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The Scope

A Newsletter for Medical Professionals

January 28, 2015

***“Be kind to everyone on the way up;
you’ll meet the same people on the way down.”***

***— Wilson Mizner (also ascribed at times
to Walter Winchell and Jimmy Durante)***

"It takes steel to heal."

—Author Unknown

The Scope appreciates the enthusiastic response of readers contributing quotes and in this issue celebrates two submissions: the first from Dr. James Whiting and the second by Dr. Virginia Eddy. Please submit a favorite you’d like to share with others by emailing to: thescope@mmc.org

Dear Members of the Maine Medical Center Medical Staff,

As we mentioned to you last summer, Maine Medical Center has been planning to open a pharmacy at the Bramhall Campus. We are pleased to announce that MMC has now opened the state’s only 24-hour pharmacy – the closest one is 52 miles away in New Hampshire. Andrea Lai, Pharm.D. has details below, and we’ve attached another document that may answer some of your questions – it will be available soon in a pocket version, for your convenience and easy reference.

Also, we want to take this opportunity to recognize the work of the Vascular Interventional Radiology (VIR) lab at MMC. Their zero tolerance approach to infections has led to success in the past eight months.

And we have included Part Two of Dr. George Dreher’s article on “Burnout and Resilience,” where he offers a few of the many emerging research-evaluated means to counter the

trend of burnout on physicians in the health care system.

We hope you find the information in these articles helpful to you.



Peter W Bates

Peter Bates, M.D.
Chief Medical Officer



CBoyack

Cindy Boyack, M.D.
Medical Staff President

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Introducing Maine's Only 24-Hour Pharmacy

By Andrea Lai, Pharm.D.

Director, Ambulatory Pharmacy Services

I'm thrilled to share details about the opening of MMC's first full-scale community pharmacy, known as *the Pharmacy*. Though our name appears simple – our services to patients, employees, and the community are unique and groundbreaking.

On January 26, MMC opened Maine's only pharmacy to be open 24 hours a day, seven days a week. Located on the ground floor of the East Tower on the Bramhall Campus, *the Pharmacy* is open to all.

We want our patients to leave for home with their necessary medications in hand. Knowledgeable pharmacists are always accessible for consultation and patient education, so patients will leave with a better understanding of their prescribed medications, including what to expect and proper use.

We honor all major commercial insurances, including Medicare and Medicaid. For patients who do not have insurance, *the Pharmacy* has team members available to help navigate medication assistance programs. MMC/MMP patients qualifying for Free Care may be eligible for sliding scale discounts on prescription medications.

To send prescriptions electronically through Epic/EHR, search for "Maine Medical Center Outpatient Pharmacy." Prescribers at 22 Bramhall can send hard copy prescriptions to tube station 905.

Also, the Pharmacy offers discounts for employees and their families covered under the MaineHealth insurance. Prescriptions with traditional copays are discounted 10%, while those with a deductible as part of the Health Saver Plan (HSA) are discounted 5%.

Pharmacy Contact Information:

- Telephone: 662-2626
- Fax: 662-6660
- www.mmc.org/pharmacy

Thank you for your support. Please contact me with any questions at alai@mmc.org or at 662-5366.

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Zero Tolerance for Infections Lead to Success

By Josh Cutler, M.D.

MMC Vice President, Quality and Safety

Early in 2014, a number of central line associated bloodstream infections (CLABSI) related to lines placed in the Vascular Interventional Radiology (VIR) lab at MMC led to concern among VIR team members. With improvements in catheter insertion procedures, the team has reduced central-line associated bloodstream infections (CLABSIs) to zero since last June. This major achievement can be attributed to a focused effort on the part of an interdisciplinary team of Interventional Radiologists, Radiology Technologists, Registered Nurses, and Physician Assistants.

Led by Derek Mittleider, M.D. and Deborah Barris, R.N., the team started the process that led to the highest level of patient care by inviting medical professionals outside of their department, including Surgical Care and Infection Prevention, to observe all VIR procedures.

Input gathered from the observations of these other medical professionals led to a discussion among the VIR team members as to how to improve their processes at every step, including hand hygiene, surgical scrubbing, and prepping a patient for a procedure. An integral part of the improvement process was – and remains true today – that everyone on the team feels able to contribute suggestions for improvement.

Congratulations to the whole team for their success and ongoing commitment to patient care.

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Burnout and Resilience (Part Two)

By George K. Dreher, M.D.

In the last article, we outlined some causes and negative impacts of burnout on physicians and the health care system. Here we offer a few of the many emerging research-evaluated means to counter this trend:

Make full use of your team members' skills.

Minimizing responsibility for routine or strictly administrative tasks can improve functional efficiency and satisfaction for physicians – leading to more time to care for patients, while maintaining or improving the bottom line, patient satisfaction, and quality of care. An example is to use scribes to type the patient notes and enter orders, while the physician focuses on the patient, then proofs the notes and orders after the visit. Another is to have other medically trained staff doing routine tasks using algorithms (such as for anticoagulant adjustments) and ordering standard labs prior to a visit to have them available at the time the patient is seen.

Improve peer support and rediscover values through formal or informal connections.

Physicians are trapped in “silos” where they rarely have opportunities to interact with other physicians removing an important source of advice, support, and maintaining meaning in their work. One example are Balint groups which promote better physician understanding of the emotional aspects of their work with patients and provided a tighter community of peers with whom they could open up about challenging situations and reinvigorate the meaning of their work.

Cultivate self-awareness and a healthy attitude towards work and life.

Reflective practices improve coping with stress, emotional stability, communication with others, and life satisfaction. Yoga, sports, dancing, the arts, spiritual practices and other activities, which move your mind into less intellectual and more direct experience of life, have been found to help “decompress” the factors which lead to dissatisfaction or burnout.

The key is to broaden our perspective by episodically slowing down and paying attention to our lives and what is occurring in the moment, and then refocus on what matters to us.

If you would like to talk about this subject, contact me at dreheg@mmc.org.

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MMP – MaineHealth Cardiology Office Relocated

The South Portland office of Maine Medical Partners MaineHealth Cardiology (formerly located at 119 Gannett Drive) has relocated to combine with the practice’s Scarborough office. If you have questions, please contact Elise Gerrior at gerrie@mmc.org.

Please note new contact information:

Address: 96 Campus Drive, Scarborough, ME 04074

Phone Number: 885-9905

Main Fax Number: 396-5600

Referrals Fax Number: 883-6786

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Calendar

MMC Medical Executive Committee Meeting Schedule for 2015

All meetings are held from 12-2 p.m. in the Dana Center Boardroom, and lunch will be served:

- Friday, February 20
- Friday, March 20
- Friday, April 17
- Friday, May 15
- Friday, June 19
- Friday, July 17
- Friday, August 21
- Friday, September 18
- Friday, October 16
- Friday, November 20
- Friday, December 18

2015 Medical Staff Dinners

Please mark your calendar for the 2015 Medical Staff Dinners:

- Wednesday, April 29 at 5:30 p.m. in the Dana Center Lobby
- Wednesday, September 16 at 5:30 p.m. on the East Tower Patio.

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Publications

[Ecker RD, Tsujiura CA, Baker CB, Cushing D. Endovascular reconstruction of vertebral artery occlusion prior to basilar thrombectomy in a series of six patients presenting with acute symptomatic basilar thrombosis. J Neurointerv Surg. 2014 Jun;6\(5\):379-83.](#)

[Dobrow E, Kim P. Endovascular treatment of massive and submassive pulmonary embolism. Tech Vasc Interv Radiol. 2014 Jun;17\(2\):121-6.](#)

Talmadge J, Smith K, Dykes T, Mittleider D. [Clinical impact of sacroplasty on patient mobility.](#) J Vasc Interv Radiol. 2014 Jun;25(6):911-5.

Smith CJ, Wang D, Sgambelluri A, Kramer RS, Gagnon DJ. [Serotonin Syndrome Following Methylene Blue Administration During Cardiothoracic Surgery.](#) J Pharm Pract. 2015 Jan 22.

De Martino RR, Hoel AW, Beck AW, **Eldrup-Jorgensen J**, Hallett JW, Upchurch GR, Cronenwett JL, Goodney PP; Vascular Quality Initiative. [Participation in the Vascular Quality Initiative is associated with improved perioperative medication use, which is associated with longer patient survival.](#) J Vasc Surg. 2015 Jan 15.

Doucette CR, Rosen CJ. [Current Protocols in Mouse Biology.](#) Curr Protoc Mouse Biol. 2014;2014.

Seder DB. [Prognosis after cardiac arrest: time to rethink why, how, and when*.](#) Crit Care Med. 2014 Dec;42(12):2630-1.

Frizell AW, Higgins GL 3rd. [Cardiac myxoma as a mimic: a diagnostic challenge.](#) Am J Emerg Med . 2014 Nov;32(11):1399-404.

Dankiewicz J, Schmidbauer S, Nielsen N, Kern KB, Mooney MR, Stammet P, Riker RR, Rubertsson S, **Seder D**, Smid O, Sunde K, Søreide E, Unger BT, Friberg H. [Safety, feasibility, and outcomes of induced hypothermia therapy following in-hospital cardiac arrest-evaluation of a large prospective registry*.](#) Crit Care Med. 2014 Dec;42(12):2537-45.

Guay JA, Wojchowski DM, Fang J, Oxburgh L. [Death associated protein kinase 2 is expressed in cortical interstitial cells of the mouse kidney.](#) BMC Res Notes. 2014 Jun 7;7:345.

Favreau AJ, Vary CP, Brooks PC, Sathyanarayana P. [Cryptic collagen IV promotes cell migration and adhesion in myeloid leukemia.](#) Cancer Med. 2014 Apr; 3(2):265-72.

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Story Ideas?

Your participation is essential to making The Scope a dynamic and sustainable publication. Please submit articles of 250-300 words to thescope@mmc.org. Include practitioner's byline with title and appropriate contact for further information. We publish two times each month.

To view past issues, visit www.mmc.org/TheScope.

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Medical Staff Value, Mission, and Vision Statements

Value Statement

The Medical Staff of Maine Medical Center values both individuality and collaboration. We will continually pursue higher value health care. We embrace a culture of curiosity and life-long learning. We are partners with Maine Medical Center, and we mirror its values of compassion, service, integrity, respect, and stewardship.

Mission Statement

The Mission of the Medical Staff of Maine Medical Center is to provide affordable, high-quality health care to our community. We teach future health care providers and develop innovative ways to improve the health of our community. In partnership with the Medical Center, we proudly accept our responsibility as one of Maine's leaders in patient care, education, and research.

Vision Statement

The Medical Staff of Maine Medical Center will be the driving force within Maine Medical Center leading the way to making Maine the healthiest state in the nation.

[A Compact Between Maine Medical Center and Its Medical Staff](#)

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