

Spring 2011

Health Matters at Aspen Valley Hospital



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Equation for quality

Quality is a word that gets used a lot in healthcare. In fact, hospitals throughout the country are diligently working to improve patient safety and enhance quality. For Kathryn Chamberlin, RN, MHA, chief nursing officer at Aspen Valley Hospital (AVH), quality and safety are incumbent upon the entire team, and it doesn't just "happen." It requires "constant vigilance."

"We constantly monitor our care — both how we deliver it and the outcomes — and we look for what's new and innovative to drive our standards to best practices," explains Kathryn.

A sizable portion of Kathryn's job, and that of her managers, is focused on quality. Some protocols require daily surveillance and are dictated by federal agencies. Some are specific to AVH and involve multidisciplinary teams. And some are general and part of the hospital's "culture of safety."

"For staff, patients, or families to stand up and say something didn't go like it should have, there has to be a sense of openness and a genuine desire to focus on systems," explains Kathryn. "It's rarely about individuals; it's almost always about processes."

Following are some of the quality activities at AVH today:

- ◆ Implementation of standards of care related to heart attacks, pneumonia, congestive heart failure, and surgical procedures
- ◆ Oxygen monitoring systems and responses, specific to patients at high altitude
- ◆ Written plans of care for every patient, every shift
- ◆ Rapid response teams for patients with deteriorating medical conditions
- ◆ Multidisciplinary rounds on inpatients
- ◆ Preprinted physician orders for clarity, consistency, thoroughness, and reliability
- ◆ "Speak up" program urging patients to ask questions, express concerns, and participate in all decisions about their treatment
- ◆ Fall prevention program

Kathryn is a relative newcomer to AVH, having joined the team in 2009. Her previous experience includes being the executive director of large heart programs in two different hospitals and director of quality services.

"Quality is my passion as a nurse," she says. "At the end of the day, we all need to know we did our best. What I bring to AVH is 'quality science,' and I have a great team to work with, from the board of directors to the staff and physicians."



Kathryn Chamberlin, RN, considers quality a science and constantly monitors data.

The most important member of your healthcare team is you!

Patient safety and preventing medical errors are enormous challenges for our country's healthcare system. At Aspen Valley Hospital, we strive to provide safe, high-quality care to all patients. However, the most important way to ensure the safety of your care is to be an actively involved and informed member of your healthcare team.

Here are some ways you can take a proactive role in your healthcare:

- **Ask questions.** Be sure you understand what's being said about your condition and treatment. If you don't, keep asking.
- **Know what medicines you take and why you take them.** Provide a list of all prescriptions, over-the-counter medicines, vitamins, and herbal supplements you take to everyone involved in your healthcare including your doctor, hospital, and pharmacist. Be sure your doctor knows about your allergies or past adverse reactions to medications.
- **Have a trusted friend or family member be your advocate.** During an office visit, an advocate can help you understand and remember your doctor's instructions. If you're hospitalized, an advocate can ask questions and get information for you when you're unable to speak for yourself.
- **Ask for the results of any tests or procedures.** Don't assume that no news is good news. If you don't receive your results, call your doctor's office. Ask what your test results mean for your treatment.
- **Be sure you understand exactly what will happen during surgery or other procedures.** You, your doctor, and your surgeon should all agree on all aspects of your treatment.
- **Ask healthcare workers to wash their hands and put on new gloves before they treat you.** Healthcare providers can transmit germs from one patient to another. As professionals, they all know the importance of preventing the spread of infection. But if they forget, protect yourself by reminding them.
- **Before you are released from the hospital, make sure you understand the treatment plan you will use at home.** Ask your doctor to explain what medicines you'll be taking and how soon you can resume your normal activities.

Research shows that patients who are more involved in their care tend to have better health outcomes. Ensure quality health by educating yourself and taking an active role in every decision about your healthcare.

We rocked the joint! The Joint Commission, that is

About every three years, Aspen Valley Hospital (AVH) is guaranteed a visit by The Joint Commission, the country's premiere healthcare accrediting agency. It's unannounced, it's intense, and it's stressful.

In December 2010, two Joint Commission surveyors arrived to conduct AVH's survey. And, after three days of scrutiny, we learned that we passed their thorough evaluation with flying colors.

Kudos to the entire hospital team! This accreditation requires everyone's attention and involvement, every day of the year. Special recognition is extended to Nettie Kremer, risk manager and chair of the accreditation committee; John Schied, facilities director and leader for environment of care; and Kathryn Chamberlin, chief nursing officer, for her vigilance to quality and patient safety.

What happens next? Continued focus on delivering the highest quality of care. It's what we do, and they'll be back again before we know it!

Meet our anesthesia staff

Anesthesia specialists are professionals in pain management — whether it's during surgery, postoperatively, for childbirth, or for chronic pain. It is their job to ensure that the right dose of the right medication is given to safely and effectively manage pain with minimal side effects.

Specialists on staff at Aspen Valley Hospital (AVH) include medical doctors (MDs) and certified registered nurse anesthetists (CRNAs). Following medical school, MDs spend an additional four years in an anesthesiology residency program. Some take an additional year of training in a subspecialty field. CRNAs at AVH are registered nurses and experienced professionals who hold a master's degree from an accredited nurse anesthesia educational program.

Regardless of their educational background, all anesthesia specialists apply the same professional practice standards.

The AVH anesthesia staff includes:

Chris Beck, MD

Michael Gehrke, MD

Giora Hahn, MD

Eric Willsky, MD

Betsy Bridger, CRNA

Amy Goodman, CRNA

Kathleen Mitchell, CRNA

Phyllis Whitman, CRNA

Calendar of Events

Free "Brown Bag" Lecture Series

Noon - 1:30 p.m. at AVH

Tired Days, Sleepless Nights

Tuesday, March 8

Hypertension and Stroke: What Mel Brooks Can Tell Us About High Blood Pressure

Tuesday, March 15

Cardiac Update

Tuesday, March 22

Stressed Out in Paradise

Thursday, March 31

Health Fair

Thursday, June 2 • 8:30 - 11:30 a.m.

Blood tests only at

After-Hours Medical Care, Basalt

Saturday, June 4 • 8:30 - 11:30 a.m.

Blood tests only at AVH

Sunday, June 5 • 8:30 - 11:30 a.m.

Blood tests and all screening stations at AVH

Call 544.1296 for more information.



Master Facilities Plan in 3-D

Aspen Valley Hospital staff members (pictured above) check out the three-dimensional model of the Master Facilities Plan. The model demonstrates how the building settles into the hillside, giving perspective on its size and relationship to surrounding areas.

"Even for those of us intimately involved with the project, it offers a new orientation," says Dave Ressler, hospital CEO. The model is on display in the hallway near the courtyard (on the way to the PCU), and the public is invited to stop by and take a look. An appointment is unnecessary, but if you would like to meet with a hospital representative, call **544.1296** to schedule a time.

Anesthesiologist brings wealth of experience to AVH

Just a few years ago, Michael Gehrke, MD, was a military anesthesiologist stationed in Iraq, caring for severely injured soldiers. While serving as the chief of anesthesia at Ibn Sina Hospital, he was an integral member of a team evaluating protocols for the transfusion of blood and blood products.

Within weeks of arrival in Iraq, the group became a finely tuned team, with severely injured patients getting their first units of blood within minutes, and seamless communication contributing to the highest survival rate of injured soldiers of any war to date. The work he and his colleagues did, and the recommendations that came from their battlefield surgical unit, have changed the way blood and blood products are administered throughout the world.

“Iraq was fast and furious,” says Dr. Gehrke. “The injuries were often horrific, and we gave massive amounts of blood. What we learned, though, was that blood alone was not good enough. We had to give it early, and we had to give it with clotting factors.” Otherwise, Dr. Gehrke explains, the patient continues to bleed.

Also, when there is significant blood loss, you don’t waste time giving “crystalloids” (IV solutions such as

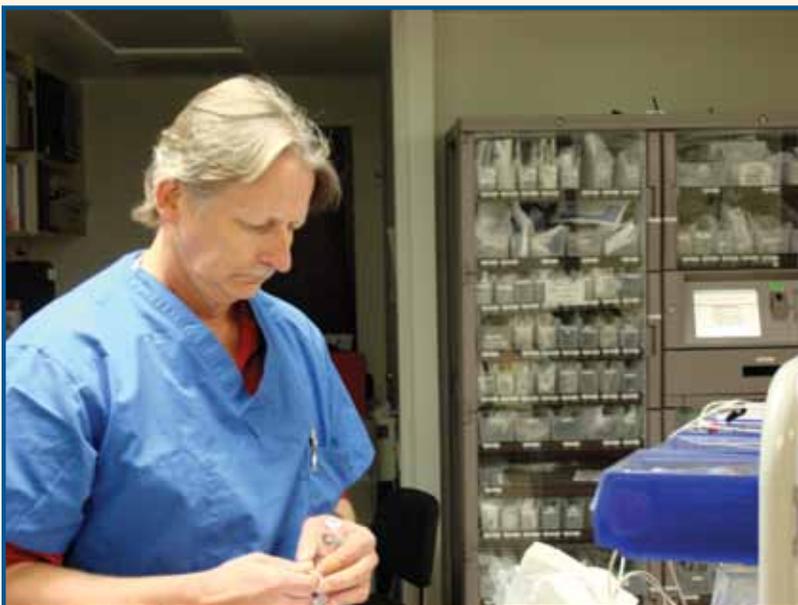
normal saline), and you must correct other conditions — such as acidemia or abnormal calcium, potassium, and magnesium levels — associated with massive blood loss.

The work that Dr. Gehrke and his colleagues did in the battlefield surgical units in Iraq have changed the way that blood and blood products are administered throughout the world.

Military doctors in Iraq found that fresh whole blood provided the most benefit, but a combination of packed red blood cells, fresh frozen plasma, and platelets would adequately replace the patient’s volume, and patients that might otherwise have died survived despite life-threatening injuries.

Dr. Gehrke spent 32 years in the military, first as a member of the Presidential Ceremonial Honor Guard, then as a hospital corpsman, an emergency nurse, and a certified nurse anesthetist, and finally as an anesthesiologist. Now, he’s enjoying the Aspen lifestyle and working in a small hospital. Despite that, he still wants to spend some time in metropolitan medical centers.

“When you’re involved in cardiac surgery and neurosurgery, you gain a perspective for the seriously ill and injured,” he notes. “But whether you’re in a small level III trauma center like AVH, or a large medical center, the goal is the same: make all the ‘numbers’ as close to what they would be if the patient was well and walking around.”



Anesthesiologist Michael Gehrke, MD, prepares for a surgical case.

This publication in no way seeks to diagnose or treat illness or serve as a substitute for professional medical care. Please see your physician if you have a health problem.

Revolutionary technology, unparalleled clarity

If you're a surgeon, the better you can see, the better you can do your job. For that reason, Aspen Valley Hospital (AVH) recently upgraded its surgical technology to an integrated system with LED lights, high-definition (HD) cameras and monitors, a versatile information management system, and automated accessories to ensure superior visualization throughout the surgery.

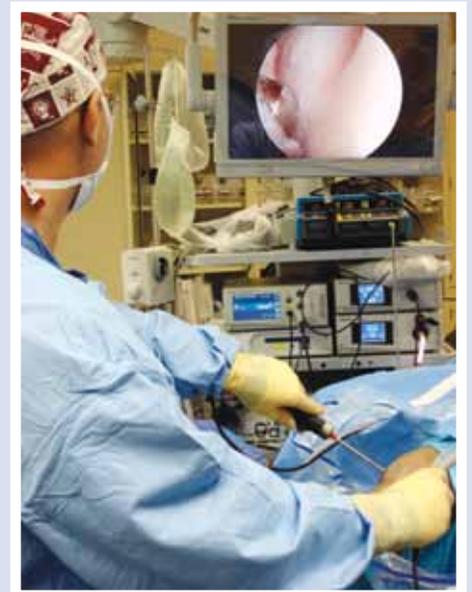
Manufactured by Stryker, the new wireless technology — Stryker's third generation of HD products — came with a price tag of \$825,000 and can be used after AVH's expansion and remodel.

The new equipment is used for any type of minimally invasive surgery performed through a scope. Ease of use, enhanced clarity and sharpness, optimum depth of focus, and increased patient and operating room safety are the primary benefits of the technology.

"It's the difference between watching HD television and non-HD TV," says Tom Pevny, MD, a surgeon who performs a lot of arthroscopic surgeries at AVH. "I can see more detail, so there's less chance of missing something like a small tear. All in all, it's better for my patients."

In addition, Dr. Pevny appreciates the sleekness of the equipment. Because it takes less space, there's more room for physicians and nurses to move around. Several monitors for viewing, along with precise images, create efficiencies. More efficient procedures require less anesthesia and, by decreasing operative time, they decrease the risk for complications.

A three-week installation period was required, one operating room at a time. For surgical director Todd Bartlett, RN, who was tasked with ensuring that all went well with the installation and training, it was well worth the investment. "Our patients literally put their lives in our hands," he explains. "Having the best technology is just one of the things we can do to ensure a successful surgical experience."



Tom Pevny, MD, orthopedic surgeon, uses AVH's new HD technology for knee surgery.