For a second time, Christiana Care has earned The Joint Commission’s Gold Seal of Approval for certification as a primary stroke center.

The national agency recognized Christiana Care based on an onsite evaluation and demonstration of compliance with nationally developed standards for stroke care.

“Providing exceptional stroke care requires quick and efficient treatment, because time lost is brain loss,” said Anthony Munson, M.D., Stroke Program medical director. “This recertification validates the hard work by our stroke and vascular care team to implement processes that help us consistently deliver the highest quality care.”

Christiana Care ranks sixth in the nation in treating stroke, with 1,090 cases in 2009, according to the latest Medicare Provider Analysis and Review data.

Stroke is the nation’s third leading cause of death and a leading cause of serious, long-term disability in the United States, with about 4.7 million stroke survivors alive today. Each year about 795,000 people experience a new or recurrent stroke. On average, someone suffers a stroke every 40 seconds and someone dies of a stroke every 3.1 minutes.
Christiana Care earns recertification as primary stroke center

Christiana Care’s primary stroke center program includes stroke evaluation, treatment and rehabilitation. The program helps patients to make the most complete stroke recovery possible. Staff develops an individualized stroke recovery plan and closely monitors patients to help identify risk factors that can lead to further problems.

The Joint Commission’s primary stroke center certification uses recommendations for primary stroke centers published by the Brain Attack Coalition and the American Stroke Association’s statements and guidelines for stroke care. The Joint Commission launched the program — the nation’s first — in 2003.

“By achieving recertification as a primary stroke center, Christiana Care has [again] proven [its] ability to provide effective, timely care, [which] can significantly improve outcomes for stroke patients,” said Jean E. Range, MS, RN, CPHQ, executive director of The Joint Commission’s Disease-Specific Care Certification program.

Christiana Care’s Stroke Program also received the American Heart Association/American Stroke Association’s Get With The Guidelines® Stroke Gold Plus Quality Achievement Award. That award recognizes commitment to following evidence-based guidelines and success in implementing excellent care for stroke patients.

A new stepdown unit enhances care for stroke patients

A new unit at Christiana Hospital offers highly specialized stepdown care for hospital patients requiring more frequent monitoring, such as stroke patients and those who have had neurointerventional procedures. The term "stepdown" indicates an intermediate level of care between an intensive care unit and a normally staffed inpatient unit.

“Christiana Care has more than 1,000 stroke patients a year, sixth highest among U.S. health systems,” said Anthony E. Munson, M.D., medical director, Stroke Program. “We believe the 6C stepdown unit is a significant stride forward in enhancing the quality of care.”

The stepdown unit is part of the Stroke Treatment and Rehabilitation (STAR) unit. Launched July 2, the unit provides care for patients with stroke and nontraumatic hemorrhages, as well as interventional procedures such as a carotid stent procedure.

All nurses in the 24-bed unit have had advanced cardiac life support (ACLS) training, plus special training to monitor stroke patients. The nurses assess patients at least once every four hours.

“Neuro assessment is a key component in monitoring the process of stroke patients,” said Teresa Zack, MSN, RN, NE-BC, nurse manager of the STAR unit.

The care team watches for subtle warning signs that might include sudden confusion or a change in the level of weakness on one side.

“In the stepdown unit, we cohort patients in a setting where a nurse can pick up more readily on those minute changes and alert the doctor right away,” Zack said.

Mary Ciechanowski, an advanced practice nurse in the Stroke Program, said the extra level of vigilance should result in fewer complications for patients. Ultimately, that will make care more efficient and could reduce length of stay, allowing patients to return home sooner.

“Christiana Care has more than 1,000 stroke patients a year, sixth highest among U.S. health systems.”

—ANTHONY E. MUNSON, M.D.
Christiana Care is a national bone marrow donor performance leader

The National Marrow Donor Program recognized Christiana Care as a national performance leader in the collection of bone marrow for 2011. The Bone Marrow Transplant Program, led by Frank Beardell, M.D., medical director, celebrates its 16th anniversary in August.

In a letter to Dr. Beardell and Bone Marrow Transplant Coordinator Donna Kerr, RN, National Marrow Donor Program CEO Jeffrey W. Chell, M.D., recognized Christiana Care’s excellence in meeting service and quality indicators for donor care, product integrity, data submission and overall service.

“We have had a total of 168 National Marrow Donor Program donors since the first donor in August 1996,” Kerr said. Most donors come from an international donor registry, having joined as a result of a donor drive for a family member or friend in need of a transplant. But some donors are “unrelated,” she explains. “They have joined on their own accord, either through advertisement from the National Marrow Donor Program, a drive organized through work or school, or because a family member has received a transplant and they wanted to give back.”

Frank Beardell, M.D., named Leukemia & Lymphoma Society ‘Man of the Year’

Frank Beardell, M.D., medical director of the Bone Marrow/Stem Cell Transplant Program at Christiana Care, was honored as the Leukemia & Lymphoma (LLS) Society Delaware Chapter Man of the Year for service to patients and families battling cancers of the blood. The award recognized Dr. Beardell’s participation in a fundraising event in which champions compete on behalf of an LLS chapter Boy and Young Lady of the Year who are local blood cancer survivors. Of the $200,000 raised for the state LLS chapter, Dr. Beardell raised $46,000.
Christiana Care joins nationwide, collaborative effort to improve breastfeeding rates

Christiana Care is among 90 U.S. hospitals participating in Best Fed Beginnings, a first-of-its-kind, national 22-month collaborative effort to significantly improve breastfeeding rates in states where they are lowest.

Breastfeeding has health benefits for infants and mothers. For infants, it decreases the incidence and severity of many infectious diseases, reduces infant mortality, supports neural development and decreases the risk of becoming obese later in childhood.

Breastfeeding mothers benefit from decreased risk of breast and ovarian cancers, diabetes, rheumatoid arthritis and cardiovascular disease.

But half of all babies born in the United States receive formula within the first week, and the percent of babies breastfeeding at nine months is only 31.

“Breastfeeding education must begin early in pregnancy and be reinforced during the birthing experience to ensure all women can make an informed choice,” said Richard Derman, M.D., chair of the Department of Obstetrics and Gynecology at Christiana Care.

Best Fed Beginnings aims to better support a new mother’s choice to breastfeed and increase the number of U.S. hospitals implementing a proven breastfeeding model for maternity services. The National Initiative for Children’s Healthcare Quality-led effort, which receives some funding from the Centers for Disease Control and Prevention, works closely with Baby-Friendly USA, Inc., an international initiative affiliated with the UNICEF/World Health Organization. Using proven quality improvement methods, participating hospitals transform their maternity care services in pursuit of “Baby-Friendly” designation.

The hospitals participating in Best Fed Beginnings were selected from a pool of 235 applications. Christiana Care is the only participating hospital in Delaware. Upon completion of the program, participating hospitals will receive a Baby Friendly designation.

“Christiana Care is honored to participate and happy to have the opportunity to improve maternity care services and to better support breastfeeding,” said Louis E. Bartoshesky, M.D., MPH, chair of the Department of Pediatrics at Christiana Care. “We recognize that the hospital experience strongly influences the decision of women who plan to breastfeed to start and continue breastfeeding. We are committed to implementing evidence-based care through the Baby-Friendly process and fully support mothers delivering in our facility who intend to breastfeed.”

Nurse educator Stephanie Gibison, RN, IBCLC, coaches an expectant mother at Christiana Hospital on breastfeeding and how to use a breast pump. Christiana Care is participating in a nationwide effort to help mothers understand the health benefits of breastfeeding for themselves and their infants, and to make informed decisions about whether breastfeeding is right for them.
Poster contest challenges nurses to hone their research skills

Christian Care Health System educator Wendy Wintersgill, MSN, RN, CRRN, ACNS-BC, and several members of the Nursing Research Council collaborate annually on a contest called “Critiquing a Research Article, Tell It in a Poster,” designed to challenge Christiana Care nurses and hone their research skills.

Co-authors Wintersgill and Erlinda C. Wheeler, DNS, RN, associate professor of nursing at the University of Delaware, discuss the contest in an upcoming article in the September 2012 issue of the Journal for Staff Development.

“Nurses need research skills such as performing literature searches, critiquing articles and developing research questions to engage in evidence-based practice,” Wintersgill said.

This year during National Nurses Week in May, 28 nurses participated in the contest, submitting 18 posters. The entries were judged by Wheeler, who developed the scoring tool, and by guest judge Kimberly Holmes, MSN, RN, stroke program coordinator at Bayhealth. Winners were selected based primarily on a poster score and secondly on followup discussion between judges.

This program will be a part of a three-panel podium presentation at the American Nurses Credentialing Center Magnet Nursing Conference in Los Angeles in October titled “Reaching for the Stars: Empowering Nurses to be Innovative Leaders through an Evidence Based Clinical Ladder.” The presentation will be given by Marsha Babb, MS, BSN, RN, CNOR; Thea Eckman, MSN, RN, staff education specialist; and Wintersgill. As members of the Nursing Research Council, they will share the story of Christiana Care’s recently updated clinical ladder for nursing and how evidence-based practice is hardwired into nurse performance and promotion.

2012 NURSES WEEK POSTER CONTEST WINNERS

1ST PLACE:

“Nurse Staffing Levels and Teamwork: A Cross-Sectional Study of Patient Care Units in Acute Care Hospitals” by Aruna Muthukumar, RN, and Chatterjee Geetanjali, RN, PCCN, CCRN, CDU and 3D.

2ND PLACE:

“Critique of a Quantitative Research Article: Why Do Nurses Choose to Work in the Perioperative Field?” by Cherie Crumpler, RN III, CNOR and Pamela Boyd, RN II, CNOR, Wilmington OR.

3RD PLACE:

“Critique of a Quantitative Research Article: Comparison of Hospital Admission Medication Lists with Primary Care Physician and Outpatient Pharmacy Lists” by Justine Harrington, RN II and Jane Tester, RN III, 4D.

HONORABLE MENTIONS:

“Impact of Nurse-Initiated Preoperative Education on Postoperative Anxiety Symptoms and Complications after Coronary Artery Bypass Grafting” by Greta Edres-Brown, RN and Keeley Russell, RN, CH 2E and OHSD.

“Contamination of Hospital Curtains with Healthcare Associated Pathogens” by Heather Bracken, RN and Elenie Lochonic, RN, CH 4D.
Christiana Hospital now provides a special, new sleeping garment to infants as they leave the hospital. Not only is it comfortable and easy to use — it also helps to keep babies safe.

“These wearable blankets conform to new guidelines for safe sleeping that came out in 2011,” said David Paul, M.D., a neonatologist on Christiana Care’s Medical Staff who chairs the Delaware Healthy Mother and Infant Consortium.

Dr. Paul said the garment provides the best possible sleeping environment. “By combining the traditional swaddle design at the top with a roomy sack design at the bottom, the blanket can’t be kicked off and potentially choke or smother the infant,” he says. He hopes that this new sleepwear will reduce confusion common among many new parents about how their baby should sleep. “It serves as a safe alternative to blankets.”

Nurses at the hospital will teach parents safe sleep practices as part of the program, according to Pamela Jimenez, RN, MSN, CFNP/CPNP, who championed the new SleepSack initiative at Christiana Care.

“As health care providers, we are responsible for modeling safe sleep,” Jimenez said. She first heard about the wearable blanket at a National Sudden Infant Death Syndrome (SIDS) Association annual meeting.

Dr. Paul said having a safe sleepwear product is important during the first six months — the peak time when SIDS is at highest risk to occur. SIDS is the third-leading cause of infant mortality in Delaware.

At Christiana Hospital, Denise Scales, MS, RNC, nurse manager, Tracy Bell, BSN, RNC-NIC, and Pam Jimenez, RN, MSN, CFNP/CPNP, hold a new baby dressed in a SleepSack. The new garment promotes safe sleeping and may protect the baby from Sudden Infant Death Syndrome.
The Virtual Education and Simulation Training center has attained accreditation as a Level I — Comprehensive Education Institute through the American College of Surgeons (ACS). The Center first received ACS accreditation as a Level II center — basic accreditation for simulation — in 2009. Since then, the training facility has increased ninefold from its original 1,000 square foot dimensions.

As a Level I accredited site, the center has moved beyond being able to train a limited number of physicians and staff. Now, more than 3,500 employees receive training at the Center, demonstrating Christiana Care’s commitment to patient safety, assurance of quality standards and improvements, and education.

“Under the Level I accreditation, the center must educate various groups, including attending physicians, and have a structured approach to simulation with curriculum development,” said LaRay A. Fox, CNMT, M.Ed, Virtual Education and Simulation Training center manager.

**Best Practice Review**

**Q. What is an oxygen zone valve?**

An oxygen zone valve is a device used to physically interrupt the flow of oxygen to an identified area. In the picture below, the top (green) valve is the oxygen zone valve.

**Q. Where can I find the oxygen zone valve?**

Oxygen zone valves are in a wall box outside the area they serve. Each valve has a label listing the room numbers served by that valve. There may be more than one oxygen zone valve per area.

**Q. When might someone consider shutting this valve off?**

The oxygen zone valve might need to be shut off in the event of a fire in a room where oxygen is in use or during an uncontrolled release of oxygen due to a piping failure. The oxygen zone valve may shut off a single patient room or multiple patient rooms.

**Q. Who is authorized to shut off the oxygen zone valve?**

The charge nurse is responsible for assessing the patient care area at the time of an emergency and determining whether any patients can be without oxygen temporarily or relocated to a safe area to expedite the oxygen zone valve closure. After the assessment the charge nurse can direct the staff from Public Safety or Maintenance to turn off the oxygen zone valve.

For exact procedures follow the policy online at

http://depts/policies/webpolicies/docs/oxygenzonevalveemergencyshutoffprocedure.htm

For the Safety Hotline, call SAFE (7233) from within the hospitals or 623-SAFE from outside.

Contact content expert Lisa Carr at 733-3792 with questions about this article.
Thoroughly Bob Lebano’s life, he’s always had stories to tell. But when Parkinson’s disease rendered his voice faint and monotonous, he was afraid those stories would vanish.

“I understand the frustration of people I talk to,” said Lebano, a Navy veteran. “They can’t hear me. They miss words. I try to correct them. I can’t think of the next word. I’ll be talking, and I won’t know what word belonged there. Sometimes I just stop talking when I’m trying to figure it out, and people think I’m finished talking.”

Thanks to voice therapy sessions at Christiana Care’s Middletown Physical Therapy Plus with therapist Nora Walstrum, Lebano has regained his ability to tell stories. In the process, he and Walstrum discovered a story they both share, from more than a half-century ago.

In 1960, when Lebano was 16, his father signed him into the Navy. In 1962, he was aboard USS De Soto County when the ship was ordered to head to Guantanamo Bay, Cuba.

Relations between the United States and Fidel Castro’s Cuba were deteriorating rapidly. The women and children dependents of the men stationed at the naval base were waiting to be evacuated. Castro already had severed the pipes that supplied the base with fresh water. His forces were just a chain-link fence away.

It was a beautiful night, Lebano recalls. Most of the crew were eating snacks and watching “Ocean’s Eleven.” As they approached Guantanamo, they heard loud booms as Marines used explosives to clear coral reefs that blocked the amphibious ship’s path to shore.

The De Soto was one of three ships that arrived to transport evacuees. Those who boarded were allowed one suitcase for personal belongings. The ship took them to safety at Norfolk, Va., before picking up 800 Marines and returning to Guantanamo.

Half a century later, Lebano, of Worton, Md., began at Christiana Care a Parkinson’s-centered voice therapy called Lee Silverman Voice Treatment. As an exercise, Walstrum suggested he share a story about his experiences in the Navy. Lebano spoke of the Guantanamo mission.

Walstrum’s face assumed a strange look. Though she couldn’t remember the details, she had been, at age 4, among the evacuees at the base, where her father was stationed.

“There were just about 100 crew members on board the ship,” Lebano said, “and to meet someone who sailed with us 51 years later was enough to put a strange look on my face, too.”

During their next therapy session, Lebano gave Walstrum one of his two medals for good conduct. He couldn’t think of anyone, he says, who was more deserving. A little girl whom he and his fellow sailors rescued had come full circle to rescue him.

Voice therapy patient Bob Lebano gave Walstrum one of his two Navy Good Conduct Medals.
Christian Care has received a $400,000 grant from the Thrasher Research Fund to study of the effectiveness of an antibiotic known as oral clindamycin to avert preterm births in women with genital tract infections linked to preterm delivery. Christiana Care received the award in partnership with Jawaharlal Nehru Medical College (JNMC) of KLE University in Karnataka, India.

The Thrasher Research Fund, headquartered in Salt Lake City, supports novel pediatric medical research that offers substantial promise to advance infants’ and children’s health and survival. The study will examine whether a five-day dose of 300 mg oral clindamycin for women who are 13 to 20 weeks pregnant will prevent 30 percent of preterm deliveries at minimum.

The research will be conducted in South India, an area that accounts for the greatest number of global newborn deaths, 27 percent of which are caused by preterm births. The study will be the first to test whether oral clindamycin prevents preterm births in a community-based, developing-country setting, where most of the annual 3.1 million newborn deaths occur. The study results will have broad-based applications to the United States and Europe, where the incidence of preterm births is also high and increasing.

Matthew Hoffman, M.D., the vice chairman of Christiana Care’s Department of Obstetrics and Gynecology and the Division of Education and Research, is the study’s principal investigator. Mrutyunjaya B. Bellad, M.D., professor in the Department of Obstetrics and Gynecology at JMMC’s KLE University, is the co-principal investigator of the study.

Will blood platelet transfusions help stop brain bleeding and fend off neurologic damage caused by traumatic head injury in patients taking aspirin or Plavix?

Christiana Care’s Level 1 trauma center team leader Mark Cipolle, M.D., Ph.D., FACS, FCCM, section chief of Trauma and Critical Care Surgery, received a grant to study outcomes for trauma patients receiving antiplatelet therapy, which includes an ever-increasing number of people prescribed aspirin and Plavix (clopidogrel) to prevent strokes and heart attacks. Emergency Medicine research staff, with Christy Poole, RN, BSN, CCRC as the study leader, are coordinating the project.

This is the first randomized, controlled trial of platelet transfusion for traumatic intracranial hemorrhage.

The National Trauma Institute approved the grant to start enrolling patients in June after a two-year application process involving Christiana Care and the U.S. Department of Defense, a major supporter of the pilot research project.

At Christiana Care, there are about 4,000 trauma admissions a year, and the most common reason for admission among those patients is traumatic brain injury, said Dr. Cipolle. The study will involve patients with intracranial hemorrhaging who are known to be receiving antiplatelet therapy. The study aims to learn whether a platelet transfusion will counteract the increased risk of bleeding — essentially overwhelming the effects of the antiplatelet therapy.

Dr. Cipolle said the primary outcome will be the change in the extent of hemorrhage, measured by CT scan upon the patient’s admission, and again after 24 hours.

To enroll in the study, the patient, or someone with the proper authority, must sign a consent form, and there must be no circumstances that would preclude participation, such as other major traumatic injury or end-stage renal disease.
Christiana Care is listed as a “leader in lesbian, gay, bisexual and transgender (LGBT) healthcare equality” in the Healthcare Equality Index 2012 report, an annual survey conducted by the Human Rights Campaign Foundation. The foundation is the educational arm of the nation’s largest LGBT organization.

Christiana Care earned top marks for its commitment to equitable, inclusive care for LGBT patients and their families, who can face challenges in accessing adequate health care.

Hospitals awarded the honor meet several key indicators for equitable care, including nondiscrimination policies for patients and employees, a guarantee of equal visitation for same-sex partners and parents, and LGBT health education for key staff. Christiana Care is the only hospital in Delaware to be included on the 2012 Healthcare Equality Index and one of only 234 health care facilities nationwide named a Leader in Healthcare Equality.

“Christiana Care’s leadership role in the Healthcare Equality Index underscores the importance we place on diversity and inclusion, not only in our hiring practices but in the cultural sensitivity we show in the care we provide to our patients,” said Rosa M. Colon-Kolacko, Ph.D., MBA, chief diversity officer and senior vice president and executive director of Christiana Care Learning Institute.

For more information about the Healthcare Equality Index 2012, visit www.hrc.org/hei.

The concerted efforts by everyone working at Christiana Care, especially in the final weeks, made the 2012 Transformation Rewards Program a great success.

By meeting the target performance level for patient satisfaction and exceeding the maximum performance level in flu vaccination rate and operating gain, all eligible full-time employees will receive a bonus payment of $1,200 in September. Eligible part-time employees will receive a prorated amount.

Here is a look at our final performance results after the June 2012 report card:

- Operating gain outstripped budget by $30.7 million, exceeding the maximum performance level.
- Employee flu vaccination rate stands at 93 percent, exceeding the maximum performance level.
- Overall rating of the hospital score from HCAHPS remains at 71 percent and is at target performance level.

The true winners in this program continue to be our neighbors in the community. The tangible efforts to improve the way we provide care ultimately lead to safer and better outcomes, demonstrated quality, reduced cost and an enhanced experience for our patients and their loved ones.

Watch for information soon on the Portal about the 2013 Transformation Rewards Program.

CHRISTIANA CARE COMPLIANCE HOTLINE

Christiana Care’s Compliance Hotline can be used to report a violation of any regulation, law or legal requirement as it relates to billing or documentation, 24 hours a day, 7 days a week. All reports go directly to Compliance Officer Ronald B. Sherman. Callers may remain anonymous. The toll-free number is: 877-REPORT-0 (877-737-6780).

To learn more about Corporate Compliance, review the Corporate Compliance Policy online or contact Ron Sherman at 302-623-2873.
The Center for Advanced Joint Replacement at Christiana Hospital has relocated to Unit 7E from Unit 2D. Patients now share space with elective spine surgery and elective bariatric surgery patients on the 30-bed surgical patient care unit comprising all private rooms.

Mandatory preoperative surgery education classes occur weekly on 7E for all patients having total hip or total knee replacements. Plus, a new physical therapy area on 7E is now open for orthopedic surgery patients.

“Working closely with the staff from the Center for Advanced Joint Replacement at Wilmington Hospital, 7E staff nurses received individualized training with a focus on learning the specific care needs of joint replacement surgery patients,” said Jennifer Johnson, RN, 7E nurse manager.

Demery Dawson, DPT, assists a patient using stairs in the 7E Joint Replacement Center new gymnasium.

Bright new technology promises to enhance patient safety

Christiana Care’s Department of Environmental Services has a bright new tool to disinfect patients’ rooms and medical equipment. The Tru-D SmartUVC™ system uses ultraviolet light to kill pathogens, including bacteria such as C. difficile and MRSA. Used in combination with traditional disinfecting practices, this new technology promises to propel patient safety at Christiana Care to even higher levels.

Verone Wright of Christiana Care’s Department of Environmental Services prepares a Tru-D unit for operation in a hospital room. The unit uses high doses of ultraviolet light to kill any bacteria that might remain in the room after thorough washing and disinfecting by hand.
Rozelle Clark, RRT, a respiratory therapist at Christiana Hospital, has lost more than 100 pounds riding her bicycle eight miles each way, to and from work. She started riding three years ago to improve her health and to adopt a healthy lifestyle. Now, she cycles everywhere — to the grocery store, the library and the movies — eight months of the year.

Clark says cycling has improved her sense of well-being and the health of her family. “On days that I ride, I feel more awake and alert,” she says. Her healthy lifestyle has inspired others to be more active. It also has benefitted her pocketbook.

“I haven’t put gas in my car in two months,” she says. “I call the money I save from not buying gas my ‘fun money.’ I use it to treat myself and my kids with all kinds of stuff.”

Clark’s advice to aspiring bicycle commuters:

• Map out your ride. Look for streets with wide shoulders, and use bike paths.

• Wear the proper equipment, and keep your eyes and ears open when riding.

• Leave plenty of time for a leisurely ride. Speed and endurance will come with consistency.

• Don’t assume that you need to be an elite athlete to cycle to work.

• Mobile apps such as MapMyRide (www.mapmyride.com) can be helpful for plotting your route or tracking your progress.

Hundreds turn out for Community Health Fair at Sojourners’ Place

Charlene Marinelli, RN, OCN, cancer screening nurse navigator at the Helen F. Graham Cancer Center, tests Shannon Walker’s blood sugar as part of a cardiovascular disease assessment at the Sojourners’ Place Community Fair. Walker was one of several Sojourners’ residents and community members who took advantage of the free health screenings. More than 25 vendors and 300 attendees participated in the new event.
Tips on reducing stress include meditation, Yoga, stretching and breathing exercises

August is Manage Your Stress Month, a reminder to chill out and take care of yourself.

When we need to react quickly, acute stress is our natural fight-or-flight response — and that’s healthy.

But chronic stress is hazardous to our health. In the short term, stress can result in headaches, tense muscles and sleepless nights. Over time, it contributes to high blood pressure, heart disease, diabetes and obesity.

There are lots of challenges in life that create stress, from traffic jams to financial jams. There is stress at home, stress on the job and stress in the places in between. Although we can’t always avoid stress, there are ways we can learn to deal with it. The first step is acknowledging that we need to take the time to step back and do something healthy for ourselves.

Taking just a few minutes for yourself really can help to alleviate stress. Think of a quick break as the pause that refreshes. Just ask Cindy Maser, an administrative assistant in Christiana Care’s Healthy Beginnings preconception health program who also serves as a wellness champion. She has found a number of helpful resources on the Wellness: Caring for Yourself website, including tips on breathing exercises and recordings of tranquil sounds and soothing music.

“I especially like Tai Chi Relaxation and How to Meditate in a Moment,” she says.

Throughout the month, Maser and other wellness champions will be helping coworkers find ways to reduce their stress levels with mini breaks for stretching, yoga and other stress busters.

Want to learn more? Go to the Wellness: Caring for Yourself website. You will find lots of programs and information that can help you to reduce the stress in your daily life.

Taking a little time can make a big improvement.

Here’s a simple breathing exercise you can do anywhere, anytime:

- Sit down in a comfortable position.
- Place one hand on your abdomen below your ribs; place the other hand on your chest.
- Breathe in deeply through your nose and feel your belly press your hand out. Your chest should not move.
- Purse your lips and breathe out. (Imagine you are whistling.) Press the hand on your stomach, as if you are using it to push the air out.
- Repeat 3 to 10 times.
Event in memory of 9-year-old Christina-Taylor Green will benefit NICU

Born at Christiana Hospital on Sept. 11, 2001, Christina-Taylor Green was the caring, spirited, outgoing child of a loving Tucson, Ariz., family. She was one of six people killed in the violent shooting attack against Arizona’s then U.S. Rep. Gabrielle Giffords, staff and friends, on Jan. 8, 2011.

In response to the outpouring of support following this tragedy, the Green family – which includes her grandfather, Dallas Green, manager of the 1980 World Series Champion Philadelphia Phillies – created the Christina-Taylor Green Memorial Foundation to honor her hopes and dreams.

Now Christiana Care is partnering with the foundation to present a special luncheon event: “As Good As She Imagined – A Message from the Family of Christina-Taylor Green,” from 11 a.m. to 1 p.m. on Thursday, Sept. 13, at Wilmington Country Club.

The proceeds of this special event will benefit the Neonatal Intensive Care Unit (NICU) at Christiana Hospital. The NICU cares for more than 1,200 of Delaware’s smallest newborns each year, providing highest-caliber care to benefit these fragile patients and their families. Christiana Hospital offers a Level III NICU, the highest level of medical capability, supported by a team of 142 nurses and 22 physicians.

The event features a signing by Roxanna Green, Christina-Taylor’s mother, of her book “As Good As She Imagined,” telling Christina-Taylor’s story. The book’s title derives from something President Barack Obama said to the nation about Christina-Taylor: “I want America to be as good as she imagined it.” The event will also include a presentation about the Neonatal Intensive Care Unit by John Stefano, M.D., medical director.

All sponsors attending the lunch receive a free copy of “As Good As She Imagined.” For more information, contact Natalie Dyke at 302-327-3306 or visit http://healthcare.christianacare.org/ctg.html.

American Heart Walk scheduled Sept. 9

The 21st Annual American Heart Association Heart Walk will be Sunday, Sept. 9, at the Wilmington Riverfront. The Heart Walk promotes awareness about heart disease and stroke while raising funds to fight the diseases.

Ed Goldenberg, M.D., medical director of the Christiana Care Preventive Cardiology and Lipid Center, is this year’s Wilmington Heart Walk chair. Christiana Care President and CEO Robert J. Laskowski, M.D., is the honorary chair.

Each year, Christiana Care employees, their families and friends turn out to support this great event. Register today and make this our biggest walk ever.

You can register a walking team at www.heartwalk.kintera.org/wilmingtonde. Individuals can join one of the several teams from Christiana Care already listed on the site. Or call your co-workers, friends and family and start your own team. On-site registration begins at 8 a.m.

For more information, contact committee co-chair Bob Mulrooney, rmulrooney@christianacare.org; 302-733-3994.
### 2012 Cancer Symposium, Sept. 20

The Helen F. Graham Cancer Center’s annual Cancer Symposium will be Thursday, Sept. 20, 6-8:30 p.m., at the John H. Ammon Medical Education Center. This year’s symposium and dinner program, “The Human Papilloma Virus,” will provide health care professionals with greater insight into the virus, as well as the latest recommendations for prevention and screening of oropharyngeal and cervical cancer. Interactive Q & A will follow each presentation.

Adam Raben, M.D., director of clinical research in the Department of Radiation Oncology, and Mark Borowsky, M.D., director of the Division of Gynecologic Oncology, will present lectures and take part in discussions about HPV in oropharyngeal cancer and cervical cancer, respectively.

In addition, the National Cancer Institute Annual Community Clinical Oncology Awards Program will take place at the symposium.

To register go to: cchs.cloud-cme.com/Cancer2012.

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### In the community

#### September

9. **A Kidney Transplant Educational Workshop** will be from noon to 3:30 p.m. will be Sunday, Sept. 9, at the Sheraton Dover Hotel, 1570 N. DuPont Highway, Dover. It is a free educational program giving patients and their families important information on transplantation before and after the start of dialysis. Registration and complimentary brunch starts at 11:30 a.m. Preregister online in the Health & Wellness/Events & Classes area at christianacare.org by Thursday, Aug. 30, or call 623-3816 to register.

11. **The Second Annual Delaware Breastfeeding Symposium** will be from 7:15 a.m. to 4 p.m., Tuesday, Sept. 11, at the John H. Ammon Medical Education Center. National experts on breastfeeding scheduled to speak include Natasha Sriraman, M.D., Esther Chung, M.D., and Diane Spatz, Ph.D.

#### October


18. **The 3rd Annual Kidney Transplant Symposium** for nurses and dialysis technicians will be from 8 a.m. to 4 p.m. Oct. 18. at the Christiana Hilton, 100 Continental Drive. Registration is free, light breakfast and lunch included. Register online through the I-net Education Center or call 623-3816 and leave a message that you are responding to attend the Kidney Transplant Nursing Symposium with your name and phone number.

20. **The 7th Annual Latina Conference,** “Strong and Healthy Latinas: Love Yourself, Love Your Family” will be from noon to 4 p.m., Oct. 20, at Bayard School in Wilmington. It’s a special program in Spanish for women of all ages and their families to inform, inspire, encourage, and offer hope on breast health, breast cancer and other health issues. If you would like to attend or volunteer to help with this community event spearheaded by the Community Health Outreach and Education team from the Helen F. Graham Cancer Center, please call Nora Katurakes at 623-4628.

26. **The Heart Failure Summit 2012** will be held on Friday, Oct. 26, from 7 a.m. to 3:30 p.m. at John M. Clayton Hall on the University of Delaware Campus. Registration is $75 per person ($65 for Christiana Care employees). Register online through the I-net Education Center or call 733-1507. Registration includes conference materials, continental breakfast, lunch and refreshments.
Publications


Daniel J. Meara, M.D., D.M.D., Program Director and Director of Research for Oral and Maxillofacial Surgery:


• An article, “Continuous Infusion of Bupivacaine for Pain Control after Anterior Iliac Crest Bone Grafting for Alveolar Cleft Repair in Children,” in the November 2011 Cleft Palate-Craniofacial Journal.


Presentations

Robert L. Witt, M.D., an abstract “Tissue Engineering an Artificial Salivary Gland” at the 8th International Conference on Head & Neck Cancer in Toronto, which won honorable mention.

Kim Tran, R.Ph., MBA, a poster, “Body Mass Index As A Predictor Of Percent Excess Weight Loss One Year Post Laparoscopic Adjustable Gastric Band (LAGB),” at the 29th annual American Society for Metabolic & Bariatric Surgery meeting in June 2012.


Lindsay Ashkenase, M.D., presented an update of Christiana Care Family Medicine Residency Program’s future path during the P4 Collaborative at a program director workshop in June.

Appointments

Brad Sandella, D.O., program director of the Sports Medicine Fellowship Program.

Kristopher Fayock, M.D., associate program director of Sports Medicine Fellowship Program

Margot Savoy, M.D., MPH, medical director of the Family Medicine Center, president-elect of Delaware Academy of Family Physicians (DAFP).

Erin Kavanaugh, M.D., assistant program director of Family Medicine Residency Program, received DAFP’s Teacher of the Year Award and is now DAFP vice president.

Lindsay Ashkenase, M.D., Family Medicine Residency Program faculty, assistant treasurer of DAFP.

Awards

Stephen A. Pearlman, M.D., received a Master’s in Healthcare Quality and Safety from the Jefferson School of Population Health in August.

Dean Bennett, RPh, CPHQ, has been named chair of the Section Advisory Group on Medication Safety for the American Society of Health-System Pharmacists (ASHP).
In its annual Best Hospital edition, U.S. News & World Report places Christiana Care’s Department of Medicine among the top 50 listing in the specialty of gastroenterology.

Christiana Care is the only adult acute-care hospital in Delaware to make the best hospital list, which includes only 3 percent of the 5,000 U.S. hospitals evaluated.

The publication ranks Christiana Care No. 4 out of the 93 hospitals in the Philadelphia metropolitan area. Last year, Christiana Care ranked No. 9 in the Philadelphia metropolitan region.

Christiana Care also ranks as a high-performing hospital in 11 specialties:
- Cancer
- Cardiology & Heart Surgery
- Diabetes & Endocrinology
- Ear, Nose & Throat
- Geriatrics
- Gynecology
- Nephrology
- Neurology & Neurosurgery
- Orthopedics
- Pulmonology
- Urology

The hospital rankings, said U.S. News Health Rankings Editor Avery Comarow, help steer patients to hospitals with strong skills in the procedures and medical conditions that present the biggest challenges. “All of these hospitals are the kinds of medical centers that should be on your list when you need the best care,” he said. “They are where other hospitals send the toughest cases.”

Hard numbers stand behind the rankings in most specialties – survival rates, patient safety, procedure volume and other objective data. Responses to a national survey, in which physicians were asked to name hospitals they consider best in their specialty for the toughest cases, received less importance than in the past.

The rankings cover 16 medical specialties and all 94 metro areas that have at least 500,000 residents and at least one hospital that performed well enough to be ranked.

In the past four years, Christiana Care has received top rankings in Ear, Nose and Throat, Endocrinology, Digestive and Respiratory Disorders.

The complete rankings and methodology are available at http://health.usnews.com/best-hospitals.

American Cancer Society Hometown Heroes

At an event in May, the American Cancer Society honored its Hometown Heroes, local advocates and volunteers who have helped the organization save more lives from cancer. Shown here are honorees Bill Bowser, Esq., recognized for his work with the Delaware Cancer Consortium; Stephen Grubbs, M.D., for work with the Delaware Cancer Consortium; Nora Katurakes, RN, OCN, for community outreach and her impact on the community; and Nicholas Petrelli, M.D., Bank of America endowed medical director of the Helen F. Graham Cancer Center, who presented the award.
Planting the seeds for healthy choices at Camp FRESH

Since 2007, Christiana Care’s Camp FRESH has helped teens serve as ambassadors of nutrition and wise lifestyle choices in their communities.

Josh Yearwood, 17, of Wilmington is the first camp graduate to become a full-fledged counselor. Over the five years he has attended Camp FRESH, he has learned a lot about taking responsibility for his own well-being. He watches Dr. Mehmet Oz on TV to pick up more tips.

“I learned that if you eat with your left hand, you have to stop and think about eating,” Josh said. “It isn’t automatic, as it is when you eat with your dominant hand.”

An important part of the Camp FRESH mission is to share with the community the importance of eating healthful foods. Josh’s mother is now growing herbs in their yard. On a recent evening, she cooked a stew of lamb and lentils with fresh broccoli.

“It was nutritious — and really good, too,” Josh said.

The skills he gained working in the Camp FRESH kitchen helped him to land his first job, as a pastry chef at Columbus Inn in Wilmington.

“Being a counselor here has helped me with leadership,” Josh said. “I’ve learned how to gather input from the campers so I can make decisions.”

Last year, Camp FRESH facilitators asked campers to make suggestions on how to improve the program. Teens recommended new activities, such as an outing to a pool and watching movies. Josh suggested bringing in a speaker from Planned Parenthood to talk with teens about contraception and preventing sexually transmitted diseases. All three recommendations were incorporated into this year’s program.

Christopher C. Moore, adolescent health program manager at Christiana Care’s Center for Community Health, said Camp FRESH offers teens a safe place to ask questions and voice concerns.

“They can give their opinion and not be judged for it,” he said. “We treat the campers like young adults, not children.”

Camp FRESH, short for Fresh Resources Everyone Should Have, educates youths age 13-18 who live in Wilmington and New Castle. Camp takes place at Christiana Care’s Eugene du Pont Preventive Medicine & Rehabilitation Institute at Pelleport. This year, 45 teens enrolled in the program, including nine junior counselors who serve as mentors to younger campers.

Daevon Clarke of Wilmington, who just graduated from Howard High School of Technology, is a junior counselor. He said his three years at Camp FRESH have taught him skills he will take with him to the Art Institute of New York City, where he will study fashion design.

In the early years of the program, campers surveyed neighborhoods in the city and found that access to fresh fruits and vegetables was limited. Since then, two supermarkets have opened in underserved communities — ShopRite on the Wilmington Riverfront and Food Lion in Edgemoor. This year, campers again surveyed consumers in Wilmington’s Rodney Square to learn more about where city residents shop and what they eat.

Landra McCurtis of Wilmington, a second-year camper, said the stores have made it easier for her mother to buy nutritious foods. On a recent morning, her mother made her a fruit smoothie with nectarines and plums. Landra, 14, also has persuaded her mother to bake chicken instead of frying it.
Soarian positions us to move toward a single master patient index ... to enhance care by quickly and accurately tracking patients and the services they have received, regardless of where they are in the system.
GetWellNetwork makes filling prescriptions easier at discharge

In a pilot program at Christiana Hospital under way since May, patients can order their prescription medications via the GetWellNetwork computer in their hospital room, and then pick them up at the retail pharmacy in the hospital lobby before they head home.

“Patients really appreciate the convenience,” said Kristina Santoro, RN, IPC manager for GetWellNetwork. “The last thing someone wants to do after being in the hospital is go to a drugstore and wait for a prescription to be filled.”

The pilot project launched on units 4C, 5C and 6B, which care for surgical, medical and oncology patients. It has proved so popular that it may soon roll out to other units.

Here’s how it works: Through a prompt on the GetWellNetwork touchscreen, patients who are soon to be discharged are asked if they would like to have their medications filled by the Christiana Care retail pharmacy before they go home.

“When you hit ‘yes,’ a pharmacy staff member comes up and talks to you,” says Sebastian Hamilton, MBA, PharmD, director, Outpatient Pharmacy Services. “Before the GetWellNetwork, the pharmacy discharge facilitator would have to visit each patient. The GetWellNetwork is expected to increase efficiency and allow the retail pharmacy to serve additional patients.”

Kim Moore, a certified pharmacy technician, is the discharge facilitator. She visits the patient’s room and explains how the process works.

“We have a good conversation, because we aren’t in that rush you often find in a retail pharmacy,” she says. “We are in a private setting where we can take our time.”

The Christiana Care retail pharmacy accepts the same insurance as most commercial drugstores. Patients can arrange to cover any co-pays before they pick up their medications. There’s little or no waiting.

“Most of the medications patients receive when they leave the hospital don’t have a refill,” Moore says. “But if they do, we can make arrangements to transfer the prescription to their local pharmacy.”

Patients have responded enthusiastically. Each day, the pharmacy fills 30 to 40 prescriptions for patients being discharged from the three units.

“It makes total sense,” Hamilton says. “Patients tell us that they love it.”

One of them is Sandra Waples, who was happy to skip a stop at a drugstore on the long ride home to Bridgeville after a recent surgery. “A message asking if I wanted the medication service popped up when I turned on the TV screen in my hospital room,” she said. “Right away, I said ‘yes,’ I was so glad that I wouldn’t have to make a special trip and then wait for my medicine.”

The pharmacy program is one of several new initiatives by GetWellNetwork to make life less complicated and more pleasant for patients, Santoro said. The GetWellNetwork also enables patients to check email, watch movies, learn about their medications and keep in touch with loved ones.

Pharmacy technician Kim Moore interviews a patient who requested to pick up prescription medications at the hospital retail pharmacy after she is discharged. This process is more convenient than ever because of a pilot program that allows patients to order their prescriptions through the touchscreen GetWellNetwork in their hospital room.
Trustee and board member Diane Thomas now presides over the Junior Board of Christiana Care, Inc., the self-governing, not-for-profit organization whose members provide more than 15,000 volunteer hours each year and, over the years, have raised millions of dollars to support projects throughout the health system.

Other Junior Board leaders are: Christine Frysztacki, 1st vice president, Ways and Means; Nancy Rich, 2nd vice president, Hospital Services; Irene Larson, 3rd vice president, External Affairs; Judy Legge, secretary; Georgia Brereton, administrative secretary; Judy Sherman, treasurer; Judy Kirlan, assistant treasurer; Angela Case, Membership; and Barbara Burd and Ann Kappel, both Christiana Care trustees, Provisionals. Kappel, who preceded Thomas as Junior Board president, is now an ex-officio member of the Board of Directors of the Junior Board.

Christiana Care expresses special thanks to Ann Kappel for her outstanding leadership and service as Junior Board president from 2010 to 2012.

History of giving

“The Junior Board and their extraordinary support of the health system is truly one of the nicest things I’ve experienced since coming to Christiana Care,” said Timothy J. Gardner, M.D., trustee, and medical director of the Center for Heart & Vascular Health. “It is certainly one of our unique strengths to have such exceptional support from this dedicated group in our community,” Dr. Gardner said.
Ticagrelor is the most recent antiplatelet approved by the FDA. It is indicated to reduce thrombotic cardiovascular events in patients with acute coronary syndromes including ST elevation myocardial infarction, non-ST elevation myocardial infarction, and unstable angina. Other available formulary alternatives include clopidogrel and prasugrel. These agents inhibit the P2Y12 adenosine diphosphate (ADP) receptor on platelets resulting in decreased platelet activation and aggregation. Clopidogrel and prasugrel are thienopyridines that irreversibly bind to the P2Y12 receptor for the lifetime of the platelet. They are both prodrugs that require conversion to their associated active metabolites by CYP450 enzymes before binding to the P2Y12 receptor. Ticagrelor is not a prodrug and therefore does not require metabolic activation. It results in rapid, reversible, and concentration dependant inhibition of the P2Y12 receptor on platelets. However, ticagrelor is a substrate of CYP450 3A4 and to a lesser extent P-glycoprotein, therefore there is the potential for drug interactions. Specific characteristics of each agent should be considered when selecting the most appropriate agent for patients.

The updated percutaneous coronary intervention guidelines make new recommendations regarding the use of P2Y12 inhibitors as part of dual antiplatelet therapy following stent implantation. In patients receiving a bare metal or drug eluting stent for acute coronary syndromes (ACS), the committee recommends clopidogrel 75 mg orally daily, prasugrel 10 mg orally daily, or ticagrelor 90 mg orally twice daily (Level of Evidence: B). Clopidogrel is the only option recommended in patients receiving stents for non-ACS indications (Level of Evidence: B).

### Comparison of Christiana Care Formulary antiplatelets

Jessica McPoland, PharmD

<table>
<thead>
<tr>
<th></th>
<th>Ticagrelor (Brilinta&lt;sup&gt;®&lt;/sup&gt;)</th>
<th>Clopidogrel (Plavix&lt;sup&gt;®&lt;/sup&gt;)</th>
<th>Prasugrel (Effient&lt;sup&gt;®&lt;/sup&gt;)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Loading dose</strong></td>
<td>180 mg</td>
<td>600 mg</td>
<td>60 mg</td>
</tr>
<tr>
<td><strong>Maintenance dose</strong></td>
<td>90 mg orally twice daily</td>
<td>75 mg orally daily</td>
<td>10 mg orally daily</td>
</tr>
<tr>
<td><strong>Time to maximum platelet inhibition</strong></td>
<td>2-4 hours</td>
<td>4-8 hours</td>
<td>2-4 hours</td>
</tr>
<tr>
<td><strong>Maximum inhibition of platelet aggregation</strong></td>
<td>85-95%</td>
<td>40-60%</td>
<td>75-85%</td>
</tr>
</tbody>
</table>
| **Drug interactions** | • Avoid use of strong CYP450 3A inducers or inhibitors  
• Ticagrelor may increase serum concentrations of simvastatin, lovastatin, and digoxin  
• The manufacturer recommends avoiding the use of CYP450 2C19 inhibitors such as omeprazole and esomeprazole, however current PCI guidelines make no restrictions unless patients are at low risk for GI bleeding  
• No clinically significant pharmacokinetic drug interactions |  |  |
| **Adverse effects**   | • Bleeding  
• Dyspnea  
• Bradyarrhythmias  
• Elevated serum creatinine  
• Bleeding  
• Thrombotic thrombocytopenia purpura  
• Bleeding  
• Thrombotic thrombocytopenia purpura |  |  |
| **Discontinuation prior to surgery** | > 5 days                           | > 5 days                         | > 7 days                       |
| **Contraindications** | • History of intracranial hemorrhage  
• Active pathological bleeding  
• Severe hepatic impairment  
• Active pathological bleeding  
• History of stroke or transient ischemic attack  
• Active pathological bleeding |  |  |
 References:
Brilinta® Prescribing Information. Wilmington, DE. AztraZeneca LP, July 2011.
Effient® Prescribing Information. Indianapolis, IN. Eli Lilly and Company, September 2011.

Prescribing Notes
- Ticagrelor should only be administered with low doses of aspirin as doses >100 mg daily may decrease the efficacy of ticagrelor
- Avoid simvastatin and lovastatin doses >40 mg
- Patients identified as CYP450 2C19 poor metabolizers have diminished antiplatelet response to clopidogrel and alternative therapy may be considered
- Not recommended in patients > 75 years old
- Use with caution in patients < 60 kg
- Only indicated for patients undergoing PCI

FORMULARY UPDATE — JULY 2012

FORMULARY ADDITIONS

<table>
<thead>
<tr>
<th>MEDICATION – GENERIC/BRAND NAME</th>
<th>STRENGTH / SIZE</th>
<th>USE / INDICATION</th>
<th>COMMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denosumab / Xgeva</td>
<td>120 mg 1.7 mL vial</td>
<td>Prevention of skeletal-related events in patients with solid tumor associated bone metastases</td>
<td>Administration limited to CCHS owned-office practices and ambulatory infusion centers</td>
</tr>
<tr>
<td>Sodium tetradecyl sulfate injection / Sotradecol</td>
<td>1% &amp; 3% 2-mL vial</td>
<td>Treatment of abdominal and pelvic varicose veins; and venous malformations</td>
<td>Polidocanol injection is the preferred CCHS Formulary sclerosant for treatment of spider and reticular veins in the extremities</td>
</tr>
<tr>
<td>Talc, sterile powder</td>
<td>5 gram vial</td>
<td>Treatment of pleural &amp; malignant pericardial effusions, and pneumothorax</td>
<td>Line-item extension</td>
</tr>
</tbody>
</table>

CCHS MEDICATION POLICY

Ondansetron, maximum single dose
- Maximum single IV and oral ondansetron dose is 16 mg.
- 16 mg will be substituted when single doses greater than 16 mg are prescribed for inpatients

FORMULARY DELETION

Clofarabine (Clolar) injection
Inspired by the tireless volunteer efforts of their mother, Christiana Care trustee Penny Saridakis, who co-chairs the Friends of the Helen F. Graham Cancer Center, (from left) brothers Dean, Sander and Harry Saridakis donated money they earned from pulling weeds, washing windows and cleaning the car — plus some rewards from the Tooth Fairy — to help cancer patients in need.

“People who walk through this building need all the help they can get,” Bank of America Endowed Medical Director Nicholas J. Petrelli, M.D., told the brothers when he learned of their gift. “We’re so proud of what you’ve decided to do at such a young age.”