

The Scope

A Newsletter for Medical Professionals

March 23, 2017

“I am in my work like a seed in its fruit.”
- Rainer Maria Rilke

The Scope appreciates the enthusiastic response of readers contributing quotes. This quote was submitted by Robyn L. Ostrander, M.D., Medical Director, Division of Child & Adolescent Psychiatry, Maine Medical Center Chair, Glickman Family Center for Child & Adolescent Psychiatry, Spring Harbor Hospital, Assistant Professor of Psychiatry, Tufts University School of Medicine. Please submit a favorite you'd like to share with others by emailing [The Scope](mailto:thescope@mmc.org).

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

Peer Support

for the MMC Medical Staff

PeertoPeer@mmc.org

Physician leader: Christine Irish, MD

Confidential * One-on-One * Peer Support

Dear Members of the Maine Medical Center Medical Staff,

Spring greetings. In this issue we start with MaineHealth's updated position on the ACA debate. This is a timely topic, as the House is scheduled to vote on a replacement bill soon.

On clinical updates, read about the COPD Transformation project as well as the newly accredited Heart Failure program.

For all of you advancing the academic mission, we join you to congratulate our students on the Match and all (repeat *ALL*) of our residency training programs on filling.

Please know we will soon embark on a re-write of the Medical Staff Bylaws and associated manuals. You can do your part by getting more familiar with the structure and content of our Bylaws now and follow The Scope to stay informed and involved. As a starter, we

include a draft to update the Compact between the Medical Staff and the MMC Hospital leadership, which is key to guiding a successful partnership. The compact will be used to improve that interface. Please give us your feedback and input.

Read on to review the Professional Conduct Code - another key part of our Bylaws that sets clear expectations for each of us, our behaviors and how we treat each other.

We continue to include updates on the topic of MaineHealth Governance Unification, and I want to call your attention to the upcoming special town hall. See below for additional deadlines, dates for MITE awards, Marathon Medical Teams and Medical Staff dinner coming up on April 5. Finally, don't miss this month's list of publications.

Sincerely,



Joel Botler MD

Joel Botler, M.D.
Chief Medical Officer



Lisa Almeder

Lisa Almeder, M.D.
Medical Staff President

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MaineHealth Position on ACA Replacement

By Katie Fullam Harris, Senior Vice President, Government Relations and Accountable Care Strategy, MaineHealth

As you know, health care reform is being heavily debated in Congress right now. A few weeks ago, we disseminated a position statement that outlined our broad perspective on the Affordable Care Act and efforts to change it. Today, we are providing you with a more detailed summary of key elements of any legislation that are important to our patients and our provider system. [Click here to read the summary.](#)

This week, the House is scheduled to vote on a replacement bill. I have been in close

contact with Maine’s delegation, and our members understand the implications of that legislation on our patients and our system. Because the repeal and replace legislation is a constantly moving target, we identified the elements of any legislation that are most important to our system. We have shared the attached fact sheet that identifies those elements with our delegation, and we wanted you to be aware of them as well.

Please do not hesitate to contact me if you have questions.

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AECOPD Care Pathway and Order Set

By Joel Wirth, M.D., FCCP, Director, Pulmonary and Critical Care Medicine, Maine Medical Center

A multidisciplinary group of providers, nurses, therapists and care managers, as part of the Adult Medicine Service Line Clinical Transformation Project, have been collaborating to improve the care for patients admitted to MMC with an Acute Exacerbation of COPD.

In 2016, an Inpatient AECOPD Care Pathway and the “Gen Med COPD Acute Exacerbation order set [1379]” were developed and launched with input from teams across the hospital. The order set places these patients into the AECOPD Care Pathway to assist in delivering high quality standardized care. The order set and pathway bring multiple resources to each COPD patient, including RT assessments and patient education, PT/OT, care management, pharmacy and potentially pulmonary and palliative medicine consultations. We are asking admitting teams to preferentially admit these patients to R4 and the AVU to best align these resources with this patient cohort. Some of our positive outcomes from the last two years are included below.

	FY16	FY17 (YTD)
30D Readmission	17%	6.3%
Mortality	4.2%	3.6%

Please feel free to [contact me](#) with any questions or concerns regarding the AECOPD Care Pathway or EPIC Order Set. Our whole team thanks you for your support and for your commitment to delivering excellent COPD care.

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Heart Failure Program Earns Joint Commission Accreditation

By Esther Shao, M.D., Ph.D., Medical Director & Michael Robich, M.D., Surgical Director,

MMC Advanced Heart Failure Program

Maine Medical Center (MMC) recently achieved a major milestone with the Advanced Heart Failure Program earning certification for destination therapy Left Ventricular Assist Device (LVAD) implantation from the Joint Commission on Accreditation, Healthcare, and Certification. This is a pivotal step in the achievement of MMC's goal of providing quality, multidisciplinary care for all end-stage heart failure patients in the region. The Advanced Heart Failure team at MMC implants and supports durable ventricular assist devices for patients who need an LVAD as a bridge-to-transplant as well as those who are not transplant candidates, but are eligible for destination LVAD therapy. The team also accepts transfer of care for LVAD and heart transplant patients who previously had to travel out of state for care.

Maine's only Advanced Heart Failure Program has excellent outcomes that exceed the national averages, and we have collaborative relationships with all heart transplant programs in Boston. As we continue to grow and meet the needs of our patients, we are using cutting edge technology such as:

- A percutaneous catheter-based pump for patients undergoing high-risk coronary interventions and those with acutely failing hearts
- Multiple short-term support devices such as extracorporeal mechanical oxygenation (ECMO) and percutaneous temporary ventricular assist for shock patients who require urgent pulmonary, right, left, or biventricular support

Our multidisciplinary heart failure team is committed to quality care from medical management, to transplant, temporary and durable mechanical support, and end of life. Our team has recently expanded to include:

- [Samuel Coffin, M.D.](#)
- [Michael McGrath, M.D.](#)
- [Walter DeNino, M.D.](#)

Please contact us with questions regarding our Advanced Heart Failure Program. Esther Shao, eshao@mmc.org, and Michael Robich, mrobich@mmc.org.

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Congratulations to the TUSM-MMC Maine Track Class of 2017 and MMC Residency Programs

Match Day 2017 included the fifth class of students in the Maine Track program. Counting this year's class, more than 168 students have graduated from the program since 2013.

This year's class included 38 medical students, 14 of whom were matched with MMC

programs. Four additional students from the Boston-based Tufts class also matched with MMC. Others were placed in excellent teaching settings [throughout the country](#), said Peter Bates, M.D., MMC's Senior Vice President of Academic Affairs and Chief Academic Officer.

All 14 MMC primary residency programs were filled through the Match process. Kalli Varaklis, M.D., MMC's Designated Institutional Official said, "We are delighted to welcome many highly qualified medical students from across the country who have chosen to continue their education and training at MMC, including our newest Rural Internal Medicine Maine (RIMM) Track."

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Compact Between Medical Staff and Hospital

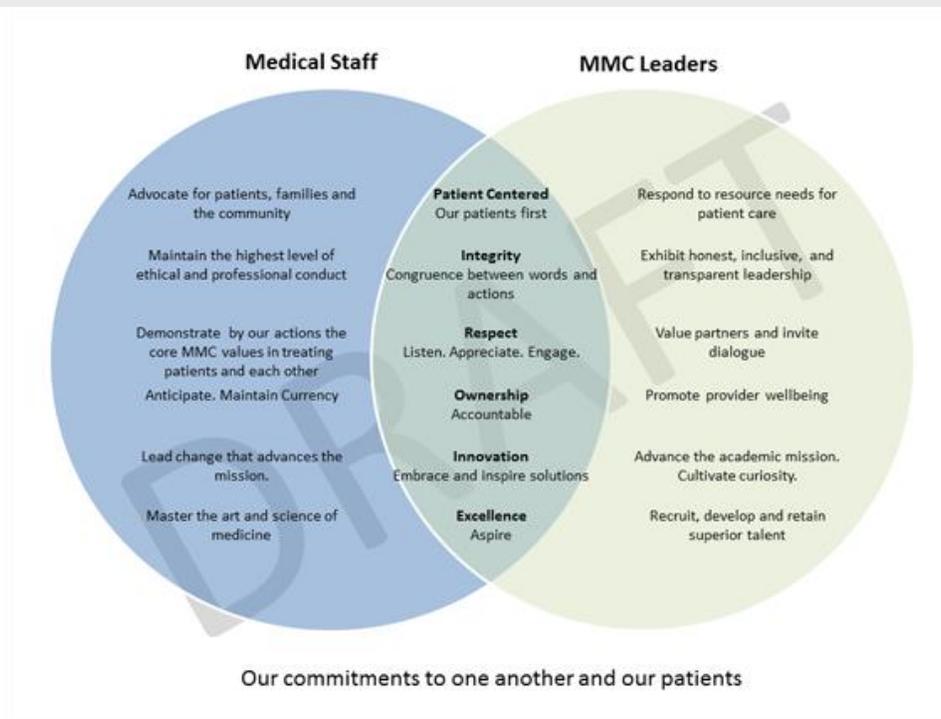
By Lisa Almeder, M.D., Medical Staff President

Dear Colleagues,

You may recall a 2016 survey about the Compact between the Medical Staff and MMC leadership. We heard and incorporated your input to have a more succinct guide for a more usable tool. After a Compact Group met several times last year, a subgroup has produced a DRAFT of an updated approach to convey key features of the ideal partnership. The consensus of a Venn diagram model captured a way to incorporate our six values as a central framework to relay corresponding commitments of both parties while also capturing (in the overlap) common commitments to one another.

The goal is to have a readily known, frequently used and honored tool that builds on common values to promote ideal culture. The draft is now being vetted at key committees, decision-making forums and practices. The compact group outlined multiple ways of incorporating the guide into routine processes, some of which are underway.

Below is a draft for your review. We seek your responses and input on content and especially your concrete ideas for desired, innovative ways to incorporate this regularly into our routines. Please email any comments, suggestions, etc., to stoddc@mmc.org.



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Professional Conduct Code

By Lisa Almeder, M.D., Medical Staff President

A key part of our Bylaws, the Code of Conduct sets clear expectations for each of us, our behaviors and how we treat each other. It is one of the most powerful professional behaviors to practice respect which can multiply positively in reciprocal fashion. Practice respect routinely and, importantly, muster your professionalism to consciously practice it even more so in difficult situations and on the tough days. It translates to quality for our patients and to our own well-being.

[Read the Code of Conduct here.](#)

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MH Unification Update and Med Staff Town Hall

By John Bancroft, M.D., Maine Medical Center, and Brian Nolan, M.D., Western Maine

Healthcare

Last month the Physician Advisory Subcommittee on MaineHealth Unification conducted a survey of medical staff members throughout MaineHealth. A principle finding of this survey was that more communication with providers is needed regarding MaineHealth's governance model and the system-wide unification discussions underway.

We've provided a [Frequently Asked Questions](#) document that answers questions we have asked ourselves and heard our colleagues as about unification. Please read and share this widely.

You can also read [part one of a three-part communication series](#) sponsored by the Physician Advisory Subcommittee. Over the next five weeks, you will receive this and two more one-page communications on the following topics:

1. **Current Governance Model:** What is MaineHealth's Current Governance Model? What does it enable and what does it hinder?
2. **Proposed Changes:** What changes to MaineHealth's governance model are under exploration? What benefits could they offer? What risks might they involve?
3. **Local Role Under Proposed Changes:** If MaineHealth were to implement changes to its governance model, how would local input regarding patient care be heard? How would the role of local clinical, administrative, and board leaders change?

If you or your colleagues would like additional information, please speak to your organization's representative on the Physician Advisory Subcommittee and to the documents on Unification that were sent to your offices on January 31.

MaineHealth Governance Unification Town Hall for Med Staff Monday, May 22, 5:30 p.m., Dana Lobby

You are invited to join colleagues of the MMC organized Medical Staff at an upcoming town hall forum to partake in a discussion about MaineHealth Governance Unification. MaineHealth leaders will present the rationale, context, constructs and processes for the proposed governance. MH, MMC leaders and your peers on the advisory subcommittee welcome questions, concerns and encourage robust dialogue.

This is one way for the Medical Staff to become more informed and express our opinions. You can also stay informed by following this topic in the SCOPE, email messages and by networking with your colleagues.

Please come on May 22 with questions. Light snacks will be served.

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Maine Medical Center Submits Application for State Approval of \$512 Million Project

Maine Medical Center has filed a Certificate of Need (CON) with the State of Maine for its planned \$512 million renovation and expansion project. The state requires CON approval for all major investments in healthcare infrastructure. For this project, which was announced last fall, approximately \$392 million of the investment Maine Medical Center is proposing is subject to review by state regulators.

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MITE Academy Educational innovations Grants and Scholars Program – Call for Applications

[MITE Academy](#) Educational Innovations Grants

The Department of Medical Education invites applications for Educational Innovations Grants - a competitive pilot grant program designed to improve community health and the delivery of healthcare through educational innovation. Eligibility: Members of the Maine Medical Center community and its affiliates and/or affiliated with its educational programs; Funding for Educational Innovation Projects up to \$20,000.

Important Dates:

- Letters of Intent are due Friday, March 31, 2017
- Full Proposals are due Wednesday, June 7, 2017
- Decisions will be communicated by Friday, July 21, 2017

[MITE Academy](#) Scholars Program

The Academy at the MMC Institute for Teaching Excellence (MITE) is now accepting applications to the Academy (formerly META) Scholars Program. Please submit your application by March 15, 2017 for consideration. This is a two year program featuring: Completion and publication of a mentored education scholarly project; Bi-monthly Seminars and workshops covering aspects of education research; clinical and didactic teaching; education program administration and leadership; Observed teaching sessions and coaching; Education Journal club; Teaching opportunities for TUSM-Maine track medical students; Funding is provided for clinical release time.

Questions? Bob Bing-You or Denham Ward, Department of Medical Education, 662-7060

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New MaineHealth Chief Pharmacy Officer

[Read about the new position](#) in a letter from Jeff Sanders, MMC Executive Vice President and COO.

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Volunteer for the Maine Coast Marathon Medical Team

By Ria Isacke, D.O.

I am medical director of the [Maine Coast Marathon](#), and looking for medical volunteers to help during the race on Sunday, May 14. Volunteers receive a free T-shirt and free food.

The race starts at 7:30 a.m. in Biddeford, so volunteers are asked to arrive around 7 a.m. for a short orientation and help with set up. The race has a total of 1,000 runners, and is expected to wrap up around 2 p.m. If you can only do a shorter shift, please still consider volunteering and I will work to accommodate your schedule.

Interested? [Ria Isacke](#)

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Reminder: Registration for the May 2017 MMC Research Retreat

By Retreat Co-Chairs Sanjeev Francis, M.D., Cardiology, and Sarah Peterson, M.D., Ph.D., MMCRI

You are invited to attend the 2017 **Maine Medical Center Research Retreat** on **Wednesday, May 3, from 1 - 7 p.m. in the Dana Center**. Researchers, staff, and trainees in all disciplines conducting basic, translational, clinical, population, education or quality improvement projects are encouraged to participate. We have put together an exciting program featuring [7 research talks](#) and [70 poster presentations](#) representing 20 different departments (see attachments for a full listing). Our distinguished keynote speaker will be Dr. Vasan Ramachandran, Principal Investigator, Framingham Heart Study, and Professor of

Medicine and Epidemiology, Boston University School of Medicine. Thank you all for supporting the research environment here.

[Registration for the retreat is still open.](#)

You are welcome to attend all or part of the retreat. Please note that *registration closes April 14*, and we expect the retreat to fill early this year. We encourage you to register as soon as you are able.

For more information, please contact Sarah Peterson at peters2@mmc.org or 396-8620.

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Publications

Mulligan M, **Keroack B.** [Winners of the 2016 American College of Rheumatology Annual Image Competition.](#) Arthritis Rheumatol. 2017 Feb 19.

Hicks CW, Zarkowsky DS, Bostock IC, Stone DH, Black JH 3rd, **Eldrup-Jorgensen J**, Goodney PP, Malas MB. [Endovascular aneurysm repair patients who are lost to follow-up have worse outcomes.](#) J Vasc Surg. 2017 Feb 16.

Jindal T, Kachroo N, **Sammon J**, Dalela D, Sood A, Vetterlein MW, Karabon P, Jeong W, Menon M, Trinh QD, Abdollah F. [Racial differences in prostate-specific antigen-based prostate cancer screening: State-by-state and region-by-region analyses.](#) Urol Oncol. 2017 Feb 27.

Ryzhov S, Matafonov A, Galindo CL, Zhang Q, Tran TL, Lenihan DP, Geisberg Lenneman C, Feoktistov I, **Sawyer DB.** [ERBB signaling attenuates pro-inflammatory activation of non-classical monocytes.](#) Am J Physiol Heart Circ Physiol. 2017 Feb 24.

Andrejco, K., Lowrance, J., Morgan, B., Padgett, C., Collins, S. (2017) [Social media in nurse anesthesia: a model of a reproducible educational podcast.](#) AANA Journal, 85(1), 10-16.

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Calendar

2017 Med Staff Dinners – Save the Date

- April 5, Dana Center Lobby

- September 20, East Tower Patio

Dinners begin at 5:30 and run until about 7 p.m.

Maine Medical Center Medical Executive Committee Meeting Schedule 2017

- April 28
- May 19
- June 16
- July 21
- August 18
- September 15
- October 20
- November 17
- December 15

All meetings are held from Noon - 2 p.m. in the Dana Center Boardroom. Lunch is served.

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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.

For past copies of The Scope go to: <http://www.mmc.org/newsletter-for-medical-professionals>

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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.

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Maine Medical Center
MaineHealth

centered around you

www.mmc.org

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