) 575-8384.

Baptist Health Line takes 'direct admits'

A registered nurse at Baptist Health Line, our 24-hour call center, is now handling your direct admissions.

Simply call Admitting at (270) 575-2636 any time 24/7.

The Baptist Health Line nurse will answer and take the patient information, including orders. Since Baptist Health Line nurses now assign beds, this means faster service for your patient upon arrival.

For more information, contact Marchita Sutton, R.N., program manager, at (270) 575-2917.

Emergency focuses on customer service

The Emergency department is working on a process based on LEAN to increase customer satisfaction and reduce waiting.

Director Patricia Scott, R.N., said triage is being reworked to get the patient into an exam room earlier for examination and diagnostics. Facilitating admissions, using the Bedboard and getting initial orders have decreased admission delays.

Heart failure discharge orders available in Optio

Discharge orders for heart failure patients – designed to reduce hospital re-admissions – have been posted in Optio to allow physicians to individualize orders for a variety of settings after hospitalization.

Data from the Centers for Medicare & Medicaid Services shows that one in five patients will be re-admitted within a month of discharge. It is estimated that three-quarters of them may be preventable.

The orders, developed by a task force from Western Baptist and Baptist Home Health, provide a focused post-acute plan, including indicators, such as ace inhibitors and angiotensin

receptor blockers. If the patient is indicated for home health care, the orders give the home health nurse direction to treat the patient's congestive heart failure exacerbation and prevent an avoidable re-admission to the hospital.

Director Melanie DeFreitas said Baptist Home Health's care plan includes education on disease management, emergency care and medication management. "Utilization of these orders can be a vital link in reducing re-hospitalizations and providing quality care," she said.

The task force formed following the implementation of CMS' Care Transitions Project.

Coding changes coming in October

Some diagnosis codes used by hospital and physician offices for billing will change in October, including examples:

- DVT codes have been broken into two types: acute or chronic. Documentation in the office and in the hospital will need to reflect this for accurate code assignment.
- New codes for hypoxic-ischemic encephalopathy are mild, moderate or severe. For optimal code assignment, documentation needs to clarify severity.
- If a patient has aplastic anemia due to chemotherapy, the physician will need to document it as such. If not, it will code to unspecified anemia.

Coding queries

The hospital's coding staff may have questions regarding documentation in the hospital chart. We try to keep these questions to a minimum; but when clarification is needed, the coder has the obligation to query the physician.

The coder will fax the question to your office and assign a deficiency for you in PIM as "addendum to Discharge Summary." A shorter version of the

query will appear in the "Reason" line in PIM to refresh your memory of the needed addendum. Only a brief addendum is needed.

Sometimes, questions from clinical documentation specialists arise while the patient is still in-house. These will appear in the Progress Notes section of the chart. Prompt response to these clarifications may prevent a query after discharge.

Discharge dictation

Although Discharge Summaries are required within 30 days, they should be dictated the day of discharge.

Many times, the coder needs the final Discharge Summary before the chart can be coded and released for billing. When a Discharge Summary is dictated months after a patient's discharge, it is usually brief and incomplete, not providing the needed documentation for optimal coding.

For coding information or assistance contact coding manager Stacey Atkins at ext. 2539 or director Vickie Kennedy at ext. 2109.