

central line

A PUBLICATION FOR THE MEDICAL STAFF OF THE HOSPITAL OF CENTRAL CONNECTICUT

Physicians to benefit with Cerner upgrade

By Steven D. Hanks, M.D., MMM, FACP, executive vice president & chief medical officer of The Hospital of Central Connecticut



The hospital continues to transition through significant changes related to our IS Department and Cerner system, with the ultimate goal of saving money while increasing service for all IS users, including medical staff members.

The most noticeable — and welcomed change for physicians will be the new, updated Cerner clinical information system that offers better and timelier performance and supports our efforts as we transition more areas of the hospital into a computerized physician order entry (CPOE) system. The Cerner upgrade is scheduled to occur June 19; go-live support will be provided to staff members.

Many doctors have expressed dissatisfaction with the current Cerner system. With your concerns in mind, we'll now be providing an enhanced system that over time we think will exceed your expectations. The new Cerner sys-

tem will offer varied functionalities introduced over the next several years to provide physicians with more flexibility, less downtime and increased program resources, including greater ability to customize platforms and programs to suit your requirements. All Hospital of Central Connecticut Cerner data, previously stored by ACS, is now stored at Cerner in Kansas City, Mo.

These modifications will help us as we move to hospitalwide CPOE. As you may know, a team of Cerner experts visited the hospital earlier this year for a CPOE and "meaningful use" readiness assessment in relation to our Cerner system, including the electronic health record.

In tandem with this change, the hospital has resumed full management of its IS department, previously handled by Affiliated Computer Services (ACS). The vast majority of IS employees who previously worked for ACS are expected to become hospital employees. Joining them will be 20 to 25 new employees with skills such as network management and system administration, which

currently don't exist at HCC. We expect that this management move will save the hospital more than \$25 million over the next eight years.

In addition, the hospital's data center has relocated to a newly built area on the New Britain General campus, Building D, ground floor. The new center's security, electrical and cooling systems are extremely advanced, with HCC one of the first hospitals in the northeast using these technologies.

Kudos to the IS Department, which went to great lengths to swiftly handle multiple issues intrinsic with any transition. If you have issues or questions related to the Cerner upgrade, please call the Help Desk at 860-224-4357. For more information or other questions related to IS, please call Frank Pinto, executive director, Information Systems, and CIO, at 860-224-5038.

IN THIS ISSUE

- VP, Patient Care Services/
chief nursing exec. named2
- Mission trips made to Philippines, Haiti3
- Orthopedic leadership changes4
- New medical staff appointments5
- Joslin Center adding locations.....6
- RxNews.....7

Senators meet with hospital and university officials. During a May 7 press conference held at The Hospital of Central Connecticut (HCC), state Sen. Donald DeFronzo (D-New Britain) met with officials from area hospitals, including HCC, and the University of Connecticut to discuss landmark legislation that will enhance and expand services at area hospitals and the University of Connecticut Health Center. State Sen. Thomas Colapietro (D-Bristol) was also at the conference.



HCC awarded \$60,000 in grants

The Hospital of Central Connecticut (HCC) has been awarded two grants totaling \$60,000 from the Connecticut Breast Health Initiative, Inc. (CT BHI, Inc.) toward breast cancer education and research.

A \$20,000 grant will support the hospital's breast cancer program educational initiatives. These include survivorship workshops, manuals for patients with breast cancer, and community education about breast health and breast cancer.

The \$40,000 research grant will be used for a study to compare the findings of breast specific gamma imaging (BSGI), MRI and ultrasound used in the evaluation of high-risk patients with dense breasts. HCC radiologist Jean Weigert, M.D., will be the principal investigator. Weigert previously conducted an award-winning study that showed measurable value of a BSGI test over ultrasound in detecting breast cancer as a follow-up to a mammogram.

"We thank the Connecticut Breast Health Initiative for their continuing support of our outreach programs for our patients and the community, and for their supporting our research efforts," says James Massi, M.D., chief of Surgery.

Last year, HCC launched its breast cancer program, which includes a breast nurse navigator and weekly breast conference meetings. HCC Nurse Navigator Donna Boehm, R.N., M.S.N., M.P.H., guides patients through the healthcare system from diagnosis through treatment. For more information, please contact Boehm at 860-224-5900, X6307.

Hospital names VP of Patient Care Services and chief nursing executive

Maureen Fitzsimmons, R.N., B.S.N., M.P.H., has been named vice president of Patient Care Services and chief nursing executive at The Hospital of Central Connecticut (HCC), effective June 28.

In this position, Fitzsimmons will be responsible for administrative and clinical operations for the Nursing Department at the hospital's New Britain General and Bradley Memorial campuses. She will oversee the inpatient nursing units, Emergency Department, Dialysis, IV Therapy, Maternal-Fetal Nursing, Respiratory Therapy, the Wound Care Center and various perioperative services, including the main Operating Room, Ambulatory Surgery, the Post-Anesthesia Care Unit and Endoscopy.

"We are pleased to welcome Ms. Fitzsimmons to The Hospital of Central Connecticut," said Clarence J. Silvia, HCC president and CEO. "A senior nurse executive with more than 30 years of experience in a wide variety of acute-care settings and consulting roles, she brings a wealth of professional experience, as well as strong nursing skills, to our hospital."

Fitzsimmons is currently vice president of Patient Care Services and chief nursing officer for Christ Hospital, Jersey City, N.J. Prior to joining Christ Hospital in 2006, she was a manager with BELSER Consulting, which provides various consulting services to healthcare providers.

She earned her bachelor's degree in nursing from William Paterson University, Wayne, N.J.; and her master's in public health from Columbia University, New York, N.Y. She is ANCC (American Nurses Credentialing Center)-certified in nursing administration.

Stroke program receives award

In recognition of its high quality stroke care, The Hospital of Central Connecticut (HCC) has received a Silver Performance Achievement Award through participation in Get With The GuidelinesSM, a nationwide quality improvement program for hospitals that focuses on stroke treatment.

The award from Get With The Guidelines, coordinated by the American Heart Association and American Stroke Association, signifies that HCC demonstrated 12 consecutive months of excellence in following patient care treatment guidelines for its stroke patients based on seven clinical core measures. The hospital's achievement will be recognized in an upcoming issue of *U.S. News and World Report* magazine.

"We are delighted that the Hospital of Central Connecticut has received national recognition for exemplary care of stroke patients," says Michael R. Grey, M.D., M.P.H., FACP, chief of Medicine. "This has been a true team effort combining the skills and dedication of our nurses, our physicians, our rehabilitation staff, and many others in the interdisciplinary care of this group of patients."

In 2007, the hospital joined Get With The Guidelines, which offers a Web-based system to regularly measure and evaluate its stroke patients' treatment. The seven core measures the Stroke Center focuses on are: early antithrombotic treatment, DVT prophylaxis, anticoagulation for atrial fibrillation, smoking cessation, tPA administration within three hours of symptom onset, antithrombotics and statins at discharge.

Last year, the Joint Commission awarded HCC advanced certification as a Primary Stroke Center. In 2008, the hospital was also designated a Primary Stroke Center by the Connecticut Department of Public Health.

Staff provide skills, expertise and compassion during mission trips

Two medical mission teams including Hospital of Central Connecticut staff members provided care to many residents of the Philippines and Haiti earlier this year, returning with stories of their missions.

During a winter medical mission in the Philippines, staff from the hospital and a local surgeon's practice treated dozens of patients, many with very serious injuries.

One 12-year-old boy affected them most deeply. He'd had an infection around his knee since age 3 or 4, and a hole from an earlier, unsuccessful attempt to drain it. By the time orthopedic surgeon Robert Belniak, M.D., saw him in February, his entire femur was infected.

Belniak removed the dead bone and drained the infection. But the boy needed blood and antibiotics that his mother couldn't afford; government-run Filipino hospitals require purchase of medication, equipment and supplies before treatment. "A bunch of us on the team gathered up some money and bought the blood and antibiotics. What was pocket change to us changed his life," says medical mission team mem-

ber Burnette Donato, a nurse anesthetist, Department of Anesthesia.

Donato and Belniak, who practices at Grove Hill Medical Center, spent Feb. 12-26 at Laguna provincial hospital in Santa Cruz, Philippines, along with certified surgical technician Patti Burns, Surgery; nurse anesthetist Kelly Gorski, Anesthesia; and Susan Benn, a surgical P.A., Grove Hill. The mission also included medical professionals from the New Haven area.

"The whole experience was eye-opening," Belniak says. "It made me very grateful to live in the U.S., where we have access to good health care and technology."

Hearts for Haiti

"Most of us have the sense that we shouldn't have left," says primary care physician Anthony Ciardella, M.D., part of a 10-member "Hearts for Haiti" team that returned from Haiti March 19, after embarking March 8 to care for victims of the Jan. 12 earthquake. "There was so much to do there. Realistically, we know we did what we could."

Ciardella, who practices in Southington, coordinated the trip through World Cares Center with support from ReadyResponders Network and Housing Works, Inc. Other team members from



Hearts for Haiti team members are (from left): Jonathan Torres, Patricia Alfieri, Anthony Ciardella, M.D., Brenda Jaramillo, Salena Devoe, Angela Torres, Ashley Dizon, Terry Kamens, Sarah Wells, and Deborah Ferretti.

HCC were Sarah Wells, P.A.; R.N.s Patricia Alfieri, Salena Devoe, Ashley Dizon, Brenda Jaramillo, Terry Kamens; and Angela Torres, a nurse technician. Torres' husband, Jonathan Torres, an emergency medical technician, who is not an HCC employee, was also on the team.

The team was split among two camps at Port-au-Prince, and another at Saint-Marc. They treated about 75 patients a day, caring for Haitians of all ages with a variety of illnesses that included hypertension, gastrointestinal ailments and typhoid fever.

Ferretti recalls twin boys, age 1 1/2, who had trouble breathing; one also had a broken femur. Since the twins needed more than breathing treatments, the family and team members went to a pediatric hospital, but were denied admission because they weren't sick enough.

Ferretti was inspired by the Haitians' strength and pride, adding they came to clinics wearing their best clothing. "Just to see how they were trying to hold on to normal life was really admirable."



Philippines medical mission team members are (from left): Kelly Gorski, Robert Belniak, M.D., Susan Benn, P.A., Patti Burns, and Burnette Donato.

NEWSnotes

Byrne a clinical instructor at UCONN. Hematologist/oncologist **Brian Byrne, M.D.**, has been named a clinical instructor in Medicine, University of Connecticut School of Medicine. In this role, he teaches residents at The Hospital of Central Connecticut during hematology and oncology rotation; participates in Hematology and Oncology blackboard sessions; and is a teaching attending for general medicine.

Finkelstein presents in Web Seminar. **Jeffrey Finkelstein, M.D.**, chief, Emergency Medicine, was a speaker for a March 16 web seminar, "Harnessing Business Intelligence to Innovate Emergency Departments." Finkelstein addressed the hospital's use of specialized business technology for on-demand information dashboards to help streamline patient care and ED functioning. HealthData Management presented the seminar.

Orthopedics leadership changes.



Richard L. Froeb, M.D., was recently named chief of the Division of Orthopedics, and **Robert Carangelo, M.D.**, was named medical director, Center for Joint Care.



Froeb earned his M.D. at the University of Illinois College of Medicine, and completed a residency in general surgery and orthopedics at Boston University. He is an assistant clinical professor at the University of Connecticut (UCONN) School of Medicine. Froeb is former medical director of the Center for Joint Care. Carangelo earned his M.D. at UCONN School of Medicine, and completed an orthopedics residency at UCONN Health Center; he completed a total joint surgery fellowship at New England Baptist Hospital and

Massachusetts General Hospital. Froeb and Carangelo have been HCC medical staff members for 32 and 12 years, respectively. They practice at Orthopedic Surgeons of Central Connecticut, P.C., 860-223-8553.

Girouard presents poster. David L. Girouard, MPH, R.Ph., director of Pharmacy, presented the poster "Utilizing Computer Systems To Ensure A Safe Medication Bar-coding System," at The unSUMMIT for Bedside Barcoding conference held early May in Atlanta. The poster addressed the hospital's adaptation of Cerner software that supports a highly accurate system for bar-code verification and checking.

Treadwell named to leadership positions.



Joseph Treadwell, D.P.M., was recently named chief of the Division of Podiatry. At HCC, he's also site director for the Yale Podiatric Surgical Residency Program. In addition, Treadwell was installed as president of the Connecticut Podiatric Medical Association for a one-year term during the association's 2010 Symposium in March at Mohegan Sun. Treadwell is current secretary of the American Board of Podiatric Surgery. He has also written two chapters, "Surgery on the Rheumatoid Ankle" and "Total Ankle Replacement in the Rheumatoid Patient" for the April edition of *Clinics in Podiatric Medicine and Surgery*. Treadwell earned his D.P.M. at Temple University School of Podiatric Medicine, Philadelphia, and completed a podiatric residency at Oakwood Downriver Medical Center, Lincoln, Mich. He practices at Foot and Ankle Specialists of Connecticut, P.C., in Plainville (860-747-2200) and Danbury (203-748-2220).

HCC and Genomas present at annual meeting. In March, HCC and Genomas Inc. staff presented an abstract and poster related to thiazolidinedione



(TZD) therapy at the American College of Cardiology's annual meeting in Atlanta. The presentation, Physiogenomic Contour of Thiazolidinedione Efficacy and Safety, was made by study co-authors **Steven D. Hanks, M.D.**, MMM, FACP, FFSMB, executive vice president and chief medical officer; HCC endocrinologist **James Bernene, M.D.**; and lead author **Ruano Gualberto, M.D., Ph.D.**, president and CEO, Genomas, Inc. (pictured at right with Hanks). This is the second study aimed at helping create a DNA-guided system to help in selecting the appropriate diabetes medication for a particular patient. This new study examined the link of HbA1c lowering to weight gain/edema, and involved patients at the Joslin Diabetes Center Affiliate at HCC treated with the TZD drugs pioglitazone (Actos®) or rosiglitazone (Avandia®). Other study co-authors are from Hartford Hospital and Yale University School of Medicine.

Employee Health offers free Tdap vaccine. Employee Health is now offering free Tdap (tetanus, diphtheria and acellular pertussis) vaccine to all hospital healthcare providers, including medical staff members. Providers due for their tetanus boosters should get the Tdap vaccine. The vaccine contains the pertussis component in addition to diphtheria and tetanus. It is the first vaccine for adolescents and adults that protects against all three diseases and can be administered as early as two years after the last tetanus booster. The CDC recommends Tdap vaccine for adolescents and all adults ages 19-64, replacing the next Td booster. For more information, please call Employee Health at 860-224-5446.

New Medical Staff appointments announced

Julie Gershon, M.D.



Radiology

Practice: Mandell & Blau, MDs, PC, at Imaging Center of West Hartford, 65 Memorial Road, Suite 510, West

Hartford, 860-236-6517; Buckland Hills Imaging, 491 Buckland Road, South Windsor, 860-644-6667

Education: Baylor College of Medicine, Houston; radiology residency, Jackson Memorial Hospital, Miami. Gershon has been in practice 13 years.

Justin Lundbye, M.D.



Cardiology

Practice: The Hospital of Central Connecticut Division of Cardiology, 860-224-5274; 80 Seymour St., Hartford

Education: Ross University School of Medicine, West Indies; internal medicine internship and residency, University of Connecticut; cardiology fellowship, Hartford Hospital.

James Nugent, D.P.M.



Podiatry

Practice: Connecticut Surgical Group, 1 Liberty Square, New Britain, 860-229-2807

Education: Pennsylvania

College of Podiatric Medicine (now Temple University School of Podiatric Medicine), Philadelphia; residency, Saint Joseph's Hospital, Philadelphia. He has been in practice 22 years.

Natalee Sansone, M.D.



Gastroenterology

Practice: Grove Hill Medical Center, 300 Kensington Ave., New Britain, 860-224-6249

Education: MCP

Hahnemann School of Medicine (now Drexel University College of Medicine), Philadelphia; internal medicine residency and gastroenterology fellowship, New York Hospital Queens, Flushing, N.Y.

Ulysses Wu, M.D.



Infectious Diseases

Practice: The Hospital of Central Connecticut, Department of Medicine/Infectious Diseases, 860-224-5510

Education: Jefferson Medical College, Philadelphia; internal medicine internship and residency, Christiana Care Health System, Newark, Del. (formerly known as Medical Center of Delaware); chief medical resident, internal medicine, Mercy Hospital and Medical Center, Chicago; infectious diseases fellowship, Rush University, Chicago.

Upcoming American Red Cross blood drives at HCC. A hospital blood drive will be held Tuesday, June 28 in Lecture Room 1 from 6 a.m. to 3:30 p.m.

Community drives are set for Saturday, June 19, July 10 and Aug. 14 in Lecture Rooms 1 and 2, from 6 a.m. to 3:30 p.m. To sign up for a blood drive or learn of other American Red Cross blood drive locations, go to www.RedCrossBlood.org or call 1-800-RED CROSS. Donor requirements include that one must be at least 17 years old and weight at least 110 pounds. Donors must allow 56 days between donations. For information about donor eligibility, please call 1-866-236-3276, option # 2.

Specialties collaborate for MI pituitary tumor surgery. Otolaryngology and Neurosurgery are teaming to conduct minimally invasive (MI) surgery to remove pituitary tumors. During surgery, an otolaryngologist uses image-guided surgery to create an opening in the sinus using only small scopes placed through the nose, enabling easier access for tumor removal by the neurosurgeon. With the traditionally more invasive approach, the neurosurgeon accesses the tumor at the brain's base through the skull, nose, or under the lip. The MI approach, available at HCC for about three years, means a shorter inpatient stay, at about two to four days, and reduced post-operative pain. "From our standpoint, the access is much easier

and more patient friendly," says otolaryngologist George A. Melnik, M.D. Ahmed Khan, M.D., chief of Neurosurgery, notes that HCC neurosurgeons also collaborate with staff endocrinologists for surgical treatment plans, and that Novalis® radiosurgery at HCC may be another treatment option.

Golf tournament June 8. The Hospital of Central Connecticut Auxiliaries at Bradley Memorial and New Britain General's 20th Annual Golf Tournament is Tuesday, June 8 at the Tunxis Plantation Country Club, Farmington. Shotgun start is 11:30 a.m. The event will raise money for development of a comprehensive breast center. Call 860-224-5567 for information.

Joslin Center expanding into Southington, Farmington

To better serve area residents, The Joslin Diabetes Center Affiliate at The



Joslin Diabetes Center
Affiliate at The Hospital of Central Connecticut

Hospital of Central Connecticut is expanding its services with a new office now open in Southington and another planned for Farmington.

In early May, the Joslin Center opened an office at the hospital's Bradley Memorial campus, 3rd floor, in Southington. An open house at that office will be held 2 to 4:30 p.m. Friday, June 11 for HCC staff and the public. A third Joslin Center office is scheduled to open Oct. 1 at 11 South St., Farmington.

"Clearly there is a growing population of people with diabetes," says Latha Dulipsingh, M.D., FACP, FACE, medical director of the Joslin Affiliate at HCC. "The new locations will provide comprehensive diabetes care for a larger footprint."

At each new Joslin Center location, an endocrinologist will see patients by physician referral and appointment. The Bradley Memorial campus office is open 8:30 a.m. to 4:30 p.m. Tuesdays and staffed by endocrinologist Manmeet Kaur, M.D.; office phone number is 860-224-5672. The Farmington office will be open 9 a.m. to 5 p.m. Wednesdays and staffed by endocrinologist Priya Phulwani, M.D.

In addition, a diabetes educator is available on Tuesdays 10 a.m. to 2 p.m. (7:30 a.m. to 5 p.m. starting July 6) at the Bradley Memorial campus by appointment for individual consultations. Group classes focusing on comprehensive diabetes management will be offered at the Farmington location.

For more information about The Joslin Diabetes Center Affiliate at HCC, please call 1-888-4Joslin (1-888-456-7546).

Lundbye to lead Cardiology

Cardiologist Justin Lundbye, M.D., FACC, has been named director, Division of Cardiology, effective July 1.

He joined the hospital in early April and will assume the role held by cardiologist Milton J. Sands, M.D., who is retiring next month.

Lundbye is also on staff at Hartford Hospital where he is director of inpatient cardiology services and the cardiology hospitalist program; medical director, cardiac intensive care unit; and associate director, cardiology fellowship program.

Among his goals for HCC's cardiology program are working with staff members to develop a cardiac PET imaging program to evaluate for ischemic heart disease; and create outpatient clinics for complex arrhythmias and lipid disorders.

Lundbye earned his M.D. at Ross University School of Medicine, West Indies. He completed an internal medicine internship and residency at the University of Connecticut (UCONN); and a cardiology fellowship at Hartford Hospital. He specializes in non-invasive cardiology, namely echocardiography, nuclear PET, CT angiography, critical care, and therapeutic hypothermia.

Lundbye is also an assistant professor of medicine, UCONN School of Medicine, and a member of several professional societies, including the American College of Cardiology. He can be reached at 860-224-5274 or jlundbye@thocc.org.

Make the link tip

In April, the hospital's Clinical Documentation Program, Make the link, marked its one-year anniversary toward helping physicians use terminology truly reflective of the patient's illness severity and mortality risks. Since the program began, HCC's overall case mix index (CMI) has gone from 1.32 (April to June 2009) to 1.5 (April 2010). A hospital's CMI reflects the patient population's acuity. Hospitals with lower CMIs and higher mortality rates appear to do poorly in medical management of patients not clinically complex, according to Brenda Robertson, director of Patient Care Coordination. In reality, she says, the issue is often not poor medical management, but poor documentation that hasn't adequately captured a patient's complications and comorbidities.



ties. Here's a tip to further help increase accuracy of your patients' clinical complexity:

Urosepsis

DX:

"Urosepsis" codes out to "simple UTI"

Link it!

Sepsis due to

- Urinary source
- UTI
- Chronic indwelling foley

A clinical documentation specialist can help you document the "clinical complexity" to assure accurate SOI and ROM reflection. For documentation assistance, available 7:30 a.m. to 3 p.m. weekdays, call 860-224-5900 to speak with clinical documentation specialist R.N.s Janet Colasanto (x2169), Gale Mihalakos (x2170), or Maryanne Shanley (x2168).

Pharmacy and Therapeutics Committee update

By David L. Girouard, MPH, R.Ph., director of Pharmacy

Formulary decisions based on safety, efficacy, cost

The Pharmacy and Therapeutics Committee is charged with evaluating all aspects of our medication-use system and the process begins with deciding which medications are contained in our Formulary. The evaluation process can be quite involved but the decision to include a drug on the Formulary boils down to evaluation of safety, efficacy and cost. Safety is the first hurdle and if a medication's risks outweigh its benefits then it will not be added to the Formulary. Likewise, medications added to the Formulary must have sound evidence of efficacy. Lastly, the Committee evaluates the financial impact to the hospital. The P&T Committee strives to look at the "big picture" and not just the impact to the pharmacy budget. An expensive medication could actually reduce costs in the end if, for example, length of stay could be decreased.

FDA warns of potential drug interaction

Some published reports have implicated

Formulary changes

The following additions are from the January and February 2010 Pharmacy and Therapeutics Committee meetings.

ADDITIONS

Medication	Use
Lidocaine/tetracaine transdermal patch (Synera®)	Local anesthetic for pediatrics in the Emergency Department
Bendamustine (Treanda®)	Chronic lymphoid leukemia, non-Hodgkin's lymphoma
Raltegravir (Isentress®)	HIV infection
Efavirenz/emtricitabine/tenofovir (Atripla®)	HIV infection
Paliperidone (Invega®)	Schizophrenia

proton pump inhibitors (PPIs), most notably omeprazole (Prilosec®), as inhibiting the metabolism of clopidogrel (Plavix®) to its bioactive form. The interaction is believed to be via the CYP 2C19 hepatic enzyme. This effect may prevent clopidogrel from exerting its antiplatelet effect, ultimately eliminating its cardioprotective benefits.

Presently, evidence is conflicting regarding cardiovascular mortality/morbidity related to this interaction. A new Cerner alert warns the pharmacist of this potential interaction. The automatic interchange protocol was modified such that a patient taking clopidogrel would be switched to a non-interacting proton pump inhibitor.

Renovated Special Procedures Unit unveiled



Staff with the Bradley Memorial campus Special Procedures Unit (SPU) showed off their newly renovated space at a March 11 open house. Pictured are SPU staff member Jeanne Gauvin, R.N., and pulmonologist Curtland Brown, M.D. The unit, which offers several same-day medical and gastrointestinal procedures, was renovated to provide more space and a fresh, new look and now includes a third procedure room and third recovery area. With the renovation, patients have more scheduling options for procedures and treatment. Among procedures offered on the unit are gastrointestinal, including endoscopy, colonoscopy, and Bravo acid reflux testing; as well as same-day medical services, including medication injection and IV administration, IV catheter maintenance, therapeutic phlebotomy; and bronchoscopy and minor surgical procedures.

Upcoming physician communiqués

To help improve hospital communications to Medical Staff members, here's a schedule indicating when events and other communiqués are expected.

June 28; July 26	Staff Executive Committee proceedings
Aug. 6	<i>Central Line</i> distributed
Sept. 2	Quarterly Medical Staff meeting, 7:45 a.m., Cafeteria

centralline

Central Line is a **bimonthly publication** for the medical staff of The Hospital of Central Connecticut. To send information, story suggestions or comments, please contact Kimberly Gensicki at kgensicki@thocc.org; (860) 224-5900 x6507; or via fax at (860) 224-5779.

New test among lab updates

Among lab updates, the department now offers a serum insulin level test:

- **Serum insulin level test.** The New Britain General campus now offers in-house serum insulin level testing for evaluation of diabetic disorders and related metabolic diseases like metabolic syndrome. Reference range is 4-25 uIU/mL. The test is performed Mondays, Wednesdays and Fridays with a 24-48-hour turnaround time. CPT Code is 83525.

- **Preoperative type and screen specimens reminder.** Preoperative type and screen specimens are valid up to 14 days before surgery, provided the patient has not been pregnant or transfused in the past three months and appropriate documentation is obtained. This is an extension of the 8-day limit formerly allowed. Specimens will be kept until 7 a.m. on the second day after surgery.

- **C. difficile toxin.** Effective March 4, all stool specimens submitted to the laboratory for *C. difficile* toxin testing will be tested by polymerase chain reaction (PCR) assay. Turnaround time will be less than 24 hours. Collection and transport of individual samples will not change. However, only one sample will be accepted per 72-hour period; formed stool samples will not be accepted; and end-of-therapy specimens should not be submitted. *C. difficile* cytotoxicity testing remains available as a mail-out test.

For more information, please contact Barry Jacobs, M.D., chief of Pathology, at 860-224-5584 or bjacobs@thocc.org.

at New Britain General and Bradley Memorial

The Hospital of
Central Connecticut



IMPORTANT NEWS
FOR OUR PHYSICIANS

100 GRAND STREET, NEW BRITAIN, CT 06050

A PUBLICATION FOR THE MEDICAL STAFF OF
THE HOSPITAL OF CENTRAL CONNECTICUT

centralline

NONPROFIT ORG
US POSTAGE
PAID
NEW BRITAIN CT
PERMIT NO. 905