



From the president

Big Data and the Need for Clinical Decision Support



Christopher Hedley, MD | Medical Staff

Inside this issue

Medical staff appointments	2
CME corner	3
From the Health Science Library	4/5
Obituary notice	5
From the Clinical Documentation Specialists	6
Onward and upward	7
In the news	7
Protecting patient privacy	8
National Doctors' Day	8
Act FAST	9
Celebrating milestones	9
Shriners for Children open house	9
Medical staff meeting calendar	10
CME calendar	11

When I joined the medical staff of Huntington Hospital in 1990, all available information about a patient fit in a paper chart. We kept physical textbooks and journals in our offices to consult when we ran into questions. UpToDate was still two years into the future and PubMed six years away.

Today, we have access to much more information that can improve patient care – and the available data is growing exponentially. In a market study, the consulting firm IDC estimated that the digital universe is doubling in size every two years and by 2020 will reach 44 trillion gigabytes.¹ A baby born at Huntington Hospital today will retire with a lifelong electronic medical record that will include every medication they were ever prescribed, procedure they ever had, and clinician they ever saw. In addition, that record could include years of daily measures from a wearable health and activity tracker, a genetic risk profile and details about environmental factors, like where the patient had lived.

No human can process that much data. Looking to the future, we are going to need a technological solution for managing information about our

“You can’t solve a problem on the same level that it was created. You have to rise above it to the next level.”

– Albert Einstein

continued on page 3

Board meeting. As provided by the Bylaws of the Governing Body and as the designated sub-committee of the Governing Board the following items were presented and approved by the Medical Executive Committee of April 3, 2017.



Medical staff appointments



Bagdasarian, Boris, DO
Hematology/Oncology

541 West Colorado Street
Suite 205
Glendale, CA 91204
P: (323) 254-0046, ext 242
F: (323) 488-9782



Beaton, Alina C., MD
Internal Medicine

100 West California Boulevard
Anesthesia Research, Unit 25
Pasadena, CA 91109
P: (626) 397-3507
F: (626) 397-2165



Boghossian, Nubar, MD
Hematology/Oncology

541 West Colorado Street
Suite 205
Glendale, CA 91204
P: (323) 254-0046, ext 242
F: (323) 488-9782



Chvotzkin, Shelly L., DO
Obstetrics & Gynecology

50 Bellefontaine Street
Suite 305
Pasadena, CA 91105
P: (626) 440-9190
F: (626) 440-0632



Flores, Jorge, MD
Emergency Medicine

100 West California Boulevard
Emergency Department
Pasadena, CA 91109
P: (626) 397-5111
F: (626) 397-2981



Ho, Jason S., MD
Hematology/Oncology

1245 Wilshire Blvd
Suite 303
Los Angeles, CA 90017
P: (213) 977-1214
F: (213) 482-8868



Khitri, Monica R., MD
Ophthalmology

625 S. Fair Oaks Avenue
Suite 240
Pasadena, CA 91105
P: (626) 817-4747
F: (626) 817-4748



Kim, Anthony W., MD
Thoracic Surgery

1510 San Pablo St., Suite 514
Los Angeles, CA 90033
P: (323) 442-9058
F: (323) 442-5872



Seneviratne, Lasika C., MD
Hematology/Oncology

541 West Colorado Street
Suite 205
Glendale, CA 91204
P: (323) 254-0046, ext 242
F: (323) 488-9782



Vuu, Kien, MD
Vascular and Interventional Radiology

501 S. Buena Vista Street
Burbank, CA 91505
P: (818) 847-4835
F: (818) 847-4842

Administrative *reports*

Please go to SharePoint → Medical Staff Services → Board Approved Items → 2017 and select April 2017.

CME *corner*

Medical grand rounds

TOPIC	Physician Communication
SPEAKER	Hilary Fausett, MD
DATE	May 5, 2017
TIME	12 – 1 p.m.
PLACE	Research Conference Hall
METHOD	Lecture
CREDITS	1.0 AMA PRA Category 1 Credits™

Second Monday

TOPIC	Alzheimer's and Marijuana
SPEAKER	Han Lee, MD
DATE	May 8, 2017
TIME	12 – 1 p.m.
PLACE	Research Conference Hall
METHOD	Lecture
CREDITS	1.0 AMA PRA Category 1 Credits™

If you would like a copy of your CME credit report please contact Gladys Bonas via email at Gladys.Bonas@huntingtonhospital.com

patients and making decisions based on all that data. Instead of asking questions like how often should we screen women for breast cancer, we will be asking how often should we be screening this one patient for breast cancer and at what age do we need to start. Computer programs can help us make these highly complex decisions using all available data.

Radiology is among the specialties that have begun using computer algorithms to improve clinical care. Computer-aided detection tools already scan medical images and help zero in on areas of concern. Now we are implementing clinical decision support tools to improve the ordering of medical imaging.

Like all new technologies, the first versions can sometimes be a bit clunky. At Huntington Hospital, the implementation of automated best practice alerts created alarm fatigue and had to be adjusted. However, the data shows that the alerts also saved lives by improving our early detection and treatment rate for sepsis.

Clinical decision support for imaging orders is similar to best practice EHR alerts in that it gives immediate feedback, alerting the ordering physician when another type of imaging, or even no imaging, might be better. It also can spot patient safety problems, such as an order for contrast in a patient with an allergy or an MRI on a patient with a pacemaker. In addition, these algorithms could be better than humans at figuring out when what seems like the low-cost path is actually the more expensive one. For example, many head CTs lead to follow-up MRIs. Clinical decision support tools could tell us when it is best to skip the CT and go straight to the MRI, saving the patient from unnecessary radiation exposure and lowering the total cost of care.

I'm a realist, and I know that there could be some bumps along the road to fully incorporating clinical decision support in radiology ordering. But I also know that the amount of patient and research data we as physicians need to attend to is increasing year after year. We will need to develop tools like clinical decision support to manage all this information. What we learn today through the adoption of clinical decision support in radiology ordering will be one piece of the puzzle in harnessing big data in medicine to improve care, extend lives and create a more efficient and sustainable health care delivery system.

References

1. EMC Digital Universe with Research & Analysis by IDC. The digital universe of opportunities: Rich data and the increasing value of the internet of things. April 2014. Available online at <https://www.emc.com/leadership/digital-universe/2014iview/executive-summary.htm>. Accessed March 24, 2017.

From the

Health Science Library

Selecting the Right Tool for Literature Searching

Finding the most relevant literature can be tricky and many resort to using Google for its ease of use. However, knowing the difference between the main types of databases can provide more relevant and better quality results with not much more effort than spending time surfing the Internet. Listed below are the main types of databases that can be used for a focused and comprehensive discovery of medical literature:

Abstract/citation database:

Examples: Ovid Medline, PubMed

Useful in discovering what papers have been published on a topic even though the database might not provide access to the full text. Contact the library to order full text of any article not readily available online.

- **Pros:** Aggregates multidisciplinary content from many different publishers providing for a more comprehensive search of the literature.
- **Cons:** You must request full text from the library for those articles not available online

Full-text database:

Examples: Elsevier's ClinicalKey (ejournals, ebooks), McGraw-Hill's AccessMedicine (ebooks), R2 Digital Library (nursing ebooks), Ovid Evidence-Based Medicine Reviews Cochrane Database (systematic reviews)

The full-text database offers a searchable collection of literature and the entire text of articles or books are provided in either HTML or PDF formats.



- **Pros:** Full text is readily available.
- **Cons:** Can be a less comprehensive place to search, especially if the database is limited to a single publisher's titles and/or to titles in one specific field.

Point-of-care/reference database:

Examples: UpToDate, Micromedex

Provides topic summaries or pre-compiled information on a specific disease, condition, drug or health-related topic.

- **Pros:** Synthesizes and summarizes information from many sources. Often reviewed and updated regularly by experts in the topic. Can be quickly consulted when a course of action is sought. Can be a starting place for searching the literature, if references are provided.
- **Cons:** Might not be very helpful for more complex topics. May be limited in scope.

Library online catalog:

Libraries focus their collections on the needs of their specific user population but also have to balance building a collection with external limitations such as time, money, space and staffing. The library online catalog is still an important tool for discovering what a particular library has available to its users. Search the catalog to find whether the library has access to a book or journal in print or electronically and to the extent (volumes, year, edition) it is available. In other words, if you are wondering if the library has access to the 1947 issues of the New England Journal of Medicine, search the catalog.

From the
Health Science Library CONTINUED

- **Pros:** Provides information on what is available in print or electronically, regardless of format or database, linking to the electronic version when available. Good for finding a known title.
- **Cons:** Does not provide direct searching for articles.

Web search engine:

Examples: GoogleScholar, Quertle (subscription required)

A web search engine, especially one that focuses on research literature and tries to eliminate commercial and personal web pages, can be a good way to find very current literature. Also, use web search engines to discover relevant keywords, subject headings, journal titles and authors to jumpstart your search in a more selective scholarly database.

- **Pros:** Can assist in finding very recently published or ‘online first’ articles that have not yet been uploaded to other major databases such as Medline, etc.
- **Cons:** Can be hard to refine your search; the web engine may search titles that have not been pre-selected based on quality or other criteria so you will need to be mindful of predatory/fake open access publishers.

Questions? Please contact the library at (626) 397-5161, library@huntingtonhospital.com



Obituary Notice



Harold Lee Rosenfeld, MD died peacefully at home on March 17, 2017 from lung cancer caused by exposure to “Agent Orange” in the jungles of Vietnam. He was 76.

Hal graduated from Occidental College in 1961 and USC School of Medicine in 1965. He was Board-certified in Plastic surgery in 1979. He was on the Medical Staff at Huntington Hospital for over 36 years. Hal also served on Huntington’s Ethics Committee for over 30-years. He was active in the state and county medical associations, a mediator for the L.A. Supervisor Court, and an expert reviewer for the California Medical Board.

Hal spent time tending, and exhibiting his bonsai trees. One of his trees was over 400 years old. He would be proud to know that the Huntington Library adopted several of his trees into its collections.

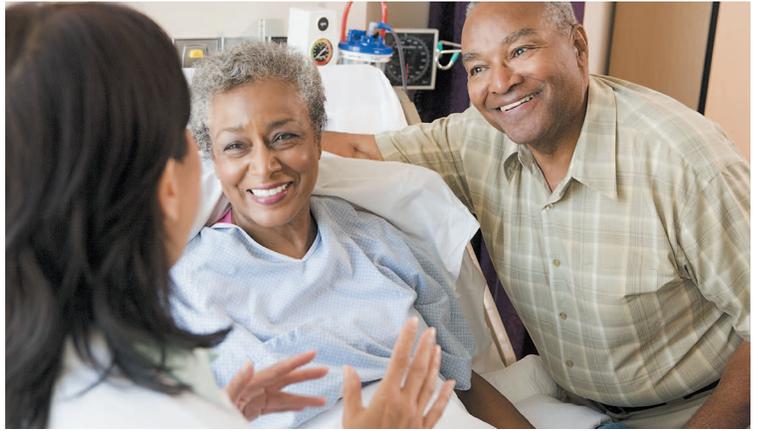
As a member of the L.A. Opera Docs, Hal combined his love of classical music with his medical expertise when called to treat injured or ill cast members.

Dr. Hal Rosenfeld will be missed by the Huntington community.

From the

Clinical Documentation Specialists

The Verboten List



Please consider using *more specific diagnoses* that accurately captures the severity of illness and risk of mortality of your patients.

Non Specific Documentation	Replace with Specific Documentation
Urosepsis	Sepsis due to UTI
Troponinemia/Supply and Demand Mismatch	Demand Ischemia or NSTEMI or STEMI
Respiratory Insufficiency	Respiratory Failure – acute or chronic or acute on chronic
Renal Insufficiency	Renal Failure – acute or chronic or acute on chronic
Post Op	Clarify if the issue is a complication
Sharp Debridement	Excisional Debridement – including the level involved
Unresponsive	Unconscious codes to Coma (include GCS)
“History of...” on medication	Active or Chronic Diagnosis

CDI Tips:

Bacteremia ≠ Sepsis

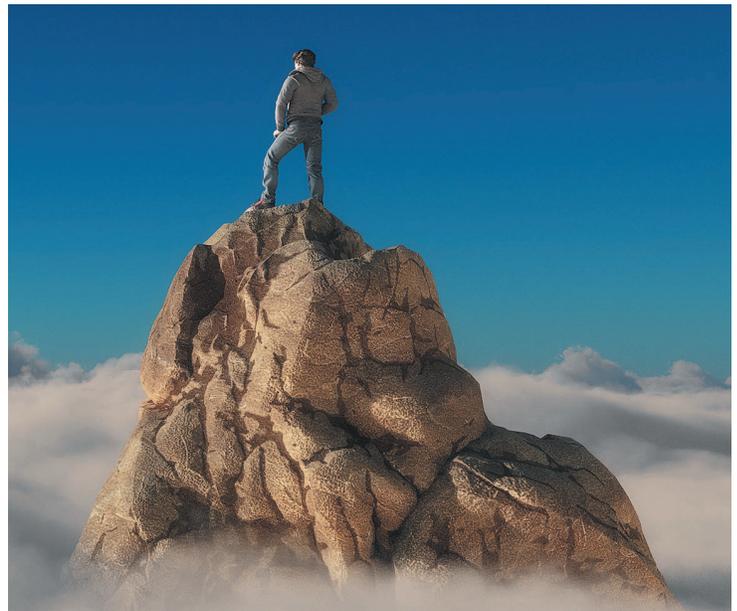
SIRS with an infectious source = Sepsis

Insufficiency ≠ Failure

If you have any questions, you can always reach a CDI at x3662

Onward and Upward

Dr. John Rodarte, chair of Pediatrics Department, has been doing a cancer fundraiser through the Fred Hutchinson Cancer Research Center in Seattle, WA. It's called "The Climb to Fight Cancer." He's climbed Mt. Rainier, Mt. Hood and Mt. Baker in the Pacific Northwest, all glaciated mountains requiring wearing crampons, ice axes and climbing in roped teams. This is his 6th year climbing and he's now raised over \$41,000. The link to his personal page for the climb is noted here. We thought some publicity about this would be of interest to the medical staff! He goes climbing again in June, so there is still time to contribute to his cause!



http://getinvolved.fhcr.org/site/TR/Climb/FredHutchinsonCancerResearchCenter?px=1390352&pg=personal&fr_id=1530

Huntington Hospital in the news



In February, Huntington Hospital was featured in several news stories. Here are just a few highlights:

Business Life magazine featured our cardiology program in their "Heart Healthy" issue. To see the story, please go to: <http://www.businesslife.com/articles.php?id=2961>

ABC7 news ran a story about the connection researchers found between stress and heart disease. To watch the clip, which features our physician partner, interventional cardiologist Gregory Giesler, MD, go to: <http://abc7.com/health/researchers-find-connection-between-stress-and-heart-disease/1767623/>



Shriners for Children
Medical Center

Please RSVP by May 1st
Questions?
Call 213-368-3376 or
213-392-9906

**If you would like to submit
an article to be published in
the Medical Staff Newsletter**
please contact Gladys Bonas,
(626) 397-3770 or Gladys.bonas@huntingtonhospital.com.

Articles must be submitted
no later than the first Friday of
every month.

Protecting patient privacy

It is our duty as a healthcare provider to protect and secure our patients' health information in accordance to HIPAA (Health Insurance Portability and Accountability Act). An essential practice to protecting patient privacy is to never share user identification and/or password for computer access ("user information"). Huntington Hospital is required by law to track anyone who can access, view, edit, or change electronic protected health information ("ePHI") and be able to determine exactly what was done to the ePHI and when. Huntington Hospital accomplishes this by assigning each employee accessing its system with a unique user identification and password so that user activity can be traced back to specific individuals at all times. Sharing user information defeats this purpose.

Additionally, sharing user information can result in serious legal consequence in the areas of patient safety, fraud waste and abuse, as well as patient privacy. From a patient safety perspective, using unique user identification provides accountability and traceability in the decisions and actions taken during patient care. From a fraud waste and abuse perspective, sharing user information can result in the use of other's user information to fraudulently attest to or enter information that is inaccurate. From a patient privacy perspective, using unique user identification prevents others who are not part of the patient's care from accessing that patient's electronic health records. Furthermore, not everyone who is allowed to access a patient's information will have the authority to change or add new information to the records. Having a policy requiring the use of unique user identification is one of the safeguards the hospital must have in place to properly protect patient privacy. Sharing of user identification and password will result in termination of employment.

If you have any questions or concerns regarding the usage of unique user identification or passwords please contact Wendy Strobach, compliance department, at extension 5289.

National Doctors' Day



"I want to recognize and thank all of our physicians who work tirelessly each day keeping their patients, and our community, healthy."

*Christopher Hedley, MD,
Chief of Medical Staff*



On March 30, we celebrated National Doctors' Day. Thank you to our exceptional physician partners for their continued dedication to our hospital and for providing compassionate care for our community!



Act **FAST.**

Signs and symptoms of a stroke.

	F FACE. Ask the person to smile. Does one side of the face droop?
	A ARM. Ask the person to raise both arms. Does one arm drift downward?
	S SPEECH. Ask the person to repeat a simple phrase. Are the words slurred?
	T TIME. If the person shows any of these symptoms, call 911 immediately.

Continuous survey readiness is something that is done every day here at Huntington Hospital. The Joint Commission will be conducting a comprehensive stroke survey at our hospital on April 24 and 25. As we prepare for the survey, we want to remind our employees of the F.A.S.T. signs and symptoms of stroke.

Celebrating milestones

The following physicians hit a service milestone in the month of May. The medical staff would like to recognize the following physicians for their **service and dedication** to Huntington Hospital.

40 Years (on staff 05/1977)
Lieberman, Ricardo L., MD
Neonatology

30 Years (on staff 05/1987)
Darian, Garo B., MD
Pulmonary Disease

15 Years (on staff 05/2002)
Weiskopf, Manuel, MD
Anesthesiology

5 Years (on staff 05/2012)
Balikian, Sevag, MD
Internal Medicine



Shriners for Children
Medical Center



Join Us in Pasadena!

Please join us for an
Open House & Tour
of our new
Shriners for Children
Medical Center

Thursday, May 11, 2017 · 5-8 pm

909 S. Fair Oaks Ave.
Pasadena, CA 91105

Light refreshments will be served

Medical staff meetings

Calendar

MAY 2017

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<u>1</u> 12:15 p.m. OB/GYN Dept CR 5&6 5:30 p.m. MEC Board Room	<u>2</u> 8 a.m. QM Pre-Agenda CRC	<u>3</u> 12:15 p.m. OB/GYN Peer CR 5/6	<u>4</u> Noon Medicine Committee N/S Noon Trauma Services CR 5/6	<u>5</u> 7 a.m. Ortho Sect CR 5/6
<u>8</u>	<u>9</u> Noon Critical Care Sect WT 5/6	<u>10</u> 12:15 p.m. OB/GYN Committee WT 5/6	<u>11</u> Noon QM Committee East Room	<u>12</u>
<u>15</u> 8 a.m. Emergency Medicine Section ED Conf. Room	<u>16</u> 12:15 p.m. Infection Control Research Hall 5:30 p.m. Surgery Committee CR 5/6	<u>17</u> 7:30 a.m. Cardiology Sec Peer Cardio Conf. Room 12:15 p.m. Credentials Committee CRC	<u>18</u> 6:30 a.m. Anest Sec/Peer CR-7 Noon PT&D Committee CR 5/6 6 p.m. Bioethics CR 5/6	<u>19</u>
<u>22</u> Noon Radiology/Nuclear Med Section CR 11	<u>23</u> 7:30 a.m. Interdisciplinary Committee CRC Noon General Surg Sect CR 5/6 Noon Pulmonary Sect CR 10	<u>24</u>	<u>25</u> Noon Pediatric Committee East Room Noon IM Peer Review CR 8	<u>26</u>
<u>29</u> MEMORIAL DAY	<u>30</u>	<u>31</u> 12:15 p.m. Endovascular Committee CR 5/6		

Calendar

MAY 2017

MONDAY	1	8	15	22	29
	OB/GYN Dept. Mtg 12:15 - 1:15 p.m. CR 5 @ 6 Topic: Pelvic Floor Disorders	Second Monday 12 - 1 p.m. RSH Topic: Alzheimer's and Marijuana			Memorial Day
TUESDAY	2	9	16	23	30
	MKSAP 7:30 - 8:30 a.m. Wingate Doctors' Lounge General MDisc Cancer Conf. 12 - 1 p.m. Conf. Room 11 HMRI Lecture Series 4 - 5 p.m., RSH	MKSAP 7:30 - 8:30 a.m. Wingate Doctors' Lounge General MDisc Cancer Conf. 12 - 1 p.m. Conf. Room 11 HMRI Lecture Series 4 - 5 p.m., RSH	MKSAP 7:30 - 8:30 a.m. Wingate Doctors' Lounge General MDisc Cancer Conf. 12 - 1 p.m. Conf. Room 11 HMRI Lecture Series 4 - 5 p.m., RSH	MKSAP 7:30 - 8:30 a.m. Wingate Doctors' Lounge General MDisc Cancer Conf. 12 - 1 p.m. Conf. Room 11 HMRI Lecture Series 4 - 5 p.m., RSH	MKSAP 7:30 - 8:30 a.m. Wingate Doctors' Lounge General MDisc Cancer Conf. 12 - 1 p.m. Conf. Room 11 HMRI Lecture Series 4 - 5 p.m., RSH
WEDNESDAY	3	10	17	24	31
	Genitourinary Cancer Conference 12 - 1 p.m. Conf. Room 11 Radiology Teaching Files 12 - 1 p.m. MRI Conf. Room	Radiology Teaching Files 12 - 1 p.m. MRI Conf. Room	Genitourinary Cancer Conference 12 - 1 p.m. Conf. Room 11 Radiology Teaching Files 12 - 1 p.m. MRI Conf. Room	Radiology Teaching Files 12 - 1 p.m. MRI Conf. Room	Cardiac Cath Conf. , 7:30 - 8:30 p.m. Cardiology Conference Room Radiology Teaching Files 12 - 1 p.m. MRI Conf. Room
THURSDAY	4	11	18	25	
	Trauma Walk 7 - 8 a.m. Conf. Room B Trauma M&M 8 - 9 a.m. Conf. Room B Thoracic Cancer Conf. 12 - 1 p.m. Conf. Room 11	Surgery M&M 8 - 9 a.m. Conf. Room B	Trauma Walk 7 - 8 a.m. Conf. Room B Surgery M&M 8 - 9 a.m. Conf. Room B Thoracic Cancer Conf. 12 - 1 p.m. Conf. Room 11	Surgery M&M 8 - 9 a.m. Conf. Room B	
FRIDAY	5	12	19	26	
	Neurosurgery Grand Rounds 7:30 - 9 a.m. Conf. Room 11 Medical Grand Rounds 12 - 1 p.m. RSH MDisc Breast Cancer Conf. 12 - 1 p.m. Conf. Room 11	Neurosurgery M&M 7:30 - 9 a.m. Conf. Room 11 Medical Case Conference 12 - 1 p.m. RSH MDisc Breast Cancer Conf. 12 - 1 p.m. Conf. Room 11	Neurosurgery Grand Rounds 7:30 - 9 a.m. Conf. Room 11 Medical Case Conference 12 - 1 p.m. RSH MDisc Breast Cancer Conf. 12 - 1 p.m. Conf. Room 11	Neurosurgery Grand Rounds 7:30 - 9 a.m. Conf. Room 11 Medical Case Conference 12 - 1 p.m. RSH MDisc Breast Cancer Conf. 12 - 1 p.m. Conf. Room 11	



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 100 W California Boulevard
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 Pasadena, CA 91109-7013

ADDRESS SERVICE REQUESTED

Medical Staff Leadership

- Christopher Hedley, MD | President
- Harry Bowles, MD | President Elect
- Laura Sirott, MD | Secretary/Treasurer
- Madhu Anvekar, MD | Chair, Credentials Committee
- David Lourie, MD | Chair, Quality Management Committee
- Syeda Ali, MD | Chair, Medicine Department
- Kathy Walker, MD | Chair, OB/GYN Department
- John Rodarte, MD | Chair, Pediatrics Department
- Howard Kaufman, MD | Chair, Surgery Department

Glenn D. Littenberg, MD | Newsletter Editor-in-Chief



U.S. News & World Report ranks Huntington Hospital

#4 in Los Angeles **#9** in California

National rankings in three specialties:

Recognized as Best Regional Hospital/Los Angeles in 13 types of care!

“High Performing” in six adult specialties: Diabetes & Endocrinology, Gastroenterology & GI Surgery, Nephrology, Orthopedics, Pulmonology, Urology

“High Performing” in seven common adult procedures and conditions: Abdominal Aortic Aneurysm Repair, Heart Failure, Colon Cancer Surgery, Chronic Obstructive Pulmonary Disease (COPD), Hip Replacement, Knee Replacement, Lung Cancer Surgery