

# Med School Watercooler

NEWS FROM FREDERICK P. WHIDDON COLLEGE OF MEDICINE  
AT THE UNIVERSITY OF SOUTH ALABAMA

Thursday, February 6, 2014

## USA Medical Students Participate in Project Connect



USA senior medical students (from left) Ellen Mitchell, James Towner, Sarah Bragg and Sarah Kelly at Mobile's Project Connect.

Medical students from the University of South Alabama College of Medicine provided check-ups for the local homeless population last week during Mobile's Project Connect, a new event being hosted by Housing First's Homeless Coalition.

In addition, more than 100 coats and fleeces were distributed at the event. The outerwear was collected by members of the USA Alpha Omega Alpha Honor Medical Society.

[Click here](#) to learn more about Project Connect.

Posted by Med School Watercooler at [11:41 AM](#) No comments:

## February Med School Café - 'Migraine: Diagnosis, Treatment and Prevention'



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- 2023 (10)
- 2022 (249)
- 2021 (269)
- 2020 (191)
- 2019 (245)
- 2018 (236)
- 2017 (231)
- 2016 (206)
- 2015 (205)
- ▼ 2014 (241)
  - 12/14 - 12/21 (4)
  - 12/07 - 12/14 (4)
  - 11/30 - 12/07 (4)
  - 11/23 - 11/30 (4)
  - 11/16 - 11/23 (5)
  - 11/09 - 11/16 (5)
  - 11/02 - 11/09 (5)
  - 10/26 - 11/02 (6)
  - 10/19 - 10/26 (5)
  - 10/12 - 10/19 (5)
  - 10/05 - 10/12 (5)
  - 09/28 - 10/05 (6)
  - 09/21 - 09/28 (7)
  - 09/14 - 09/21 (5)
  - 09/07 - 09/14 (5)
  - 08/31 - 09/07 (6)
  - 08/24 - 08/31 (4)
  - 08/17 - 08/24 (5)
  - 08/10 - 08/17 (4)
  - 08/03 - 08/10 (4)
  - 07/27 - 08/03 (4)
  - 07/20 - 07/27 (4)
  - 07/13 - 07/20 (4)

During the talk, Dr. Minto will discuss the diagnosis of migraine; current evidence on causes and mechanisms; treatment strategies and common pitfalls; and ways to prevent migraines, including both medications and some alternative therapies that have shown evidence of success.

Dr. Minto attended the USA College of Medicine for two years before completing her medical degree at the University of Alabama at Birmingham School of Medicine in 2003. She completed an internship in internal medicine in 2004, followed by neurology residency in 2007, both at Vanderbilt University.

The Med School Café lecture and lunch are provided free of charge, but reservations are required. For more information or to make reservations, call Kim Partridge at (251) 460-7770 or e-mail [kepartridge@health.southalabama.edu](mailto:kepartridge@health.southalabama.edu).

Med School Café is a free community lecture series sponsored by the USA Physicians Group. Each month, faculty from the USA College of Medicine share their expertise on a specific medical condition, providing insight on the latest treatment available.

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February Med School Cafe Teaser - Dr. Elizabeth Minto from USA Health System on Vimeo.

Posted by Med School Watercooler at [8:46 AM](#) No comments:

## USA Chapter of Gold Humanism Honor Society to Focus on Compassion

- ▶ 07/06 - 07/13 (4)
- ▶ 06/29 - 07/06 (5)
- ▶ 06/22 - 06/29 (4)
- ▶ 06/15 - 06/22 (5)
- ▶ 06/08 - 06/15 (4)
- ▶ 06/01 - 06/08 (4)
- ▶ 05/25 - 06/01 (4)
- ▶ 05/18 - 05/25 (4)
- ▶ 05/11 - 05/18 (4)
- ▶ 05/04 - 05/11 (5)
- ▶ 04/27 - 05/04 (5)
- ▶ 04/20 - 04/27 (5)
- ▶ 04/13 - 04/20 (4)
- ▶ 04/06 - 04/13 (6)
- ▶ 03/30 - 04/06 (5)
- ▶ 03/23 - 03/30 (5)
- ▶ 03/16 - 03/23 (5)
- ▶ 03/09 - 03/16 (6)
- ▶ 03/02 - 03/09 (6)
- ▶ 02/23 - 03/02 (5)
- ▶ 02/16 - 02/23 (5)
- ▶ 02/09 - 02/16 (5)
- ▼ 02/02 - 02/09 (9)

USA Medical Students Participate in Project Connect

February Med School Café - 'Migraine: Diagnosis, T...

USA Chapter of Gold Humanism Honor Society to Focu...

Feb. 13 DSS to Feature Dr. Ann Richmond

USA Health System Transitioning to ICD-10

USA Hospitals Weather the Storm

'I Was on Call, So I Stayed'

MCI Staff Put Patients at Ease During Winter Storm

USA Physicians Group Temporarily Closes During Storm

- ▶ 01/26 - 02/02 (4)
- ▶ 01/19 - 01/26 (5)
- ▶ 01/12 - 01/19 (4)
- ▶ 01/05 - 01/12 (4)

- ▶ 2013 (232)
- ▶ 2012 (245)
- ▶ 2011 (262)
- ▶ 2010 (247)
- ▶ 2009 (88)



On Solidarity Day, USA medical students are asked to wear red to symbolize unity and to act as a reminder of the importance of compassion and love in health care. Pictured above are the medical students involved in the 2013 Solidarity Day.

In honor of the Gold Humanism in Medicine Honor Society's (GHHS) 4th annual Solidarity Day for Compassionate Patient Care, the University of South Alabama chapter of GHHS is planning several activities to remind students and employees of the importance of compassion in medicine.

On Solidarity Day - Feb. 14, 2014 - USA medical students are asked to wear red to symbolize unity and to act as a reminder of the importance of compassion and love in health care.

The GHHS Solidarity Day for Compassionate Patient Care was initiated after the 2011 shootings in Tucson, Ariz., to honor the humanistic actions of Dr. Randall Friese, the trauma surgeon who first treated Congresswoman Gabrielle Giffords.

The current members of GHHS can be found [here](#).

[Click here](#) to learn more about GHHS. For more information on the chapter's participation in Solidarity Day and the planned events, contact Stephanie Stopka at [sss1001@jagmail.southalabama.edu](mailto:sss1001@jagmail.southalabama.edu).

Elections for the GHHS Class of 2015 will take place Monday, Feb. 10, 2014.

Posted by [Med School Watercooler](#) at [8:46 AM](#) No comments:

## Feb. 13 DSS to Feature Dr. Ann Richmond

Next week's Distinguished Scientist Seminar at the University of South Alabama College of Medicine will feature Dr. Ann Richmond, professor in the department of cancer biology at Vanderbilt University.

The lecture, titled "The Tumor Microenvironment - a Key Component of Response to Melanoma Therapy," will take place Feb. 13, 2014, at 4 p.m. in the first floor auditorium of the Medical Sciences Building on USA's main campus.



Dr. Richmond's research interests include transcriptional regulation of chemokines and the role of chemokines in chronic inflammatory conditions, wound healing and tumor progression.

She earned her master of natural science degree in zoology and physical sciences

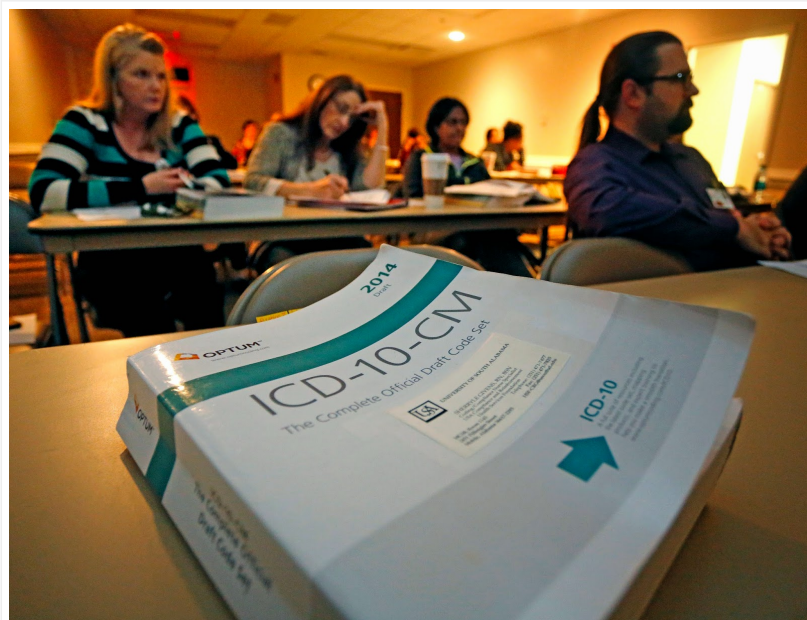
from Louisiana State University and her Ph.D. in developmental biology from Emory University.

The lecture series is comprised of distinguished scientists from other academic institutions who are invited by the USA College of Medicine basic science departments to present a seminar showcasing their latest research findings. Faculty, staff and students are strongly encouraged to attend.

For more information on Dr. Richmond's research, [click here](#). To learn more about the lecture series, [click here](#).

Posted by Med School Watercooler at [8:46 AM](#) No comments:

## USA Health System Transitioning to ICD-10



The University of South Alabama Health System is in the process of transitioning to an updated version of a health care classification system called the International Classification of Diseases (ICD).

Published by the World Health Organization, ICD is the standard diagnostic tool for epidemiology, health management and clinical purposes. It provides codes to classify diseases and a wide variety of signs, symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or disease. Under this system, every health condition and situation can be assigned to a unique category and assigned a code.

The ICD is revised periodically and is currently in its tenth edition in most nations. The United States, however, currently uses the previous edition, ICD-9. The ICD-9 code sets used to report medical diagnoses and inpatient procedures will be replaced by the ICD-10 codes for services provided on or after Oct. 1, 2014.

According to Jeffrey Morris, ICD-10 clinical documentation improvement specialist for the USA Health System, the most noticeable difference between ICD-9 and ICD-10 is the appearance and structure of the codes. "Unlike ICD-9 codes, ICD-10 codes are alphanumeric and contain three to seven characters," he said. "The other difference is the increased specificity and granularity of ICD-10. The codes will paint a more accurate picture of what is going on with the patient and how severe a particular condition is."

Dr. Charles Hamm, professor of pediatrics and lead physician for the transition, said most of the diagnostic coding changes are things that health care providers think about while treating a patient but aren't documented because they are unable to be coded in ICD-9. For example, there are not separate ICD-9 codes



for laterality or chronicity of an ear infection. ICD-10-CM will also allow for greater detail for conditions such as injuries and poisonings.

Currently, there are approximately 13,000 ICD-9 diagnosis codes that will expand to approximately 68,000 ICD-10 diagnosis codes. Also currently, there are approximately 3,000 ICD-9 procedure codes that will expand to approximately 87,000 ICD-10 procedure codes.

Injuries account for a great deal of the expansion of the diagnosis codes. There are many more specific anatomical code choices as well as codes that specify the laterality of the injury and the episode of care in which the patient is being seen. Also, the designation of trimesters and fetuses in obstetrics is new and adds to the expansion.

Any system that requires an ICD-9 code must be updated to accommodate the new structure of the ICD-10 codes. The system that the coders used must be upgraded, as well as billing programs and any databases that use an ICD-9 code for research or data collection.

Providers within the USA Health System will receive training – slated to start Spring 2014 – that is relevant to their particular specialty. General awareness training has already begun for all specialties. Admitting staff, business office staff, nursing, and other ancillary departments will also need general awareness training prior to the implementation date.

Both USA hospitals and the USA Health Services Foundation have intranet pages dedicated to ICD-10, coding, and documentation. For further information, contact Morris at [jwmorris@health.southalabama.edu](mailto:jwmorris@health.southalabama.edu).

Posted by Med School Watercooler at [8:46 AM](#) No comments:

**Tuesday, February 4, 2014**

## USA Hospitals Weather the Storm



Beth Anderson called on her disaster training, administrative experience and Virginia roots to lead the USA Medical Center through the ice storm.

"It was an adventure," she said, after spending three days straight at the Medical Center. "The staff and department heads pulled together for our patients. We did brilliantly."

The historic storm made for some great memories. Staff wore coats over pajamas and walked outside the front entrance of the Medical Center to savor the winter wonderland. Some used the tops of instrument trays as sleds down the hill

near the physician's parking lot, and the Burn Unit team made snow angels.

Anderson and Lisa Mestas, assistant administrator and chief nurse, passed out snacks and drinks to teams on Tuesday who were sleeping over at the hospital since the roads were becoming unsafe.

"All over the hospital, people were watching movies in their PJs," she said. "There was a great comradery among our teams. The 5th floor nurses stayed together; the ICU nurses stayed together. If one person forgot something, someone else would loan it to them."

Among the most popular snacks? Fresh popcorn made from a theater-style popcorn maker Orthopaedics Chair Dr. Fred Meyer had bought the operating room staff last year. Staff members popped and bagged the fresh popcorn, and Anderson and Mestas delivered it to impromptu movie gatherings across the hospital. Meyer was at the hospital Wednesday, after battling icy roads, in order to care for patients in need of an orthopaedic surgeon due to slips and falls.

Meanwhile, the security guards were helping patient families scrape off their cars and jumpstart cars that had fallen victim to the cold temperatures.

Trauma surgeons were on call for emergencies, which included at least three helicopter's worth of trauma patients, all from motor vehicle accidents related to the ice.

### Unlike a Hurricane

Anderson and the Medical Center department heads began meeting regularly on Tuesday and called in night-side nursing crews early, so the staff could get to the hospital before the roads turned to ice.

Unlike a hurricane, the ice storm came up more quickly and didn't leave the team as much time to prepare.

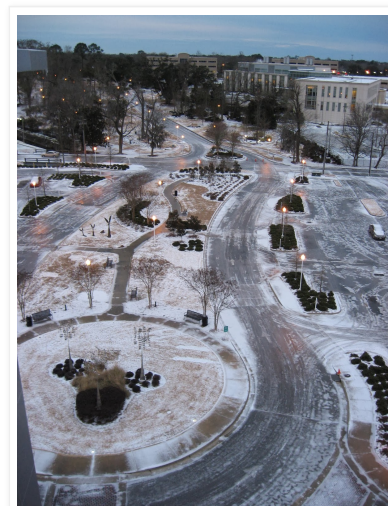
"We didn't have a lot of notice," she said. "Usually for a hurricane, we have two to three days where we can work with patients and their families and get them discharged."

The patient census before a hurricane typically hovers under 100. As the Medical Center braced for Tuesday's ice storm, it was 140.

The experience of Hurricane Katrina had helped Anderson and the team with their own emergency supplies for the storm. Many had air mattresses at the hospital for just such an emergency. Others brought in sleeping bags and blankets.

"A lot of this same crew was the Katrina crew," she said. "We learned so much. We were a little rusty after nine years, but we did well."

### USA Hospitals Working Together



During the ice storm, administrators at both USA Medical Center and USA Children's & Women's Hospital used the same teamwork they employ daily.

Medical Center Administrator Beth Anderson and Children's & Women's Administrator Owen Bailey remained in contact throughout the storm, making sure they were coordinating efforts and delivering a consistent message to their staffs. Children's & Women's Assistant Administrator Chris Jett participated in the calls as well.

"We had to make decisions along the way," Anderson said. "We made sure we

were telling the staff the same things and doing the same things to care for our patients.”

Since the hospital courier service was stopped due to the poor driving conditions, some joint hospital functions, such as lab work, were disrupted. Medical Center Laboratory Services Director Rick Cooke used his four-wheel drive truck to pick up specimens from Children’s & Women’s and deliver them to the Medical Center for testing.

The two hospitals even coordinated menus for a celebratory Thursday morning breakfast for employees who had been living at the hospital for days in order to care for patients. The sausage biscuits were a huge hit.

Children’s & Women’s Dining Services staff started cooking sausage and biscuits at 3:30 a.m. as a Thursday morning breakfast treat for the staff. When the biscuits ran out, the menu switched to fresh-baked cookies.

“I’m so proud of our team,” Bailey said. “They were so understanding and willing to do whatever needs to be done for our patients.”

Movie night in the USA Children’s & Women’s Hospital board room on Wednesday was supplemented with soft drinks and snacks Administrator Owen Bailey bought from the Walgreen’s across the street Wednesday afternoon. He and Assistant Administrator and Chief Nurse Carol Druckenmiller made it to the drug store minutes before it closed.

The administrators said they were grateful to departmental managers and staff who put the patients first and stayed at the hospital to care for patients and their families.

“The spirit of everybody was very positive,” Bailey said. “Everyone knew deep down that they were doing the best for the patients.”



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## 'I Was on Call, So I Stayed'

When an ice storm blew through parts of the Southeast, most people in southern Alabama waited out the inclement weather in their homes. Others continued working despite the storm.

Among those working was University of South Alabama College of Medicine Chair of Neurosurgery Dr. Anthony Martino. He arrived to work at USA Medical Center

on Monday, Jan. 27, when the ice storm was still a distant thought in many people's minds.

With that Monday and Tuesday full of scheduled surgeries, Dr. Martino decided that staying at the hospital would be the wiser choice, considering the ice and sleet that forecasters predicted would fall on the Mobile area.

"I was on call, so I stayed. I didn't want to risk traveling in those conditions," he said.

Monday night, Dr. Martino slept in a neuromonitoring unit and traveled to USA Children's & Women's Hospital, where he would stay Tuesday through Thursday morning. He would not return to his home until Thursday, Jan. 30.

Hospital staff members, away from their own families during the storm, showed great care for patients, Dr. Martino said.

"Everyone was very dedicated and showed their commitment to the system and their patients," he said. "They prioritized taking care of patients and everything followed suit. That's what it should have been."

Posted by [Med School Watercooler](#) at [1:57 PM](#) 1 comment:

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## MCI Staff Put Patients at Ease During Winter Storm

As much of Mobile came to a halt with the arrival of last week's winter storm, the University of South Alabama Mitchell Cancer Institute (MCI) had to make a critical decision to temporarily shut down its operations.

"Out of concern for the safety of our patients and staff, we felt it was necessary to close the Mitchell Cancer Institute during the storm," said Mary Lou Bowers, associate director for MCI Operations and Finance.

MCI closed Tuesday at 1 p.m. and planned to reopen Thursday under regular hours. Due to lingering hazardous road conditions, however, MCI, along with USA Physicians Group Clinics, delayed opening until 1 p.m. Thursday.

Making the decision to close was difficult for MCI. Patients understand having a full dose of chemotherapy on time will give the best results in treatment regimens. Treatment schedules may vary due to many factors, including patient condition and blood counts, or in this week's case, a winter storm.

"At first, the patients were nervous about rescheduling," said Lynn Collins, R.N., supervisor of infusion, "but when we assured them that treatments would be rescheduled within 24 to 48 hours they felt better. Our patients have had great attitudes throughout."

Some patients receive an infusion pump to take home as part of chemotherapy. An infusion pump is a device that gives patients gradual doses of chemotherapy. Due to the storm, however, patients were unable to return to remove the pump as they normally would.

Cancer treatment can be a tremendous strain on patients. MCI staff went out of their way to put patients at ease. The staff typed instructions and taught patients how to turn the pump off and what to do at home. "Patients did very well and were proud of themselves," Collins said.

MCI had 53 appointments Friday, compared to an average of 35 to 40. Many of the staff at MCI volunteered to work extra hours to help with the appointments as well as rescheduling. During the closings, staff called patients from home to notify them that their appointments would be rescheduled.

"Our staff did a tremendous job rescheduling our patients, especially those needing critical treatment," Bowers said.

"The staff had very good attitudes and were willing to work extra hours at home and at MCI," Collins said. "They divided the load and made it easier. They had the



patients in mind.”

Despite MCI closing and the precarious road conditions, the winter storm didn’t keep Dr. Rod Rocconi and Dr. Jennifer Scalici from their patients. Dr. Rocconi used his four-wheel drive vehicle to pick up Dr. Scalici so they could perform a critical surgery.

Overall, staff and patients alike contributed and helped each other weather the storm. The extra effort and great attitudes of all are making the rescheduling smoother. “We feel good about how our staff wanted to ensure that patients were the highest priority even during the period of time we closed,” Bowers said.

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## USA Physicians Group Temporarily Closes During Storm

Last Tuesday, USA Physicians Group was forced to temporarily close clinics as winter storm Leon threatened safe travel for physicians, staff and patients alike.

“It’s always a difficult decision to close our clinics due to weather,” explained Becky S. Tate, chief executive officer for USA Physicians Group. “We have to balance any potentially hazardous conditions with the need to be available for our patients.”

According to Tate, the leadership team at the USA Health System met each day several times by telephone to discuss the weather forecast and any operational issues. They made a decision based on what was best for patients and staff.

“The coordination and cooperation between the physicians practice, the university hospitals and MCI allowed us to keep the needs of the patient first despite adverse weather conditions,” explained Tate.

USA Physicians Group re-opened its clinics on Thursday, Jan. 30, after lunch.

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