

YALE HEALTH CARE

news from Yale Health
spring 2014

Primary Care Model
Care Management
Bone and Joint Clinicians



PRE-PREGNANCY CARE
DEHYDRATION PREVENTION
LAB TEST LOCATIONS



Primary Relationships

PCC model at the center of Yale Health care

FOR AMARILIS ROMAN, the relationship she has with her primary care clinician (PCC) in Internal Medicine goes beyond doctor and patient.

“Of course we talk about medical issues, but we also talk about family and outside life,” said Roman, a Yale Health member for more than 20 years. “I think it’s very important to have that communication with your clinician because you build trust and when you have that trust and communication, I know that they will do the right thing for me and my medical care.”

PRIMARY CONTINUED ON THE NEXT PAGE

*Amarilis Roman has
a visit with Dr. David
Smith, Internal Medicine,
her primary care clinician
for nearly 20 years.*

PRIMARY CONTINUED FROM PREVIOUS PAGE

For Dr. David Smith, Roman's PCC for nearly two decades, the feeling is mutual.

"Building that relationship helps us to take better care of our patients," said Smith, a PCC in Yale Health's Internal Medicine Department since 1993. "One of the main things we like about being general internists is getting to know our patients over time."

As your medical home, Yale Health's patient-centered model of care begins with your PCC. They are at the center of a team of dedicated healthcare professionals who work together to provide your care and also serve as your access point for specialty care.

UPON ENROLLMENT in Yale Health, all adult members are matched with a PCC in Internal Medicine. Adult female members are also matched with a PCC in the Obstetrics & Gynecology Department and children are matched with a PCC in the Pediatric Department.

Primary care clinicians include physicians, nurse practitioners, and physician associates. There are also certified nurse midwives in the Obstetrics & Gynecology Department.

"Your PCC is the main person you interact with and helps coordinate all of your care," Smith said. "You may see specialists for specific questions or issues, but your PCC coordinates care for the whole person."

Smith added that caring for the whole person is an integral part of providing quality health care.

"Sometimes, it's thought that illnesses happen irrespective of who the person is, but really they are happening in the context of the person," he said. "Their overall medical history, their life history, and their personal circumstances all come into play. If you have a good relationship with your PCC, they know that about you."

As a way to help begin that relationship, Yale Health has created a special appointment type for new patients as an introductory meeting. This 25-minute appointment is not a physical exam, but a way for you to meet your PCC, ask questions, or discuss medical concerns that you might have as you begin your care at Yale Health.

"In that initial meeting, we have a chance to get information about their medical history and get a sense of them as an individual," Smith said. "It also gives us an opportunity to talk to them about how the

system works and how it can work best for them."

Because Yale Health places such a high importance on your relationship with your PCC, you will be scheduled with your PCC for care whenever possible. That is one of the standards the organization has met to help earn recognition as a Patient-Centered Medical Home in 2012, a recognition given by the National Committee for Quality

Caring for the whole person is an integral part of providing quality health care.

Assurance. Yale Health is also accredited as a Primary Care Medical Home through The Joint Commission.

If your PCC is unavailable, you will have access to your primary care team, which includes clinicians, registered nurses, and medical assistants. Together, this team will provide the care you need as well as coordinate specialty care and communicate with your PCC. All of your medical information is available to your primary care team in your electronic medical record.

"OUR PATIENTS HAVE the extraordinary benefit of having a team back up their PCC," Smith said. "There may be a time when a patient wants to see me, but the schedule does not allow for it. In those cases, there are other options for them to receive care."

"We're always discussing patients and that's an important part of how we work," he said. "Some of these patients I've known from the first couple of months I started working here and it's really gratifying to meet them and learn about them over a long period of time. When you have that type of relationship, you get to know them not just as a patient, but as a person."



Dr. Daniel Geisser, left, Dr. Slawomir Mejnartowicz, and Evelyn Morrissey, RN, are part of Internal Medicine's care team.



We want all members... to be familiar with their plan of care, and to actively partner with their medical team to get well and stay well.

FROM THE DESK OF PAUL GENECIN, MD

As Yale Health enters its 43rd year of caring for the Yale community, we continue to look for ways to better ourselves and make the healthcare experience for our members as positive and consistent as possible.

Every three years, The Joint Commission (JC) visits us for re-accreditation in Ambulatory Care including Mental Health and Counseling as well as Inpatient Care. In January, JC surveyors interviewed dozens of our staff members and patients, analyzed all facets of our clinical work and training processes, and reviewed our communications practices. We received great feedback and useful suggestions, which will ultimately help us to serve you better.

In addition, **we have been accredited by The Joint Commission as a Primary Care Medical Home.** This accreditation requires a team-based approach to providing comprehensive care to patients, as well as partnering with patients and their families to manage care, and coordinating care across the broader health system, all of which you can read more about in this issue. Possibly the most important priority of a “PCMH” is engagement of each patient in his or her own care. We want our members to know their primary clinicians and their teams. We want all members, including healthy ones as well as those with chronic conditions or illnesses, to be familiar with their plan of care, and to actively partner with their medical team to get well and stay well.

Healthcare technology also plays a pivotal role in realizing our model of care. Our previous issue focused on that technology including Epic, the electronic medical record system that brings all of your medical history together from Yale Health, Yale-New Haven Hospital, and Yale Medical Group. After going live with Epic on January 28th, I am pleased to report that we are back to full service in all of our clinical departments. Our staff has worked tirelessly to make the transition as seamless as possible for you and each day we are discovering new processes to improve.

MyChart, Epic’s secure patient portal, which replaced Yale Health Online, is a perfect example of how healthcare technology allows you to be a more active partner with your Yale Health care team in managing your care. **With MyChart, you can securely message your clinicians, follow your laboratory results, view your immunization history, request appointments, and more.** We like to think of MyChart as your online connection to your medical home. For more information or to sign up for MyChart, visit yalehealth.yale.edu/mychart.

It is important to note that all of the above actions were not required, but steps we took voluntarily, to keep moving forward with new and better ways to improve your care experience at Yale Health. We do not seek these accreditations and recognitions simply to hang certificates on the wall, though we do display them proudly. We seek these because they ultimately help us to improve and maintain our place as your medical home.

Helping Hands

Care managers work to simplify the complicated

HEALTH CARE CAN BE complicated especially if you are dealing with ongoing or unexpected medical issues. The team in Yale Health's Care Management Department can work with you to simplify those situations.

You may have a care manager work with you, your family, clinicians, and other members of your healthcare team to develop a plan of care which you and your family agree upon.

Your care manager is available to assist you with managing conditions such as cancer, diabetes, and high blood pressure as well as to help you and your family understand your diagnosis and treatment plan. They can answer questions regarding your care, provide you with health information, help you find community services, and check with you on a frequent basis to determine if the plan is working.

"When people are feeling overwhelmed by the many things they need to do for their care, we are there to help," said Susan Molde, APRN, manager of the Care Management Department. "We spend a lot of time with people who have complicated problems or are finding it difficult to get the care they need. What we have found is that people who have access to Care Management have better outcomes and are more satisfied with their treatment experience."

The team consists of experienced nurse practitioners who work with you and your clinicians as your advocate. That ongoing relationship continues throughout your treatment until you are confident that you can manage your care on your own.

You may contact the Care Management Department directly or you may be referred to a care manager by your primary care clinician.



Care Manager Jennifer Brackett, APRN, discusses a care plan with a patient.

"We always work with a patient's clinician and are always having conversations with the clinician about what is going on and how we think we can be helpful," Molde said. "We try to be good partners and communicators."

Care managers may also visit you at Yale-New Haven Hospital to review and explain your care plan and help with the transition back home or to another facility including Inpatient Care at the Yale Health Center.

"I think the hospital can be a difficult place to be and people may not fully understand what is happening," Molde said. "There are teams of physicians coming and going and patients may not know who is involved or why they are involved. We have a chance to explain how the system works,

who everyone is, and what their roles are."

Holly Powell Kennedy, a Yale Health member, experienced that first hand.

When her husband, Richard Kennedy, was hospitalized with complications due to a severe illness, she worked with Judy Sutton, APRN, a Yale Health care manager, throughout the hospitalization.

"She had this amazing presence and she was there to explain everything," said Kennedy, PhD, CNM, FACNM, FAAN, Executive Deputy Dean and Helen Varney Professor of Midwifery at the Yale University School of Nursing. "Even though I'm a nurse, just having someone there to explain things and to listen to me was invaluable. She was there every step of the way."

Bone & Joint Care

Effective March 31, 2014, orthopaedic and rheumatological care is now being provided by our partners at Yale Medical Group.

This new service is called Bone & Joint Care and includes the following physicians:



Michael Medvecky, MD
*Orthopaedics,
Sports Medicine*



Karen Sutton, MD
*Orthopaedics,
Sports Medicine*



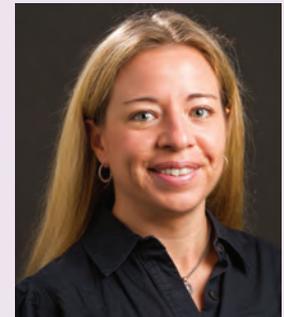
Janine Evans, MD
Rheumatology



Theodore Blaine, MD
*Orthopaedics,
Sports Medicine*



Cordelia Carter, MD
*Orthopaedics,
Pediatric Orthopaedics,
Sports Medicine*



**Elizabeth Carpenter
Gardner, MD**
*Orthopaedics,
Sports Medicine*

“We spend a lot of time with people who have complicated problems or are finding it difficult to get the care they need. **People who have access to Care Management have better outcomes and are more satisfied with their treatment experience.**”

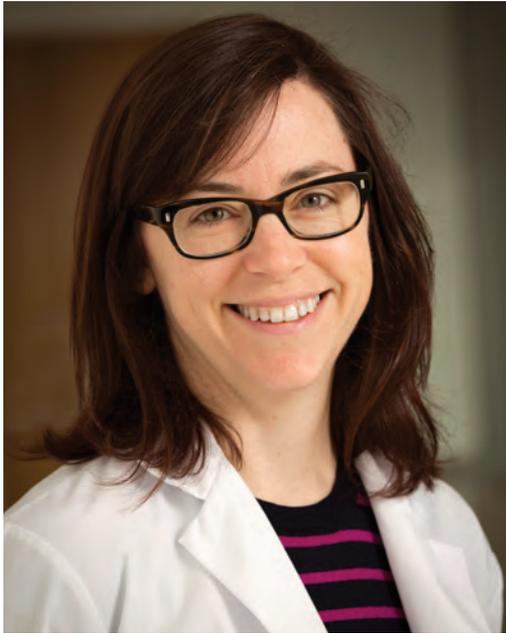
Susan Molde, APRN

“We really try to make sure patients are getting the proper attention while in the hospital and make sure they understand the process and decisions being made about their care,” Molde said.

Kennedy also needed to coordinate medical equipment and home nursing visits for her husband following the hospitalization and said she couldn’t imagine going through the process without the help of a care manager.

“It was a huge and complex logistical nightmare,” she said. “Judy was able to give me advice and coordinate Richard’s move to hospice. It was very helpful to not have to worry about those big decisions on my own. It is an amazing resource that is available to Yale Health members.”

Clinician Joins Internal Medicine



Katherine Perry, APRN
INTERNAL MEDICINE

After spending the last 10 months as a primary care clinician in the Student Health Department, Katherine Perry has joined the Internal Medicine Department.

Perry earned her undergraduate degree in biology from Bates College in 1997 and her MSN from the Yale School of Nursing in 2002.

Prior to arriving at Yale Health, Perry worked for seven years as an adult nurse practitioner at the Fair Haven Community Health Center in New Haven with a focus on HIV positive patients. She previously worked as an adult nurse practitioner at the Cornell Scott-Hill Health Center in New Haven and the Norwalk Medical Group, P.C.

She is a lecturer and clinical preceptor at the Yale University School of Nursing and was formerly an adjunct clinical professor of nursing at Quinnipiac University.

Perry is a certified Adult Nurse Practitioner and Women's Health Nurse Practitioner.

Briefs



Commercial Driver's License (CDL) Exams

Effective May 21, 2014, a new state law mandates all Medical Examiner's Certificates required for a Commercial Driver's License (CDL) must be completed by a certified medical examiner listed on the National Registry of Medical Examiners.

Yale University employees requiring a CDL as part of their job at the University can schedule the exam to be performed in Employee Health through their Yale department manager.

All other Yale Health members requiring a CDL exam for outside employment or any other reason should contact their employers to determine the correct procedure or locate an alternative provider. Any outside exams will not be covered by Yale Health.



WHCRA Services

The Women's Health and Cancer Rights Act (WHCRA) of 1998 provides benefits for mastectomy related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedemas.

Call the Yale Health Care Management Department at 203-436-5791 for more information.



Travel Assistance

All Yale faculty, staff and their accompanying family members are automatically covered by **FrontierMEDEX, which provides 24/7 travel assistance coverage anytime you travel more than 100 miles from your permanent residence** (in the U.S. and abroad).

In addition to helping with medical emergencies, FrontierMEDEX provides other services such as help if you lose your wallet or travel documents. If you do not have a FrontierMEDEX card, you can pick one up in the Member Services Department or print one at ogc.yale.edu/frontiermedex_program.

PRENATAL CARE

I'm planning on getting pregnant, what should I do to prepare?

⊕ If you are thinking about becoming pregnant, creating a timeline that includes factors such as career, school, and finances could help you decide when you want to begin trying to conceive. You can speak with your clinician about contraceptive planning and which type of contraception is right for you based on your timeline of wanting to become pregnant.

Maintaining a healthy lifestyle including proper weight, exercise, and nutrition becomes especially important when planning a pregnancy. You should also begin taking a prenatal vitamin when you start planning to become pregnant and continue taking them throughout your pregnancy and during breastfeeding.

The Obstetrics & Gynecology Department offers preconception visits, a 40-minute appointment for you and your partner to discuss your detailed reproductive history, medications, workplace exposures, and social issues such as smoking and alcohol. It is also a time to discuss genetic factors and get a referral for genetic counseling, if necessary.



While nearly 50 percent of all pregnancies in the United States are unplanned, speaking with your partner and clinician early can be beneficial.

*Leslie White, APRN
Obstetrics & Gynecology*

PREVENTION

How can I avoid dehydration?

⊕ It is estimated that 40 to 70 percent of your body mass is made up of water, which helps to maintain proper body function in areas such as your heart and kidneys.

Replenishing your body's water supply is the most important thing you can do to avoid dehydration. It is recommended that you drink one glass of plain water for every 20 pounds of your body weight every day.

Carbonated beverages and coffee, while made of water, also contain caffeine, which can lead to dehydration.

Feeling thirsty is the first experience you will have when your body's water supply is diminished. You may also feel cramps, nauseated, or lightheaded.

While dehydration can affect everyone, the elderly population is at higher risk because your thirst mechanism declines with age.

Working outdoors, playing sports, or engaging in other physical activity in hot temperatures and high humidity also causes your body to lose water quickly. Along with proper hydration, it is recommended that you avoid working outdoors at peak sun time.



*Delly Alcantara, MD
Internal Medicine*

Making the Rounds

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

LOCATIONS

How are lab services provided at Yale Health?

⊕ For much of the time that Yale Health was located at 17 Hillhouse Avenue, many laboratory tests were performed on site.

As medicine advanced and more lab tests were being ordered, Yale Health decided to partner with Quest Diagnostics in 2006, one of the largest lab corporations in the country, to provide lab services to its members.

You now have the option of having your lab tests performed at the Quest lab on the lower level of the Yale Health Center at 55 Lock Street or at any Quest Patient Service Center in the six New England states (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, or Vermont).

Any lab order from a Yale Health clinician is sent electronically to all of the Quest locations in New England and the results are sent electronically back to the ordering clinician.

Each Quest Patient Service Center has its own hours of operation and many are open on Saturday, giving Yale Health members more flexibility.

The Quest lab in the Yale Health Center is open weekdays from 7:30 am-5:15 pm.

Quest also gives you the ability to schedule an appointment online for your lab work, which is especially helpful if you are fasting for a test and would like one of the first appointments of the day.

To see a list of all Quest Patient Service Centers, their hours, or to schedule a lab appointment online, visit questdiagnostics.com.



*Michael Goulet, PT, MPH, CRA
Manager, Laboratory*



For more on these topics, listen to the complete healthcasts on yalehealth.yale.edu/healthcasts.

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KEEP IN MIND

Pharmacy Summer Hours

Tuesday, May 27th through Saturday, August 30th

Monday through Friday

8:30 am – 6:00 pm

Saturday

8:30 am – 2:30 pm

The pharmacy will be closed on Monday, May 26th in observance of Memorial Day and Friday, July 4th in observance of Independence Day.

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55 Lock Street
New Haven, CT 06511
203 432 0246
yalehealth.yale.edu
EMAIL member.services@yale.edu

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