

MARCH 2013

## Expanded Observation Unit Opens in Emergency Department

An expanded observation unit that opened this month at University of Cincinnati Medical Center (UCMC) will mean more options for patients who may or may not need an added level of care.

The new 16-bed unit in the Center for Emergency Care will be reserved for patients who need additional testing or lab work before physicians decide whether they require admission to the hospital or discharge.

UCMC Chief Medical Officer and emergency medicine physician John Deledda, MD, says such units have

typically been used for patients with chest pain—so much that they’ve been called “heart ERs.”

But he says physicians also need more time to monitor patients with asthma, certain skin infections and congestive heart failure.

The new unit will be a “protected environment” for patients to rest and be monitored while physicians make a determination on their next steps.

“With the new unit, we’re able to take time and make a more accurate and informed decision about whether a patient needs inpatient care or not,” says Deledda, also a UC College of Medicine associate professor. “It frees up ED (emergency department) beds for more acute patients and avoids unnecessary admissions when inpatient beds may be at a premium—it’s quite frankly a win-win for both the ED and the hospital.”

With the expansion comes an increase in staffing: the unit will have



Nurse Anna Dalhover

a dedicated emergency medicine physician for 10 hours a day as well as a mid-level provider 24 hours a day for observation unit patients.

Deledda says the design of the unit is matched to the demands of the anticipated acuity of the patient care. Patients are provided a more private, less acute treatment environment.

UCMC President and CEO and UC professor Brian Gibler, MD, says the unit expansion is essential to the hospital’s long-term goal to increase ED capacity for patients in Greater Cincinnati.

“In the evolving health care environment, providing comprehensive and highly specialized observational care in the emergency setting allows us to decrease length of stay for patients while using the latest evidence-based approach to their diagnosis and treatment,” he says. “We are very excited about this approach, which will help UCMC remain as one of the nation’s leaders in emergency care.” ●



Deledda



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This expansion is part of UC Health 2017 Initiative 9 to develop plans for capacity and efficiency at UC Medical Center’s emergency department. For more on UC Health’s strategic plan, visit [UCHealth.com/plan2017](http://UCHealth.com/plan2017).

## UC Health Launches Initiative to Improve Patient Experience

COLLEAGUES,  
UC Health is fortunate to have unrivaled clinical care providers.



Keiser

Our physicians regularly appear in rankings such as *U.S. News & World Report's* "Top Doctors," *Cincinnati Magazine's* "Top Doctors," *Cincy Magazine's* "Best Doctors" and elsewhere.

In addition to our medical expertise, our patients value the entire experience of their care at UC Health. They also consider things such as helpfulness of our associates, availability of family-friendly inpatient rooms and cleanliness of our buildings, to name just a few.

That's why we included "improve patient and family experiences at all service sites," as Initiative 7 within Plan 2017, UC Health's five-year strategic plan, launched in October 2012. The system then established a steering committee to formulate comprehensive improvements in the customer experience at UC Health.

### Patient Survey Scores Matter

Of course, for years we've been monitoring patient opinions with tools such as Press Ganey's inpatient surveys and the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS).

Paying attention to what patients think about us (in addition to clinical outcomes) is increasingly important for two reasons.

First, in 2012, the Affordable Care Act began tying Medicare reimbursements to hospitals' HCAHPS scores. The higher the scores, the higher our Medicare reimbursement.

Another survey, the Clinician and Group Consumer Assessment of Healthcare Providers and Systems (CGCAHPS), exists for measuring satisfaction with physician practices. We're currently using it at our hospital-based ambulatory clinics and are exploring ways to extend it to University of Cincinnati Physicians, which uses a telephone survey system.

Nothing's definite yet, but we anticipate CGCAHPS being linked to Medicare reimbursements in the future, and we're giving careful thought to how to prepare.

The second reason paying attention to our patients' opinions is important is that it's simply good business. We operate in a competitive environment in which patients can drive by other hospitals and clinical practice sites before arriving at ours, and we need to make sure they have plenty of reasons for wanting to continue to come to UC Health.

Among those reasons are the 10,000 associates who've already put us on the map as a leading health care provider. You and your coworkers are a vital part of our strategic plan, which is why we held launch events at work sites in October and emailed you questions each week for the first two months after announcing Plan 2017.

### Customer Service Best Practices

The plan charts our course for the future, and elements of it call on us to explore how we can build on our strengths as individuals, as teams and as a system to improve customer service. We'll therefore hold training later this year in which we'll identify best service practices from leaders in the field such as Mayo Clinic, Ritz-Carlton, Toyota—and ourselves.

You'll have an opportunity during exercises to share your input on how you serve customers in a way that makes them keep UC Health at the top of their list of health care choices. I and other UC Health leaders will be in the classroom, too—learning, providing input and helping boost our patient rating even higher.

I look forward to seeing you there!

**ROSEMARY KEISER**  
VP Ambulatory Services, UC Health  
Assistant Dean, UC College of Medicine

## Connected

*Connected* is a monthly publication for clinicians and associates of UC Health. Send your comments and ideas to CorporatePR & Marketing @uhealth.com.

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# Program Expands Fertility Preservation Options

## Team counsels both men and women at risk for infertility

There are now a variety of options for preserving fertility when undergoing treatment for a life-threatening condition such as cancer, says Julie Sroga, MD, UC College of Medicine associate professor, endocrinologist and director of UC Health's oncofertility program.

The program exists within the UC Center for Reproductive Health for adult patients and also operates in conjunction with Cincinnati Children's Hospital Medical Center, Sroga says, to help guide patients—as young as 1 month old—who are at risk for infertility as a consequence of being treated with a sterilizing medication or procedure. Common treatments that may compromise future fertility, she says, are chemotherapy and radiation.

"A life-threatening diagnosis can be overwhelming, and there is so much to go through with regard to treatment ... and if fertility could be affected we can aid in that counseling," says Sroga, explaining that the approved or standard treatments for postpubescent female patients are egg banking and embryo banking. Experimental therapies including ovarian suppression (shutting off the ovaries with medication) and ovarian tissue freezing are alternative options for patients who are unable to undergo these standard therapies. Currently, the only option for prepubertal girls is ovarian tissue freezing.

The oncofertility program at UC Health is part of the larger Oncofertility Consortium, a national, interdisciplinary initiative designed to explore the reproductive future of cancer survivors supported by the National Institutes of Health. As one of 50 sites in the consortium, UC Health provides both

men and women options for preserving their reproductive health.

In some cases, Sroga says, fertility options are not covered by insurance; thus UC Health has partnered with Fertile Hope, a national support system that can arrange for discounted services and donated medications for those who qualify. Every case is unique, but according to the application guidelines a must is that the patient has not undergone any medical treatments prior to applying. •

### Center for Reproductive Health Oncofertility Program

- Counsels patients at risk for infertility due to medication or treatment procedures
- Serves both men and women
- Operates in conjunction with Cincinnati Children's
- One of 50 sites in the Oncofertility Consortium, a national, interdisciplinary initiative for cancer survivors supported by the National Institutes of Health

>> **FOR MORE INFORMATION**

Contact the UC Center for Reproductive Health at 513-585-2355. Appointments are available in Mt. Auburn, West Chester and Southgate, KY.



Julie Sroga, MD

*"A life-threatening diagnosis can be overwhelming ... and if fertility could be affected we can aid in that counseling."*

Julie Sroga, MD  
UC Health endocrinologist

# Blood and Bone Marrow Cancer Services Now Available

## UC Cancer Institute program offers clinical trials, advanced treatments

The University of Cincinnati (UC) Cancer Institute has assembled a team of experts in hematologic malignancies, launching a robust new program that focuses on subspecialty care for cancers of the blood and bone marrow—diseases that affect nearly 140,000 adults annually—backed by the latest discovery-driven medical concepts.

Led by Elias Anaissie, MD, and based at the University of Cincinnati Medical Center, the UC Cancer Institute Hematologic Malignancies Program focuses on providing individualized, patient-tailored care plans, while investigating new treatment options through clinical research studies, including phase-1 experimental (first-in-human) trials.

In the past month, the UC Cancer Institute team has treated dozens of patients with myeloma, leukemia and lymphoma from the Greater Cincinnati area as well as patients traveling from out of state—with two patients coming from outside the United States. The team has successfully performed 10 bone marrow transplants to date.



Dottie Stover, UC Creative Services

### Personalized Treatment Approach

“Our philosophy is based on individualized, patient-specific treatment and is driven by the patient’s holistic needs—medical, spiritual and emotional. All treatment decisions are made as a partnership between the care team, the patient and his or her family—starting with initial diagnosis and through the complete care cycle,” says Anaissie, UC Health medical oncologist and the John & Gladys Strauss Chair in Cancer Research and professor at the UC College of Medicine.

“Patients need immediate access to their team when emergencies or questions arise. With respect to this need, we provide 24/7, 365 day-a-year onsite coverage by physicians experienced in hematologic malignancies and bone marrow transplantation.”

Unlike many bone marrow transplantation programs across the United States, the UC Cancer Institute offers treatment in a “one stop” outpatient day hospital setting. Throughout the Tristate region of Ohio, Kentucky and Indiana, only two other centers—the Cleveland Clinic and Indiana University—offer transplantation services outside the hospital setting.

“We want treatment to be comfortable and convenient while minimizing the risk of infection to our patients when they are in active treatment and more susceptible to communicable diseases,” adds Stephen Medlin, DO, UC Health medical oncologist and associate professor at the UC College of Medicine. ●



Dottie Stover, UC Creative Services

Elias Anaissie, MD (left), and Stephen Medlin, DO

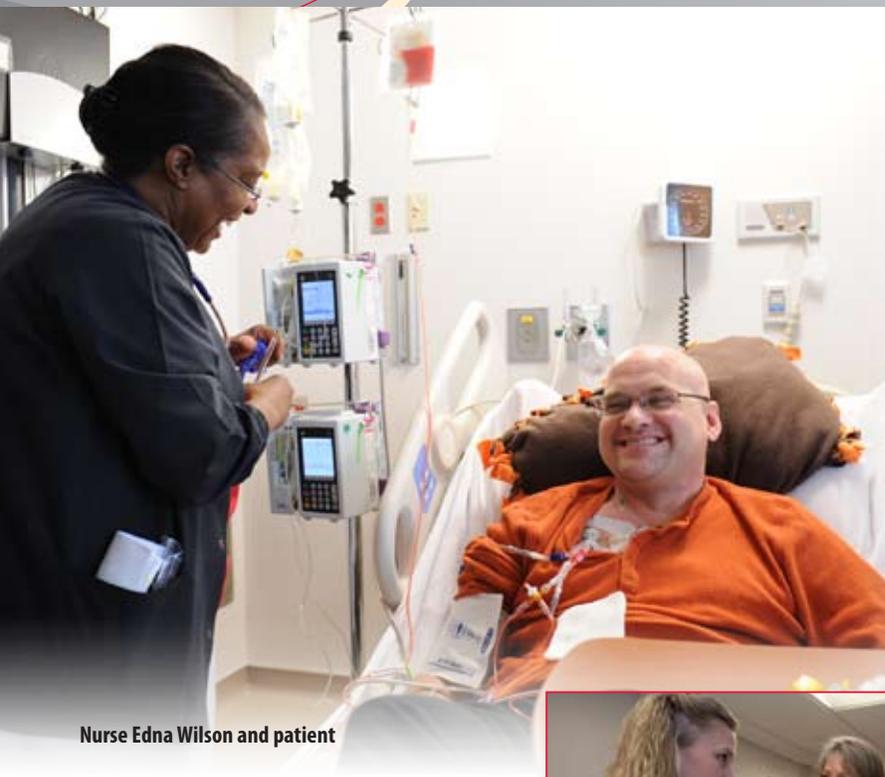
### Specialized Stem Cell Collection

*In partnership with Hoxworth Blood Center, the UC Cancer Institute is able to offer stem cell collection through leukapheresis. With this approach, donors are given a series of shots to encourage stem cells to move from the bone marrow into the bloodstream. Blood is then removed and the white blood cell portion containing stem cells is separated mechanically before returning the remaining blood to the donor. Traditional stem cell harvesting is done surgically, removing bone marrow from both hip bones.*

### Treatment Team

The UC Cancer Institute Hematologic Malignancies team includes:

- Two **physicians specializing in blood and bone marrow cancer** (two additional physicians will join by the end of 2013)
- Dedicated **radiation oncologists**
- Three **cancer and bone marrow transplant-trained hospitalists**
- **Pathologists**
- **Oncology nurse practitioners and nurses**
- **Pharmacists**
- **Dietitians**
- **Oncology social workers**
- **Nurse educator** for patients and caregivers
- Bone marrow **transplant coordinator**, and a
- **Director for clinical quality** management



Nurse Edna Wilson and patient

**INPATIENT CARE** is offered in a dedicated bone marrow transplant unit located on the UC Medical Center's eighth floor.



UCMC inpatient unit

Dottie Stover, UC Creative Services

All aspects of **OUTPATIENT CARE AND TESTING** occur on one floor at the George L. Strike Bone Marrow Transplant Center, located in the Hoxworth Building, 3130 Highland Ave., including:

- Physician/nurse appointments
- Blood testing and other monitoring through Hoxworth Blood Center
- Outpatient chemotherapy and bone marrow transplantation
- Stem cell collection (self and donor)
- Comprehensive support services (social work, financial counseling, nurse coordinator/educator, nutrition consultation, scheduling)
- Patient education library

The center was named in memory of UC Health's late Board of Trustees Director George L. Strike.

**>> APPOINTMENTS & REFERRALS**

To learn more about the UC Cancer Institute Hematologic Malignancies team, visit [uccancer.com/blood](http://uccancer.com/blood) or call 513-584-4BMT (4268).

Clinical trial information is available by calling 513-584-7698 or at [uccancer.com/clinicaltrials](http://uccancer.com/clinicaltrials).



Dietitian Tammy Ward (right)

Dottie Stover, UC Creative Services



Stephen Medlin, DO, and patient

Dottie Stover, UC Creative Services

*Outpatient Bone Marrow Transplant Center Dedicated*



Mark Bowen

The **GEORGE L. STRIKE BONE MARROW TRANSPLANT CENTER** was recently dedicated. Pictured at the event are (left to right): Stanley Chesley, UC board member; Stephen Medlin, DO, hematologist and stem cell transplant physician; Tara Mink, quality director, hematologic malignancies program; Brian Gibler, MD, president and CEO, UC Medical Center; Jim Kingsbury, president and CEO, UC Health; Frank Smith, MD, clinical director, UC Cancer Institute; Elias Anaissie, MD, director, hematologic malignancies program; and Francis Barrett, chair of the UC Board of Trustees.

# in brief

## Cincinnati Opera Partners With UCMC

The University of Cincinnati Medical Center (UCMC) and Cincinnati Opera announced a Voice Health Partnership Feb. 20. Under the agreement, Cincinnati Opera will provide programming for UCMC patients, visitors, staff and physicians, and UCMC will offer screenings and advice for the Opera's performers as well as the Greater Cincinnati voice community.

The partnership traces its origins to 2011, when the UC Health Performance & Professional Voice Center coordinated the region's first World Voice Day. The annual free event engages Cincinnati's voice community in a discussion about voice care and health.

Over the next three years, Cincinnati Opera will present 18 public performances on the UCMC campus in areas such as the main lobby and visitor waiting areas. Cincinnati Opera staff will also curate a special opera playlist for in-room patient listening devices.

## UCMC Receives American Heart Association Award

The University of Cincinnati Medical Center (UCMC) has received the American Heart Association's Get With The Guidelines®—Stroke Silver Plus Quality Achievement Award.

The award recognizes UCMC for achieving at least 12 months of 85 percent or higher adherence to all program indicators and at least 12 months of 75 percent or higher compliance with six of 10 measures to improve quality of patient care and outcomes.

The Comprehensive Stroke Center at the University of Cincinnati Neuroscience Institute is part of the American Heart Association's efforts to use these guidelines to save lives.

According to the American Heart Association/American Stroke Association, stroke is one

of the leading causes of death and serious, long-term disability in the United States. On average, someone suffers a stroke every 40 seconds; someone dies of a stroke every four minutes; and 795,000 people suffer a new or recurrent stroke each year.

## Crawford-Hemphill Named 'Woman of the Year'

The *Cincinnati Enquirer* has named Ruby Crawford-Hemphill as one of 10 "Women of the Year."



Crawford-Hemphill

This annual award program recognizes a group of women who are making substantial contributions to the community through

their professional and volunteer work. Crawford-Hemphill is the assistant chief nursing officer at the University of Cincinnati Medical Center. She has played a vital role in helping expand services to underserved women and children in the community.

## UC Health Wins Award for Cancer Commercial

UC Health has won the Cancer Awareness Advertising Awards



**Yash Patil, MD**, UC Health otolaryngologist and assistant professor at the UC College of Medicine, and **John Hawkins, MD**, chief of psychiatry at the Lindner Center of HOPE and UC adjunct associate professor, were named 2013 *Cincinnati Business Courier's* Health Care Heroes. Patil (center) is pictured here with **George Atweh, MD** (right), director of the UC Cancer Institute, a finalist in the manager category; and **Christopher McPherson, MD**, a specialist with the UC Brain Tumor Center and finalist in the innovator category.

Program's Silver Cancer Awareness Advertising Award for the "Checkmate" television commercial it created for the University of Cincinnati Cancer Institute. The commercial promoted the institute's strategy for cancer care as well as the importance of developing a game plan that would "knock out" cancer. Don Crouse, corporate director of public relations and marketing, wrote and directed the commercial, which ran in the Cincinnati area in 2012

on ABC affiliate WCPO-TV, CBS affiliate WKRC-TV and NBC affiliate WLWT-TV.

## College of Medicine Hosts Leadership Presentations

Andrew Filak Jr., MD, senior associate dean for academic affairs and education at the UC College



Filak

of Medicine, presented on the future of medical education Feb. 18. A video and slides of the presentation are available in the "Dean's Corner" section at med.uc.edu.

On March 18, Lori Mackey, senior associate dean for operations and finance and chief operating officer



Mackey

of UC Health-University of Cincinnati Physicians, will speak on finances at 12:15 p.m. in Kresge Auditorium. ●

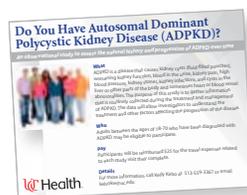
## CLINICAL TRIAL SPOTLIGHT: Autosomal Dominant Polycystic Kidney Disease

**WHAT:** The purpose of this study is to gather information that is routinely collected during the treatment and management of autosomal dominant polycystic kidney disease (ADPKD). The data will allow investigators to understand the treatment and other factors affecting the progression of the disease.

**WHO:** Adults between the ages of 18-70 who have been diagnosed with ADPKD may be eligible to participate.

**PAY:** Participants will be reimbursed \$25 for the travel expenses related to each study visit they complete.

**DETAILS:** For more information, call Kelly Kelso at 513-559-3367 or email kelsokw@uc.edu.



# Experimental Trials Benefiting Cancer Patients

## 'First-in-Human' phase 1 studies offered at UC Cancer Institute

**P**am Johnson smoked cigarettes for 45 years. She quit the day she had surgery for stage 3 lung cancer.

"I was anxious and worried," says Johnson about the day she received her diagnosis in 2010. Her primary care physician had ordered routine blood work that came back abnormal. A chest X-ray revealed a suspicious spot in her right lung, and a follow-up biopsy confirmed that it was cancerous.

Johnson says there was no question in her mind where she would go to get care: "UC and the Barrett Center—it's the best institution in town for cancer care."

She chose Sandra Starnes, MD, UC Health chest surgeon and chief of thoracic surgery at the UC College of Medicine, to perform her surgery at University of Cincinnati Medical Center.

Starnes and her team offer rib-sparing video-assisted thoracoscopic surgery



**Starnes**

(VATS), which requires only a few small incisions in the chest to insert the tools used to operate.

Johnson immediately began a three-month

regimen of combined chemotherapy and radiation therapy to address residual cancer cells. Six months later, a follow-up PET/CT scan showed a mass in the liver, with blood work indicating abnormal liver function. A biopsy confirmed that the lung cancer had spread to her liver as well as to a pelvic bone and one rib.

After a standard second-line chemotherapy failed to reduce the liver

tumor size, she consulted with John Morris, MD, director of the University of Cincinnati Cancer Institute's Experimental Therapeutics/Phase 1 Program and UC Health lung oncologist, to talk about clinical trials.



**Morris**

"It was pretty clear that the standard therapies weren't going to be enough for me. I wanted to take the steps that would give me the best chance at kicking the cancer's butt. I trust Dr. Morris and he said this phase 1 study was my best shot," recalls Johnson.

In March 2012, she began treatment on a phase 1 study to test an immune system-stimulating agent known as MDX-1105. About 200 patients will enroll in the trial nationwide.

"This experimental drug does not act directly on the tumor, but rather blocks an 'off-switch' in the immune system to allow the immune system to activate against cancer," explains Morris, UC professor and principal investigator of the local arm of the trial.

By June 2012—after two cycles of the experimental therapy—Johnson's liver tumor had shrunk 80 percent, the pelvic bone regenerated and the rib remained stable. As of February 2013, Johnson's tumors continue to shrink and are almost unmeasurable on X-rays.

"I'm living a good quality of life, despite the cancer. I trust my Dr. Morris. He gets me and what I want from this experience. I'm very hopeful and focused on living my life," adds Johnson. ●

**"It was pretty clear that the standard therapies weren't going to be enough for me. I wanted to take the steps that would give me the best chance at kicking the cancer's butt."**

**Pam Johnson, patient**

### About Experimental Therapeutics

Phase 1 studies are the first step in testing an investigational drug in humans. The purpose of a phase 1 study is to find the safest way to give a new drug (for example, by mouth, IV infusion or injection) and the most effective dosage. The UC Cancer Institute is the only organization within a 100-mile radius of Cincinnati to offer a comprehensive phase 1 clinical trial program.

**>> FOR MORE INFORMATION**  
**Watch a video to learn more about the UC Cancer Institute Experimental Therapeutics Program at [uccancer.com/phase1](http://uccancer.com/phase1) or call 513-584-7698.**



# We're all UC Health

## Earl Martin

UC Health Mail Room Manager

**EACH MONTH, EARL MARTIN** and his team process nearly 100,000 pieces of outbound U.S. mail and make 2,400 delivery service runs.

His department fills patient educational packets and sends marketing materials, invoices for income the organization uses to operate and much more. Martin is knowledgeable about mailing procedures, and regularly advises his internal "clients" about options for sending information at the most reasonable rates.

As the UC Health mail room manager, Martin adds that there's more than meets the eye within his department. Mail room associates also transport medical equipment such as operating room trays, tools and Prisma Dialysis machines.

One of the benefits of a multi-site health care system is that medical technology such as dialysis machines can be sent where it's needed, rather than each facility having to maintain its own, which might go unused occasionally.

Martin's department also provides vital support for UC Health's annual United Way campaign, including preparing pledge packages. Martin has been a member of the campaign's planning committee for several years, and 2012's efforts generated more than \$377,000.

"I love the challenge," says Martin of his experience at UC Health. "Each day is different, and I interact with almost every department. No two days are the same, and I thrive on that 'chaos.'"

During his 34 years with UC Health, Martin says he is blessed to have had great employees and reported to wonderful leadership. "It is an absolute joy to work with them," he says.

Martin conveys this motto to his team frequently: "We're only as good as our last call. Make sure to take care of our customers every time."

His staff of 18 employees takes this to heart as it helps take care of the nearly 10,000 UC Health associates and countless patients throughout the year—delivering everything from mail to lifesaving medical equipment.

Martin keeps busy outside of work with cooking and baking. He's even shared his talent at work for events such as team building and committee celebration parties. He also enjoys traveling back home to New York to visit family and to Florida for leisure. •



**uhealth.com**

*Inpatient and outpatient services available in the following communities:*

**OHIO**

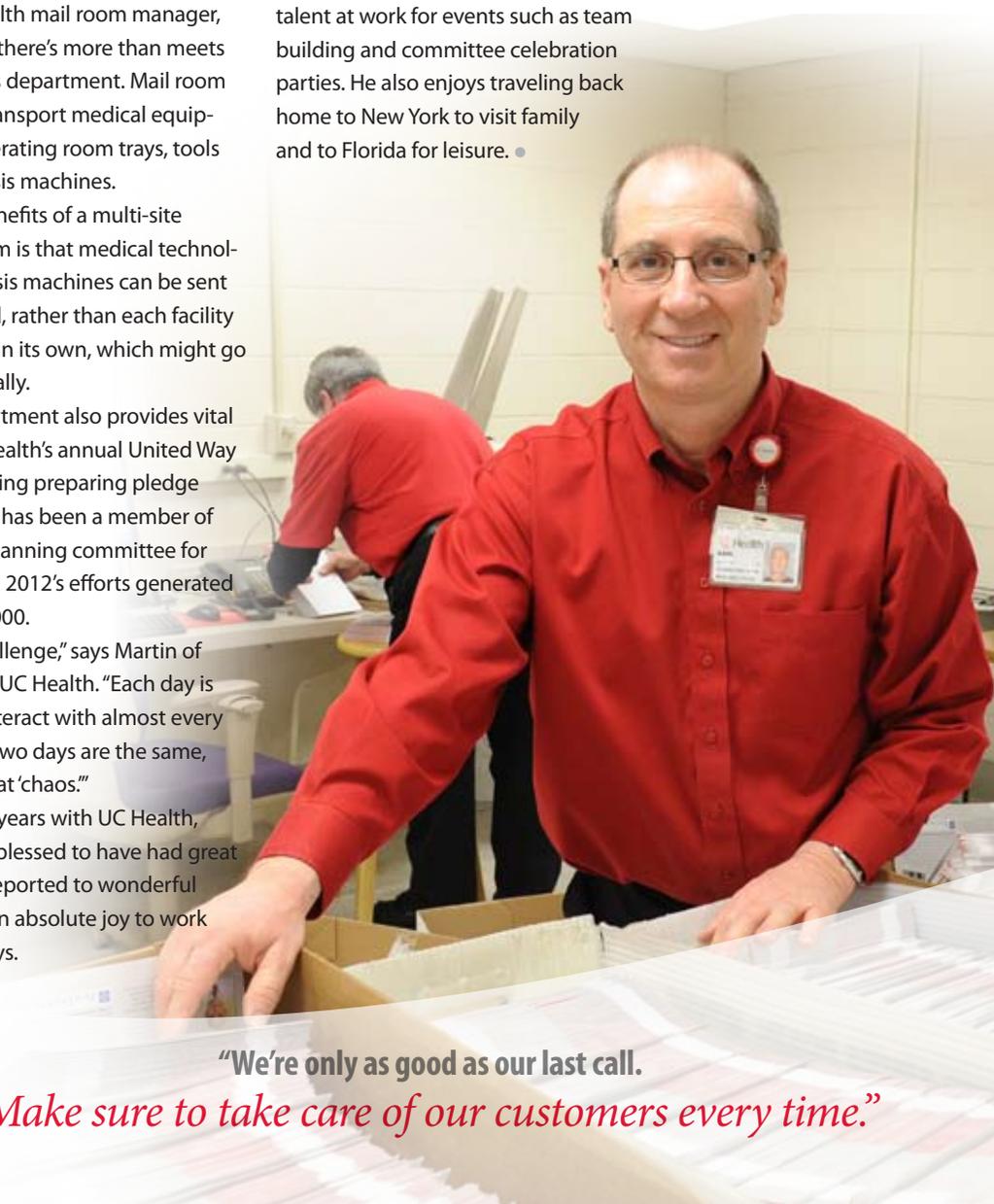
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- BROWN COUNTY
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- FOREST PARK
- HARPER'S POINT
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**"We're only as good as our last call.  
Make sure to take care of our customers every time."**