Department of Medicine, Penn State Milton S. Hershey Medical Center

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Clinical Update: Department Review

Carol V. Freer, M.D., FACP

I've known of my assignment to author this article for some time, thought about its content in the middle of the day, middle of the night, middle of lunches, on planes, in cars, in the shower etc. I think you get the idea: clinical medicine today is complex, confusing and sometimes very irritating, but is filled with possibilities and opportunities! So here goes: my new glass half-full approach to love, life and the pursuit of clinical excellence!

In 2011, when we are faced with budget cuts, reimbursement cuts, demanding patients, hassled faculty, and regulatory quagmires, what's a glass half-full person to do? **WE DO WHAT IS BEST FOR OUR PATIENTS.**

This is what we, as professionals, must be known for and what we want to do well. I emphasize the word PROFES-SIONALS. We must remember that word and its meaning as we navigate these difficult times.

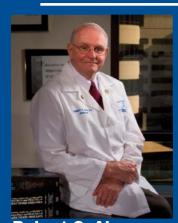
In the last year we have had a departmental retreat, and formal internal and external reviews. We are moving rapidly to a paperless medial record, seeing increases in inpatient and especially outpatient census and procedures, and developing a medicine program in State College in partnership with Mount Nittany Medical Center. We were chosen by a great class of residents to further their clinical education. So what is the path we should take?

"Most importantly, we need to be the best that we can be..."

Overall, the department of medicine should strive for increased integration of both its inpatient and outpatient components. In doing so, we need to meet the expectations of a patient-centered medical home in the outpatient general medicine clinic sites and establish a patient-centered approach in our specialty practices regardless of site of service. The intent will be focused on facilitating patient access for both patients within our system as well as those referred from outside our system, developing new patient centered care plans and revenue producing programs, and developing more mature interdepartmental relationships. An expected outcome will be a measurable improvement in patient and staff satisfaction. These tenets are consistent with goals of an Accountable Care Organization (ACO) and the Department of Medicine will lead the clinical integration, information management, and outcomes reporting required for success in an ACO. I feel to do this we should create workgroups with the following goals:

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MESSAGE FROM THE CHAIR



Robert C. Aber,
M.D., M.A.C.P.
J. Lloyd Huck Chair in Medicine
Professor and Chair,
Department of Medicine

As another academic year draws to a close, and we embark on a new one, I reflect on several accomplishments and events of the past year. We've recruited new faculty, staff, and housestaff; we've recorded the busiest months ever on our general internal medicine inpatient services while at the same time re-organizing those same services into 4 admitting teams (3 resident staffed, 1 non-resident staffed); we undertook an internal review of the department followed by an external review which both identified opportunities for continued growth and development; we've recorded the largest amount of sponsored research funding in our history; we've had 2 fellowship programs attain the longest review cycle possible –5 years;

and we've added one more endowed professorship. I'm sure each of you can add to my list, but I just want to thank you for making these things possible. In this issue, Carol Freer lays out the priorities for us to enhance the clinical mission of the department. Tom McGarrity provides a timely update on the Division of Gastroenterology and Hepatology. Our outgoing Chief Residents report on "2010-2011 By the Numbers."

We welcome new faculty, staff, and residents, and congratulate faculty awarded promotion/tenure as well as our Employee of the Quarter. I'm looking forward to another successful academic year with each of you.

Divisional Spotlight

Gastroenterology & Hepatology

Thomas McGarrity, M.D.

he field of gastroenterology has experienced an explosion of diagnostic and therapeutic options. Many clinical problems that were the purview of surgeons have now become the domain of gastroenterologists including gastrointestinal hemorrhage, cholangitis, and pancreatic pseudocyst management. The melding of medical and surgical services is highlighted by the development of NOTES ("Natural Orifice Transluminal Endoscopic Surgery"). NOTES affords "scar-less" operations by the passage of an endoscope through a natural orifice allowing an internal incision. NOTES was until recently an experimental technique developed in animal models. Dr. Abraham Mathew has recently returned from a sabbatical with the world-renowned surgeon Santiago Horgan, M.D. with a focus on NOTES. Dr. Mathew, together with Dr. Matt Moyer of our Division and colleagues in Minimally Invasive Surgery have gained experience in experimental surgery using NOTES.

Drs. Moyer and Mathew have developed a safe, reliable and reproducible means of transluminal access called the STAT procedure (Self-Approximating Transluminal Access Technique). Their technique has gained international acceptance. Drs. Moyer and Mathew, working with colleagues in the Department of Mechanical Engineering at University Park, have developed several new endoscopic tools which will further the capability of NOTES practitioners. Dr. Mathew, in collaboration with Dr. Horgan, has developed a per oral trans esophageal, totally endoscopic treatment of esophageal myotomy for achalasia. They are also developing an endoscopic suturing device which over time will afford new treatment options for the management of gastroesophageal reflux disease and obesity. We anticipate many new developments from the therapeutic endoscopy group in the Division in this area.

Clinical and basic science research remains strong within the Division. Dr. Mathew was recently awarded an NIHfunded study on the prevention of post-ERCP pancreatitis. Collaborators include Drs. Moyer, Dye, McGarrity and Pooran. Brooke Ancrile, Ph.D., a recent addition to the Division, has been particularly instrumental in strengthening the research activities of the therapeutic endoscopy group. Dr. Jill Smith continues her long and productive research. Her NIH-supported work includes a clinical study entitled "Opiate Growth Factor and Gemcitibine: A Novel Treatment for Pancreatic Cancer" and "CCK Receptor in the Pathogenesis and Growth of Pancreatic Cancers." Dr. Shaoyong Yu, M.D., Ph.D., also received his first NIH-funded R01 entitled "Esophageal Mast Cell Nerve Interaction." In addition, clinical trials for patients with viral hepatitis remain active within the Division.

The clinical activities of the Division encompass all subspecialty areas of Gastroenterology and Hepatology. We are fortunate to have two board-certified transplant hepatologists. The Institution performed more liver transplants in 2010 than any prior year. In the past five years, more than 100 liver transplants have been performed with patient and graft survivals exceeding the national averages. History was made in central Pennsylvania with the first live-donor transplant in 2009. Drs. Riley, Schreibman, Lee and Smith work closely with a multi-disciplinary team of liver experts to provide world class care in hepatocellular cancer, end stage liver disease, hepatitis and liver transplant.

Expert treatment of patients with functional bowel disease and motility disorders is available by Drs. Ann Ouyang and Deborah Bethards. Their expertise has been recognized by the Gastrointestinal Motility and Neurogastroenterology Society designating the GI Division as a clinical training program for visiting fellows.

See SPOTLIGHT (Continued) / Page 3

"This is not your father's endoscopy."

LIONS OF MEDICINE

SPOTLIGHT, Continued from Page 2

Our program is one of ten recognized Centers of Excellence in Motility in the U.S. In addition, Dr. Chip Dye served as Course Director of the American Society of Gastrointestinal Endoscopy sponsored training programs in deep enteroscopy and wireless capsule endoscopy.

The Division of Gastroenterology & Hepatology is extremely proud of its three-year Fellowship Program. I applaud Dr. Ian Schreibman, Fellowship Director, for constant improvement in our training program. Due to his strong efforts, our program was awarded a five-year accreditation status from the ACGME, the longest period that can be achieved. Our fellows have enrolled in advanced fellowships, including the American Association for the Study of Liver Disease, and the CCFA National Visiting Inflammatory Bowel Disease Fellowship. Currently, Kaveh Sharzehi, M.D., a second year fellow, is enrolled in the Public Health Sciences Masters Degree Program. Our fellows have been extremely productive writing book chapters for nationally recognized texts, publishing manuscripts in high impact journals and presentations at national and regional meetings. Our fellows' work has been awarded the Presidential Poster Award of Distinction at the ACG meetings in 2007 and 2010.

"Many clinical problems that were the purview of surgeons have now become the domain of gastroenterologists"

The Division's commitment to undergraduate education has recently been strengthened by the successful recruitment of our newest faculty member Emmanuelle Williams, M.D. Dr. Williams completed her internal medicine residency at the University of Michigan and gastroenterology fellowship at the University of Florida with special interests in inflammatory bowel disease. In her short tenure here, Dr. Williams has made marked improvement in our undergraduate education complimenting the work of Dr. Graham Jeffries.

Finally, the Division has expanded its clinical reach with the opening of our Gastroenterology practice in State College, Pennsylvania. Dr. Joel Haight who completed his gastroenterology training at the Cleveland Clinic has recently begun his work in State College. Development of a strong clinical campus at State College supports Penn State University's long-term goal of developing a second medical school campus at State College.

As always, we welcome former students, residents and fellows to visit us in Hershey. Our recent Spring Course was entitled "Controversies in Adult and Pediatric Gastroenterology: What We Know and What We Think Is Best." In addition, the 7th Annual Liver Transplant Symposium is scheduled in December at the Hotel Hershey. We look forward to seeing you.

PROMOTION & TENURE

The following faculty have been promoted and/or tenured in the Department of Medicine, effective July 1, 2011:

Yixing Jiang, M.D., Ph.D.

Promoted to Associate Professor of Medicine & Awareded Tenure Division of Hematology/Oncology

Sharon Banks, D.O.

Promoted to Associate Professor of Medicine, Division of Rheumatology

Nakechang Pooran, M.D.

Promoted to Associate Professor of Medicine, Division of Gastroenterology & Hepatology

Ian Schreibman, M.D.

Promoted to Associate Professor of Medicine, Division of Gastroenterology & Hepatology

Congratulations!

DEPARTMENT OF MEDICINE

CLINICAL UPDATE, Continued from Page 1

1.) Patient access: Presently there are long waits for appointments, long waits in the ER, problems with transfers and inconsistent cooperation between general and specialty services.

In order to address these issues we should manage scheduling consistent with a patient-centered medical home to accommodate same day visits for generalists and same week visits for specialty visits. Also, we should track activity to see if this is working and track patient satisfaction through Press-Ganey. In addition, it will be important to redefine bed allocations as a rolling target based on 6 month intervals and strive for "always a bed" policy especially for close affiliates. To enhance patient care, we should also create plans for joint surgery/medicine transfer policies and pre-operative and post-operative care management plans

2.) Patient centered and revenue producing programs: Presently there are no "special area clinics" within DGIM and there are gaps in specialty services. Diabetes Mellitus is the only real registry except HIV care.

In addressing these problems, it will be vital to continue the CHF registry for both cardiology CHF patients and general patients, and create co-management services which are independent of resident teaching, are service driven and have a model for shared revenue. Possible subspecialty "charted clinics" could be started and run by extenders to address hepatitis, CHF, diabetes, metabolic syndrome, obesity, osteoarthritis. These could include group visits and coordination with specialty care as needed. In addition, we now have several boarded geriatricians and could work with psychiatry, neurology, physical therapy, and outside agencies to form a multidisciplinary geriatric assessment center. We should also strive to become a center of excellence for palliative care, for which the white paper has already been developed.

Another way to reach this goal is by maximizing use of the new chronic disease management tools in the ambulatory EMR including those for CHF, DM, Asthma, Depression, and more. To supplement this, we must require robust quality reporting on selected outpatient areas including DM, Asthma, CHF, Depression, COPD and negotiate higher reimbursement from payers for goals as well as pay for performance. We might also consider establishing a medical fitness center to benefit our patients in the immediate area. This could be done in conjunction with the current fitness center using little-used morning hours with physical therapy oversight. It could also be a possible target for development funds and naming of the "Patient Center," and could include chronic disease education.

3.) Development of interdepartmental relationships.

In creating a better relationship with the emergency room, we should work to standardize the admission process through study of flow, fostering professional interactions, and appropriate use of observation status. We can maximize "best fit" admission service by triaging by morbidity index, which is developed jointly between the departments. We should also work closely with orthopaedic surgery and possibly other surgical subspecialties and medical subspecialties to develop best practices co-management, which shall incorporate 24/7 coverage and a shared revenue model. Most importantly, we need to be the best that we can be to regain the status that internists should have in an academic institution. In order to do so, we must hold each person accountable for quality performance and consummate professionalism.

To accomplish all of this, I would propose creating parallel inpatient and outpatient executive committees and having membership from the aforementioned work groups, care management, IT, nursing and quality, and finance. These committees would report to the department leadership team. In a department as large and diverse as ours, these two groups would complete a triangle of communication enabling enhanced integration as we move forward towards accountable care. I welcome any comments and interest in participation.

Department of Medicine

Employee of the 2nd Quarter

Kathy Seitzinger



athy Seitzinger has been awarded the Employee of the 2nd Quarter. Kathy has worked in an administrative position within the Division of Infectious Diseases since 1993. She became the Division Lead in 1996. Kathy is hard-working, loyal and an extremely reliable leader/employee within her division. Kathy is a very open and honest employee who communicates effectively with the office staff, nurses, fellows, faculty and departmental leaders. Kathy goes above and beyond her job responsibilities. Kathy has an excellent rapport with all members of the division. She is a team player, pleasant, and portrays a positive attitude at all times. Kathy is well-deserving of this award.

LIONS OF MEDICINE

The Internal Medicine Residency Program 2010 - 2011 By the Numbers

Nathan Yeasted, M.D., Jason Stepp, M.D. & Matthew Evans, M.D. 2010 - 2011 Chief Residents

Incredibly, the academic year of 2010-2011 is quickly drawing to a close and with it comes the end of our chief residency. As a way to look back, we provide a review of our year as chiefs using numbers:

71 Internal Medicine residents who began this academic year in our training program.

70 Internal Medicine residents who will end this academic year in our training program. Dr. Jen DeLutis completed her residency in August after delivering a daughter during her PGY-3 year. Dr. DeLutis is now a hospitalist at Lancaster General and proud mother of Madelyn Paige DeLutis.

181 Morning Reports held to date for this academic year. (Not including ACGME Core Competency lectures or Medical Grand Rounds.)

181 Morning Reports attended by Dr. Nasrollah Ghahramani. (OK, he may have missed a few, but sincere thanks to Dr. Ghahramani for his attendance and insight at Morning Report throughout the year. Also, a reminder that we welcome all faculty members to attend Morning Report.)

2,657 applications received for the entering intern class of 2011-2012 (a record number!)

189 applicants interviewed to select the entering intern class of 2011-2012.

24 pre-interview dinners attended by us as chief residents.

19,000 estimated total calories consumed by each chief resident during the pre-interview dinners

29 entering interns (both preliminary and categorical) for 2011-2012. (Our residency match list is posted outside of the Morning Report room-H6502 and in the Department of Medicine office.)

Penn State College of Medicine students who will be amongst the entering intern class of 2011-2012 (4 Categorical and 3 Preliminary Interns).

16,425 estimated total number of e-mails sent by us as chief residents throughout the academic year.

56 presentations at regional/national scientific meetings and publications by Internal Medicine residents during this academic year.

3,821 patient admissions to date to the medical subspecialty services that include Internal Medicine residents amongst the primary caregivers for this academic year (Hematology/Oncology, Gastroenterology/Hepatology, Cardiology, and Pulmonary/Critical Care Medicine).

2,731 patient admissions to date to the Internal Medicine teams for this academic year.

316 patient admissions to date to the Internal Medicine teams above those budgeted for this academic year.

VERY BIG thank you to the administration, faculty, staff, and residents we have had the pleasure of working with throughout the year. Your hard work and dedication to our residency program is incredible and inspiring.

WE ARE PENN STATE!

We want to hear from you!

This newsletter is made possible by the submissions from the department's faculty and staff. If you wish to prepare a submission for publication, please e-mail your file as a Microsoft Word document to Elisa Steinbacher (esteinbacher@hmc.psu.edu). Please include the word count in your e-mail and enter "Lions of Medicine Submission" in the subject line. We also welcome comments about our publication via e-mail or telephone to any member of the editorial board.

LIONS OF MEDICINE

WELCOME TO OUR NEW FACULTY & STAFF

FY 2011/2012





Vikas Ghai, MD Assistant Professor of Medicine Hematology/Oncology



Joel Haight, MD Assistant Professor of Medicine Gastroenterology/Hepatology State College



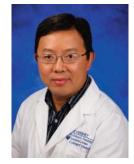
Ethan Kuperman, MD Assistant Professor of Medicine General Internal Medicine



Alice McCullough, MD Assistant Professor of Medicine General Internal Medicine State College



Andry Van de Louw, MD Research Associate Pulmonary, Allergy & CCM



Hanning You, MD, Ph.D Research Associate Nephrology



Jamie Carter LPN Rheumatology



Corinne Gibilterra
Administrative Secretary
Pulmonary, Allergy & CCM



Kirk Gosik Research Technologist Nephrology



Andrea Johnson Research Technologist General Internal Medicine



Andrew Pool, M.Sc Research Technologist General Internal Medicine



Michelle Spong PA-C Infectious Diseases



Joshua Wethli CRNP General Internal Medicine



DEPARTMENT OF MEDICINE

WELCOME TO OUR NEW RESIDENTS

FY 2011/2012



Jessica Abbot. DO



Justin Abraham, MD



Peyman Nejatbakhsh Azadani, MD



David Baird, MD



Ricardo Bedoya, MD





Charles Bulathsinghala, MD Clinton Ellingson, MD



Galen Foulke, MD



Ehsan Ghetmiri, MD



Claudel Gratia, MD



Nicole Hancock, MD



Gavin Imperato, MD



Zackary Jenson, MD



Arun Kannappan, MD



Nancy Khov, MD



Won Lee. MD



Leanna Lewis, MD



Jonathon Logue, MD



Ronald Maag, MD



Mariel Davila Martinez, MD



Poonam Mathur, DO





Sepehr Mesdaghinia, MD Berthrand Onuoha, MD Kathleen Pitterle, DO





Jaclyn Shaffer, MD



Sara Strauss, DO



Linh-An Tuong, MD





Christopher Weese, MD



Edward Wyluda, DO





MILTON S. HERSHEY MEDICAL CENTER

WELCOME TO OUR NEW FELLOWS

FY 2011/2012



Nephrology



Aman Ali, MD Cardiology



Nephrology



Puneet Bajaj, MD Allergy/Immunology



Chetan Bhardwaj, MD Cardiology



Neeti Bhardwaj, MD Allergy/Immunology



Jihua Cheng, MD Hematology/Oncology



Matthew Evans, MD Hematology/Oncology



Andrew Foy, MD Cardiology



Maria Gutierrez Forero, MD Allergy/Immunology



Steven Khov, DO Pulmonary/CCM



Lukasz Robert Kiljanek, MD Pulmonary/CCM



Hematology/Oncology



Hamzah Moh'd, MD Infectious Diseases



Talal Moukabary, MD Clinical Cardiac Electrophysiology



Aminat Omoniyi Oluyemi Gastroenterology/Hepatology



Phalgun Prativadi, MD Infectious Diseases



Sanaz Sakiani, MD Endocrinology



Julie Shah, MD Endocrinology



Neerav Girish Sheth, MD Cardiology



Pradeep Yadav, MD Cardiology



Nathan J. Yeasted, MD Gastroenterology/Hepatology

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