

MEDICAL STAFF NEWS

SAVE THESE DATES:

- **Active Staff Meeting**
Tuesday, May 12, 12:00 noon
North Assembly Room
- **Medical Education Conferences**
Fridays at 8:00 am–North Assembly Room
 - **Elder Abuse and Neglect:
Mandated Reporting Requirements***
Friday, May 1
E. B. Larson, LICSW
Protective Services Program Manager
Minuteman Senior Services
 - **Update on Melanoma**
Friday, May 8
Donald P. Lawrence, MD, Clinical Director
Center for Melanoma
Massachusetts General Hospital
 - **Neurological Issues in Women**
Friday, May 15
Jeanine Reczek, MD
Neurology Service, Emerson Hospital
 - **Delivering the Promise of
Hospital Medicine**
Friday, May 29
Sam Bagchi, MD, Director
Hospitalist Service, Emerson Hospital
 - **C-Difficile**
Friday, June 5
Thomas Lamont, MD
Chief of Gastroenterology
Beth Israel Deaconess Medical Center
 - **Surgical Safety Checklist***
Friday, June 12
William Berry, MD, MPH
Harvard School of Public Health,
CRICO/RMF
 - **MCDMMS Legislative Breakfast**
Friday, June 19, 7:30 – 9:00 am
North Assembly Room

* Qualifies for risk management credits

REMINDERS:

- **ICU Rounds**
Monday-Friday at 9:00 am, Lovejoy
- **M&M Rounds**
First Thursday of the month at 8:00 am,
Lovejoy
- **Ethics Rounds**
Tuesdays at 9:30 am, Lovejoy

RECRUITING PHYSICIANS: A CHALLENGE, BUT EFFORTS PAY OFF

Emerson uses all the tools and techniques to attract talented doctors

Sometimes professional opportunities just fall into place. When Brian Callahan, MD, an experienced general surgeon who joins the medical staff this month, was seeking a new position, he listed his criteria.

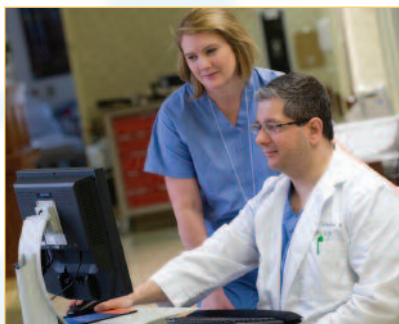
“I wanted to work at a single hospital, be connected with a single emergency department, and I wanted an office on-site so that I could respond to patients immediately,” says Dr. Callahan, who practiced at both Lawrence General and Holy Family hospitals. “I went on the Emerson web site, saw there was a general surgery opening and picked up the phone.” Emerson met his criteria, and Dr. Callahan was soon interviewing with members of the medical staff and department chairs, and touring the hospital.

Whether it is a smooth process or a circuitous one, physician recruitment is idiosyncratic, notes Jennifer Hart, director of physician recruitment and relations. “We use all the established recruitment tools for sourcing candidates—ads in *The New England Journal of Medicine*, listings in specialty journals, the internet, direct mail, the use of search firms, even cold-calling,” she explains. “But in some cases, the dialogue simply

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EHR AND CPOE ROLLOUTS CONTINUE TOWARD 2009 TARGETS

PCHI grant offers individualized consulting on EHR use



Vlassis Trivias, MD, and Patti Marcott, RN, are using CPOE in labor and delivery.

With 2009 targets on the horizon, rollout of both the electronic health record (EHR) and computerized provider order-entry (CPOE) continues at a steady pace. Efforts to successfully implement the EHR got a boost when the Emerson Physician-Hospital Organization (PHO) was selected to receive a grant from Partners Community HealthCare Inc. (PCHI). The funding—\$99,600—covers consulting expertise to early adopters of the EHR.

“Our goal is to help physicians improve their use of the EHR,” says Renee Fosberg, director of outpatient applications. “We want the system to work for them, save them time and improve their satisfaction. By performing a customer workflow analysis, we can determine what will benefit them most, such as retraining or further system development.” Early adopters may need assistance with certain functions that have become important, such as sorting documents and creating preferences and custom views.

Physicians who wish to take advantage of the PCHI grant should first complete an on-line survey; contact Ms. Fosberg at rfosberg@emersonhosp.org or 978-287-8036

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begins when a physician candidate contacts one of the physicians on the medical staff—sometimes without knowing that Emerson was recruiting.”

Even when the opportunity, the contracts and the timing line up, the competition for physician talent is intense, largely due to the current shortage of physicians in specific areas. Emerson has needed to adapt to keep pace with other hospitals by offering sign-on bonuses and, in some cases, relocation stipends to qualified candidates. Increasingly, physicians want to be employed, whether it is by the hospital or by the practice.

“The new generation of physicians has a significant focus on work/life balance,” says Christine Gallery who, as vice president of planning and market development, oversees recruitment for the hospital. “We offer the option of income guarantee where we can. However, the employment model is on the increase, both in our local market and nationally. Unfortunately, we have lost high-quality candidates because of this issue, so we are now willing to carefully construct employment contracts based on specific productivity measures.”

Christine Schuster, president and chief executive officer, feels there is much about the hospital that appeals to physicians. “Emerson has a physician-oriented culture,” says Ms. Schuster. “Our strategic planning process includes meeting with each clinical department to discuss how the hospital can meet

physician needs. I also believe our physicians are pleased with the hospital’s commitment to providing high-quality patient care. And when candidates consider the overall caliber of the medical staff, it is very affirming to them.”

This past year, recruitment efforts have paid off. In addition to Dr. Callahan, who begins practicing in May, Colette Whitby, MD—also an experienced general surgeon—joined the surgical staff in October. Two new cardiologists will start in July, and Jeanine Reczek, MD, a neurologist, joined the staff last November. The gastroenterology service is expanding, and prospects are favorable for growing primary care in Acton, Sudbury and Westford.

This recruitment ad, which stresses Emerson's proximity to Boston, has proven effective.

According to Ms. Gallery, the hospital’s recruitment goals are driven by careful surveillance of community needs, as well as a formal planning process every four years. “We analyze factors such as population growth, demographics, market share and clear-cut needs to replace physicians who leave the hospital or retire,” she says. “We also survey primary care physicians about areas where there might be a shortage of specialists.”

It behooves candidates to do their own homework. Dr. Callahan asked to speak with primary care physicians who are affiliated with Emerson. “I wanted to be sure there was a need for my services,” he says. “Also, the physicians I spoke with confirmed my impression that Emerson is a nice place to practice.”

EHR AND CPOE

for details. Jennifer Monahan, a consultant from Health1 Technologies, will then meet individually with practices and produce an improvement plan.

Currently, 101 physicians are using the EHR, and 50 are eligible to begin. The call for EHR implementation has grown louder since the Obama administration announced a commitment of \$17 billion in Medicare and Medicaid funding aimed at rewarding physicians and hospitals that have adopted EHRs. Emerson physicians have their own incentive, says Cheryl Sidelinker, executive director, Emerson PHO/IPA.

“Physicians who are not trained and fully implemented on the EHR—using it to document at least 80 percent of their outpatient visits—by November 30 will no longer meet the criteria for the PHO’s pay-for-performance contract,” says Ms. Sidelinker. “Providers who are not fully implemented by year-end will be dropped from our PCHI contracts and, therefore, the PHO.”

On the CPOE front, the system is now being used by obstetricians and orthopedic surgeons. The plan is for CPOE to roll

out to all surgeons this fall. “Our goal for 2009 is that 75 percent of all medication orders will be entered through CPOE,” says Grace Weitzner, RNC, manager of nursing informatics. “Lately, the average has been between 50 and 60 percent.”

Ms. Weitzner says that she and her staff have learned much in the course of working with various practices. “Every service potentially requires a different approach, so we now perform in-depth workflow analysis as part of our CPOE planning,” she explains. “This will be especially important as we head into surgery, where orders need to be checked and revised as the patient moves from pre-op to surgery to post-op.”

A Meditech upgrade, scheduled for early June, will result in a change in how order sets are presented on the system. Training sessions will most likely be required for all CPOE users.

Ms. Weitzner says that she and her colleagues are available to all physicians who request a refresher course on any aspect of CPOE use. “We’ll meet anywhere that is convenient for the medical staff,” she says. “We are taking the most flexible approach we can in order to support the end-user.”

MEDICAL STAFF PROFILE: MARGUERITE ROACH, MD

Growing up as the child of a heart surgeon, Marguerite Roach, MD, was often asked if she wanted to be a doctor. Her stock answer was “not the kind of doctor my Dad is.” Practicing internal medicine has allowed her to balance a desire to help people with raising a family. Dr. Roach knew about Lincoln Physicians long before she joined the staff in 2003. In that setting, she is known as a champion of using information technology, including the electronic health record.

Is practicing internal medicine satisfying, despite all the changes underway?

There are challenges, such as keeping up with paperwork, computer work and the demands of an increasingly savvy population. But then there’s the genuine relationship you have with your patients. Despite all the transitions and changes, rules and regulations, that really does survive. It’s very satisfying to be a part of my patients’ lives, to listen to them and serve as their advocate.

You have teenagers of your own. Do you enjoy caring for teenaged patients?

As the parent of teenagers, I have to love teenagers. But I really do—particularly the ones who are 17, 18 or 19 and are coming into their own. They’re starting to understand that Mom isn’t going to take care of them forever, and they’re beginning to make decisions for themselves. It’s exciting to provide them with information about their health—almost like giving them a window into what their life is becoming. My practice has a nice variety, including patients who are 100 years old. They’re an awe-inspiring combination of good medicine, good genes, good habits and a positive attitude. I don’t see many people in their 80s or 90s who’ve been unhappy all their lives.

You had lived in the area for a while before joining the Emerson medical staff. What were your impressions?

I always thought Emerson was a great hospital, and I knew about Lincoln Physicians before they knew about me, partly because I have friends who are patients here. I had taken a couple of years off with my children and was ready to go back into practice. I knew the physicians here by reputation; they are dedicated, kind, moral people. At Lincoln Physicians you can still have that old-fashioned doctor-patient relationship. It’s a nice environment.

You are a strong believer in the value of the electronic health record. Why?

The value is in the ability to see exactly what’s transpired with the patient over three months or 30 years. That data-sharing is very powerful in terms of providing excellent care for patients. I also think using the EHR raises everybody’s game a bit because, in the process of documenting care, which will be read by others, you include what you’re thinking and the reason behind things. What’s really exciting is where we’re headed, with patients participating through patient access portals. That’s when we’ll see a true collaborative dialogue between physicians and patients.

Quality measures are finding their way onto the EHR—work that you are involved with.

Yes. A new measure that’s come into play this year is the issue of advance directives. It’s not something that people like to talk about or that can be easily accomplished in a five-minute visit. But patients want to have those conversations. Since most of our health care dollars are spent in the last eight months of life—often because nobody asked what the patient wanted—the issue has medical, financial and ethical implications. We’ve all been in code situations and asked “why am I doing this?”



Marguerite Roach, MD, says she knew about Emerson Hospital and Lincoln Physicians long before they knew about her.

What do you do in your leisure time?

I love spending time with my family. We have a little place in Chatham, so we make a forced march there for family time. I’m in two book clubs and read a lot. And I sing. I’m a song leader at Our Lady of Fatima parish. I’ve been singing since I was a kid—lots of theater and choruses all through school. I think singing is physically healthy and mind-clearing, especially when you get in the zone.

SNAPSHOT

Grew up in:	McLean, Virginia
Resident of:	Sudbury (16 years)
Personal:	Married, four children, ages 20, 18, 15, 13
Reading habits:	Binge reader—six novels then nothing for three months

MASS GENERAL CENTER FOR PAIN MEDICINE AT EMERSON HOSPITAL

The Mass General Center for Pain Medicine at Emerson Hospital recently opened in order to provide comprehensive, multidisciplinary care for individuals with acute, chronic and cancer-related pain. The program is staffed by Christopher J. Gilligan, MD, MBA, and Padma Gulur, MD, who both practice at the Massachusetts General Hospital.

Drs. Gilligan and Gulur focus on early evaluation and intervention in order to minimize the development of chronic, disabling pain. Coordinated consultative and procedural services are available for those who are referred for evaluation in the ambulatory setting. The team aims to create an individualized, comprehensive plan for optimal pain treatment that will allow patients to regain an optimal level of function in their work and personal lives.

Dr. Gilligan received his medical degree from Yale University School of Medicine and trained in surgery at New York Hospital and Brigham and Women's Hospital, and completed his residency in emergency medicine at Massachusetts General Hospital/Brigham and Women's Hospital. He also completed a fellowship in pain management at Massachusetts General Hospital. Dr. Gilligan is board-certified in emergency medicine with a subspecialty in pain management.

Dr. Gulur received her medical degree from Bangalore Medical College in India and completed a residency in anesthesiology from Boston University. She completed a fellowship in pain management at Massachusetts General Hospital. Dr. Gulur is board-certified in anesthesiology with a subspecialty in pain management.

The Mass General Center for Pain Medicine is located at the Emerson Hospital Center for Specialty Care in Concord. For more information or to make a referral, please call 978-287-8523.

Mary M. Donald, MD, Is Honored



Mary M. Donald, MD, was named the 2009 Community Clinician of the Year by her physician peers in the Middlesex Central District Medical Society. Dr. Donald, shown with Jerry Wacks, MD, society president, maintains a family medicine practice in Acton, where she is a resident, and has served on the Emerson Hospital medical staff for nearly five decades. "She is indeed a quiet, modest gem," said one of her peers. "The people of Acton regard her as both a superb physician and a friend."

EMERSON HOSPITAL

MEET YOUR NEW COLLEAGUES

These physicians recently joined the Emerson Hospital medical staff.

ANESTHESIOLOGY

Ben Hern Kaon, MD *

EMERGENCY MEDICINE

David Barash, MD *

Michael Shear, MD *

CARDIOLOGY

Benjamin Tillinger, MD*

GENERAL SURGERY

Brian Callahan, MD*

HAND SURGERY

Jeffrey F. Dietz, MD

INTERNAL MEDICINE

Truong Huynh, MD*

Betty Ann Pomerleau, MD**

INTERVENTIONAL PHYSIATRY AND PAIN MANAGEMENT

Alexios Carayannopoulos, DO, MPH

Joseph Evans, DO

James Lee, MD

James Spinelli, Jr., DO

PAIN MEDICINE

Christopher Gilligan, MD

Padma Gulur, MD

PEDIATRIC GASTROENTEROLOGY

Stephen Hardy, MD

PEDIATRIC SURGERY

Peter Masiakos, MD

* Active Staff

** Dr. Pomerleau has joined the internal medicine practice of Lincoln Physicians.



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www.emersonhospital.org

If you have comments on *Medical Staff News* or would like to suggest a topic for a future issue, please contact Jennifer Hart, Director of Physician Relations, at 978-287-3002 (jhart@emersonhosp.org) or a member of the editorial committee: Drs. Stephen Hoenig, Greg Martin, David Rose, Stephen Schloss, James Street or Henry Vaillant.