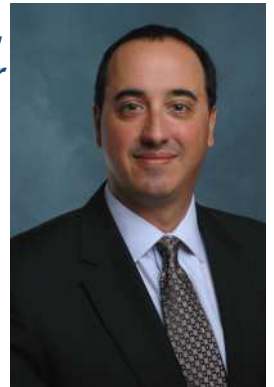




## **Epic Goes Live!**

*Dr. Richard Paula,  
TGH Chief Medical Informatics Officer*



Tampa General successfully transitioned to our new EMR on October 1. It is never easy to embrace change, especially on a massive scale. The contribution by the medical staff was invaluable in making this happen. We are now “live” in: pharmacy, all inpatient units, Emergency Department, outpatient surgery, rehab, infusion center, radiology, scheduling, billing, and all of Tampa General Medical Group. Heard from Epic and some of our consultants who have been through other hospital implementations: “I have never seen a medical staff so engaged” and “It is amazing how many physicians completed training prior to go-live”.

As you would expect we encountered a number of bugs immediately after the go-live, these are being addressed in methodical fashion. Those of you who contacted the help desk should receive personal emails describing the solution, or contact from our staff. Particular items we are working with the medical staff on improving:

- **Streamlining transitions between different levels of care such as OR, ICU, etc**
- **Making Order/Med Reconciliation faster and easier**
- **Increasing patient information available on face sheet to expedite professional billing**

The physician command center will remain open through the end of the month and have staff available between 7am -7pm, as well as individuals on call 24hrs. Over the next weeks we will move from general technical support, to optimizing the provider experience. Our goal is to address as many aspects of the physician’s interactions with the EMR. I encourage you to stop in the command center or call 844-3000, we can help individuals build progress notes, post op notes and assist with pre-op ordering. We can follow individuals on rounds, or make appointments for private sessions with attention to specific items. Last note, please visit: [physician.tgh.org](http://physician.tgh.org). We have uploaded over 20 tip sheets directed at particular questions about Epic and there is also a general feedback section.



## Baker Act Update

Jamie Fernandez, M.D.  
Assistant Professor, Department of Psychiatry and Neuroscience  
University of South Florida

On June 12, 2011, Tampa General Hospital rescinded its status as a Baker Act receiving facility. While this means that we no longer have the ability to hold medically stable Baker Act patients, it has not changed our responsibility to place a Baker Act on any patient who is deemed a danger to themselves, a danger to others, or in danger of severe neglect as defined under the Baker Act.<sup>1</sup> It is important that the Baker Act only be used in situations where the person has a mental illness. It should not be used when a patient's behavior is altered secondary to an acute medical condition (ie. encephalopathy) or intoxication.

Because TGH will continue to admit and stabilize all patients in need of medical treatment, patients held under a Baker Act will continue to be present on medical and surgical units around the hospital. If a patient is admitted on a Baker Act or requires its placement, every effort must be made to keep them, other patients, and staff safe. This will require, at a minimum, video observation, with further precautions as indicated by the patient's behavior and symptomatology.

A Baker Act is the only legal means available by which to prevent a mentally ill patient from leaving the hospital.

Any physician has the ability to place a patient on a Baker Act, including resident physicians. In order to do so, the physician must execute a certificate stating that they have examined the patient in the preceding 48 hours and that the person appears to meet criteria for involuntary examination. This form is available hospital-wide and is known as the BA-52. After placing a patient on a Baker Act, please enter order in EPIC, give the form to staff for scanning, and consult TGH social work at 610-8666 so that they may track the patient and initiate disposition planning.

The USF Psychiatry consultation service is available to assist in the management of these patients and can be contacted at 844-7545. After hours and on weekends, the on-call physician can be paged by calling 974-2201.

Often the consultation team will be able to initiate treatment for an acutely ill psychiatric patient while he/she undergoes medical stabilization. This may enable discharge with outpatient follow-up by the time they are medically cleared or stabilized to the point that transfer to the voluntary psychiatric unit (7F) is appropriate.

Please note that the 72 hour timeframe on the BA-52 begins when medical clearance has been documented in the orders section of the chart. If at that time, the patient continues to meet Baker Act criteria, is not appropriate for transfer to 7F, or lacks capacity to voluntarily consent, he/she will be transferred to a local Baker Act receiving facility. Every attempt will be made for social work to do so within 12 hours. In-house social work can be reached at 610-8666.

Lastly, there may be patients on your service who do not require the placement of a Baker Act but are in need of further psychiatric care. Consultation with psychiatry may be able to facilitate transfer of these patients to the voluntary psychiatric inpatient unit on 7F where they can receive continued care.

**1. 2011 Baker Act Handbook: The Florida Mental Health Act User Reference Guide. Produced by: Florida Department of Children and Families Mental Health Program.**

## TGH Annual Medical Staff Meeting

Chuck Bombard, Director Quality Improvement



**Dr. Thomas Bernasek,  
Chief of Staff**

The TGH Annual Medical Staff Meeting was held September 21, 2011 at the Hyatt Regency Hotel. Dr. Thomas Bernasek, Chief of Staff, presided over the evening's agenda. Annual reports were given by Mr. James Warren, Chairman of the TGH Board, Mr. Rick Kouwe, Chairman of the TGH Foundation, Dr. Robert Belsole, USF Vice Dean for Clinical Affairs, and TGH CEO Ron Hytoff. Dr. Bernasek delivered the Chief of Staff address and Dr. Dev Mangar, Past Chief of Staff, presented the changes to the Bylaws and Medical Staff Rules and Regulations. The keynote speaker was Wayne Sotile, PhD, whose presentation "From Risk to Physician Resilience: Practice Strategies that Work" was well received by the audience.



**Wayne Sotile, PhD  
Keynote Speaker**

Years of Service Recognition was afforded to those with 5, 10, 15, 20 and greater years of service. Of note were the 35 year recipients: Dr. William Branch, Dr. N.D. Castellano, and Dr. Rodolfo Eichberg. Dr. Phillip Andersen was recognized for 40 years of service, and Drs. Peter O. Knight and Domenick Reina for 45 years of service.

Since elections for medical staff officers were held last year, there were no elections held this year. The meeting concluded with a raffle drawing for 40 I-Pads.





# Patient Satisfaction!



## WHAT IS HCAHPS?

(Hospital Consumer Assessment of Healthcare Providers and Systems)



Inpatient survey created by CMS and AHRQ—Mandatory for hospitals receiving Medicare Reimbursement



Measures patients' perception of their hospital experience



Results of HCAHPS are publicly reported on the Hospital Compare website



Counts as 30% of Value Based Purchasing (VBP) program



Only Top-Box answers count (Always or Yes)



### Physician Questions asked on the survey:



1. During this hospital stay, how often did doctors treat you with courtesy and respect?
2. During this hospital stay, how often did doctors listen to you?
3. During this hospital stay, how often did doctors explain things in a way you could understand?



### Answer choices:



Always (only response that counts!)



Usually



Sometimes



Never





WE'RE ON THE WEB  
WWW.TGH.ORG

## TGH Welcomes our new Physicians



The physicians below were added to TGH staff: 9/30/2011

Salim A. Afridi, MD	Surgery/Urology
Andrew S. Breitberg, MD	Internal Medicine/Hospital Medicine
Angelica Brozyna, PhD	Psychiatry/Psychology
Grace A. Freire, MD	Pediatrics
Matthew T. Hartlage, MD	Internal Medicine/Hospital Medicine
Francisco H. Itriago, MD	Surgery//General Surgery
Elizabeth H. Jacobs, PhD	Psychiatry/Psychology
Stephanie L. Kokseng, MD	Internal Medicine/Hospital Medicine
Ian K. Musgrave, MD	Internal Medicine/Hospital Medicine
David Z. Rose, MD	Neurology
Vic Velanovich, MD	Surgery/General Surgery
Jennifer M. White, MD	Psychiatry

### **KUDOS TO OUR PHYSICIANS!**

**Congratulations to the following physicians who were recognized by their patients in the form of personal letters to TGH leadership.**

**Dr. Junaid Ahmed, Dr. Dennis F. Bandyk, Dr. Peter J. Berman, Dr. Raviendar Bukkapatnam,  
Dr. Christiano C. Caldiera, Dr. Guillermo Cintron, Dr. Bengt Herweg,  
Dr. Debbie A. Rinde-Hoffman, Dr. Kristin Kronsoble, Dr. Siva Kumar, Dr. Devanand Mangar,  
Dr. Veronica Massey, Dr. Dimitry Novitzky, Dr. Scott S. Ubillos,  
Dr. Samuel S. Weinstein, Dr. Mark W. Weston,  
Dr. Maria Carmen Wilson, and Dr. Nina Tsakadze**



This newsletter is produced by Tampa General Hospital's Quality Improvement Department.

All comments, responses or suggestions are welcome and should be directed to:

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