Providing personalized, comprehensive and life-saving care

In April 2013, Amy Smith felt a lump on her breast while in the shower. At a routine appointment with her gynecologist two days later, she decided to mention it.

After examining the lump, her doctor immediately sent Smith for a mammogram and breast ultrasound at the CAMC Breast Center. Within an hour of receiving her test results, which showed a solid mass in her breast, Smith had a breast biopsy performed by Todd Witsberger, MD.

Two days later, Amy got the call confirming what she had feared – the lump was cancerous.

After thoroughly discussing her high risk family history and options with Dr. Witsberger, Amy elected to have a double mastectomy, which was performed four days later.

Smith is living proof of the importance of early detection, accurate screenings and rapid treatment.

"Many people don’t know what a breast center is," said Roberto Kusminsky, MD, medical director of the Breast Center and professor and chairman, department of surgery, West Virginia University/Charleston. "The main difference is that a breast center like the one at CAMC is a comprehensive system that cares for patients from beginning to end rapidly, using the skills of a multidisciplinary team of experts on a routine basis."

The CAMC Breast Center takes a multifaceted approach to breast health, from routine screenings and diagnosis to innovative treatments and supportive care. It was the first of its kind in the state and the first to be fully accredited by the American College of Surgeons. It remains the only accredited breast center in the region.

The Breast Center team treats the largest number of patients with breast cancer in West Virginia. Board-certified surgeons specialize in all aspects of breast health. Experienced radiologists use the latest, most advanced technologies to diagnose a full range of breast diseases.

The Breast Center’s services include:
- NEW 3-D mammography (known as digital tomosynthesis)
- Digital mammography
- Breast ultrasound
- Minimally-invasive breast biopsies
- Rapid diagnostic program and rapid consultation program (within 24-48 hours)
- Breast cancer risk assessment
- Genetic counseling
- Multidisciplinary care from breast specialists, surgeons and oncologists
- Nurse navigators to provide care coordination
- Bone density screenings
- Pelvic ultrasounds

New location
Formerly located at CAMC Women and Children’s Hospital, the Breast Center moved to the third floor of the new CAMC Cancer Center in Kanawha City. At this location, patients have access to free parking and a separate, private entrance on the east end of the building where an elevator takes them directly to the Breast Center on the third floor.

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Hundreds of employees and more than 1,000 people from the community took advantage of free or low-cost screenings at HealthFest June 6. The annual event offers a variety of health screenings and information.

Here’s what some participants said about their experience:
- Prompt, fast, informative
- Well-organized
- Lots of good experts to talk to
- Excellent info at all booths
- Great for the community
- Friendly staffed event
- Very beneficial

Hundreds of middle and high school students also took advantage of free sports physicals.

Join us next year Saturday June 4.
Employees receive recognition from medical staff

The Medical Staff Executive Committee recognized two employees at its May meeting: Terry Harper, maintenance, Memorial Hospital and Ricky Cobb, lab anatomical pathology. These individuals were recognized for their outstanding contributions.

Cerner project update

A timeline has been established for the Cerner transition project, with a tentative go-live date set for July 26, 2016. The executive kick-off and assessment walk-throughs in hospital departments began in mid-June. An assessment of the current state of our systems will also take place in July.

Future state validation will begin in October, with integrated testing happening in February and March. End-user training will start in early May, and there will be a mock go-live around May 24.

Many employees will start to receive meeting invitations about the Cerner project. This is a priority for CAMC, and all employees must be engaged for it to be successful. Please attend any meetings in which you are asked to participate.

For the latest information, visit the Cerner transition site on CAMnet.

In mid-June, Soarian and many of CAMC’s other current products will be rebranded with the Cerner logo replacing the Siemens logo. This is only an appearance change and has no impact on our current systems or our year-long approach to transitioning to the new Cerner products that we will be using.

HealthNet launches ATV safety initiative

HealthNet Aeromedical Services unveiled a new look for its helicopters during an event at Yeager Airport. It’s part of a year-long initiative to reduce the number of injuries and deaths resulting from all-terrain vehicle accidents. The program’s spare aircraft is decorated with artwork highlighting the importance of ATV safety in Appalachia.

The “Ride Ready, Ride Safe” branded aircraft will rotate around the HealthNet Aeromedical Services service area, carrying this important message along with it.

"As a not-for-profit critical care transport program, one of the key values our team members practice is education," said Clinton Burley, president and CEO of HealthNet Aeromedical Services. "Through this aircraft the message of ATV safety will be more prominent than before."

ICD-10 coming Oct. 1, 2015

CAMC is preparing for the transition to ICD-10, the new coding standard, on Oct. 1. The change in ICD-10 is occurring because ICD-9 has been in use for more than 30 years and is outdated. It is limited in its expansion and ability to add new codes, doesn’t reflect current medical knowledge and is not considered applicable to today’s health care processes.

ICD-10 coding is more specific and can provide greater detail about a patient’s diagnosis. It reflects current medical terminology and can be further developed to include new terms and diagnoses. ICD-10 will also allow for better analysis of disease patterns and treatment outcomes that can advance medical care. ICD-10 will be required for Medicare and Medicaid claim submission and reimbursement.

Getting ready for ICD-10

All CAMC departments will be provided with a single point lesson about ICD-10. Employees in registration, central scheduling, patient accounts and medical records will begin to see changes in their applications as early as Aug. 10. These areas and others will be required to take an additional intermediate training that is currently under development. This departmental training will be available in EDUTrack in July. Coding and medical records staff will continue to undergo training and practice coding. For any questions about training, contact Ebnetta Rhinehart at (304) 388-7980 or Teresa Vandal at (304) 388-1165.

All physicians must complete introductory training, and specialty training is available and highly encouraged. If you are a physician requiring access to the ICD-10 training content, contact the Help Desk at (304) 388-4357 and an account will be created for you. Anyone who is interested in receiving this training to assist physicians can also contact the Help Desk.

If your department uses any forms with ICD-9 codes, those forms will need to be replaced or eliminated. If you have a question about a form, contact Tammy Iden at (304) 388-9457 or Kathy Reid at (304) 388-1354 for further instructions.

Myths and facts about ICD-10

Myth: ICD-10 may be granted an extension by the Department of Health and Human Services (HHS).

Fact: All HIPAA-covered entities must implement the new code sets with dates of service, or date of discharge for inpatients, that occur on or after Oct. 1, 2015. HHS has no plans to extend the compliance date of ICD-10.

Myth: ICD-10 was developed without clinical input.

Fact: The development of ICD-10 involved significant clinical input. A number of medical specialty societies contributed to the development of the coding systems.

Myth: Unnecessarily detailed medical record documentation will be required when ICD-10 is implemented.

Fact:Patients should be maintained after ICD-10 is implemented, it is in non-covered entities’ best interests to use the new coding system. The increased detail in ICD-10 will be of significant value to non-covered entities.

Myth: ICD-10 was developed without clinical input.

Fact: The development of ICD-10 involved significant clinical input. A number of medical specialty societies contributed to the development of the coding systems.


Fact: ICD-10 will only be used for facility reporting of hospital inpatient procedures and will not affect the use of CPT.

Source: Centers for Medicare and Medicaid Services

For general questions about the ICD-10 implementation at CAMC, contact Julia Givens, program manager, at (304) 388-7305.

Mobile service change

CAMC is in the process of switching mobile service from AT&T to Verizon.

CAMC will exchange an existing mobile device with a modern equivalent for employees who have been issued corporate devices.

More information regarding exchange dates and locations will be communicated by CAMnet and infoServe.

Employees who currently receive a discount for family plans via the CAMC Pride Card program and other methods will not see a change. Once the transition is complete, Verizon will offer a similar discount to employees for their personal use.

WELCOME NEW PHYSICIAN

Stephanus J. Serfontein, MD joins the department of medicine as a hospitalist. Dr. Serfontein received his medical degree from the Faculty of Medicine at University of Pretoria in South Africa. He completed a cardiothoracic residency at University of Witwatersrand and an internal medicine residency at CAMC. Dr. Serfontein is certified by the American Board of Internal Medicine.
Ministers dedicate new chapel

A hospital stay can be tough on family members as well as patients. The chapel can be a place of solitude for visitors to get away from the stress of making health care decisions and trying to support loved ones.

CAMC Teays Valley Hospital recently made some renovations and moved its chapel. Instead of a busy hallway with a lot of foot traffic and distractions, it’s now located between the telemetry unit and new ICU.

Ministers from the Teays Valley Ministerial Association dedicated the new chapel with prayers of praise, faith, love and peace during a ceremony.

“The chapel can be a place of solitude for visitors to get away from the stress of making health care decisions and trying to support loved ones.”

The person who nominated this group says he’s witnessed their commitment to major events, the foundation and its donors and the people we serve.

They’ve also been known to drive several hours round trip to pick up donated Christmas gifts for pediatric patients, as well as load and unload countless materials for the Golf Classic, Run for Your Life, Teddy Bear Fair and HealthFest.

From special events to routine jobs, these guys really put their heart and soul into their work.

Congratulations to the other employees who were nominated in May: Sara Beth, Mary Cook, Chris Cox, Rhonda Evans, Brittny Fisher, Chris Johnson, Dr. Miguel Matos, Lisa Miller, Joan Mills, Darlene Ross.

The “dragon” drew top dollar to help fund projects at Women and Children’s Hospital.

Born with cleft lip and palate, teen queen inspires

Kacie Strother is one in 700 – one of the 700 children born every year with cleft lip and/or palate. Although it’s the most common birth defect in America, there’s nothing common about how cleft changes the young lives of those affected by it.

Bullying, withdrawal, embarrassment, low self-esteem, anxiety – the emotional scars of cleft are far deeper than the physical. Kacie knows that all too well, which isn’t evident at first glance.

As Miss Northern West Virginia’s Outstanding Teen, she is the picture of confidence, beauty and poise. But the 17-year-old from Hampshire County drove five hours just to visit children and teens at CAMC’s Cleft Center because she knows firsthand the struggles they face – and she wants to help.

Strother was born with a cleft lip, which was repaired with surgery when she was 12 weeks old. But the resulting scar has haunted her throughout her childhood and teenage years.

“I will never forget my first kindergarten ‘show and tell’,” Strother said. “All of my friends brought their favorite toys to show off, but I took a picture of myself as a baby to explain why I had a scar on my face. We were just days into the school year, but I was tired of everyone pointing, laughing or asking, ‘what’s wrong with your face?’

Flash forward to middle school, where the teasing and taunting became almost unbearable and drove Strother into depression. The turning point came when she met someone like her who was born with cleft.

“It’s so important for children to know that there are other children just like them with this particular ‘badge of honor,’ as we sometimes call it,” said Bruce Horswell, MD, DDS, MS, FACS, director of the CAMC Cleft Center. “They know they have it, they know it’s life-long. But when you can share your concerns and fears, even if they aren’t totally answered or predictable, and to know that you’re not alone, makes all the difference. To help with this stigma, we now refer to this ‘defect’ as a facial difference.”

Cleft lip and palate are birth defects that happen while a baby is developing in the uterus. Early in pregnancy, the tissues of a baby’s developing lip, upper jaw and nose normally come together, but for a variety of reasons (some known but most are spontaneous), this doesn’t occur. A defect in the lip, upper jaw and palate results, which is called a cleft.

Strother’s parents knew nothing about clefts until Kacie was born. They handed her to me and said, “Oh, she has a cleft,” recalls Kacie’s mother, Dorinda. “I said ‘what’s that?’ I had no clue. We knew nothing about it. I had never heard of cleft, and I didn’t know what to expect.”

Today, cleft lip and palate is often detected via ultrasound before babies are born, which allows parents and physicians to prepare for their medical needs in advance. This service is offered at the Cleft Center at CAMC.

Strother’s cleft lip required one surgery and several phases of dental work during her childhood.

“Children born with both cleft lip and palate generally have several staged surgeries through the developing years,” Horswell said.

Because cleft lip and palate often affects a child’s speech, hearing, jaws, teeth and overall facial development, the cleft team at CAMC is comprised of multiple specialists, including maxillofacial surgeons, neurosurgeons, ENT physicians, pediatric dentists, orthodontists, geneticians, speech pathologists, pediatric dietitians and social workers.

This team approach to care from birth throughout a child’s developing years, combined with meeting stringent national criteria, is why CAMC’s Cleft Center is the only cleft/craniofacial program in West Virginia accredited by the American Cleft Palate-Craniofacial Association, placing it among the major institutions in America that meet the highest standard of care for these conditions.

For more information about the CAMC Cleft Center, visit camc.org/cleft. To contact Strother, visit letsfaceitwithkacie.org.
Award winning

CAMC received a bronze Telly Award for its recent commercial about the compassionate services at Women and Children’s Hospital. This is the 36th year of the Telly Awards, which was created to honor outstanding achievements in video production. Entries are judged by a panel of industry professionals and are judged independently from other entries, meaning the work must stand on its own and meet a high standard of criteria.

Additionally, CAMC won a silver award in the 32nd Annual Healthcare Advertising Awards for “Employee Communication Program – Power of Change” and a merit award for “Physician Referral Imaging Services Referral Folder.”

MILESTONES

Derek Ellison has been selected as director of cardiac rehab replacing Ed Haver who is retiring after 24 years with CAMC. Ellison obtained a master’s degree in exercise science/cardiac rehab from Marshall University in 2000 and has been an exercise physiologist in cardiac rehab since May of that year.

Urgent Care Holiday closing and hours

CAMC Urgent Care Southridge will be closed July 4.
CAMC Urgent Care Cross Lanes will be open from 9 a.m. to 5 p.m.

Free sports physicals

CAMC Teays Valley Hospital Physical Therapy provided free sports physicals to 141 middle and high school athletes June 13.