

WHAT'S UP DOC?

PHYSICIAN NEWSLETTER OF LAKEWOOD REGIONAL MEDICAL CENTER

DAVID HAMM, JR., M.D.

David Hamm, Jr., M.D. passed away peacefully on June 2, 2011. Born in Long Beach on April 30, 1922, to Marie Lane and David A. Hamm, he graduated from Wilson High School and University of South California School of Medicine. He graduated number one in his class and distinguished himself as a remarkable diagnostician. After completing his residency at LA County Hospital, Dave established his medical practice in Lakewood, becoming the first Board Certified Internist in the area. Dave was a founding physician of Lakewood Regional Medical Center and served as Chief of Staff and Chairman of the Governing Board.

His patients were lovingly loyal, aware of his rare combination of compassion, diagnostic skills, and authentic humanity. Besides medicine, Dave was passionate about music; gardening, which he learned from his father and brother Don, both of whom worked for Park Nursery; golf, and his pets. Dave is survived by his loving wife Rose, his devoted children Greg and Beatrix Hamm, Vicki and Steve Johnson, David and Nancy Hamm, and Heather and Jon Rohrer; his grandchildren, Michael Hamm, Benjamin Hamm, Amy Bell, Chelsea Swensen, Garrett Johnson, Fabrizio Hamm, and Juliet Rohrer; great-grandchildren,

Chloe Bell and Erling Swensen; sisters, Helen Blincoe and Rose Marie Fuss; and his nurse of 48 years, Audrey Broersma. A memorial service will be held Friday, June 17th at 2:00pm at Rolling Hills Covenant Church, 2222 Palos Verdes Drive N., Rolling Hills Estates. In lieu of flowers, the family requests a donation to the Scholarship Fund at the Division of Physical Therapy, University of Southern California, 1540 Alcazar Street, CHP 155, Los Angeles, CA 90089; to Classical KUSC at the University of Southern California, P.O. Box 77913, Los Angeles, CA 90007; or to a charity of your choice.

MOBILE APPLICATION NOW AVAILABLE FOR LRMC

Lakewood Regional Medical Center today launched a mobile application to further connect the hospital to community members and increase access to health-related information. The mobile application, powered by WorldLink, is available as a free download for iPhone™, iPad™, iTouch™, Android™ and coming soon, BlackBerry™.

The application allows users to access:

- ER Wait Time – launches mobile web browser to view hospital's emergency room wait time;
- InQuickER – allows user to register a time of a visit to hospital's emergency room;
- Map and directions;
- Call Us – a list of frequently-called hospital numbers;
- My Data – an area to list allergies, emergency contacts, important contacts, insurance information, medical history, physician contacts and medications;
 - ✓ First Aid Guide;
 - ✓ Health Library; and
 - ✓ Physician Finder – find a physician online

"Every day, people look for ways to manage their health care. Mobile applications provide a convenient and easy way to access health-related information," said Joseph Badalian, "We're excited to offer this emerging technology to members of the communities we serve."

A survey from the Pew Research Center's Internet & American Life Project reported that 17 percent of cell-phone owners have used their phone to look up health information, with young adults aged 18-29 (29 percent) and Hispanics (25 percent) as the top users. In addition, a research2guidance report estimates that 1.4 billion people worldwide will have smartphones by 2015, and one in three people will have a health-related application on their phones.

To download the application of your choice, please visit www.lakewoodregional.com.

DOWNLOAD OUR
FREE APP



MESSAGE FROM DR. KELVIN A. BAGGET, CMO, TENET HEALTHCARE

Since launching Commitment to Quality in 2003, Tenet has made significant strides in our endeavors to improve the quality of medical care and patient safety by evaluating processes and promoting evidence-based medicine through continuous performance improvement. Based on our internal data, Tenet's overall quality performance on the CMS publicly reported core measures is currently above 97 percent, which is better than the national average of 95.3 percent.

Due to our clinical leadership, Tenet representatives were afforded a seat at the table and provided input regarding a new public-private partnership, the Partnership for Patients, which was designed to improve patient safety within hospitals. The partnership was launched on April 12, 2011 by U.S. Department of Health and Human Services (HHS) Secretary Kathleen Sebelius and CMS Administrator Don Berwick. Tenet was one of the first hospital systems in the country to join the partnership. The two main goals of the partnership are to lower the number of preventable hospital-acquired conditions by 40 percent and reduce preventable readmissions by 20 percent by the end of 2013, as compared to 2010. HHS estimates that this new program could save 60,000 lives over the next three years and save Medicare up to \$50 billion over the next decade.

By signing the pledge Tenet agreed to:

- Make reducing readmission rates a priority for our Board of Directors, senior leaders, physicians, clinicians and staff;

- Support physicians, clinicians and staff working for and with us and engage patients and families in order to make care safer, improve communication and increase coordination by implementing proven systems and processes; and
- Learn from and share with others our experiences with making care safer and more coordinated.

Since 2003, harm prevention and the reduction of healthcare associated infections have been central pieces of our efforts to improve the lives of our patients. Our participation in the partnership serves to further demonstrate our clinical mission to becoming the safest provider of patient care. As a partner in this initiative we will have the opportunity to utilize our structure as a system to identify and advance strategies, tools and methodologies that more efficiently and effectively improve patient outcomes. It is also our hope that as a partner, the government will provide additional financial support and resources that will help us to enhance our ability to pursue innovative methods of harm prevention and disseminate them more broadly.

For more information about the Partnership for Patients, visit www.hhs.gov.

PIONEER ACCOUNTABLE CARE ORGANIZATION MODEL

On May 17, 2011, the Centers for Medicare & Medicaid Services released a Request for Applications (RFA) for the Pioneer Accountable Care Organization Model (ACO Model). The Pioneer ACO Model is designed to test the movement of organizations experienced in providing coordinated care across settings more rapidly to population-based payment arrangements and to work in coordination with private payers to achieve cost savings and improved health outcomes for Medicare beneficiaries.

The Pioneer ACO Model was developed by the Center for Medicare and Medicaid Innovation (Innovation Center) in

partnership with the Center for Medicare to ensure coordination with the Medicare Shared Savings Program (Shared Savings Program). The Pioneer ACO Model and the Shared Savings Program are two distinct, but complementary programs and applicant organizations will be able to apply to, but not participate in, both programs. The Pioneer ACO Model aligns with program elements in the Shared Savings Program, for which proposed rules were announced on March 29, with release of final rule, after reviewing public comments, planned for later this year.

Reference: Centers for Medicare & Medicaid Services

HIM LEADERSHIP ANNOUNCEMENTS

Lynn Muserelli joined LPMC today as Director of HIM. Lynn has a BS from the University of Cincinnati, is a Registered Health Information Administrator (RHIA) and has 10+ years of HIM leadership experience. Lynn comes to us from Kaiser Permanente in Northern California and has an extensive background in electronic health records. Please stop by HIM and welcome Lynn to the LPMC team!

Tina English will "onboard" Lynn

over the next week and will then enjoy a much earned vacation! Tina will then work as project lead for the next few months to bring LPMC in compliance with Tenet's Records Management storage initiative. In keeping with her wishes, there will not be a farewell party as she is not really "leaving" yet and it's really "not her thing." However, when you see her please thank her for her three years of outstanding service to Lakewood and wish her well in her "almost" retirement.



WHICH PHYSICIAN ARE YOU?

The Medical Executive Committee has been working with hospital staff to define the terms that are used on the patients' face sheets and medical records that pertain to the role each physician has in the care of the patient.

At the June Medical Executive Committee, the following definitions were presented and approved.

FIELDS POPULATED ON THE FACE SHEET:

Admitting Physician: This is the physician who writes the initial orders that brings the patient to the hospital. This can be a PCP (primary care physician), hospitalist, specialist or surgeon.

Attending Physician: This will be the same physician as the "Admitting" physician unless the "Admitting" physician writes an order to designate a different phy-

sician as the "Attending." The attending physician has the responsibility for complete and continuing care of the patient.

Referring Physician: This is the PCP.

HMO Plan: The IPA indicates the PCP when the hospital verifies the patient's benefits

Non-HMO: The PCP is provided by the patient or the physician's office

PCP Physician: This is the primary care physician.

FIELDS POPULATED ON THE PATIENT ABSTRACT AFTER DISCHARGE

The following physicians are identified on the patient abstract and are used for identifying other physicians who significantly participated in the patient's care.

Consulting Physician: Physicians who are requested by the attend-

ing physician to examine and/or treat the patient.

Primary Surgeon: Physicians who perform surgery or other significant procedures during the hospital stay. Non-surgeons can be listed as surgeons (i.e. interventional procedures, GI procedures). The surgeon may be listed on the face sheet as the "admitting" or "attending" physician if he/she is responsible for the patient at the time of admission.

LOOKING FORWARD

In order to be sure that the physicians' roles are appropriately assigned, work is being done to modify the admitting orders form that will help the admitting physician identify the admitting, attending, and primary care physicians at the time of admission.

WELCOME NEW PHYSICIANS



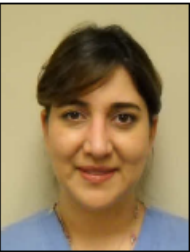
Eugene Rapaport, M.D., Anesthesia

Dr. Rapaport joined the medical staff in May 2011. He completed his medical training and his fellowship in Anesthesiology at Mount Sinai School of Medicine in New York.



Maung Mya, M.D., Nephrology

Dr. Mya joined the medical staff in May 2011. He earned his medical and specialty training at University of Tennessee College of Medicine.



Jessica Rayhanabad, M.D., Vascular Surgery

Dr. Rayhanabad joined the medical staff in May 2011. She earned her Medical Degree at Chicago Medical School in Chicago, IL. She completed her fellowship training in Vascular Surgery at USC Keck School of Medicine.



Ahmad Nader, M.D., Family Practice

Dr. Nader joined the medical staff in May 2011. He earned his Medical Degree and completed his Family Practice training at Saint Joseph's Medical Center in New York and his fellowship training in Geriatric Medicine at UCLA.



David Vannix, M.D., General Surgery

Dr. Vannix joined the medical staff in May 2011. He earned his Medical Degree and completed his General Surgery training at Loma Linda University School of Medicine.