

YALE HEALTH CARE

news from Yale Health
fall 2011

Celebrating 40 Years
Dr. Moreson Kaplan Reflects
New Babies (and Clinicians)



COLDS AND FLU

WOMEN'S PREVENTIVE CARE

DIAGNOSING DEPRESSION



Yale Health Celebrates 40 Years of Innovation

From humble beginnings on Hillhouse Avenue to a state-of-the-art Lock Street facility, Yale Health has been a medical home to countless members of the Yale family

Above, left: Our original home at 17 Hillhouse Avenue, 1971; right, Yale Health Center at 55 Lock Street, 2010.

DR. MORESON KAPLAN REMEMBERS VIVIDLY the first day of the Yale Health Plan, 40 years ago, in July 1971. After all of the careful planning leading up to the opening, things weren't quite ready.

On the first day the eager staff walked into a construction zone — sawhorses, plywood boards and a work crew. "The director said 'What are you doing?' A workman responded 'It's Thursday. We thought you were opening next Monday,'" Kaplan recalled with a laugh.

Despite that minor misstep on the first day, Yale Health has been more successful than the planners could have possibly imagined. The organization began with 5,000 members. Within the first year 15,000 people joined the plan. "It was an incredibly exciting time," Kaplan said. "We had no idea it would grow so rapidly." Forty years later, Yale Health continues to grow and currently enrolls a much larger percentage of eligible employees than comparable organizations.

The objective for Kaplan and his colleagues was to develop an entirely new concept of university health care, using the model of prepaid group practice to provide care to students, employees and their families.



**CELEBRATING
40 YEARS OF SERVICE**

FORTY YEARS CONTINUED ON NEXT PAGE

FORTY YEARS CONTINUED FROM PREVIOUS PAGE

Similar group practices had some traction on the West Coast and in the Midwest, but no university had attempted a model of care like this one.

The result was the first comprehensive, prepaid medical care program in the country offered to an entire university community. “This was a totally new model,” said Kaplan, who recently retired after spending the bulk of his career at Yale Health.

PATIENTS REMAIN AT THE CENTER OF YALE HEALTH

The future is a bright one. Dr. Paul Genecin, director of Yale Health since 1997, praised the university for its support, allowing the plan to grow both in membership and in the range of services it provides. “Looking forward, I see both continued dedication to our heritage and the excitement of innovation occurring simultaneously,” he said. “We are in a very vital and healthy place.”

Over time, many things have changed. But, the doctor-patient relationship continues to be at the heart of what makes Yale Health so successful. “The care of our patients is predicated on a strong relationship with their primary care clinicians. This relationship is central to our philosophy that keeping our members healthy—with preventive care and wellness programs—is as important as taking good care of them when they are ill,” said Genecin, who has worked at Yale Health since 1989.

“We have the very best doctors, nurse practitioners and physician assistants in the area,” Kaplan said. “The fact that someone can come to Yale Health Center with a relatively urgent situation and get everything done here amazes me.”

In the future, there will be even further emphasis on prevention. Routine visits with a clinician will be comprehensive opportunities to schedule screenings and tests for various chronic disorders, such as cancer and glaucoma. “Our goal is that

through our preventive efforts, we can improve patients’ health to the point that we will rarely see anyone with treatable or preventable diseases,” Genecin said.

Yale Health’s state-of-the-art electronic medical data systems allow clinicians to identify wide-reaching trends in the overall Yale community. Chronic problems, such as high blood pressure, hypertension, high cholesterol and diabetes, can be managed on both a large scale and on the intense personal level for which Yale Health is known. Access to this level of information gives Yale Health clinicians yet another way to emphasize prevention.

Genecin said that Yale Health is committed to patient-centered care, and to improving its culture of service excellence, whether patients call or come to its Lock Street home. “We want our patients to have a consistent and excellent experience across the entire system,” Genecin said. “We are constantly looking at what we do and finding ways to do it better.”

1971 seems a long time ago. Technology improves. Faces change. Yale University evolves, as does the city that it calls home. But the fundamental precepts of Yale Health—comprehensive, excellent care by the top medical professionals in the field—still hold true, from the first day the director chased workmen out of the lobby to make way for patients, to the present day. “This is a very inspiring organization. We have the most diverse and interesting patient population you can imagine,” Genecin said. “We have strong partnerships with experts and specialists in all fields of medicine. We are in the forefront of the most recent medical developments. This is the promise of the model when it was implemented 40 years ago—consistent and excellent experiences across the entire system.”

Reflecting on his 40 years with the organization, Kaplan said that it is first and foremost about the patients who make up “the unique and wonderful community to which we are dedicated.”



Briefs



Ten Nurses Promoted

The RCAP Program recognizes clinical excellence and provides an opportunity for registered nurses employed by Yale Health, to be honored for the quality of their nursing practice.

In May 2011, 10 nurses completed the portfolio requirements for advancement through the Yale Health Clinical Ladder. In June, the Recognition and Clinical Advancement Program (RCAP) Board met to review each candidate’s portfolio and qualifications. On July 29th, 10 nurses were awarded certificates denoting their promotion to the level of Clinical Nurse II:

Fran Batesole, RN, CN II
 Donna Ann Brennan, RN, BSN, CN II
 Elizabeth Donovan, RN, BSN, CN II
 Catherine Di Giorgi, RN, CN II
 Jill Garofalo, RN, ADN, CN II
 Michel Gusmano, RN, BSN, CN II
 Lilwatie Kaydhar-Finkelstein, RN, BSN, CN II
 Barbara Milazzo, RN, ADN, CN II
 Myunghee Shim, RN, MSN, CN II
 Susan Walkley, RN, ADN, CN II



Pharmacy Hours

	OPEN	CLOSE
Monday	8:00 am	6:30 pm
Tuesday	8:00 am	7:00 pm
Wednesday	8:00 am	7:00 pm
Thursday	8:30 am	6:30 pm
Friday	8:00 am	6:30 pm
Saturday	8:30 am	3:30 pm

Kaplan Reflects on Over 40 Years of Service to the Yale Community

Dr. Moreson Kaplan, 77, recently announced his retirement after a distinguished career at Yale as a clinician, teacher and administrator dating back to 1967. Kaplan recently reflected on his long tenure at Yale Health, his medical career as a whole and his future plans.

After growing up in Great Neck, New York, Kaplan graduated from Oberlin College with a sociology degree, and attended Columbia University for graduate studies in sociology. He received his medical degree from the Albert Einstein College of Medicine. Kaplan also served in the U.S. Army medical corps from 1965 to 1967, stationed in Japan where he took care of military evacuees from Vietnam with medical problems such as malaria, hepatitis, and ulcers.

Why did you choose to enter the medical profession?

It's a long story how I got to be a doctor. I didn't go right from college. I was in advertising for five years in New York City. In the fourth year, I decided I could do medical school, took the prerequisite courses at night, applied and was accepted. Although I initially went to medical school to become a psychiatrist, immediately after I started my clinical years I found that I loved biological medicine and realized that being an internist was what I wanted to do.

How would you describe yourself as a clinician?

I am very patient-oriented. I am confident. I have a fairly good knowledge of medicine but I am pragmatic. When I see a patient, if I have a good idea about what is wrong, I will treat based on my instincts and then follow that patient closely. If the problem does not improve, I will then think about different ways to go after it. I am flexible, so I can change my mind if things don't go as quickly



as needed. This has paid dividends in terms of my ability to take care of a very large number of patients.

“Even in crises where we couldn't treat the disease, we were able to treat the patient.”

What are you most proud of in your career?

I think I am most proud of my personal relationships within Yale Health, including with my colleagues, all of the people I worked with, and the support staff. My interactions with them have been tremendously satisfying. I am pleased that I have been able to take care of so many people and different illnesses. I've been able to help in many ways. Even in crises where we couldn't treat the disease, we were able to treat the patient.

What do you plan to do with your retirement?

I plan to travel a lot. Already, since I retired on June 22nd, I have been to Costa Rica, Cape Cod, Chicago, Wisconsin, and upstate New York with my wife, Nina Adams. I will have more time to spend with my daughter and son, Julie and Michael, and their four children. I've been given an office at Yale Health Center, so I do plan to be around. I also plan on taking classes at the University. I am currently attending the DeVane Lectures on the morality of everyday life and also a bioethics seminar. I plan to audit at least one course every semester. My wife is very seriously into film and I am the beneficiary of that. I get to see what she likes and what she wants me to see. Theater is another passion. In New Haven we go to Yale Repertory, Long Wharf, and Yale Cabaret and in New York we subscribe to four other theaters. We see some 30 or more shows a year. In retirement it is my intention to write a memoir. There are many stories I can tell. And no, I don't have a title just yet.

New Babies (and Clinicians) Abound in Pediatrics

With three new staff members and clear plans for the future, the department is poised to enter a new era of productivity and stability



Elise DeMayo and her daughter Elisabeth Alden hold Alden's twin boys, Caiden and Connor.

YALE UNIVERSITY HAS UNDERGONE its own microscopic baby boom over the last several months, with the number of babies born increasing by about 50 percent.

As any parent who has ever stayed awake with a crying newborn can tell you, babies require a lot of time and energy. Thanks to Yale Health's comprehensive system of newborn care, each baby has seven scheduled visits in their first year, dealing with developmental as well as parenting issues. This means an additional 1,500 visits annually in the Pediatric Department. The Pediatric staff, now boasting three new members (see page 6), has found ways to tackle Yale's baby boom while not sacrificing the care for which the department has been known.

"It is a very rigorous process to find the right kind of candidate to join the department," said Dr. Paul Genecin, director of Yale Health. "The person has to be someone who works exceedingly well with patients, with the team members in their department, stays current on constantly evolving standards of care and has a commitment to the quality of care we provide. Our new clinicians are all people who are passionate about health care for kids."

"This has been a transformative period in the history of this department," Dr. Douglas Idelson, chief of Pediatrics, said. "We are

undergoing a revitalization ... in the next year we will be completing and solidifying all of our transitions and changes. These changes signal our continued commitment to quality and are a real nod towards comprehensive pediatric care."

In the midst of change and the tidal wave of new births, the department continues to boast areas of success. These include lactation support for new mothers and a strong nurse triage group. The nurses assist parents over the phone, allowing for an additional level of convenience. The department's immunization rates are among the best in the nation, falling in the 91st percentile among similar facilities. "This is one of the most important things we do in terms of preventive care," Idelson said.

"The focus of the department going forward is preventing the problems that have become epidemic in our country—obesity, metabolic syndrome, high blood pressure, cholesterol and diabetes. These problems are endemic and they are starting in childhood," Genecin said.

Like the babies in their care, Pediatrics is constantly growing and evolving. "We have high expectations for ourselves and we want to hear feedback from our membership on what things we are doing well and the things we can improve," Idelson said.

Part of the Family

Pediatric clinician's special relationship grows by two

Dr. JoAnne Burger fondly remembers working with Elise DeMayo in the Pediatric Department years ago. She treated DeMayo's daughter, Elisabeth Alden, as a patient when Alden was a teenager.

And she'll certainly never forget the feeling she had of being there right after Alden's twin boys were born.

"It felt very different for me," Burger said of her relationship with three generations of the family. "It was very exciting to see someone who I had as a patient turn into a mother."



Dr. JoAnne Burger

Burger, a Yale Health clinician since 1993, was on call when Alden gave birth to Caiden and Connor on August 3rd. She was in the delivery room just moments after they were born.

"It was great," said Alden, an associate event planner for marketing and community development in Yale University's Office of Development. "I hadn't seen her in a long time so it was nice to see her as the one coming into the room."

"It was special that she got to be the first doctor who got to see them," said DeMayo, LPN, who now works in the Allergy & Immunization Department. "It was nice to see a friendly face."

For Burger, it was like she was part of the newly expanded family.

"I don't have any grandchildren yet," she said. "I felt like I had this grandmotherly relationship when I was in that room."



With all
of the changes,
patient care
has remained
the core of
what we do.

FROM THE DESK OF PAUL GENECCIN, MD

Anniversaries and other milestones are on my mind. Yale Health has its 40th anniversary in 2011 and I suddenly find that I am being photographed for my own quarter-century of service at Yale. For nearly 15 of those years I have been director of Yale Health. When I reflect that I came to work as an internist at 17 Hillhouse in my early 30's, without any gray hair, and only planning to stay for a year, I feel fortunate that things have worked out the way they have. **Even after all these years, I cannot think of a professional career or a healthcare setting that I would prefer.**

I cannot speak firsthand about the earliest days when Yale Health Plan was a bold experiment in health care delivery, but my memories do take me back to the late 1980's — eons ago in the fast developing healthcare field. **Back then, Yale Health Plan was principally a group medical practice providing office visits to faculty, staff and students. Yale Health has grown steadily in membership, so the scale of everything is bigger than it was in the 1980's.** We have added clinical services and behind-the-scenes departments, such as Care Coordination, Performance Management and Population Health, all of which contribute directly and importantly to our patient care mission.

Today, in our state-of-the-art building, the organization would be almost unrecognizable with its advanced imaging facilities, procedure spaces, electronic health record, multiple state licenses, Joint Commission Accreditation — and with Patient-Centered Medical Home recognition on the immediate horizon. **Our Leadership in Energy and Environmental Design (LEED) gold certification shows that Yale Health is on the forefront of the green building movement.**

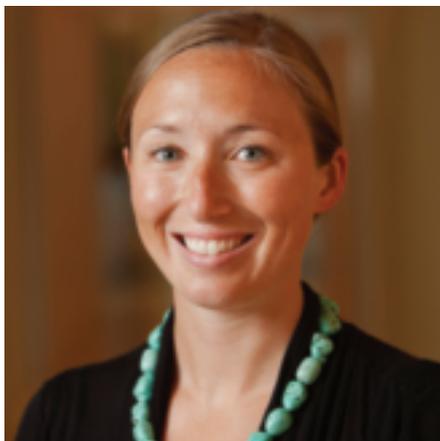
With all of the changes, direct patient care has remained the core of what we do. The relationship between the primary clinician and his/her patients is as important as it ever was, even as the number of clinical services, medications, tests and communications has grown tremendously in scale and complexity.

At Yale Health's 40-year mark, the task before us is to find ways to better integrate the diverse services we provide. **We plan to make telephone and electronic communication with our patients much more user-friendly and consistent. We want your experience to be simpler and more satisfying, whether you need an appointment, medical advice, a clinical referral or test results.** This may sound straightforward but in reality, it is easier to keep the status quo instead of doing the hard work of streamlining our operations to make the whole experience easier for our patients. This work will take vision, creativity, project management skills and staying power over a period of years.

As we approach our 41st Annual Enrollment, I look forward to welcoming new members to Yale Health — and as always, to responding to your ideas and suggestions. We are always interested in knowing how you feel about the healthcare you receive from us. You may receive surveys by mail or by phone conducted by The Center for Survey Research and Press Ganey. There are also comment cards available in our lobbies and on our website.

Whether you contact me directly, call Member Services (203 432 0246) or contact us by email (member.services@yale.edu), we always welcome your input.

Pediatrics Welcomes Three New Clinicians



Hannah Mark, APRN, PNP
PEDIATRICS

Hannah Mark joins the Pediatric Department as a full-time nurse practitioner after previously working as a pediatric registered nurse at The Healthy Child in Darien, where she implemented patient and family centered assessment, intervention and education.

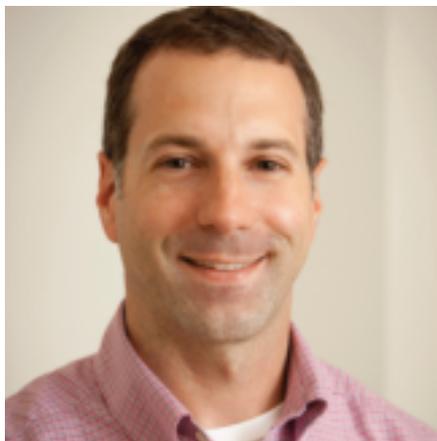
She has also worked at Yale-New Haven Hospital's Pediatric Primary Care Center and Pediatric Pain Service, Milford Pediatric Group and in the pediatric surgery unit of the Connecticut Children's Medical Center.

While working at the West Hill High School Family Center in Stamford, Mark provided adolescent friendly care including gynecological exams and testing teenagers for sexually transmitted infections (STI's).

She earned her undergraduate degree in music and psychology from the University of North Carolina at Chapel Hill in 2007 and her Master of Science in Nursing degree from Yale's School of Nursing in 2010.

She has been working as a part-time pediatric nurse practitioner at Yale Health since last June.

Mark is also a member of the National Association of Pediatric Nurse Practitioners and Sigma Theta Tau International Honor Society of Nursing.



Christopher DeSanto, MD
PEDIATRICS

A former assistant professor of clinical pediatrics in the Pediatric Urgent Care Center at Stony Brook University Hospital, Christopher DeSanto most recently worked at a private pediatric practice in Smithtown, N.Y.

He previously worked at Watson Salsbury Pediatrics, a private practice in Virginia and was an intern and resident in the Pediatric Department of the Georgetown University Hospital in Washington, D.C.

He is an American Academy of Pediatrics Fellow and a member of the Suffolk County Pediatric Society. He is also certified by the American Board of Pediatrics.

DeSanto graduated with a BS in biology from Cornell University in 1995 and earned his doctor of medicine degree from the State University of New York Health Science Center at Syracuse in 1999.



Gordon Streeter, MD
PEDIATRICS

Gordon Streeter comes to Yale Health after working as a general pediatrician at Hamden Pediatrics for the last six years.

He is a clinical instructor at the Yale School of Medicine and a former assistant professor and clinical instructor in pediatrics at Albert Einstein College of Medicine in the Bronx.

Streeter did his residency and was chief resident at Jacobi Medical Center in the Bronx.

He is certified by the American Board of Pediatrics, board vice president of the Bethesda Nursery School in New Haven and is on the Long Range Planning Committee at St. Thomas's Day School in New Haven.

He graduated with a BA from Middlebury College in Vermont in 1991 before earning his MD from Columbia University College of Physicians and Surgeons in 1999.

Refill Prescriptions Online

Now you can request prescription refills online using Yale Health's **Online Prescription Refill Request form** at www.yalehealthonline.yale.edu/rxrefill. The secure ordering system requires the same information you would provide if calling in a refill over the phone. You will receive an email confirmation advising you when your prescription will be ready for pickup at our pharmacy.

PREVENTION**How do I know if I have a cold or the flu?**

⊕ In general, the flu is worse than a common cold. Flu symptoms usually start suddenly and often include high fever, headaches, body aches, low energy and sometimes nausea and diarrhea especially in younger children.

In contrast, colds are milder and tend to develop gradually over a few days. Initial symptoms include sneezing, a stuffy or runny nose, and sore throat, which can evolve into cough and congestion. The worst of a cold is usually over within a few days and often resolves itself within a week.

Unlike the flu, colds don't typically result in serious complications such as pneumonia or bacterial infections. Those at greatest risk for complications of the flu include infants, pregnant women, the elderly, and those with lung ailments or weakened immune systems. If you are uncertain about your condition, your primary care clinician can make a clinical diagnosis based on the history of your symptoms and an exam.

What's the best protection from the flu? Defend yourself and your family by obtaining the flu vaccine. Also, wash your hands often and turn your face into the bend of your elbow for all coughs and sneezes.



Yale Health will hold flu vaccine clinics this fall. The schedule is listed on the back cover.

*Jonathan Weber, PA-C, Physician Associate,
Department of Internal Medicine*

MENTAL HEALTH**How do I know that I'm depressed?**

⊕ A bout of depression can be characterized by feeling down or blue and over time the feeling becomes unshakable. You may feel like you've lost energy and, in some instances, you may not be able to get out of bed, have trouble concentrating, and have changes in sleep or appetite, either being decreased or increased. In the most severe cases, you may entertain thoughts of suicide.

Depression is a very treatable disorder. Effective psychotherapies are available and medications that have minimal side effects can be prescribed.

Yale Health offers multiple ways for you to determine if you have depression. You can call Magellan at 800 327 9240, 24 hours a day to speak with a clinician. You can also access Magellan's confidential assessment from the Behavioral Health page on our website.

On October 20th, Yale Health will offer free depression

screenings in the Behavioral Health Department on the lower level of our 55 Lock Street home from 9 AM to 3 PM.

*Dr. Borislav Meandzija, MD,
Department of Behavioral Health*

**Making the Rounds**

**HEALTH AND WELLNESS INFORMATION
FROM YALE HEALTH'S CLINICAL STAFF**

WOMEN'S HEALTH**What types of preventive care should a woman consider?**

⊕ There are several types of preventive exams a woman should have on a regular basis, including gynecological exams, mammograms, Pap smear testing and colonoscopies.

Any sexually active young woman should see her gynecologist approximately once a year. At these appointments, we help her assess her need for contraception and help her select the best method for her. Also, regular screening for sexually transmitted diseases is important for young sexually active women. Adolescent girls should consider the vaccine against human papillomavirus (HPV) which helps reduce the risk of cervical cancers.

Pap smear testing should start at age 21. The test should be done every two years until the age of 30. After 30, as long as prior tests have been normal, Pap smear screening is done every three years. Past history of cervical pre-cancer or cancer, or endometrial cancer, requires more frequent screening.

Current recommendations from the American College of Obstetricians and Gynecologists (ACOG) state women should be offered annual mammogram screening starting at age 40. If a woman has dense breast tissue by mammography, she is also offered breast ultrasound screening.

Starting at 50, we recommend a colonoscopy every 10 years to check for colon cancer or pre-cancerous polyps. Some women with risk factors will be advised to go more frequently or start sooner.

After menopause, we offer bone density testing, a

screen for osteoporosis, to women over 65, or younger if they have additional risk factors for bone thinning.

*Joann Knudson, MD,
Department of Obstetrics & Gynecology*



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The future of care is here



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40 YEARS OF SERVICE

YALE HEALTH CARE

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KEEP IN MIND

New Auto Doors Installed

For patient convenience, automatic door openers have been installed on all clinical department entryways. There are push buttons on the outside and inside of each doorway. In some departments the location of the exterior button can be found across the hall.

New Haven Reads

Yale Health staff, in their ongoing efforts to support the surrounding Dixwell community, has sent hundreds of books to New Haven Reads, who then distributed them for free throughout New Haven. The staff also donated nearly \$400 from a recent "Caring & Sharing Jeans Day" to the literacy organization, which tutors over 450 students a week.

Flu Schedule

DATE	TIME	LOCATION
MONDAY, OCT. 17	10 AM – 3 PM	Med School, Harkness Lounge
FRIDAY, OCT. 21	10AM – 3 PM	Yale Health Center
TUESDAY, OCT. 25	10AM – 3 PM	Med School, Harkness Lounge
THURSDAY, OCT. 27	3PM – 7PM	Yale Health Center
MONDAY, OCT. 31	10 AM – 3 PM	Woolsey Hall, President's Room
THURSDAY, NOV. 3	3 PM – 7 PM	Yale Health Center
MONDAY, NOV. 7	10AM – 3 PM	Med School, Harkness Lounge
THURSDAY, NOV. 10	10AM – 12 PM	West Campus

The Pediatric Department will hold separate flu clinics for its patients.

REMEMBER to wear clothes that allow you to easily reveal your upper arm.

REMEMBER to bring your Yale University ID badge.

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