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Bacchieri Family $1 million gift to propel head and neck cancer care and research

Life-saving cancer treatment at Helen F. Graham Cancer Center & Research Institute inspires patient to give back in support of next-generation care.
The Bacchieri Family Fund has given Christiana Care Health System $1 million for head and neck cancer care and research. The gift to the Helen F. Graham Cancer Center & Research Institute's Head and Neck Cancer Multidisciplinary Center (MDC) will support clinical care delivery and clinical trials for cancers of the head and neck.

Donors Gregg Bacchieri and his wife Stacey, of Kennett Square, Pennsylvania, are longtime Christiana Care supporters. Three years ago, Mr. Bacchieri was diagnosed with throat cancer at the Graham Cancer Center. He received lifesaving treatment in the care of Adam Raben, M.D., chair of Radiation Oncology, surgeon Neil G. Hockstein, M.D., of Otolaryngology-Head and Neck Surgery, and medical oncologist Charles J. Schneider, M.D., FACP.

"Dr. Raben and the team are outstanding. I’ve received excellent care and attention from the moment I was diagnosed," said Mr. Bacchieri, a retired senior MBNA executive. “Stacey and I wanted to show our family’s gratitude to the health system and hope this gift will springboard future philanthropic investments in important research.”

Nationwide, according to the National Cancer Institute, cancers of the head and neck account for approximately 3 percent of all cancers. They are nearly twice as common among men as among women. An alarming rise in rates of oropharynx — mouth and throat — cancer related to human papillomavirus (HPV) is driving urgency for research into new clinical protocols and treatments.

"Across the country, we’re experiencing epidemic-like incidences of HPV-driven oropharynx cancer in non-smoking men ages 35 to 55,” said Dr. Raben. "The pattern is mirrored in Christiana Care’s patient population."

The Bacchieri donation marks the first major gift to Christiana Care specifically for head and neck cancer.

“Research is a cornerstone in the value and partnership that Christiana Care provides the people we serve,” said Nicholas J. Petrelli, M.D., FACS, Bank of America endowed medical director of the Graham Cancer Center. “Gregg and Stacey’s generous support will help us to pursue promising curative therapies by moving innovative approaches from the lab to the clinic.”

The nationally recognized Head and Neck Cancer Multidisciplinary Center sees more than 90 percent of new head and neck cancer cases in Delaware. The multidisciplinary center model brings together clinicians and researchers from different specialties to create targeted treatment plans for each patient. As part of the Graham Cancer Center, a National Cancer Institute Community Oncology Research Program, which brings cancer clinical trials and care delivery research to patients in their own communities, the Head and Neck Multidisciplinary Center offers access to state-of-the-art clinical studies for early- and advanced-stage cancer.

"Gregg and Stacey’s visionary support will enable the Head and Neck Multidisciplinary Center to expand the Graham Cancer Center’s already robust pharmaceutical trials program into new realms, including genomic testing and targeted therapeutics for head and neck cancer," said Dr. Schneider.

Drs. Raben, Hockstein and Schneider developed the Head and Neck Multidisciplinary Center. They closely collaborate on care and research that cuts across radiation, oncology and surgery. The gift will help them drive two of the center’s immediate goals.

“First, we want to improve inpatient and outpatient clinical care delivery and understand how our multidisciplinary model provides value to patients and the health system,” Dr. Raben said. "Second, we want to participate in or initiate Phase I or Phase II clinical trials that look at ways to provide the most effective and least toxic therapies for people with head and neck cancer, particularly when it’s associated with HPV. This gift provides the seed money to build on our existing infrastructure by allowing us to hire research staff and implement new technologies and systems necessary for a world-class program."

An example of the research the Head and Neck Multidisciplinary Center will lead, in collaboration with universities and biopharmaceutical companies, is the program’s upcoming Phase II clinical trial combining immunotherapy and radiation after surgery for patients who have HPV-positive oropharynx cancer.

“This is an unprecedented time for head and neck cancer,” said Dr. Hockstein. "It’s affecting more people at younger ages and getting the attention it deserves. When community members like the Bacchieris partner with researchers to raise awareness about the disease and give funds for research, we can accelerate discoveries and treatments that will help improve quality and length of life for people with head and neck cancer.”

ADAM RABEN, M.D.
A relaxed, balanced, mindful team is a happy team
By Velma P. Scantlebury, M.D., associate chief of the Kidney Transplant Program

At the Kidney Transplant Program, we are focused on helping patients to reclaim their health and lead happy, productive lives.

But we can’t help as many people as we would like because the waiting times for patients who do not have a living donor are growing longer and longer, from six to eight years.

It’s very stressful for our team, because we interact closely with patients and know them and their families personally. They want to know where they are on the list. How long do we think it will be? What is the result of their latest study?

Sometimes we have to deal with someone dying before they get a transplant. Or someone has to be taken off the list because they are too sick for surgery. There can often be more deaths and medical deterioration in our patient population than one would encounter in a typical outpatient care setting.

As respectful, expert, caring partners in health, we need to look for ways to reduce our own stress and increase our mindfulness. Our ability to serve our neighbors depends on ensuring that we are healthy in body and mind.

As I was going to lunch one day, I stopped by a health fair at Christiana Hospital and met Mia Muratori, Christiana Care’s mind-body practitioner. A registered Yoga Alliance instructor, she has meditated in the Ojai Desert with Krishnamurti, in the Lehigh Mountains with the Dalai Lama, and at the Ten Day Silent Vipassana Retreat at the Chesapeake.

At Christiana Care, she works with various groups to teach them restorative practice, a series of gentle movement and meditation techniques. Restorative practice focuses on conscious breathing and concentration to restore the functions of the body to its natural state of harmony and enhance our creativity, sense of well-being and power.

When I was a doctor in training, we weren’t taught about meditation or mindfulness. Now we realize there is connection between the mind and body that impacts many facets of medicine, from healing to physician burnout.

Exploring the mind-body connection reflects The Christiana Care Way and our emphasis on creating innovative, affordable models of care that people value.

We already had been integrating stress-reducing practices into our program, such as going on walks, stretching and work-life balance events. Now we were taking it to the next level.

Mia visited the staff in our program every other week for six one-hour sessions on Wednesday mornings before our scheduled three-hour interdisciplinary meeting.

We gathered in the conference room. Everyone who works in our program was invited to attend. We are all partners in caring for patients and for each other.

Mia put on calming, peaceful background music — the kind of music you might hear during massage therapy or a yoga class. We took off our shoes and prepared to calm our minds.

She taught us breathing techniques and stretching exercises that enhance our mindfulness. She also helped us to develop better posture, because we spend a lot of time at our desks, and poor posture contributes to both the risk of injury and our stress level.

It truly made a difference. After the sessions, we felt more focused. We’re more relaxed now that we have learned these techniques.

Our weekly multidisciplinary meetings seem to be more efficient as we approach the tasks at hand with renewed mental clarity. We get more accomplished in less time.

These new, healthy habits are now part of our routine for a number of colleagues. Team members are often seen stretching or practicing the techniques at their workstations.

A relaxed, balanced and mindful team is a happy team. And people who are happy in their work are able to take better care of patients. After all, that’s why we all are here.

Personally, I try to incorporate 10 minutes of mindfulness into my day. I clear my mind and relax. It gives me that little time out that helps me to be productive. It truly is the pause that refreshes.

As caregivers, we encourage our patients to be partners in their own health. That begins with us being active participants in our own well-being.
The Helen F. Graham Cancer Center & Research Institute at Christiana Care is among the top 25 Alliance for Clinical Trials in Oncology sites for enrolling patients into clinical trials. Researchers across the nation and around the world work to uncover the causes of cancer and devise ways to prevent or treat them. The Alliance for Clinical Trials in Oncology, which comprises nearly 10,000 cancer specialists at 124 hospitals, medical centers and community clinics across the United States and Canada, is one of the leading networks that develops and conducts clinical trials, bringing this research into patient care. Christiana Care’s Helen F. Graham Cancer Center & Research Institute, an Alliance participating research site, ranks 23rd among the Alliance’s 124 sites for enrolling patients into trials. The ranking is based on recently released data on patient participation in trials from 2014 through 2016.

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Christiana Care has a patient participation rate in clinical trials of 21.1 percent, which outperforms the national average of about 3 to 5 percent.

“This phenomenal accomplishment is truly an important one for our cancer patients, who have the opportunity to access the very latest

DID YOU KNOW?
The patient participation rate in clinical trials at Christiana Care is 21.1 percent — outperforming the national average of about 3 to 5 percent.

NICHOLAS J. PETRELLI, M.D.
and most promising cancer treatments nationwide without leaving Delaware,” said Nicholas J. Petrelli, M.D., Bank of America endowed medical director of the Helen F. Graham Cancer Center & Research Institute. “I applaud our physicians and research nurses for their dedication and commitment to improving the lives of our patients, and for taking a leadership role in improving cancer treatment throughout our nation.”

Christiana Care’s cancer research program began in 1987 following the move by the National Cancer Institute (NCI) to expand research beyond the walls of the major research institutions. It has continued to grow. Through a series of reorganizations of the research networks, Christiana Care today is an NCI Community Oncology Research Program (NCORP), as well as a member of the Alliance for Clinical Trials in Oncology, created in 2011 through the merger of several research networks.

“At any one time, Christiana Care has about 110 trials that are available to eligible patients. Our program is robust because of the physician participation. We want to be on the forefront of science.”

KANDIE DEMPSEY, DBA, MS, RN, OCN

In 2015, there were 3,253 new cases of cancer diagnosed at Christiana Care. At the same time, about 690 patients were participating in clinical trials.

“The key to our success is the excellent collaboration between the physicians, the clinical research associates, the nurses, the technicians, our institutional review board...
members and all of those who reach out into the community,” Dempsey said.
“Here are tumor conferences and protocol meetings. Results of studies are shared.
Our research nurses look for eligible patients and talk to them about entering
trials. Results from laboratory studies are shared so that we can help our patients.
Everyone has a voice in what we are doing.”

Dempsey acknowledged NCORP principal investigator Gregory A. Masters, M.D.
In this role, Dr. Masters keeps up with the latest research nationwide and educates
Christiana Care physicians, nurses and research staff about available trials that may
be appropriate for their patients. Dr. Masters also oversees trials at Christiana Care.

“Our program is at the cutting edge and goes above and beyond the national
standard,” Dr. Masters said, adding that the program provides patients with more
opportunities to find the most effective treatments and allows patients to be part of
the overall advancement of cancer care. He explained that the trials often compare
a standard treatment to a new one, or compare combinations of treatments with
one another.

Dr. Masters is one of 40 members serving on the Alliance’s board of directors,
which gives him a bird’s eye view of what is happening in research at the national
level and the ability to affect its direction.

“We meet several times a year to share our findings and decide on the development
of new research,” he said. “This also increases the portfolio of trials available at
Christiana Care and gives our patients earlier access to new treatments.”

“This phenomenal accomplishment is truly an important one for our
cancer patients, who have the opportunity to access the very
latest and most promising
cancer treatments nationwide
without leaving Delaware.”

NICHOLAS J. PETRELLI, M.D.
For its enormous potential to accelerate the development of personalized cancer therapies, the Gene Editing Institute of Christiana Care Health System’s Helen F. Graham Cancer Center & Research Institute has been awarded a grant of $900,000 from the U.S.-Israel Binational Industrial Research and Development (BIRD) Foundation in partnership with the biotechnology company NovellusDx.

The BIRD Foundation promotes collaboration between U.S. and Israeli companies in a wide range of technology fields for the purpose of joint product development. Projects submitted to the BIRD Foundation undergo evaluation by the U.S. National Institute of Standards and Technology of the U.S. Department of Commerce and by the Israel Innovation Authority.

The grant allows the Gene Editing Institute to partner with Jerusalem-based NovellusDx on a new series of state-of-the-art gene editing technologies that help identify the genetic mechanism responsible for both the onset and progression of many types of cancer. The two organizations are collaborating on a licensing agreement to commercialize the gene editing technologies that result from the research.

“Thanks to this generous BIRD Foundation grant, this partnership promises to be a catalyst that will speed progress in personalized medicine for many forms of cancer, accelerating the path to prevention, diagnosis, treatment, and ultimately, to a cure of cancer,” said Nicholas J. Petrelli, M.D., the Bank of America endowed medical director of the Helen F. Graham Cancer Center & Research Institute.

“With our joint research, we hope to develop gene editing technologies that help develop effective, safe medications and doses that can be tailored to a person’s genetic profile. This will lead to precision and personalized cancer therapy at its very best.”

ERIK KMIEC, PH.D.
“We are honored to partner with the exceptional team at NovellusDx to advance genomic cancer research and to discover new gene editing techniques,” said Eric Kmiec, Ph.D., director of the Gene Editing Institute. "Our partnership is not only based on the skills of both organizations, but on the unique opportunity to license our gene editing technology with a company capable of commercializing it. The due diligence and peer review process for this award are extensive. I’m enormously grateful to the Research Institute at the Philadelphia-Israeli Chamber of Commerce for its invaluable support of our application.”

NovellusDx has established a unique approach to identify unknown “driver” gene mutations that often accelerate or facilitate cancer progression. With clinical partners throughout the world, including at MD Anderson Cancer Center and Massachusetts General Hospital in the U.S., NovellusDx obtains DNA sequence information and creates a personal profile of the genetic mutations from individual patients. The Gene Editing Institute will use its expertise in gene editing to re-create these mutations that allows NovellusDx and its partners to identify, design and implement the most effective therapy for each patient.

Cancer genomics plays a critical role in pharmacogenomics, or the study of how genes impact a patient’s response to drugs. “With our joint research, we hope to develop gene editing technologies that help develop effective, safe medications and doses that can be tailored to a person’s genetic profile,” Dr. Kmiec said. “This will lead to precision and personalized cancer therapy at its very best.”

“We have been working closely with Dr. Kmiec and the Gene Editing Institute for the last nine months to generate preliminary data to support this groundbreaking idea and grant application,” said Haim Gil-Ad, CEO of NovellusDx. “We are excited that the BIRD Foundation with its stringent review process found our application worthy of the generous funding, which also provides external validation. This work has the potential to change the way functional genomics is done. Once the genetic makeup is known, we will be immediately able to test and monitor the effect of the patient mutations in live cells.”

The BIRD Foundation grant recognizes the Gene Editing Institute’s pioneering work to advance gene editing toward clinical applications in cancer research. The Gene Editing Institute is partnering with The Wistar Institute to develop translational genetic approaches to melanoma cancer research, and with Bio-Rad Inc. to advance a gene editing educational curriculum. In addition, with funding from the U.S. National Institutes of Health, the Gene Editing Institute is developing a gene editing strategy for the treatment of sickle cell anemia.

“...This partnership promises to be a catalyst that will speed progress in personalized medicine for many forms of cancer, accelerating the path to prevention, diagnosis, treatment, and ultimately, to a cure of cancer.”

NICHOLAS J. PETRELLI, M.D.

Christiana Care nurse’s quick action to save stranger’s life receives national acclaim

Amy Smythe, MSN, RN, who works in the 4E Cardiovascular Unit at Christiana Hospital, was highlighted by national and local news media after she helped save the life of a fellow runner during the Key West Half Marathon on Jan. 15.

Colorado resident Bill Amirault, the runner whose life she saved, posted a plea on Facebook, asking the public to help him find the people, including Smythe, who saved his life.

Amirault’s post received more than 1 million views, and he and Smythe were eventually reunited via Facebook. Their story was highlighted by CNN, ABC World News, NBC10, 6ABC, The News Journal and many other media outlets.
Christiana Care partners with U.S. Sen. Chris Coons, hosts forum on success of the Affordable Care Act in Delaware

Today in Delaware, a chronically ill senior with poor mobility can get comprehensive health care without leaving his living room, thanks to Christiana Care’s Independence at Home Demonstration Project.

A heart patient released from the hospital can get a reminder call from her Care Link team if she has forgotten to make a follow-up appointment with her cardiologist.

And through a $35 million grant from the Center for Medicare & Medicaid Innovation, the state of Delaware has been working to improve wellness among its citizens to make Delaware one of the nation’s five healthiest states.

All of these projects foster innovation, enhance the patient experience and improve the quality of care while reducing costs. And all are fruits of the Affordable Care Act, which was the topic of a panel discussion Jan. 30 at Christiana Care’s Wilmington Hospital. The discussion was held to review the success of the landmark legislation and talk about why the law’s progressive achievements need to be preserved.

Christiana Care President and CEO Janice E. Nevin, M.D., MPH, partnered with U.S. Sen. Chris Coons in bringing together a health care panel to talk about the 2010 law because of concern over what might replace the Affordable Care Act in the 2017 Congress.

Numbers reveal part of the law’s success in Delaware. Before the Affordable Care Act, 101,000 people were uninsured in Delaware — 11.2 percent of the population. By 2015 the state had the ninth lowest uninsured rate in the nation, at 5.9 percent, or 54,000 residents, without coverage.

“We have had the great privilege at Christiana Care of seeing the impact of the Affordable Care Act firsthand,” said Dr. Nevin, who expressed an appreciation for what the law has accomplished in terms of innovations in health care delivery and better monitoring of chronic disorders such as diabetes and high blood pressure.


CONTINUED
Townsend and Rep. David Bentz. With an 11-person panel, there was a variety of perspectives on the law’s achievements.

Stephen Groff, the state director of the Division of Medicaid and Medical Assistance, said that about 28,000 individuals annually have bought coverage through the Health Insurance Marketplace. On average, these individuals have received a $419 monthly tax credit.

“The most recent Medicaid expansion has provided 11,000 individuals with health insurance, which is in addition to more than 40,000 residents covered in an initial state Medicaid expansion. Furthermore, the repeal of the Affordable Care Act could result in the loss of $120 million in annual federal funding that comes to the state for enhanced health care delivery,” said Groff.

“I think we should not miss that this legislation made it possible for more people to access health care, and for there to be enormous improvements to the entire health care system for all Delawareans,” said Sen. Coons.

Other panelists expressed anxiety about the prospect of losing gains made in health care delivery under the law. Kristen Issac, a marketplace guide, and Lolita Lopez, executive director of Westside Family Healthcare, explained how thousands of low-income residents have newly received health care at the nation’s 1,400 community health centers.

“Repeal of the law without adequate replacement would have a devastating impact on underserved communities,” said Lopez.

Roy Proujansky, M.D., executive vice president and CEO, Nemours Delaware Valley Operations, said any abrupt changes in the law would be bad for pediatric patients who thrive with a consistency in care.

Prayus Tailor, M.D., president of the Medical Society of Delaware and program director for Christiana Care’s Nephrology Fellowship Program, said physicians affiliated with the Medical Society of Delaware have drafted key objectives for health care, if American medicine is to retain the achievements made under the Affordable Care Act. Overall objectives include assuring that individuals now covered do not become uninsured and maintaining key insurance market reforms, such as coverage for pre-existing conditions and coverage for young adults on their parents’ policies.

Perhaps the most memorable comments from the day came from Christiana Care patient Kerry Orr, who spoke movingly about how the Affordable Care Act saved her life. A single, self-employed therapist and yoga teacher who lives in the Wilmington area, Orr spoke of choosing a lifestyle that offered creativity and freedom, as well a chance to make a difference in the lives of others by helping them achieve a sense of wellness. Her commitment to this work suited her but did not provide large financial rewards, such as a paid vacation or sick time or sufficient income to purchase health insurance.

When the health insurance law was enacted, she was skeptical that it would provide any real assistance to her. In any case, she continued to eat well and exercise to stay healthy. Because of the individual mandate, she bought health insurance for the first time in May 2014 with the help of a subsidy.
The following year, her primary care doctor suggested a colonoscopy in response to symptoms she was reporting, and at age 47, the screening found a massive tumor.

Her friends and family were shocked and worried at learning she had Stage 3 cancer. But she felt a bit differently.

“I was so relieved I had health insurance that my gratitude outweighed my fear,” said Orr. “I felt so fortunate.”

Orr praised the surgery and follow-up chemotherapy she received at Christiana Care and the Helen F. Graham Cancer Center & Research Institute.

“The Affordable Care Act literally saved my life,” she said. Without the individual mandate she would not have bought a policy, and without a subsidy she could never have afforded insurance. “And without coverage for a preventive colonoscopy I would have been dead,” she said.

The Affordable Care Act has not just been a boon for patients, but has funded many new innovative programs, transforming the way that Christiana Care delivers health care, said Dr. Nevin. For instance, Christiana Care was one of 16 health care providers nationwide originally selected to participate in a forward-thinking home-care program for chronically ill seniors.

Called the Independence at Home Demonstration Project, this Centers for Medicare and Medicaid Services program, created through legislation co-authored by Sen. Carper within the Affordable Care Act, tests whether delivering primary care services in the home can lead to better health outcomes and reduce costs for patients living with multiple chronic illnesses.

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Christiana Care’s nationally renowned care-management program known as Care Link was birthed through the “Bridging the Divides” project, which was funded through $10 million from the Center for Medicare and Medicaid Innovation. The program includes a comprehensive care team that responds quickly and effectively to patients, enabling them to recuperate in their homes and manage their symptoms to avoid unnecessary hospital readmissions.

To support the new care model, Christiana Care designed an electronic patient portal and personal health record that enables individuals to communicate directly with their care-management team.

In 2011 Christiana Care created the Value Institute to conduct real-world research on pressing Delaware health care needs. Members of the Value Institute have a wide-range of expertise — in medicine, public health, law, business, economics, statistics and informatics — and collaborate in the discovery of solutions that improve the experience, efficiency and effectiveness of health care for patients and providers alike.

Will such sweeping medical improvements continue if the Affordable Care Act is repealed and not replaced? That was a question panelists addressed throughout the morning, but regardless of what happens with law, Christiana Care is committed to creating innovative, effective and affordable systems of care that Delawareans value, said Dr. Nevin.

“I am an optimist. I often say that the bigger the challenge, the bigger the opportunity. To turn our challenges into opportunities, we will partner with our leaders in Washington, leaders in our state and with all of you so that we can continue to advance quality health care. At Christiana Care, we have been an integral part of this community for 100 years, and we will be here for 100 more and beyond.”

JANICE E. NEVIN, M.D., MPH
Dave McFadden knew it was time to see his doctor when he became winded just walking up a flight of stairs. “I couldn’t do anything without becoming short of breath,” said McFadden, 59, of Wilmington. An avid sailor who led an active life, he had been diagnosed with colon cancer two years ago but had never had a problem with his lungs. He didn’t know that his left lung was collapsing, and time was of the essence in order to save it.

Fortunately, his oncologist, Pamela S. Simpson, M.D., suspected just what was going on. She also knew that Christiana Care is the only health system from Philadelphia to Baltimore to offer the specialty service that would enable him to quickly regain his quality of life.

She referred McFadden to Haroon M. Raja, M.D., medical director of Bronchoscopy for Christiana Care. He and Ismael A. Matus, M.D., FCCP, director of Interventional Pulmonology, provide care in a new field of pulmonary medicine that employs minimally invasive procedures to diagnose, treat and alleviate symptoms for patients with a variety of lung diseases.

Drs. Raja and Matus conducted a bronchoscopy to examine McFadden’s airway and detected a tumor that had metastasized from his colon cancer. The mass was blocking his left airway, causing his shortness of breath and endangering his lung. At a second appointment, McFadden underwent general anesthesia, and the two physicians removed the tumor. McFadden went home the same day.

“I felt fine afterward, and within 24 hours my breathing got a whole lot better,” McFadden said. “I felt like myself again.”

He was especially thankful when he learned that waiting a few weeks longer might have been detrimental. “Dr. Raja and Dr. Matus did a great job,” he said. “They were very patient-oriented and explained everything very well before the procedure.”

Dr. Raja said that McFadden’s case demonstrates how interventional pulmonology is improving the lives and outcomes for people with such conditions as pulmonary nodules, lung cancer, cancer of the airways, benign airways disease, pleural disease and complicated asthma.

“He came in with a tumor in the main airway leading to his left lung. In the past it would be unlikely that he would’ve had options, and his left lung would be lost. We were able to rescue his entire left lung from impending total collapse by resecting his airway tumor,” Dr. Raja said.

Not only is Christiana Care’s Interventional Pulmonology Program the first in the state, it is the only one in the region that offers novel minimally invasive diagnostic and therapeutic procedures.

“We manage cancers of the airways, lungs and pleura through our multidisciplinary collaboration with other specialties,” Dr. Raja said.

To do so, the interventional pulmonology specialists work closely with thoracic surgeons, medical oncologists and radiation oncologists to offer best diagnostic and treatment plans and deliver best-possible outcomes and positive patient experiences.

The minimally invasive procedures may add years to patients’ active lives and, by doing so, may reduce the cost of treating lung disease.

Located on the Christiana Hospital campus in Newark, interventional pulmonologists offer advanced diagnostic bronchoscopy for patients with abnormal imaging findings as well as therapeutic bronchoscopy and medical thoracoscopy for complex airways disease and pleural diseases, respectively.

The field improves patient outcomes on a number of fronts, Dr. Matus said. From a diagnostic standpoint it provides a more minimally invasive approach to other traditional invasive testing in both diagnosing and determining the stage of malignancies. From a therapeutic perspective, interventional pulmonology offers treatment options that can provide safe and immediate symptomatic relief, which improves patients’ quality of life and functional status, allowing them to be considered candidates for more definitive treatments such as chemotherapy and radiation therapy.

“Most procedures are performed on an outpatient basis, and they are better tolerated by our patients,” Dr. Matus said. “So, we are talking improved quality of life for most patients and potentially prolonging survival for some.”

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Lecture focuses on intersection of medicine and dentistry

Maxillofacial prosthodontist Jeffrey M. Rodney, D.M.D., of the Department of Oral and Maxillofacial Surgery & Hospital Dentistry faculty, was the speaker on Jan. 19 at the annual Frank M. and Robert R. Hoopes Medical-Dental Lecture at the John H. Ammon Medical Education Center.

The lectureship brings medicine and dentistry together to advance optimal care for patients. Dr. Rodney’s lecture was on “The World of Maxillofacial Prosthetics” and addressed caring for patients disfigured by cancer and trauma.

“I am honored to have been invited to speak at the annual Hoopes lecture about my subspecialty, which is not widely known in the health care community,” said Dr. Rodney. “Maxillofacial prosthetics provides a unique service that offers quality-of-life improvement to patients who have undergone head and neck surgery or were born with congenital intraoral or extraoral deformities. We strive to enable our patients to return to their lives with confidence about their appearance, speech and ability to swallow. There are fewer than 300 active maxillofacial prosthodontists in the United States.”

The lecture was co-sponsored by the Delaware Academy of Medicine and the Delaware State Dental Society and is underwritten by the Hoopes Family.

“Robert R. Hoopes and his father, Frank M. Hoopes, were passionate about the intersection of dentistry and medicine, and were far ahead of their time in supporting education that bridged the disciplines,” said Timothy E. Gibbs, MPH, executive director of the Delaware Academy of Medicine and the Delaware Public Health Association.

Daniel J. Meara, M.D., D.M.D., President of the Delaware Academy of Medicine and Chair of Christiana Care’s Department of Oral and Maxillofacial Surgery & Hospital Dentistry, said that Dr. Rodney’s work embodies the vision for the annual lectureship, as he provides care for patients by coupling dental and medical concepts into the restoration of form and function.

“The ultimate value is the ability for such patients to re-enter society without the stigma of significant oral-facial defects,” Dr. Meara said. “Delaware is fortunate to have Dr. Rodney as a resource for patients in need.”

Behavioral health support helps patients and families in the ICU

S pending time in the Medical Intensive Care Unit (MICU) is often traumatic for patients and their families. Patients are critically ill or have suffered serious injuries. They may depend on a ventilator to breathe. Their loved ones may be faced with difficult life-and-death decisions.

An innovative new pilot program is providing welcomed support to these patients and families — connecting them directly with a behavioral health consultant embedded in the Medical Intensive Care Unit. The program is called Psychological Support for Intensive Care Unit and Pulmonary Patients and Families — or PIC UP.

“The acronym refers to the fact that we want to help patients and families pick up and move on from their ICU stay so they can start living their lives again,” said Christa Fistler, M.D., the pulmonary intensivist who came up with the idea after witnessing the struggles of patients and families during hospitalization.

Each afternoon, Monday through Friday, Michele Cavanaugh, APN, the behavioral health consultant for the MICU, huddles with attending physicians on the unit and reaches out to patients or families who might benefit from her support.

“She helps patients cope with the anxiety that often accompanies breathlessness. She uses techniques such as guided imagery to help anxious patients. She may use motivational interviewing to assist patients in changing their behaviors to promote health. She uses active listening to learn more about issues that concern patients and their families.”

“I use myself as a guide. What would I be thinking or feeling the need to know if I were in their position?” she said. She sometimes recommends specific tasks to family members who might be struggling to manage a stressful, emotional situation. For example, she might recommend calling the family pastor to join at the bedside, or she might recommend that family members take turns in the hospital so that others can go home to get some sleep. She also educates the nursing staff on the behaviors of patients and families under stress so they can provide more effective, compassionate care.

ICU patients can suffer from something called Post-ICU Syndrome, Dr. Fistler said. Anxiety, post-traumatic stress disorder or depression can sometimes follow a critical illness, affecting individuals or families. “In general, evolving medical literature shows that behavioral health issues can be associated with higher readmission rates and longer lengths of stay,” Dr. Fistler said.

The PIC UP program is in line with widespread efforts throughout Christiana Care to embed behavioral health services and consultants into primary care and other practices, including cancer care, cardiology and neurology.

“Integration affords rapid access to behavioral health experts as well as destigmatizing assistance for emotional concerns,” said Alan Schwartz, Psy.D., director of Behavioral Health Integration.

The pilot is a collaboration between the Acute Medicine and Behavioral Health service lines. The team also collaborates with Palliative Care and Project Engage, a program that engages patients with substance-abuse issues while they are still in the hospital. Dr. Fistler received support from key leaders who helped her to bring the program to fruition, including Michael Benninghoff, D.O., medical director of the MICU, Linda Lang, M.D., physician leader of the Behavioral Health Service Line, associate physician leader and Chief of Addiction Medicine Terry Horton, M.D., and Vinay Maheshwari, M.D., vice chair of the Department of Medicine and associate physician operations leader of the Acute Medicine Service Line.

PIC UP was rolled out in late July. Preliminary feedback from patients, families and staff has been positive. More than 50 percent of the staff surveyed felt their work days were less stressful when a behavioral health clinician was involved in a case.

“There’s a difference between surviving and living,” Dr. Fistler said. “When patients and loved ones receive the behavioral health support they need to resume living, it benefits everyone — patients, families, medical staff, the health care system and society as a whole.”
Addressing weight management from every angle

Obesity is a serious disease that has grown so rapidly, it has changed the medical landscape in less than a generation, and it is causing health costs to rapidly rise,” said Michael Peters Jr., M.D., FACS, FASMBS, medical director of Bariatric Surgery at Christiana Care Health System.

To tackle this complex health challenge, Christiana Care has developed a full spectrum of weight management services for children, adolescents and adults. These include dietary consultations with physicians and dieticians, programs targeting lifestyle and food choices that develop healthy habits, pharmacological regimes that can boost the effectiveness of lifestyle changes, and bariatric surgery, which can reduce weight by 30 percent.

“It is valuable to look at obesity from different angles, because there are many misconceptions,” Dr. Peters said. “For one thing, obesity is not a disease of sloth or overconsumption, but a multifaceted illness. It has genetic, environmental and public health components, and is almost infectious in its presentation, affecting 17 percent of American youth and close to 36 percent of adults.”

In keeping with its commitment to advancing health issues of vital importance to the community, Christiana Care held a daylong summit on the causes, treatment and prevention of obesity, Oct. 7. The Bariatric Summit 2016: Cradle to Cure drew more than 200 health providers and covered the impact of weight bias, medications, obesity in pregnancy and pediatric medicine, new therapies and surgical options, as well as the management of the post-bariatric surgery patient, especially post-surgical hypoglycemia. Four of the presentations were given by Christiana Care providers. Dr. Peters chaired the summit in addition to a meeting of the Delaware Chapter of the American Society for Metabolic & Bariatric Surgery (ASMBS) that followed. The non-profit ASMBS is dedicated to metabolic and bariatric surgery, and obesity-related diseases and conditions.

“We know that prevention of obesity and weight management are critical to reduce chronic diseases such as high blood pressure, high cholesterol and diabetes,” said Omar A. Khan, M.D., MHS, FAAFP, service line physician leader of Primary Care & Community Medicine and medical director of Community Health & the Eugene duPont Preventive Medicine & Rehabilitation Institute at Christiana Care. “In addition to our services highlighted in this conference, we partner with colleagues in public health agencies to deliver important messages in communities around healthy eating and active living.”

An example is Camp FRESH, an eight-week summer camp that encourages teens from low-income families to plan and prepare healthy meals, experience fun, healthy activities such as gardening and yoga, and learn about the health consequences of smoking, drugs and excessive stress. “These are high school students who become ambassadors in their communities for healthy lifestyles and achieve better health themselves,” Dr. Khan said.

In the keynote address at the Bariatric Summit, Amber Huett-Garcia, MPA, vice-chairman of the Obesity Action Coalition, a non-profit advocacy organization, spoke about weight bias, which she views as the last “socially acceptable form of discrimination.” Because of the bias, patients often delay seeking help, and providers may be reluctant to address weight issues, resulting in fewer successful medical appointments.

Presenters at the summit highlighted Christiana Care’s multidisciplinary approach to weight management, including experts in surgical, medical and nutritional aspects of obesity.
James Lenhard, M.D., FACE, FACP, chief of Endocrinology and Metabolism, director of the Center for Diabetes & Metabolic Diseases and medical director of the Weight Management Center at Christiana Care, offered an overview of medications and Delaware obesity data. During the last decade Delaware has been in the top third of states for obesity, and 30.7 percent of Delawareans age 18 and older, suffered from the disease in 2014.

Dr. Lenhard said the U.S. National Institutes of Health guidelines for treating obesity recommend patient assessment that includes the motivation for change, advising patients on how weight loss can be achieved, assisting patients in reaching their goal and continuing to encourage their efforts. Motivated patients who wish to change their lifestyle and diet typically experience the most benefit from pharmacotherapy as an added treatment.

Gabrielle Marlow, MS, RD, LDN, CDE, nutrition program manager of the Weight Management & Bariatric Surgery Program, talked about the changes in diet that accompany bariatric surgery. A full-size adult stomach has the capacity of a cantaloupe, but after bariatric surgery it has the capacity of an egg, which means meals measure about half a cup. As a result, patients eat multiple small meals a day, monitoring protein intake. They drink water before and after meals — not with meals — with the goal of drinking at least 48 ounces a day.

“Changes in diet can be fairly dramatic, but the body is very adaptive,” Marlow said.

Caitlin A. Halbert, D.O., MS, surgeon at the Christiana Institute of Advanced Surgery, talked about new technologies in bariatrics that are getting attention from providers and potential patients. Among the devices highlighted in her talk were three approaches that have earned U.S. Food and Drug Administration approval. Intragastric balloons involve one or more saline-filled silicone balloons placed in the stomach, limiting how much a patient can eat. The Vbloc Vagus neuromodulator uses an implanted vagal nerve stimulator to block hunger signals to the brain. The AspireAssist Gastric Emptying System allows a patient to use an implanted stomach tube to empty up to 30 percent of a meal.

Endocrinologist Amy B. Wachter, M.D., outlined steps for diagnosis and management of post-bariatric hypoglycemia, telling the story of a 30-year-old female patient who had gastric bypass surgery and lost 100 pounds. Two years later the patient complained of feeling weak, shaky and light-headed after eating. The incidence of such hypoglycemia has been small — in two studies, between 0.20 percent and 0.36 percent of patients who’ve had gastric bypass surgery. Typically, once hypoglycemia is verified, treatment involves changes in diet.

“Fortunately we have strong data for successfully treating this issue with diet,” Dr. Wachter said. Follow-up approaches include the use of medication, the addition of a gastric feeding tube, reversal of the gastric bypass surgery or resection of the pancreas.

Weight-management knowledge is power
Christian Care offers a variety of lectures, classes and community events that help to empower people to take control of their weight. To learn more, visit https://events.christianacare.org/ and select the “weight management” category of upcoming events.

17 percent of young people and close to 36 percent of adults are obese. Camp FRESH teaches teens about healthy lifestyles.
In opening remarks at The Christiana Care Way Awards ceremony, Janice E. Nevin, M.D., MPH, president and CEO of Christiana Care Health System, observed that the annual awards program reflects the innovative work and partnership of Christiana Care’s extraordinary people to achieve our organization’s strategic aims.

“Your projects and these awards recognize that we are always looking for ways to do better in our service to our community,” Dr. Nevin said. “As the extraordinary people of Christiana Care, you demonstrate your commitment and innovation, and it is an honor to acknowledge your work and the difference it makes every day.”

Newly renamed The Christiana Care Way awards, the original program dates back to the Performance Improvement Awards launched in 2002. The program challenges physicians, nurses and staff to identify opportunities for improvement, then collaborate in using the Plan-Do-Check-Act or Lean Six Sigma DMAIC models to develop and execute plans that achieve positive results.

“The quantity and diversity of the submissions have always adjusted to Christiana Care’s annual goals and operating plans, and the constant changes and improvements inspire innovation and cooperation,” said Sharon Anderson, MS, BSN, RN, FACHE, chief population health officer and senior vice president, Quality and Patient Safety.

Of the 145 sets of storyboards submitted for the 2016 contest, 43 winners were announced at the Jan. 17 event. Among the distinguished teams saluted at the event were traditional awards plus relatively new...
The Operational Improvement Gold Award was presented to the project team “Calculating the Results of Wound Packing.”

The Christiana Care Way Presidents Award for 2016 went to “Driving AOP Improvement Through an Interactive Dashboard.”

The People’s Choice Award went to a project team from Heart & Vascular Interventional Services, Non-Invasive Cardiology and Christiana Care Cardiology Consultants.
categories and the ever-popular People’s Choice Award. Here are a few examples of our 2016 winners:

The Christiana Care Way Presidents Award went to “Driving AOP Improvement Through an Interactive Dashboard,” a collaboration to design and build an interactive dashboard that increases transparency, improves access to actionable data to drive progress toward system aims, and creates one source of truth to support patient care unit reporting, pathway reporting and numerous other dashboards and teams.

The People’s Choice Award was awarded to “Decrease Wait Time From Call to New Cardiology Consult,” a project in which team members from Heart & Vascular Interventional Services, Non-Invasive Cardiology and Christiana Care Cardiology Consultants helped to decrease waiting time for patient access from 12.3 days to 4.9 days by standardizing morning office start times and using the Same Day Clinic for any new consult appointment.

Ten Magnet-related awards in three categories, including categories for Transformational Leadership, Exemplary Professional Practice and Structural Empowerment, were presented by Ric Cuming, Ed.D., RN, NEA-BC, FAAN, chief nurse executive. The Transformational Leadership Gold Award winner, “No Cost, Low Maintenance to Reduce LOS for 5B Medicine Observation Status Patients,” decreased length of stay for medical observation status patients by identifying observation patients during rounds and prioritizing orders and tests. As a result, length of stay for 5B patients decreased from 53.8 hours to 37.9 hours, while the percent of patients identified as observation status during patient-centered rounds increased from 31 percent to 77 percent, and the percent of patient tests that are prioritized increased from 34 percent to 89 percent.

During the awards program, Christiana Care also recognized 127 Zero Harm Awards and three Good Catch Award winners for 2016.

The Zero Harm program recognizes the achievement of zero preventable patient harm for 12 consecutive months for any single harm measure, such as C-diff infection, central-line-associated bloodstream and other infections, falls with no major injury, and hospital-acquired pressure ulcers. Zero Harm awards highlight the achievement of high reliability and innovative approaches to enhance patient safety.

Good Catch Awards recognize the prevention of patient harm through vigilance and awareness of the environment that affects patient care. This year’s winners were Lauren Camposano, BSN, CCRN, of the Medical Intensive Care Unit, Carmen Figueroa, PCT, of the Wilmington Hospital ACE Unit, and Courtney Utberg, RN, of the Neuro Critical Care unit.

One of 10 awards related to Christiana Care’s Magnet hospital accreditation goals, the Transformational Leadership Gold Award winner, “No Cost, Low Maintenance to Reduce LOS for 5B Medicine Observation Status Patients,” helped substantially decrease hospital length of stay for patients in a medical unit in observation status.
# The 2016 Christiana Care Way Awards

## People’s Choice Award
“Decrease Wait Time From Call to New Cardiology Consult”

## Residents’ Award
“Allow Me To Debrief: Improving Code Blues Across Christiana”

## Diversity, Inclusion & Cultural Competency Excellence Award
“Reach Out and Feed”

## Population Health Awards
### Silver
“Breast Tomosynthesis Adding Value to Patients at the Breast Center in HFGCC”

### Gold
“Collaborating for CLABSI Prevention in Hematology & Oncology Patients”

## Magnet Transformational Leadership Awards
### Bronze
“2C Unit Acquired Pressure Ulcer Prevention — Next Steps and New Ideas!”

### Silver
“No Cost, Low Maintenance to Reduce LOS for 5B Medicine Observation Status Patients”

## Magnet Exemplary Professional Practice Awards
### Honorable Mention
“Innovative Alarm Redesign Reduces Patient Harm Related to Falls”

### Bronze
“# SIDE EFFECTS”

### Silver
“Achieving Stars by Raising the Bar!”

### Gold
“Improving Barcode Scanning on 4D”

## Magnet New Knowledge, Innovations & Improvement Awards
### Silver
“Sudden Unexpected Postnatal Collapse Syndrome”

### Gold
“Calculating the Results of Wound Packing”

## Magnet Structural Empowerment
### Silver
“Building an Education Empire”

### Gold
“CLABSI Prevention: An Educator’s Approach”

## Innovative Tools Awards
### Silver
“DAZZLE WITH DAZO”

### Gold
“1.8 Billion Brain Cells Saved”

## Extraordinary People Award
“Transforming Nursing Care Delivery”

## Strategic Partnerships Awards
### Silver
“Preparing for Ebola and Other Emerging Infections”

### Gold
“SNF Collaboration to Improve Outcomes”

## Organizational Vitality Award
“Improving the Return on Investment in Robotic Surgery”

## Exceptional Experience Awards
### Silver
“Culture of Quiet: A Team Approach to Quiet Environment”

### Gold
“Time to First Hold: Decreasing Time to Parents’ First Hold of Infants in the NICU”

## Optimal Health Safety Awards
### Silver
“Does It Fit? Improving Physician N95 Fit-testing Compliance”

## Value Award
“Choosing Wisely — Decision Making for Ordering Clinically Appropriate Lab Tests”

## Best Learning Through Failure Award
“Post-op Medication Reconciliation for Surgical Inpatients”

## Transformation Awards
### Silver
“Goals of Care — A Patient-Centered Approach to Treatment”

### Gold
“Sustaining the Gain with Falls”

## President’s Award
“Driving AOP Improvement Through an Interactive Dashboard”

## Operational Improvement Awards
### Honorable Mention
“Preparing for Ebola and Other Emerging Infections”

### Bronze
“Improving Observation Length of Stay (LOS)”

### Silver
“Reduce Lead Time for Christiana Care Vascular Specialty Service Patients”

### Gold
“Calculating the Results of Wound Packing”

## Learning Excellence Awards
### Bronze
“Road to Lung Protection”

### Silver
“Medication History Technicians Invade ED”

## Silver
“OB Hemorrhage — Are You Ready?”

## Gold
“Let’s C-difference in Our Care”

## Optimal Health Quality Awards
### Honorable Mention
“Multidisciplinary Trach Team Decannulation Project”

### Bronze
“In-Hospital Stroke Response Team”

### Silver
“Clinical Care Pathway to Transform NSTEMI Care Delivery in Acute Hospital Setting”

### Gold
“Developing The Joint Replacement Preoperative Assessment Center (JPAC)”

## Magnet Structural Empowerment
“OB Hemorrhage — Are You Ready?”

## Silver
“Let’s C-difference in Our Care”

## Extraordinary People Award
“Transforming Nursing Care Delivery”
Christiana Care Health System’s Surgical Critical Care Complex (SCCC) earned a Silver Beacon Award for Excellence from the American Association of Critical-Care Nurses, recognizing consistently high achievement in quality and safety for the hospital’s most medically vulnerable patients.

The SCCC is Christiana Care’s fourth intensive care unit to earn a Beacon award. Christiana Hospital’s Medical Intensive Care Unit (MICU) and Cardiovascular Critical Care Complex (CVCCC) both hold successive Beacons. The Gold-level MICU is a three-time winner, and CVCCC has recently earned its second consecutive Gold Beacon honor. Wilmington Hospital’s Intensive Care Unit earned a Silver Beacon in 2016.

“We know that families hope they will never require the services of surgical intensive care, but should that day come, the Beacon designation is an added level of assurance that there is excellent critical nursing care in a patient- and family-centered environment to support them through the process.”

RIC CUMING, ED.D., RN, NEA-BC, FAAN

Surgical Critical Care Award for Excellence

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“As the state’s only Level I trauma center, Christiana Care offers a valuable safety net to our community, with all levels of medical, surgical and specialty intensive care to serve our neighbors who become acutely or critically ill,” said Chief Nurse Executive Ric Cuming, Ed.D., RN, NEA-BC, FAAN. “We know that families hope they will never require the services of surgical intensive care, but should that day come, the Beacon designation is an added level of assurance that there is excellent critical nursing care in a patient- and family-centered environment to support them through the process.”

The 20-bed SCCC cares for complex post-surgical patients, patients with traumatic brain injury, spinal cord injuries and penetrating traumatic injuries, and patients with critical conditions including ruptured abdominal aneurysms, septic shock and hemorrhagic shock. The unit’s professional nursing team includes more than 60 registered nurses at the bedside who work closely with the interdisciplinary surgical critical care team. More than 86 percent of SCCC’s nurses hold a bachelor’s degree or higher.

Teamwork, collaboration and a shared commitment to outstanding patient care were the drivers of SCCC’s Beacon success, said Paula Smallwood, MSN, RN, nurse manager. “As a trauma unit, we’re here to save lives, and that takes everybody working together,” she said. “Every member of this extraordinary team strives to provide outstanding care and an exceptional experience for patients and their families while they are here with us,” said Paula Smallwood, MSN, RN, nurse manager (holding award).
team strives to provide outstanding care and an exceptional experience for patients and their families while they are here with us. These nurses go above and beyond to make that happen.”

In evaluating the unit for Beacon, the AACN cited the unit’s comprehensive approach to continual quality improvement for exceeding key performance measures, including infection rates, unit-acquired pressure ulcers, patient falls and patient and family satisfaction.

The SCCC earned Christiana Care’s Zero Harm Award in 2016 for achieving 12 consecutive months without a Methicillin-resistant staphylococcus aureus (MRSA) infection and is recognized for very low central-line-associated bloodstream infection (CLABSI) rates.

AACN also acknowledged the SCCC nurses’ success in addressing the clinical, spiritual and cultural needs of their patients, as well as nurse-driven improvements for effective patient transfer to and from the unit to promote safe, high-quality, patient-centered care.

Through the Beacon Award, AACN not only recognizes excellence in nursing care, but also excellence on the part of the hospital in providing a healthy work environment for the safety and satisfaction of its nurses. SCCC exemplars included the unit’s robust mentoring program to foster a healthy work environment for emerging nurse leaders and a unit-wide commitment and process for maintaining a safe work environment to support staff satisfaction and safety.

“We support our team’s professional development and their important role as caregivers so that we can give our all in service to our patients,” said Kari Mimnaugh, BSN, RN, CCRN, current SCCC nurse manager. “We have a dynamic, dedicated team who understand and value the unique needs of our patients.”

Danielle Weber, MSN, MS, RN-BC, and Valerie Dechant, M.D.

Transitional Neuro Unit opens at Christiana Hospital

Christiana Care’s Neurosciences Service Line, in collaboration with the Surgical Service Line, opened the Transitional Neuro Unit (TNU) on Jan. 30 at Christiana Hospital to care for patients with acuity levels above the traditional stepdown level but less than intensive care. The TNU is on 2B, co-located with the Transitional Surgical Unit (TSU). Initially, three TNU beds are available, with a goal of opening a total of 6 beds before the end of the current fiscal year.

Danielle Weber, MSN, MS, RN-BC, is TNU nurse manager, and Valerie Dechant, M.D., associate physician leader of the Neurosciences Service Line, is the unit medical director.

“The number of patients cared for at Christiana Hospital for severe neurologic illness has grown significantly,” said Dr. Dechant. “The Transitional Neuro Unit facilitates the delivery of expert care by a specialty-trained team with a focus on stabilizing acute illness and moving toward neurologic recovery.”
UPCOMING EVENTS

March 10
DEMENTIA THROUGH THE LIFE CYCLE PRESENTED BY THE SWANK MEMORY CARE CENTER
8 a.m. – noon
John H. Ammon Medical Education Center
This free symposium is appropriate for primary care clinicians, nurses, social workers and other providers and will focus on the importance of treating the memory-impaired patient. Preregistration is required. Register online at: cchs.cloud-cme.com/dementia2017. Contact Cyndy Fanning, cfanning@christianacare.org with questions.

March 11
DIABETES UPDATE
8 a.m. – 4 p.m.
John H. Ammon Medical Education Center
The 21st annual Diabetes Update is a full-day educational opportunity to learn the latest information on diabetes and diabetes-related comorbidities, and to meet identified needs of diabetes clinicians in this area. This year’s Saturday symposium will examine an array of progressive topics to include “Measures of Healthcare Quality,” “The Artificial Pancreas,” and “Hypoglycemia Associated Autonomic Failure,” from some of this country’s foremost leaders in these areas. Content will focus on the management of gestational diabetes, Type 2 diabetes, diabetic neuropathy and motivational interviewing of the patient with diabetes. This course is intended for endocrinologists, ophthalmologists, internal medicine and primary care physicians, as well as nurses and nurse practitioners, scientists, dietitians, physician assistants, and other health care professionals. To register go to https://cchs.cloud-cme.com/Diabetes2017.

March 16
DANCE YOUR HEART OUT!
5 – 8 p.m.
Chase Center on the Riverfront
815 S. Justison St., Wilmington
Check out the health screenings and get valuable information about how everyday activities can help you and your loved ones stay healthy together. Enjoy healthy refreshments. Maybe even win a raffle! Health screenings and information tables begin at 5 p.m. Dance routines for all levels begin at 6 p.m. Register: 800-693-CARE (2273) or events.christianacare.org/womenslectures.

April 12
DONATE LIFE FLAG RAISING CEREMONY
Noon – 1 p.m., Christiana Hospital main entrance
The Christiana Care Kidney Transplant Program and Gift of Life Donor Program will celebrate donors, their families and transplant recipients during National Donate Life Month, and invites anyone interested to join in a flag raising ceremony. Light refreshments to follow in Room 1303 (Christiana Hospital cafeteria). To RSVP call the Transplant Program at 302-623-3866 by April 7.

April 21
NEUROVASCULAR SYMPOSIUM
8 a.m. – 3:30 p.m. (registration begins at 7 a.m.)
John H. Ammon Medical Education Center

SAVE THE DATE
June 26
11TH ANNUAL CONCEPTS IN RESPIRATORY CRITICAL CARE CONFERENCE
7 a.m. – 3 p.m., John H. Ammon Medical Education Center
This conference will provide respiratory care practitioners and other health care professionals continuing education on cutting edge critical care topics. Check this space in April for registration details.
May 15
ACCEL COMMUNITY RESEARCH EXCHANGE
7 a.m. – 4 p.m.
University of Delaware, Clayton Hall Conference Center
Conference features include:
• Invited guest speakers — members of the 2014 Team Science Award winners from the Association for Clinical and Translational Science — including Bowen Chung, M.D., MS, associate professor-in-residence, Department of Psychiatry and Biobehavioral Sciences, Harbor-UCLA Medical Center; and Loretta Jones, MA, founder and CEO of Healthy African-American Families.
• A panel discussion on behavioral health will include local experts Rita M. Landgraf, Department of Health and Social Services/University of Delaware; and Gerard Gallucci, M.D., MHS, Delaware Department of Health and Social Services.
• Five afternoon workshops.
Registration and Call for Abstracts will be available soon. Contact accelceo@de-ctr.org or 302-320-6796 with questions.
Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending.

May 17
87TH ANNUAL MEETING OF THE DELAWARE ACADEMY OF MEDICINE / DELAWARE PUBLIC HEALTH ASSOCIATION
5:30 – 9:30 p.m., Dupont Country Club
Keynote Speaker: Victor Dzau, M.D., President, National Academy of Medicine. For additional information and to register: www.delamed.org/2017

May 24
DELAWARE TRAUMA SYMPOSIUM
7 a.m. – 3:30 p.m., Chase Center at the Riverfront, Wilmington
Registration is now open for the Delaware Trauma Symposium. The agenda, poster abstract submission and registration information is available online at http://delawaretraumasymposium.org/, where registration payment by check or through PayPal is accepted.

May 25
Christiana Care Golf Classic
Registration opens:  9 a.m.
Shotgun start: 11:30 a.m.
DuPont Country Club
This annual event is in it’s 26th year and will support the Swank Memory Care Center at Christiana Care Health System. To register go to www.christianacare.org/classic.

Learn about upcoming events at Christiana Care and register online at https://events.christianacare.org/.
Bettina Tweardy Riveros appointed senior vice president, government affairs and community engagement

Bettina Tweardy Riveros, Esq., has been appointed senior vice president, government affairs and community engagement.

Riveros joined Christiana Care in January 2016 as chief health equity officer, a role she will continue to perform. Her new responsibilities include identifying and addressing legal, regulatory, policy and relationship issues that can advance Christiana Care’s strategic objectives, with particular focus on legislative policy development, ongoing innovative population health and information technology solutions, health care system cost realignment, health care reform and business development efforts. She also focuses on community concerns and leads the health organization’s community engagement activities and strategy.

Jennifer A. Thomas promoted to vice president, Rehabilitation Services

Jennifer A. Thomas, MBA, MS, CCC-SLP, has been promoted from director to vice president, Rehabilitation Services.

Thomas has served Christiana Care Health System for 25 years in various capacities.

As a staff speech language pathologist, speech pathology supervisor and most recently director of Rehabilitation Services, she has been instrumental in improving and advancing the goals of Rehabilitation Services and Christiana Care. Through her leadership, Rehabilitation Services successfully implemented the electronic medical record for inpatient and outpatient therapy services; developed a career ladder for staff advancement and acknowledgment; and achieved successful recertification by the Commission of Accreditation for Rehabilitation Facilities for the Center for Rehabilitation at Wilmington Hospital.

She has been a leader in lean Six Sigma methodology through completion of her Green Belt certification and soon-to-be-completed Black Belt certification. With the scope and breadth of Rehabilitation Services within the hospital walls and in the community, Thomas has demonstrated the ability to align Rehabilitation Services goals with Christiana Care Health System goals and demonstrably advance The Christiana Care Way.

Thomas received her Bachelor of Arts from North Carolina State University, her Master of Science in speech language pathology from the University of North Carolina at Chapel Hill, and her Master of Business Administration with a concentration in health care administration from Wilmington University.

In addition to her current responsibilities in overseeing Physical Therapy, Occupational Therapy, Speech Language Pathology, Recreational Therapy, and Audiology services on the Christiana and Wilmington Hospital campuses, she will expand her leadership and oversight to include our nine community-based outpatient rehabilitation locations.

Christiana Care welcomes new vice president Meredith Stewart Tweedie

Meredith Stewart Tweedie, Esq., joined Christiana Care as vice president, government affairs and strategic engagement.

In her new role Tweedie will advise senior leadership on legislative and regulatory developments at the state and federal levels, manage proposed legislative and regulatory changes, and work with the senior leadership team on the development of long-term strategic objectives. She will also advise on issues relating to health care information technology, cybersecurity, regulatory compliance and strategic business relationships.

Tweedie is a highly experienced and well-respected leader who comes to Christiana Care from the office of former Delaware Gov. Jack Markell, where she served as chief legal counsel and health care policy adviser. She advised the governor on all legal and health care policy matters impacting the state, and oversaw development and implementation of the governor’s health care policy agenda.

Tweedie served previously in the Office of the Delaware Attorney General in various roles, including state solicitor, where she directed the 90-member civil division and oversaw all civil actions and matters involving the state. She also served as a deputy attorney general, Fraud Division, where she represented the state in civil, criminal and administrative proceedings under the Delaware Securities Act, the Delaware Consumer Fraud Act and related statutes.

Tweedie was an associate in the Wilmington law firm Richards, Layton & Finger. She earned her law degree at the University of Iowa College of Law and her undergraduate degree from the University of Missouri-Columbia.

Tweedie was appointed by Gov. Markell to the Delaware Commission on Early Learning & the Economy. She is active in the community as a board member of the Delaware Health Information Network (DHIN) and a former board member of First State Ballet Theatre, and is a 2013 graduate of Leadership Delaware.
The Delaware Emergency Nurses Association honored six Christiana Care nurses at its November 2016 Nursing Awards presentations:

Melissa Siebach, BSN, RN, CEN, FNE, received the Delaware Emergency Nurse Association’s 2016 Rising Star Award, which recognizes a nurse practicing bedside care in the emergency department for less than three years. Siebach works in the Emergency Department at Christiana Hospital. She is a certified emergency nurse and a member of the Forensic Nurse Examiner Team. She recently traveled to Cambodia on a medical mission with Project Helping Hands.

Kara Streets, MS, BSN, RN, CEN, NE-BC, received the Nursing Excellence Award, which recognizes a clinical nurse expert who acts as a mentor, educator and role model for emergency nursing. Streets, nurse manager of the Middletown Emergency Department, is an item writer for the certified emergency nurse exam. She was a finalist for the 2016 Delaware Today Top Nurses list in the category “Advancing — Leading the Profession.” She is an instructor in advanced cardiac life support, pediatric advanced life support, basic life support and trauma nurse core course. She is the current president of DENA.

Alexandra Colin, BSN, RN, received the Continuing Education Scholarship. Colin works at Middletown Emergency Department and is enrolled in the MSN program at Wilmington University.

Pamela A. Collins, RN, received the President’s Award, recognizing a DENA member’s exemplary service to the organization.

Anita Symonds, MS, BSN, RN, SANE-A, SANE-P, CFN, CFC, was a runner-up for the 2016 Nursing Excellence Award.

Jodi Hayden, BSN, RN III, CEN, was a runner up for the Nursing Practice Award, recognizing a nurse who consistently demonstrates a high level of professional behavior and high-quality direct patient care in the emergency nursing setting.

David A. Paul, M.D., chair of the Department of Pediatrics at Christiana Care Health System and clinical leader of the Women’s and Children’s Service Line, received the J. Thompson Brown Award from Children and Families First for his work to decrease infant mortality and improve the health of women and children.

A champion for the prevention of infant mortality, Dr. Paul has led Delaware initiatives to decrease infant mortality and premature birth for over a decade. Since 2005, he has served as the governor-appointed chair of the Delaware Healthy Mother and Infant Consortium.

Dr. Paul has authored numerous publications and presentations and he has been recognized for his excellence in teaching, research and patient care by many organizations.

In addition to his position at Christiana Care Health System, Dr. Paul is a professor of pediatrics at Sidney Kimmel Medical College at Thomas Jefferson University, Philadelphia. He has been a practicing neonatologist in the community since 1994, serving at Christiana Hospital and Alfred I. duPont Hospital for Children as well as several other hospitals in the state.

Dr. Paul earned his bachelor of arts degree from the University of Colorado and his medical degree from Hahnemann University Hospital. He completed his residency in pediatrics and a fellowship in neonatal-perinatal medicine at St. Christopher's Hospital for Children, Philadelphia.
Publishing


Presentations


At the International Symposium on Human Factors and Ergonomics in Health Care. New Orleans. March 2017:

• Danielle Mosby, MPH, Muge Capan, Ph.D., and Kristen Miller, Dr.PH., MSPH. “Improving the Clinical Utility of Predictive Models in Obstetrics.”


• Kristen Miller, Dr.PH., MSPH, Muge Capan, Ph.D., Stephen Hoover, MS, Ryan Arnold, M.D., MS, et al. “Integrating Data, Design, and Technology.” Print (“Value Institute Design Lab”).

• Kristen Miller, Dr.PH., MSPH, Muge Capan, Ph.D., Danielle Mosby, MPH, Eric V. Jackson, Jr., M.D., MBA, Ryan Arnold, M.D., MS, et al. “Bringing our Toys to Your Sandbox: Developing Database Driven EMR in Different Sepsis Alerts.”

At the World Union of Wound Healing Societies’ conference in Florence, Italy, September, 2016:

• Kathy E. Gallagher, DNP, APRN, Jennifer Bayron M.D., and Glen Tinkoff, M.D. “Medical Grade Honey As an Alternative to Surgery –A Case Series”

• Kathy E. Gallagher, DNP, APRN, Priyam Vyas, M.D., and Glen Tinkoff, M.D. “Surgical Management Involving Catastrophic Injuries: When Is Enough, Enough?”

• Kathy E. Gallagher, DNP, APRN, Michael S. Farrell, M.D., Caitlin Halbert, D.O., and Glen Tinkoff, M.D. “Utility of Web-Based Support for Acute Surgical Wound Care.”

• Kathy E. Gallagher DNP, APRN, Jennifer Bayron M.D., Ian Wilhelm, M.D., Sandra Medinilla, M.D., and Glen Tinkoff, M.D. “Collagen Matrix Donor Site Treatment Reduces Dressing Changes and Bleeding Complications.”


Kelly Ruhstaller, M.D., MFM, et al. “Prophylactic Wound Vacuum Therapy After Cesarean Section to Prevent Wound Complications in the Obese Population: A Randomized Controlled Trial.”


Awards & Achievements

Vernon L. Alders, MHCD, MBA, MSW, was a finalist for a “Program Director of the Year” award through the Process Excellence Network
global community for process professionals, business leaders and executives who want to improve their businesses through process and operational excellence.
March is National Nutrition Month. But the effort to help employees eat healthier meals goes on every day, year-round.

In the cafeteria, you probably have noticed bundled Check It Out meals that offer nutritious options at less than 500 calories. The meal comes with an attractive incentive — a 20 percent discount.

Also on the menu are such substitutions as skim and 1 percent milk instead of whole milk, baked potato chips, and more grains and beans and less mayonnaise-based offerings on the salad bar. More selections of low-fat dressings are in the works.

“The culinary staff is very creative and dedicated to providing healthy food that tastes great,” said Debbie Learn Alchon, corporate director for Food and Nutrition Services. “We are committed to the vision of improving the health of our colleagues.”

We also are paying attention to portion control. For example, Tastykakes now come in packs of two instead of three. Sugar-based sodas come in 12-ounce cans instead of 20 ounces. There’s also a machine for flavored waters with no added sugar.

Look for labeling that highlights healthy choices. Menus also post nutritional information so employees can make informed decisions. Vegetarian and gluten-free dishes are clearly labeled, as are foods that contain pork.

There’s a greater emphasis on foods made from scratch and minimal use of processed foods. Meats are free of antibiotics and are sustainably raised. There are more organic vegetables; most are steamed without added salt or fat.

“We are getting a lot of positive feedback because people enjoy options that are fresh,” Learn Alchon said.

Some habits are harder to break.

For years, french fries have been the most popular item on the cafeteria menu. Even with an emphasis on healthier foods that contain less fat and salt, fries remain No. 1, followed by chicken tenders and pizza.

Still, there has been a shift in employee tastes. New Check it Out specials are huge sellers such as sesame salmon, chicken fajitas and Polynesian teriyaki steak, Alchon noted.

At the cash registers, sweet snacks are out and fresh fruit, water and 100-calorie snacks are in. You can still find Tastykakes in the snack display, but the Fiber Bars and healthier choices are placed at eye level, where employees are most likely to see and purchase them.

“We don’t want to eliminate choices,” Learn Alchon said. “We want to educate employees on hidden fats and calories, so they can make the best choices.”
What vaccines are recommended for adult patients who have undergone a splenectomy?

By Tep Kang, PharmD, BCPS

The spleen plays a significant role in removing damaged red blood cells and bacteria from the bloodstream. It is also responsible for producing IgM antibodies required for opsonizing encapsulated pathogens. If the spleen is surgically removed or does not work correctly, a minor infection can potentially develop into a life-threatening infection.

According to the CDC recommended adult immunization schedule 2016, patients should receive appropriate vaccines against the following encapsulated bacteria: Streptococcus pneumoniae (pneumococcus), Neisseria meningitidis (meningococcus), and Haemophilus influenzae type b (Table 1).

Timing of vaccine administration following splenectomy has been a controversial topic. Two major concerns include the patients’ immunogenicity in the perioperative period and the impaired immune function of the critically ill. The patient’s present state of health should be considered prior to the administration of postsplenectomy vaccines. In patients with moderate to severe acute illness, vaccination should be delayed until the illness has resolved. This minimizes adverse effects of the vaccine which could be more severe in the presence of illness or could confuse the patient’s clinical picture such as a post-vaccine fever. For elective splenectomy, the vaccines should be administered 14 days prior to the procedure.

For non-elective splenectomy, the vaccines should be administered 14 days after the procedure.

For the prevention of pneumococcal infection, administration of PCV13 followed 8 weeks later by PPSV23 is recommended. The risk of invasive infection with Hib among adults and older children is very low. Therefore, it is reasonable to limit vaccination of adults or older children with the Hib vaccine to those who were not previously vaccinated. Quadrivalent meningococcal conjugate vaccine (MenACWY) has replaced quadrivalent meningococcal polysaccharide vaccine for patients without a spleen; a two-dose primary series is indicated for such patients.

References

<table>
<thead>
<tr>
<th>VACCINE*</th>
<th>DOSE / ROUTE / SCHEDULE / COMMENTS</th>
</tr>
</thead>
</table>
| Pneumococcal 13-valent conjugate (PCV13) and Pneumococcal polysaccharide (PPSV23) | • PCV13: 0.5 mL IM; PPSV23: 0.5 mL IM or SubQ  
• Administer PCV13 followed by PPSV23 at least 8 weeks after PCV13  
• For elective splenectomy, administer pneumococcal vaccines at least 2 weeks prior to surgery  
• For non-elective splenectomy, administer vaccines on or after postoperative day 14 |
| Meningococcal 4-valent conjugate (MenACWY) | • 0.5 mL IM  
• Administer 2 doses of MenACWY vaccine at least 2 months apart  
• For non-elective splenectomy, administer vaccines on or after postoperative day 14 |
| Haemophilus influenzae type b (Hib) | • 0.5 mL IM  
• Administer 1 dose of Hib vaccine  
• For elective splenectomy, administer Hib vaccine at least 14 or more days before surgery  
• For non-elective splenectomy, administer vaccines on or after postoperative day 14 |
**FORMULARY UPDATE | JANUARY 2017**

**FORMULARY ADDITIONS**

<table>
<thead>
<tr>
<th>Medication – Generic/Brand Name</th>
<th>Strength/Size</th>
<th>Use/Indication</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desmopressin tablet</td>
<td>0.1 mg</td>
<td>Treatment of central diabetes insipidus.</td>
<td>Line-item extension</td>
</tr>
<tr>
<td>Sulfur hexafluoride lipid-type A microspheres injection / Lumason</td>
<td>25 mg lipid-type A microspheres and 60.7 mg sulfur hexafluoride gas per vial</td>
<td>Characterization of focal liver lesions in adult and pediatric patients.</td>
<td>Ultrasound contrast agent</td>
</tr>
</tbody>
</table>

**FORMULARY DELETIONS**

<table>
<thead>
<tr>
<th>Medication – Generic/Brand Name</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Droperidol injection</td>
<td>Product has been unavailable since 2013.</td>
</tr>
<tr>
<td>Imipramine 75 mg capsule</td>
<td>Lack of use. 10 mg, 25 mg and 50 mg tablets remain available</td>
</tr>
<tr>
<td>Miconazole topical powder (Zeasorb)</td>
<td>Cream and suppository formulations remain available.</td>
</tr>
<tr>
<td>Polidocanol foam / Varithena</td>
<td>Lack of use.</td>
</tr>
<tr>
<td>Triamterene 100 mg capsule</td>
<td>Lack of use. 50 mg capsule remains available.</td>
</tr>
</tbody>
</table>

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**NEEDLESTICK AND SHARPS INJURY**

**Q. WHAT TASKS MOST COMMONLY RESULT IN NEEDLESTICK INJURIES?**

A. Suturing is the most common task resulting in needlesticks. Many times, the person assisting is stuck by the person suturing. Giving injections is the second most common task that results in needlesticks.

**Q. WHAT CAN I DO TO PROTECT MYSELF AND OTHERS FROM A NEEDLESTICK OR SHARP INJURY?**

A. Needlestick and sharp injuries can be prevented by:
- Properly using safety engineered needle devices.
- Never recapping a needle after use.
- Never using fingers as an instrument; always using an instrument for removing scalpel blades and suturing related processes.
- Always visualize that needle has been engaged in safety feature, never assuming that it has.
- Protecting the needle throughout procedure and until properly disposed of.

**Q. WHAT SHOULD I DO IF I STICK MYSELF WITH A NEEDLE?**

A. If your department uses corrosive chemicals or chemotherapy, you must have an approved eyewash station installed. Saline may be used for irritant chemicals or blood and body fluids.

**Q. WHAT DO I DO IF I NEED TO USE AN EYEWASH?**

A. The following steps should be taken when a needlestick exposure has occurred:
- Anticipating patient movement when giving injections.
- Maintaining active communication with patient during injections and blood draws.
- Placing needles and sharps in sharps containers immediately after use.
- Visually inspecting for unprotected sharps on trays, in beds and in all waste receptacles.
- Never reaching into a sharps container.
- Replacing sharps containers when three quarters full.
- Allow the wound to bleed.
- Wash the wound with soap and water; or rinse mucus membranes with water.
- Notify your manager of the incident.
- Complete the online Needlestick Report Form with detailed information.

**Q. WHERE CAN I FIND THE NEEDLESTICK REPORT FORM?**

A. The Needlestick Report form can be found on the portal under Safety First Learning Reports and also under References: [http://employeehealth/NeedleStick/EmployeePatient.aspx](http://employeehealth/NeedleStick/EmployeePatient.aspx).

If you have questions about this Best Practice Review, please contact the Content Experts: Kim Miller 733-1238 or Tabe Mase 733-1512; or call the Safety Hotline: dial 7233 (SAFE) from within Christiana or Wilmington hospitals or 623-7233(SAFE) from outside. Website: Best Practice Reviews
Register today for the Golf Classic

Presented by the Cerner Corporation, the 26th annual Christiana Care Golf Classic, scheduled for May 25 at the DuPont Country Club in Wilmington, Delaware, will support the Swank Memory Care Center.

The Swank Memory Care Center at Christiana Care is Delaware’s first and only comprehensive outpatient program for patients with Alzheimer’s disease and other memory disorders. Led by James M. Ellison, M.D., MPH, The Swank Foundation Endowed Chair in Memory Care and Geriatrics, the center provides support, education and guidance for patients and families, from diagnosis through treatment. In Delaware, more than 26,000 people have a memory disorder. The number of people age 65 years and older with Alzheimer’s is expected to grow more than 33 percent by 2025.

To register for the 2017 Christiana Care Golf Classic, visit https://christianacare.org/classic.

With leadership support from Cerner, Christiana Care’s 2016 Golf Classic raised $155,000 toward Project Engage, an innovative early-intervention substance abuse program.