

Technology and Bedside Care · New Lung Cancer Screening · Polo Cup Fundraiser

# synapse

THE CHESTER COUNTY HOSPITAL AND HEALTH SYSTEM MAGAZINE



## PILLAR OF STRENGTH

*The Next Generation of Health Care*

# CALENDAR

▼ ONGOING

## Screenings

BLOOD PRESSURE

CANCER RISK  
EVALUATION – 610.423.4556

CARDIOVASCULAR HEART  
TRACKS™ – DECEMBER 3

FALLS RISK – 610.431.1852



HYDRATION – 610.431.1852

LUNG CANCER

PERIPHERAL VASCULAR  
DISEASE (PVD) –  
610.738.2771

SKIN CANCER – 610.431.5644

STROKE

## Support Groups

CANCER

CARDIAC DISEASE

CHRONIC LUNG DISEASE

CROHNS AND COLITIS

ICD (DEFIBRILLATOR)

DIABETES

GLUTEN INTOLERANCE

INSULIN PUMP

MACULAR DEGENERATION

PARKINSON'S DISEASE

## Shopping

WOMEN'S AUXILIARY  
GIFT SHOP

[ located at The Chester  
County Hospital ]

THE ENCORE SHOP

[ located at Routes 1N  
and 52S ]



**HOSPITAL PROGRAMS & SUPPORT :** The Chester County Hospital and Health System offers various types of programs, courses, support groups and fundraising events. Here are a few of the many opportunities that will be taking place in the upcoming months.

## Wellness Events & Fundraisers

**Reversing Pre-Diabetes** – January 15

**Stop Smoking Now!** – January 16, February 12, March 12

**Weight Matters** – January 21 : March 11

**Wellness Wednesdays at the Y** – February 13

**When a Heart Attack Begins** – February 13

**Hands on Hearts, CPR Training Day** – February 16

**Women and Heart Disease, Paint the Town Red** – February 19

**Reversing Pre-Diabetes** – February 19

**Turn Your Health Around with Nutrition & Less Stress** –  
February 21 & February 28

**Bones & Joints** – March 12

**Beef - Beer - Boogie\*** – March 15

**Dash 4 Diabetes\*** – April 6

**May Festival Gala\*** – April 20

**May Festival\*** – May 17-19

**Polo Cup\*** – June 9

**Chester County Challenge for Cancer Bike Tours\*** –  
June 16

**Heart + Sole 5K for Cancer Care\*** – September 21

**Chester County Day House Tour\*** – October 5

**Dilworthtown Inn Wine Festival\*** – October 13

\*FOR SPECIAL EVENTS INFORMATION CALL 610.431.5329

## Registration

Register online or call **610.738.2300**, except where noted.

Please note: Some programs have a fee. Pre-registration is required for these programs. Because enrollment is ongoing, these events could potentially be filled. *Dates are subject to change.*

[www.chestercountyhospital.org/synapse](http://www.chestercountyhospital.org/synapse)





# Contents

## ▼ DEAR NEIGHBORS



At The Chester County Hospital and Health System, our vision is to be the leading provider of care in our region. Our county has evolved during the

Hospital's 120-year history, and as your healthcare provider, we've always done what is right to provide a foundation of great care for our community.

Today, our evolution continues – we're building a new patient wing and beginning to reconfigure our Emergency Department for greater efficiency (p. 2); we're adding technological innovations to support bedside care (p. 10); and we're creating programs – such as the new Lung Cancer Screening – to keep our neighbors healthy (p. 14).

In the midst of these improvements, we have been carefully monitoring and contemplating the national conversations surrounding health care quality, patient satisfaction, rising costs and accessibility. We have considered the implications these trends might have on a community-based Hospital like ours. As a result, our Board of Directors – comprised of devoted local volunteers – unanimously decided this past August to look into strategic partnerships with like-minded organizations in an effort to benefit our Hospital and enhance the services that we bring to the people who depend on us for care.

Although a partnership is what we seek, we stand in a position of strength. We provide nationally recognized quality; we earn high marks for patient satisfaction; we keep our costs low; and we maintain a positive reputation for providing a warm and compassionate culture of health care. We are optimistic that a partnership will give us the opportunity to be better positioned to broaden our existing vision for the next 120 years.

Warm regards,

Michael J. Duncan  
President and CEO

## cover story

### 2... PILLAR OF STRENGTH: THE NEXT GENERATION OF HEALTH CARE

With a long history of doing the right thing for the community, the Health System is embarking on a journey to find a strategic partner to support its vision for the next century. But while the search process is taking place, the Health System continues to grow in size and to make improvements to its care process.

## features

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*What a patient sees...* compassionate, attentive and knowledgeable bedside care. *What the patient gets...* an integrated data-driven technological system that provides alerts and clinical workflows based on the individual's medical record. The behind-the-scenes power of information technology is seamlessly supporting bedside care from admission to discharge, and beyond.

### 14... BREATHING A SIGH OF RELIEF

New advances in early detection are changing the way doctors diagnose lung cancer – a disease that was previously difficult to detect in its beginning stages. Our new Lung Cancer Screening Program gives our specialists the ability to find lung cancer at a much earlier stage, thus giving patients a better prognosis and greater hope.

### 20... CHARITABLE GIVING: SPORT OF KINGS REIGNS SUPREME

Since 2007 the Polo Cup has taken place annually on the second Sunday of June. Guests enjoy an event that has all the elements of a storybook summer rolled into one day – festive tailgating, sundresses and fancy hats, delectable food and beverages, and the thrill of a countryside sport.

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Wellness Presentation: Early Heart Attack Care



## synapse

SYNAPSE MAGAZINE SINCE 1981

*Synapse* is the award-winning publication produced by The Chester County Hospital and Health System's Corporate Marketing Department. The articles provided in this magazine are solely for informational purposes. It should not be relied on or used in placement of a physician's medical advice or assessment. Always consult a physician in matters of your personal health.

William W. Wylie, Jr. Chairman, Board of Directors  
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▶▶ Feedback Welcome  
Email [synapse@cchosp.com](mailto:synapse@cchosp.com) to let us know what you think, to make suggestions about future topics or to change your mailing information.



# THE NEXT GENERATION OF HEALTH CARE

*Doing the right things  
for the health needs  
of the community*



GROUNDBREAKING 2012



# { “A Position of Strength.” }

THIS WAS THE PHRASE THE CHAIRMAN OF THE CHESTER COUNTY HOSPITAL AND HEALTH SYSTEM’S BOARD OF DIRECTORS CHOSE IN A RECENT LETTER TO CONSTITUENTS AS HE ANNOUNCED THE HEALTH SYSTEM’S INTENTION TO SEEK A CORPORATE PARTNER.

- > **We stand in a position of strength** because next Summer The Chester County Hospital will be welcoming patients to a brand new 93,000 sq. ft. patient tower so it can care for more people each year and offer the highest level of amenities and services.
- > **We stand in a position of strength** because we are launching a complete redesign of our Emergency Department to enhance efficiencies, to improve the design of our facility, and to reduce wait times.
- > **We stand in a position of strength** because we invested in the most advanced daVinci Si Robotic Surgical platform and successfully completed 270 surgical cases in its first 12 months of operation, far surpassing our first-year goal. The hospital just celebrated its 300th robotic surgery.
- > **And, we stand in a position of strength** because we ensure the highest quality standards for heart care, having received Accreditation for Cardiovascular Excellence for cardiac catheterization and percutaneous coronary intervention (PCI).

Beyond these exciting projects and achievements, we continually strengthen our technology systems. We constantly re-analyze and hone our clinical processes. We work to exceed national benchmarks for quality with greater success every year. We strive to keep our expenses streamlined and any costs to our patients low.

This is what we do at The Chester County Hospital and Health System. It is a natural part of our culture to push and push and push ourselves to become a stronger healthcare organization. The best way we can serve you is to continually strive to be better at what we do. Why? Because it is the right thing to do.

**Yes, we stand in a position of strength.** Yet, you may have heard that we announced in August that we are seeking a strategic partner. Chairman William W. Wylie, Jr.’s full statement reads, “We begin from a position of strength, but the landscape is changing rapidly and we believe that health care institutions face increased risk in this new health care environment. It is our duty, as a Board, to be proactive in assessing the future of health care and the needs of our institution.

The increasing demands placed upon the health care industry are causing many hospitals and health systems in our region and across the country to consider new options and models of care. The Health System’s Board has concluded that the best way for the institution to maintain its ability to deliver on its mission into the future is to look beyond independence and seek a partnership.

The Health System’s President and CEO, Michael J. Duncan, says, “We are uniquely positioned in one of the best markets in the Philadelphia region and we boast a strong reputation, excellent clinical services, and a loyal Medical Staff. It is clear that health care will continue to be capital intensive as our community grows and the trend of delivering care closer to home accelerates.”

*continued >*



STRENGTH

## The Tower Project Unfolds

It is that unwavering mission to provide the highest quality of care that drives us to continue to build, to plan and to grow. This past March, the Hospital broke ground on a \$45.2 million expansion that will ultimately add 72 additional private patient rooms. The new rooms will include a large window for daylight to foster healing, a bedside clinical computer, a recliner for visitors, a dining area, a flat-panel TV, free internet, extra space for get-well gifts, in-room controls for individual lighting and heat, and a bathroom designed to reduce the risk of falling. The Tower Project also includes the addition of a second vault to house the latest, state-of-the-art Varian Linear Accelerator for the Hospital's Radiation Oncology program to offer the latest advancements in radiation therapy for our cancer patients. A linear accelerator is a piece



**MIKE DUNCAN, PRESIDENT AND CEO, ADDS HIS SIGNATURE TO THE SEVERAL HUNDRED OF NAMES OF EMPLOYEES, PHYSICIANS, VOLUNTEERS AND CONSTRUCTION TEAM MEMBERS WHO SIGNED THE CEREMONIAL TOPPING OUT BEAM.**

of technology that uses electricity to form a stream of fast-moving subatomic particles creating high-energy radiation to treat cancer. The Health System recently celebrated the Topping Out milestone when the last piece of steel – along with an evergreen tree and U.S. flag – was hoisted into position.

EXPANSION

## Sustainable Design

- Minimized pollutants for healthy air quality
- Vegetated roof for green views
- White roof for energy-efficient HVAC
- 1:1 tree replacement
- Water-efficient plumbing
- No new hard surfaces for minimal water run-off







When the Tower opens in the summer of 2013, it will initially be fit out with 24 beds on the fourth floor to expand the capacity of the Telemetry Unit for patients who need continuous heart monitoring. In time, the remaining two floors will be completed to match the growing needs of the Hospital and community. Bringing the new Telemetry beds on line first will provide us with the added capacity to accommodate Emergency Department (ED) admissions and will enhance our ability to triage inpatients more quickly.

## Emergency Department Renovation

And speaking of ED admissions, the Health System sought the insight of the Penn State Hershey Medical Center Team to analyze opportunities for improvement within an emergency department that treats more than 40,000 patients each year. Penn State Hershey's ED Interdisciplinary Committee (EDIC) is a model for collaboration to address the complexities required to create more effective emergency care.

Based on the EDIC recommendations, our Emergency Department will be improving the frontline patient-

*continued on page 6 >*

## Hospital Seeking Corporate Partnership

For many decades, the national conversation has centered on the rising costs of health care, inconsistent quality metrics across the industry, the impact of the baby-boomer generation on the demand for health care services, and how the country, businesses and individuals cannot afford to sustain these high costs. Many efforts are underway at all levels to "bend the cost curve;" that is, to reduce the rate of growth in health care services and expenses. These efforts, and more to be developed under national health care reform, are designed to encourage higher quality and patient satisfaction while reducing the amount of money paid to hospitals and physicians. Forming larger and more integrated systems of care will improve and help to standardize patient care, provide better coordination of services through integrated information systems, and allow organizations to achieve greater efficiency.

PARTNERSHIP



## The next generation... continued

assessment process by following a “Physician Directed Queuing” system, also known as PDQ. In the coming months, our ED will be addressing its unique information system (IS) needs, maximizing the responsibilities of its team for more efficient patient care, and reconfiguring its physical space to better accommodate the high volume of patients and waiting families in the ED.

Within the confines of the existing ED footprint, the Health System will increase the amount of patient care space and organize the treatment areas based on the patient’s level of emergency ultimately to improve the transition of patients from walk-in to inpatient admission or to outpatient discharge.

The Health System anticipates that, once fully implemented, the PDQ model will significantly reduce its average ED wait times, and enable the Hospital to handle roughly 9,000 more emergency visits annually.

As the Hospital anticipates a re-engineered ED, the grand opening of its sizable new patient wing, and enhanced technology for its cancer program, some may wonder, why would the Health System move forward with plans for construction during a time when it seeks a partner?

Paul F. Huberty, Senior Vice President for Strategic Planning and Marketing, explains, “The right partnership will provide us with the resources necessary to build upon our already excellent position

## Re-engineering Emergency Care

### OPPORTUNITIES BASED ON THE PDQ MODEL

- **Mini-registration for all patients at arrival, with in-depth registration at bedside or checkout**
- **Physician-directed assessment at patient arrival to greet and address waiting questions**
- **Immediate triage for all patients with care provided in ED sections designed for specific levels of emergency**
- **Upgraded and integrated ED information systems**
- **Streamline the process for transitioning ED patients to inpatient rooms**

in the community. To do that, we need to build more private rooms to meet consumer expectations, add more physicians to our Medical Staff, purchase new technology, and expand the number of our locations throughout the county.”

Duncan adds, “The Chester County Hospital and Health System has proudly served our community for 120 years and has earned a reputation of doing what is right for our community, patients and family. Our Mission has been and will continue to be one of service – to provide the highest quality health care to all who come to us in need. It is a guiding principle for which we are quite proud, and one that continues unchanged.”

*By Lisa M. Huffman, Photos by John Welsh & Richard Bell*

▶▶ LEARN MORE AT  
[www.chestercountyhospital.org/synapse](http://www.chestercountyhospital.org/synapse)



## Membership with Jefferson Neuroscience Network Advances Care throughout the Region

The Chester County Hospital and Health System has joined the Jefferson Neuroscience Network. Through this collaboration, Jefferson and The Chester County Hospital will provide some of the most sophisticated care and expertise available to patients with time-sensitive neurovascular diseases. By joining the Network, the Hospital offers patients access to the resources of Jefferson's comprehensive stroke center, including community education programs, leading-edge clinical trials, and advanced protocols for the detection and treatment of stroke and other neuroscience disorders.

"Time is brain" is the credo among healthcare professionals for diagnosing and treating time-sensitive neurovascular diseases, including arteriovenous malformations (AVMs), brain aneurysms and, especially, stroke. Certain drugs for stroke must be administered within 4.5 hours for best chance of functional recovery. Timely performance of neurological procedures to repair AVMs and aneurysms are similarly urgent.

A Joint Commission-accredited primary stroke center, Jefferson Hospital for Neuroscience is the region's only dedicated hospital for neuroscience and the leading, most experienced and comprehensive center for diagnosis and treatment of stroke and cerebrovascular disease. The Jefferson Acute Stroke Center is the largest such facility, with more board-certified neurocritical care physicians, neurovascular neurologists and dual-trained neurosurgeons than any other center in the Delaware Valley.

## Primary Stroke Center Recertification

Every second matters when someone is having a stroke. It is critical to call **9-1-1** early and get to the nearest hospital immediately in order to receive the urgent tests and medication within a certain amount of time. Through the certification process, The Chester County Hospital showed that its stroke care program meets national standards and guidelines that can significantly improve outcomes for stroke patients. Stroke patients on their way to our Hospital can rest assured that they will be receiving the quality of care that meets the highest level of national standards.

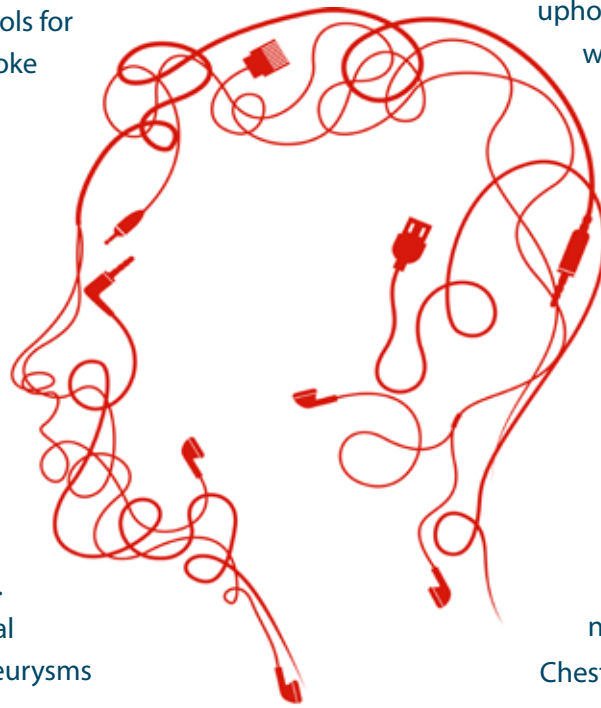
The Chester County Hospital's commitment to uphold national stroke standards of care was recognized with Gold Seals of Approval™ by the Joint Commission in 2008, 2010 and 2012.

## Most Improved in Information Technology

*Healthcare IT's* 2012 installment of the "Health Care's Most Wired" survey finds hospitals nationwide leveraging health information technology in new and envelope-pushing ways. The Chester County Hospital and Health System was recognized as one of the "most improved" among the 1,570 hospitals for the survey.

## "A" Rating for Safety

The Health System was honored with an "A" Hospital Safety Score<sup>SM</sup> by The Leapfrog Group, an independent national nonprofit run by employers and other large purchasers of health benefits. The score was calculated under the guidance of a Blue Ribbon Expert Panel using publicly available data on patient injuries, medical and medication errors, and infections.



our new physicians.



**Urmila Chaudhry, MD**

**Department of Pediatrics, Section of Neonatology.** Dr. Chaudhry graduated from GSVM Medical College in India, completed an internship at Civil Hospital in India, a residency at Mount Sinai Hospital in Chicago and a fellowship at Mount Sinai and the University of Illinois Medical Center. Dr. Chaudhry is Board Certified in Neonatology and is part of CHOP Newborn Care at The Chester County Hospital.

**Sarah Kang, DO**

**Department of Medicine, Section of Internal Medicine.** Dr. Kang graduated from Philadelphia College of Osteopathic Medicine, completed an internship at Crozer Chester Medical Center and a residency at Bryn Mawr Hospital. Dr. Kang is Board Certified in Family Medicine and has joined Medical Inpatient Care Associates of Chester County (MICA).

**David Chen, MD**

**Department of Medicine, Section of Rheumatology.** Dr. Chen graduated from Drexel University School of Medicine, completed a residency at UMDNJ Robert Wood Johnson University and a fellowship at Temple University Hospital. Dr. Chen is Board Certified in Internal Medicine and has joined Arthritis Associates of the Main Line, PC.



**Barbara Elko, MD**

**Department of Medicine, Section of Internal Medicine.** Dr. Elko graduated from The Medical College of Pennsylvania, completed an internship at the Naval Medical Center in Virginia and a residency at Bryn Mawr Hospital. Dr. Elko is Board Certified in Internal Medicine and has joined Medical Inpatient Care Associates of Chester County (MICA).

**Robert Elliott, MD**

**Department of Surgery, Section of Neurosurgery.**

Dr. Elliott graduated from New York University School of Medicine, and completed an internship and residency at New York University. Dr. Elliott has joined Neurosurgical Care, LLC.



**Jennifer Cohen, MD**

**Department of Pediatrics, Section of Neonatology.** Dr. Cohen graduated from Tufts University School of Medicine in Boston, and completed an internship, residency and fellowship at Children's Hospital Boston. Dr. Cohen is Board Certified in Neonatology and is part of CHOP Newborn Care at The Chester County Hospital.

**Ronald Krauser, MD**

**Department of Medicine, Section of Rheumatology.** Dr. Krauser graduated from Wake Forest University School of Medicine in North Carolina, completed an internship and residency at Hahnemann University Hospital and a fellowship at the Hospital of the University of Pennsylvania. Dr. Krauser is Board Certified in Rheumatology and his office practice is Arthritis Associates of the Main Line, PC.



**Lisa Drinker, MD**

**Department of Pediatrics, Section of Neonatology.** Dr. Drinker graduated from Penn State College of Medicine, completed an internship, residency and fellowship at Duke University Medical Center. Dr. Drinker is part of CHOP Newborn Care at The Chester County Hospital.

**Elaine Goldhammer, MD**

**Department of Medicine, Section of Internal Medicine.** Dr. Goldhammer graduated from Jefferson Medical College and completed a combined Internal Medicine/Pediatric residency at Tulane University. Dr. Goldhammer is Board Certified in Internal Medicine and has joined Medical Inpatient Care Associates of Chester County (MICA).

**Richard Oyelewu, MD**

**Department of Medicine, Section of Internal Medicine.** Dr. Oyelewu graduated from the University of Lagos College of Medicine in Nigeria, completed an internship at the University of Lagos and a residency at Lankenau Medical Center. Dr. Oyelewu is Board Certified in Internal Medicine and has joined Medical Inpatient Care Associates of Chester County (MICA).

**Celeste Durnwald, MD**

**Department of OB/GYN, Section of Maternal Fetal Medicine.** Dr. Durnwald graduated from Northeastern Ohio Universities College of Medicine, completed a residency at Summa Health System in Akron, Ohio and a fellowship at Case Western Reserve University in Cleveland. Dr. Durnwald is Board Certified in Maternal Fetal Medicine and is part of Maternal Fetal Medicine Services of the University of Pennsylvania.



**Sony John, MD**

**Department of Family Medicine.** Dr. John graduated from the Medical University of Silesia in Poland and completed a residency at Hahnemann University Hospital. Dr. John is Board Certified in Family Medicine has joined Kennett Care Medical Associates.



### Francis Schanne, MD

#### Department of Surgery, Section of Urology.

Dr. Schanne graduated from Jefferson Medical College, completed an internship at Pennsylvania Hospital and a residency at the University of Pennsylvania. Dr. Schanne is Board

Certified in Urology and is in practice with Urologic Surgical Associates of Delaware.



### Jagruti Shah, MD

**Department of Radiology.** Dr. Shah graduated from Topiwala National Medical College in India, completed an internship at Greater Baltimore Medical Center, residencies at the Hospital of the University of Pennsylvania and Drexel University College of Medicine and a fellowship at the Hospital of the University of Pennsylvania. Dr. Shah is Board Certified in Radiology and is part of Community Radiology Associates of the University of Pennsylvania.

### Michael Sobel, DO

#### Department of OB/GYN, Section of Reproductive Endocrinology.

Dr. Sobel graduated from Kansas City University of Medicine and Biosciences, completed an internship at the University of Medicine and Dentistry of New Jersey, a residency at the Philadelphia College of Osteopathic Medicine and University of Medicine and Dentistry of New Jersey and a fellowship at Thomas Jefferson University. Dr. Sobel is part of Abington Reproductive Medicine, P.C.



### Michael Welsh, DO

#### Department of Family Medicine.

Dr. Welsh graduated from Philadelphia

College of Osteopathic Medicine and completed an internship and residency at St. Joseph Medical Center in Reading. Dr. Welsh is Board Certified in Family Medicine and has joined Unionville Family Medicine.

## vital signs



### Honored by Pennsylvania Athletic Trainers Society

The Pennsylvania Athletic Trainers Society (PATS) honored **John Manta, MD**, Orthopedics, and **Charles Barr, MD**, Family Medicine, with Team Physician Awards for outstanding healthcare contributions to the Commonwealth's athletic trainers. They were among the individuals recognized as Team Physicians with 15 or more years of service in the Commonwealth of Pennsylvania. They have worked alongside Athletic Trainers in caring for Pennsylvania's athletes and are therefore recognized as Honorary Members of PATS and pioneers of Sports Medicine. Drs. Manta and Barr provide care to high school student-athletes in the Downingtown Area School District.




### Appointed by the Governor

Cardiologist **Mian A. Jan, MD** was appointed by Pennsylvania Governor Tom Corbett as a commissioner to The Governor's Advisory Commission on Asian American Affairs. This Advisory Commission is committed to ensuring that the Commonwealth of Pennsylvania is receptive to the issues and concerns of its Asian American citizens. The Commission advises and makes recommendations to the Governor on policies, procedures, legislation and regulations that affect the Asian American community. Additionally, the Commission serves as the Governor's liaison to the Asian American community throughout the state.



▶▶ TO FIND A DOCTOR, CALL 610.738.2300, OR SEARCH ONLINE AT [www.chestercountyhospital.org/synapse](http://www.chestercountyhospital.org/synapse)



BECAUSE OF THE SUPPORT OF THE MOST ADVANCED TECHNOLOGY, >  
THE CLINICAL TEAM – LIKE NURSE KELLY FOLTIN, RN – CAN SPEND  
MORE QUALITY TIME AT THE PATIENT’S BEDSIDE DELIVERING QUALITY  
CARE AND LESS TIME SORTING THROUGH FILES TRACKING, ANALYZING  
AND COMPARING NOTES AND DATA.

# recalculating HEALTH CARE

Harnessing the Navigational Power of Information  
Technology to Make Care Better, Safer and More Personal

**WHAT YOU SEE** when you’re a patient at The Chester County Hospital are nurses, physicians, and other staff frequently attending to you while they add details into the bedside computer. You might assume they are simply updating the electronic health record (EHR) that gives a real-time account of your health status, test results, procedures, and medications to everyone involved in your care. That’s true, and vitally important, but it’s only part of the story. For more than 25 years, the Hospital has partnered with Siemens Healthcare to design its systems not only to store data, as a traditional medical record does, but to also actively use that information to guide care.

“We haven’t simply moved from writing notes by hand to typing them into a computer,” explains Karen Pinsky, MD, Chief Medical Information Officer. “We have gone much fur-

ther than that. We are populating information into a platform that allows us to leverage the data we are entering — making manual review easier, but also allowing the computer to constantly sift through it and recalibrate your care as needed.”

“Think of it as the GPS system in a car,” says Ray Hess, Vice President for Information Technology. “You’re the driver in control, but the system calculates the turns and alerts you as you are coming up to specific decision points. If for some reason you start going off course, the GPS helps to get you back on course. We are leveraging our systems to give our clinicians this type of directional safety net.”

“For any process, we analyze our current workflow, we develop a process for the way we want it to be, and then this becomes the specification for what we need to build,” Hess adds. “We figure out what the best process is based on best





practices from around the country, and then we build in the system tools to support that.”

**WHAT YOU GET AS A RESULT is a care environment that weds the expertise of its nurses and physicians with systems specifically engineered to support them in giving you the right care at the right time.** Whatever your diagnosis, the practitioners will lead you through the most up-to-date process of care, receiving alerts and reminders to guide them along the way. You will receive the right medications and tests. You will get care steps proven to lower the risk of in-hospital complications

such as deep vein thrombosis (DVT, or blood clots in the leg) and pneumonia. If you have an intravenous line or a urinary catheter, your nurse will be alerted when it needs to be changed or removed,

which drastically lowers infection risk. Your physician or nurse will always know what has happened and what care steps need to be considered next — or perhaps are overdue.

To achieve this, the Hospital’s information technology (IT) staff and clinicians work closely with the Siemens team to build these systems from the ground up. The partnership with Siemens has been critical in this work.

“It has been great for Siemens to work with a Health System that is committed to being an early adopter of new technologies,” says Tom Giannantonio, Program Manager for Siemens. “It gives us the opportunity to pilot these systems, receive real-life feedback, and demonstrate how they help improve care at the bedside. The Chester County Hospital continues to be an outstanding showcase for Siemens’ technologies, with hospitals from all over the country and abroad coming to see the technologies that have been implemented and are supporting the patient care process here today.”

Nichole Coleman, RN, BSN, PCCN, the day shift charge nurse on the Telemetry Unit, witnesses the benefit of this technology daily as she oversees a team of nurses providing care to about 30 patients.

“If there is a new physician order, it pops up right into

the nurse’s work list. So a nurse can click on the four or five patients in his or her care, see the orders, and acknowledge them right in the system. And then the nurse can take care of them and document the time they were done,” Coleman says.

“The computer workflow reports are helpful to charge nurses and nurse managers as well. It gives us a quick overview of the patients who are candidates to receive the pneumococcal or influenza vaccines. These vaccines can then be addressed with the patient in a timely manner.”

“We don’t have to chase down information, which saves us time, creates less room for error, and most importantly, frees nurses to spend more time at the bedside,” she adds.

There is another layer of complexity, though: No two patients are exactly alike, and the technology must be able to recognize your individual needs. If you’ve told us you are taking certain medications or have a medication allergy, the Hospital’s systems are designed to alert the physician or nurse to avoid medications that could be dangerous. If your medical history or test results suggest high risk for cardiovascular disease, diabetes, or some other condition, your physician and a health educator will automatically be notified and start you on the path to better health. If you have any lab test result that suggests a problem in need of correction, your bedside nurse will know about it right away.

“If there is a critically low or high lab value, it shows up in the system as an alert,” Coleman says. “Then nurses have to document how they addressed it; otherwise, the alert stays up. This ensures safety for the patient and timely care as well.”

“The patient is always at the center, and the technology is there to help us do a better job of individualizing care,” Dr. Pinsky adds. “When you shop online or even in the grocery store, you get ads and coupons targeted to your preferences. Well, in a similar way, we want to target the care to your needs. We are trying to leverage this enormous mound of information and present it to the clinician in a very individualized way.”

## Two examples that illustrate how this works:



### CARE FOR THE PATIENT WITH DIABETES

If you are admitted to The Chester County Hospital and report a history of diabetes, or if you have risk factors for the disease, its system automatically alerts the physician to order a Hemoglobin A1c test, which indicates whether your blood glucose level is under control. If it’s not, then your care is tailored to bring the diabetes under control — during your stay and beyond.

*continued >*

## recalculating HEALTH CARE continued...

“We know who the patients with diabetes are the day they walk into the Hospital, and that is a great advantage,” notes Julie Funk, MS, RD, CDE, LDN, Director of Community Health and Wellness Services. “The same technology automatically creates a census of patients for our diabetes educators, so they know who in the Hospital has diabetes that is not well-controlled. Right away, they can help get them back on track.”

### TESTIMONIAL



Patients in the Hospital benefit from the workflow technology accessible at their bedside. After they are discharged, the continuum of care transitions to their private practice physicians. The doctors on the Medical Staff at the Hospital can access the electronic medical record, as described by family practitioner **Valerie McAuley, DO**. To read Dr. McAuley’s story and see her video testimonial, go to [www.chestercountyhospital.org/synapse](http://www.chestercountyhospital.org/synapse).

The system also guides the physician to tailor insulin treatments to the patient’s individual characteristics, including age, weight, blood sugar level, even their meal schedule. The order set is right there in the computer, with the physician able to choose from among different dosing levels to control blood sugar levels within range. Also built in are automatic alerts when blood glucose levels need to be checked or when the level swings out of control, requiring immediate attention. According to Funk, the order set’s

tailored approach to inpatient diabetes management is fairly new, but the Hospital was among the first dozen or so nationwide to adopt it.

“We want to be sure we are giving people state-of-the-art care as we currently know it. And that they receive it safely,” Funk says.

Another example of a key safety check affects patients who are taking the medication metformin (brand name: Glucophage) to control type 2 diabetes. If the physician orders an imaging test that requires intravenous contrast solution, Glucophage has to be stopped for at least 48 hours after the test. Otherwise, kidney complications could result. This process used to be done manually, notes Kathy Zopf-Herling, RN, MSN, Director of Nursing Informatics, but it is much safer and more efficient to rely on technology than people’s memories.

“Now as soon as the radiology staff scans the IV contrast to be used for that patient, the Glucophage is automatically discontinued for 48 hours,” she says. “After that, the system alerts the physician and gives the option to order a renal panel [kidney function test] or to resume the Glucophage.”

Funk and the members of the Diabetes Care Task Force are now working with the IT staff to embed recommendations for self-management skills right in the system, tailored to the severity of patients’ diabetes and whether they are receiving this diagnosis for the first time.

### 2 A PERSONALIZED DISCHARGE PLAN

The Chester County Hospital participated in a Boston-based research project called Project RED (Re-Engineered Discharge), which focused on using more intensive education and case management to make sure patients could manage their condition at home once they were discharged — and possibly avoid readmission for the same ailment. The Hospital targeted its efforts at patients with congestive heart failure and found that more intensive discharge education did indeed reduce readmissions. So it wanted all patients to benefit from an improved discharge process.

“The only way to ‘scale this up’ for all patients was to use technology,” says Dr. Pinsky. Over that past year, the Hospital has been working on a solution that harnesses its current systems to:



- 1** Flag patients who are at higher risk for readmission, whether due to advanced age, multiple conditions, a language or literacy barrier, or some other factor, in order to make sure they get followed more closely.
- 2** Create a new, easy-to-read, comprehensive discharge plan that pulls in all relevant information from the electronic health record about the patient's condition, management strategies, medications, and follow-up appointments.

The result is "My Discharge Plan," an innovative approach to discharge education that rolled out Hospital-wide this summer. Instead of receiving dozens of different papers and forms from different sources at discharge, the patient now receives one booklet targeted to his or her situation.

"You can think of it as a 'symphony' that pulls in various bits of information from the system: physicians' orders, nursing assessments, MAK [medication administration check], and case management," explains Kathy Zopf-Herling.

CARDIOVASCULAR UNIT NURSE TONYA BEATTIE, RN, GOES THROUGH EACH ELEMENT OF THE DETAILED DISCHARGE PLAN WITH HER PATIENT. 'MY DISCHARGE PLAN' HAS TAKEN AWAY THE PATIENT'S GUESS WORK ABOUT WHAT THEY SHOULD DO AFTER THEY LEAVE THE HOSPITAL, THUS PREVENTING MANY RE-ADMISSIONS. ▾

"Everyone completes his or her piece, and then this all comes together at discharge as a report to the patient. But it uses patient-friendly language, it has large font, and it is visually appealing."

"We know how overwhelming those first days home from the hospital can be," says Nichole Coleman, whose unit was among the first to use My Discharge Plan. "My Discharge Plan' gives patients a comprehensive overview of what they need to do after discharge. It includes a list of the medications that the patient should be taking after discharge, what the medications are commonly used for, as well as when to follow up with their physicians, plus all the contact information for the follow-up physician. Also, there are special instructions for diet, activity and home needs just for the patient, so they have everything they need to take care of themselves after they leave the Hospital."

For this and all our technology efforts, the aim is to be both more "proactive" and "personalized," notes Dr. Pinsky.

"Can we look at our patients as individuals and do a better job of predicting what their needs are? That is always the ultimate goal."

*By Kristine M. Conner, Photos by Rick Davis*

▶▶ LEARN MORE AT  
[www.chestercountyhospital.org/synapse](http://www.chestercountyhospital.org/synapse)



NEW SCREENING PROVIDES EARLY DIAGNOSIS  
AND HOPE FOR THOSE MOST AT RISK FOR LUNG CANCER

# BREATHING A SIGH OF RELIEF

**The American Lung Association reported 303 cases of lung cancer in Chester County in 2009.\*** According to estimates from the National Cancer Institute, there will be 226,160 new cases of lung cancer in the United States this year and 160,340 deaths from the disease.

A cancer diagnosis is frightening. Lung cancer, in particular, can be worrisome. But it doesn't have to be. Lung cancer can be curable if found in its earliest, most treatable stages. The challenge is that lung cancer has always been very difficult to detect before the disease has progressed to the point where treatment options are limited and a cure not very likely. However, recent advances in early detection are changing the way lung cancer is diagnosed, giving doctors a better opportunity to treat the condition, and saving more lives.

The Chester County Hospital and Health System has launched a new lung cancer screening program to help protect the individuals in our community who are most at risk for the disease. The program is built upon the findings of a recent National Lung Screening Trial (NLST), which determined that lung cancer deaths can be reduced by screening for the disease using low-dose computed tomography (CT). Lung cancer deaths dropped by 20 percent in study participants

who underwent a CT scan compared to those screened solely by chest x-rays.

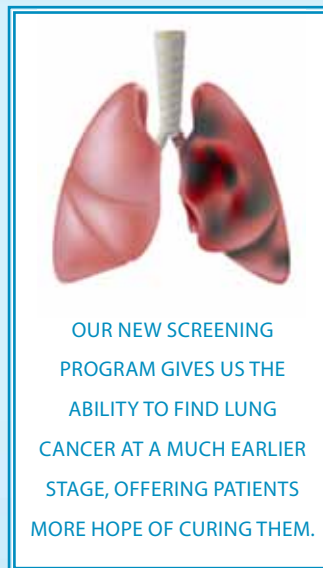
At Chester County, a multidisciplinary team of experts in thoracic surgery, pulmonary medicine, medical oncology, radiation oncology, pathology, and radiology worked

together to develop and launch the new screening program. Their ongoing goal is three-fold:

- 1 to find lung cancer earlier through the use of the latest technology**
- 2 to provide the best and most advanced treatment options available**
- 3 to educate high-risk individuals about the disease.**

"Historically, the mortality rates for lung cancer have been staggeringly high because the disease is usually so far along when found. Unfortunately, there are no obvious symptoms until the disease is so

advanced that treatment options are not often successful. Even then, symptoms are easily mistaken for signs of other respiratory conditions or illnesses," explains Michael R. Costello, MD, Hematology/Oncology. "Our new screening program gives us the ability to find lung cancer at a much





earlier stage in high-risk patients who otherwise may have waited too long. If we can find these cancers earlier we can offer patients the hope of curing them.”

The program targets smokers, specifically long-term smokers, because they are most at risk for lung cancer. “The facts are rather daunting. Smoking is the number one cause of lung cancer, and lung cancer is the number one cause of cancer-related death in the United States and worldwide,” says Robert Satriale, MD, Pulmonary

Disease. “Smokers may face even greater odds of developing lung cancer when other risks factors are involved, such as exposure to elements like asbestos or radon, a family history, or a diagnosis of COPD (chronic obstructive pulmonary disease) or pulmonary fibrosis.”

The screening process begins with a safe, low dose spiral CT scan, which generates a series of detailed cross-sectional images of the lungs to create a three-dimensional image.

< JEFFREY GRAMP, MD, RADIOLOGY, REVIEWS THE LOW DOSE CT SCAN OF A LUNG PATIENT.



SMOKING IS THE NUMBER ONE CAUSE OF LUNG CANCER, AND LUNG CANCER IS THE NUMBER ONE CAUSE OF CANCER-RELATED DEATH IN THE UNITED STATES AND WORLDWIDE.

The scan is used as a preventive and diagnostic tool in much the same way as mammograms and colonoscopies are used for breast cancer and colon cancers. Many smokers going through the screening process will have no evidence of lung cancer, and all abnormal findings will not end up being diagnosed as cancer.

**IF THE SCAN DOES DETECT A CONCERN,** the program follows through with the diagnostic and treatment resources needed to achieve the most favorable outcomes. In addition, the full scope of the Lung Cancer Program includes

a smoking cessation program that combines education, behavior modification and relaxation techniques to help people quit smoking.

To help diagnose lung cancer and plan appropriate treatment, a high-tech, minimally invasive procedure called Electromagnetic Navigation Bronchoscopy (ENB) is often implemented. “ENB applies GPS-like navigation technology to guide us deep into the lungs,” explains Rajesh J. Patel, MD,

*continued...*

∨ A MULTIDISCIPLINARY TEAM OF EXPERTS WORKED TOGETHER AT THE CHESTER COUNTY HOSPITAL TO DEVELOP AND LAUNCH THE NEW LUNG SCREENING PROGRAM. NOT PICTURED RAJESH J. PATEL, MD.



SCOTT SAUL, MD, PATHOLOGY

ROBERT SATORIALE, MD, PULMONARY

JAMES PATTERSON, MD, HEMATOLOGY/ONCOLOGY

ROBERT KRISCH, MD, RADIATION ONCOLOGY

FRED SQUIRES, MD, RADIOLOGY

WILL LUGINBUHL MD, HEMATOLOGY/ONCOLOGY

STEVE MOSAKOWSKI, RESPIRATORY THERAPY

MICHAEL COSTELLO, MD, HEMATOLOGY/ONCOLOGY

BRIAN PRIEST, MD, CARDIOTHORACIC SURGERY

NONA BLAUVELT, CLINICAL RESEARCH NURSE

DANIELLE DAMBRO, NURSE NAVIGATOR

# BREATHING A SIGH OF RELIEF *continued...*

## TESTIMONIAL



When doctors turn their concern to your lungs, the journey toward a diagnosis can be overwhelming and unclear. **Danielle Dambro BSN, RN**, is a nurse navigator for lung patients to guide them through every step of the process – from the first appointment to the completion of treatment. To read Danielle's story and see her video testimonial, go to [www.chestercountyhospital.org/synapse](http://www.chestercountyhospital.org/synapse).

Pulmonary Disease. "It allows us to biopsy lesions that are inaccessible through traditional bronchoscopy and might otherwise require invasive surgery for diagnostic testing and potential treatment."

The Chester County Hospital is the only hospital in the southeastern Pennsylvania suburbs that has the advanced ENB technology.

According to Scott Saul, MD, Pathology, each lung cancer biopsy has its own story to tell and contains specific information that influences the choice of treatment. "The precision of testing procedures have evolved exponentially in recent years," he notes. "Certain therapies will work successfully only for very specific lung cancer types. The subtle distinctions we are able to make as we test each specimen point to the treatment best suited for each patient."

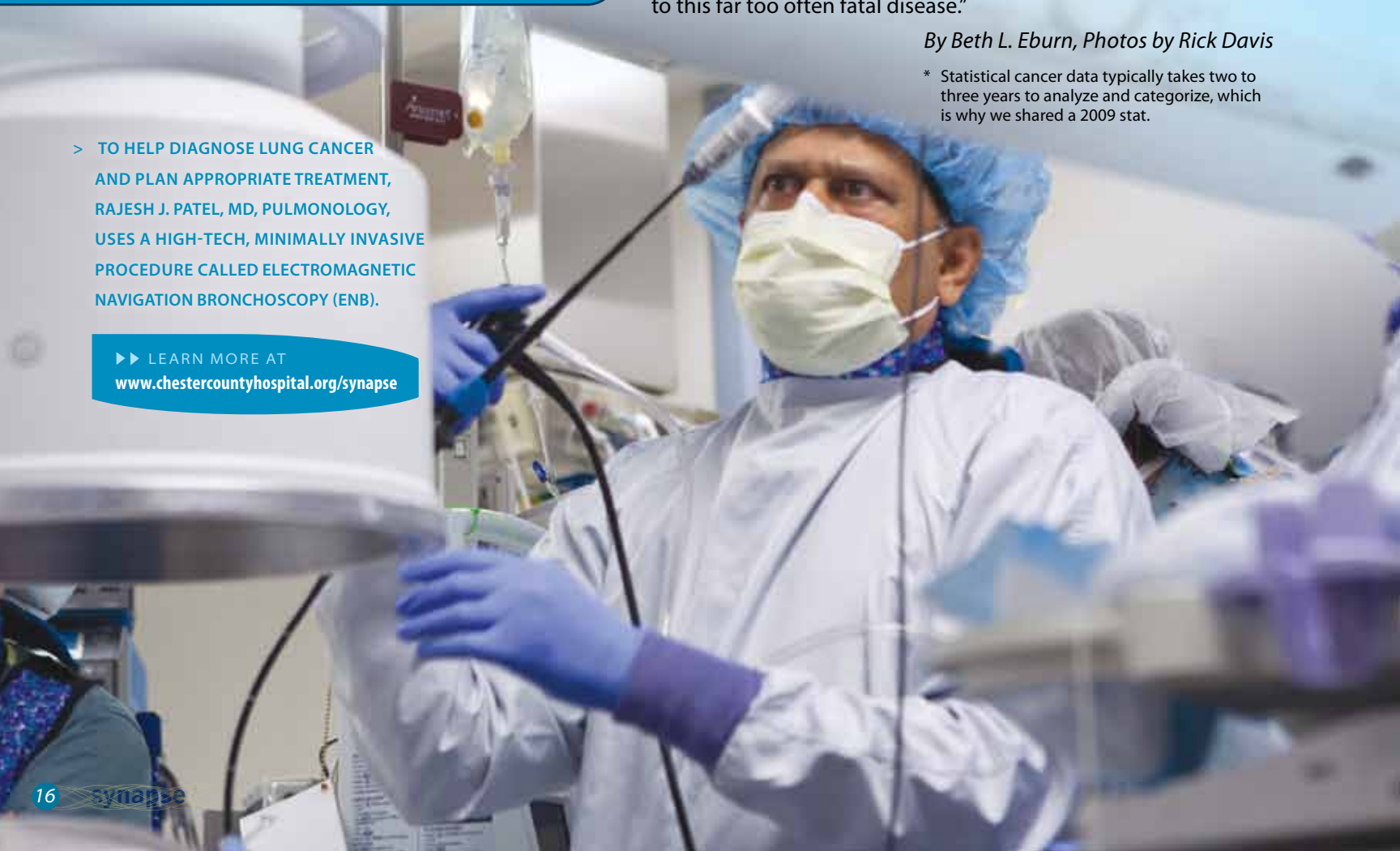
"Right now lung cancer screening is not covered by insurance, but it should be and probably will be. We are keeping the cost as low as possible and help is available if needed," adds Michael Costello, Hematology/Oncology. "Of course, the ideal way to deal with lung cancer would be to prevent it, but the next best approach is to catch it early. Our program is here to provide whatever steps are necessary to protect those most vulnerable to this far too often fatal disease."

*By Beth L. Eburn, Photos by Rick Davis*

\* Statistical cancer data typically takes two to three years to analyze and categorize, which is why we shared a 2009 stat.

> TO HELP DIAGNOSE LUNG CANCER AND PLAN APPROPRIATE TREATMENT, RAJESH J. PATEL, MD, PULMONOLOGY, USES A HIGH-TECH, MINIMALLY INVASIVE PROCEDURE CALLED ELECTROMAGNETIC NAVIGATION BRONCHOSCOPY (ENB).

▶▶ LEARN MORE AT  
[www.chestercountyhospital.org/synapse](http://www.chestercountyhospital.org/synapse)





# Community wellness programs

## ▼ SCREENING

### Lung Cancer

*By prescribed appointment only*

Please talk to your doctor about whether you meet the specific screening criteria based on your age, health history, smoking habit or environmental exposures. A physician prescription is required. The screening includes: low-dose spiral CT scan; CT scan reading by a board-certified Penn radiologist; results sent to your primary care physician; and a fast-track appointment with a pulmonologist (if appropriate). The fee for the lung cancer screening through the program is \$129, and flexible spending funds may be used. Call 610.738.2300 to learn more.

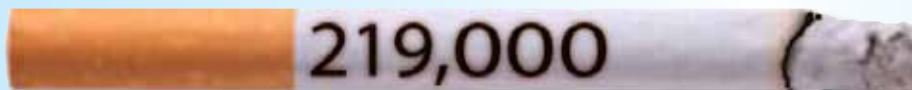
## ▼ SERIES



### Stop Smoking Now!

*Numerous sessions throughout the year*

A FREE seven-week cessation program offered regularly throughout the year, Stop Smoking Now! helps you develop a plan to become a nonsmoker. Through a combination of education, behavior modification, and relaxation techniques, this program teaches you the tools you need to take this important step. The class meets weekly to help identify your smoking triggers and deal with your withdrawal symptoms. Over-the-counter Nicotine Replacement Therapy (NRT) is available at no charge. This program is currently free to the community. Call 610.738.2300 to enroll.



THE NUMBER OF CIGARETTES SMOKED  
AT ONE PACK PER DAY FOR 30 YEARS

The people who can benefit most from the lung cancer screening are smokers between the ages of 55-74 who have smoked at least one pack of cigarettes a day for 30 years or who have quit smoking within the last 15 years, as well as smokers age 50 years or older who have smoked at least one pack of cigarettes a day for 20 years AND have an additional risk factor or a personal or family history of cancers.

## ▼ SUPPORT GROUP



### Better Breathers

*Meets every 1st Tuesday at 2:30 pm*

The Better Breathers Support Group is a FREE program organized by the Pulmonary Rehabilitation Program for those coping with chronic lung disease. Striving to build a positive outlook, this program provides participants with meaningful information, support and camaraderie. Presentations by healthcare professionals are scheduled monthly. Call 610.738.2410 to learn more.



PHOTO: SPRING VALLEY PHOTOGRAPHY

*Parkway Dash4Diabetes – Kids Fun Run*



PHOTO: SPRING VALLEY PHOTOGRAPHY

*Parkway Dash4Diabetes 5K*



PHOTO: LISA FINNEGAN

*Dilworthtown Inn Wine Festival*



PHOTO: ELFRIEDE O'NEILL

*FORE Health Invitational with Sean O'Hair*



*Chester County Challenge for Cancer Bike Tour*

# newsmakers



PHOTO: SPRING VALLEY PHOTOGRAPHY

*Heart + Sole 5K for Cancer Care*



PHOTO: JOHN WELSH PHOTOGRAPHY

*Tower Project Topping Out Ceremony*





PHOTO: BONSAI DOLL FERN PHOTOGRAPHY

*May Festival - Kids Rides*



*Chester County Day*



PHOTO: BONSAI DOLL FERN PHOTOGRAPHY

*May Festival*



PHOTO: BONSAI DOLL FERN PHOTOGRAPHY

*Master P's World Class TKD Health Kick*



PHOTO: BONSAI DOLL FERN PHOTOGRAPHY

*May Festival Gala*



PHOTO: BONSAI DOLL FERN PHOTOGRAPHY

*May Festival - Entertainment*





# SPORT OF KINGS REIGNS SUPREME

PRESENTED BY EXELON / CONSTELLATION ENERGY AND THE BRYN MAWR TRUST COMPANY, **THE 7<sup>TH</sup> ANNUAL POLO CUP WILL TAKE PLACE ON SUNDAY, JUNE 9, 2013.** THE TURKS HEAD AUXILIARY HAS ALREADY BEGUN PLANNING ON GREAT NEW FEATURES FOR THE EVENT. TENT SPACE IS LIMITED. FOR MORE INFORMATION, PLEASE CALL THE FOUNDATION OFFICE, 610.431.5329.

Each year on the second Sunday in June, the hill overlooking the Brandywine Polo field in Toughkenamon is capped with the crisp white peaks of tents. Ladies don their finest hats and children run about playing games and making crafts. Live music entertains shoppers as they browse hand-crafted items from local vendors and pick up great deals at the Silent Auction.

But when the announcer's voice is broadcast through the public address system all eyes are on the field. Brightly colored teams seat high atop majestic polo ponies and the announcer runs through a brief tutorial on the rules of a Polo match for first-time spectators.

Hospital Administration and Polo Cup Sponsors enjoy the action-packed match from a VIP Tent and mingle with guests of the Hospital's Founders Society. The group is named for the eight physicians who opened and staffed "West Chester Hospital" in 1892; re-named The Chester County Hospital one year later. The Founders Society recognizes donors who support the Hospital's Mission by making an annual gift of \$1,000 or more.

With the perfect vantage point for the fast-paced match, guests of the VIP tent enjoy cuisine catered by Limoncello Ristorante with wines from Galer Estate Winery and Vineyard. All toast the efforts of the Turks Head branch of the Women's Auxiliary for creating an elegant family affair. Children under 16 are free to attend the event and can entertain themselves with complimentary children's activities while their parents enjoy tailgating and the action on the field.

At half-time, guests gather on the field for the traditional stomping of the divots and awards for the most spectacular hat. For guests of the event, the Polo Cup is a celebration that marks the beginning of the summer season and a fun way to preserve the health of our community.

*By Tom Gavin, Photos by David Kimball*



GUESTS OF THE CUP SPONSOR, EXELON

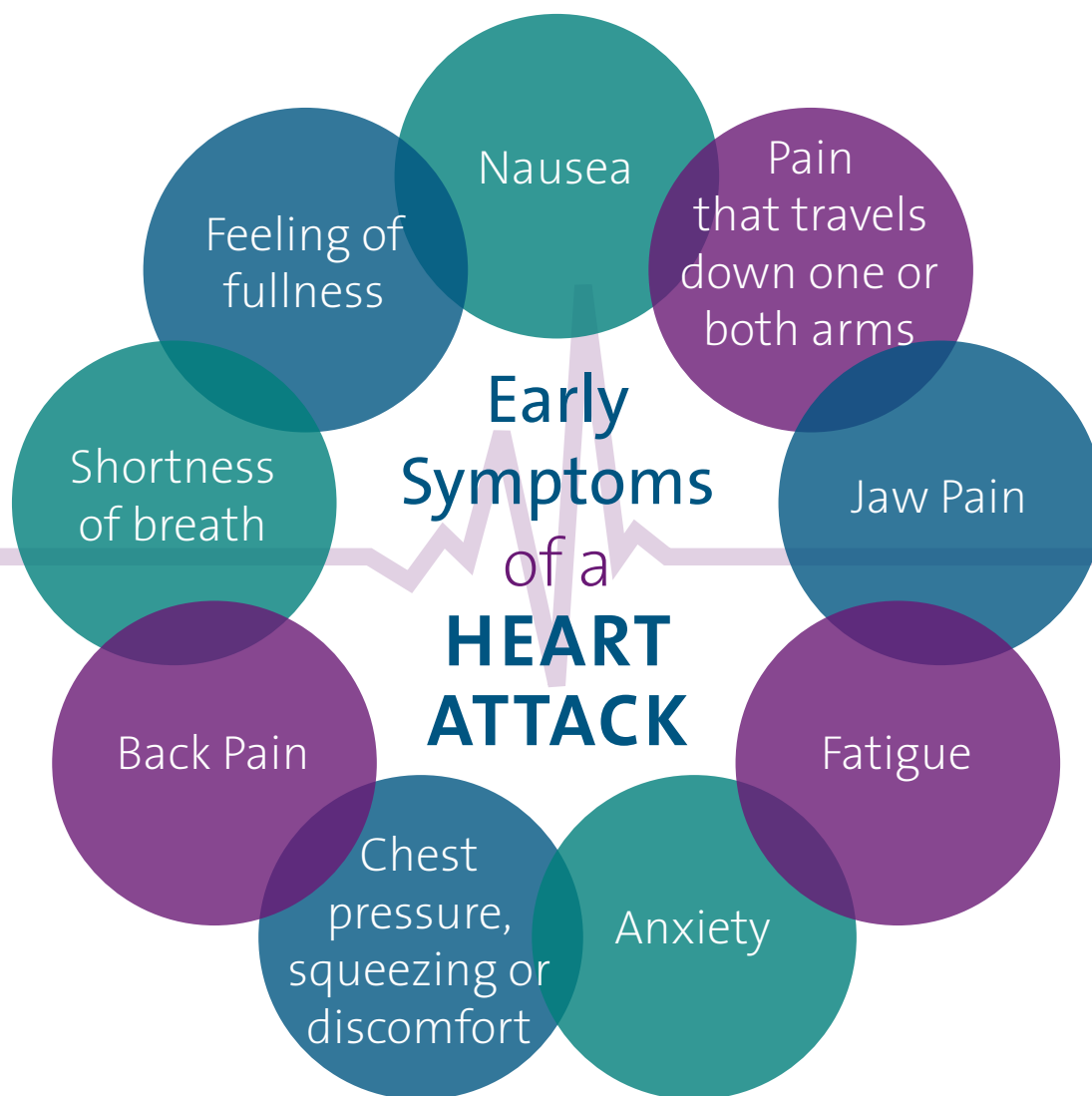


REPRESENTATIVES OF GALER ESTATE WINERY & VINEYARD

▶▶ TO LEARN HOW YOU  
CAN SUPPORT THE HOSPITAL  
CALL 610.431.5108 OR VISIT  
[www.chestercountyhospital.org/synapse](http://www.chestercountyhospital.org/synapse)



Knowing the early symptoms of a heart attack can save your life!



**Heart attack is America's number one killer.**

It is important to act fast when you or someone you love experiences early heart attack symptoms.

**Pick up the phone, not the keys. Calling 9-1-1 can save a life!**

## save the date :

### **Hands-on Hearts : Hands-Only CPR Training Day**

Increase your confidence and reduce your fears & hesitation during an emergency by being trained in Hands-Only CPR. Includes a 45-minute interactive training session, education and vendors.

**Date + Time\*** : Saturday, February 16, 9:00 am - 1:00 pm

**Location\*** : The Chester County Hospital

*\*Additional dates + locations pending. Visit [ChesterCountyHospital.org/Wellness](http://ChesterCountyHospital.org/Wellness) for more info.*

**Registration Required** : 610.738.2300 or [ChesterCountyHospital.org/Wellness](http://ChesterCountyHospital.org/Wellness)



Visit us online for additional programs held during February in celebration of National Heart Month.

701 East Marshall Street  
West Chester, PA 19380

[www.chestercountyhospital.org/synapse](http://www.chestercountyhospital.org/synapse)

ADD FSC LOGO HERE

Follow us...     

Call 610.738.2793 to update your mailing information.



Consulting a physician regularly is an important part of a healthier lifestyle. Together, you and your physician can determine the best plan to keep you fit and able to enjoy your life. Many people do not have a regular doctor whom they can turn to during illness or injury. We encourage you to take the time to choose a physician before emergency situations arise. A regular primary care physician or specialist will know your medical history and can provide special insight into your treatment.