

A publication for Christiana Care Health System physicians and employees

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## Rewards Program pays for ideas that transform health care delivery

**T**he Transformation Rewards Program (TRP), a new program for fiscal year 2010, will recognize Christiana Care employees, individually and collectively, for helping to accelerate the transformation of health care delivery at Christiana Care.

To meet the unprecedented demands of the private sector, government and consumers while continuing to thrive, we are fundamentally rethinking the way we deliver health care to our patients and their families. We've already begun, through our Focus on Excellence goals, but we need to move more quickly.

### Boost the pace

TRP challenges us to boost the pace of our transformation. But how quickly we change depends on the creativity and commitment of each of you—no matter what role you play at Christiana Care. You know better than anyone else where we can be more efficient, more responsive and more cost-effective.

We look to each employee for ideas on how to improve quality and safety, to reduce costs, and to build our financial strength so we can reinvest in our mission of care and service. Even if you don't have direct patient contact, you definitely affect whether our patients would recommend Christiana Care to their friends and families—one measure of success we'll use under TRP.

### A quick look at TRP awards

Because they are key indicators of our success, patient satisfaction and financial strength are our performance

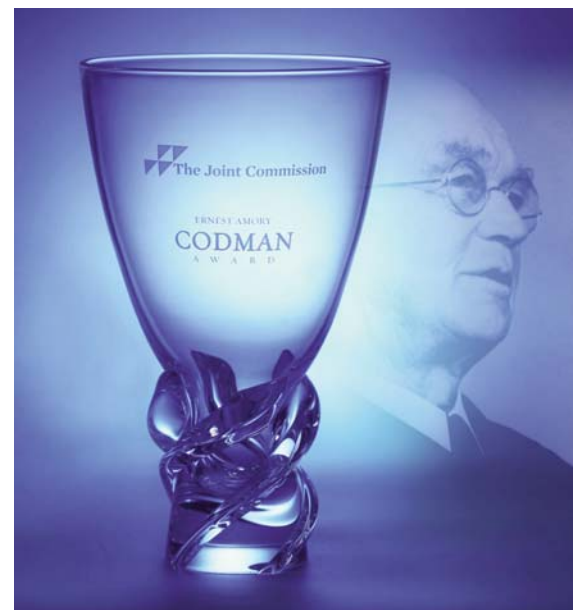
measures for TRP. When we reach specific goals in these two areas, you have the opportunity to receive from \$250 up to \$1,200.

All employees are eligible to participate in the program if these requirements are met: not participating in any other Christiana Care incentive program, being employed in the payroll period in which awards are paid, having a performance rating of at least Key Contributor for the fiscal year and working a minimum number of productive hours during the fiscal year.

### More information to come

You'll have a chance to learn more about the program in August. A brochure will be mailed to your home, and your manager will go over the program with you.

In the meantime, start thinking about how you and your team can affect our revenues, our expenses and patient satisfaction.



## Timothy J. Gardner, M.D., reflects on year as AHA president

**A**s national president of the American Heart Association, Timothy J. Gardner, M.D., medical director of the Center for Heart & Vascular Health, has turned the spotlight on Christiana Care as a top-flight health system and a leading force in cardiovascular medicine. Here are some reflections he offered after his year as AHA president ended in June.



**Timothy J. Gardner, M.D., medical director of the Center for Heart & Vascular Health and immediate past president of the American Heart Association.**

**Q. How has your tenure as AHA president affected Christiana Care?**

**A.** I've had a very busy year, representing AHA both nationally and internationally. With that has come unprecedented national exposure and recognition for Christiana Care among the public as well as among our colleagues in cardiovascular medicine. Our successes here and our ongoing initiatives have been springboards for the exchange of ideas and experiences. We have forged new partnerships and new ways forward to benefit our patients in Delaware and the region and across the country.

**Q. What are some highlights?**

**A.** My firsthand experience with the heart code program—in place for more than a decade at Christiana Care that provides immediate life-saving treatment to patients having an acute heart attack—was very useful as we kicked off Mission Lifeline, AHA's nationwide, community-based initiative to save lives and improve the care of patients with acute heart attacks.

And, Christiana Care's success in adopting AHA's Get with the Guidelines<sup>SM</sup> programs for treatment of heart attack, heart failure and stroke has enabled me to more effectively promote these programs across the country. By following these guidelines, hospitals can provide higher-quality care at less cost, which is directly in line with President Obama's goals for health care reform.

So far, 1,600 hospitals and medical centers have come on board. Our efforts at Christiana Care to become a certified Primary Stroke Center in Delaware are also in line with AHA's portfolio of key initiatives. This achievement enables us to provide the best care possible for treatment of acute ischemic stroke along with stroke prevention, education and rehabilitation. Additionally, our innovative cardiovascular screening and prevention programs continue to reach out to greater numbers in our community with risk factor education, awareness and appropriate medical interventions.

**Q. What topics received emphasis?**

**A.** In my presidential address and in my platform, I focused on primary

*“Ours is a Center for Heart and Vascular Health, not just sickness.”*

*Timothy J. Gardner, M.D.*

prevention of cardiovascular disease and stroke. As AHA president, I challenged our members—especially our physicians and scientists—to become citizen leaders in the promotion of risk factor prevention. As leaders in our communities, we must help Americans take better care of themselves and adopt healthy behaviors to reduce their risk for developing heart disease and stroke.

**Q. What are the important next steps?**

**A.** My primary goal is to get us all thinking more about wellness and prevention. Ours is a Center for Heart &

CONTINUED NEXT PAGE

Vascular Health, not just sickness. In the coming months, I would like to initiate a more global approach to coordinate cardiovascular screening and prevention activities throughout our health system. By collaborating with the Helen F. Graham Cancer Center, women's health and the diabetes programs, for example, we can work together to improve the overall health of our community.

**Q. What about health care reform?**

A. During my tenure, I've had many opportunities to participate in discussions with the new administration about health care reform – at the president's Health Care Summit, before Congress, and in support of national programs such as the Alliance for a Healthier Generation's Childhood Obesity Campaign with former President Clinton and the Clinton Foundation.

I have had the privilege of representing the AHA in the media and at many national and international meetings in Europe and South America. These have been great opportunities for me to gain a much broader understanding of our system of health care and ways we might influence the new agenda for health care reform.

I hope to share my experiences at home – especially with our physician community – to help prepare all of us for the changes to come and find ways for us to participate and lead in making high-quality health care more affordable and accessible to our patients.

## U.S. News ranks Christiana Care among nation's best hospitals

For the third straight year, Christiana Care has been ranked one of the nation's best hospitals. And it is one of only 3 percent of U.S. hospitals to make the list.

In its annual America's Best Hospital edition, *US*

*News & World Report* places Christiana Care among the top 50 facilities in two specialties: Diabetes & Endocrine Disorders, and Digestive Disorders.

Christiana Care is the only hospital in Delaware to make the list. Only 174 of the more than 4,800 hospitals nationwide evaluated this year earned this recognition.

### Testifies to exceptional care

"Receiving national recognition in these specialties is a testimony to the exceptional care provided by our doctors, nurses and allied health professionals," says Bob Laskowski, M.D., president and CEO of Christiana Care.

"To be listed three years in a row underscores our regional and national

reputation as a premier health care provider."

"Being named one of the top 50 hospitals in the U.S. in diabetes and digestive disorders is a reflection of the hard work, dedication, teamwork and Focus on Excellence of all our care-givers and vali-

dates that we are truly transforming care for our patients," says Virginia E. Collier, M.D., FACP, Hugh R. Sharp Jr., Chair of Medicine at Christiana Care.

### New patient-safety metric

To arrive at the list, the magazine ranks hospitals on several metrics, including mortality rates, reputation, number of patients cared for, quality of nursing care, use of advanced technology and presence of a trauma center. A new metric added this year, patient safety, measures how a hospital protects its patients from harm.

In the past two years, Christiana Care has also received top rankings in Ear, Nose and Throat and Endocrinology, Digestive and Respiratory disorders.



## Neurointerventional radiologist Barbara Albani, M.D. introduces another lifesaving procedure in Delaware

**C**hristiana Care is leading the way in Delaware in exciting new techniques for treating ischemic stroke, caused by clots that block blood flow to the brain.

The technique, called intra-arterial thrombolysis, combines clot-dissolving drugs and rapidly evolving medical devices that help doctors mechanically extract the clot, restoring blood flow to the brain and greatly increasing patients' chances for recovery.

"It's a combination of medicine and retrieval devices," says Barbara Albani, M.D.

A neurointerventional radiologist, Dr. Albani brought some of

these techniques with her when she came to Christiana Care in 2007 from the Cleveland Clinic Foundation. She has continued to expand those skills, lecturing on procedures that can save and improve patients' lives.

### 'Trying to get the word out'

"These techniques have been developed by doctors all over the country," she says. "We're trying to get the word out because they can make a tremendous difference in patients' outcomes."

Dr. Albani led a team that removed a clot from the brain of a woman who was rushed to the hospital with symptoms of a severe stroke. She was para-

lyzed on one side and couldn't understand speech.

"We were able to extract the clot and she had a near complete recovery," Dr. Albani says. "After two weeks in the hospital, she went home. She didn't need physical therapy."

So far, about 20 patients at Christiana Care have been treated with the techniques, with a success rate of about 30 percent. Without intervention, these patients would have had little hope.

"If patients get to my table, they're in *extremis*," Dr. Albani says. "These patients need help—and likely if they don't get it, they will be neurologically devastated or potentially expire."

For years, clots have been treated with IV medication. In 1996, the U.S. Food and Drug Administration approved the use of intravenous tissue plasminogen activator or tPA, a super clot buster used to treat stroke, the third largest cause of death in the United States. But the drug must be administered intravenously within three hours of a stroke.

"Many physicians are hesitant to use it because it can cause significant, even life-threatening, bleeding," Dr. Albani notes.

### Treating clots directly

New technologies are allowing physicians to treat clots directly. The Merci device, shaped like a corkscrew, was the first FDA approved mechanical device for stroke. The newest is a tool known as the Penumbra System, essentially a vacuum cleaner for the brain that uses catheterization and suction to remove clots.

"The penumbra is the latest device in our armamentarium against stroke," says Dr. Albani.

Through advanced imaging, doctors can see which parts of the brain have died due to lack of blood flow and also can identify the ischemic penumbra, an injured area that can be saved.

"It is the penumbra that we look for. This finding tells us there is brain that is not getting adequate blood supply, but is not dead yet," Dr. Albani explains. "That is the area of the brain we can save if we can get blood flow back to it in time."

### Extends window time

"One of the biggest hurdles we face with stroke care is that patients arrive at the emergency room too late," Dr. Albani says.

The advantage of intra-arterial techniques are that the therapies are directed at the offending lesion, allowing for fewer systemic side effects and extending the time window from three hours with IV tPA to six hours with IA. Advances in imaging technology should allow us more accurate definition of ischemic penumbra and extension of the time window for certain patients.

Dr. Albani led the team that made Delaware health care history last year, completing the first endovascular coil embolization of a ruptured brain aneurysm.

Now, patients no longer need to leave the state for treatment of this potentially fatal condition. The operation utilizes soft, springy woven platinum wires, which are tightly packed into the aneurysm to cut off blood flow into it. In time, the vessel scars around the coil pack.



**Barbara Albani, M.D.**

# Publishing, Presenting, Awards

## Publishing

**James Gill, M.D.**, co-wrote "How can primary care cross the quality chasm?" a paper published in *Annals of Family Medicine*, 2009; 7:164-169.

**Maureen A. Seckel, RN, APN, ACNS, BC, CCNS, CCRN**, and **Linda Bucher, RN, Ph.D.**, et al., published "Correlation between sedation-agitation scale and the bispectral index in ventilated patients in the intensive care unit," in *Heart and Lung*, 2009;38:336-345.

**Lee Ann Riesenberg, RN, Ph.D.**, and **Brian Little, M.D., Ph.D.**, published "Systematic review of handoff mnemonics literature," in the *American Journal of Medical Quality*; 2009;24:196-204.

**Michelle L. Collins, MSN, RN, BC**, published "Heart beats: When and why to use continuous ST-segment monitoring" in the July *Nursing 2009 Critical Care* journal.

**Nicholas J. Petrelli, M.D.**, Bank of America endowed medical director of the Helen F. Graham Cancer Center, et al., published "Initial Safety Report of NSABP C-08: A Randomized Phase III Study of Modified FOLFOX6 With or Without Bevacizumab for the Adjuvant Treatment of Patients With Stage II or III Colon Cancer" in the *Journal of Clinical Oncology*, Vol. 27, No. 20 (July 10), 2009; pp. 3385-3390.

## Presenting

Two posters were presentation in the Poster session at the 26th Annual Meeting of the American Society for Metabolic and Bariatric Surgery on June 24, 2009, in Dallas:

▀ **Kim Tran, R.Ph., James Lenhard, M.D., FACE, FACP**, et al., presented "Survey of post-bariatric surgery

patients: Characteristics associated with follow-up practices."

▀ **Raelene E. Maser, Ph.D., M. James Lenhard, M.D., Kim Tran, R.Ph., Isaias Irgau, M.D.**, and **Gail M. Wynn, M.D.**, presented "Diabetes/prediabetes does not preclude improved cardiovascular autonomic nerve function post weight loss at 18 months follow-up."

In addition, Christiana Care received a research grant award from ASMBS at the conference for the project on "Autonomic Nervous System Function and Novel Determinant of Glucose Homeostasis Following Bariatric Surgery." The co-investigators are Drs. **Peters, Lenhard and Maser**.

**Patricia Curtin, M.D., Tabassum Salam, M.D., Margot L. Savoy, M.D.**, and **Denise Lyons, MSN, APRN-BC, WISH**, received a team-based faculty development fellowship from The Eastern Pennsylvania/Delaware Geriatric Education Center. The nine-month fellowship targets interprofessional faculty/teams of educators responsible for teaching future health and social service professionals how to care for older adults in a collaborative model.

**Sarah Mullins, M.D.**, has been selected to present at the American Academy of Family Physicians Annual Scientific Assembly in October 2009 in Boston. She direct two interactive CME presentations on the integration of smoking cessation into electronic health records.

At the Med-Peds Program Directors Association and Annual Meeting in May:

**Allen Friedland, M.D., FACP, FAAP**, presented "Associations Between Internal Medicine-Pediatric Specific Electives and the Med-Peds Match."

**Allen Friedland, M.D., FACP, FAAP, Lee Ann Riesenberg, Ph.D., RN, Tony Bianchetta, M.D., Allison K. Buonocore, M.D.**, and **John Donnelly, M.D.**, presented "Learning Your Way at Christiana Care Health System."

At the Association of Pediatric Program Directors and Med-Peds Program Directors Association Annual Meeting in April:

**Allen Friedland, M.D., FACP, FAAP**, presented "The impact of combined pediatric residency programs on the educational experience of the categorical pediatric residents."

"Collaboration With OT in Treatment of Dysphagia in Severe Dementia," a two-hour seminar developed by **Sharon Kurfuerst, Ed.D, OTR/L, FAOTA**, has been accepted for presentation at the 2009 ASHA Convention in New Orleans in November.

Surgical Fire Safety Update: Best Practices for Prevention, A Live, Interactive Web Conference presented by ECRI Institute, featured **Ken Silverstein, M.D.**, Chair of the Department of Anesthesiology, instructing.

## Awards

**James Gill, M.D.**, received the "Local Medical Champion Award" from the 2009 Delaware Covering Kids and Families Campaign in April.

**Omar Khan, M.D., MHS, FAAFP**, was named one of the Best Physicians Age 40 and Under in *Philadelphia* magazine.

# Sweeping changes help Christiana Care Wound Care Center improve outcomes

*Database provides a powerhouse of information*



**Adrienne Abner (right), director of Christiana Care's Wound Care Center and Nicholas O. Biasotto, D.O., medical director.**

That powerhouse of information has enabled the center to implement clinical pathways for treating 27 types of chronic wounds, ranging from diabetic neuropathic ulcers to animal bites. Previously, there were only eight clinical pathways.

"The database allows us to see if the patients are meeting their benchmarks," Abner says.

"If the patient doesn't reach the benchmark at week four, there's a high probability the patient won't reach the benchmark at week eight.

"And the database assists us in determining how to advance in the pathway to reach the subsequent established benchmarks."

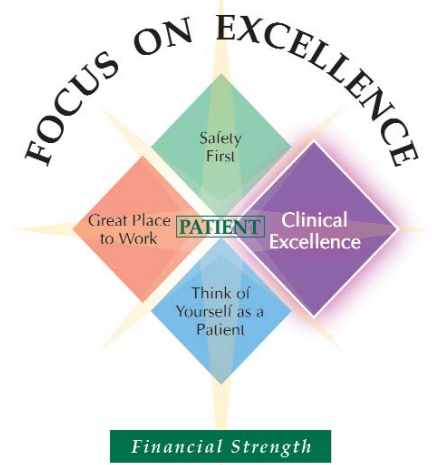
When problems are red-flagged early on, doctors can intervene with such measures as interactive dressings, skin substitutes or a change in footwear.

**A** year after rolling out sweeping new clinical pathways, Christiana Care Wound Care Center has achieved a 93.71 percent heal rate, the highest in the center's 15-year history.

That's a significant improvement from the 85- 89-percent rate the center has averaged over the past five years, says Adrienne Abner, MBA, MSN, RN, CWS, program director.

The center also has improved its days-to-healing rate from up to 35 days to an average of 30 days.

Christiana Care is part of a network of 300 wound care centers that have established a database detailing more than 2 million wounds.



Visiting nurses assist in implementing the plan of care and making changes in the patient's home environment to better promote healing.

"We can get patients back on track—and back on the road to healing," says Abner.

**Christiana Care's Riverside facility has the only hyperbaric oxygen therapy chambers available in New Castle County.**



## Breakthrough devices now available for plastic and reconstructive surgery

Wilmington Hospital now offers three breakthrough devices that improve patient safety and reduce trauma and recovery time for plastic and reconstructive surgery.

### VersaJet

Christiana Care is the only health care system in Delaware to own VersaJet technology. This device uses high-pressure sterile saline to clean and debride dirty or chronic non-healing wounds. Wilmington Hospital uses the VersaJet in the Center for Cosmetic and Reconstructive Surgery; Surgical Critical Care uses it in its trauma program.

Because it does not damage surrounding healthy tissue, the VersaJet precisely cleans wounds and expedites healing and recovery time. It also improves surgical efficiency and reduces operating room time.



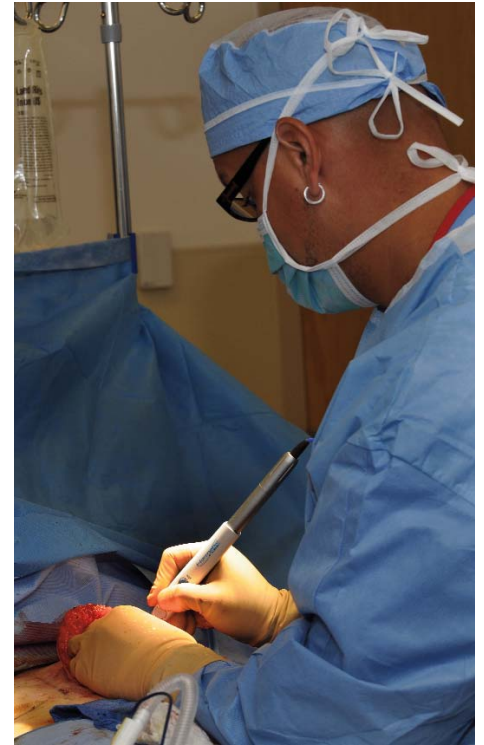
### Fractional CO2 laser

Wilmington Hospital is the first and only hospital in Delaware to use a fractional CO2 laser, also called a pixel laser, for laser skin rejuvenation.

Unlike traditional lasers, which essentially burn off a thin top layer of skin, the fractional laser produces microscopic energy light cones or cylinders that penetrate the deep dermal layers and stimulate production of collagen, the connective tissue protein that keeps skin plump and wrinkle free.

Minimally invasive, the fractional laser results in fewer complication risks such as scarring and minimal recovery time. Patients may return to work within 24 to 36 hours after treatment.

Call 800-693-CARE (2273)  
for more information.



### Harmonic Synergy device

Wilmington Hospital is also the first and only hospital in Delaware to use the Harmonic Synergy device for reconstructive and cosmetic surgery.

Rather than electrical conductive energy, the device uses mechanical ultrasonic energy that simultaneously cuts and coagulates vessels and lymphatic channels. The result is minimal thermal tissue damage and no neuromuscular stimulation—no electrical current passes through the patient.

Like the fractional laser, the Harmonic Synergy device causes less trauma to soft tissue and improves recovery time.

## Focus on Excellence - Best Practice Medicine

### Joint Commission Unannounced Survey

Consistent with our strategies for engaging staff in continuous improvement and best practices, we regularly review important topics in FOCUS to help reinforce safe-practice behaviors. These tips reinforce information and enable staff to better articulate our safety practices during an unannounced survey.

**Q.** What are my responsibilities when the surveyors arrive?

#### A. All department managers:

- Perform rounds daily.
- Use the checklist located on the FOE website by clicking the diamond on any portal.
- Report any issues to your organizational liaison or the resource room.

#### Unit/department liaisons:

### CHRISTIANA CARE COMPLIANCE HOTLINE

Christiana Care's **Compliance Hotline** can be used to report a violation of any regulation, law or legal requirement as it relates to billing or documentation. The hotline will be answered 24 hours a day, 7 days a week.

All reports go directly to Compliance Officer Ronald B. Sherman. Callers may remain anonymous.

The toll-free number is:

**877-REPORT-0 (877-737-6780).**

To learn more about Corporate Compliance, review the Corporate Compliance Policy online or **contact Sherman at 302-428-4503.**

- Contact your manager or charge nurse to discuss issues in your area
- Remind staff of the following:
  - Handwashing.
  - Medication labeling.
  - Locked medication carts.
  - Unsecured medications.
  - Completion of plan of care.
  - Pain assessment and reassessment.
  - Medication reconciliation completed.
  - Universal protocol.
  - (Outpatient only) All problem summary lists are initiated by third visit and updated.
- Report any issues to your organizational liaison or the resource room.

#### All staff:

- Perform your daily routine and assist with Survey Readiness.
- Remember:
  - No food or drinks at stations/desk areas.
  - Patient confidentiality.
  - All chart entries are dated and timed.
  - Lock all medication carts/drawers.
  - EMAR carts must have privacy screen up when not in use.

To ask questions, contact the content expert: Nichole Cunningham, 733-6858. To reach the Safety Hotline, call SAFE (7233) from within Christiana or Wilmington hospitals. From outside the hospitals, call 302-623-SAFE. Further information is available in the Archives of Best Practices. From your portal, choose Focus on Excellence, Joint Commission Readiness, Ongoing Strategies, Educational Strategies, Monthly Q&A.

## Therapeutic Notes

### Resources for Medication-Related Questions

By Vani Thiyagarajan, Pharm.D

As health care professionals, we are constantly faced with the challenge of staying current with medication literature and the medications on the Christiana Care Health System Formulary. During daily patient care activities, questions about medication administration, dosage, compatibility or simply availability may arise. When they do, where do we turn for answers?

#### Christiana Care Formulary

Our primary medication reference is the Christiana Care Health System Formulary, which may be accessed through the Formulary link at the top of the Physician or Nursing portal home page. Leaving the "Within" search criteria as "Name," enter the medication name in the search box to obtain information about dosage, administration, contraindications, precautions, warnings, adverse effects, mechanism of action, pharmacokinetics, drug interactions, nursing implications, and dosage form(s) available in the Christiana Care hospitals.

The nursing implications section contains information about dilution, rate of administration, monitoring considerations, and any special considerations.

In addition, through the formulary one may check intravenous drug compatibility.

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Therapeutic Notes, Continued

Thomson Micromedex Healthcare Series

The formulary retrieves information only on products currently available for use in the hospital. But information on medications available for use but not on formulary will not be

accessible. The Thomson Micromedex Healthcare Series, another online information database, provides medication overdose and toxicity, alternative medicines, intravenous compatibility, etc. This database can be accessed through the Physician or Nursing portal, under the "Medical Libraries" link on the left hand panel.

Another useful tool in Micromedex is the drug identification feature. When you enter the imprint, shape, color and pattern of a pill, the feature quickly identifies the medication.

If you cannot find the medication information you need in either the Christiana Care Formulary or the Micromedex, contact a pharmacist or one of the medical library staff.

Formulary Update

FORMULARY ADDITION

Table with 4 columns: Medication - Generic/Brand Name, Strength/Size, Use/Indication, Comments. Rows include Oseltamivir/Tamiflu powder for suspension and Pravastatin/Pravachol tablet.

REVISED CHRISTIANA CARE MEDICATION POLICY

Levalbuterol Prescribing of this nonformulary medication is restricted to pulmonologists. Albuterol will be substituted for other levalbuterol orders as previously approved

FORMULARY DELETIONS

Table with 2 columns: Medication Name, Reason for Deletion. Rows include Brompheniramine maleate, Chlorpheniramine and phenylephrine, and Povidone-iodine vaginal douche.

## When your time is your own, learn how to enjoy it

**O**ur days are filled with so many demands—working, walking the dog, washing the car—that it's often difficult to squeeze out an hour or two for leisure.

But leisure time is not a luxury. It's a necessity, an important pause that allows us to refresh our energy level.

The rub is that many of us expect leisure to materialize spontaneously. The fact is that there are only 24 hours in each day, and we are far more likely to enjoy leisure if we are organized and block out time for ourselves, just as we would for any worthwhile pursuit.

### Learn to say no

A good first step is learning to say no to time vampires, those tasks that sap our hours and energy. Then decide what you would like to say yes to and make specific plans to enjoy yourself.

It might not be easy at first to say no when others make demands on your time. We often feel we must say yes and wind up resenting the people who have taken up those precious hours.

But once you have established boundaries, saying no becomes less difficult.

By learning to say no, gently but firmly, we can also learn to say yes to ourselves. You'll set yourself up for success by learning not to waste your own time.

Instead of letting routine errands and household chores drag out over an entire weekend, try taking care of them right away so you will have more free time. (Hint: do the task you dislike most first so you don't burn energy avoiding it.)

### Know yourself

Do you have a running list in your brain of things you would enjoy if you only had the time?

It could be as simple as reading a book or as challenging as learning to paint tranquil landscapes.

Write down your list and be as specific as possible. Instead of jotting "spend more time in the garden," you might write "plant a rose garden by the back gate." Instead of "exercise more," you might add "take a yoga class once a week" or "walk three miles every Sunday" to your list.

By making a list of leisure activities you enjoy, you are far more likely to find ways you can integrate those activities into your life.



## Upcoming events

Westside Family Healthcare, a non-profit community health center in New Castle County, hosts the 19th annual 5K Westside Way Race/Walk, on Wednesday, Aug. 5 at the Wilmington Riverfront. Registration begins at 5:30 p.m., the run/walk starts at 6:30 p.m. Proceeds benefit uninsured and underserved families by providing medical, dental and mental health care. Register online at [www.races2run.com](http://www.races2run.com). Contact Sarah Noonan at 302-656-8292.

Christiana Care is sponsoring the 18th Annual American Heart Walk on Sunday, Sept. 13 at the Wilmington Riverfront. In addition to raising funds to fight heart disease and stroke, the American Heart Walk promotes awareness about the diseases. William S. Weintraub, M.D., FACC, chief of Cardiology and director of the Christiana Center for Outcomes Research, is honorary chair. Join one of several teams from Christiana Care already listed on the Heart Walk Web site. Or, call your coworkers, friends and family and start your own team. Be sure to register your team on the Web site. If your team raises the most money or has the most walkers, you and your team will win a pizza party.

The next two presentations for the **Implantable Cardioverter Defibrillator (ICD) Support Group Series** for those who have or plan to receive an ICD, include:

- Aug. 11, 6-7:30 p.m., Vanessa Downing, Ph.D., Behavioral Health Coordinator for the Center for Heart & Vascular Health, "Stress Management in Action: Techniques & Practice."
- Sept. 8, 6-7:30 p.m., Linda Lewis, RN, BSN, and Sonya Stover, RN, BSN, CCRN, Cardiovascular Nursing, "Heart Rhythms and What They Mean."

Call 737-8405 and request the **Christiana Care blood drive** now to schedule your appointment at the on-site blood drive Friday, Aug. 14 in the auditorium of the Ammon Center. Appointments begin at 8:30 a.m.

The 6th annual **21st Century Visions of Nursing Conference**, hosted by Christiana Care Sept. 16-17 at the John H. Ammon Medical Education Center, focuses on pacemakers, penetrating trauma, VAP, obesity, compartment syndrome, renal failure and pulmonary hypertension. For more information and to register, contact Carrie Bonnett at 302-428-4922 or visit [www.christianacare.org/vision-sofnursing](http://www.christianacare.org/vision-sofnursing).

The **10th Anniversary of Wilmington Wellness Days** is Sept. 19 on Rodney Square, 11 a.m.-3 p.m. In the past, Christiana Cares has presented an ASK the Doctor tent, cholesterol, diabetes and cancer screenings, a Lunch and Learn, plus much more. Wilmington Wellness Day reaches more than 3,000 individuals. If you or

your team would like to participate and reach out to the Wilmington community please call Nora Katurakes at 623-4628.

The **3rd Annual Renal and Hypertension Symposium** will be Sept. 26.

The **2nd Annual Kidney Walk**, sponsored by Christiana Care, will be held Oct. 4 at 10 a.m. at Rockford Park in Wilmington. Visit [www.kidneywalk.org](http://www.kidneywalk.org) for more information.

The Christiana Care **Women's Fall Health Lecture Series** features monthly speakers addressing a wide range of health care topics. Here are the first three in the lineup:

- Sept. 17 – "Cosmetic Surgery: Separating Fact from Fiction," Mehdi Balakhani, M.D., Chief, Plastic/Reconstructive Surgery section
  - Oct. 13 – "Legs, Veins and Circulation Health," with Christiana Care Vascular Specialists Inc. surgeons Michael A. Dignazio, M.D., and Sonya N. Tuerff, M.D.
  - Nov. 10 – "The Healing Power of Forgiveness," with Margaret E. Keenan, Ph.D., clinical psychologist.
- All lectures above are at the John H. Ammon Medical Education Center at Christiana Hospital from 7-8:30 p.m. Lectures are free. Seating is limited. Reserve your seat today at [www.christianacare.org/lectures](http://www.christianacare.org/lectures) or 800-693-CARE (2273).

## Welcome New Medical-Dental Staff

### Emergency Medicine

**Matthew T. Judd, D.O.**

Christiana Hospital  
Department of Emergency Medicine,  
RM 1071  
Newark, Del. 19718  
Phone: (302) 733-1840

**Jaime Massucci, M.D.**

Department of Emergency Medicine  
Christiana Hospital, Room 1071  
Phone: (302) 733-3904  
  
Charles Schmier, M.D.  
Christiana Hospital  
Department of Emergency Medicine  
Newark, Del. 19718  
Phone: (302) 733-1840

### Family & Community Medicine

**Charles G. Case, M.D.**

601 New Castle Avenue  
Wilmington, Del. 19801  
Phone: (302) 655-6187

### Medicine/Internal Medicine

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### Oral & Maxillofacial Surgery & Hospital Dentistry/General Dentistry

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## M-D Staff Briefs

On July 31, **Neurology Associates** will become a part of the Christiana Care Health System, relaunching as **Christiana Care Neurology Specialists**, with doctors **Sung Ho Bae, M.D.**, **Michael Carunchio, M.D.**, **Lanny Edelson, M.D.**, **Richard Fischer, M.D.**, **Douglas Gersh, M.D.**, and **Lisa Leschek-Gelman, M.D.**

Effective August 3, **Timothy Langan, M.D.**, board-certified physician in internal medicine, begins accepting adult patients at the new **Christiana Care Greenville Family Practice**, 3706 Kennett Pike, Greenville. For information, call 302-623-6300.

Board-certified dermatologist **Jonathon Zieff, D.O.**, has joined the **Medical Group of Christiana Care**. Dr. Zieff specializes in consultative care for medical and surgical dermatology patients; he will see patients at Christiana (HCCC) and Wilmington (WHHC) campuses.

## M-D Staff Briefs

**Vinay Maheshwari, M.D., FCCP**, has been named medical director of Respiratory Therapy at Christiana Care.

"The Department of Respiratory Therapy is a well-organized unit, with what I believe are some of the best health care providers in our entire health care system," he says. "I am excited to help continue the high standard of excellence that they achieve and hope to be a positive force, particularly in expanding the areas of research and education."

Dr. Maheshwari is a graduate of the Medical College of Virginia/Virginia Commonwealth University, where he completed his residency in internal medicine. He was a fellow in the Department of Pulmonary, Critical Care and Sleep Medicine, New England Medical Center/Tufts University Hospital.

Before joining Pulmonary Associates, PA, in January 2007, he was medical director of the intensive care unit at Cambridge Hospital in Boston. In 2006, he was Teacher of the Year at Cambridge Health Alliance/Harvard Medical University.



**Vinay Maheshwari, M.D.**

## Joseph "Ted" Kestner, M.D., passes torch as Respiratory medical director



**Joseph "Ted" Kestner, M.D., FCCP**

**F**or 25 years, Joseph "Ted" Kestner, M.D., brought skill, dedication and compassion to his work as medical director of the Department of Respiratory Care.

In July, he passes the torch to Vinay Maheshwari, M.D., who has served as associate medical director of the department for the past year.

"I can say sincerely that these have been wonderful years," Dr. Kestner says. He says one of his greatest joys as medical director is working with an outstanding staff of professionals. "They are excellent, well trained and well motivated," he says. "Their whole focus is to help the patients."

A staunch advocate for patients and an astute listener with a caring bedside manner, Dr. Kestner believes the human touch is an essential component of the healing process.

During his tenure with Respiratory Care, Dr. Kestner has witnessed important advances in pulmonary medicine. In 1975, when he performed

the first fiberoptic bronchoscopy in Delaware at what is now Wilmington Hospital, an iron lung still stood in the basement.

"There's been a tremendous evolution in ventilators and monitoring that has helped us take better care of patients," he says.

There was also a basketball court in the basement, where the young doctor shot hoops. "It wasn't a very good court because the ceiling was low," he recalls.

Dr. Kestner has served Christiana Care and his profession in many roles.

In 1985, Dr. Kestner helped to orchestrate the move to the new Christiana Hospital. A strong supporter of the Christiana Care Health System, he has served on the board of directors of the Christiana Care Corporation and is currently a trustee.

His numerous other appointments include head, Section of Pulmonary Disease, and president, Medical-Dental Staff. He has served as president of both the New Castle County Medical Society and the American Lung Association.

In recent years, he has been president of the Delaware Academy of Medicine and a board member of the National Association for Medical Directors of Respiratory Care. He is currently governor for Delaware for the American College of Chest Physicians.

Dr. Kestner will continue to care for patients as an attending physician but believes the department is in good hands.

"Dr. Maheshwari will be an excellent medical director," he says.

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## Nursing Essays – 2009

### *Honorable Mention*

#### **A Silent Goodbye**

Carmen Pal, RN, BSN, PCCN  
3D Christiana Hospital

I remember coming to work that morning, an ordinary morning, the unit busy, but manageable. Our unit was expanding in size, so we had just opened another district.

One of our patients had a low blood pressure and complained of chest pressure on and off. We called Cardiology and started a heart code.

During the hustle and bustle of getting the patient off to the cath lab, someone mentioned that her husband was also a patient in the hospital, actually a patient here on our unit. Of course my thoughts then went to him. I wonder if anyone has talked to him about his wife's status? I learned his family was here and was doing their best to keep him informed, yet keep him positive, as he was seriously ill.

It was a while after the patient had gone to the cath lab that the cath lab called. She had passed away during the procedure. The family was aware, and on their way up to tell her husband, who was still on our unit.

As the family returned we shared our sympathies with them and we discussed what the next steps should be. As they went in to talk to the husband, Cherie and I went down to the cath lab, and brought the wife back up to an empty room, so that the family and the husband could have some private time to say goodbye. The husband was not stable enough, or strong enough, to tolerate being in a wheelchair, so we moved him in his bed into the room where his wife lay.

I remember wondering, as we pushed his bed over, "what do I say to a man who is seriously ill himself and has just lost the love of his life?"

Empathizing with this patient and family, while holding back tears, I simply said, "I'm so sorry" as we made the turn to enter the room. With his physical condition, getting him in the best position to see her was challenging to say the least, since he was unable to turn his head.

We arranged the beds the best we could, but it didn't seem intimate enough for a husband and wife of over fifty years to say goodbye. The rest of the family was all there, embracing and crying. I made eye contact with Donna, my nurse manager, and Mary Ann, who were helping to arrange the beds, and we knew what needed to be done. I gently lifted his hand, and placed it in his wife's hand, for what was to be the last time.

As nurses we are there at some of life's most meaningful moments: birth, death, tragedy, healing. But I never imagined I would be able to help a couple that had been married for over fifty years hold hands for the last time.

Sadly the husband was unable to attend her memorial services, but he eventually was discharged to home. When I decided to become a nurse, I knew that I would help impact patients and their families, but I never imagined the emotions and special, private life moments you get to witness and be a part of. I will never forget the image of those two hands, grasped in a silent goodbye, and the gentle love that filled that room.

## UpClose: Volunteer Earl Woodlen

*'Just ask, and Earl gets it done.'*

In his more than 2,800 hours as a volunteer at Wilmington Hospital, Earl Woodlen has worked everywhere from the Print Room to Physical Therapy.

"Wherever we need help, Earl is willing to go," says Volunteer Coordinator Lily Tanverdi. "Just ask Earl for a favor and it gets done—no matter what or where it is."

### Inspired by caregivers

Woodlen, who was born in Wilmington Hospital, decided to become a volunteer when his grandmother was in the hospital. Watching the nurses and staff care for her, he decided, "I want to be a part of this." The day she died. He turned in his application.

In his current assignment, Earl drives the Courtesy Cart, shepherding people from the bus stop and parking garage to the hospital and back again. "I look forward to driving people," he says.

"Earl is a great example of how volunteers are helping transform Christiana Care every day," says Margarita Rodriguez-Duffy, manager, Volunteer & Student Administration. Anyone interested in being a courtesy taxi volunteer or joining the Christiana Care volunteer team please see us online at [www.christianacare.org/volunteer](http://www.christianacare.org/volunteer).

### Always has a smile

According to Tanverdi, Woodlen treats everyone with kindness and respect and always has a smile for people,



**Earl Woodlen of Wilmington has logged more than 2,800 hours as a Christiana Care volunteer. When not at Wilmington Hospital, he is often found at the Harriet Tubman Center, a halfway house he personally runs and funds.**

never asking for anything in return. "He gives of himself so freely—not only to people here but also to many in our community who are struggling," she says.

When not at the hospital, Woodlen runs the Harriet Tubman Center, a non-profit halfway house he funds himself. "I love helping people the world has given up on," he says.

In his 20s, working in construction, Woodlen managed to buy two houses in Wilmington. One of them is now the center, where he helps men coming out of prison put their lives back together. He plans to expand into the

other house, but raising funds is increasingly difficult.

### Doesn't give up

Woodlen doesn't give up, though.

"I believe that if you keep plugging away at things, something good will happen."

Woodlen is certainly something good happening to Christiana Care. "Earl frequently thanks me for allowing him to volunteer," says Tanverdi, "but we're privileged to have him on our volunteer team."

Last year Christiana Care's volunteer team of nearly 1,300 people put in more than 126,000 hours of service.

## John Piper, M.D., honored for 16 years as Christiana Care infection control officer



**J**ohn P. Piper, M.D., was recognized for 15 years' service as Christiana Care's Infection Control Officer at Medical Grand Rounds on July 9.

"As a direct result of Dr. Piper's leadership of the Infection Control Program, Christiana Care has developed an increased ability to prevent hospital-acquired infections and to contain them when they occur," says Virginia U. Collier, M.D., Hugh R. Sharp Jr. Chair of Medicine. "He has been instrumental in promoting our culture of patient safety and in so doing to prevent harm to our patients."

Marci Drees, M.D. assumed the position of Infection Control Officer on July 1. Dr. Piper continues to serve patients as an attending physician at Christiana Care and a member of Infectious Disease Associates.

**John P. Piper, M.D., receives a plaque from Virginia U. Collier, M.D., honoring his service as Christiana Care's Infection Control Officer from 1994-2009.**