It’s Almost Finished!

Raleigh Campus Patient Tower Update

It’s been a long road, but construction on the new Raleigh Campus patient tower is nearing completion. The entire building, including all four floors and the lobby area, is scheduled to open this May. In this issue of Microscope, we will provide you with an update on floors two and three, the 2E Cardiovascular Intensive Care Unit and 3E Cardiovascular Intermediate Care. In our next issue, we will offer a full update on the fourth floor of the tower, home to the new WakeMed Children’s Hospital, as well as details on integrated grand opening events for all floors and sneak peek events for employees, physicians, and volunteers.

Floors Two and Three

2E will add 20 new cardiovascular intensive care beds to the Raleigh Campus while 3E will add 41 cardiovascular intermediate care beds. Approximately 80 staff will be a part of the team on 2E, and about 100 staff will work on 3E under the leadership of manager Kimberly Willis, RN. While the manager of 2E has not officially been chosen, Jeannie Moore, RN, program manager, (continued on page 3)

Patient Satisfaction Scores

On the Rise

Keep Aiming for the Top!

WakeMed enlisted Professional Research Consultants (PRC) in 2007 to help us enhance patient loyalty. PRC measures patients’ perceptions of the overall care we provide based on a five-point rating system (Excellent, Very Good, Good, Fair or Poor). Over the past three years, WakeMed has become more focused on our scores for providing “excellent” overall care, since this is the best indicator of enhanced patient loyalty. As a result, our scores have been improving.

Above: Jimmema Huffman, RN, works in the Children’s Emergency Department where one patient recently wrote on an evaluation, “Everyone I came in contact with gave excellent care.”

In 2007, while 32 percent of patients rated their overall care as “very good,” 56.9 percent rated their overall care as “excellent.” By August 2008, our score for excellent overall care was at 62 percent, and through December 2009 it rose to 62.5 percent. However, even as our scores gradually rise, all staff must remain vigilant, consistent, and dedicated to providing excellent patient care.

“Our current patient satisfaction numbers represent positive movement in the right direction. However, we can always do a lot better,” said Mary Ann Wilcox, RNC, senior vice president of Operations & chief nursing officer. “As we keep moving forward in this effort, every single interaction we have with our patients and visitors is crucial to our continued success. We should always treat our patients and visitors the way we would want the members of our own families to be treated.”

Creating meaningful, personal connections continues to be one of the most important ways staff can affect a patient’s health care experience. Recently, WakeMed has re-emphasized this to staff through the re-launch of the Wake Way of Today program, in-services, internal Service Excellence and Service Recovery courses, new employee orientation and annual Learning Link mandatorics.

“We want to help staff open up the lines of communication with patients and families so that there are no surprises when it comes to patient care,” said Chuck Lamothe, RN, (continued on page 2)

WakeMed’s Winter Weather Warriors

WakeMed sincerely thanks all staff who worked through the weekend of January 29 through 31, when severe winter weather hit the Triangle. Although Raleigh was covered with five inches of snow by Saturday, physicians, nurses and support staff continued to work around the clock, some spending the night or traveling in unexpectedly to ensure our facilities were running properly and our patients were receiving the best care possible.

Snowed In (above): Staff from Apex Healthplex take a quick break to eat breakfast while working through the wintry weekend. L to r: Cici Bemis, RN; Amy Griffin, MD; Dot Tagasa, RN; Judi Beard; and Kathy Blake.

Led by Barb Bisset, RN, PhD, executive director, (Emergency Services Institute), WakeMed’s incident Command Team was called into action and provided regular updates to staff via e-mail about the weather and how to respond. They also coordinated overnight accommodations for staff as well as any additional assistance that was needed. Environmental Health & Safety (continued on page 4)

The da Vinci Si Surgical Robot

Raleigh Campus Upgrades da Vinci Surgical Robot

Enhanced features, better ergonomics and quicker operating times characterize the new da Vinci® Si Surgical System in use on the Raleigh Campus since January. It replaces an older model of the da Vinci Surgical System that has been used by physicians of Wake Specialty Physicians (WSP) - Urology, WSP - OB/GYN and others for the past five years. The replacement makes the Raleigh Campus one of five hospitals in the state, and the only hospital in the Triangle area, to own and operate this advanced surgical robot.

“The upgrade represents WakeMed’s commitment to delivering the highest quality of care possible for our patients as well as our commitment to advanced surgical robotics,” said Sam Chawla, MD, (WSP - Urology) (left). “To remain on the cutting edge, we will continue to invest in the most technologically advanced surgical equipment.”

The da Vinci, which is also in use at Cary Hospital, offers surgeons 3-D visualization during laparoscopic surgeries, and some open surgeries, along with greatly enhanced dexterity, precision and control. Its state-of-the-art technology allows for smaller incisions, less bleeding, and an easier reach under (continued on page 6)
Raleigh Campus Observation Unit 3 Gains New Patients

With an anticipated start date of Monday, April 5, Observation Unit 3 will open a Procedure Unit to care for all Raleigh Campus radiology holding, infusion and transfusion patients. Beds one through five will be reserved for these patients, and a nurse will be dedicated to their care Monday through Friday from 6 am to 10 pm.

Currently, radiology holding patients are cared for in the Radiology Holding Area (RHKA) located next to the main Radiology area on the first floor, while infusion and transfusion patients have been cared for by Endoscopy staff in the Surgical Services area. The transition helps improve patient safety, comfort and efficiency by allowing patients to remain in one unit throughout their entire stay. This differs from the current process that requires patients to move to different areas before and after their procedures.

Please note that the RAHA registration process will remain the same; however, for transfusion and infusion services, please call Observation Unit 3 at ext. 06832 and ask to speak with the nurse who is assigned to transfusion/infusion patients. Observation Unit 3 is located near Café 3000. Coming from Patient Registration, pass Café 3000 on the left and make a right at the Freedom Federal Credit Union. New directional signage, coming soon, will also help patients and families find their way. Please contact Janice Frohman, administrative director, (Emergency Services) at 630-4766 with any questions.

Patient Satisfaction (continued from page 1)

manager of Patient Relations, (Organizational Improvement). “Keeping patients and families fully informed and engaged is crucial. Equally important are the small efforts we make to improve a visit, like helping a visitor find their way to the elevator or listening to a patient who has a story to tell.”

WakeMed has also been working to help bedside nurses achieve more influence and autonomy over their practice. In 2008, Nursing Administration established a Shared Governance model as well as the first WakeMed Staff Nurse Council (SNC). The SNC is a team of nursing unit staff representatives who take part in decision-making related to patient care, policies, procedures and challenges facing their unit. Right away, the council identified patient satisfaction as one of its top three priorities and placed unit-based scorecards, that are updated monthly, in every unit to ensure unit-level accountability.

“This has empowered nurses to make their own decisions about the challenges they are facing on their units,” added Wilcox. “We encourage everyone to keep up the good work but also to recognize that this effort toward excellence in patient satisfaction never stops. After all, our patients are the reason we are here.”

WakeMed Debuts New Advertising Campaign

This February, WakeMed debuted its new advertising campaign featuring TV, print, radio and online ads. The ads are now running regularly on local stations. The theme of the new campaign is Our Patients’ Stories, real patients telling their real stories of hospitalization and treatment at WakeMed. The ads are meant to drive viewers, listeners and readers to the WakeMed Web site, wakemed.org, where they can learn more about each patient and their personal experience. As of late February, the campaign received an impressive 2,314 Web pageviews, and this number continues to grow.

“When we began planning this campaign, we thought … who better to tell the WakeMed story than our patients themselves,” commented Deb Laughery, vice president, (Public Relations). “As a result, we have an ad campaign that does an excellent job of communicating WakeMed’s mission and values through the eyes of those people who have actually benefitted from the high quality and outstanding level of care we provide.”

The patients who are featured in the new ad campaign were chosen as part of our Patients’ Stories as part of our advertising and promotional campaigns online at choice.wakemed.org. Pediatric stories are also being collected at childrenswntional.org. All former patients who benefitted from a WakeMed service or procedure are invited to submit information about their experience. The WakeMed Foundation will use pediatric patients’ stories as part of Children’s Can’t Wait, a campaign to raise awareness about the need for the new WakeMed Children’s Hospital, scheduled to open on the Raleigh Campus this May. The campaign also supports the Foundation’s efforts to raise $20 million for the hospital.

Above. One of WakeMed’s new ads features twins Ava and Olivia who were born prematurely and spent four months in WakeMed’s Level IV Neonatal Intensive Care Unit.

WakeMed Children’s
wakemed.org
It's Almost Finished!  (continued from page 1)

(Heart Center Administration) has been working hard to help plan and prepare for the opening of 3E.

On both floors, large windows create an atmosphere of open space and light. This feeling is also evident throughout the entire patient tower. Modern décor and calming, neutral colors are meant to help distract patients and visitors from the traditional hospital feel.

Exciting New Features on 3E

On 3E, each intensive care room is spacious and accessible due to the Hill-Rom Latitude® Arm System, a system designed to help save floor space and make work easier and more comfortable for caregivers. The system allows each patient’s bed to be positioned in the center of the room, facing any direction. Its adjustable “boom arms” contain all of the equipment and plugs that were traditionally contained on the headwall or positioned beside the bed, therefore keeping equipment off the floor.

The second floor will also be the first in the country to install GE’s newest intensive care unit monitor, the CARISCOPE Monitor B850, in its newest intensive care unit monitor, or positioned beside the bed, therefore keeping equipment off the floor. The system allows each patient’s bed to be positioned in the center of the room, facing any direction. Its adjustable “boom arms” contain all of the equipment and plugs that were traditionally contained on the headwall or positioned beside the bed, therefore keeping equipment off the floor.

Watch for more information in the near future on special “snack peeks” events so you can explore the entire patient tower and get a first-hand look at the impressive new features and technologies on all units. In the meantime, visit our web site for a gallery of construction photos from inside the tower.

We look forward to celebrating the tower opening with our staff, physicians, providers and community this May! Stay tuned!

What an Employee!

Tiffany Young, RN, and LeAnn Cox, RN, (both of Children’s Emergency Department) traveled to Haiti for a week of mission and giving.

Cindy Jones (Clinical Analysis) earned her bachelor’s degree in health administration.

Todd Hutten and Cindy Jones (both of Clinical Analysis) and Betty Woodard, RN, PhD, (Nursing Research & Evidence-Based Practice) wrote a manuscript entitled Reducing Mortality and Avoiding Preventable ICU Utilization: Analysis of a Successful Rapid Response Program by Using APR DRGs that will be published in the Journal for Healthcare Quality.

Michelle Schneier, RN, Julia Salas, RN, and Peggy Taylor, RN, (all of 3A Cardiac) recently passed a nursing certification program.

Nic Marcaccio (Imaging Services) earned his certification in CT scan from the American Registry of Radiologic Technologists.

Chad Hoytter (Heart Center - Electrophysiology) received his progressive care certified nurse (PCCN) certification.

The following Apex Healthplex nurses have earned permanent charge nurse responsibilities for the 7 am to 7 pm shift: Lea Bris tal, RN, lead charge nurse; Marcie Eichmann, RN, lead charge nurse; Russ Parsons, RN, charge nurse; and Trina Worden, RN, charge nurse.

Carolyn McKay, RN, (MICU) achieved her CRNP certification.

MICU staff recently participated in a fundraiser for the Inter-Faith Food Shuttle’s Backpack Buddies Program. They collected and donated food and snacks for children and families in need.

Lisa Parks, RN, (IC Medicine) passed her Medical/Surgical Certification Exam.

Kelly Strickland, RN, (3E Cardiovascular Intermediate Care) received her progressive care certified nurse (PCCN) certification.

Wake Specialty Physicians Adds Another Family Medicine Practice

Wake Specialty Physicians (WSP) – Falls Pointe Medical Group is scheduled to open on Monday, April 12, at the WakeMed North Healthplex Physicians Office Pavilion, 10010 Falls of Neuse Road, Suite 103, Raleigh. Providing comprehensive health services for the entire family, WSP – Falls Pointe Medical Group offers an experienced team of family medicine physicians (shown at right, top to bottom):

Michele Roberts Casey, MD – Special interests are diabetes, hypertension, women’s health and travel medicine

Monique Del, MD – Special interests are women’s health and management of chronic diseases

Inam Rashid, MD – Special interests are preventive medicine, men’s and women’s health, chronic disease management (with an emphasis on evidence-based medicine), outcome-oriented delivery of primary care and urgent care needs

Leslie Robinson, MD – Special interests are preventive medicine to support patients in staying healthy and preventing disease

While each physician has individual special interests, all choose family medicine as a specialty because it allows them to create caring relationships with patients and their families. They are committed to caring for their patients’ physical, mental and emotional health, through all stages of life, and can diagnose and treat a full range of problems. WSP – Falls Pointe Medical Group is currently scheduling new patients. Please call (919) 848-9451.

Comings & Goings

CTSU welcomes Nicole Ferrell, RN; Christy Stepphanon, RN; and Dementina Smith, RN.

The Women’s Pavilion & Birthplace – Raleigh welcomes Morgan Excelon as a clinical secretary.

Surgeon Services – Day Surgery welcomes Kathleen Howard as a child life specialist.

Raleigh Campus Engineering welcomes George Clauser as a mechanical supervising. Clauser transferred from Cary Hospital Engineering.

WakeMed Faculty Physicians – OB/GYN welcomes Carrie Jimmo as a clinical secretary. The department also welcomes Tammy Varney, clinical secretary/NT II, a fonf farewell.

The Apex Healthplex Emergency Department welcomes Adam Holder, CS/CNA II; Nakisha Aranda, RN; Christine Defranco casce, RN; Ginger Milling, RN; Sonda Trouvelle, CS/CNA II; Jessica Kelly, CS/CNA II; Mark Medbury, RRT; Michele Frailey, RN; and Tony Rekha, RN.

Emergency Department - North Healthplex welcomes Tisha Hicks, RN, Sherry Whiteman as a nursing assistant, and Renes White as a patient account representative.

PFEIFFER UNIVERSITY STUDENTS ABROAD

The Cardiovascular Midlevel Program welcomes Sponsor Simon, PA-C; and Sarah DuBois, PA-C.

Food & Nutrition Services welcomes food service assistants Janessa Beeinn, Bonnie Marie George, Jean Miranda, Isaac Chapman Jr., Gerald Carter, Paul Culbreth and Ann Marie Jenks; clinical dietitian Patrick Murphy; and Christopher Zebeny, and Café 3000 dietary aide Melchor Lemos.

Acute Rehab Services welcomes speech language pathologist Kelly Trampaturi.

Ravensoft School Supports WakeMed Children’s

The 5th Annual Market at Ravensoft, a springtime shopping event that takes place at Ravensoft school in Raleigh each year, is proud to support the new WakeMed Children’s Hospital. A portion of the proceeds from this year’s Market will go toward the purchase of a SMART Board for the hospital’s education room. An interactive white board, the SMARTBoard will be used for parent education and caring long-term hospital patients.

The Market will be located at the school’s A.E. Finley Activity Center, 7409 Falls of Neuse Road. The cost is $5 per ticket, or five tickets for $20. However, WakeMed employees receive free admission with a WakeMed badge. Shopping hours and dates are:

Thursday, March 18, 10 am to 6 pm

Friday, March 19, 10 am to 6 pm

Saturday, March 20, 9 am to 4 pm

For more information on The Market at Ravensoft, visit www.ravensoft.org.
assisted the Command Center and made consistent safety rounds on the Raleigh Campus. Representatives from many other departments also went above and beyond the call of duty:

- The Raleigh Campus Trauma Services team, including Osi Udekwu, MD, stayed busy throughout the weekend, caring for those with injuries related to the severe weather (i.e. sledding accidents) in addition to their regular cases.
- Staff and leadership from all WakeMed Emergency Departments (EDs) worked 24-7 to make certain emergency care was provided to our patients.
- Environmental Services and Laundry & Linen Services worked extra hours to ensure cots were set up for staff, all areas stayed clean, and linens and towels remained plentiful.
- Staff from Human Resources, Volunteer Services and Staff Development & Training maintained cots in the Andrews Center for Raleigh Campus staff who opted to spend the night. They even put little chocolates on their pillows!
- Cary Hospital clinical administrator Gail McInnish, RN, led efforts to ensure all shifts were covered by two clinical administrators and that staff had sleeping arrangements, if needed. Teamwork between the clinical administrators and all Cary Hospital staff allowed for a smooth, organized weekend.
- The Raleigh Campus and Cary Hospital Food & Nutrition Services teams extended their cafeteria hours, and provided extra coffee and food for staff spending the night.
- At North Healthplex, ED charge nurse Lee Stikeleather, RN, gave several staff members rides to work to ensure the unit would have all hands on deck. The facility also opened its Rehab area to house patients and families who could not drive home.
- All members of the Apex Healthplex ED team worked at some point during the weekend, including Coleman Cobb and Nelson Ennis (both of Property Management) who were called in after the facility’s heat failed and temperature regulation became a problem. ED manager Denise Linsclau, RN, provided a hot, homemade breakfast for all staff working on Saturday.
- WakeMed OneCall staff stayed during the weekend to ensure the call center remained operational. This included communications operators, telephone triage nurses, and dispatchers for Mobile Critical Care Services and Campus Police & Public Safety.
- Mobile Critical Care Services operated at 120 percent on roads permitted travel, moving 20 patients in nine hours to ensure they received needed procedures. The team continued to provide patient transport, even when other area hospitals pulled their vehicles off the road.
- Facility Services and Property Services brought in extra staff and dedicated long hours to keep the sidewalks and streets around our hospitals and facilities clean.
- Campus Police & Public Safety on the Raleigh Campus offered shuttle service and performed extra patrols.
- Prior to the severe weather, Information Services secured the remote access and bridge conference calling services so they would be operational during the weekend. Therefore, non-clinical staff could work from home if necessary, and staff working at different locations could remain in communication.
- Telecommunications and Clinical Engineering staff also worked throughout the weekend to ensure systems ran properly.

And, of course, this list cannot recognize all of the employees who pitched in during the winter weather event to make patient care and safety a top priority. Thank you for all you do to support WakeMed!

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### WakeMed Center for Patient Safety

**On Being Human**

Do you ever make mistakes? Or have someone correct something you said, only to respond, “Isn’t that what I just said?” (when it wasn’t!). Do you ever operate on “auto-pilot,” moving through the routine motions but not completely focused on the task? For example, when brushing your teeth, getting ready in the morning, driving to work... Sometimes I even ask myself, “Did I feed the dog? I think so... Or am I recalling another time I fed her! She looks eager for food, but she always looks like that!”

How about cutting corners or taking risks that don’t really seem risky at all? Dry clean only... Read instructions before operation... Do not use hair dryer near water... A February 2009 Consumer Reports article revealed the following survey results:

**People do what they shouldn’t:**

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<tr>
<th>ﬁgure</th>
<th>Oftentimes</th>
<th>Occasionally</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drive at least 10 mph over speed limit on highways</td>
<td>25%</td>
<td>44%</td>
<td>30%</td>
</tr>
<tr>
<td>Talk on a cell phone without hands-free device while driving</td>
<td>17%</td>
<td>36%</td>
<td>47%</td>
</tr>
<tr>
<td>Show down at stop sign without coming to a full stop</td>
<td>15%</td>
<td>35%</td>
<td>49%</td>
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...and don’t do what they should.

<table>
<thead>
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<th>ﬁgure</th>
<th>Oftentimes</th>
<th>Occasionally</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drive at least 10 mph over speed limit on highways</td>
<td>16%</td>
<td>13%</td>
<td>70%</td>
</tr>
<tr>
<td>Wear a helmet when riding a bicycle</td>
<td>30%</td>
<td>11%</td>
<td>58%</td>
</tr>
<tr>
<td>Unplug toaster/toaster oven when not in use</td>
<td>39%</td>
<td>11%</td>
<td>50%</td>
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We all make simple mistakes. We all shift into autopilot for periods of time. We all even cut corners when risks are perceived to be minimal. It is very human to try to do things more efficiently, better and smarter by avoiding unnecessary steps. The problem is, sometimes, this can have consequences. Rarely are the consequences significant, such as a serious medication error or a wrong-site surgery.

Knowing we are all human and that health care is very complicated, how do we ensure that we provide our patients with exactly what they need, when they need it, without mistakes? We acknowledge the humanness in each and every one of us. We recognize that we will make mistakes and that we will even cut corners when we feel it is justified or somehow better. We talk about errors and good catches (errors that don’t actually reach the patient), and we use this information to make our systems safer, to prevent errors from affecting patients and to detect errors early so that effects can be minimized.

This acknowledgement of our humanness and the need to be open regarding errors are the fundamental principles of a Just and Fair Culture, essential to improving patient safety. More to come!

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### Helping Physicians Learn, Grow and Improve Quality of Care

Last year, Wake AHEC provided 1,146 individual physicians with Continuing Medical Education (CME) credit in nine North Carolina counties. This education and the opportunity to gain the most up-to-date medical information and strategies allow our state’s physicians to be more effective in helping improve the quality of medical care for patients across North Carolina.

Additionally, Wake AHEC is pleased to report that they have again earned a four-year accreditation as a provider for CME by the North Carolina Medical Society (NCMS). To earn this accreditation, Wake AHEC met NCMS’s new guidelines, one of which involves following up with participants after an educational event to determine if learning inspired changes in the delivery of patient care. Another major new focus for CME is a concentration on improving quality in physician offices. To date, 24 primary care practice sites in this region have participated in North Carolina’s Improving Performance in Practice Program, aiming to improve care for asthma and diabetes as well as prevention of these illnesses. Physician participation in quality improvement initiatives can lead to credit for structured performance activities as well as the opportunity to meet the Maintenance of Certification Part IV requirement.

Wake AHEC educational events and quality initiatives can be found at www.wakeahec.org. For more information, contact Diana Bond, director of CME/Quality for Wake AHEC, at ext. 00454 or dbond@wakemed.org.

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### In Memoriam

Interpretation & Translation Services staff honor the life of interpreter Carmen Moller who passed away on January 17. She will be greatly missed by family, friends and coworkers.

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### Winter Weather Warriors

(continued from page 1)
This March, Scully, WakeMed’s only trained facility dog, celebrates his two-year anniversary as a member of the WakeMed Rehab team. Scully is shown with patient Mary Williehough and her owner, Elizabeth LEE, WakeMed rehabilitation therapist (Rehab) Hospital in the Health Park.

Penny is proud of the work four-year-old Scully continues to do with patients. “Not only is he a source of motivation, encouragement and happiness, but he also helps our patients with their physical rehab. For example, when patients with spinal cord or brain injuries are asked to stand, bear weight, walk or pet Scully, or even brush his teeth, they are simultaneously rebuilding physical strength, increasing their gross motor skills, range of motion and balance.”

When patients read flashcards to Scully, printed with commands such as sit and fetch, he assists with speech therapy, especially for patients with aphasia. This 76-pound Labrador/Golden Retriever mix can also help patients open and close doors and drawers, pay for goods at a counter by passing and receiving money with his mouth, pick items up from the floor, or push the handicap door access button.

To become certified as a facility dog, Scully had to pass a rigorous training through Canine Companions for Independence (CCI), a non-profit organization that raises dogs from birth and trains them to be facility dogs, service dogs, hearing dogs or skilled companion dogs. To obtain ownership of Scully, Penny completed CCI’s competitive application process and two weeks of training on the CCI campus in Florida. Her application and training were funded by a grant from the WakeMed Foundation.

A Facility Dog vs. a Hospitality Dog – What’s the Difference?

“Because Scully is a highly trained, specialized facility dog, he is different from the hospitality dogs at WakeMed,” said Penny. “He is subject to different rules and behaviors. He never barks, and he is very predictable – he never gets excited while working.”

WakeMed’s hospitality dogs and their owners also complete a screening and training process before being accepted into the hospital. However, their purpose is more social. They come to WakeMed to blanket patients, children, and staff warm, comfort, and a temporary distraction from the clinical environment. Scully, on the other hand, is here to work. He wears a special vest imprinted with the words “Facility Dog” and a pronged collar used to keep him on task. Penny asks that no one pet Scully while he is in the hospital, as he must remain focused on her and her commands at all times.

Scully must be seen and not heard, almost like he is invisible. He cannot be distracted from his job,” added Penny. “This is why we kindly ask that visitors and staff do not touch or interact with Scully. He is only here for the patients with whom he is working.”

Scully is only permitted to work with patients three hours per day. At home, his vest and pronged collar are removed, and he becomes a “regular” dog again. However, the impact he makes on WakeMed’s rehab patients is anything but regular. Each day, Scully touches the lives of patients who respond to him with excitement, love and gratitude for the service he provides.

For more information about WakeMed’s Hospitality Pet program, contact Marie Johnson (Volunteer Services) at ext. 4856. For more information about CCI, visit www.cci.org.

Happy anniversary to Scully!

Five

WNCN-TV, December 3 – Eric Olson, MD, (WakeMed Faculty Physicians - Internists) was interviewed for a story featuring an H1N1 patient and her lengthy recovery.

Triangle Business Journal, December 4 – Mary Ann Wilson, RN, (Emergency) was quoted about WakeMed filing a Certificate of Need to renovate and expand the Women’s Services floor on the Raleigh Campus.

WRAL-TV, December 16 – Robert Allen, MD, (Balding Neurosurgical) showcased on the Raleigh Campus the new O-Arm technology that enables more precise spinal surgeries.

WRAL-TV, December 16 – Dale Hill (Emergency Services Institute) discussed Med Stels and vertical hospital evacuation.

HealthLeaders Magazine, December 17 – Dr. Bill Atkinson (Administration) was featured in a story on the M3 Mobile Communications & Coordination Centre vehicle.

WRAL-TV, December 23 – Dr. Barb Hueter, RN, (Emergency Services Institute) commented on WakeMed removing H1N1 age-related visitation restrictions.

The News & Observer, December 24 – Cary Hospital nurses and staff were commended for working during Christmas.

News 14, December 24 – Jeanne Hutson, RN, (Children’s Diabetes & Endocrinology) was interviewed for a story about diabetes meters and why it is important for patients to feel comfortable with the machines.

WPTV-TV, December 29 – Ravish Sukchar, MD, (Wake Heart & Vascular Associates) discussed the rise in heart attacks over the holidays and how to prevent complications.

The News & Observer, January 7 – John Holly, MD, (Wake Specialty Physicians - Brier Creek Internal Medicine) was interviewed for a story about a new technology to assess the risk of heart attack and diabetes at home.

Triangle Business Journal, January 8 – Stan Taylor (Corporate Planning) discussed Certificate of Need application opportunities in the 2010 State Medicaid Facilitation plan.

Triangle Business Journal, January 25 – Chris Gring, MD, (Wake Heart & Vascular Associates) spoke on the decision-making process physicians follow when deciding whether or not to order a diagnostic test.

The News & Observer, January 21 – Stan Taylor (Corporate Planning) was interviewed about a competitive Certificate of Need for three operating rooms available in Wake County in 2010. He was also quoted in a related story on February 16.

The News & Observer, January 31 – Sue Evans, lactation specialist, (Milk Bank) was interviewed for a story about the Milk Bank possibly donating milk to Haitian babies being cared for on the U.S. Navy Comfort ship. The News & Observer also quoted Laurie Dunn, MD, (WakeMed Faculty Physicians - Neonatology) in a story honoring Milk Bank co-founder Mary Rose Tully.

The News & Observer, February 1 – Osi Edekenya, MD, (WakeMed Faculty Physicians - General Surgery & Trauma) provided tips for safe bleeding. Similar stories ran on WRAL-TV, WNCN-TV and WTVD-TV on February 2. WRAL-TV ran a follow-up story with Dr. Edekenya about safety while bleeding on February 17.

Fox News Carolina, February 12 – Laurie Dunn, MD, (WakeMed Faculty Physicians - Neonatology) and lactation specialist Sue Evans (Milk Bank) were interviewed about human milk banking.

WRAL-TV, February 12 – In honor of Heart Month, nutritionist Stacy Moretz (Corporate & Community Health) provided a heart-healthy recipe that was demonstrated on the air.

Happy Heart Month

February marked American Heart Month, and to celebrate, WakeMed hosted several free community events focused on heart health and the prevention of heart disease – all fitting into the theme Clue In to Heart Disease.

“Through these events, we wanted to remind people that the risk factors of heart disease often cannot easily be seen,” commented Betsy Gaskins-McClaine, RN, vice president, Heart, Vascular & Services. “By learning as much as possible about heart disease and how to properly care for your heart before a problem occurs, you very well could be taking steps to live a longer, happier life.”

All of the month’s events were open to the public and run by WakeMed physicians and staff. Happy Heart Hour at the Red Room restaurant in downtown Raleigh offered free heart-healthy appetizers and information about heart health and heart disease; the Matters of the Heart educational sessions, held at several WakeMed facilities, covered the basics of chest pain and how to perform CPR; and at Heart Smart Cooking, held at WakeMed’s Heart Center, Chef Adam Jones (shown above) of Michael Dean’s Seafood Grill demonstrated how to prepare a delicious, heart-healthy meal with co-presenter Stacy Moretz, nutritionist, (Corporate & Community Health). WakeMed also teamed with the Cameron Village shopping center in Raleigh for Love Your Heart, a program that offered incentives for shopping at Cameron Village stores, including a free total and HDL cholesterol test and blood pressure check at WakeMed.

For more information about heart disease and how to live a heart-healthy lifestyle, visit the American Heart Association Web site at www.americanheart.org.
WakeMed Receives Two CON Approvals

In December 2009, WakeMed received official Certificate of Need (CON) approval for an outpatient imaging and lab services center and an ambulatory surgery center. Both new facilities will be located on Sunnybrook Road adjacent to the Raleigh Campus. The outpatient imaging and lab services center will house a full suite of state-of-the-art imaging technology including general radiology, fluoroscopy, a fixed CT scanner, ultrasound, bone densitometry, screening mammography and lab services. The surgery center, which will be a joint venture entity with practicing surgeons, will include eight operating rooms, three procedure rooms, and support functions such as a pre-operative patient prep area, a post-anesthesia recovery area, surgical instrumentation processing and sterilization, physician/staff support areas and family waiting space. Construction will begin in late 2010. Stay tuned for more details!

da Vinci Robot

(continued from page 1)

vessels and organs. Using the da Vinci, surgeons can offer a minimally invasive option for complex surgical procedures. Surgeons operate the robot by sitting at a console and directing its mechanical arms.

When comparing the da Vinci Si to the older model da Vinci, several enhancements allow for greater efficiency in the operating room (OR). Its features are more streamlined so that time is saved during setup. The added picture-in-picture viewing capability allows a surgeon to easily view a patient’s films during surgery. The Si robot also includes HD viewing, touch-screen technology, the opportunity to connect with tools that use alternative energy sources, a more ergonomic surgeon console, and the ability to save console settings so the operator can quickly reach his or her comfort level.

“Maximal surgical comfort leads to optimal patient care,” added Dr. Chawla. “That’s why this new surgical robot is such a benefit to our surgeons, staff and patients. It makes things quicker, easier and more comfortable for the operator so that more time is spent focusing on patient care.”

Upon arrival, the da Vinci Si went to the Medical Simulation Center (SIM Center) for setup and training. It was placed in the OR in late January and is now in use for surgeries. WakeMed is making plans to bring an older version of the robot back to the SIM Center for training purposes.

da Vinci Robot (continued from page 1)

BARIATRIC SURGERY SUPPORT GROUP

Tuesday, March 9 from 6:30 to 7:30 pm in the Cary Hospital Conference Center. This monthly support group for people who have experienced bariatric surgery is led by a WakeMed registered dietitian. Call 919-350-2358 or ext. 02555 for details.

STAFF DEVELOPMENT & TRAINING

Enroll in any of the listed classes via Learning Link or ask your manager/supervisor to send an e-mail to SDLRegistration@wakemed.org with your name, employee number, course name, date(s) and times(s). For information, visit the WakeMedWeb or call ext. 03066. Preliminary requirements may apply.

Computer Training

Word: Mail Merge — Thursday, April 15 from 10 to 11:30 am in the MOB, SD&T Classroom #4

Employee Development

Communicating Across Generations — Monday, March 29 from 8:30 to 10:30 am in the MOB, SD&T Classroom #3

Management Development

Managing a Multi-Generational Workforce — Wednesday, March 31 from 8:30 to 10:30 am in the MOB, SD&T Classroom #3

Etiquette Essentials: Networking and Business Dining — Thursday, April 15 from 8:30 am to 12:30 pm in the MOB, SD&T Classroom #3

NURSING EDUCATION

Medicine of Compassion — March 8, 16, 25 & 30 and April 4, 9, 22 & 29. Please register via Learning Link with code N3014-9070.

WAKE AHEC CONTINUING EDUCATION

Educational credit available for all programs. For details/fees call ext. 08047 or visit www.wakeahec.org and click Program Listings.

Interpreter Update Training — Wednesday, March 10 at 9 am at Cary Hospital

Responding to Families and Communities Impacted by Methamphetamine — Wednesday, March 10 at 9 am in the Andrews Center

Interpreter Certification Preparation Workshop — Wednesday, March 10 at 1 pm at Cary Hospital

Third Annual Retina Update for the Comprehensive Ophthalmologist — Thursday, March 11 at 8:45 pm at The Umstead Hotel and Spa, Cary

Children in Crisis — Friday, March 12 at 7:30 am at New Horizons Fellowship Church, Apex

Level II Spanish for Obstetrical Staff — Wednesday, March 17 at 8:20 am at Magnolia Glen, Raleigh

Fifth Annual North Carolina Pediatric Emergency Medicine Conference — Friday & Saturday, March 19 & 20 in the Andrews Center

AIDS and the Dental Practice: Update on Social & Clinical Aspects — Tuesday, March 23 at 8:45 pm in the Andrews Center Implementation of a Wound Program — Thursday, March 25 at 8:15 pm at Perfect Venue, Roxboro

Training for Interpreters in Health and Human Service Settings: Level 2 — Wednesday, April 7 at 8:30 am at the McMichael Center, NCUSI campus, Raleigh

To help you plan ahead, this calendar lists upcoming system-wide events, training classes and community events. For complete details and fee information, visit the WakeMedWeb. Please send calendar submissions to the Public Relations department or e-mail microscope@wakemed.org.

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Cary Hospital Updates

New Chest Pain Center

This February, Cary Hospital opened a new Chest Pain Center, a unit dedicated to caring for cardiac observation patients. The new 12-bed center is nationally accredited by the prestigious Society of Chest Pain Centers and is located next to Cardio-pulmonary Services on the first floor (in the former Observation Unit space). It is managed by Tonia Fehr, RN. This move follows the January transition of Cary Hospital’s Observation Unit to 1 East, which has a more surgical focus.

In addition to opening its new Chest Pain Center, Cary Hospital simultaneously closed its 10-bed Emergency Department (ED) Holding area. While the original mission of the ED Holding area was to support patient throughput and keep the ED moving efficiently, it became more of an overflow area for admitted cardiac observation patients. Therefore, ED Holding’s nursing staff, who had become very experienced in caring for cardiac patients, transitioned to the new Chest Pain Center.

While the ED Holding area was unable to offer cardiac observation patients spacious rooms and private bathrooms, the Chest Pain Center does offer patients these helpful features. Additionally, patients, physicians and nursing staff benefit from the center’s close location to Cardiopulmonary Services. With these units located side-by-side, cardiologists and cardiac nursing staff are better equipped to provide the most convenient, efficient and consistent cardiac care possible.

New Freedom Federal Credit Union Branch

Construction began on the new Cary Hospital branch of the Freedom Federal Credit Union in mid-February and will last until April. Opening to customers by May, the credit union will occupy the space adjacent to Cary Hospital Administration. For details on how to join the Freedom Federal Credit Union at Cary Hospital or more information on offerings such as savings and checking accounts, and the Christmas Club, please contact the credit union’s director of membership development, Clint Williams, at 1-800-232-6532, ext. 227, or cwilliams@freedomfcu.com.