Oct. 8, 2013

Inside this issue

Coming soon: faster access to your health information... Page 2
You can now register online for Family Resource Center classes... Page 3
Some college students majoring in health sciences are getting a closer look at their possible profession... Page 3
No more excuses! Why you need a flu vaccine... Page 4
THE CUTTING EDGE:

Unusual tract infections could be telling you something... Page 4
Bereath explores gelbladder removal as medical treatment... Page 4
Innovative heart valve procedure has a lot of people talking... Page 4

Connect with us

facebook.com/camcchildrenstsystem
youtube.com/user/camchealthsystems

Surgeon’s specialized training and mother’s instinct saves baby

First-time mom Melinda Campos knew something was wrong with her newborn baby. In late July at just 3 weeks old, Campos’ son, Benjamin, started severely projectile vomiting every time he tried to nurse or take a bottle. Until then, he had eaten normally and had been a perfectly healthy baby.

“It was the worst thing I had ever seen,” Campos said. “Every baby spits up, but I was thinking that my child shouldn’t be vomiting like this.”

Doctors suspected different allergies and made numerous changes to Benjamin’s diet. But the vomiting continued.

After multiple visits to the ER and pediatrician with no improvement, an internet search ultimately pointed Campos in the right direction as to what could be wrong with her baby.

“I found something called pyloric stenosis, and I told my husband, ‘oh is it, this is what he has?’ He had every symptom – it just had to be,” Campos said.

The pylorus is a muscular valve that holds food in the stomach until it is ready to pass to the intestine. Pyloric stenosis is a blockage of the pylorus, which prevents food from passing from the stomach to the intestine. This causes a baby to vomit.

“An ultrasound confirmed that his pyloric muscle was too thick and a little too long, which caused a gastric outlet obstruction,” Mansell said. “So all the milk and formula he was eating didn’t get past the stomach and caused him to vomit.”

On Aug. 6, Mansell performed a laparoscopic pyloromyotomy on 23-day-old Benjamin, which is a procedure using three tiny incisions, a camera and surgical instruments to open the muscles around the pylorus and allow food to pass from the stomach to the small intestine normally.

With his advanced fellowship training in pediatric surgery, Mansell performs procedures like the pyloromyotomy using minimally-invasive techniques, whereas some pediatric surgeons perform the same procedure using open surgery.

Campos and her husband were relieved to learn that Mansell specializes in laparoscopic surgery, which involves smaller incisions, a shorter recovery and fewer complications.

Mansell completed his general surgery training at CAMC in 2006 and practiced with the West Virginia University staff for five years before completing a fellowship in general pediatric surgery at Montreal Children’s Hospital. Mansell’s return to CAMC as a pediatric surgeon means more West Virginia children have access to the widest range of treatment options and the most advanced procedures at Women and Children’s Hospital.

“While we have a couple pediatric surgeons in the state, which was part of my motivation to return to CAMC, it eventually became clear that it was time to bring one of the leading pediatric surgeons to West Virginia,” Mansell said. “One of the reasons I was drawn to West Virginia was that I feel like we haven’t reached our full potential for the patients we serve. This program is a clear step in the right direction as to what could be wrong with your child.”

The pylorus is a muscular valve that holds food in the stomach until it is ready to pass to the intestine. Pyloric stenosis is a blockage of the pylorus, which prevents food from passing from the stomach to the intestine. This causes a baby to vomit.

CAMC is the only hospital in the Charleston area to provide breast MRI, and offers the exams at Women and Children’s Hospital and Children’s Imaging Center – Kanawha City. Both locations are equipped to work with the MammoPad to increase patient comfort during the procedure. 

CAMC Today is a publication of CAMC Health System
Care for the community

CAMC’s programs and services go well beyond the traditional health care most people think about. CAMC does much more than just provide health care; it is involved in nearly every aspect of the lives and well-being of the community.

In 2012, CAMC’s community benefit programs were assessed at over $47 million, which is 1/3 of the state’s Hospital Assessment Revenue Service guidelines, but are reflective of CAMC’s role in providing benefit to the community.

Community benefit programs are events or activities that provide treatment or promote health and healing as a response to identified community needs and meet at least one of the following community benefit criteria:

• Improves access to health care services
• Enhances the health of the community
• Advances medical or health care knowledge
• Relieves or reduces the burden of providing health care for the community

CAMC is the largest provider of uncompensated care and the largest Medicare provider in West Virginia. CAMC also is the primary medical safety net provider of women and children’s and trauma services in central and southern West Virginia. Additionally, CAMC is the only Level I trauma hospital in southern West Virginia. As a teaching hospital, CAMC serves the uninsured and underserved with highly specialized safety net services

CAMC assists and collaborates with rural health care providers in the state, in such areas as telemedicine, networking and outreach and other programs.

CAMC’s full community benefit report will be posted on camc.org within a few weeks.

Grant provides funding for pulmonary rehabilitation in rural West Virginia

The number of hospitalizations in southern West Virginia for COPD-related complications is twice the national average. The mortality rate associated with COPD in West Virginia is 58 percent higher than the national average. Smoking is the number one cause of COPD, environmental and work-related hazards and exposure also put patients at risk for the disease. Underground coal miners are at a higher risk for COPD because of the nature of their jobs.

Pulmonary rehabilitation is a game changer for patients suffering with COPD. With the guidance of a therapist, patients can learn to breathe in a different way that allows for increased exercise. Exercise helps strengthen the lungs, easing the symptoms of COPD and ultimately allowing patients to lead an active lifestyle.

According to Chuck Mendes, manager of respiratory services at CAMC, his department will work with the rural clinic to set up the rehabilitation programs and will provide training and education for the respiratory therapists that will work with the patients on a regular basis.

The project will aim to treat at least 60 patients in the first year, and hopes to double that in the next year.

Task force seeks to educate CAMC staff about domestic violence

In West Virginia, a call is made to a domestic violence hotline nearly every nine minutes. One out of three homicides in our state are related to domestic violence. It is affecting CAMC’s patients, their families and the entire community. As one of the state’s largest hospitals and employers, CAMC is committed to educating staff and patients about domestic violence and to providing options for those affected.

CAMC’s domestic violence task force is working to identify needs for education, training and support about domestic violence for employees, so that they will know what to do when encountering a situation with a patient or a co-worker. The group has more than 60 members from many departments – clinical and non-clinical.

“You deserve to be safe. Domestic violence is a crime in West Virginia and a serious family health issue. If you are in an abusive relationship, here is what you might not have access to in the regular health care system: faster access to your health information, confidentiality, and a safe space to talk and have your questions answered. You deserve to be safe. Domestic violence is a crime in West Virginia and a serious family health issue. If you are in an abusive relationship, here is what you might not have access to in the regular health care system: faster access to your health information, confidentiality, and a safe space to talk and have your questions answered.

If you are in danger, call 911. If you have questions about domestic violence, call the national 24-hour toll-free hotline at 1-800-799-SAFE (7233) or the closest domestic violence shelter in your region. In the Charleston area, call (304) 340-5359.

If someone knows you in an abusive relationship, here’s how you can help:
• Listen to the person
• Believe what they say
• Don’t blame the victim
• Don’t disrupt against them
• Keep what they tell you confidential
• Allow the person to make her own decisions
• Help the person seek assistance from a domestic violence advocate
• Don’t give up

If you see an injury as a problem, call 911. If you have questions about domestic violence, call the national 24-hour toll-free hotline at 1-800-799-SAFE (7233) or the closest domestic violence shelter in your region. In the Charleston area, call (304) 340-5349.

Source: WV Coalition Against Domestic Violence

Medical Explorers program

Medical exploring is a worksite-based program that gives youth an opportunity to learn about the various health careers available to them. Exploring is for young men and women who will provide general information about tests and procedures.

They will also share their personal challenges and success stories related to their profession.

The purpose is to help youth to develop and achieve the skills and knowledge necessary for real-life experiences in their field of interest. Exploring provides opportunities based on areas of emphasis: career opportunities, life skills, self-sufficiency, character, and leadership experiences.

The kick-off meeting is scheduled for Oct. 1. Visit your local site to learn more about this opportunity at camc.org/medicalexplorers.

In December, CAMC will open access to its PatientLink patient portal to allow patients to manage their health information in a secure and easy-to-use way.

Individuals who have been patients at CAMC after March 2012 are eligible to access PatientLink.

Patients will be able to view several different documents provided during their care at CAMC, including:
• Lab test results
• Medical imaging reports
• Summary of hospital stays, including discharge and medication information
• Irving will and medical power of attorney documents.

By creating a PatientLink account, patients will be able to access information more quickly. Most results will be available within two days of the time of hospital discharge or outpatient testing.

In the future, PatientLink will also include CAMC’s Preventive Group practices. PatientLink will also connect with CAMC’s online Health Information Center to provide greater information about tests and procedures.

For more information, visit camc.org/PatientLink and watch for sign-up information in early December.

Medical Explorers program

PatientLink: faster access to your health information

In the future, PatientLink will also include CAMC’s Preventive Group practices. PatientLink will also connect with CAMC’s online Health Information Center to provide greater information about tests and procedures.

For more information, visit camc.org/PatientLink and watch for sign-up information in early December.

Published by CAMC Marketing & Public Affairs

Elizabeth Pellegren

Dale Witte

Jessica Duffield

Tony Campbell

Julia Noland

Leslie Carpenter

Ashley Shown

Writing

Graphic Design
Family Resource Center offering online registration

Each year, CAMC registers more than 650 participants at classes at the Family Resource Center (FRC). These classes focus on a variety of family preparation topics, including childbirth, sibling, lifelong learning, breastfeeding, basics of baby care and more.

In 2012, the FRC began offering an online childbirth class designed for expectant mothers who are on bed rest or are otherwise unable to come to the in-person class. After surveying class participants about how they perceive information and how they prefer to be contacted, the FRC has adopted online registration software that will streamline the process for participants and provide a step in the class. The system will send reminder emails to registered participants, as well as send an email with side feedback after the class is completed.

No More Excuses You need a Flu Vaccine

“Oh, the flu isn’t so bad...right?”

Wrong. The influenza (flur) is a contagious disease which affects the lungs and can lead to severe complications, including pneumonia. While pregnant women, young children, older people and people with pre-existing chronic medical conditions like asthma, diabetes and heart disease are at increased risk of serious flu-related complications, even healthy adults can get sick enough to miss work or school for a significant amount of time or even be hospitalized.

“I'm healthy, I don't need a flu vaccine.”

Anyone can become sick with the flu and can spread it to others. Young people, children, pregnant women and people with medical conditions like asthma, diabetes, heart disease or kidney disease can have a higher risk of the flu, but children, teens and adults who are active and healthy can also get the flu and become very ill. Flu vaccines are unpredictable, and every season puts some population groups at especially high risk from the flu. Each year, more than 20,000 people die from flu-related illnesses, and millions of others become sick. While pregnant women, young children and older adults are at especially high risk from the flu, everyone is at risk of serious flu-related complications. Older people and people with certain chronic medical conditions like asthma, diabetes and heart disease are at increased risk of serious flu-related complications, even healthy adults can get sick enough to miss work or school for a significant amount of time or even be hospitalized.

“I don’t trust that the vaccine is safe.”

Flu vaccines have been given for more than 50 years and they have a very good safety track record. The two most common side effects people report are soreness at the injection site, which may last 1-2 days, and flu-like symptoms which may last up to 2 weeks.

“If I got vaccinated once, I won’t need another one.”

Your body’s level of immunity from a vaccine received last season is expected to have declined. You may not have enough immunity to be protected from getting sick this season. You should get vaccinated again to protect yourself against the three viruses that research suggests are likely to circulate again this season.

“I hate shots.”

The very minor pain of a flu shot is nothing compared to the suffering that can be caused by the flu. The flu can make you very sick for several days, send you to the hospital, or, worse. For most healthy, non-pregnant people ages 2 through 45 years old, the nasal-spray flu vaccine is a great choice for people who do not like shots. Even for a cold or sprain you can prevent from catching the flu. So, whatever little discomfort you feel from the minor side effects of the flu vaccine is worthwhile to avoid the flu.

“You can get the flu vaccine any time.”

Even if you got a flu vaccine, there are still reasons why you might have felt lightheaded. You may have been exposed to a non-flu virus before or after you got vaccinated. The flu vaccine can only prevent illnesses caused by viruses caused by flu. It cannot protect against non-flu viruses.

“We want to make childbirth preparation as easy and convenient as possible for our expectant mothers,” said Kelly Colbert, director of the FRC. “By providing them the option to register online, families can begin preparing for their baby anytime instead of having to wait for office hours or the weekend.”

If participants cannot register online or do not wish to, they can call the FRC at (304) 598-2545 (304) 598-5266.

For more information about the classes offered by the FRC, visit http://camc.org/frc.

Registration instructions:

• Visit camc.org/frc
• Click “Childbirth class offerings” on the left menu
• Choose the classes you want to attend and follow the registration instructions

Teays Valley Hospital Critical expansion

Critical Care patients at CAMC Teays Valley Hospital will have the benefit of a private room. The $1.7 million expansion project, which started in December 2012, is nearly complete.

The ICU expansion was necessary to improve the care patients receive on our critical care beds at Teays Valley Hospital. Having four separate rooms created the capacity of the ICU to drop if there were patients with different infections who had to be isolated.

The ICU addition will also provide two additional beds for the future as our hospital grows. Private rooms in the ICU not only reduce disease transmission but also improve the overall health care process for our patients. The additional ICU room will help to care for the stress of a stay in ICU. Stress can increase blood pressure and may contribute to a longer length of stay in the hospital.

Graduation celebration

On Sept. 22, CAMC Women and Children’s Hospital celebrated the first graduating class of women and families attended a carnival-themed party. This annual celebration allows families to visit with the health care providers who took care of them at their most fragile time. It’s also a great time for those who work in the NICU to see how those they treat benefit from the care they received.

Some college students majoring in health sciences are getting a closer look at their potential professional careers.

The “Green Coat” program is an opportunity introduced to CAMC and CAMC Institute by the West Virginia School of Osteopathic Medicine’s Rural Health Initiative. It allows college students to be immersed in the hospital clinic setting with supplemental opportunities to broaden their exposure to working with an interprofessional health care team.

Lucas Harmek and Rahmen Dubash are the first two students to participate at CAMC. They recently began a 40 week program with a variety of areas including:

1. Health care provider and/or clinical interactions
2. Professional (clinical) education and training
3. Health system organizational and leadership development
4. CAMC critical care health programs and awareness

To be considered for the program the students must be sophomores, juniors or seniors with grade point averages greater than 3.0 with letters of recommendation from their academic advisor or school that describes the student’s career goal and how it relates to primary care practice in West Virginia.

The program takes college students interested in the medical field and provides them hospital experiences and supplemental opportunities to broaden their exposure to working with an interprofessional health care team,” said Dr. Roba, DO, WVSOM rural assistant dean - south central region. “They are in direct patient contact on selected units at CAMC-General and CAMC-Memorial hospitals.

CAMC is a leader in medical education at all levels from undergraduates to post-doctoral programs.

“Green coats” gain health care experience

One of CAMC’s pills in “Best Place to Learn.” This program in partnership with WVSOM is strongly aligned with this pillar.

“CAMC has been successful in training and retaining many of the physicians we have on our medical staff,” Bahm said. “This program reaches further down to the college level to encourage students to consider WVSOM as their medical school and to stay in West Virginia to benefit the rural populations around us.

“While the programs have many partnerships with other medical providers, schools, schools of pharmacy, schools of anesthesia among others to provide learning opportunities in the hospital setting. This program is unique and the first of its kind at WVSOM and in West Virginia.

The next group of “green coats” is expected to start at CAMC in January.

* The program has a goal of 100 students participating in the program in the summer during the 2014 session.

The mall walkers program is free and is open to anyone in the community. All mall walkers must sign a release and are then given a free parking pass to use at specified times. The meetings take place the third Tuesday of each month at 9:30 a.m. at Center Court. During meetings, participants can walk at their own pace on a designated path.

For more information about the mall walkers program, contact mall management office (304) 345-9526.

3

OCT 15 – Flu Awareness Nov 19 - Holiday Planning Dec 17 – Infection prevention 2014 dates (topics TBD)

With the flu season just around the corner, professional and community leaders throughout the state are holding meetings throughout November to encourage the public to take steps to prevent flu and protect their families.

Jan 21
Feb 18
Mar 18
April 15
May 20

The mall walkers program is free and is open to anyone in the community. All mall walkers must sign a release and are then given a free parking pass to use at specified times. The meetings take place the third Tuesday of each month at 9:30 a.m. at Center Court. During meetings, participants can walk at their own pace on a designated path.

For more information about the mall walkers program, contact mall management office (304) 345-9526.

For more information about the classes offered by the FRC, visit http://camc.org/frc.

Registration instructions:

• Visit camc.org/frc
• Click “Childbirth class offerings” on the left menu
• Choose the classes you want to attend and follow the registration instructions

Teays Valley Hospital Critical expansion

Critical Care patients at CAMC Teays Valley Hospital will have the benefit of a private room. The $1.7 million expansion project, which started in December 2012, is nearly complete.

The ICU expansion was necessary to improve the care patients receive on our critical care beds at Teays Valley Hospital. Having four separate rooms created the capacity of the ICU to drop if there were patients with different infections who had to be isolated.

The ICU addition will also provide two additional beds for the future as our hospital grows. Private rooms in the ICU not only reduce disease transmission but also improve the overall health care process for our patients. The additional ICU room will help to care for the stress of a stay in ICU. Stress can increase blood pressure and may contribute to a longer length of stay in the hospital.

Graduation celebration

On Sept. 22, CAMC Women and Children’s Hospital celebrated the first graduating class of women and families attended a carnival-themed party. This annual celebration allows families to visit with the health care providers who took care of them at their most fragile time. It’s also a great time for those who work in the NICU to see how those they treat benefit from the care they received.

Some college students majoring in health sciences are getting a closer look at their potential professional careers.

The “Green Coat” program is an opportunity introduced to CAMC and CAMC Institute by the West Virginia School of Osteopathic Medicine’s Rural Health Initiative. It allows college students to be immersed in the hospital clinic setting with supplemental opportunities to broaden their exposure to working with an interprofessional health care team.

Lucas Harmek and Rahmen Dubash are the first two students to participate at CAMC. They recently began a 40 week program with a variety of areas including:

1. Health care provider and/or clinical interactions
2. Professional (clinical) education and training
3. Health system organizational and leadership development
4. CAMC critical care health programs and awareness

To be considered for the program the students must be sophomores, juniors or seniors with grade point averages greater than 3.0 with letters of recommendation from their academic advisor or school that describes the student’s career goal and how it relates to primary care practice in West Virginia.
UTIs could be telling you something

Your urinary tract is the system that makes urine and carries it out of your body. It includes your bladder, kidneys and the tubes that connect them. When germs get into this system, they can cause an infection.

Aside from pain, cloudy or bloody urine, infections could be a warning of something more serious.

Infections and other inflammatory stimuli have emerged as potential important triggers of vasovagal events. Previous studies have reported that 25 to 55 percent of people suffering an acute cardiovascular accidents or stroke also suffer from infection (respiratory or urinary tract infection, etc).

Researchers practicing at CAMC wanted to compare the incidence of prior urinary tract infections, or UTI, among stroke patients to reported UTI rates among the general population to see if there was a connection.

Their findings showed some evidence that the incidence of UTI is significantly higher for stroke patients than is found in the general population.

They presented their findings at the American Heart Association's Quality of Care and Outcomes Research session and have submitted them to an upcoming international conference.

‘Children are not little adults,’ Maxwell said. “Children are not ‘little adults,’” Maxwell said. “They have a unique anatomy and physiology. They always have a love for pediatric surgery. Maybe I’ve always had a love for pediatric surgery. Maybe I’ve always had a love for pediatric surgery.”

Melissa Campos and Rich Allenman, from Caffinton County, frame the most advanced care for their son, Benjamin, at Women and Children’s Hospital.

Melissa Campos cuddles her son who fully recovered from surgery and is now eating and gaining weight normally.

Research project receives grant

The West Virginia Clinical and Translational Science Institute, WVCTSI, has awarded a $50,000 pilot grant for a collaborative research project between the WVU-Charleston Division and the University of Kentucky with support by CAMC Institute.

The study deals with treatment methods for gallbladder dyskinesia, a disease where the gallbladder does not completely empty causing nausea and pain in the abdomen. Dr. Richmond said, “Thirty percent of all cholecystectomies performed in the U.S. each year are performed for a diagnosis of biliary dyskinesia, and the patients are selected for surgery based on the results of the CCK-HIDA scan,” said Bryan K. Richmond, MD, MBA, FACS, professor of surgery, section chief – general surgery, West Virginia University/Charleston Division. “The reality remains that only a very small percentage of patients will have a CCK-HIDA scan, and it can be seen as just reflux, nausea and pain, which is also slightly different from an adult. They also have a limited amount of reserves, which is also slightly different from an adult.”

The researchers will explore the treatment methods of gallbladder removal vs. a non-operative treatment group of patients who will receive diet counseling and a prescription for gastrointestinal disorders.

For more information about pediatric surgery at CAMC, visit camc.org/pediatricsurgery.

Visit camc.org/sleepcenter, to view the progress. CAMC plans to open the new cancer center in 2015.

TAVR heart valve procedure at CAMC

Severe aortic stenosis involving a buildup of calcium on the aortic valve is most commonly seen in elderly patients. As this narrowing becomes severe, patients begin suffering from shortages of breath, tiredness and heart failure. In the past they have had only two options. One is traditional open heart surgery which involves splitting the breastbone and stopping the heart. Those who are too ill or too high risk for surgery are listed as authors of the study.

The researchers reviewed nearly 1,300 medical records for stroke patients who also had urinary within 72 hours prior to or less than 24 hours after admission. They found that the incidence of urinary tract infection is significantly higher for patients with stroke than it is found in the general population.

The researchers presented their findings at the American Heart Association’s Quality of Care and Outcomes Research session and have submitted them to an upcoming international conference.

The research helped change practice for patients admitted with stroke. A urinary sample is collected as a routine test upon admission.

“We hope our finding will lead to more research in this medical domain, propagating a better understanding of the stroke triggers,” Dr. John said.

Potential candidates for this low invasive procedure can be referred by calling (304) 588-8804.