MESSAGE FROM THE CHAIRMAN
-SCOTT REEVES, MD, MBA

It is with great enthusiasm that I announce that Dr. Frank McGowan has accepted the Jerry Reves Endowed Chair for Anesthesia Research, Vice Chairman for Research and Division Chief for Pediatrics within our department. He will begin his duties on approximately February 1, 2011. Dr. McGowan will bring a very strong basic science research program to the department. He has been NIH funded for over 10 years with his recent projects concentrating on Engineering of Pacemaker Tissue for Cardiac Implantation and Mitochondria in Hypertrophied RV and Surgical Ischemia. His lab will be housed in the Children’s Research Institute (CRI) and will have a close collaborative relationship with Dr. Frank Spinale and the Center for Cardiovascular Translational Research (CCTR). He will also help develop the two of our junior faculty, Drs. Ilka Theruvath and Dorothea Rosenberger, translational interests.

Frank is a past president of the Society for Pediatric Anesthesia (SPA). As SPA president he was instrumental in starting the process of obtaining subspecialty board certification for pediatric anesthesiology. He is very well connected nationally and will be responsible for building truly excellent pediatric and pediatric cardiac divisions within the department and will quickly become a strong advocate for pediatric programmatic development across the institution. I know you all share my excitement in welcoming him and his family to MUSC.
HUGE QUALITY AND PATIENT SATISFACTION ACHIEVEMENTS:

It was not a mistake that I capitalized the whole title above. MUSC historically has not done a good job informing us all about our remarkable achievements. Our department has substantially contributed to the outcomes described below. Please tell your family and friends. We should be proud of our fine institution.

We also had three other specialties:
- less than 1 point from cracking the top 50!
  - Cancer
  - Heart & Heart Surgery
  - Pulmonary
QUALITY AND PATIENT SATISFACTION CONT...

Our work in using the Keysone initiative (complete hand washing, gowning, total body draping) for central line insertion is working.

FY 09 vs FY10
CLABSI rate (2.2) reduced 47.2%.

HOUSEWIDE CENTRAL LINE ASSOCIATED BLOODSTREAM INFECTION RATES

Rate of AHRQ PSIs for Adults Per 1000 Discharges
During April 2009 through March 2010

For Pediatrics we have the lowest rate in all of UHC!
QUALITY AND PATIENT SATISFACTION CONT...

At MUSC we believe the ultimate measure of our clinical effectiveness is our avoidable mortality rate. In order to evaluate our performance with this metric, we use a mortality ratio, which is simply our actual mortality divided by our expected mortality. The expected value is calculated by the University Health System Consortium, which uses a very complex regression model that incorporates an extensive number of variables to predict what our expected mortality should be. An organization should strive to have a ratio less than one, which would indicate that the actual number of deaths is less than what was expected. For fiscal year 2010, MUSC set a target to have our ratio be in the top quartile as compared to 100 other academic medical centers. We achieved the 79th percentile and saw our ratio go from .91 to .73, a 20% reduction!

Effective

FY 09 vs FY10
20% reduction
-----------------
Peer 12 Group
2nd
-----------------
AAMC 100
79th percentile

Efficient

FY 09 vs FY10
stable
-----------------
Peer 12 Group
2nd
-----------------
AAMC 100
78th percentile
QUALITY AND PATIENT SATISFACTION CONT...

Medical Emergency Team (Rapid Response Team)

Critical interventions continue to improve the response to deteriorating patients on our general care units and to improve the overall quality of resuscitation at MUSC. Our Medical Emergency Team has matured into a team that averages 22 calls/1000 discharges, increasing from an average of 16 calls/1000 discharges one year ago. Correspondingly, full cardiopulmonary arrest has decreased on our general care floors by 20% in the last fiscal year!
MUSC Recognized for Excellence in Delivering Patient Centered Care!

<table>
<thead>
<tr>
<th>% of Patients Who Rated Hospital 9 or 10 Out of 10 Overall</th>
<th>% of Patients Whose Nurses Were &quot;Always&quot; Polite and Communicative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mayo Clinic Hospital, Phoenix</td>
<td>Mayo Clinic Hospital, Phoenix</td>
</tr>
<tr>
<td>New England Baptist Hospital, Boston</td>
<td>New England Baptist Hospital, Boston</td>
</tr>
<tr>
<td>Mayo Clinic, Jacksonville, Fla.</td>
<td>Mayo Clinic, Rochester, Minn.</td>
</tr>
<tr>
<td>St. Joseph Hospital, Orange, Calif.</td>
<td>University of Kansas Hospital, Kansas City</td>
</tr>
<tr>
<td>Hospital for Special Surgery, New York</td>
<td>Brigham and Women’s Hospital, Boston</td>
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<tr>
<td>Brigham and Women’s Hospital, Boston</td>
<td>Methodist Medical Center of Illinois, Peoria, Ill.</td>
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<tr>
<td>Massachusetts General Hospital, Boston</td>
<td>PeeDee Valley Hospital, Fort Collins, Colo.</td>
</tr>
<tr>
<td>Central DuPage Hospital, Winfield, Ill.</td>
<td>University of North Carolina Hospitals, Chapel Hill</td>
</tr>
<tr>
<td>Dartmouth-Hitchcock Medical Center, Lebanon, N.H.</td>
<td>Central DuPage Hospital, Winfield, Ill.</td>
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<tr>
<td>John Muir Medical Center, Walnut Creek, Calif.</td>
<td>Christ Hospital, Cincinnati</td>
</tr>
<tr>
<td>Poudre Valley Hospital, Fort Collins, Colo.</td>
<td>Geisinger Medical Center, Danville, Pa.</td>
</tr>
<tr>
<td>Texas Orthopedic Hospital, Houston</td>
<td>Massachusetts General Hospital, Boston</td>
</tr>
<tr>
<td>Baylor University Medical Center, Dallas</td>
<td>Medical University of South Carolina, Charleston</td>
</tr>
<tr>
<td>Johns Hopkins Hospital, Baltimore</td>
<td>Rush University Medical Center, Chicago</td>
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<tr>
<td>Medical University of South Carolina, Charleston</td>
<td>St. Elizabeth Medical Center, Edgewood, Ky.</td>
</tr>
<tr>
<td>University of Kansas Hospital, Kansas City</td>
<td>St. Francis Hospital, Rodney, N.Y.</td>
</tr>
<tr>
<td>Vanderbilt University Medical Center, Nashville</td>
<td>Wake Forest Univ. Baptist Medical Center, Winston-Salem, N.C.</td>
</tr>
<tr>
<td>Average for all reporting hospitals</td>
<td>Average for all reporting hospitals</td>
</tr>
</tbody>
</table>

Of 154 centers that U.S. News ranked in America’s Best Hospitals, patients surveyed liked these most. Of 154 centers that U.S. News ranked in America’s Best Hospitals, the 10 percent below were judged best for nursing care.
QUALITY AND PATIENT SATISFACTION CONT...

Areas of Focus in FY 2010

• Safe
  – Surgical Site Infections
  – Hand Washing
• Effective
  – Mortality Ratio
  – CMS/JC Core Measures
• Efficient
  – 30 Day Readmissions
• Patient Centered
  – HCAHPS
  – Patient and Family Centered Care
• Timely
  – Improve Patient Throughput
• Equitable

Moderate Sedation MUHA Core Credentialing

I am proud to report that the department has completed the moderate sedation by non anesthesia providers core simulation training course. A special thanks is due to Drs. Carlee Clark, Catherine Tobin and John Schaefer for making this a reality. The training course was well received by the Medical Executive Committee (MEC) of the hospital and will soon be endorsed by the departments. The purpose was to establish a moderate sedation course based on JCAHO and ASA standards/guidelines composed of two components:

• Multiple web based education modules
• Full day simulation training

Through this process we expect to train multiple disciplines in the principles of moderate sedation including emergency airway management, drug selection and titration, and reversal techniques. The course will be accredited for CME (12-14 hours) or other appropriate credits, and will become standard for MUHA credentialing in moderate sedation by non anesthesiologists. Hopefully the attached slides will give you a feel for what this course offers.
Moderate Sedation MUHA Core Credentialing Cont...

Introduction

**Moderate Sedation**

Author(s): John J. Scherer, III, MD
Carlee Clark, MD
Catherine Tobin, MD
Scott Reeves, MD

Office: Healthcare Simulation South Carolina

The purpose of the Moderate Sedation Course is to provide competency-based education to individuals administering moderate sedation. This course is based on the American Society of Anesthesiologists (ASA) “Guidelines for the administration of Sedation and Analgesia by Non-Anesthesiologists” ([1]) and The Joint Commission Standards for Operative or Other High-Risk Procedures and/or the Administration of Moderate or Deep Sedation or Anesthesia.


Course Format

**Course Format**

**Web based curriculum:** There are 13 computer modules the participant must complete on-line prior to participating in the workshop. The computer modules are based upon the Evidence Based Guidelines and/or the Joint Commission requirements. Additional material pertaining to MUHC policies has been incorporated.

**Web based Examination:** Successful completion of the exam must occur prior to advancing to the next module. A pass rate of 80% will be required.

**Simulation Workshop composed of didactics and simulation:** A written examination will be administered at the beginning of the workshop. The participant must achieve a 70% in order to participate in the simulation workshop.

**Simulation Examination:** The instructor will introduce the basic concepts of simulation including demonstrations on the manikins. Practice scenarios will be conducted in a problem based format prior to the examination on the simulator.

**Debriefing:** Debriefing guidelines will be included in the instructor section after the Goals and Objectives. This is a critical portion of the course and must be conducted in a professional manner.

**Evaluation:** Instructors and Participants are encouraged to evaluate the course and provide suggestions for improvement.
MEET THE FACULTY

Sylvia Wilson, MD

Sylvia Wilson arrives in Charleston following a regional anesthesia and acute pain fellowship in Pittsburgh, PA. However, she is not new to the heat and humidity. Sylvia grew up in Orlando, Florida and attended the University of Florida in Gainesville for both her bachelors and medical degrees. She then received her anesthesiology training at University of North Carolina in Chapel Hill before her regional fellowship in Pittsburgh.

Sylvia, her husband, Joe, and 2 year-old son, Liam, are all looking forward to spending more time outdoors without snow this year and are very excited to live close to the ocean again. They are huge Gator fans and SEC football fans. Kyle, their newest family member, is expected to appear at the end of November.

MUSC Start-up to Commercialize Training

MUSC’s leadership in medical simulation training will pay off nationally thanks to a new contract recently approved.

SimTunes LLC, has entered into a contract with Laerdal Medical to sublicense intellectual property developed at the MUSC Center for Clinical Effectiveness and Patient Safety, a Center of Economic Excellence (CoEE) supported by the state and a partnership with Health Sciences South Carolina (HSSC).

Headquartered in Charleston, SimTunes is a start-up company founded by John Schaefer, M.D., and Heyward Coleman in 2008 to create and commercialize innovative simulation educational technology for training physicians, nurses and other health care professionals.

Schaefer is the Lewis Blackman Patient Safety Endowed Chair in the Center for Clinical Effectiveness and a member of the MUSC faculty. Heyward Coleman is a business executive with 30 years experience in starting and developing new businesses. SimTunes has developed logic and software to help make medical simulation educational material available to users.

Through the agreement, SimTunes is granting Laerdal Medical, a global manufacturer and marketer of medical simulation equipment and medical training products, the rights to the logic and software that will enable global distribution of SimTunes-created medical simulation educational material. In addition, the contract provides for the subleasing of educational material from SimTunes through a partnership between Laerdal and HealthStream Inc., a leading provider of learning and research solutions for the health care industry.

“This arrangement provides a unique opportunity to rapidly make the educational material developed in South Carolina available worldwide and can result in a significant improvement in the manner in which health care professionals are trained. It’s very exciting in terms of the potential impact on patient care and the state’s economy,” Schaefer said.
MUSC Start-up To Commercialize Training cont...

Medical simulation is a rapidly growing field, revolutionizing how physicians, nurses, and other health care professionals learn to care for their patients. It involves the use of sophisticated human simulators controlled by software that simulate specific human conditions—childbirth, for example—that enable students to learn how to treat certain conditions. The student’s performance is captured by the computer, allowing for an objective evaluation of their performance, and ultimately to health care providers who are better trained.

MUSC is a leader in medical simulation. In 2006, MUSC recruited Schaefer, a recognized pioneer in the field, to HSSC and CoEE-supported Center for Clinical Effectiveness and Patient Safety. Since that time, Schaefer has established a statewide network of medical simulation centers at MUSC and with HSSC partners—Clemson University, Greenville Hospital System University Medical Center and the University of South Carolina, as well as at Greenville Technical College. Palmetto Health also has a simulation center. Schaefer led in the development of simulation material used at these centers.

According to MUSC Dean Emeritus Jerry Reves, M.D., the SimTunes-Laerdal agreement is a major win for MUSC, the CoEE program and for HSSC.

“The Center for Clinical Effectiveness and Patient Safety was established with funding from the COEE program and HSSC with the goal of creating technology that would create economic opportunities and improve public health,” he said.

“The creation of the start-up company SimTunes and licensing of its products for the world marketplace demonstrates that CoEE works as a stimulator of economic development. South Carolina is now a national model in medical education and training, which means better, safer care for patients.”

*The Catalyst, Friday, Aug. 6, 2010*
MEET THE STAFF

David Chandler, Communications Coordinator
David Chandler joins the Anesthesia Department staff after finishing an internship with the Medical University Children’s Hospital. David received his bachelor's degree at The Citadel as a member of the Corp of Cadets, where he was also a member of the Citadel Honor Court. After a few years of civilian life, he returned to his beloved Alma Mater to obtain a Master’s in Business Administration. He will also receive a Certificate of Healthcare Management from the Medical University. David will complete both of these this coming December.

He looks forward to the start of his career in the health care industry, and will always continue to expand his education. With hobbies such as running, golfing, wakeboarding, fishing, and softball (which he mentioned coaching his team to be season champions last year!), David is no stranger to enjoying Charleston and the coastal community.

Michael McEvoy, Systems Engineer
Meet the new programmer in the Anesthesia Department. Michael and his family are newcomers to the Charleston area, coming from Atlanta where they moved from only the Friday before starting work! He has close ties to MUSC since both of his older brothers attended medical school here. Michael is excited to be here, and will be working closely with Dr. Field and Brenda Dorman to help improve the functionality of PICIS.

Before coming to MUSC, Michael ran the IT department for a small, family-owned document management business in Roswell, GA. He and his wife Katherine have a 6 year old son named Brooks. Both brothers who attended MUSC have remained in the Charleston area (Dr. Matt McEvoy being his older brother). Since all 3 brothers (no sisters) now live in the Charleston area, Michael says his next step is to convince their parents to move here too!

His son is thrilled to be here because he now has 7 of his 9 cousins in town. Michael and his wife are very happy to be rid of the cold winters and look forward to enjoying the warm climate and beaches of Charleston. Michael’s free time is taken up mostly by his two other IT jobs/hobbies, but when he does get some time of his own, he enjoys watching Florida Gator football, cooking, golfing and even brewing his own beer.

Top 5 PICIS Projects:

1. Near real-time Paging for “To OR” event
2. Near real-time Paging for “Procedure End” event
3. Automated email reminders for missing Attending Documentation
4. Near real-time, intraoperative Paging for missing Attending Documentation
5. Near real-time, intraoperative Paging for missing device data

The first two projects Michael will be tackling will be near-realtime, automated paging to alert the Attending Anesthesiologist to come to the OR at the beginning and end of a procedure. Testing is already underway for these projects. The third project on his list is to send email reminders to Attending Anesthesiologists when their cases are over, and they still do not have the required documentation for billing. Following that, we will accelerate the timeline and initiate the same documentation checks at certain key points during a case. Once that is taken care of, Michael will turn his attention to automated smart-checks of device data to ensure as complete a case record as possible.
Dr. Matt McEvoy was nominated by the medical students for the 2010 Arnold P. Gold Humanism in Medicine Award. The Association of American Medical Colleges (AAMC) staff selected from only 45 nominees the national winner considering the following characteristics, “positive mentoring skills, compassion and sensitivity, collaboration, community service activity, and observance of professional ethics. To be singled out as a positive role model among your school’s entire faculty, and as a physician whom students would like to emulate, is indeed a high honor. Our intent, therefore, is to advance the ideas of humanism in medicine, including compassion, understanding, and partnership, by recognizing and celebrating the achievements and contributions of humanistic physicians.” I know we all want to congratulate Matt on his nomination.

Dr. Tamatha Psenka and Dr. George Inabinet will be recognized by the Annual Service Awards Ceremony For the Medical University of South Carolina and The Medical University Hospital Authority. The ceremony will be held on Thursday, September 30, 2010 at 2:30 pm in Basic Sciences Auditorium. Awards are given to employees who achieved a milestone of 10, 20, 30, 40, or 50 years between July 1, 2009 and June 30, 2010. Please join me in congratulating them both for achieving a milestone of 10 years!!!
Charleston County Absentee Voting

The next general election is November 2, 2010. Due to the length of our days, many of us may not be able to make it to the poles. Fortunately, it is relatively easy to register to vote absentee.

To vote absentee, you must be a registered voter and meet one of the following criteria:

- Students, their spouses and dependents residing with them.
- Members of the Armed Forces, Merchant Marines, Red Cross, USO, government employees, their spouses and dependents residing with them.
- Overseas citizens.
- **For reasons of employment will not be able to vote on election day.**
- Physically disabled persons.
- **Persons on vacation.**
- Persons age 65 or older.
- Persons admitted to the hospital as emergency patients on day of election or at least four days prior to the election.
- Electors with a death or funeral in the family within 3 days before the election.
- Persons confined to a jail or pre-trial facility pending disposition of arrest or trial.
- Persons attending sick or physically disabled persons.
- Persons serving as jurors in a state or federal court on election day
- Certified poll watchers and poll managers.

Voter or immediate family member may call 843-744-8683 or submit written request for absentee ballot application to absentee@charlestoncounty.org

[Request form](absentee@charlestoncounty.org) for absentee application may be faxed (843-974-6419) or mailed to: POB71419, North Charleston, SC 29415

An Authorized Representative may request absentee application on behalf of physically disabled voter by visiting the Board of Elections and Voter Registration Office, or may submit request in writing.
IT’S FLU SEASON AGAIN!!

As reported in the September 10 Catalyst, the University has created a mandatory flu vaccination program for all personnel who have any contact with patients. We all desire to optimize our patients’ health. Obtaining a flu vaccination is an easy way to promote that goal as well as minimizing our discomfort during the flu season.

Top Reasons For Flu Vaccine Policy:

1. Influenza vaccine is effective, cost efficient, reduces morbidity, mortality and absenteeism.
2. It is recommended by the CDC, JC, NFID, and IDSA.
3. Historically, a voluntary policy has resulted in a 55% vaccination rate at best.
4. Many other facilities have instituted compulsory policies with success.
5. The South Carolina Hospital Association advocates compulsory policy.

Who Does it Apply to?

The policy applies to all persons employed by, or affiliated with the MUSC Medical Center, and to those with direct patient contact or who could expose those with direct patient contact.

Medical Contraindications:

1. Allergies to eggs or vaccine components
2. Guillian Barre Syndrome within 6 weeks following a previous dose of flu vaccine
3. Must be certified by licensed MD, NP, or PA

***If vaccine was obtained elsewhere, you must provide proof!***

***Those who cannot take the vaccine for medical reasons or who refuse it on the basis of religious beliefs will be required to wear a surgical type mask while on duty, to be enforced by immediate supervisor.***

Deadline to get vaccine: December 31, 2010

Available Dates:

- Tent Days
- October 5 and 6 at the Library Portico
- October 5 at Ashley River Tower
- October 14 inside Library
- Scheduled Clinics
- Manager Distribution
- Employee Health Services, Monday- Friday, 7:30am-3:30pm.
- Adult EDs

2010 Flu Vaccine Information

- One vaccine
- Contains Last year’s H1N1 vaccine virus strain.
- Contains H3N2 and B strains as well.
- Receipt of last season’s H1N1 or seasonal vaccine does not negate this year’s vaccine.
- Clusters of H3N2 documented, covered by this year’s vaccine.
Future Events

10/5- Local Anesthetic Pharmacology (Grand Rounds). Dr. Gusselman
10/6- Anesthesia for the Trauma Patient, Geriatric Anesthesia (CA1). Dr. Skorke
10/11- Emerging Drugs (CA2/CA3). Dr. Clark
10/12- M&M. Dr. Harvey
10/13- Respiratory Physiology: The Effects of Anesthesia. (CA1). Dr. Nelson
10/18- Pharmacology Key Words (CA2/CA3)
CA2/3 TBD
10/19- Anaphalaxis and Adverse Drug Reactions. (Grand Rounds). Dr. Tobin
10/25- TBD (all residents). Dr. Ken Johnson
10/26- Pharmacokinetics and Pharmacodynamics That Make Sense (Grand Rounds). Dr. Ken Johnson
10/27- Anesthesia for Patients with Respiratory Disease (CA1). Dr. Theruvath

SAVE THE DATES:
- Holiday Party: Friday, December 3, 2010, Charleston Yacht Club
- Resident Graduation, Friday, June 24, 2011, Charles Towne Landing

I Hung The Moon!
Don’t forget to nominate your co-workers for going ‘Beyond the Call of Duty’. I hung the Moon slips are available at the 3rd floor front desk, and may be turned in to Stacy or Kim. Thanks so much!! This month’s drawing winner is Glennda Ross! Glennda will receive a gift certificate to Hominy Grill. Congrats Glennda!

Regan Saxton— For being “welcoming, friendly, and helpful” in training. Way to go!

Glennda Ross—For going above and beyond the duty to fix broken office equipment without being asked.

Rob Bartlett—Great job as a CA-3 leader on weekend call!

Matt Buck—For doing exceptional work on weekend OB call!

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If you have ideas or would like to contribute to Sleepy Times, the deadline for the November edition will be October 18, 2010.