Preserving Dignity and Independence
A system-wide advanced illness initiative is identifying new ways to care for metropolitan New York’s growing numbers of aging and chronically ill patients and their families.

Cold Spring Harbor Lab Partnership
Patients will benefit from a unique integration of cancer research and cancer care.

Preparing for Outbreaks
As North Shore-LIJ devoted resources to a new biological containment unit, health system staff members volunteered for training on Ebola treatment.

Hybrid Heart Innovation
Two specialists at Staten Island University Hospital devised a new solution for a patient with intractable atrial fibrillation (afib).

The Health Force Course
Dozens of students embarked on a 16-week program to get ready for big changes in medical coding this fall.

On the Cover
A student in the health science library at the Hofstra North Shore-LIJ School of Medicine. Read about the school’s recent expansion and full certification on page 12 and the new Hofstra North Shore-LIJ School of Graduate Nursing and Health Professions.
Strategic and Transformative Growth to Fulfill Our Mission

Without question, the breadth and depth of the health system is one of North Shore-LIJ’s greatest strengths. We’re already the 11th largest, nonprofit healthcare provider in the country, with 19 hospitals, more than 400 outpatient physician practices and 54,000 employees. With Maimonides Medical Center in Brooklyn and Peconic Bay Medical Center in Riverhead preparing to join the health system (see stories on pages 10 and 14), North Shore-LIJ could soon have 21 hospitals and well over 60,000 employees, expanding our ranking as New York State’s largest private employer.

All of us need to recognize that these strategic growth initiatives are positive developments because they enhance our ability to meet the changing health and wellness needs of the many communities we serve, and help us improve our internal processes to enhance patient care and reduce costs to consumers.

What makes North Shore-LIJ unique is that we have built a truly integrated health system over the past 20+ years. We offer a full continuum of services that includes inpatient, outpatient, long-term care, home care and hospice care, not to mention our own health insurance business in CareConnect. We deploy consistent metrics, standards and protocols to continually improve patient care.

Managing Advanced Illness

This issue of The New Standard includes some great examples of steps we are taking to improve the way we coordinate care for our patients, including stories about our advanced illness management initiatives (pages 4 to 7). While people are living longer than any time in history, many elderly are dealing with a multitude of chronic illnesses and challenges, putting an enormous strain on the families and providers who care for them. Clinicians from across the health system are collaborating on an innovative strategy to better manage the care we deliver to older adults and those living with advanced illness to prevent unwanted care, reduce hospitalizations and help people live independently for as long as possible.

Increasing the cohort of nurse practitioners and physician assistants needed to meet the growing demand for health care is also the overarching goal of the new School of Graduate Nursing and Health Professions announced recently by the health system and Hofstra University (see page 8).

Strategic Partnerships

Fostering strategic partnerships has been another key strategy that our health system has used to enhance clinical care, as explained in the story about our new collaboration with Cold Spring Harbor Laboratory (page 11). Similarly, the new relationships we are pursuing with Maimonides and Peconic Bay medical centers will allow us to position those hospitals as North Shore-LIJ’s regional centers in Brooklyn and eastern Long Island.

These endeavors are vital pieces of our comprehensive integration strategy. We are no longer simply a provider network that takes care of people when they are sick or injured. We are transitioning into a health and wellness organization as we take responsibility for “managing” people’s care. It’s a mission in which all of us can take great pride.
With an eye toward preventing unwanted care and helping individuals live independently for as long as possible, clinicians from across the North Shore-LI Health System are collaborating on an innovative strategy to better coordinate care for older adults and those living with advanced illness.

Tapping into resources from throughout the organization, the health system is creating a Center for Healthy Aging to serve seniors and their caregivers in addressing the complex health needs of this rapidly growing, vulnerable segment of the population. This center will coordinate care delivered by North Shore-LIJ entities that interact with the elderly and advanced-illness patients, including providers of home care, geriatric medicine, palliative medicine and hospice care. The center will not only support existing programs but also develop new ones necessary to meet the growing community need for high-quality, community-based care.

As people live longer, they require more specialized geriatric and advanced illness care. According to the National Center for Health Statistics, the average American will live to an age of 78.5, with millions more living far longer. In addition, there are currently 44 million Medicare beneficiaries (some 15 percent of the US population), with enrollment expected to rise to 79 million by 2030. Moreover, 90 percent of Medicare beneficiaries have one or more chronic conditions — such as congestive heart failure, high blood pressure, diabetes, chronic lung disease, cancer, heart disease, kidney failure, liver disease and dementia — and more than half have at least two.

"Hot Spots"

North Shore-LIJ planning experts have analyzed population records in the metropolitan New York area and identified major "hot spots" of increased numbers of people aged 65 and older (see graphic). "This means there will be higher numbers of hospitalization in those communities, and managing the care of patients older than 65, 75 or 85 will be very difficult, with patients spending time in care venues that they don’t want or need,” said Kristofer Smith, MD, vice president and medical director of North Shore-LIJ Care Solutions, the health system’s care management organization. “Our goal is to help patients and their loved ones through the difficult part of their journey, to coordinate care and help patients find the right way into the right clinical program.”

This new model alters the traditional role of hospitals. “Hospitals are geared for treating acute illness, not managing chronic disease,” said Maria Torroella Carney, MD, North Shore-LIJ’s chief of geriatric and palliative medicine. “Today, people are living longer, with two to four years of disability and chronic illness situations. It’s a new era and we need to expand programs to help people get medical care and other resources in their own homes.” One of the new programs is House Calls, where doctors and nurses provide primary and palliative care to homebound patients.

The North Shore-LIJ Home Care Network plays a vital role in providing post-acute health services at home to older adults in the New York metropolitan area. While the agency’s health care professionals treat patients with short-term health issues, its clinical teams also manage patients with long-term chronic conditions such as asthma, congestive heart failure, stroke and diabetes.

Comfort During Crisis

Another model of care to help people with serious chronic or life-threatening illnesses is to provide palliative care, a medical specialty that focuses on relieving pain and symptoms while enhancing quality of life. While palliative care is more commonly provided in the hospital, Dr. Carney said a palliative approach is available at home and in nursing homes.

Dr. Carney said that North Shore-LIJ is accelerating outreach efforts to patients, family members and their caregivers to enhance awareness and education when dealing with advanced illness or possible end-of-life care. This period in a person’s life is often a time of high hospital utilization. “We are working with families and patients to better align resources to help them through their crisis and the dilemmas many face during the end-of-life stage,” Dr. Carney said.

“In New York, the average length of stay in hospice is..."
eight days, the lowest hospital stay in the nation,” said Dr. Carney. “Physicians and families are referring very late and we could serve more people for a longer time.”

“There’s a big misconception about hospice care,” said Maureen Hinkelman, chief executive officer of North Shore-LIJ’s Hospice Care Network. “Many people think hospice is for the last few days of life but patients are eligible for care much longer if a doctor certifies that the person has six months or less to live.”

The majority of patients receive hospice care at home but some people receive care in nursing homes or a hospice facility. Hospice services offer personalized medical care and emotional comfort for patients facing the last stages of life-limiting illness, with the goal of patients staying at home surrounded by family and loved ones.

Preserving Dignity

“North Shore-LIJ is beginning to put in place a structure and coordinating body to coordinate our response to the ever-increasing social and medical needs of people with advanced illness,” Dr. Smith said. “We want to help people avoid suffering and bring them greater dignity by doing the right thing — and doing what the individuals and their families want.”

“We are not starting from scratch, rather we are re-engineering our programs,” explained Dr. Smith. “North Shore-LIJ has substantial programs – we have enormous clinical programs, clinical leadership and executive support. Our initiative requires creative thinking and new approaches to how and where resources and care is made available.”

Other programs through the Healthy Aging Center will include a resource center and support network for patients, caregivers and health care providers. It will also extend geriatric and palliative expertise to serve more people in need, examine new payment models and reimbursement strategies around high-value care, and partner with academic and research colleagues in the health system to ensure quality improvement.
Newly trained improvement advisors and their colleagues are enhancing care for patients with advanced illness as part of the Advanced Illness Collaborative. They are using new ways to improve the quality of life for some of the North Shore-LIJ Health System’s most vulnerable patients with skills learned from the Improvement Advisor Professional Development Program.

Eighteen staff members recently completed the intensive course, which is available only from the Institute for Healthcare Improvement (IHI). Advanced illness is any disease that is treatable but incurable, such as congestive heart failure or chronic obstructive pulmonary disease (COPD).

Clinicians often grapple with whether aggressive treatment or supportive care will best maintain the quality of life for a patient with advanced illness. It is important to provide care in accordance with the patient’s goals and wishes, said Phyllis Yezzo, RN, DNP, North Shore-LIJ’s assistant vice president of clinical transformation and a recent graduate of the program.

“Improvement advisors trained for 10 months, using IHI’s model for improvement to identify problems and make valuable changes throughout our organization,” said Dr. Yezzo. She added, “It’s important for patients, families and caregivers to have the conversation about what care patients want.”

Some of the improvement advisors’ success stories include:

• LIJ Medical Center identified patients with advanced illness in the Emergency Department, conducted goals of care conversations and made referrals to palliative care or hospice care in lieu of admission, as appropriate.
• The North Shore-LIJ Department of Medicine developed an intervention to help keep individuals with advanced illness and moderate-to-severe dementia out of the hospital by using hospice services and to increasing early discussions about goals of care.
• The Forest Hills Hospital team improved outcomes for patients with advanced COPD and congestive heart failure by increasing referrals to palliative care programs and initiating early conversations about patients’ wishes about their disease’s progress.

Coordination of care for patients with advanced illness can be replicated in other treatment areas, said Martin Doerfler, MD, senior vice president of clinical strategy and development and executive sponsor of the collaborative. “Our improvement advisors will be able to use their skills to coordinate and enhance care in other health care situations. This project better prepares North Shore-LIJ to be a self-learning organization providing the highest quality care in the future,” Dr. Doerfler said.
If a close relative got admitted to an intensive care unit (ICU) with an advanced illness, would you know the type of care your loved one would want?

“Ideally, conversations about treatment preferences would happen before a really sick person comes to an emergency department or ICU. Often, they do not,” said Martin Doerfler, MD, senior vice president of clinical strategy and development and associate chief medical officer at the North Shore-LIJ Health System. “As clinicians, we want the treatment we provide to align with what patients want and need.”

In the US, almost everyone (90 percent) thinks it’s important to talk about their families’ and their own wishes for end-of-life care. Yet only 27 percent of people have had these discussions, according to the Conversation Project of the Institute for Healthcare Improvement (IHI).

A new health system-wide critical care initiative addresses this issue head-on. It focuses on making time for these important conversations soon after admission to an ICU — among clinicians first, then with family members and patients. The effort is connected to North Shore-LIJ’s collaborative improvement project with the IHI, Transforming the Experiences of People with Advanced Illness.

To develop the initiative, Dr. Doerfler and his improvement science team worked with members of North Shore-LIJ’s Critical Care Committee to establish a physician advisory group. This group includes critical care, geriatric and palliative care specialists, as well as attending physicians who regularly admit their patients to ICUs, such as pulmonary specialists or colorectal surgeons.

The physician advisory group devised this protocol: When a patient is admitted to an ICU, a clinician identifies whether the patient has advanced illness, based on criteria established by the physician advisory group. Within 48 hours, all the patient’s care team members meet and review the clinical details. Within the next 48 hours, clinicians meet with the patient’s loved ones and the patient, if feasible. They discuss the patient as a person, whether the condition is chronic or acute, and whether the patient wants aggressive care or not.

A New Format

The ICU project seeks to provide more comfort and clarity by using an “ask, tell, ask” conversational format, Dr. Doerfler said. He added: “Routinely, physicians have sat down and given information first. But sometimes this approach gives patients and families the feeling that we don’t care about who they are as people.

“The planned process lets patients or family members tell us directly about themselves first — before we tell them anything,” he said. “Then we ask questions like, ‘Do you know what we discussed?’ ‘What would you like your care to look like?’ ‘What are your priorities?’”

All North Shore-LIJ ICUs have made accommodations to standardize the conversations by assigning someone to schedule meeting times and conference rooms, and identify and notify participants. “If you don’t do this as a regular routine, meetings are harder to set up. We are re-engineering the process so it happens in a reliable manner,” Dr. Doerfler said.

“Setting aside time for these conversations earlier in a patient’s ICU stay helps to ensure we deliver care that corresponds to their wishes,” said Dr. Doerfler. “That helps us to do a better job.”
HEMPSTEAD — Hofstra University and North Shore-LIJ Health System have launched the Hofstra North Shore-LIJ School of Graduate Nursing and Health Professions. Designed to meet the increasing need for nurse practitioners (NPs) and physician assistants (PAs) to deliver community-based health care, the new venture expands the organizations’ successful medical school partnership.

Pending New York State approval, the school will offer a three-year, part-time program leading to a Master of Science degree in nursing as a family nurse practitioner or an adult-gerontology acute care nurse practitioner.

Kathleen Gallo, RN, PhD, senior vice president and chief learning officer at North Shore-LIJ Health System and an associate professor of science education at the Hofstra North Shore-LIJ School of Medicine, has been appointed founding dean of the school.

In addition to nursing, the Hofstra North Shore-LIJ School of Graduate Nursing and Health Professions will also house the university’s two existing programs in PA studies — a dual-degree program and a graduate program. The 2016 US News and World Report “Best Graduate Schools” report ranks the PA graduate program as 70th in the nation.

More Options

“This is a natural next step in our partnership with the North Shore-LIJ Health System,” said Hofstra University President Stuart Rabinowitz. “Meeting the need for accessible, high-quality health care requires well-trained medical professionals of all types. The Hofstra North Shore-LIJ School of Graduate Nursing and Health Professions, together with the medical school and our School of Health Sciences and Human Services, will help build a comprehensive network of health care options that will serve our region for decades to come.”

The Hofstra North Shore-LIJ School of Graduate Nursing and Health Professions will continue the innovative, holistic, patient-centered approach pioneered by the medical school, an educational model that focuses on treating people rather than illnesses, and emphasizes community-based care. Plans call for a first-year class of 30 nursing students, 50 in the second year and 65 in subsequent years.

“Through this new school, we are taking another step toward redesigning medical and nursing education to reflect the rapid changes occurring in the way health care is accessed, delivered and paid for in this country,” said North...
Shore-LIJ President and CEO Michael Dowling. “In keeping with our hands-on approach to education, North Shore-LIJ’s 19 hospitals, more than 400 outpatient facilities, our simulation center and all other resources across the health system will be available as learning laboratories for students in this innovative new program.”

**Future Trends**

The number of NPs in the United States has doubled over the last decade, from 106,000 in 2004 to 205,000 in 2014, according to the American Academy of Nurse Practitioners. With the impact of health care legislation, increased emphasis on preventive care and an aging population, the number of advanced nursing jobs (such as NPs) will increase by 31 percent by 2022, according to the Bureau of Labor Statistics’ projections. Furthermore, *US News and World Report* ranks NP and PA among the top 10 best jobs in 2015.

“With the Hofstra North Shore-LIJ School of Medicine and this new school focused on the training of future NPs and PAs, we have a unique opportunity to pursue an interprofessional education curriculum that differs from any other in the New York area,” said Dr. Gallo. “As our population continues to age and as more people become insured as part of the Affordable Care Act, NPs and PAs will both be key in meeting the growing demand for care.”

See a video about the Hofstra North Shore-LIJ Graduate School of Nursing and Health Professions at [bit.ly/NPsPAs](http://bit.ly/NPsPAs).

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The New York State Legislature enacted a consumer protection law against surprise medical bills on April 1.

The *Emergency Medical Services and Surprise Bills* law requires physicians, ambulatory practices and hospitals to:

- notify patients about which health plans they participate in; and
- share the names and contact information for all providers to be involved in the patient’s scheduled care, including those who are out-of-network.

For scheduled services that are out-of-network, the new law requires providers to disclose a patient cost estimate prior to providing nonemergency care. For emergency care, patients are required to pay only their in-network cost, regardless of whether the participating providers are enrolled in the patients’ health plan.

“North Shore-LIJ has a long-standing history of transparency with patients to minimize the occurrence of ‘surprise’ medical bills,” said Mark Solazzo, executive vice president and chief operating officer. “The introduction of this new law requires physicians, ambulatory practices and hospitals to refine certain processes and patient materials to ensure full compliance.”

Learn more about the law and what it means for North Shore-LIJ and our patient interactions on HealthPort.
RIVERHEAD — The Peconic Bay Medical Center (PBMC) Board of Directors recently approved a definitive agreement to become a full member of the North Shore-LIJ Health System after completion of contractual approvals and government regulatory review.

“After an exhaustive strategic planning process, we’ve concluded that partnering with North Shore-LIJ is in the best interest of the 220,000 men, women and children who depend on PBMC,” said Sherry Patterson, chair of the PBMC board. “This decision ensures we would not only meet the current needs but also the future health and wellness challenges of central Suffolk County and eastern Long Island. It would also establish important new regional medical services and provide long-term stability for our patients during a time of great volatility in health care.”

Upon receiving all approvals, PBMC would bring to North Shore-LIJ a 200-bed community teaching hospital and a skilled nursing/rehabilitation facility that have been serving the region for 64 years. It would join 19 other hospitals within the health system, extending North Shore-LIJ’s presence into eastern Long Island while joining the health system’s existing Suffolk County hospitals: Huntington Hospital, Southside Hospital in Bay Shore and South Oaks Hospital in Amityville. PBMC was an affiliate member of the health system between 2000 and 2006.

“The North Shore-LIJ Health System is thrilled to renew its relationship with Peconic Bay Medical Center, which has a long, proud history of service to communities disbursed throughout a wide geographic area,” said Michael Dowling, North Shore-LIJ’s president and CEO. “All of us recognize the challenges facing health care providers nationwide as we adapt to changes in the way health care is accessed, delivered and paid for. By working in an integrated and collaborative way, and investing in new initiatives and key clinical programs aimed at attracting new customers, we’re confident we can position Peconic Bay Medical Center for future success while fulfilling our shared mission of improving the quality of life in our communities.”

Peconic Bay Medical Center has approximately 1,300 employees and cares for more than 7,000 inpatients and 168,000 outpatients annually. The hospital, a New York State-designated stroke center, features a highly regarded Emergency Department that serves about 37,000 patients a year, an advanced surgery center, centers of excellence in joint replacement and bariatric surgery, and a range of other medical services. The hospital also operates a certified home health agency, a 60-bed skilled nursing and rehabilitation center, a six-bed palliative care center, an advanced ambulatory and urgent care campus in Manorville, and a growing network of community-based family care and specialty physician practices throughout central and eastern Suffolk County.

Above: Peconic Bay Medical Center’s 200-bed inpatient facility in Riverhead.
COLD SPRING HARBOR — Cold Spring Harbor Laboratory (CSHL) and the North Shore-LIJ Health System have entered a strategic affiliation. The agreement aligns CSHL's world-class cancer research with North Shore-LIJ's growing network of clinical services, which encompass more than 16,000 new cancer cases annually across the metropolitan New York area.

The new partnership will benefit from the investment of more than $120 million to accelerate cancer research, diagnosis and treatment. The funds will be used to advance cancer therapeutics research, develop a new clinical cancer research unit at the North Shore-LIJ Cancer Institute’s headquarters in Lake Success to support early-phase clinical studies of new cancer therapies, and recruit and train more oncology clinician-scientists.

“This is a transformative affiliation for both institutions, bringing the cutting-edge basic discovery science and translational cancer research at CSHL to one of the largest cancer treatment centers in the United States,” said Bruce Stillman, PhD, CSHL’s president and CEO. “The unique integration of research scientists, clinical translational researchers and cancer clinicians promises to speed the advance of novel cancer diagnostics and therapeutics to patients in the region.”

“Bringing the scientists of Cold Spring Harbor Laboratory together with the more than 200 academic oncologists and clinicians of the North Shore-LIJ Cancer Institute will transform our approach to cancer research and treatment,” said Michael Dowling, North Shore-LIJ’s president and CEO. “North Shore-LIJ oncologists will make CSHL’s promising preclinical research available as innovative trials to select cancer patients at a much earlier stage. This will build on the clinical and translational research programs the health system has been offering its patients for more than 30 years and establish our Cancer Institute as a destination for pioneering cancer therapies.”

 Winning Formulas
The CSHL/North Shore-LIJ affiliation will attract cancer researchers and clinicians to the region. As part of the collaboration, clinician-
Room to Grow at the Hofstra North Shore-LIJ School of Medicine

By Adrienne Stoller

HEMPSTEAD — The same day it unveiled its new 63,000-square-foot addition, the Hofstra North Shore-LIJ School of Medicine also announced it has earned full accreditation. The developments signal a new era as the charter class prepares to graduate this spring.

With a sun-filled atrium and state-of-the-art facilities that include a 7,300-square-foot structural anatomy lab, the new building more than doubles the size of the medical school. Full certification by the Liaison Committee on Medical Education (LCME), which accredits all medical schools in the United States and Canada, means Hofstra North Shore-LIJ School of Medicine and its innovative approach to medical education meet strict national standards for structure, function and performance.

“This is an extraordinary moment in the history of the Hofstra North Shore-LIJ School of Medicine,” said Hofstra University President Stuart Rabinowitz. “We imagined a new kind of partnership and a new model of medical education that would lead to better health care for our region. Today we stand quite literally at the crossroads of the old and the new to celebrate the journey of the past seven years and challenge ourselves to aim even higher in the future.”

The grand opening and announcement are the culmination of a process that began more than seven years ago — in October 2007 — when Hofstra University and the North Shore-LIJ Health System announced plans to collaborate on opening the first allopathic medical school in New York State in more than 40 years.

Real-World Experience

“As soon as representatives from North Shore-LIJ and Hofstra University began discussing the concept of a medical school, we made a decision to become a change leader in medical education,” said Michael Dowling, president and CEO of the North Shore-LIJ Health System. “We capitalized on the resources of the health system and the university to teach the basic science of medicine in the context of real clinical problems, provide students with clinical experience right from the beginning and help them become lifelong learners who will be the medical leaders of the future. The LCME accreditation validates our visionary approach and the Hofstra North Shore-LIJ School of Medicine’s standing as an outstanding medical institution.”

The original medical school building, formerly the home of the New York Jets training facility, opened in 2010. Construction of the new, two-story addition began in June 2013.

PBS recently debuted the documentary Doctors of Tomorrow, which showcases the Hofstra North Shore-LIJ School of Medicine’s revolutionary approach to educating the next generation of physicians. See the video at bit.ly/DocsTom.
“Our expanded facility is a reflection of the new model and approach to medical education that we have worked to establish over these past seven years, and it’s working for our students,” said Lawrence Smith, MD, founding dean of the School of Medicine. “It is an achievement made possible through the collaborative efforts of our dedicated faculty and staff who continually raise the bar for teaching the next generation of clinicians and leaders in medicine.”

**Expanded Education, Opportunity**

The new building cost $35.9 million, $14.5 million of which was provided through $25 million in New York State Economic State Development Corporation grants secured by Hofstra University in 2008.

The grants were sponsored by the New York State Senate delegation, led by Majority Leader Dean Skelos and State Senator Kemp Hannon. A portion of the 2008 grants was used to renovate the original facility. The $21.4 million balance for the new building was financed through bonds issued by the Town of Hempstead Local Development Corporation.

“Today is an exciting day for the future of medical care in our region,” Sen. Skelos said, adding that this ambitious project “will significantly expand the capacity for learning here at the Hofstra North Shore–LIJ School of Medicine for many years.”

Sen. Kemp Hannon (D-Nassau), chair of the Senate Standing Committee on Health, said that the grand opening “celebrates the dream of making the Hofstra North Shore–LIJ School of Medicine one of the premier medical schools in the country. Students from the community and around the globe will flock to Hofstra North Shore–LIJ to advance innovations in medicine, important academic work and improvements in our biotech and health science industries.”

The Association of American Medical Colleges projects a physician shortage of 130,000 by the year 2025, but this expansion positions the region well to answer the demand for health care professionals, said Town of Hempstead Supervisor Kate Murray. She added, “Jobs in the medical field are among the fastest-growing occupations in the nation, and Hofstra University is demonstrating its commitment to preparing students for the future, and placing many highly trained young professionals in the workforce.”

Designed by architectural firm HLW International, the new building has extra-wide corridors to create a “Main Street” environment to encourage collaboration and community. The building incorporates environmentally friendly design standards to reduce its carbon footprint and meets the US Green Building Council’s LEED Silver Rating standard.

**Space to Learn**

The original facility of the Hofstra North Shore–LIJ School of Medicine houses 16 flexible learning areas, a 108-seat lecture hall called a Medical Education Theater, a health sciences library, a structure lab and a full-service café. Highlights of the new facility include:

- A theater/lecture hall for more than 240 people.
- An expanded structure lab with room for more than 125 people.
- A new student lounge, with dining and entertainment areas and work stations, to replace the structure lab in the original building.
- A single, two-story entry with a 4,800-square-foot atrium and a grand staircase connecting the new and original buildings.
- A new dean’s suite with a large formal conference room.
- Offices for approximately 44 faculty and administrative staff.
- Twelve group study rooms, each accommodating eight to 10 students.
- Large group areas for more than 100 people that can be split into three separate classrooms.
- New exterior landscaping, outdoor seating and tables, walkway lighting, half-court basketball and parking for more than 100 vehicles (in addition to current lot with 80-vehicle capacity).

**Match Day**

Soon-to-be graduates of the Hofstra North Shore–LIJ School of Medicine learned where they will spend their next few years of medical training at the organization’s first Match Day. During this traditional rite of passage, the student body had a 100 percent match, including many residencies at top institutions.
BROOKLYN — Maimonides Medical Center and North Shore-LIJ Health System are in exclusive negotiations to explore whether a partnership would be beneficial to serving the needs of Brooklyn residents.

Maimonides Medical Center is Brooklyn’s leading tertiary care teaching hospital, encompassing a nationally-recognized Heart and Vascular Center, the borough’s largest outpatient cancer and breast centers, a fully accredited stroke center, and state-of-the-art bone & joint center. Maimonides operates Brooklyn’s only accredited children’s hospital, a regional perinatal center serving high-risk pregnant women and neonates, and the state’s largest obstetrics program, delivering more than 8,700 babies each year.

“This preliminary announcement is the result of a focused, 12-month strategic planning process by the Maimonides Board of Trustees and our executive team to identify a regional partner whose vision and commitment to excellence are aligned with ours,” said Pamela Brier, president and chief executive officer of Maimonides Medical Center. “We look forward to our continuing discussions with North Shore-LIJ and both agree that benefit to the communities we serve will be our highest priority.”

“North Shore-LIJ has been exploring opportunities in Brooklyn for several years, as we continue to expand beyond our traditional service areas on Long Island, Queens, Staten Island and Manhattan,” said Michael Dowling, president and chief executive officer of North Shore-LIJ. “We believe Maimonides would be an ideal partner, considering the medical center is already the preeminent provider of health care in Brooklyn. Working together, we are confident we can build on Maimonides’ outstanding reputation for delivering high-quality care to the incredibly diverse communities of Brooklyn.”

After a final agreement is reached, Maimonides will continue to operate as a full-service, tertiary hospital and be the hub of a growing network of services that the health system will establish in Brooklyn.

脑动脉瘤意识步行

参与第七次年度长岛脑动脉瘤意识步行，在9月26日星期六举行。登记时间是上午8:30，起点时间是上午10:00。不论风雨，都会出发。所得款项将用于北岸-北岸脑动脉瘤中心和脑动脉瘤基金会。了解更多详情请访问bit.ly/Brain15。

充满爱的抱抱

北威斯特切斯特医院的年度泰迪熊诊所和健康展览会吸引了200多名社区成员参与，参与活动的成员体验了以健康为主题的活动和小游戏，并享受了健康点心。当医生和护士检查他们心爱的毛绒玩具时，孩子们学会了医院是病人康复的地方。
scientists will be trained to perform preclinical cancer research and conduct early-stage human clinical trials. Positive findings from this research and therapeutics partnership will form the basis for advanced-phase clinical trials to be conducted at North Shore-LIJ facilities and collaborating outside medical centers. Patients cared for at North Shore-LIJ Cancer Institute facilities will benefit from increased access to these innovative clinical studies.

The CSHL affiliation is North Shore-LIJ’s latest step to improve the coordination of multidisciplinary cancer care. Over the past two years, North Shore-LIJ has already invested more than $175 million to open and expand cancer treatment centers throughout the downstate New York region. In addition to a recently completed expansion of its headquarters in Lake Success (see page 20), the Cancer Institute will also open a new $34 million, 45,500-square-foot outpatient cancer center in Bay Shore in 2016 and pursue other major expansions on Long Island and in Manhattan, Queens, Staten Island and Westchester County.

As one of the first research institutes to join the nation’s War on Cancer in the early 1970s, CSHL has made seminal discoveries that have helped diagnose and treat cancer patients, including the discovery of the first human cancer gene in 1982. CSHL has been a National Cancer Institute-designated Cancer Center since 1987, and is the only such center on Long Island. A nonprofit independent research and education institution, CSHL has an annual operating budget of $145 million and more than 35 independent laboratories and faculty focused on basic and applied cancer research. These scientists explore fundamental cellular and tissue processes that go wrong in cancer, basic research that has already transformed the development of new treatments for many types of cancer. Current research focuses on cancers of the breast, lung, prostate, pancreas, cervix, ovary and skin, as well as research on gliomas and medulloblastoma, leukemia and lymphoma, myelodysplastic syndrome, carcinoid tumors and sarcomas.

Combined Strength

The new clinical research collaboration will distinguish the North Shore-LIJ Cancer Institute for its ability to deliver new therapeutics to cancer patients while also meeting the comprehensive medical and surgical needs of those afflicted with and at risk of the disease. Every year, North Shore-LIJ cares for more than 16,000 new cancer cases, giving patients access to the services of more than 200 physicians in over 25 subspecialties.

Under the terms of the strategic affiliation, North Shore-LIJ and CSHL will continue as independent organizations governed by their respective Boards of Trustees. The institutions have appointed a committee with responsibility for oversight, staffing and implementation of the affiliation that includes three representatives from each organization: CSHL’s Dr. Stillman; David Spector, MD director of research; and David Tuveson, MD, deputy director of the Cancer Center; and North Shore-LIJ’s Lawrence Smith, MD, physician-in-chief; Kevin Tracey, MD, president and CEO of The Feinstein Institute for Medical Research; and Thomas McGinn, MD, chair of medicine.
GLEN COVE — The US Centers for Disease Control and Prevention (CDC) has designated Glen Cove Hospital as one of 55 Ebola treatment centers nationwide. Glen Cove was one of five hospitals in the New York area — and the only facility on Long Island — identified by the CDC to serve as a local resource to care for potential Ebola patients.

The North Shore-LIJ Health System has invested about $7 million to date on Ebola preparedness efforts, including more than $2 million to create a two-room isolation unit at Glen Cove Hospital that would be a receiving center for Ebola patients on Long Island.

“The specialized treatment unit at Glen Cove was designed to care for patients with any type of serious transmittable infectious disease requiring a high level of intensive care,” said Mark Jarrett, MD, senior vice president and chief quality officer at North Shore-LIJ. About 80 nurses and 18 physicians from across the health system who volunteered to care for any Ebola patients presenting at Glen Cove underwent extensive training last fall. While staff at all of North Shore-LIJ’s 18 hospitals and more than 400 outpatient facilities in the New York area were trained to safely evaluate a suspected Ebola patient, the health system recruited a volunteer team of critical care experts and created specialized treatment unit at Glen Cove Hospital to provide around-the-clock care to any affected patients.

The treatment unit is located in a separate, discreet area of the hospital, and is equipped with a point-of-care lab and its own entrance/exit. All other existing clinical services at Glen Cove are unaffected by the existence of the unit.
Nearly 100 North Shore-LIJ Health System clinicians stepped forward last fall to join the new voluntary clinical team for the Ebola treatment center in Glen Cove Hospital. Rapid training with the health system’s emergency management team and the Center for Learning and Innovation prepared the volunteers for work in a complex biocontainment environment.

“The [Ebola crisis] developed so quickly that the first few days of training had to take place off-site, while Glen Cove Hospital built its Biocontainment Unit,” said Robert Kerner, assistant director of the North Shore-LIJ Patient Safety Institute. Glen Cove’s Biocontainment Unit is one of only 44 Ebola treatment centers designated by the US Centers for Disease Control and Prevention.

Preparation included classroom and simulation work, with an emphasis on personal and patient safety, donning and doffing of personal protective equipment, decontamination procedures, teamwork and communication and, of course, clinical care guidelines. Simulation training equipped clinicians to treat Ebola patients – and to do so with confidence, said Mr. Kerner.

“Our live training simulations were vital to prepare the volunteers to work in an unfamiliar, somewhat uncomfortable hospital environment,” said Mr. Kerner. “For example, simply entering or exiting an active Ebola biocontainment unit takes at least 30 minutes, so proper planning, teamwork and communication needs to be in place.”

**Intensive Exercises**

Each volunteer underwent two weeks of full-time, on-site simulation and interprofessional, team-based exercises based on anticipated clinical scenarios and protocols. Once trained and fully prepared, as determined by a strict competency assessment, the volunteers returned to their usual work, with the understanding that they could be called upon at a moment’s notice.

No Ebola patients entered North Shore-LIJ facilities during the height of the news-fueled panic. However, health crises can emerge quickly, and the dedicated volunteer clinicians remain on call.

“If we need to care for a patient with Ebola, we will call upon and deploy our trained clinicians at a moment’s notice,” said Elaine Smith, RN, EdD, vice president of system nursing education.

Trainees included 46 nurses and physicians from a range of clinical specialties, including intensive care nurses and physicians, hospitalists and anesthesiologists; labor and delivery nurses and ob/gyn physicians to administer care to any pregnant Ebola patient; and pediatric intensive care nurses for very young Ebola patients.

Any clinicians who treat an Ebola patient must wait 21 days to return to their usual clinical duties, Dr. Smith said. They will also need to undergo monitoring for infection control and employee health protocols.

“Our treatment center volunteers have gone above and beyond their daily health system roles,” said Dr. Smith. “In some cases, they went beyond their comfort zone to learn to treat patients who require highly specialized care. Volunteering in this capacity demonstrates remarkable compassion and bravery.”
STATEN ISLAND — In its first year of participation in Montefiore Medical Center’s Pioneer Model Accountable Care Organization (ACO), the University Physicians Group (UPG) in Staten Island and Brooklyn and the North Shore-LIJ Health System saved the Medicare program about $3.5 million compared to an historical benchmark of the cost of health care services delivered to nearly 5,000 of the ACO’s 23,000 Medicare recipients.

The US Centers for Medicare and Medicaid Services designed the Pioneer ACO program for health care organizations and providers with experience in coordinating care for patients across care settings. The program rewards providers who meet a series of patient care quality measures aimed at improving patient outcomes, while also achieving cost savings for Medicare.

The Montefiore ACO was one of the 23 Pioneer ACOs in the nation — and the only one in New York State. The Centers for Medicare and Medicaid Services recently reported that Montefiore’s ACO, which delivered care to more than 25,000 patients in 2013, was one of the program’s highest financial performers, generating approximately $24.5 million in gross savings.

The Montefiore ACO achieved the savings through increased care coordination and patient engagement — in the hospital, in doctors’ offices, by phone or at home. Montefiore’s ACO made great strides in improving quality performance in key areas like depression screening and screening for risk of future falls. Through a unique partnership with health care providers in its own network, as well as those in UPG and the North Shore-LIJ Health System, all points of care delivered clinical excellence.

With 60 physicians on Staten Island and in Brooklyn, UPG has been a major provider of primary and specialty care for 23 years. It serves a patient population of more than 100,000 in the two boroughs. Although only 4,917 of UPG’s Medicare patients were part of the ACO, the UPG adapted the same 33 Pioneer ACO quality performance measures for all of its Medicare patients, according to Theodore Strange, MD, president and chief executive operator of UPG.

UPG performed particularly well on the measures related to the high-risk population, which includes patients with diabetes and hypertension. Jeffrey Hyman, MD, medical director of UPG, noted that the “three-part aim” of the Pioneer ACO guided physicians in this very complex program: better quality, improved patient experience and reduced health care spending.

“Once this concept was understood at the granular level, our physicians and their staffs, led by their office managers, were able to adapt to this program.” Dr. Hyman said.

Prevention and Integration
“V Our physicians had a very positive attitude that we could affect change — and the process worked well,” said Dr. Strange. “Our partners at Montefiore are very good at delivering care in the ACO model and our physicians worked very well together.” Among local hospital and long-term care providers, UPG worked in close collaboration with Staten Island University Hospital, the Eger Health Care and Rehabilitation Center and the Carmel Richmond Health Care and Rehabilitation Center on Staten Island, which are all affiliated with the North Shore-LIJ Health System.

Kristofer Smith, MD, vice president and medical director of North Shore-LIJ Care Solutions, the health system’s care management organization, said the health system was proud of the collaboration with UPG and Montefiore Medical Center.

“Montefiore has an excellent reputation in population health and an innovative approach to health care in general, said Dr. Smith. “ACOs must be able to succeed in the areas of preventative care, integrated delivery across the care continuum and patient education. North Shore-LIJ invested in care managers to work with UPG physicians, allowing for better coordination and follow up with patients.” Dr. Smith continued to say “the plan is to grow care coordination to support our current and expanding value-based programs.”

To participate in Montefiore’s ACO, UPG modified its electronic health record to incorporate the Centers for Medicare and Medicaid Services’ clinical measures for its 60 physicians. Dr. Hyman and the “incentive team” at UPG rolled out an efficient and easy system that physicians were able to learn quickly and adopt without interrupting their work flow.

Dr. Strange noted that deep community ties have fostered the ACO’s success: “For example, Montefiore has been successful in the Bronx, and UPG has had a major presence in Staten Island and south Brooklyn for 23 years.” Results showed that during the second year of the Pioneer ACO program, participants generated a total of more than $96 million for the Medicare program, an increase of $9 million from the previous year, when more health care systems participated.
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*Buyer's Attorney is an existing approved vendor for North Shore-LIJ
LAKE SUCCESS — Hundreds of donors, physicians and other supporters recently celebrated the completion of an $84 million expansion of the North Shore-LIJ Cancer Institute’s headquarters at the Center for Advanced Medicine (CFAM) in Lake Success.

“With an additional 93,000 square feet, the Center for Advanced Medicine brings together all cancer services offered by North Shore University Hospital and LIJ Medical Center under one roof,” said David Battinelli, MD, North Shore-LIJ’s chief medical officer.

The new space includes a total of about 130,000 square feet of space and houses all ambulatory hematology/oncology, chemotherapy and radiation medicine, as well as surgical oncology and brain tumor services. CFAM was already home to diagnostic radiology, breast imaging, urology and ambulatory surgery services. In one place, patients now have access to a fully integrated spectrum of cancer prevention, diagnosis, treatment, genetic counseling, nutritional and social work, supportive care and survivorship programs.

**Patient- and Family-Centered Care**

Calling the new facility “the most beautiful place someone will never want to visit,” Louis Potters, MD, chair of radiation medicine for the health system, hailed the expanded facility both for its technological provisions and the compassion of the staff. “Our Cancer Institute places great emphasis on the patient/family experience. Aside from the physicians, all of our nurse navigators, registered dietitians, social workers and other staff focus on the comfort of our guests,” he said. Dr. Potters added that the expansion and the move to the new facility gives the Cancer Institute the opportunity to invest in the latest cancer technology.

Besides its extensive network of inpatient and outpatient services, the Cancer Institute offers the 16,000 patients it diagnoses and treats annually access to more than 125 clinical trials at any given time, said Daniel Budman, MD, director of translational research for hematology and medical oncology in North Shore-LIJ’s Department of Medicine. “Over the past 30 years, more than 10,000 North Shore-LIJ cancer patients have participated in clinical research studies sponsored by the National Cancer Institute [NCI],” said Dr. Budman. The NCI Community Oncology Research Program recently awarded a $4.1 million grant to North Shore-LIJ — one of only 46 providers in the US selected to participate, and one of only two in New York State and the only one on Long Island to receive funding.

About one-third (30,000 square feet) of the Cancer Institute’s newly expanded space is home to the health system’s Department of Radiation Cancer Institute Completes $84 Million Expansion

By Michelle Pinto
Medicine. Among new services offered in the sleekly-designed, calming setting are a Gamma Knife and three TrueBeam linear accelerators; a comprehensive Brachytherapy Program; stereotactic radiosurgery and stereotactic body radiation therapy; intensity-modulated radiation therapy; and image-guided radiation therapy.

Other outpatient services available at the North Shore-LIJ Cancer Institute headquarters at CFAM are:

- An expanded capacity to the Monter Cancer Center and the Phyllis and Stanley Kreitman Chemotherapy Center, which is doubling its space and will now house hematologists/oncologists from LIJ Medical Center in addition to NSUH.
- A dedicated Division of Surgical Oncology that performs more than 2,000 procedures annually, including treatment for colorectal, pancreatic, kidney, bladder, breast, thyroid, chest, lung and skin cancers.
- A Brain Tumor Center that combines the clinical expertise of the Cancer Institute and the Cushing Neuroscience Institute to offer comprehensive treatment for benign and malignant brain tumors.

Cancer Institute in Manhattan

MANHATTAN — Lenox Hill Hospital recently opened its new Radiation Medicine Program. Part of the North Shore-LIJ Cancer Institute, Lenox Hill’s expanding oncology services are part of a $175 million system-wide initiative to improve patient access to the latest technology and specialized medical professionals.

The centerpiece of the radiation treatment center is Manhattan’s first TomoTherapy unit, which combines 3D-imaging technology with rotational delivery of radiation. The result is highly focused radiation therapy with unprecedented accuracy. TomoTherapy provides an individualized and comprehensive treatment solution for a variety of cancers, including complex tumors and tumors that are close to critical organs.

See more about the new program on page 54.
MELVILLE — Like many industries, health care is partly a numbers game. A look at North Shore-LIJ’s Patient Access Services — the health system’s growing call center operation in Melville — shows how important goal-setting and hitting those targets can be. It’s hardly a surprise then, that the management team of June Scarlett, Chris Birrer and Rich Palombo, emphasizes a consistent and thorough analysis of statistics. And while all three agree numbers reveal a lot about excellence, there are other factors at play too — like people.

“Two years ago, the health system realized there was an opportunity to prevent leakage — patients leaving the health system for other providers,” said Ms. Scarlett, vice president of patient access services. “By leveraging the health system’s size, we are almost always able to connect a patient to a provider with a convenient location, date and time. They don’t have to wait a month to see a physician or travel a great distance if they don’t want to. We’re able to look at openings across the health system and make a connection. It’s been a very effective process that will be even more streamlined down the road.”

Patient Access Services, which has more than 70 staff members, handles 10 percent of the health system’s 400 affiliated medical group practices, urgent care centers, the divisions of urology, ENT, neurology and orthopedics and those seeking physician referral through 888-321-DOCS or health insurance through CareConnect. It’s a sizable caseload — one that will increase even more dramatically as plans for handling all calls to affiliated physician practices are realized.

In its first year, the start-up call center has performed at an extremely high level when measured against other health care organizations and call center leaders like Pepsi-Cola, Starwood Hotels and Colgate. Year one saw it handle 330,000 calls with highs of 52,000 for a single month and 4,100 handled in a single day. On average 3,100 appointments per week were scheduled.

According to Mr. Palombo, the call center’s director, those are impressive numbers for a seasoned call center operation — never mind a start-up. Part of the reason for that success is aggressive but realistic goal-setting by the management team. With results visible on several electronic boards by every employee working the phones, goals include no more than 30 seconds for a call to be answered (hold time) and an abandoned call rate (hang-ups) of less than five percent. Staff members achieve both of these goals a healthy majority of the time. “Call center employees know how they’re performing individually and as a team,” Mr. Palombo said. “It’s like sports in that way. Individual performance is important, but ultimately individuals need and want to succeed so that the team succeeds.”

Other figures are equally significant. A recent study revealed that call center operator was the fourth most stressful job in America and that having an average call handle time of six minutes and 30 seconds impacts every other metric.

That’s why, Ms. Scarlett said, “while previous call center experience is important, when we hire, we hire for the right attitude.” She explained that there is a two-month intensive training that immerses call agents in a “scavenger hunt” so they get the feel of a patient trying to navigate the complexity of one of the nation’s largest health systems and know how to explain it.

“Our agents are, in a very real way, critical first responders,” Ms. Scarlett said. “Many of our calls are from patients in some sort of health crisis. We need kind, compassionate and knowledgeable people who can direct patients to where they can receive the most timely and appropriate level of care.”

Mr. Palombo added: “The job isn’t easy and we frequently look to show our appreciation in tangible ways, things like buying the staff lunch or watching a game together — ordering wings and food to foster teamwork and say ‘thank you.’”

Every day the calls come in, but every day it is a different person who may be in crisis. “Attitude, competence and commitment are so important,” Ms. Scarlett says. “They are the three factors that most affect our performance.”
Science Summer Camp in Lake Success

North Shore-LIJ Health System staff members can get a 20 percent rebate when they enroll their children in the 2015 Science Summer Camp at the DNA Learning Center West in Lake Success.

This year’s camps will be:

- **Fun with DNA** for students entering grades 6 or 7
- **World of Enzymes** for students entering grade 8 or (Fun with DNA alumni entering grade 7)
- **Green Genes** for students entering grade 9 (or World of Enzymes alumni entering grade 8)
- **Backyard Barcoding** for Green Genes alumni entering grade 9
- **DNA Science** for students entering grades 10 through 12
- **Genome Science** DNA Science alumni entering grade 11 or 12

Click on [summercamps.dnalc.org](http://summercamps.dnalc.org) for descriptions, dates, pricing, online application and payment information (choose “DNALC West” to be eligible for the 20 percent employee rebate) or call 516-719-1296 on weekdays, 9 a.m. to 3 p.m. Tuition must be paid in full at registration for employee rebate eligibility. Rebate requests are due by September 4.

Located at 5 Delaware Drive, Suite 5, in the Lake Success Quadrangle, the DNA Learning Center West is a collaboration between North Shore-LIJ Laboratories and Cold Spring Harbor Laboratory.
FOREST HILLS — Thomas Hopkins smoked at least a pack of cigarettes a day.

“Remember the Marlboro Man?” asks the 62-year-old Nassau County man. “That was me.”

At least, that was him until 2001, when a severe respiratory infection landed him in the hospital. That’s when he kicked the habit after 30-plus years of smoking.

Recently, Mr. Hopkins visited his pulmonologist for his chronic obstructive pulmonary disease (COPD). The disease gives him shortness of breath and makes going up flights of stairs and long walks burdensome, he said.

As a preventive measure, his doctor suggested that Mr. Hopkins consider having yearly lung cancer screenings.

Most lung cancers occur in smokers or former smokers. More than 150,000 Americans die from lung cancer each year, according to the American Lung Association. It’s the leading cause of cancer death in the United States and is most curable when diagnosed early. Low-dose computed tomography (CT) lung scans for people at high risk due to heavy smoking can cut their chances of dying from lung cancer by 20 percent, according to a 2011 study.

A few days after Mr. Hopkins’ saw his doctor, he noticed a flyer for Forest Hills Hospital’s free Lung Cancer Screening Program. And so, he went.

The program, launched last summer, offers the screenings in the hospital on Wednesdays from 10 a.m. to 1 p.m. to current or former smokers between 50 to 80 years old. Using a low-dose CT scanner, a radiologist had Mr. Hopkins’ lie down for a scan of his chest.

“It was probably less than a 10-minute process,” said Mr. Hopkins. “I got the ‘all clear.’”

That means there was no sign of lung disease on his CT scan. However, this doesn’t mean Mr. Hopkins will never get lung cancer. So, based on his prior smoking history, he should undergo yearly scans.

In addition to aiding in the early diagnosis of lung cancer, the free Forest Hills program has also detected other advanced lung diseases, problems in the gallbladder and liver, and abnormalities in the kidneys, said Eileen Gillespie, RN, NP. The program referred those patients for further treatment by Forest Hills Hospital specialists. The program also promotes smoking cessation, one of the most important actions a person can take to prevent disease and maintain health, she added.

Free 10-Minute CT Scans Spot Early Lung Trouble

By Diane O’Donnell

Ms. Gillespie, a nurse practitioner in Forest Hills Hospital’s Lung Cancer Screening Program, explained to Mr. Hopkins how a low-dose CT scan can help detect lung cancer in its early stages, when the disease is most curable.
Glen Cove Hospital Named “Guardian of Excellence”

GLEN COVE — Press Ganey Associates, Inc. named Glen Cove Hospital a 2014 Guardian of Excellence Award winner in patient satisfaction for its Emergency Department and outpatient Don Monti Cancer Center. The Guardian of Excellence Award recognizes top-performing facilities that consistently achieved the 95th percentile of performance in patient satisfaction.

The Press Ganey Guardian of Excellence Award honors hospitals that consistently sustain performance in the top five percent of all Press Ganey clients for each reporting period during the course of one year. Glen Cove staff members received the honor recently during the awards luncheon at Press Ganey’s National Client Conference in Orlando.

“This award is a testament to Glen Cove Hospital’s commitment to deliver patient-centered care,” said Patrick Ryan, CEO of Press Ganey. “By achieving and sustaining this level of excellence, Glen Cove Hospital is benefiting patients and helping to advance the quality of health care.”

“We are thrilled to be recognized for our outstanding efforts in providing quality health care to our patients,” said Susan Kwiatek, RN, DNP, executive director of Glen Cove Hospital. “The teams in our Emergency Department and the Don Monti Cancer Center have a passion for ensuring that our patients not only receive the best possible care but also provide compassion and respect to patients and family members.”
MANHASSET – North Shore University Hospital (NSUH) is the first hospital on Long Island to receive advanced certification as a Comprehensive Stroke Center (CSC). The hospital’s ability to receive and treat the most complex stroke cases earned it the Joint Commission’s Gold Seal of Approval and the American Heart Association/American Stroke Association’s Heart-Check mark. Only three other New York State hospitals have this advanced certification.

“We are committed to providing the highest quality comprehensive stroke care to patients with cerebrovascular disease,” said Jeffrey Katz, MD, NSUH’s chief of vascular neurology and director of stroke. “To receive this advanced certification as a Comprehensive Stroke Center is a testament to our robust interdisciplinary team of specialists. We are committed to excellence in stroke care, offering aggressive and effective treatments for stroke, brain aneurysms, vascular malformations, carotid stenosis and other conditions.”

The Joint Commission’s CSC certification of NSUH’s stroke services recognizes the hospital’s national leadership in stroke care. NSUH has implemented disease-oriented practice guidelines and aggressively pursued primary and secondary stroke prevention efforts, comprehensive education for health care professionals and the community, and high-impact research.

Initiated in 2012, advanced certification for Comprehensive Stroke Centers is awarded for a two-year period to Joint Commission-accredited, acute-care hospitals.
The February 2015 issue of The Joint Commission Journal on Quality and Patient Safety featured “Journey to Top Performance: A Multipronged Quality Improvement Approach to Reducing Cardiac Surgery Mortality,” by S. Jacob Scheinerman, MD, Lenox Hill Hospital’s chair of cardiothoracic surgery and former associate chair of cardiothoracic surgery at LIJ Medical Center, and his colleagues.

In 2006, cardiac surgery mortality rates for isolated valve and valve/coronary artery bypass graft procedures at LIJ Medical Center were significantly higher than the statewide average in the New York State Department of Health’s Cardiac Surgery Reporting System. In response, LIJ evaluated and redesigned its cardiac surgery program.

The revamp implemented a series of interventions in preoperative care, intraoperative monitoring, postoperative care and LIJ’s Cardiac Surgery Quality Management Program, including:

- Developing specific criteria to identify high-risk patients who need a more detailed preoperative assessment.
- Conducting multiple, daily interdisciplinary rounds by surgeons, intensivists, PAs, NPs, nursing leadership, physical therapists and respiratory therapists.
- Launching new programs to improve performance and patient safety via collaborative, team-based tools and care. The programs provide a formal infrastructure and promote teamwork among frontline staff.
- Implementing formal reporting structures and continuous data review to achieve and sustain accountability across all levels of the organization.

The results were dramatic. LIJ maintained significantly lower cardiac surgery mortality rates compared to the statewide average for the past three reporting periods, and LIJ had the lowest risk-adjusted mortality rate in the state for cardiac-related procedures during the most recent reporting period (2009 to 2011).

LIJ’s quality improvement approach to its entire system of care “should translate well to others types of surgery, and should serve as an outstanding example to cardiac surgery programs throughout the world,” the journal’s accompanying editorial said.

LIJ Reduces Cardiac Surgery Mortality

SYOSSET — Syosset Hospital is the first facility in the North Shore-LIJ Health System to use ketamine therapy for postoperative pain relief; the therapy can also be used for the treatment of chronic pain syndromes. It is effective for patients who have been taking daily prescription pain medications who need surgery.

“Ketamine has been shown to reduce the development of postoperative pain,” said John Stamatos, MD, director of interventional pain medicine at Syosset Hospital. “It helps by reducing pain medication requirements in the first 24 hours after surgery.”

Syosset Hospital also uses ketamine infusion therapy to treat complex regional pain syndrome in upper and lower extremities; phantom limb pain; fibromyalgia; and other complex central pain syndromes. This therapy, which is an outpatient service, can help patients who have not received adequate pain relief via conventional medical management and intervention.

New Option for Pain Management
Calm Amid the Bustle

VALLEY STREAM — Families visiting their loved ones in Franklin Hospital are finding solace in new meditation and Sabbath rooms.

The meditation room, located on the hospital’s second floor, is a multidenominational area where people can pray, meditate and find respite. The space features a worship area with about a dozen chairs, an altar, a table, a sink for ritual washing, two sofa chairs and a stained glass window. The room also offers religious artifacts and books about many different faiths and meditation for patients, family members and staff.

“Giving patients, their loved ones and our staff members a place of emotional shelter and solace is a blessing,” said Catherine Hottendorf, RN, executive director of Franklin Hospital.

The hospital has also created a Sabbath room, where people observing the religious day can stay so they can see their loved ones without having to walk a great distance.

“It can be important for people to have their family members with them while they are in the hospital,” said Myra Cohen, director of volunteer services at Franklin. “We want to make every effort for that to be possible.”

New Outpatient Surgical Suite at Plainview

PLAINVIEW — Plainview Hospital has opened a new surgical suite on the second floor with its own waiting room and spacious, private pre-operative care rooms. Previously the maternity unit, the space will now primarily serve patients who need outpatient procedures, including ob/gyn, women’s health and other surgical disciplines. Patients who receive services in this area will be in the surgical suite for their whole procedure — from preoperative care through postoperative care.

“The new space lets patients receive all the care that they need in one place,” said Michael Fener, executive director of Plainview Hospital.

Turning on the Charm

Flashing warm smiles and dazzling tiaras, Kira Kazantsev, front/left, 2015’s Miss America, and Jillian Tapper, rear/right, Miss New York State, recently visited children and chatted with Child Life staff members at Cohen Children’s Medical Center of New York. The pageant stars spent an hour coloring with their newest fans, all of whom were clearly thrilled to be in their presence. After posing for pictures with the children, Ms. Kazantsev said that her visits to children’s hospitals were high points of her year-long tenure. The Miss America Organization works with the Children’s Miracle Network (CMN), so each title holder serves as a CMN goodwill ambassador, speaking on behalf of pediatric patients while raising awareness and sensitivity to their concerns. See video at bit.ly/HereSheIS.
BAY SHORE — A 20-year-old man who was critically injured in a car crash waited a year to have one wish fulfilled: to meet the two police officers from Suffolk County Police Department’s 3rd Precinct who rescued him. Thanks to the dedicated clinicians at Southside Hospital and the determination of the health system’s director of media relations, Michelle Pinto, that man’s dream recently became a reality.

Flanked by two of his doctors and his mother during a Southside news conference, Bay Shore resident James Ness recounted how, on his way to work at the local mall in December 2013, another car crashed into him — disengaging his seatbelt and throwing him into the passenger seat of his own car. His car then hit a utility pole with such force that parts of the mall lost power.

Although he has no memory of what happened, Mr. Ness pieced together the events of that day based on reports from his family and friends. One fact emerged: He would not have survived without the two police officers who pulled him from the wreck. The officers’ quick response allowed Mr. Ness to get life-saving trauma care at Southside Hospital. He later underwent neurosurgery at North Shore University Hospital in Manhasset, followed by more than six months of brain rehabilitation at Southside.

Solving a Mystery

During a recent Southside news conference, Mr. Ness thanked the physicians, nurses, therapists and loved ones who helped him during his recovery journey. He added that he wished to personally thank the two unknown police officers who saved him, including one who performed cardiopulmonary resuscitation (CPR) and cleared his airway until the ambulance arrived.

As he described their heroism and his desire to discover their identities, officers John McAuley (who performed the CPR) and Michael Tenety entered the room.

Both officers had been looking for any news about this courageous young man for the past year. The determined detective work of Ms. Pinto, who worked with the Suffolk County Police to identify the two officers, let her arrange for them to visit Southside and fulfill Mr. Ness’ wish.

“There can be miracles, after all,” said Mr. Ness, who was initially rendered speechless when he first met the two officers.

Raison D’^EtRe

Mr. Ness’ recovery is nothing short of miraculous, said Kristen Demertzis, PhD, Southside’s chief of neuropsychology. “Knowing James and watching his progress over the last year are the reasons we go into health care in the first place,” said Dr. Demertzis. “We’re so proud to have worked on his rehabilitation with him over this past year. We’ve all become part of a family.”

Dr. Demertzis explained that Mr. Ness was rushed to Southside with a host of dangerous injuries. Along with the traumatic brain injury, his right eye was non-reactive. He also sustained an open jaw fracture and many skull fractures, as well as injuries to his liver, spleen, left kidney and lungs. After months of grueling physical, speech and occupational therapy, Mr. Ness was discharged from the hospital’s outpatient rehab center in July. Dr. Demertzis said Mr. Ness represents “the beauty of modern medicine combined with a wonderful soul.”

Mr. Ness’ physical rehabilitation medicine physician, Rosanna Sabini, DO, agreed. Citing Mr. Ness for his incredible strength and perseverance, she said, “When we first saw him, it was pretty scary. But he was always ready to move up to the next level. His recovery is truly remarkable.”

James Ness, left, thanked the police officers who came to his aid after a devastating car accident.

After a Miracle, a Wish Comes True

By Brian Mulligan
ED Expansion Begins

HUNTINGTON — Huntington Hospital has begun construction on a major expansion of its Emergency Department (ED).

The 23,997-square-foot, two-story addition will more than double in size the ED and will connect to the five-story, 405,517-square-foot hospital. The expansion improve better accommodate Huntington Hospital’s 50,000-plus annual visitors, improving service and operating efficiency.

The hospital is working with local and state officials to ensure appropriate utility and aesthetics and the Town of Huntington has been supportive. “The larger [the space] it is, the more accommodating it will be for patients,” said Huntington Town Supervisor Frank Petrone. “This is a big plus for Huntington, because it’s a very good hospital that is very community minded and stays very involved with the community, and yet it is part of the North Shore-LIJ Health System, which has an excellent standing.”

“The ED expansion project is long overdue and is much needed,” said Gerard Brogan, MD, Huntington Hospital’s executive director. “Our emergency facilities are often crowded, and patients have to wait in hallways. We don’t want that for our customers and they don’t want it either. We want a state-of-the-art Emergency Department where we can move people through quickly and efficiently. The new construction will let us do that.”

Multiple sources will funding the approximately $50 million cost, including philanthropy and operations. Huntington Hospital expects completion by late 2016, the same year of the hospital’s centennial.
GLEN COVE — Northern Westchester Hospital chefs dazzled judges with a Moroccan-inspired entrée at North Shore-LIJ’s fourth annual Ultimate Chef Challenge. Their “Pork Tenderloin Casablanca” won first prize in the heated competition, hosted by Glen Cove Hospital. Culinary masters from 14 hospitals across the health system competed in the contest served delicious meals, but without high fat, calories or sodium.

“At any hospital, cooking is a true team effort and a gift that has real creative license,” said Patricia Sobol, executive chef at Northern Westchester Hospital, which joined North Shore-LIJ last year. “However, our patients are our number one priority.”

Ms. Sobol collaborated with chef Chris Counts, who said, “We were able to make a really delicious dish, select from the freshest ingredients, perfect the flavor and present a great dish.”

Ms. Sobol and Mr. Counts, who have a combined 34 years of professional cooking experience, prepare 2,000 meals a day at their hospital.

Earning second place at the challenge was LIJ Medical Center, with “Lemongrass Burblanc Halibut.” Plainview Hospital chefs took third place with “Risotto Primavera with Shrimp.”

Coinciding with National Nutrition Month in March, hospital culinary teams faced off at Glen Cove’s Pratt Auditorium, which was transformed into a giant kitchen equipped with electric burners, a pantry and a bountiful farmers’ market for the cooking contest.

Each team had 45 minutes to create tasty, attractive and nutritious meals for the three judges to score, and one for the presentation table. Hospital culinary teams were paired with a registered dietitian from a North Shore-LIJ hospital to ensure that each dish was equal to or less than 500 calories, 15 grams of fat and 600 milligrams of sodium. Teams were given a “surprise protein” — such as halibut, shrimp, chicken or pork tenderloin — to build their original entree around.

The competition judges were Robert Graham, MD, director of integrative health and wellness and director of the Internal Medicine Residency Program at Lenox Hill Hospital; Todd Daigneanult, an executive chef at Overlook Medical Center in New Jersey; and Robert Ashton, MD, chief medical officer at MYOS Corporation, also in New Jersey, where he focuses on general health and wellness in the nutrition and life sciences industries.

“Health system chefs and staff create more than eight million meals annually for patients, staff and visitors, which is quite a feat,” said Michael Kiley, director of nutrition and food services at North Shore University Hospital and organizer of the annual cook-off. “In this competition, our chefs can focus their talents on one dish, demonstrating that they can prepare appealing food that tastes delicious and is nutritious.”

Northern Westchester Hospital Chefs Win Cooking Competition

By Betty Olt

Patricia Sobol, executive chef at Northern Westchester Hospital, co-created “Pork Tenderloin Casablanca,” inset, with her colleague, Chef Chris Counts.
Walking the Talk in a Transformational Time

By Kathleen Waton

“This is probably the most transformational time in health care with financial constraints and pressures,” said Susan Knoepfller, RN, vice president for nursing and chief nursing officer (CNO) at Huntington Hospital. “So it’s critical for leaders to inspire change.”

Nurse leaders must support nurses in practicing at the highest level of their licensure to meet the demands of health care today and tomorrow, according to Kerri Scanlon, RN, CNO at North Shore University Hospital (NSUH) and deputy chief nurse executive of the North Shore-LIJ Health System.

Eyes on the Future

Inspiration comes from numerous sources. For instance, Patricia Farrell, RN, associate executive director and CNO at Southside Hospital, finds joy in mentoring and coaching new nurses as they “bloom into leaders.”

Ms. Scanlon keeps her eyes on the future, sometimes looking beyond health care for inspiration. “We always want to have a vision for where we want nursing to be 10 years out,” she said. “If we’re not changing, we’re not doing something right.”

Education sparks innovation and creativity. “You think you’re doing wonderful things at your institution,” Ms. Knoepfller said, “and then you sit by someone from Cleveland Clinic or another facility and you discover more fabulous ideas.”

To inspire others, nurse leaders must be visible among staff. Ms. Farrell, who considers herself a “boots-on-the-ground” leader, said “You need to be out and about to ‘walk the talk’ and see the needs on the floor because staff will be very honest and tell you can prevent them from providing optimal care.”

Visibility engenders “trust by letting [staff members] know you’re out there to support them,” Ms. Scanlon said.

Actions speak loudest, Ms. Knoepfller said. If nurse leaders espouse patient-centered care, they need to model behavior by “being attentive to visitors who look like they may be lost, responding to a patient’s call bell and being another set of hands with a stretcher.”

Vision and Risk-Taking

Driving change requires courage. Having a strategic plan helps to create a vision, and “provides a roadmap on where your team wants to go, which reduces some of the fear of the unknown,” Ms. Farrell said.

Decisions speed progress, Ms. Scanlon said. “Being stuck in not making a decision is the worst thing you can do. At the end of the day, you have to be courageous to make those decisions.”

If things go wrong, there’s a distinction between process and people issues. “If it’s a process issue, we break it down and ‘re-process’ it,” Ms. Farrell said. “If it’s a people issue, we re-educate and mentor/coach.”

“Learn from the experience, regroup and move on,” Ms. Knoepfller said.

Taking on the “Negatrons”

Courage requires dealing with negativity. Acknowledging there will always be naysayers, Ms. Farrell advocates engaging the high performers in “taking the lead on change” rather than focusing on low performers.

The 80/20 rule “is more like 98/2,” according to Ms. Scanlon. Ninety-eight percent of staff will “be positive and the other two percent are not always where you need them to be. We need to spend the time to develop and empower the ninety-eight percent.”

If nursing leaders involve staff in recruiting “the best of the best,” as Ms. Scanlon does at NSUH, the negative percentage shrinks further.

Optimism, like negativity, is contagious, Ms. Knoepfller said. “When it gets really tough, you have to become even more optimistic, but still realistic.”
The New Standard

The Focus and Intent of Holistic Care
By Kathleen Waton

Holistic nursing works. Just ask the practitioners who see the evidence every day.

Treating the whole patient — soothing the mind, healing the body and lifting the spirit — dates back to Florence Nightingale. The American Nurses Association endorses the holistic nursing field with research and evidence-based practice.

The North Shore-LIJ Health System has a history of holistic nursing care. For example, Judy DiBartolo, RN, who recently retired, founded Huntington Hospital’s Center for Complementary Care in 2002; North Shore University Hospital (NSUH) has had holistic nurses on staff for more than 10 years.

Nancy Mishanie, RN, a holistic therapist in NSUH’s Department of Patient- and Family-Centered Care, uses integrative modalities such as Amma massage, reflexology and integrative imagery. She tailored treatment to each patient, and has witnessed numerous instances in which holistic modalities relaxed patients and reduced their pain and nausea.

For example, integrative imagery helped guide a claustrophobic patient to a “special, relaxing place in her imagination” during an magnetic resonance imaging (MRI) session. The patient said, “I imagined that I was back on the beach, relaxed and free, and I felt as if I wasn’t even in the machine.”

A patient undergoing chemotherapy experienced significant relief with reflexology when Ms. Mishanie applied pressure to his hand and foot reflex points. He subsequently reported a decrease in neuropathy from a score of 7 to a 4. Ms. Mishanie has been working with DNP student Audrey Weisman, RN, to study the effects of integrative imagery on pain and anxiety in hematological patients during bone marrow aspiration and biopsy. She added that weekly relaxation sessions also help family members reduce stress and stay healthy during a challenging times.

Outcomes and Bottom Lines Improve

Studying how a holistic wellness program with peer support reduced nurses’ stress and improved their health was one of many research projects led by Debbie McElligott, RN, DNP, supervisor of community outreach for cardiothoracic surgery and medicine at NSUH and Southside Hospital, and coleader of North Shore-LIJ’s AHNA chapter.

Before introducing Amma massage to cardiac surgery patients at Southside Hospital, she studied 30 nurses for a month performing and experiencing the full body massage. “Some of the nurses had never had a massage before and some couldn’t even identify how to relax,” Dr. McElligott said.

Patients, Families, Staff Benefit

She often sees how holistic nursing affects patient and family satisfaction. Family members may not be able to witness life-saving medical interventions, but seeing an agitated loved one relax and fall asleep after a simple foot rub boosts perceptions of patient care. She added that recent research “makes the business case for holistic care, showing how healthy lifestyles can save money instead of spending money to cure disease [later on].”

Dr. McElligott helps patients prevent cardiac disease by facilitating community support groups. Her year-long Diabetes Prevention Program for employees “looks at the whole person, working with staff to help them eat nutritiously, support their peers and develop realistic, smart goals.”

Holistic nursing helps nurses, patients and family, Dr. McElligott said. “As I treat a patient with mindfulness, focus and intent, I’m as relaxed as the patient — and the whole family becomes relaxed.”

She and her colleagues are excited to see more North Shore-LIJ nurses offer holistic care. “Anyone can learn these techniques. We just need to take time for it.”

Many who practice holistic nursing incorporate Amma massage.
Engaging Patients with Nurse-Driven Discharge Planning

By Kathleen Waton

NEW HYDE PARK — Nurses at LIJ Medical Center have improved discharge planning to reduce readmissions, improve patient satisfaction and patient care at home.
"My Health Story" begins on admission and ensures that patients are prepared at discharge to care for themselves at home, with their family's help.
"The process makes sure patients understand their care and identify their individual discharge needs for us," said Linda Vassallo, RN, LIJ’s senior administrative director of patient care services. "That way, patients can take care of themselves at home, stay healthy, and prevent further acute exacerbations of their illness."

At admission, each patient receives a “My Health Story” brochure, which includes a checklist and space for notes. The brochure “invites them to think ahead about what they need when they go home — medications and side effects, special diet, medical equipment, help with bathing, stairs to navigate — so they are not overwhelmed on the day of discharge," Ms. Vassallo said.

Nurses, who place postdischarge follow-up calls to patients, are pivotal to the success of the program. "Nurses are not only patient advocates and provide the majority of the education in hospital, but also are leaders for the entire interprofessional team upon discharge," Ms. Vassallo said. Nurses may ask other clinicians to follow up, if necessary, with an additional call, or refer a patient with specific questions to a provider, case manager, social worker or pharmacist.

Patient Satisfaction Scores Jump
The process is garnering results. The risk-adjusted readmission index decreased from 1.03 YTD 2012 to 0.95 YTD 2013 — below the expected index of 1.0. Most HCAHPS (hospital consumer assessment of health care providers and systems) scores, reflecting patients’ perceptions of their care, jumped from the 50th percentile to the 75th percentile. LIJ now scores better than 75 percent of the hospitals in the comparative database in several categories, including “communication with nurses” and “discharge information.”

There are many quality-improvement initiatives at LIJ so "we can’t say implementation of ‘My Health Story’ directly affects scores," Ms. Vassallo said. “But taking all of the results together, we think we’re making a difference.”

Improving scores has the potential to increase reimbursement, providing “financial incentives to do the right thing,” she added. “But ultimately, programs are enacted to provide the best patient care.”

In December 2013, nurses in three pilot units started recording their discharge instructions at the bedside so patients could replay them at home and share with their caregivers. Eventually, videos, Web links and additional health education material may become available to "give patients even more tools to care for themselves at home," Ms. Vassallo said.

Nursing leadership sustains momentum in the program by sharing aggregate data regularly at nursing quality council and other best practice nursing forums and conferences. “Seeing the data on an ongoing basis drives us to improve and keeps it fresh and real for us.” Ms. Vassallo said. Nursing leadership members share the program’s success to encourage other hospitals to implement it — and improve patient outcomes.

Breath-Taking Vacation

While vacationing recently in St. Maarten, Siobhan McCann, RN, right, from LIJ Medical Center’s Cardiothoracic Intensive Care Unit, witnessed an unconscious scuba diver getting pulled from the water. She quickly stepped in to help with two other off-duty clinicians. After multiple rounds of CPR, the scuba diver began to breathe on his own. She and the other travellers/lifesavers – Susan Beker, MD, left, a Westchester Medical Center pediatrician, and Jaime DiBlasi, EMT, center, from Yonkers — posed to commemorate the event.
The CPR of Behavioral Health
By Kathleen Waton

Moved by the Sandy Hook Elementary School attacks, three North Shore–LIJ Health System behavioral health professionals launched a program to prevent such violence in the future.

Lyn Ballantyne, RN, insurance appeals nurse in the corporate Finance Department, Denise Hernaiz, RN, psychiatric nurse at Syosset Hospital, and Laurie Crosse, a licensed creative arts therapist at Syosset, are piloting PAVE (People Against Violent Episodes) in schools to build children’s confidence in detecting potentially dangerous behavior, reporting it and preventing it.

“If someone has a medical condition like a heart attack, we’re trained to intervene,” Ms. Hernaiz said. “But we learn early to avoid someone who seems odd or different, and it puts countless people at risk.”

The group felt very strongly about applying their 75 collective years of behavioral health experience to this “critical problem in America,” said Ms. Crosse. About 75 percent of recent perpetrators have had known histories of behavioral disturbance, she said.

Changing Attitudes
PAVE is intended to change how people talk and feel about behavioral health, Ms. Crosse said, “because the stigma is so profound and widespread it stops people from getting treatment or telling others and preventing violence.”

Designed for the average lay person, the program teaches basic steps to save lives. “It’s the CPR of behavioral health,” Ms. Ballantyne said.

The team started with children to encourage them to think differently about schoolmates who behave oddly or someone who is cursing, acting out and maybe doing drugs. “They won’t be so afraid and will know what to do while keeping themselves safe,” Ms. Hernaiz said.

The program teaches how to spot signs of aggression or withdrawal and who to call, depending on whether the situation is at school (a teacher), work (a supervisor) or somewhere else (dial 911). It can adapt to any age group.

Ms. Ballantyne said she and her colleagues hope to integrate PAVE in as many school systems’ core health education curricula as possible — not only nationwide, but globally. “The program can work in any language,” she said. “It’s not expensive and requires minimal equipment.”

Nursing Conferences and Continuing Education

Keep up-to-date on developments in the nursing field with North Shore–LIJ Institute for Nursing courses and conferences.

May
20 Nursing Leadership Conference North Hills Country Club, Manhasset
17 Oncology Conference North Hills Country Club, Manhasset
13 Nursing Research North Hills Country Club, Manhasset

June
9, 16, 23 Oncology Core Curriculum 420 Lakeville Rd, Rm. 244, Lake Success
17 Oncology Conference North Hills Country Club, Manhasset
3 Neuroscience Conference North Hills Country Club, Manhasset

Visit bit.ly/NurseEd2015 to register. Additional conferences and programs are added regularly. For more information or additional listings, contact the North Shore–LIJ Institute for Nursing at jferrugi@nshs.edu or call 718-470-3890.

The North Shore–LIJ Health System is an approved provider of continuing nursing education by the New Jersey State Nurses Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.
Feinstein Institute to Collaborate with Notre Dame

By Emily Ng

MANHASSET — The Feinstein Institute for Medical Research and the University of Notre Dame are collaborating on biomedical research projects involving sepsis and other diseases, student training, joint conferences and other forms of academic exchange.

“Each of our institutions brings with it a unique set of research skills and capabilities,” said Kevin Tracey, MD, president of the Feinstein Institute. “By working together, we will be able to make real advances in addressing a number of serious health challenges.”

“Being able to work closely with the world-class clinical researchers in their specialties at the Feinstein Institute will allow our analytical scientists and engineers to continue to be a powerful means for good in the world by solving problems of immediate interest to physicians and hospitals,” said Robert Bernhard, PhD, vice president for research at Notre Dame. “We are grateful for the opportunity of this partnership and look forward to the fruitful results that this collaboration will bring.”

Under the agreement, the two institutions will collaborate on research and joint publications of results, share scientific materials and publications, offer students an exchange program so they can experience research in another lab, and cooperate in the commercialization of inventions or intellectual properties. Early targets of the collaboration include sepsis, the leading cause of death from infection in the world and the costliest condition for US hospitals, bioelectronic medicine, devices that stimulate nerves to treat disease, and the development of tools and methods for exosome biology, which has broad implications for diseases that affect the brain, like Alzheimer’s disease and Parkinson’s disease.

The Feinstein Institute and Notre Dame are also partners in the Cleveland Clinic Health Care Innovation Alliance, a national network through which health care organizations and scientists benefit patients by combining efforts in research, clinical investigation, and technology development and commercialization.
MANHASSET — Three-dimensional (3D) printing can create a customizable, biodegradable tracheal segment that contains a patient’s own cells and can be used for complex tracheal reconstruction, according to recently released data from investigators at The Feinstein Institute for Medical Research.

The trachea (windpipe) is part of the respiratory system. This tube brings air to the lungs. Problems with the trachea include narrowing and inflammation, and some inherited conditions that can be deadly. Treatments usually involve removal of the affected tracheal segment. Patients with tracheal disease need a modern, improved method to reconstruct airways.

“In the lab, we can use 3D printing and tissue engineering to create a custom-designed tracheal prosthesis consisting of a patient’s own cells,” said lead author Todd Goldstein, a PhD candidate at the Hofstra North Shore–LIJ School of Medicine.

“Instead of removing an affected tracheal segment, which can be deadly to patients, surgeons can use the prosthesis to replace the tracheal segment.”

Mr. Goldstein has been working with a team of surgeons for the past year to determine if 3D printing and tissue engineering could be used for tracheal repair and replacement. Lee Smith, MD, chief of pediatric otolaryngology at Cohen Children’s Medical Center, and David Zeltsman, MD, chief of thoracic surgery at LIJ Medical Center, approached Mr. Goldstein and Daniel Grande, PhD, director of the Feinstein Institute’s Orthopedic Research Laboratory, to ask if 3D printing could offer a solution.

Drs. Smith and Zeltsman originally hypothesized that incorporating 3D printing and tissue engineering to grow new cartilage for airway construction might be possible in 10 to 20 years. Mr. Goldstein and Dr. Grande did it in a month.

Mr. Goldstein and his Feinstein Institute colleagues modified 3D Printing Reconstructs and Repairs Trachea

By Emily Ng

PhD candidate Todd Goldstein, right, worked with Daniel Grande, PhD, to find a solution for patients with tracheal diseases.

Peter Davies, PhD, Recognized for Advancing Research in Dementia

Peter Davies, PhD, director of the Litwin-Zucker Research Center for the Study of Alzheimer’s Disease at the Feinstein Institute for Medical Research and professor of pathology and neuroscience at the Hofstra North Shore–LIJ School of Medicine, has received the 2015 Potamkin Prize for Research in Pick’s, Alzheimer’s and Related Diseases from the American Academy of Neurology and the American Brain Foundation. The organizations honored Dr. Davies and Reisa Sperling, MD, of the Brigham and Women’s Hospital in Boston. The $100,000 prize — Dr. Davies and Dr. Reisa each received $50,000 — is an internationally recognized acknowledgement for advancing dementia research. Dr. Davies, whose research examines the process of Alzheimer’s disease, accepted the award at the American Academy of Neurology’s recent annual meeting in Washington, DC.
Kevin Cahill, MD, Receives Ireland’s Presidential Distinguished Service Award

By Margarita Oksenkrug

The Republic of Ireland recently honored Kevin Cahill, MD, director of the Lenox Hill Hospital Tropical Disease Center, for his vast contributions to peace, reconciliation and development. In a Dublin ceremony, Dr. Cahill accepted the 2014 Presidential Distinguished Service Award for the Irish Abroad from Michael Higgins, the country’s president.

Ireland reserves this honor for Irish expats who have made great contributions to Irish communities abroad and to Ireland’s international reputation. In addition to his medical career, Dr. Cahill serves as the president of the Center for International Humanitarian Cooperation, a nongovernmental organization that promotes healing and peace in nations shattered by national disasters, armed conflicts, or other violence. He is also the founder of Fordham’s Institute of International Humanitarian Affairs.

Dr. Cahill has served the Irish community in New York and the global community for decades. He is president-general emeritus of the American-Irish Historical Society and has been active on its behalf for 40-plus years.

Dr. Cahill began his medical career in 1961, studying tropical disease in the slums of Calcutta beside Mother Theresa. Since then, he has administered care in some of the most war-torn places in the world, including treating refugees in Sudan. Furthermore, Dr. Cahill has served concurrently as the special assistant to the governor of health affairs, chair of health planning commission and chair of the health research council of New York State.

Dr. Cahill has not only treated luminaries such as Pope John Paul II and Ronald Reagan, but has also offered his expertise to numerous prominent organizations such as the United Nations and the New York Police Department.

In his honor, Lenox Hill Hospital recently opened the Kevin M. Cahill, MD, Exhibition and Study Center. The center features Dr. Cahill’s book collection — many of which are antiquarian volumes — a study center and an exhibition space. The first exhibition, which focused on the connection between herbs and medicine, featuring materials contributed by the New York Botanical Garden, Memorial Sloan-Kettering Cancer Center and the Museum of Natural History. In the early spring, a new exhibit opened that features rare, miniature African passport masks — all from the private collection of Albert Stanziano.
MANHASSET — North Shore University Hospital (NSUH) has made two significant investments in surgical technology. Though the systems address different treatment challenges, they each work to enhance precision, speed and patient safety.

The hospital recently upgraded its neurosurgical intraoperative MRI (magnetic resonance imaging) suite with the Medtronic PoleStar N30, which provides the fastest, real-time intraoperative MRI available. NSUH is one of only two in the New York City/Long Island region to offer brain surgery with real-time MRI during surgery — and the first hospital in the area with the PoleStar N30.

“This investment lets us keep pace with the latest intraoperative MRI imaging technology,” said Alessandro Bellucci, MD, the hospital’s executive director. “The new equipment will enable our neurosurgeons to maintain navigational accuracy in the removal of brain tumors, enhancing patient outcomes.”

Michael Schulder, MD, director of North Shore-LIJ’s Brain Tumor Center, spearheaded the PoleStar N30 implementation. Dr. Schulder was the first neurosurgeon in North America (and the second in the world) to use the first-generation PoleStar system. He has used it to perform more than 600 brain tumor removal cases.

The PoleStar intraoperative MRI was created 15 years ago by and for neurosurgeons, for use in brain surgery. Its compact size and mobility allow it to be used in a regular operating room, without disruption to surgical routine.

“The PoleStar N30 is the latest version of this innovative system,” said Dr. Schulder. “It is much smaller than its predecessor and weighs about 200 pounds less, making it much easier to use during brain surgery. In addition, improvements to the magnetic resonance imaging and software have made the images even clearer and also much faster to acquire than before.”

Newest da Vinci System

The hospital has also upgraded its robot-assisted surgical program with the addition of da Vinci Xi technology. The new system allows surgeons to perform minimally invasive operations with even greater dexterity and precision.

NSUH is one of only three sites in the New York region to offer the latest version of the surgical robot. Robotic assistance allows surgeons to perform complex medical procedures from a computer console that controls the system’s arms. Surgical tools and a real-time 3D video camera are attached to the robotic arms and manipulated by a surgeon through tiny incisions during surgery.

“The Xi system expands the da Vinci’s capabilities and efficiency, which leads to faster recovery time and better surgical outcomes,” said Dr. Bellucci. “This investment lets North Shore University Hospital to maintain its status as a center of excellence for minimally invasive surgery.”

With the upgrade, surgeons no longer must manually reposition and adjust the robot for patients who require surgery on more than one area, said Lee Richstone, MD, vice chairman of urology for the health system and chief of urology at NSUH.
One example of such a procedure is a nephro-urectomy, which involves the kidney and ureter. “We have to work in the upper quadrant where the kidney is, then operate all the way down into the deep parts of the pelvis to remove the ureter and work on the bladder,” said Dr. Richstone. “That was difficult with the prior robot, because you had to position it for one procedure and then break it down and reposition it. Simplifying the setup positioning should shorten the overall length of the surgery and the amount of time a patient remains anesthetized.”

In the future, the new model will be equipped with imaging technology allowing surgeons to assess the blood flow to certain organs, such as the kidney, and identify cancerous and noncancerous tissue during surgery, said Dr. Richstone. This will help spare healthy tissue and ensure proper kidney function.

“The da Vinci Xi robot has changed the paradigm in robotic applications in surgical oncology. Cancer cases that previously required ‘open’ or ‘conventional surgery’ can now be performed robotically—including for cancers of the esophagus, stomach and pancreas,” said James Sullivan, MD, surgical oncologist and associate chair of surgery. "Previously, robotic applications for colon cancer were limited by the arm of the previous-generation robot. Now, the Xi system facilitates multi-quadrant surgery. Surgeries that used to require foot-long incisions in the abdomen and chest now require an incision of only eight to 15 millimeters."

North Shore-LIJ has offered robotic surgery since 2002. Health system facilities offer the da Vinci robot for general surgery, plus specialized cardiovascular, thoracic, gynecologic/women's health, colorectal, bariatric, cancer and urologic procedures. Last year, NSUH performed 647 surgeries using the da Vinci robot. More than 2,000 da Vinci surgeries were performed systemwide. LIJ Medical Center, Lenox Hill Hospital and Staten Island University Hospital also have the da Vinci system.

The PoleStar N30 improves on groundbreaking technology that lets neurosurgeons see real-time brain images in a regular operating room, without interrupting the surgery. The smaller, lighter system provides even clearer images in a faster capacity.

**PAD Device Makes Long Island Debut**

MANHASSET—North Shore University Hospital (NSUH) was the first Long Island facility to offer Lutonix, a new treatment for peripheral arterial disease (PAD).

Prior to this new drug-coated balloon, stents were the common treatment for PAD. But stents, particularly when placed in the legs, knees or hips, could potentially break down from twisting and bending motions, said Mitchell Weinberg, MD, director of the peripheral vascular intervention at NSUH and Lenox Hill Hospital. He added that the stent device could then allow plaque to develop more easily—prompting more treatment.

The Lutonix 035 Drug Coated Balloon PTA Catheter circumvents these potential complications by including a therapeutic dose of Paclitaxel to help increase blood flow and prevent plaque from forming.

“This drug-coated balloon gives patients another treatment option—one that could require fewer hospitalizations in the future,” Dr. Weinberg said.

Soon after implementation at NSUH, Lenox Hill Hospital began to offer the Lutonix in Manhattan.
STATEN ISLAND — Innovating “the least invasive approach,” the Staten Island University Hospital Heart Institute’s Alexander Wohler, MD, cardiothoracic surgeon, and Marcin Kowalski, MD, electrophysiologist, collaborated to repair damaged electrical pathways that can cause dangerous arrhythmia.

A racing heart, palpitations, chest pain, fainting, lethargy — these are symptoms atrial fibrillation (afib) patients know too well. The disorder causes the upper chambers of the heart (the atria) to contract abnormally. This malfunction of the heart’s electrical system is an ongoing risk of stroke or sudden cardiac death.

“Somebody’s got to be the first,” said James Fallucca, the 63-year-old Staten Islander who underwent the hybrid ablation. The retired assistant superintendent for the New York City Housing Authority, added, “I figured I’d help myself and help others. I used to be an energetic guy, but since my heart went into afib five years ago, I started falling asleep at the drop of a hat and I was worried all the time about having a stroke.”

Candidates for the hybrid procedure include those with intractable afib that doesn’t respond to medication, cardioversion or catheterization. Such patients typically have lived with atrial fibrillation for a long time, have an enlarged left atrium (one of the heart’s blood-pumping chambers) or have undergone ablation without results. Heart surgery patients are not candidates.

During the hybrid procedure, the surgeon makes tiny incisions, then passes a videoscope through them, navigating them to view the affected area of the heart. Then, the doctor uses a tool to focus radiofrequency energy on that area, shutting down the abnormal impulses. Subsequently, the electrophysiologist uses a balloon-tipped catheter, inserted via the blood vessels of the groin, to ablate additional areas from inside the heart.

During Mr. Fallucca’s follow-up visit, tests showed he was afib free. “I’m getting back to my energetic self,” he said. “And I don’t have to worry about stroke.”
Neurosurgery Residency Program Expands

MANHASSET — The Neurosurgery Residency Review Committee recently approved North Shore University Hospital’s (NSUH) Department of Neurosurgery for expansion of its graduate medical residency program from one to two residents per year. This is the first time that the committee, part of the Accreditation Council for Graduate Medical Education, has given this privilege to a program before a resident had graduated. “This is a testament to the quality of our residents and faculty, the system’s administrative leadership, and the vision of our department chair, Dr. Raj Narayan,” said Michael Schulder, MD, NSUH’s vice chair of neurosurgery and residency program director. “We will continue our mission to become a premier neurosurgical training program in the US.”

Rite of Passage 101

The 101-member Hofstra North Shore-LIJ School of Medicine class of 2018 recited the Hippocratic Oath during the White Coat Ceremony, held on-campus recently at the John Cranford Adams Playhouse. The traditional ceremony marks the beginning of the medical students’ transition from a student to a professional.

CME Course Schedule

Upcoming courses from North Shore-LIJ’s Office of Continuing Medical Education:

MAY

1-2 Controversies in Vascular Anomalies—Lenox Hill Hospital’s Heart and Vascular Institute
21 North Shore-LIJ and American Heart Association Collaboration for a Woman’s Heart Health Program
22 Skull Based Surgery Conference

JUN

3 Perinatal Conference
24 Training in the Recognition and Reporting of Child Abuse, Neglect, and Maltreatment


The North Shore-LIJ Office of Continuing Medical Education has received Accreditation with Commendation from the Accreditation Council for Continuing Medical Education. This accreditation sets the health system’s program in the top tier of all CME, including some of the most prestigious medical schools in the US. The office updates conference information weekly. Learn more at bit.ly/1bJWT8e or call 516-465-3CME (516-465-3263).
**Physician Appointments**

**Jill Kalman, MD**

Jill Kalman, MD, has been appointed Lenox Hill Hospital’s medical director. Dr. Kalman previously served as associate medical director at LIJ Medical Center. Prior to joining North Shore-LIJ, she held a series of cardiology and quality-improvement leadership positions at Mount Sinai Medical Center. Dr. Kalman directed the hospital’s cardiomyopathy and preventable admissions care team programs. Prior to Mount Sinai, Dr. Kalman was the New York University Medical Center’s Tisch Hospital director of the cardiomyopathy and chief of cardiac services.

Dr. Kalman received her MD from the Mount Sinai School of Medicine. She completed her residency in internal medicine and was a cardiology and heart failure/cardiac transplant research fellow at Mount Sinai.

**S. Jacob Scheinerman, MD**

S. Jacob Scheinerman, MD, has been appointed chair of cardiothoracic surgery at Lenox Hill Hospital. Previously, he served as associate medical director at LIJ Medical Center. Prior to joining North Shore-LIJ, she held a series of cardiology and quality-improvement leadership positions at Mount Sinai Medical Center. Dr. Kalman directed the hospital’s cardiomyopathy and preventable admissions care team programs. Prior to Mount Sinai, Dr. Kalman was the New York University Medical Center’s Tisch Hospital director of the cardiomyopathy and chief of cardiac services.

**Celso Tello, MD**

Celso Tello, MD, has been appointed chair of ophthalmology at Lenox Hill Hospital. He previously served as vice chair of cardiovascular and thoracic surgery at LIJ Medical Center, where he was also chair of the hospital’s medical board.

Under Dr. Scheinerman’s leadership, LIJ achieved New York State’s best outcomes for patients undergoing surgeries to repair or replace heart valves and for those in need of surgeries for both valve and coronary artery bypass graft surgery. The New York State Department of Health recognized Dr. Scheinerman as one of 11 surgeons statewide for extraordinarily low mortality rates.

**Souhel Najjar, MD**

Souhel Najjar, MD, has been named senior vice president and executive director of North Shore-LIJ’s neurology services, chair of neurology at Lenox Hill Hospital and Staten Island University Hospital (SIUH) and chair and professor of neurology at the Hofstra North Shore-LIJ School of Medicine. In these roles, he manages clinical services at the two hospitals, and oversees research, education and faculty appointments throughout the health system and the advancement of the Department of Neurology’s academic reputation.

Prior to this appointment, Dr. Najjar served as Staten Island University Hospital’s director of neurosciences and director of stroke since 2006. Previously, he served as director of epilepsy quality assurance and associate professor of neurology at New York University (NYU) School of Medicine and director and founder of the NYU Epilepsy Center.

Dr. Najjar succeeds Ronald Kanner, MD, at the medical school. Assuming a new role, Dr. Kanner has been appointed as chairman emeritus of North Shore-LIJ’s Department of Neurology and as associate dean at the medical school, working on curriculum development.

**Paul Wright, MD**

Paul Wright, MD, has been appointed chair of neurology at North Shore University Hospital (NSUH) and LIJ and vice president of neurology services for the health system’s central and eastern regions. Dr. Wright succeeds Ronald Kanner, MD, who served as the hospitals’ chair of neurology for the past 24 years. In addition to clinical oversight of neurology services, he works closely on academic and clinical research with Dr. Najjar.

An attending neurologist at NSUH and LIJ Medical
Center for the past 14 years, Dr. Wright most recently served as director of performance improvement at North Shore-LIJ’s Cushing Neuroscience Institute. He is also an assistant professor of neurology at the Hofstra North Shore-LIJ School of Medicine.

Cancer Institute

George Raptis, MD, who has served as North Shore-LIJ’s vice president of oncology network services since 2013, has been named acting executive director of the North Shore-LIJ Cancer Institute. Dr. Raptis previously spent 15 years at Mount Sinai Medical Center, where he directed the Derald H. Ruttenberg Treatment Center. He completed his medical school and residency training in internal medicine at Mount Sinai School of Medicine and later pursued fellowship training in medical oncology and hematolgy at Memorial Sloan Kettering Cancer Center.

Since joining the health system, Dr. Raptis has been working closely with Daniel Budman, MD, and Louis Potters, MD, to establish a systemwide Cancer Institute. Under their guidance, this network of 200-plus physicians with expertise in a full range of cancer specialties has experienced unprecedented growth. Dr. Budman will now help to guide the new relationship with Cold Spring Harbor Laboratory in his new role of director of translational research for North Shore-LIJ’s Division of Hematology and Medical Oncology. Dr. Potters will continue to serve as chair of radiation medicine and maintain his leadership role in the North Shore-LIJ Medical Group.

Craig Devoe, MD, a pancreatic cancer and clinical research specialist, has been named acting chief of hematolgy and medical oncology. Dr. Devoe has been a member of the division of Hematology and Medical Oncology since 2003. After earning his MD from Stony Brook University, Dr. Devoe served as an internal medicine resident at Winthrop-University Hospital and a hematolgy/oncology fellow at the Stony Brook School of Medicine. More recently, Dr. Devoe completed a certification in healthcare management at the Harvard University School of Public Health.

GREAT NECK — Patients with back ailments ranging from a minor strain to those requiring surgery can seek care from North Shore-LIJ’s new Spine Center. The center includes 10 physicians from the specialty areas of neurosurgery, orthopedics and physiatry who work closely with neurologists, rheumatologists, imaging specialists, physical therapists and psychologists. Jason Lipetz, MD, division chief of spine medicine and a physiatrist and nonsurgical spine specialist, leads the North Shore-LIJ Spine Center in partnership with the health system. The Spine Center has several several Long Island locations.

For more information, visit NorthShoreLIJ.com/spine.
HUNTINGTON — Small acts of kindness mean so much to patients in Huntington Hospital’s Emergency Department (ED). By offering pillows, blankets or something to drink, Fred Saunders makes the wait a bit more bearable.

“You’re helping people at a difficult time,” said Mr. Saunders, 79, a hospital volunteer who lives in Huntington Village. “If they’re feeling down, I commiserate with them.”

They may worry about test results and what’s in store for their health, and he engages them in conversation to ease their fears. Sometimes they want to see their doctor or nurse, and Mr. Saunders relays the request.

“The key thing is to make the patients more comfortable and to help them in any way that I can,” Mr. Saunders said. Since December 2011, he has served more than 1,200 hours at the hospital.

When a patient moves to another unit, Mr. Saunders removes the used linens from exam rooms, wipes those areas with disinfectants and redresses them. In busy times, he retrieves IV pumps from sterile processing, as well as stretchers and other equipment from various locations, enabling ED staff to focus more on patient care.

“I’m on my feet from the time I get there until the time I leave, minus maybe 15 minutes to eat a sandwich,” said Mr. Saunders, who retired from a varied career in data processing, marketing and stock brokerage. “There’s always something to do. The work itself is fun.”

Gina Torchon, the hospital’s director of volunteer services, praised Mr. Saunders’ commitment. “He volunteers in the ED twice a week and loves helping in every way possible. Because of his business background, he is able to analyze situations that he comes across in the ED and often makes suggestions for improvements. He is hardworking and well–liked by all.”

For instance, Mr. Saunders has streamlined the meal–ordering process by expediting menu selections to the hospital’s kitchen for patients who are able to eat. He also inquires about patients’ dietary restrictions and distributes food trays when meals are ready.

In addition, when college students volunteer at Huntington Hospital, Mr. Saunders mentors those who are contemplating a career in health care. And receiving positive feedback from patients “is what makes volunteering fulfilling.”

Lisa Eanniello, director of patient care services in the ED, said Mr. Saunders is “the consummate professional who is smart, engaged and well–respected. Fred is an integral part of our team and family, and we look forward to him being with us. He is an asset to our organization and ED.”
FOREST HILLS — Maggie Tang yearned to volunteer for a long time. While visiting a sick neighbor at what was then called LaGuardia Hospital, she had an eye-opening experience.

The neighbor’s friend volunteered at the facility, which inspired Ms. Tang to apply for a similar role at what is now known as Forest Hills Hospital. She began by sorting and filing documents in the Admitting Department two weekday evenings after her day job as secretary for a Manhattan textile importer.

That was in February 1995. Since then, Ms. Tang has clocked more than 10,000 volunteer hours.

“I just want to help. And I’m not very good at the medical stuff, so all I can do is help with the paperwork,” said Ms. Tang, who describes herself as very low-key. “It’s totally different from my office job. This is medical. For me, it’s a new experience.”

After the textile company Ms. Tang worked for closed its office in 2010, she went into semi-retirement, accepting a part-time position at the Forest Hills Library. Around that time, she upped her volunteer work at Forest Hills Hospital to three times per week, stationed in Employee Health Services to take care of paperwork.

For the past several years, Ms. Tang has been handling paperwork in the Presurgical Testing Department. She helps the secretary prepare forms that accompany patients’ samples to the hospital’s laboratory. When Ms. Tang brings the blood samples and forms to the lab for processing, her colleagues “joke and say I work for the vampire,” she recalled.

“Maggie is an unsung hero who always goes above and beyond the call of duty,” said Maureen Dukeman, admitting clerk in the Presurgical Testing Department. “She always anticipates our needs. Her values and love of mankind are profound. We are fortunate to have this quiet, unassuming individual who is the anchor of our team.”

Margaret Skowronska, the hospital’s coordinator of volunteer services, noted that Ms. Tang “always greets everyone with a smile. She brightens up the office the moment she steps through the door.”

Seeking additional ways to help patients, Ms. Tang offered to translate the pre-surgical questionnaire into Chinese. She grew up in Taiwan. In late 1984, she immigrated to the United States, resettling in Elmhurst for the first three years and then Rego Park, her home ever since.

In working with orthopedic patients on Wednesdays, she goes the extra mile to help them feel comfortable, Ms. Skowronska said. And when a blizzard struck the area, Ms. Tang’s dedication prevailed above all else.

“She walked for blocks to get in through the storm,” Ms. Skowronska noted. The patients — whom she treats like family — were waiting. She wouldn’t disappoint them.
NEW HYDE PARK — “This is a safe place where children and families can talk, cry, and share with others who also have lost a loved one.”

That’s how volunteer Donna Ludwig describes the Center for HOPE (Healing, Opportunity, Perseverance and Enlightenment) at Cohen Children’s Medical Center. The center offers developmentally age-appropriate group and short-term individual counseling to help children and adolescents cope with the loss of a parent or sibling.

Ms. Ludwig, who is retired and lives in Great Neck, volunteers at the center Monday evenings and some mornings during the school year. Through art, music and writing, the children reminisce about what brings them enjoyment.

“We start out with many general questions,” said Ms. Ludwig, who helps plan and lead the activities. For instance, she has asked the participants: “What do you like to do in the summer? What are your favorite ice cream flavors? What do you remember about your loved one?”

A social worker oversees each group of children, who come for three hours every other week. While the youth gather in groups, their parents and caretakers meet separately to work through their own pain and loss while learning strategies to empower themselves and their youngsters. Besides Cohen Children’s, other North Shore-LIJ facilities often refer participants, who come from Nassau and Suffolk counties, Queens, Brooklyn and the Bronx.

From toddlers to teenagers, about 140 young people find help at no cost through the center’s services each academic year. Children typically participate in the program for 15 months. The Center for HOPE also holds a memorial service around the winter holidays and at the end of the school year.

Expressing emotions is essential to dealing with grief and mourning. Many children have told Ms. Ludwig that they felt better after crying.

“A lot of the children who are grieving the loss one parent, feel the need to sleep in bed with the other parent,” she said. “Because they’re so afraid of something happening to the other parent, they don’t want to be separated. We allow them to talk and to say anything they want.”

Ms. Ludwig started at the Center for HOPE in 2004. She was a member of LIJ Medical Center’s Service Guild when Susan Thomas, LCSW, bereavement coordinator at the Center for HOPE, did a presentation at a board meeting. At the time, Ms. Ludwig was volunteering in the pediatric playroom with sick and terminally ill children. She has also volunteered in LIJ’s surgical waiting room.

“Donna is a wonderful volunteer who is extremely dedicated and committed to her work at the Center for HOPE,” Ms. Thomas said. “She engages easily with the children and adults who utilize our services and provides a caring, compassionate presence.”
ALBANY — The Health Care Association of New York State (HANYS) has named the North Shore University Hospital (NSUH) Auxiliary as Auxiliary of the Year.

Each year, HANYS recognizes two auxiliaries (from a large health care facility and a small one) with the honor at a special ceremony in Albany. This was the second time since 2009 that HANYS recognized the NSUH Auxiliary for its commitment to the health of the community, both inside and out of the hospital.

“This award by HANYS confirms what we at North Shore University Hospital have long known: Our Auxilians go above and beyond in supporting our hospital’s mission to serve the health care needs of Long Island,” said Alessandro Bellucci, MD, executive director of NSUH. “That they’ve won it twice speaks volumes of their dedication and commitment.”

More than 60 Auxilians support the NSUH Service Auxiliary, led by President Marilyn Sturtevant, a volunteer with the hospital since 2000. The group has been a vital force in raising funds to help expand and evolve NSUH since before the hospital – then known as North Shore Hospital – was opened in 1953.

The Auxiliary works on such programs as its $2 million fundraising campaign to support building a new helipad; the local Lion’s Club/NSUH Diabetes Wellness Program joint initiative that provides health screenings in high-risk and underserved communities; writing and obtaining grants to support the transportation needs of AIDS patients; and junior volunteer scholarships. The group also promotes hospital programs via its newsletter, the Volunteer Voice, available at local community centers, houses of worship and libraries.

The North Shore University Hospital Auxiliary supports many projects, including outreach initiatives of the Lions Club’s Diabetes Wellness Program, above.

EMT Goes the Distance

Meet the 67 mile woman. Recently, North Shore-LIJ EMT Morgan Medwin completed a 67.2 mile race across Long Island to raise funds and awareness for the health system’s Hospice Care Network. Ms. Medwin, an avid long-distance runner, hopes to run 108 miles in November 2015 because 108 people die each day from pancreatic cancer. Her mother, Delia McDermott, died of the disease in 2010. For more information, visit carerun108.com.
Helping Hands Reach Out
By Alexandra Zendrian

SANTIAGO DE GUAYAQUIL — Changing someone’s life forever can happen in minutes. Frequent medical missions in Santiago de Guayaquil, Ecuador’s largest and most populous city, allow Homayoun Sasson, MD, chief of plastic surgery at Franklin and Plainview hospitals, to experience this phenomenon first-hand.

For example, in 2009 Dr. Sasson treated a young man whose forehead had a benign tumor that was roughly the size of a tennis ball — and growing. Ostracized by his community, the patient never left home without a hat to cover the growth. During a short surgical procedure, Dr. Sasson removed the tissue and reconstructed the patient’s face.

The next year, the same young man visited Dr. Sasson when he returned for another Ecuadoran mission. The former patient expressed his gratitude, telling the doctor how the surgery changed his life. He no longer covered his face and was not afraid to go out in public.

“Making a difference in people’s lives in as quickly as 15 minutes — that kind of experience is unmatched,” Dr. Sasson said.

Blanca’s House, a Long Island group that was founded in 2008, organizes the missions to Santiago de Guayaquil. Dr. Sasson and two other physicians bring their own medical equipment and medications to serve numerous patients. Accompanying them are North Shore-LIJ nurses and residents to administer pre-, intra- and post-operative care. The health system has donated stretchers, beds and other surgical supplies to serve patients in and around the impoverished city.

“People begin to line up for medical care a day or two before we even arrive,” Dr. Sasson said. “Patients come from several miles away — in many cases on foot.”

During a week-long medical mission, Dr. Sasson usually performs more than 100 procedures. He primarily corrects severe facial or cranial deformities, hand deformities and burn damage. He also provides other surgical interventions as needed.

Later this year, Dr. Sasson will lead a similar mission to the Dominican Republic. North Shore-LIJ anesthesiologists, nurses, residents and medical students who want to participate can call Dr. Sasson at 516-487-5017 or visit BlancasHouse.org.
Promoting Peace, Love and Understanding

The Manhasset North Shore-LIJ Lions Club winner of the Lions Club International Peace Poster Contest this year was Audrey Zhang from the Island Trees School, who created “Peace, Love and Understanding.” Her poster will be submitted into the international contest.

Addressing Bias and Disparities

The North Shore-LIJ Health System Division of Diversity, Inclusion and Health Literacy recently hosted Howard Ross, far left, founder and chief learning officer at Cook Ross, Inc., and Sharonne Hayes, MD, far right, the founder of the Mayo Clinic’s Women’s Heart Clinic and director of diversity and inclusion, as keynote speakers for the health system’s third senior leadership summit at the Inn at New Hyde Park. Mr. Ross presented “Everyday Bias” plus an overview of recent research and practical steps to address unconscious bias in organizational and personal endeavors. Dr. Hayes shared her advocacy efforts for women’s health and offered insight into how diversity and inclusion practices can mitigate health disparities. Welcoming them were North Shore-LIJ’s Barbara Felker, second from left, vice president of diversity and community engagement; Laurence Smith, MD, center, executive vice president and physician in chief; Jennifer Mieres, MD, second from right, senior vice president and chief diversity and inclusion officer.
SPARK! Challenge Ignites Interest in Health Care Careers

By Jenn Krusch

GREAT NECK — Local high school students recently visited North Shore-LIJ facilities, participating in the health system’s career days. They shadowed health care professionals and experienced what it’s like to work in a variety of clinical and nonclinical health care careers.

These efforts were part of the new system-wide SPARK! Challenge program, which was created by North Shore-LIJ’s Division of Workforce Readiness and involves a partnership between the health system and 22 public and private high schools throughout Nassau County, Suffolk County, Queens, Manhattan and Staten Island.

“This program allows students to experience a day in the life of working at North Shore-LIJ,” said Cheryl Davidson, director of workforce readiness at North Shore-LIJ. “While our goal was to ignite student interest in STEM [science, technology, engineering and math] careers, the program has sparked a renewed passion system-wide for helping to develop the next generation of health care professionals.”

From taking part in a cooking challenge at North Shore University Hospital to simulating the tracking of a patient going through emergency and trauma protocols at Southside Hospital in Bay Shore, nearly 500 students were matched with one of 30 North Shore-LIJ sites and given the opportunity to shadow professionals from various fields for a day. From these schools, 31 teams of students were formed and partnered with mentors from North Shore-LIJ.

Following their visit, each team created a video to showcase what they learned with the help of a mentor from North Shore-LIJ to enter the health system’s video competition.

The health system promotes educating local students early on about careers in health care. North Shore-LIJ is a co-steward, along with Brookhaven National Laboratory, of the Long Island STEM Hub and has helped foster several health care career academies on Long Island and in New York City schools. For more information, visit NSLIJSparkChallenge.com and search for fun student photos on social media using the hashtag #NSLIJSparkChallenge.

Cultivating Next-Gen PAs

MANHATTAN — Lenox Hill Hospital physician assistants (PA) recently gave a peek into their profession to more than 100 high school juniors. During National PA Week, PAs performed a live defibrillator simulation for students from St. Jean Baptiste and Eleanor Roosevelt high schools. The teens then broke into groups to learn how to take a blood pressure reading and how PAs use ultrasound equipment.

“PAs are vital to successful health care reform because they are suited to collaborative, team-based health care and wellness promotion,” said Jonathan Sobel, PA-C, Lenox Hill Hospital’s director for PA services. The vocation is among the fastest growing careers in the US, according to the National Bureau of Labor Statistics.

The St. Jean Baptiste High School visitors are part of the hospital’s first-of-its-kind, 15-week PA Internship Program. “I definitely am considering becoming a PA in the surgical field,” said Dorcas Atatishe, 15, one of Lenox Hill’s five PA interns.
Health Force Tackles ICD-10

By Diane O’Donnell

The world of medical coding will change drastically this October. Graduates of a new medical coding training program of the North Shore-LIJ Health Force will be ready to tackle those changes.

The transformation will happen when 17,000 billable codes for medical diagnoses of International Classification of Diseases, Ninth Revision (ICD-9), will become obsolete. Replacing them will be the 70,000 codes of ICD-10, said Cyndi Thomas, vice president of business development for Health Force.

Medical codes help classify patient treatments. The proper code is necessary to determine insurance reimbursements to health care practitioners or medical facilities.

Thirty-one students began the Health Force medical coding program last October at SUNY Downstate Medical Center in Brooklyn. They were chosen from 180 applicants who had a minimum of a two-year associate’s degree, preferably in a health care field.

The program is a perfect fit for 22-year-old Christina Bacchus, who has an associate’s degree in health information technology and is working toward a bachelor’s in health administration.

“I knew I wanted to get into the health field,” said Ms. Bacchus, who originally wanted to enter the radiology field. However, after shadowing a radiologist, that career choice changed.

“I found out that providing direct patient care wasn’t for me,” she said. The Health Force medical coding program taps into Ms. Bacchus’ previous training and adds to it.

Students attend classes Monday through Friday from 9 a.m. to 5 p.m., developing a firm understanding of anatomy, physiology and medical terminology, as well as insurance plans, regulations and codes.

Throughout the 16-week course, students receive a biweekly salary totaling $8,000 upon completion. Students who score an 85 or higher on their coursework will receive a $2,000 bonus and be offered a position in the health system as an inpatient hospital medical coder.

According to a CNBC report earlier this year, there is a 20- to 30-percent shortage of medical coders nationwide. That deficit is likely to grow to 50 percent in the coming year because of the new ICD-10 coding standard.

Health Force’s medical coding program is designed to buck that trend.

“This is a health system that has really done something about the shortage of medical coders,” said Ms. Thomas. “Instead of complaining that there aren’t any coders out there, we’re growing coders.”
MANHATTAN — Eighty-year-old New York City resident Joel Ross recently completed his radiation treatments — one of the first to be treated in Lenox Hill Hospital’s newly expanded Department of Radiation Medicine, part of the North Shore-LIJ Cancer Institute.

Featuring Manhattan’s only TomoTherapy unit, the facility is another example of the ongoing expansion of the North Shore-LIJ Cancer Institute, one of the largest cancer treatment programs in the metro New York area.

“The Radiation Medicine Department at Lenox Hill is uniquely able to provide total care for cancer patients — a true need in this hospital’s community,” said Louis Potters, MD, the health system’s chair of radiation medicine.

TomoTherapy combines 3D imaging and rotational delivery of radiation to offer highly focused therapy with unprecedented accuracy. It is a treatment solution for a variety of cancers, including complex tumors and tumors that are close to critical organs. Lenox Hill Hospital’s radiation medicine expansion also includes intra-operative breast cancer treatments, which lets radiologists treat patients during surgery and decreases the need for postoperative treatment.

“Expanding radiation oncology services is evolving Lenox Hill’s cancer program into a full-fledged, multidisciplinary oncology center with a team of experts committed to providing the most comprehensive and effective therapies available to our patients,” said Peter Costantino, MD, executive director and senior vice president of the New York Head and Neck Institute and North Shore-LIJ’s otolaryngology/head and neck surgery services.

Above: Joel Ross celebrated the end of his radiation treatment by ringing a ceremonial gong at Lenox Hill Hospital’s Department of Radiation Medicine, which is part of the North Shore-LIJ Cancer Institute.
Unique Breast Cancer Services on Staten Island

STATEN ISLAND — Staten Island University Hospital (SIUH) recently kicked off construction of the new home for The Florina Rusi-Marke Comprehensive Breast Center.

The center is dedicated to the memory of Florina Rusi-Marke, a Staten Islander who was diagnosed with breast cancer in 2002, at 35 years old. Stunned when Ms. Rusi-Marke succumbed to the disease within a year, the Rusi family galvanized to help others and teamed up with Cynara Coomer, MD, SIUH’s chief of breast surgery, to fight the disease.

Housed above the hospital’s Breast Imaging Center, the Florina Rusi-Marke Comprehensive Breast Center will offer first-of-its-kind service on Staten Island. The center expands on a multidisciplinary approach of advanced imaging, surgical and reconstructive techniques, and collaborative care with medical oncologists, radiation oncologists, and dedicated geneticists and pathologists. Its Nurse Navigator Program serves as the touchstone for patients on their journey.

The contemporary surroundings will include space dedicated to holistic therapies such as yoga, reiki, massage therapy and meditation. A wellness boutique will offer symptom-easing lotions and custom wigs for patients undergoing chemotherapy. Dedicated conference rooms will provide space for support groups and seminars, plus iPads for entertainment and personal research. Construction is slated for completion this spring.
LAKE SUCCESS — The North Shore-LIJ Medical Group Endovascular and Vascular Access Program (1999 Marcus Ave., Suite M9) provides convenient outpatient care for patients who need dialysis access maintenance and repair; diagnosis and treatment of peripheral arterial disease (PAD); placement and maintenance of chemotherapy ports; and treatment for venous diseases. Omid Rahmani, MD, medical director, leads the practice, which features four dedicated physicians plus anesthesiologists, interventional radiologists and other specialists.

GARDEN CITY — The new North Shore-LIJ Imaging at Garden City (711 Stewart Ave.) boasts more than 10,000 square feet of completely renovated space. The facility offers a full range of imaging services with advanced techniques such as 3.0T MRI (magnetic resonance imaging), low-dose CT (computed tomography), ultrasound, digital X-ray and image-guided procedures and biopsies. North Shore-LIJ Imaging at Garden City also offers full-service breast imaging with digital mammograms (including 3D mammography as a complement to standard mammography), breast ultrasound, breast MRI and breast biopsies and procedures (MRI-guided, ultrasound-guided and stereotactic).

MANHASSET — The recent relocation of the North Shore-LIJ Department of Physical Medicine and Rehabilitation (1554 Northern Blvd) will facilitate physiatrists’ collaborative treatment of patients who require care from multiple rehabilitation professionals, said Adam Stein, MD, chair of the department. The facility already houses Transitions of Long Island and Sports Therapy and Rehabilitation Services (STARS). Specializing in neurological disorders, spine care, cancer rehabilitation, amputation and limb deficiency treatment and care for a wide variety of musculoskeletal disorders, the practice also provides electrodiagnostic testing, diagnostic and therapeutic musculoskeletal ultrasound, botulinum toxin injections and baclofen pump therapy for spasticity management.

BABYLON — The North Shore-LIJ Orthopaedic Institute at Babylon (200 West Main St., Suite 100) provides hand, spine, knee, hip and sports medicine services. The facility features physicians from the North Shore-LIJ Orthopaedic Institute at Southside Hospital.

SurgiCenter Partnership

GARDEN CITY — The North Shore-LIJ Health System recently affiliated with Garden City SurgiCenter (GCSC), a free-standing ambulatory facility specializing in ophthalmic surgery that performed more than 6,000 procedures last year.

The 10,069-square-foot facility has 39 staff ophthalmologists, including oculoplastic surgeons, anterior segment surgeons, glaucoma surgeons, cornea surgeons, retina surgeons and anesthesiologists and three operating rooms. The staff has treated patients with vision-related conditions, such as cataracts and glaucoma, since its opening in 1987.

“The concept behind this is that ambulatory surgery centers are where most ophthalmologists around the country do their work,” said Ira Udell, chair of ophthalmology at North Shore University Hospital and LIJ Medical Center. “Hospitals have been in decline in terms of where ophthalmology occurs. Most of these ambulatory surgery centers are owned by ophthalmologists as partnerships, but some centers are run by hospitals in partnership with the private doctors. That is the model we are adopting here.”

“The time is right for Garden City SurgiCenter to partner with the largest and most respected health care organization in the metro New York area,” said Jodi Luchs, MD, managing director of GCSC. “Through our new partnership we will continue grow, expand, and innovate as we set new standards for the delivery of cutting edge ambulatory surgical care.”
GREAT NECK — Two students from Uniondale High School each received $2,500 scholarships toward their college educations during the North Shore-LIJ Health System’s recent Dr. Martin Luther King, Jr. commemoration ceremony at the health system’s corporate headquarters in Great Neck.

The two students — Valdemar Wany and Adenike Adeyemi-Jones — want to study biology in college and were part of the North Shore-LIJ Medical Scholars Pipeline Program, which works to increase diversity in the health care field. During the Dr. King celebration, Michael Dowling, president and chief executive officer of the health system, told the young students, “Never underestimate your potential. Set the bar high and then raise that two notches.”

In addition to recognizing the talent and dedication of these students, three children of North Shore-LIJ employees were given awards for the collages, essays and videos they created honoring Dr. King. Fifth-grader Chloe Porter, whose mother is a registered nurse at Cohen Children’s Medical Center, created a photo collage and essay about her volunteer experiences. Sarah Hao, a fourth grader, and Sebastian Barkan, a seventh grader, received recognition for their projects as well. About 50 students participated.

“The awarding of these scholarships and the Dr. King contest exemplify the health system’s commitment to the communities it serves. We look forward to seeing the great things these students will accomplish in the future,” said Barbara Felker, North Shore-LIJ’s vice president of diversity and community engagement.

For the second year, North Shore-LIJ has honored Dr. King by focusing on his legacy of service through food drives at many health system sites. During the commemoration ceremony, Ms. Felker announced that the health system collected more than 12,000 pounds of food, which was donated to Island Harvest, City Harvest and Westchester Harvest.

Acts of Service Commemorate Dr. Martin Luther King, Jr. Day

By Alexandra Zendrian

A Friend Becomes a Knight

Francois Hollande, President of France, recently knighted Roger Acker, honorary member and honorary chair of the Staten Island University Hospital (SIUH) Board of Directors.

At the Lycée Français de New York, Mr. Acker received a Chevalier medal, making him a member of the French Legion of Honor. This is the highest decoration bestowed in France and is also awarded to foreign nationals who have risked their lives for liberty or have served France and the ideals it upholds.

Mr. Acker was a US Army sergeant who served in the Ardennes Forest in the Battle of the Bulge, Hitler’s last major offensive against the Allied Forces. He was captured in March 1945 and a month later escaped the German prisoner of war forced march. Aided by locals, he made it back across friendly lines. Mr. Acker received a Purple Heart, the Bronze Star and two Battle Stars.

In addition to his service to his country, Mr. Acker was a tireless volunteer at Staten Island. He served on numerous boards, including Richmond Memorial Hospital, before it merged with Staten Island Hospital to form SIUH, where he became chair of the Board of Trustees. Mr. Acker essentially preserved both hospitals through that merger. In 1994, the South Site dedicated its new surgical unit after him.

Mr. Acker, left, was congratulated by Anthony Ferreri, an executive vice president at the health system and SIUH’s former president and CEO.
Distinctions

The Human Rights Campaign Foundation’s Health Care Equality Index recognized eight North Shore-LIJ Health System facilities for their inclusive, respectful care for lesbian, gay, bisexual and transgender patients and their families. The Human Rights Campaign Foundation cited the Feinstein Institute for Medical Research, Forest Hills Hospital, Lenox Hill Hospital, LIJ Medical Center, North Shore University Hospital, Plainview Hospital, Southside Hospital and Staten Island University Hospital for nondiscriminatory patient and employee policies, patient visitation policies and training in respectful care.

“Treating our patients does not only mean providing medical aid, but also treating them with respect and compassion,” said Barbara Felker, MDiv, North Shore-LIJ’s vice president of diversity and inclusion. The health system emphasizes compassionate, culturally sensitive and respectful care to patients and their loved ones. Many educational initiatives support these efforts, with classes offered regularly at North Shore-LIJ’s Center for Learning and Innovation.

Furthermore, DiversityInc recently recognized the North Shore-LIJ Health System for the second straight year as a “Top 10” health system for diversity and inclusion.

The National Committee for Quality Assurance (NCQA) recognized Huntington Hospital’s Dolan Family Health Center as a Patient-Centered Medical Home (PCMH). The center received a three-year, level-three designation—the highest level of recognition. The NCQA cited the Dolan Center for its evidence-based, patient-centered processes that focus on highly coordinated care and long-term, participative relationships.

Transparency and Integrity

The Ethisphere Institute has named the North Shore-LIJ Health System one of the World’s Most Ethical Companies for 2015. Andrew Schulz, second from left, North Shore-LIJ’s senior vice president and general counsel, and Greg Radinsky, second from right, chief corporate compliance officer, accepted the award from Ethisphere during the organization’s recent New York conference. The World’s Most Ethical Companies distinction recognizes superior achievement in transparency, integrity, ethics and compliance. Other 2015 honorees include the Nature Conservancy, Google, Dun and Bradstreet and the Cleveland Clinic.

Joint Commission Honors North Shore-LIJ Patient Safety

The Joint Commission’s National Quality Forum has recognized the North Shore-LIJ Health System with the regional John M. Eisenberg Innovation in Patient Safety and Quality Award. The health system was honored for lowering sepsis mortality by 50 percent.

In 2009, North Shore-LIJ established a system-wide process for early diagnosis and treatment of the sepsis syndrome. Staff members have worked with the Staunton family, whose son, Rory, died from sepsis at a Manhattan hospital, and the Institute for Health Care Improvement to create a checklist of sepsis signs to better ensure patients are quickly flagged for this infection. “Rory’s Regulations” were issued by the New York State Department of Health in 2013.

“Between our sepsis research at the Feinstein Institute for Medical Research, to our focus on creating a comprehensive sepsis diagnosis process, the North Shore-LIJ has taken the lead in efforts to prevent and diagnose this often fatal syndrome,” said David Battinelli, MD, the health system’s chief medical officer.

continued on page 60
STATEN ISLAND — Anthony Ferreri, executive vice president, chief affiliation officer and regional vice president for Westchester, recently received the Community Leadership Award from *Modern Healthcare* magazine.

The magazine’s senior editors followed a three-month selection process that included 50 nominees. Reader votes accounted for 50 percent of the outcome.

Mr. Ferreri has served as SIUH’s president and chief executive officer since August 2003. He was named North Shore-LIJ’s southwest region executive director in 2013. With him as president, SIUH accomplished a major expansion of its emergency department with the 2009 opening of the Elizabeth A. Connelly Emergency and Trauma Center and realized its dream for a 21st century globally connected medical education facility in 2011 with the completion of the Regina M. McGinn, MD Education Center. At the helm of two hospitals in flood zones, Mr. Ferreri led the evacuation of patients in advance of Hurricane Irene and was at the helm of the effort to protect patients and staff before, during and after Superstorm Sandy.

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**Modern Healthcare Salutes Anthony Ferreri**

**Christina Brennan, MD**, director of clinical research for cardiovascular services at the North Shore-LIJ Health System, was recently named president-elect of the New York Metropolitan Chapter of the Association of Clinical Research Professionals (ACRP). ACRP is the primary source for clinical research professionals in hospital academic centers, pharmaceutical, medical device industries and biotechnology. Dr. Brennan will become president of the organization in 2016.

**Robert Graham, MD**, director of integrative health and wellness at Lenox Hill Hospital, presented “Rooftop to Bedside” at TEDxManhattan. Dr. Graham detailed how Lenox Hill Hospital’s rooftop garden is a pioneering force in the urban agriculture movement and how the hospital’s kitchen incorporates fresh herbs and vegetables into meals for patients. Additionally, he presented “Learn One, Cook One, Eat One” a cooking/nutrition program to give medical residents with the skills to model healthy cooking and eating behaviors to patients.

**Sonia Henry, MD**, cardiologist at LIJ Medical Center, was recently honored at the Kicked It In Heels (KIH) Annual Benefit in Manhattan. KIH, which addresses health care disparities for African-American women with breast cancer, recognized Dr. Henry’s cardio-oncology initiative within LIJ’s Women’s Heart Health Program.

**Seymour Katz, MD**, attending gastroenterologist at North Shore University Hospital and LIJ, was an author on “Mesalamine Dose Escalation Reduces Fecal Calprotectin in Patients with Quiescent Ulcerative Colitis,” recently published in *Clinical Gastroenterology Hepatology*. Dr. Katz also cowrote “Drug Management in Elderly IBD patient” in *Current Treatment Options in Gastroenterology* and “Smoking and Early Infliximab Response in Crohn’s Disease: a Meta-Analisis” in the *Journal of Crohn’s and Colitis*, and “Pathogenesis, Diagnosis and Management of Ulcerative Proctitis, Chronic Radiation Proctopathy and Diversion Proctitis” for the *Journal of Inflammatory Bowel Disease*.

**Anne Miglio RN, NP**, from Southside Hospital’s Palliative Care Program, recently received the Nursing Clinical Practice Award from the American Society for Pain Management at the organization’s 2014 Annual Conference in San Diego, CA. Ms. Miglio established Southside’s Palliative Care Program after serving in the hospital’s acute pain services.

**Jesse Roth, MD**, head of the Laboratory for Diabetes and Diabetes-Related Research at The Feinstein Institute for Medical Research and professor of medicine at Hofstra North Shore-LIJ School of Medicine, recently received an honorary degree from the Weizmann Institute of Science in Rehovot, Israel. One of the world’s leading multidisciplinary research institutes, the Weizmann Institute honored Dr. Roth for his research on insulin receptors and other molecules of intercellular communication that have become the foundation for understanding endocrine disorders today. Dr. Roth’s findings advanced the understanding of insulin and andrenocorticotropic receptors.
The Franklin Hospital Division of Behavioral Health has received the Press Ganey Guardian of Excellence Award for Patient Experience. Franklin’s behavioral health team garnered the award after achieving 95 percent in patient satisfaction scores for 2014. The behavioral health team includes physicians, administrators, nurses, nurse techs, art therapists, social workers, nurse practitioners and administrative assistants. In addition to benefiting from a team-based approach to care, Franklin’s behavioral health patients benefit from a patient orientation on their first day in the hospital, plus ongoing postdischarge follow-up by a nurse manager.

The National Center for Health Care Leadership has named the North Shore-LIJ Health System as one of the Best Organizations for Leadership Development (BOLD) for the health system’s training plans for future executives. North Shore-LIJ was one of the top 10 recipients of this distinction.

North Shore-LIJ dedicates significant effort and resources to leadership team development. For instance, the Center for Learning and Innovation (CLI), the health system’s corporate university, offers staff members a wide variety of classes to augment management skills and understanding of the health care field. CLI offers the Physician High Potential Program over two years, plus a year-long Administrative/Clinical High Potential Program.

The National Committee for Quality Assurance (NCQA) has recognized two North Shore-LIJ Health System entities for providing exceptional care to patients with diabetes. The School Street Family Practice in Glen Cove and North Shore Internal Medicine Associates in Great Neck received a three-year certification for their diabetes programs. To qualify for recognition, physicians and staff at those sites submitted data that demonstrated performance that meets NCQA’s 11 key diabetes measures such as blood pressure control, cholesterol management, and smoking and tobacco cessation advice or treatment.

Staten Island University Hospital (SIUH), has received the Get With The Guidelines Stroke Gold-Plus Quality Achievement Award from the American Heart Association/American Stroke Association. SIUH earned the award by meeting specific quality achievement measures for the diagnosis and treatment of stroke patients at a set level for a designated period. SIUH also earned a place the American Heart Association/American Stroke Association’s Target: Stroke Honor Roll for meeting stroke quality measures that reduce the time between hospital arrival and treatment with the clot-buster tPA. People who suffer a stroke who receive the drug within three hours of the onset of symptoms may recover quicker and are less likely to suffer severe disability.
Four patients recently received free hip replacements, courtesy of the North Shore-LIJ Health System and Operation Walk USA. Among the recipients were David Chalker, a machinist and Army veteran who received two hip replacements and looks forward to returning to work, and Dean Horowitz, who can walk again after severe arthritis-related pain in his left hip compromised his mobility.

Since its founding in 2010, Operation Walk USA has arranged and provided free knee- and hip-replacement surgery for almost 500 patients across the country who couldn’t afford it. Giles Scuderi, MD, vice president of orthopedics for the North Shore-LIJ Health System, cofounded the nonprofit organization. Physicians and staff members at multiple health system facilities routinely participate. This year, North Shore-LIJ orthopedic surgeons Matthew Hepinstall, MD, and Michael Nett, MD, performed the free procedures at Franklin Hospital, Lenox Hill Hospital and Southside Hospital. North American Partners in Anesthesia; Lenox Hill Medical Anesthesiology; South Bay Anesthesia; Orzac Center for Rehabilitation; the Stern Family Center for Rehabilitation; Broadlawn Manor; North Shore-LIJ Home Care Network; and Sports Therapy and Rehabilitation Services (STARS) also provided free services to patients.

To learn more about North Shore-LIJ’s participation in Operation Walk USA, contact Asha Jacob, DPT, administrative director of orthopedics at Franklin Hospital, at 516-256-6517.

Making a Path to Recovery

Feinstein Researchers Use 3D Printing for Tracheal Reconstruction

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under the microscope

a MakerBot Replicator 2X Experimental 3D Printer to customize a printer that could print living cells. The modified printer first produces a biodegradable structure that serves as a scaffold. The size and shape of the scaffold can be customized for each patient. The printer then inserts living cells into the scaffold to create a completed, customized tracheal segment for implantation.

The team presented study data at the Society of Thoracic Surgeons’ recent annual meeting. The data showed that they made three types of printed segments: empty segments, segments without living cells (controls), and segments that had been combined with living cells. The bio-printed living cells were tested for viability, proliferation (cell growth and division) and gene expression. The researchers found that the cells survived the printing process, were able to continue dividing, and produced the cellular properties expected in healthy tracheal cartilage.

“While further development is necessary before a clinical trial would be viable, our results show that 3D printing technology is a feasible alternative to traditional treatments,” said Mr. Goldstein.

View a video about 3D printing at the Feinstein Institute at bit.ly/FIMR3d.
NEW HYDE PARK —
JoHanna Ribisi has already experienced a lifetime of drama and medical challenges that she has sailed through beautifully. The dainty young lady will someday hear about the rare hybrid cardiac procedure that saved her life when she was five months old.

JoHanna was born on May 31, 2014 and appeared to be fine for her first two months, said her father, Jason Ribisi. “We brought her to the pediatrician for a routine visit and were shocked to discover she had a heart murmur.”

Mr. Ribisi and his wife, Michelle, also noted that their daughter was barely eating and wasn’t gaining weight. A visit to a pediatric cardiologist revealed that JoHanna was living with congestive heart failure.

“For a new mom, those are the worst words you could ever hear,” Ms. Ribisi recalled.

Further testing revealed a large, muscular ventricular defect (VDS), a hole located between the lower chambers of the heart. The doctor prescribed medicine to help JoHanna’s heart and lungs work more efficiently, and referred her to David Meyer, MD, a pediatric heart surgeon at Cohen Children’s Medical Center.

The Ribisi family recently joined Dr. Meyer and Shilpi Epstein, MD, an interventional pediatric cardiologist at Cohen Children’s, to speak at a hospital news conference to discuss the rare procedure that saved JoHanna’s life.

“We discovered that the defect was very large and near the bottom of the heart, near lots of thick muscle bundles,” Dr. Meyer said. “With a heart this size [about the size of JoHanna’s fist], it’s difficult to close the defect completely with traditional open-heart surgery. Also, traditional surgery requires a larger chest incision and a heart/lung bypass machine, which would completely stop the heart during work to repair it. We wanted to try another approach.”

Drs. Meyer and Epstein devised a plan to close the VSD through a small incision in JoHanna’s chest wall and a smaller opening into her beating heart.

The procedure involved the use of an Amplatzer muscular VSD device, said Dr. Epstein. “This required only a small chest-wall incision and no bypass for a complete fix of the VSD,” she said. “When I finished repairing the hole in the heart, Dr. Meyer took over to tie up the tiny blood vessels and close the incision.”

JoHanna went home three days after her two-hour surgery. The recovery was less painful for her than traditional surgery. She sports only a tiny scar from the procedure.

At the news conference, JoHanna made her first public appearance since the surgery in her finest pink coat and a fuzzy white headband. The four-month-old clearly stole the show from her grateful parents and her delighted physicians.

“This is really what makes us wake up in the morning. It’s just wonderful,” said Dr. Meyer.

Rare Heart Surgery Saves Baby
By Michelle Pinto
More than 20 years of suffering for an East Northport man finally ended when a Huntington Hospital neurosurgeon performed a delicate procedure to relieve pressure against the patient’s nerve.

When he met Robert Kerr, MD, PhD, Roger Borg lived with a constant ache in his head and face, and was at ongoing risk for shocking, searing jolts. At first, it wasn’t so bad. In his early 20s, Mr. Borg experienced brief, sharp pain on the right side of his head, but he shrugged it off. Over time, the situation worsened and he needed medication for relief. A 2002 magnetic resonance imaging (MRI) scan did not detect anything abnormal. By summer of 2013, the ongoing pain made it difficult for him to work as an operating engineer at LaGuardia Airport.

Mr. Borg sought help from several doctors, including dentists and neurologists, but he did not receive a proper diagnosis until he met Shalini Patcha, MD, an attending neurologist at Huntington Hospital. Dr. Patcha diagnosed Mr. Borg with trigeminal neuralgia, a condition usually characterized by intermittent, shooting pain on one side of the face.

“Trigeminal neuralgia affects the trigeminal nerve, one of the largest nerves in the head,” said Dr. Patcha. “The trigeminal nerve sends impulses of touch, pain, pressure and temperature to the brain from the face, jaw, gums, forehead and around the eyes. In Mr. Borg’s case, we first tried treating him with appropriate medication. While that initially helped alleviate symptoms, the positive effect wore off over time. We then considered him to be a good candidate for microvascular decompression [MVD].”

The most common cause of trigeminal neuralgia is of the nerve compression by an artery, vein or a combination of both. Each heartbeat creates a micro-concussive injury to the nerve. Over time, the insulation around nerve fibers frays and normal stimulation “short circuits.” Pain is the result.

MVD was the ticket to relief.

Pressure Relief

“Neurosurgeons perform MVD through a small opening in the skull — about the size of a quarter,” said Dr. Kerr. “With the assistance of a high-powered surgical microscope and sometimes an endoscope, the doctor can delicately dissect and move the artery and vein located right against the brainstem, which is pressed into the side of the nerve. Then the neurosurgeon inserts a small, Teflon sponge between the compressing vessel and the trigeminal nerve. The sponge helps to isolate the nerve from the pressure of the blood vessel, relieving pain symptoms and allowing the nerve to heal.”

Immediately after surgery, Mr. Borg’s pain disappeared.

“There’s no more sharp, stabbing pain and I am currently off medications that I had taken for years,” Mr. Borg said. “I feel that this experience had a real positive effect on my life. I can finally go about my daily activities without worrying about pain. I am able to do my job again.”

Finally Pain-Free

By Julie Robinson-Tingue

Glen Cove Hospital triumphed in its annual basketball game with the Grenville Baker Boys and Girls Club of Locust Valley, winning 71 to 68 in overtime. A highlight of the organizations’ ongoing efforts to promote children’s health, the game was a successful fundraiser, too. At halftime, the hospital’s Medical Staff Society surprised Arielle Castano-Cala, a junior at Locust Valley High School and longtime club member, with a $1,000 scholarship check. A participant in Glen Cove Hospital’s Career Shadow Day, Arielle is interested in becoming a physician assistant. In photo, Corey Jackson, an environmental services aide at the hospital, drives to the hoop.
MANHASSET — The electrophysiology team at North Shore University Hospital (NSUH) is the first on Long Island to implant the world’s smallest cardiac pacemaker. The device is one-tenth the size of a conventional pacemaker, about the size of a large vitamin. Ram Jadonath, MD, director of electrophysiology at NSUH, implanted the device as part of the Medtronic Micra Transcatheter Pacing System (TPS) global clinical trial.

Robert Johnston, 77, a grandfather of two from Gilbertsville, NY (near Binghamton), underwent a minimally invasive procedure to receive the Micra TPS pacemaker. Dr. Jadonath inserted it via a catheter in a large vein in Mr. Johnston’s leg. He threaded it up to position it inside the patient’s heart wall and attached it with tiny prongs. An electrode in the device now sends electrical pulses that normalize the pace of Mr. Johnston’s heart.

“This miniaturized device gives patients the advanced pacing technology of traditional pacemakers, but with a less-invasive approach,” Dr. Jadonath said. The Micra TPS does not require an incision in the chest, the creation of a ‘pocket’ under the skin or the lead wires that conventional pacemakers use.

When visiting friends recently, Mr. Johnston felt stiffness in his left shoulder and tingling in his hand. He asked his friends to bring him to a North Shore-LIJ hospital because his mother had been treated at LIJ Medical Center many years ago. Also, Mr. Johnston grew up in Brooklyn and his wife originally lived in Flushing, so they were familiar with North Shore University Hospital’s reputation.

“I knew I had a slow heart beat,” Mr. Johnston said. “But when I was in the hospital, the doctors noted that it dropped down while I was sleeping.”

At NSUH, Mr. Johnston met Dr. Jadonath, who explained the technology to him.

“I was a major in the Marines and an administrator for the Board of Education — so I have a lot of experience dealing with people,” said Mr. Johnston. “I felt a high level of confidence with Dr. Jadonath. He communicated the information well and I felt it was the right way to go.

Mr. Johnston added, “It’s not important to me to be the first patient to get the device, but it’s important that the device is successful.” He said he is upbeat and is “looking forward to keep enjoying life and nurturing my grandchildren.”

Mr. Johnston and his wife hope to celebrate his renewed health soon with a cruise to Belgium and Holland.

World’s Smallest Pacemaker Benefits Former Marine/Educator

By Betty Olt

The global clinical trial for the Medtronic Micra TPS, above, will enroll up to 780 patients at approximately 50 centers.

Hope and Robert Johnston hope to celebrate Mr. Johnston’s renewed health with a special cruise.
HUNTINGTON — Janis Lubin Schimsky was perfectly healthy when she slipped on ice and fell in December 2013. At first, she thought she was fine. But then she experienced tingling in her arms and hands. She decided it was time to see her doctor.

Searching for the source of the tingling, her doctor ordered a chest X-ray. But instead of solving the mystery, the doctor discovered another, more frightening one: Ms. Schimsky had a spot on her lung. Never having smoked, this certainly came as a shock.

Before she knew it, Ms. Schimsky, 64, was in surgery.

“It happened so fast that my emotions were frozen,” said Ms. Schimsky, who lives in Commack. “But my doctors truly performed a miracle.”

Ms. Schimsky’s doctor, Vijay Singh, MD, the chief of thoracic surgery at Huntington Hospital, performed the surgery with the latest technology in thoracic surgery — robotics. Using a robot to perform Ms. Schimsky’s surgery, Dr. Singh made four small incisions, through which he removed her right upper lobe. In the past, such a procedure would have required major invasive surgery.

Fortunately, Dr. Singh removed the cancer at such an early stage that Ms. Schimsky didn’t need chemotherapy or radiation.

“My experience was extremely positive,” Ms. Schimsky said. “The robot is amazing, and when combined with such great doctors, you know you’re in great hands.”

At the Cutting Edge

Huntington Hospital was the first Suffolk County hospital to offer robotic thoracic surgery.

“For me, it was all about the benefit to patients,” Dr. Singh said. “I’m able to make smaller incisions, but still have complete mobility and control. My goal is to transform the operation.”

The thoracic surgery robot acts as an extension of Dr. Singh’s hands. He directs every aspect of surgery and has complete control. However, that may be where the similarities end between robotic thoracic surgery and traditional thoracic surgery.

With traditional surgery, doctors typically open up a patient’s chest, which requires a large incision and often painful recovery.

But at Huntington, Dr. Singh and his robot can reach the lungs through two or three small incisions, each less than a centimeter long. The robot, which Dr. Singh controls through a console, also provides 3D vision and aids the surgeon in making extremely precise cuts.

All of this means a quicker and less-painful recovery for the patient — many patients go back to work within a few days.

Where No Robot Has Gone Before

In addition to robotic thoracic surgery, Huntington also offers a new procedure called navigational bronchoscopy. The new procedure allows physicians to navigate a scope through a patient’s nose or mouth and into the lung’s airways to biopsy lesions. The tool can access even the most hard-to-reach areas of the lung. The scope is equipped with GPS technology and its route is based on an image of the patient’s lungs.

Unlike other lung biopsy procedures, navigational bronchoscopy requires no skin incisions and is an outpatient technique.

Catherine Fairweather 76, of East Northport, couldn’t agree more. During a routine visit with her cardiologist last year, she underwent a chest X-ray. Her doctor found a growth on her right lung and quickly referred her to Dr. Singh.

Ms. Fairweather underwent robotic thoracic surgery on a Friday. By the following Tuesday, she was back to her normal routine.

“It was amazing because I didn’t have any pain, just a little soreness,” she said.

Dr. Singh removed part of Ms. Fairweather’s lung and the biopsy results were benign.

“I can’t praise the people at Huntington enough,” Ms. Fairweather said. “Everyone was so polite and professional. If you have to be in a hospital, this is the hospital to be in.”

Ms. Schimsky underwent robotic thoracic surgery by Vijay Singh, MD, to remove cancerous lung tissue. Dr. Singh removed the cancer at such an early stage that Ms. Schimsky didn’t need chemotherapy or radiation.
MANHASSET — Tunicia and Raleigh Hall are living proof that true love can thrive anywhere, even a setting like the Neurological Intensive Care Unit (ICU) at North Shore University Hospital. Their story has touched hearts and stirred the imagination of romantics around the world. And much of it is due, they say, to photographs.

Tunicia has known her husband for almost 30 years. They were married on June 28th, 2014, and both said it was the happiest day of their lives.

One month later, on July 30th, after enjoying an evening out on the town, Tunicia complained of the worst headache of her life. The couple was brought to the Neurological ICU at NSUH for evaluation. That’s when their lives changed.

The initial computed tomography (CT) scan showed a subarachoid hemorrhage (blood in the space that covers the surface of the brain) and blood in her ventricles (the fluid-filled sacs within the brain that hold cerebro-spinal fluid). Because of this, her brain couldn’t absorb the cerebro-spinal fluid normally, and the ventricles enlarged and put pressure on the brain, causing her a severe headache.

Richard Temes, MD, an neuro-intensivist, took charge of her care. Ms. Hall received an external ventricular drain to shunt the cerebro-spinal fluid and blood, helping to alleviate the pressure and reduce the size of the ventricles.

When Ms. Hall awoke, she remembered very little of her recent life. “That’s when I knew I had to do something,” Mr. Hall recalled. “I wasn’t sure what it was, but I knew I had to do something.”

Rekindling Their Memories

The most disturbing thing, he said, was that Ms. Hall couldn’t quite remember that they had been married. And that was the call to action for romantic Mr. Hall, a veteran musician and poet.

The determined husband took all wedding photos taken by Adam Cooper, chief medical photographer in the North Shore-LIJ studios, and taped them on the four walls of Tunicia’s ICU room.

At one point, Ms. Hall turned to her husband and asked, “Are we married?” From then on, Ms. Hall improved swiftly. She was able to return home and enroll in a physical therapy program, and resume the activities of daily life. The Halls credit Mr. Cooper’s photos, their medical care at the hospital, and the power of love with her remarkable recovery.

Realizing that the Halls’ married life got a bumpy start, hospital staff members decided to get in on the romance, too, by arranging a small celebration of the couple’s three-month anniversary. Ian Holmes, a former American Idol contestant and a guest vocalist on Mr. Hall’s recently released album, flew in from his Pennsylvania home to sing the couple’s favorite song from the CD called “Love Is.” In addition, the hospital’s chefs prepared a wedding cake to help mark the occasion with loved ones and friends in attendance.

After the couple cut into the chocolate-filled cake covered with white flowers, Mr. Hall took the floor. He raised a glass, held his wife closely, and proposed a toast to “hope and life.”

The couple, who are deeply spiritual, continue to live by Mr. Hall’s motto of “Hope…it happens.” They attribute their triumph over adversity to what their photographer called “science and art coming together for a miracle.”
Giving and Receiving

You come to North Shore-LIJ hospitals for cutting-edge and compassionate care. If you or a family member want to express your appreciation for this care, consider a gift that will pay you for life and help us care for the people in your community.

A charitable gift annuity will pay you a lifetime of fixed payments, a portion of which will be tax-free, in exchange for a gift of $10,000 or more. Furthermore, after the final payment, you can allocate what is left to the hospital or area most meaningful to you.

While a charitable gift annuity provides an immediate income stream to those 60+, a deferred gift annuity makes payments starting at a future date. A deferred gift annuity may be appealing if you are 50+ or can wait one year or more for your first payment (retirement planning, etc). The biggest benefit of waiting is receiving larger payments for your life.

For more information and a no-obligation, personalized illustration, please call 516-465-7934 or email giftplanning@nshs.edu.

Current and Deferred Charitable Gift Annuities

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Annuity rates may change at any time. Contact us for your specific rate.

Doing the Impossible For the Inoperable

By Michelle Pipia-Stiles

MANHATTAN — The Lenox Hill Hospital Brain Tumor and Vascular Centers recently helped a Brooklyn woman with an inoperable brain tumor by performing an investigational treatment with intra-arterial drug delivery.

The procedure was part of the Phase I/II clinical trial, “Repeated Super-Selective Intra-arterial Cerebral Infusion of Bevacizumab (Avastin) for Treatment of Newly Diagnosed Glioblastoma Multiforme.” John Boockvar, MD, director of the hospital’s Brain Tumor Center, is the principal investigator. Rafael Ortiz, MD, the hospital’s director of neuro-endovascular surgery, and David Langer, MD, Lenox Hill’s director of neurosurgery, performed the procedure.

The patient is a 60-year-old Manhattan resident with a malignant, grade four brain tumor called a glioblastoma. Due to its difficult location, it could not be removed with surgery.

Drs. Ortiz and Langer performed the hospital’s first intra-arterial Xper-computed tomography angiogram (CTA), cerebral angiogram and intra-arterial infusion of the drug bevacizumab. They navigated a catheter from the femoral artery (which brings blood to the leg) to the arteries supplying blood to the tumor. Then they injected contrast dye though the catheter while performing a rotational 3D Xper CTA (the first done in combination with this therapy) to map the arteries supplying the tumor. With this map, the surgeons delivered bevacizumab directly to the tumor. The trial investigators believe this technique, rather than traditional intravenous drug delivery, will deliver better drug penetration and fewer side effects.

“This study is designed to learn if bevacizumab, given once every three months through the arteries instead of the veins, is safe and effective when combined with chemoradiation in newly diagnosed patients with glioblastoma,” said Dr. Boockvar. “The clinical trial is also determining whether the treatment will help improve quality of life and extend survival.”

The patient’s brain tumor before the surgery, top, and after investigational treatment, below.
Elaine Brennan has been named managing director of the North Shore-LIJ Health System’s new Office of Clinical Trials Research. Reporting to Mark Solazzo, the health system’s chief operating officer, Ms. Brennan is working to manage and expand clinical trials across the health system. Ms. Brennan has been working with the Feinstein Institute’s clinical research team to identify opportunities for increasing clinical trial activities within the pharmaceutical industry. She is also collaborating with clinical and administrative leaders across the health system and North Shore Ventures.

Ms. Brennan began working with the health system last fall, as managing director of pharmaceutical advisory services within North Shore Ventures. Prior to joining North Shore-LIJ, she worked in a range of clinical, marketing and sales positions within the pharmaceutical industry.

Anthony Ferreri has been appointed as executive vice president with new responsibilities as the health system’s chief affiliation officer and regional executive director for Westchester. Mr. Ferreri, who has served as Staten Island University Hospital’s president and CEO since 2003 and as executive director of the North Shore-LIJ’s southwest region since 2013, will now oversee and coordinate an increasing number of current and new health system partnerships. He will also serve as regional executive director for Westchester, continuing to oversee the integration of Phelps Memorial Hospital Center and Northern Westchester Hospital.

Ramon Soto has joined the health system as senior vice president and chief marketing/communications officer. In this role, Mr. Soto will work with the senior leadership team and clinical organization to help refine North Shore-LIJ’s message to the marketplace while integrating and overseeing the health system’s corporate communications, market messaging and branding.

Mr. Soto most recently was the principal of a Fairfield, CT-based business consulting company focused on new market entry, product innovation and marketing strategy. Prior to that, he served as senior vice president and chief marketing and communications officer for Magellan Health, a health care management company based in Avon, CT, where he led the enterprise marketing function, including product management, marketing, strategy, sales operations, research, proposals and marketing communications.

Carolyn Sweetapple, RN, has been named deputy executive director of Manhattan Eye, Ear and Throat Hospital (MEETH). Ms. Sweetapple most recently served as assistant vice president of operations in the North Shore-LIJ Health System’s Project Management Office. Prior to that, she was vice president of finance and business operations at the health system’s Krasnoff Quality Management Institute.

Ms. Sweetapple began her career on a North Shore University Hospital medical/surgical unit. She is also a certified public accountant who has held finance and operations positions at Brookhaven Memorial Hospital Medical Center, Winthrop University Hospital and Southside Hospital.

Feinstein Institute for Medical Research

The Feinstein Institute for Medical Research has reorganized its administration to address the significant growth of North Shore-LIJ research programs and the increasingly complex environment for the business of research.

Cynthia Hahn, vice president of clinical research at the Feinstein Institute for Medical Research, recently assumed the role of chief operating officer. She is now responsible for all research administrative support functions across the health system.

Christopher Czura, PhD, is and will remain the vice president of scientific affairs, continuing to oversee scientific strategy and development of the Feinstein Institute’s Bioelectronic Medicine Program. Dr. Czura began his research career at what is now the Feinstein Institute in 1998 as a grant writer and assistant editor.
Jeffrey Kraut Named Chair of State Public Health and Health Planning Council

GREAT NECK — Jeffrey Kraut, senior vice president for strategy and business informatics for the North Shore-LIJ Health System, has been appointed chair of the New York State Public Health and Health Planning Council (PHHPC).

Appointed to the state Hospital Review and Planning Council (SHRPC) in 2004, Mr. Kraut served as its chair from 2007 through 2011, when it was merged with the Public Health Council to form the PHHPC. Since 2011, Mr. Kraut has served as its vice chair.

The PHHPC traces its origins to 1913 and today possesses a broad array of advisory and decision-making responsibilities with respect to New York State’s public health and health care delivery system. It is responsible for adopting and amending the Sanitary Code and health care facility, home care agency, and hospice operating regulations. The PHHPC also makes decisions concerning the establishment and transfer of ownership of health care facilities, home care agencies and hospice programs. It makes recommendations to the Commissioner of Health concerning major construction projects, service changes, and equipment acquisitions in health care facilities and home care agencies. It also advises the Commissioner on issues related to the preservation and improvement of public health.

In addition to his key role in senior leadership team for North Shore-LIJ, Mr. Kraut serves as assistant professor of science education and associate dean for strategy at the Hofstra North Shore-LIJ School of Medicine. He joined North Shore-LIJ in 1994.

Besides his significant health policy, strategy development and analytics activities, Mr. Kraut has been a leader in fostering interoperability and sharing of health data through the development of regional health information organizations (RHIOs). He served as the founding chair of the Long Island Patient Information Exchange and facilitated its merger with its New York City counterpart, NYCLIX, to form Healthix, the largest RHIO in New York State. He serves on various committees of the Health Care Association of New York State, the Greater New York Hospital Association and on the board of the Nassau-Suffolk Hospital Council.

Mr. Kraut is also involved in regional economic development and community building activities as a board member of the Long Island Regional Planning Council, Sustainable Long Island and The Brookville Center for Children Services. Mr. Kraut serves as a health policy advisor to the Long Island Index and ERASE Racism.

Subacute Care

Patricia Porter has been appointed executive director of The Long Island Home, operator of South Oaks Hospital and Broadlawn Manor Nursing and Rehabilitation Center in Amityville. She succeeds Robert Detor, who retired in January after serving as The Long Island Home’s president and CEO since 2000.

With more than 35 years in the health care field, Ms. Porter has been at The Long Island Home since 1996. In 2003, she was named chief financial officer and continued to serve in that capacity when she was appointed chief operating officer in 2007. Before that, she held a series of senior administrative and financial positions in Texas. She earned her BA from St. Mary’s University in San Antonio, TX.

Gerard Kaiser has been named executive director of the Stern Family Center for Rehabilitation in Manhasset. In addition, he will oversee the Orcac Center for Rehabilitation and Broadlawn Manor Nursing and Rehabilitation Center. Mr. Kaiser is working with Merryl Siegel, regional executive director of post-acute services for the North Shore-LIJ Health System, and other post-acute executives to further develop the affiliate network of subacute facilities as the health system continues to engage in new payment models.

Mr. Kaiser has served as Broadlawn Manor’s vice president of senior services since 2001. He has also managed engineering, dietary, ancillary and support services for the Long Island Home campus, which comprises Broadlawn Manor and South Oaks Hospital.
What’s New in Your Total Rewards Package

By Sally Ann Lake

Last spring, a new North Shore-LIJ employee wellness pledge program began to offer eligible employees paycheck credits against the cost of their benefits in 2015. In exchange for $1,040 in paycheck credits, participants got the opportunity to act on four out of 10 healthy actions in 2014. The newly designed pledge choices gave employees nine months to comply, with the ability to view their date-of-service/action on an online Wellness Summary, located in HealthPort on Employee Self service.

For 2015, the program is now running on a calendar-year schedule. “It’s simple - act on your wellness routine one year and receive your credits the following” said Dijana Predich, director of benefits strategy.

Eligible employees must be enrolled in North Shore-LIJ’s Value or Buy-Up medical plan. This option is available to nonunion, full-time employees and part-time staff members who work at least half of the full-time equivalent per week, plus union nurses at Lenox Hill, Franklin, Plainview and Forest Hills hospitals, and the Manhattan Eye, Ear and Throat Hospital.

Maximize Your Wellness

Participants need to complete an online health assessment (HA) on myuhc.com to get paycheck credits in 2016. The health assessment is a 100 percent confidential lifestyle questionnaire. As with all pledges, an employee’s health information is private and never shared.

Choose three more pledges/actions for maximum paycheck credits

1. Physician Wellness: Your annual physical
2. Dental Exam: Exam or cleaning
3. Vision Exam: Eye exam by a licensed provider
4. Breast Cancer Screening: Mammogram
5. Skin Cancer Screening: Full-body skin check
6. Colorectal Cancer Screening: Colonoscopy
7. Cervical Cancer Screening: Pap Smear
8. Health Assessment Covered Spouse: A covered spouse can complete
9. NEW in 2015: Financial Wellness Video: An educational video aimed at getting you financially fit for retirement

Measuring Success

“More than $15 million will be credited to participating employees in 2015,” said Gregg Nevola, the health system’s vice president of Total Rewards. “That’s a remarkable statement about the health system’s commitment to our employees’ health and wellness.”

If you are participating in the 2015 Wellness Pledge Program, check your email inbox for monthly educational reminders from the Department of Total Rewards and follow the Total Rewards Blog at nslijbenefits.blogspot.com.

Race to the Altar

At mile 23 of the New York City Marathon, 29-year-old Manhattan resident Brittany Boehm felt tightness in her hip. She sat down and when she tried to stand back up, she heard a huge crack. She was rushed to Lenox Hill Hospital, where Benjamin Bedford, MD, orthopedic surgeon, performed emergency surgery to repair her fractured hip.

Meanwhile Ms. Boehm’s boyfriend, Shane Weber, awaited her at the finish line with an engagement ring and a very important question. With the help of the hospital’s Emergency Department (ED) nurses, he finally got to ask his question right in the ED. She said “yes.”

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Meanwhile Ms. Boehm’s boyfriend, Shane Weber, awaited her at the finish line with an engagement ring and a very important question. With the help of the hospital’s Emergency Department (ED) nurses, he finally got to ask his question right in the ED. She said “yes.”
The North Shore-LIJ Health System has been making the American Dream a reality for employees who want to own their first home on Long Island. Eligible employees can receive a home down payment via the Employee Home Purchase Program, which North Shore-LIJ’s Benefits Department administers in cooperation with the Long Island Housing Partnership (LIHP), a Hauppauge-based nonprofit.

The program is a helping hand in a region where housing prices can seem insurmountable. "We have funds set aside for first-time home buyers who want to purchase a house, condo or co-op in Nassau and Suffolk," explained Carol Battaglia, the corporate director of benefit operations for the North Shore-LIJ Health System.

After employees are approved, the health system forwards their applications to Carol Woods, a project manager at LIHP. After examining their paperwork, Ms. Woods meets with the applicants. LIHP hosts an individual session with a home-buyer counselor and a group session to cover affordability and renovation (older houses often need rehab work).

Through Nassau and Suffolk counties, New York State and the federal government, the program provides matching grants for down payments as well as for repairs. Ms. Woods and her team work closely with the participants, referring them to conventional lenders and reputable contractors.

“As an employer, we take pride in offering such a generous benefit and positive experience to make a difference in our staff members’ lives,” said Ms. Battaglia.

To be eligible for the North Shore-LIJ Employee Home Purchase Program, full-time or part-time staff members must be in good standing and on the job for at least one year. The first 20 employees in each calendar year who successfully complete the program can receive the grant. Subsequent applicants go on a waiting list for the following year. The program awards $10,000 to nurses and $5,000 to non-nurses. To learn more, contact Ms. Battaglia at 516-734-7156 or CBattaglia@nshs.edu.
VALLEY STREAM — Vision is precious. That message was clear at a special reception recently hosted by the Lions Eye Bank for Long Island.

Since 2012, the Lions Eye Bank has encouraged families of corneal donors to create a quilt square to honor their loved one. A reception for donor families and recipients was the occasion for the 12-panel quilt’s unveiling at the Lions Eye Bank of Long Island headquarters at Franklin Hospital.

For Hudson Mitchell, at 10 months old the youngest event attendee, two donated corneas (one from the Lions Eye Bank) have helped greatly with her congenital eye disease.

“Through Hudson’s eyes, we’re able to see life differently,” said Desiree Mitchell, her mother.

The event was an occasion for Betty Troy to remember her mother, Patricia, who donated her corneas almost two decades ago. The tissue went to recipients in Paris and, through her mother didn’t travel much, Ms. Troy said it warmed her heart to think that her mother’s eyes are looking at the Eiffel Tower.

Part of the North Shore-LIJ Health System, the Lions Eye Bank for Long Island is supported the Lions Clubs throughout Queens, Nassau and Suffolk counties. For more information or to become a donor, call the Lions Eye Bank at 516-356-6990.

By Alexandra Zendrian

A Warm Celebration of Life and Sight

From left: Susan Zarola-Cohen, MD, eye bank program liaison, and Marsha Wynter, director of the Lions Eye Bank for Long Island, with the quilt created from donor family’s squares.

kudos

He’s No Rookie

Elliott Hershman, MD, chair of orthopedics at Lenox Hill Hospital, recently received the NFL Physician Society’s Jerry “Hawk” Rhea Award during the organization’s annual meeting. The award recognizes the team physician who has made the greatest contributions to the league and the field of athletic training. Dr. Hershman began working with the New York Jets as a medical student in 1976. He trained in sports medicine at the Cleveland Clinic in 1984 and 1985, working with the Cleveland Browns and Cleveland Cavaliers before joining Lenox Hill Hospital as an attending physician. Now team orthopedist for the New York Jets, Dr. Hershman also chairs the NFL Injury and Safety Panel. He also served as team orthopedist for the New York Islanders from 1998 to 2009.
The New Standard

89 Percent of Employees Get Flu Vaccine

By James Cuniglio

For the 2014–2015 flu season, the North Shore–LIJ Health System set the example by requiring 100 percent employee participation in flu prevention, meaning every employee was required either to receive a flu vaccine or decline the flu vaccine and sign a declination form indicating the reason why.

When it was all said and done, 89 percent of North Shore–LIJ’s employees got vaccinated, with the remaining 11 percent declining or citing a medical contraindication to the vaccine.

North Shore–LIJ Employee Health Service (EHS) administered more than 38,750 free flu shots to employees in the months leading up to the start of flu season, while other team members chose to get vaccinated by outside health care resources, such as their primary care physician or local pharmacy.

For the second straight year, the New York State Department of Health required health care workers who did not receive the flu vaccine to wear a surgical mask during flu season while in areas where patients/residents are typically present. In addition, the Centers for Medicare and Medicaid Services required the health system to provide a detailed vaccination report on every health system worker—including employees and nonemployed workers such as licensed independent practitioners, volunteers, students and contracted personnel—who worked in North Shore–LIJ facilities at least one day between Oct. 1, 2014, and March 31, 2015.

“We’re held to a very high standard by both state and federal governing agencies,” said Lorraine Chambers Lewis, vice president of EHS. “However, our biggest motivating factor in all of this is patient and employee safety. Simply put, it’s our responsibility to prevent the spread of illness. That’s why we’ve dedicated so many resources toward educating employees about the dangers of flu and making sure they know when and where they can get the vaccine.”

The harmful effects of influenza are well known. In the US alone, flu causes more than 200,000 hospitalizations each year and thousands of deaths. According to the Centers for Disease Control and Prevention, adults may be able to infect others beginning up to 24 hours before flu symptoms develop, and up to five days or possibly more after becoming sick.

Vaccinated employees across the health system received a green identifier to adhere to their ID badge as a way of showing that they received the flu shot. For the duration of flu season, employees who did not have this visual identifier displayed on their ID badge were required to wear a mask at all times while in areas where patients/residents are typically present, as mandated by the New York State Department of Health.

LGBT Health Advocacy

The North Shore–LIJ Health System’s Business Employee Resource Group (BERG) Program recently expanded to include Expressions. This new BERG promotes health equity among LGBT (lesbian, gay, bisexual, transgender) community members and their allies.

Expressions will foster a safe and inclusive environment throughout North Shore–LIJ by “bringing together employees who identify as LGBT, are allies of the LGBT community, and are passionate about or are interested in promoting health equity,” said Barbara Felker, vice president of diversity and community engagement.

Staff members are welcome to join Expressions to enhance LGBT awareness in the areas of education and development, community outreach and support. Other BERGs include VALOR (Veterans and Allies: Liaisons of Reintegration) and Bridges (cultural ambassadors).

Learn more about BERGs by emailing BERGroup@nshs.edu. To apply for membership, visit HealthPort > Personal Information > Self Service.
Champ Cloud Usage

Wow, what a challenging day. I’ve had an interesting case. I’ll post my case notes on the cloud so I can share them with you to get your opinion.

Wait! Cloud storage vendors who don’t meet the health system’s information security requirements can’t be used to store confidential information, including protected health information (PHI). Unapproved cloud storage vendors include GoogleDrive, Dropbox and Mozy, among others. Please refer to Policy 902.01 (Internet, Cloud, Instant Messaging and Other Web Services Usage) for more information.

Thanks, Champ, I’ll do that.

North Shore-LIJ has a no-tolerance policy for the mishandling or mistreatment of confidential information. If you have any questions, please contact Corporate Compliance at 516-465-4097.

Instead of using cloud storage to store PHI, you should use North Shore-LIJ’s existing, secure systems for information storage and sharing, such as a shared drive on the North Shore-LIJ server.

Employee Blood Drives

5/5  SIUH Pouch
5/6  Plainview Hospital
5/12 SIUH North
5/18 North Shore-LIJ Materials Management
5/21 SIUH South
5/27 Southside Hospital

6/1  Feinstein Institute for Medical Research
6/4  SIUH North
6/8  Huntington Hospital
6/10 North Shore-LIJ Laboratories
6/11 SIUH South
6/11 Zucker Hillside Hospital
6/15 Cohen Children’s Medical Center
6/15 North Shore-LIJ Care Connect
6/17 North Shore-LIJ Ambulatory Services
6/19 North Shore-LIJ Corporate
6/25 Syosset Hospital
6/30 North Shore-LIJ Shared Services

7/1  SIUH Pouch
7/7  Franklin Hospital
7/8  SIUH North
7/8  North Shore University Hospital
7/9  Plainview Hospital
7/10 Center for Emergency Medical Services, Syosset
7/16  Finance Office, Westbury
7/16  SIUH South
7/23 Center for Advanced Medicine, Lake Success
7/24 Corporate Human Resources, Lake Success

8/5  SIUH North
8/11 SIUH South
8/12 Forest Hills Hospital
8/19 Southside Hospital
8/20 Ambulatory Services, Manhasset
8/24 LIJ Medical Center, New Hyde Park
8/26 Glen Cove Hospital
ORIGINS

Phelps Memorial Hospital Center

Tarrytown Hospital (left), shown here in the 1890s, began to care for patients during the mid-1800s. In the 1940s, Tarrytown Hospital and nearby Ossining Hospital (below, 1907) no longer had the capacity to accommodate Westchester County’s growing communities. Planning began for a larger, more modern facility in Sleepy Hollow — Phelps Memorial Hospital.

Left: Phelps Memorial Hospital’s opening day in January 1956. Among the attendees: John D. Rockefeller III, a founding board member. The Rockefeller family was instrumental in funding the new facility.

The original 1956 Phelps building today, above/left. Above/right, the Medical Services Building went up in 2007. The 2007 structure is getting a new main lobby and façade this year. Its original lobby will house a new MRI (magnetic resonance imaging) facility.

Phelps Memorial Hospital’s laboratory — state-of-the-art in 1966.
The staff and trustees of the North Shore-LIJ Health System mourn the loss of John “Jack” S.T. Gallagher, the health system's founding president and CEO. Mr. Gallagher died April 18 at his home in Palm Beach, FL.

A Queens native who obtained a business degree from Holy Cross College, Mr. Gallagher left the family tire business in his early 30s to pursue a career in health care administration, earning an MS in epidemiology and public health from Yale University. In 1963, he joined what was then called North Shore Hospital as an intern for then-executive vice president and CEO Dennis Buckley. The two worked closely together over the next two decades before Mr. Gallagher became president and CEO in the 1980s — a job he held until his retirement at the end of 2000.

As CEO of North Shore University Hospital (NSUH), Mr. Gallagher laid the groundwork in the early 1990s for hospital mergers on Long Island and Queens, creating a model for the integrated health systems that are so prevalent today. During an era when managed care was first taking hold and hospitals were struggling financially, Mr. Gallagher worked to level the playing field for health care providers. He negotiated a merger with what was then known as Community Hospital at Glen Cove in 1990, before formally establishing the North Shore Health System in 1992.

Over the next four years, he developed relationships with Huntington, Plainview, Franklin, Forest Hills, Syosset, Staten Island University and Southside hospitals, before the network expanded further with the 1997 merger with LIJ Medical Center. The historic merger created the North Shore-LIJ Health System, which is the largest non-profit health system in New York State and 11th largest in the country.

Upon his retirement, Mr. Gallagher continued to serve as a life trustee of the health system. In his honor, all North Shore-LIJ facilities flew their flags at half-staff.

Mr. Gallagher enjoyed the company of frontline staff members, frequently sharing breakfast and coffee or playing piano during hospital celebrations. As an enthusiastic participant in annual Adopt-a-Family drives, he joined other employees to deliver the gifts to homes, as shown here in December 1996.

Long before hospital consolidation was common, Mr. Gallagher, standing left, engineered North Shore University Hospital’s (NSUH) merger with Community Hospital at Glen Cove in 1990, laying the groundwork for the North Shore-LIJ Health System that exists today. Standing next to Mr. Gallagher are, from left, David Taylor, Glen Cove chair, and Walter Rentschler, Glen Cove CEO. Sitting, from left: Ralph Nappi, NSUH president, Lorinda de Roulet, NSUH trustee and Peter Crisp, Glen Cove trustee.