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NEWS FROM THE YALE HEALTH PLAN

VOL. XI NO. 3

MAY-JUNE 2008

Dedicated nursing staff supports YHP's mission

Rhea Hirshman, editor



Florence Nightingale knew what she wanted—better education for nurses and better care for patients—and she didn't mince words. "Nursing," she wrote in 1859, "...has been limited to signify little more than the administration of medicines and the applications of poultices. It *ought* to signify the proper use of fresh air, light, warmth, cleanliness, quiet, and the proper selection and administration of diet—all at the least expense of vital power to the patient."

In her *Notes on Nursing*—still in print 150 years later—Nightingale goes on to outline in great detail and often with sharp wit her ideas regarding "...how to put the constitution in such a state that it will have no disease, or that it can recover from disease...." While some of her advice, set in the realities of mid-Victorian England, is peculiar to its time,

a reading of this classic presents us with passage after passage of directives and concepts that, despite the 19th century language, are recognizable as central to contemporary nursing practice: patient and family advocacy; thoughtful observation; clear communication; attention to the external environment; a focus on prevention; use of evidence-based treatments; and a big dose of good, old-fashioned common sense.

A national heroine in her own day—a writer, reformer, scholar, public policy consultant and accomplished statistician—Nightingale conceptualized the modern nursing profession and founded the world's first school for nurse training. Her May 12th birthday was the inspiration for designating May as National Nurses' Month. Her descendants, the nurses of the 21st century, live and practice in a world of enormous complexity; as it has grown, the profession has continually both responded to and influenced the way medicine is practiced.

"Today's nursing education prepares nurses for many roles," says Sharon Remillard, RN, MSN, Associate Director for Clinical Services at YHP. "Besides medical training, nurses are taught

What the letters mean:

APRN Advanced practice registered nurse
(Master's degree required and national certification exam; APRNs can practice as CNMs, CNSs, or NPs)

CNM Certified nurse midwife
(not always registered nurses, but those at YHP are)

CNS Clinical nurse specialist
(generally requires training as an RN and a master's in chosen area of specialization)

LPN Licensed practical nurse
(associate or certificate program and national licensing exam)

RN Registered nurse
(can be a BS in nursing or not, national licensing exam required)

The difference between RNs and LPNs is the level of training and education. RNs assess and develop and evaluate a plan of care while LPNs may collect the assessment data but are not licensed to develop or evaluate the plan. LPNs are not licensed to "triage" which requires a licensed RN. LPNs at YHP have very important roles in specialty clinics often performing specific nursing procedures. An example is in Dermatology where the LPN has completed training to perform light treatment therapy.

continued on page 2

May is National Nurses' Month



DEDICATED NURSING *continued from page 1*

strategies to manage and initiate change, to serve as leaders, to problem solve, manage time, recruit and select staff, provide training and education, coach, discipline, budget and monitor resources, maintain computer skills, maintain quality, and manage stress." All the while, of course, she emphasizes, "the first priority remaining the provision of excellent patient care."

The nurses who provide that care have a veritable alphabet soup of degrees and specialties to choose from. Remillard outlines the functions served by the nearly 70 nursing professionals (LPN licensing and above) at YHP. "We have designated RNs and LPNs in each primary and specialty department who are part of the medical teams, doing assessments and evaluations and providing care and education." Ivy Alexander, PhD, C-ANP, a YHP clinician and professor at Yale School of Nursing, adds that "APRNs and CNMs provide patient care as primary clinicians in Internal Medicine, Pediatrics and Ob/Gyn, and as specialists in areas such as dermatology, medical specialties and diabetes management."

Nurses coordinate the Travel Clinic and oversee infection control. In YHP's 17-bed inpatient care facility (ICF), they care around the clock for everything from the flu to post-operative recovery. Nurses staff in-service education, and participate on committees. Nurses are central to YHP's care coordination service. Highly-trained nurses staff the infusion center (see September/October '07 newsletter issue) and the endoscopy suite (see article in this issue). Nurses administer vaccines, teach and reassure new parents, order supplies, coordinate off-site educational events, help patients manage chronic illnesses, and act as liaisons between patients and physicians.

In addition, every clinical area has a nurse manager in charge of maintaining quality and standards of care; nurses set policy and develop protocols to maintain these standards.

Nanci Fortgang, RN, BSN, MPA, Clinical and Administrative Manager for Adult Primary Care, makes these observations. "One of my roles as a nurse manager is to develop my nurses professionally as nurse leaders in their departments. They are mentors for new nurses, as well as support staff. Nurses are often the primary contact for members, relying on strong assessment, triage and care coordination skills. They work autonomously, as well as performing key roles as part of the clinical care team. Many know patients' histories, medical situations and nuances—I am always impressed with how they remember each patient, and are cognizant of home care settings and special needs even before reviewing charts. We have built a strong nursing team, and patients are confident and comfortable in seeking care here."

Another of the strengths of YHP's nursing staff is its longevity. "We have very experienced nurses," says Remillard, "and our turnover rate is very low." The longest-serving nurse is Molly Meyer, APRN, who started at YHP in 1971 and whose career has continually evolved. "I arrived as an RN in the ICF and then had the opportunity to become an NP," Meyer says. "I've been in Sports Medicine and Student Medicine since 1974, started in Oncology in the early 80s, and have been in Internal Medicine all along. I am a primary provider in all my departments and am the coordinator for oncology/hematology. I see patients. I triage, administer, and consult with other clinicians. The world of medicine is changing all the time—challenging, especially because of time constraints. But we are all ever learning. For instance, I never imagined I would be doing all my work on a computer! And I can't imagine not being a nurse."

Alexander notes that YHP's commitment to nursing excellence has meant that "The role for nurses at YHP is often used as a model by national professional organizations because nurses here use

in touch

IMPORTANT TELEPHONE NUMBERS

Urgent Care	203-432-0123
<i>Open 24 hrs/day, seven days per week</i>	
Toll free out of area	1-877-YHP-CARE
General information	203-432-0246
Pharmacy	203-432-0033
Monday, Tuesday, Wednesday, Friday	8:00 AM–6:30 PM
Thursday	8:30 AM–6:30 PM
Saturday	8:30 AM–3:30 PM
Patient Representative	203-432-0109
Medicare/Retiree Coordinator	203-432-8134
Outpatient referrals	203-432-7397
Claims	203-432-0250
Inpatient Care Facility	203-432-0001

all their skills and really fulfill their full scope of practice—patient assessment and management, system support, and so forth, plus the primary and specialty clinical work of our NPs and CNMs."

That kind of external recognition, of course, is gratifying. But what still matters most, Alexander notes, "is the underlying philosophy of nursing: to work *with* patients (individuals, families, groups, communities and/or populations) and health care systems to improve health. Doing so doesn't always mean curing a problem; it does mean partnering with the patient to help make the patient's circumstances the best they can be, in the context of the patient's preferences and abilities. That dual focus on caring and partnering is the essence of the profession's philosophy."

I work directly with patients providing allergy testing, allergy immunotherapy, venom immunotherapy, and many different immunizations. I educate patients about their allergies, food avoidance and environmental controls. I have been giving allergy and bee venom shots to some of the same patients for almost 18 years! I really know my patients and I feel like I have an extended family.

Elise DeMayo, LPN
Department of Health Promotion and Education



from the desk of

PAUL GENECIN, MD

DIRECTOR, YALE UNIVERSITY HEALTH SERVICES

The new facility will support fundamental changes in work flow...

When I am asked whether the projected June 2010 opening date for the new YUHS building seems far in the future, I respond that it seems right around the corner. While the hectic phases of programming and design are past and we eagerly wait for the shovels to begin excavating at 55 Lock Street, the next two years will be crammed with activities. Everyone who will be working in the new facility will participate in planning—with the goal of keeping surprises to a minimum.

The new facility will support fundamental changes in work flow that will make the experience of our members much more welcoming, and support a more efficient and satisfying work environment for our clinical and administrative staff.

Here are some concrete examples: Urgent Care and Internal Medicine will be side-by-side on the first floor, enabling triage nurses to schedule many walk-in patients with their primary clinicians. The medical assistants will be able to escort these patients right to examination rooms—of which we will have many more in the new building!

The ability to see patients in more than one exam room will create major changes for everyone—receptionists and medical assistants as well as nurses and doctors.

Other departments will have “strategic adjacencies” to enable us to make the most of our adaptable new space. For example, medical and surgical specialty clinics will be grouped together and we will have the opportunity to offer more flexible scheduling for consultants and patients. We will be combining Student Medicine and Athletic Medicine; both departments are dedicated to the care of students, but peak hours for the athletes are in the morning, while other students generally prefer afternoons and evenings.

Some of the most exciting changes at Yale were not anticipated when we first did programming for our new building. The Yale community will likely grow quickly over coming years as West Campus comes on line. For the first time, people who may rarely visit New Haven will be employed by Yale—and this population might exceed 1000 within a few years. Meeting the needs of so many staff members who may be unfamiliar with what we have always thought of as the Yale campus will present both opportunity and challenge to YHP.

No doubt there are more surprises in store at this dynamic University—and we are fortunate that we will have a state-of-the-art health facility with the flexibility to care for a growing and changing community.

As with any move, we must carefully consider what we will bring to our new home and what we will leave behind—literally in the case of advanced medical equipment such as our new CT scanner (definitely bring!), and figuratively in the case of all the less tangible factors that work well for our members and our staff. On the other hand, we will be only too happy to leave behind the cramped waiting areas, the queue at the Pharmacy and the unfinished cinderblock that makes up so much of the interior design of 17 Hillhouse.

We all know that even the most positive changes can be stressful. Our beautiful new building at 55 Lock Street will be a major part of our being the great health care organization that Yale deserves.

But as exciting as the prospect of a new facility may be, we always remember that YUHS is first and foremost a human organization, not a building. The focus of our planning is on creating a comfortable and positive transition for our members and staff. June of 2010 will be here before we know it!



The new YUHS facility has been designed to provide a flexible and comfortable environment for staff, patients and members of the University community, incorporating state-of-the-art technology into a fully accessible building. Among the features: lower transaction counters for people in wheelchairs; exam tables that can be raised and lowered electronically; clear signage that can be perceived by all; way-finding mechanisms, such as an emphasis on natural light, that provide easier access to destinations; waiting areas away from public corridors; wider hallways and stairwells; and a private ambulance entrance.

Some of the nearly 70 members of our nursing staff

GROUP 1:

Front, L to R: Doris Foell, APRN; Deb Meredith, CNM; Anita Shmigelsky, RN; Cris Donovan, RN; Jane Milberg, APRN; Michelle Brei, PNP, APRN

Back, L to R: Karen Otterson, RN; Kathy Ollodart, RN; Maureen Polizzi, LPN; Molly Meyer, APRN; Beth Reilly, APRN; Sue Dougherty, LPN; Susan Surdykowski, RN; Cheryl Carden, RN; Kathy Scholz, RN



GROUP 2:

Front, L to R: Elise DeMayo, LPN; Fran Batesole, RN; Cindy Holland-Toftness, APRN; Sue Hawthorne, RN; Laurel Poletti, RN; Jeanette Ryan, RN; Kathi Blum, RN; Lorraine Sibley, RN

Back, L to R: Alberta Ferrie, LPN; Ann Marie Cirkot, RN; Maureen Romano, RN; Michel Gusmano, RN; Barbara Milazzo, RN; Elizabeth Donovan, RN; Lisa Mendoza, RN; Linda Chabot, RN



Safe grilling

Now that the warmer weather is here, many of us will be grilling for quick and delicious meals. Here are some tips for grilling safely:

- Scrub your grill with hot, soapy water before and after every use.
- Keep the lid on your outdoor grill to keep temperature consistent.
- Trim visible fat from meat and marinade the meat in the refrigerator (not on the kitchen counter) before cooking.
- Charred meat, fish and chicken may contain chemicals called heterocyclic-amines (HCAs) which are linked to cancer. Cut off charred pieces and keep gas jets low or wait until charcoal cools to glowing embers before cooking these foods. Precooking these foods in the oven or microwave shortens time on the grill which may also cut down on the formation of HCAs.



- Another way to avoid HCAs? Don't forget that vegetables and fruit taste great on the grill and don't form these compounds. Try veggie burgers, mushrooms, zucchini, corn, potatoes, peppers, pineapple, and almost any other produce you can think of.
- Many barbecue sauces contain sugars which increase browning but also burn easily. Apply sauce only during the last five or so minutes of cooking to reduce burning and flare-ups.
- Do not reuse barbecue sauce that is brushed on during grilling if it is in an open bowl. Each time you return the spoon or brush to the bowl you are contaminating the contents.
- Never defrost meat, poultry or fish on the counter. Defrost in the refrigerator overnight. Cook hamburgers, veggie burgers and hot dogs while they are still frozen. Hot dogs need to be well-cooked. Cases of deadly bacterial infections have been linked to undercooked hot dogs.
- Reduce the chances of bacterial growth—and the illnesses that come with it—by refrigerating perishables promptly. Food left out of refrigeration for more than two hours may not be safe to eat. Above 90°F, food should not be left out over one hour. When in doubt, throw it out!
- To avoid bacterial contamination, use two platters, one for uncooked meat/poultry/fish and one for cooked. Have separate cutting boards for meat and for vegetables. Sanitize the food preparation area by washing surfaces with hot water and a bleach-based soap, paying special attention to areas that are in contact with meat products.
- Wash hands thoroughly before and after handling food, especially when handling raw meat, fish and poultry. Regular soap and water is fine; antibacterial soaps are not necessary for hand washing.

Endoscopy provides a look inside

Denise Whelan, MPH
Coordinator, Population Health Management
Rhea Hirshman, editor

One of the marvels of modern medical technology is the array of devices and techniques available to clinicians for the examination of the inside of the human body, from our bones to our brains. The technique of endoscopy—using a thin, flexible tube (the endoscope) with a tiny video camera attached to the end—is employed specifically to allow examination of the digestive tract.

During an endoscopy the physician guides the instrument to the desired area inside the body, where the camera records images. The high quality picture from the endoscope is shown on a TV monitor, and can be used to diagnose gastrointestinal ailments. In addition, the doctor can do a biopsy or take a small tissue sample using channels in the endoscope tube.

An **upper endoscopy** may be used to help diagnose problems such as difficulty with swallowing and stomach or abdominal pain. In this procedure, the endoscope is passed through the mouth to visualize the esophagus (food pipe), stomach, and upper small intestine.

A **lower endoscopy** passes an endoscope through the rectum to view the colon, or large intestine. A sigmoidoscopy is used to view the lower part of the large bowel only while the colonoscopy is used to view the entire large bowel. Sigmoidoscopy and colonoscopy examinations can be helpful in the evaluation or diagnosis of problems such as rectal blood loss, pain, changes in bowel habits, or abnormalities that may have been detected by other tests.

A colonoscopy is the most effective tool in the screening for colorectal cancer. During the colonoscopy the doctor looks for colon polyps which are abnormal growths on the inside lining of the colon. Most colorectal cancers develop from polyps. Early colorectal cancer usually has no symptoms so screening allows the removal of polyps, preventing the progression to cancer.

The YHP endoscopy suite is accredited by the Joint Commission and by the State of Connecticut as an ambulatory surgery center. The physicians are all board-certified in gastroenterology, faculty at the Yale University School of Medicine, and perform hundreds of endoscopy procedures every year. The nursing staff are all registered nurses with advanced cardiac life support (ACLS) certification, and are trained in conscious sedation. Their focus is on building trust with patients, diminishing anxiety, and providing patient education. Our suite offers a private, comfortable setting, and the entire clinical and administrative staff is dedicated to ensuring the comfort, privacy, and dignity of all patients.

If you have questions, talk with your clinician and come to one of our Lunch & Learn sessions on colonoscopy, which are announced at www.yale.edu/yhp and in this newsletter.



YHP offers a state-of-the-art endoscopy suite facility which provides upper endoscopies, sigmoidoscopies, and colonoscopies.

If you are having a procedure in the endoscopy suite, a certain amount of preparation is involved. While detailed instructions will be provided by your clinician before your appointment, here is some general information:

- The patient usually has to follow a special diet the day before the exam and not eat or drink anything about 8-12 hours before the exam.
- A patient undergoing a sigmoidoscopy or colonoscopy usually has to take a preparation that involves the cleansing of their bowels.
- All patients will be in the endoscopy suite for approximately 1 to 2 hours. It is mandatory for someone to pick the patient up in the department and to provide a ride home because of the after-effects of the sedation given during the exam. The full effects of the sedation usually wear off within a day, and most patients can resume normal activity the day after the procedure.

I provide direct care to allergy patients, including skin testing, breathing tests and allergy injections. I take pride in being an "expert" in my field and enjoy being in an academic environment—stimulating and challenging in itself. Talking with patients and offering an ear when they are having a difficult day can be the best part of my work! Isn't that what nursing is all about?

Fran Batesole, RN
Dept. of Health Promotion and Education

The Health Promotion and Education team provides immunotherapy to students, staff and employees. Our staff become confidantes, educators and patient advocates. I also order supplies, maintain and record medical records, check and maintain equipment, and keep contact with physicians, nurses and outside care providers. One challenge is keeping abreast of the latest information and technology in the variety of specialized nursing fields. As nurses, we must remind ourselves, that our own needs must be met in order to meet the needs of others. You must possess qualities of caring, compassion, and empathy, and be knowledgeable and accurate. Nursing is a profession that keeps one humble, gives the greatest personal rewards and I would not trade it for the world.

Alberta Ferrie, LPN
Dept. of Health Promotion and Education

I started at YHP in 1985 as a per diem nurse in the ICF and then went on to work the ICF evening shift. I began working in Internal Medicine 12 years ago as one of two triage nurses. This role has developed to RN clinical care coordinator, which involves phone calls to patients in response to messages concerning various needs and also direct patient care. The RNs in Internal Medicine work closely with the clinicians and support staff and are an integral part of the excellent care given to patients here.

Lorraine Sibley, RN, BSN
Internal Medicine

I provide or coordinate training and education for the clinical staff of YUHS. I feel incredibly fortunate to have become a nurse. The number of possible areas of specialization is endless. Nursing is a "noble" profession, that links emotion (support, caring) with skill and technical knowledge, making it truly unique. I can't imagine doing anything else.

Karen Otterson, RN, BSN, MSN
Manager of Staff Education



information



LUNCH & LEARN: COLONOSCOPY

Learn more about colonoscopy on Wednesday, June 25 from 12:00 to 1:00 PM in room 445 at 17 Hillhouse Avenue. Dr. Harry Aslanian and clinicians from the YUHS endoscopy suite will talk about colorectal cancer and colonoscopies, and answer your questions. There will also be a tour of the endoscopy suite. Space is limited, so please reserve a seat by calling 203-436-8393 by June 18. Check our website www.yale.edu/yhp for additional information.

LUNCH & LEARN: ASTHMA



An informational session for parents/guardians of children with asthma will be held on Friday, June 6 from 12:15 PM to 1:00 PM in room 445 at 17 Hillhouse Avenue. Staff from the YHP Pediatrics Department will be available to answer your questions. Space is limited, so please reserve a seat by calling 203-436-8393 before May 31. Check our website www.yale.edu/yhp for additional information.

NEW YALE HEALTH ONLINE FEATURES

Yale Health Online allows you to request or change appointments, update personal information, and send secure messages to your health care team, including requests for medical information. Now you can also: view and print your immunization records; view and print your active medication list; update your clinical care team on allergies; request a referral from the primary care departments. You can register for this free, secure service at: <http://www.yalehealthonline.yale.edu/>.

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Currently, I am job sharing triage and nurse coordinator positions with another of our RNs. The team nurse coordinators are the glue that keeps everything and everyone together. Triage is often the first clinical encounter (after speaking to our awesome reception team!) a patient has in the department. Triage is the most interesting and challenging part of my job. It takes a trained ear, gut instincts (if it doesn't feel right it probably isn't) and most importantly excellent customer service skills when evaluating patients on the telephone. I went to a Diploma Nursing School, then received my Bachelor's in Public Health, had two children, and for 30 years have never stopped doing what I love; interacting with and giving care to patients.

Kathleen Blum, RN, BSN
Internal Medicine

What I love about my job is that I have the opportunity to speak with students, faculty and staff about their travel plans. I see patients individually to discuss their immunization and medication needs as well as other health and safety issues. Diane Paquette, APRN and I also give presentations to groups ranging from Whim 'n Rhythm preparing for their world tour to the Light Fellowship students studying languages in Asia this summer. I love doing research on the far-away places the students and faculty are visiting and teaching them how to be safe and healthy while they are away.

Susan Hawthorne, RN, BSN
Travel Clinic Coordinator

I have been in Employee Health for over 15 years and was a staff nurse in the ICF for 10 years before that. Employee Health sees patients who have sustained injuries or suffered exposures while on the job. I screen patients, schedule with providers according to the nature of the injury or exposure and work closely with Yale Workers' Compensation to arrange outside referrals. I am gratified when I can make the systems involved in a work-related injury easier for the employee to navigate. I hold two off-site clinics per month at the medical school for employee immunizations and tuberculosis testing and participate in other off-site education. There is not a profession more rewarding than nursing. The work can be hard and heartbreaking, inspiring and uplifting. Nurses have unlimited opportunities to make positive differences, small and profound, in the lives of our patients.

Maureen Polizzi, LPN
Employee Health

I am the Assistant Nurse Manager in Internal Medicine which includes administrative work and coordination. I am also working as the nursing coordinator with Medical Specialties, which includes the departments of Gastroenterology, Endocrinology, Neurology, Cardiology and Oncology. I am responsible for triage as well as direct care of patients seen by our specialty doctors, and I supervise the department's medical assistants. The most rewarding part of the job is being able to help patients who feel overwhelmed in dealing with multiple medical problems/medications or appointments and referrals. I would not trade my profession for anything else.

Veronica Redente, RN
Internal Medicine

Yale Health Plan Adult Preventive Health Guidelines

Regular screenings can detect health conditions early when they are easier to treat. Health experts from national organizations make recommendations based on scientific evidence for physical exams, screening tests and vaccinations. YUHS reviews these recommendations regularly and adopts those appropriate for our patients. This chart outlines health recommendations for adults. Consult with your clinician about what services are recommended for you.

SCREENING ACTIVITY	18	25	30	35	40	45	50	55	60	65 and over
EXAMS										
physical exam			Every 5 years		Every 2 years					annually
gynecological/breast exam		annually				Every 1-2 years				
CARDIOVASCULAR HEALTH										
blood pressure				Every 2 years or at every visit						
cholesterol			Those with cardiac risks ¹	Every 5 yrs: men from age 35, women from age 45						
fasting blood sugar			Those with diabetes or cardiac risks ¹			Every 3 years				
EKG							Consider if cardiac risks ¹			
aspirin therapy						Consider if cardiac risks ¹				
abdominal aortic aneurysm (ultrasound)								Men who never smoked		
CANCER SCREENING										
mammogram				Every 1-2 years			Annually			
pap smear		Annually at 21 or 3 years after sexually active			Every 2-3 years					
colonoscopy				Every 5 yrs if high risk ²		Every 10 years				
prostate specific antigen (psa)				If high risk ³	Discuss with all men; repeat annually if screening is elected					
BONE HEALTH										
bone density test					After menopause if high risk ⁴		All women			
SEXUAL HEALTH										
chlamydia testing	Women yearly if sexually active			Women as needed if new partner or multiple partners						
HIV testing			Offer to all adults, annually if high risk ¹							
VACCINATIONS										
tetanus booster			Every 10 years							
pneumonia vaccine			For patients with a chronic illness, 1-2 doses			Once				
influenza vaccine		Annually for patients with a chronic illness and their household contacts, pregnant women, healthcare workers and parents of young children			Annually					
shingles vaccine						Once				
HPV vaccine	Women, 3 doses									

 For all persons who meet age requirements

 For persons who meet specified criteria

Based on the United States Preventive Services Taskforce 2007 Guidelines and other selected references.

¹ Cardiac risks include: smoking, hypertension, diabetes, strong family history of heart attack, obesity, physical inactivity

² Colon cancer risks include: family history in a relative before age 60, personal or family history of polyps, ulcerative colitis

³ Prostate cancer risks include: African American race or family history of prostate cancer

⁴ Osteoporosis risks include: family history of osteoporosis, smoking, corticosteroid use

⁵ HIV risks include: history of drug use, men who have sex with men, transfusion, multiple partners, unprotected sex with an infected partner

Two YUHS nurses to receive Nightingale honor



The *Nightingale Awards for Excellence in Nursing* program was developed in 2001 by the Visiting Nurse Association of South Central CT to celebrate outstanding nurses and elevate the profession. The goals of the program are to encourage retention, inspire future nurses, focus public attention and recognize the breadth and scope of nursing practice at the local level.

RNs and LPNs who demonstrate excellence may be nominated by their employers if they are involved in clinical practice, leadership, scholarship, and/or education. The award celebrates those nurses who: epitomize the best qualities in personal patient care; demonstrate a commitment to the community served; and exemplify life-long professionalism.

This year, two members of the YHP nursing staff will be among the Nightingale Award recipients:

Suzette Bailey, RN (right) received her ASN from St. Vincent's College of Nursing in 1997 and joined the staff at Yale University Health Services in 2001. She is a staff nurse in the Inpatient Care Facility (ICF), where she "delivers outstanding nursing care to both inpatients who have a variety of diagnoses and to outpatient chemotherapy and infusion patients."

Jennifer McIntyre, RN (left) graduated with a BSN from Quinnipiac University in 2001. Her first position was as a staff nurse on a cardiac thoracic unit at The Hospital of St. Raphael. In 2004, she joined Yale University Health Services as the RN coordinator in the Surgical Specialties Department, where she "provides exceptional care for surgical patients in an ambulatory care setting."

STUDENT, ATHLETIC MEDICINE JOINED UNDER PERLOTTO

James Perlotto, M.D. has assumed the new position of Chief of Student Medicine and Athletic Medicine. The joining of clinical leadership for Student Medicine and Athletic Medicine will permit a high level of coordination and efficiency in the care of Yale students. Perlotto has been on the medical staff of YUHS for twenty years and has, since 2000, been the Chief of Student Medicine. He is the recipient of numerous honors including the CT Academy of Family Physicians "Super Hero" of Family Medicine Award (one of 10 outstanding Family Practitioners selected over a 50-year period), and the Humanism in Medicine Award presented by Yale School of Medicine; he was selected as one of Connecticut Magazine's Top Doctors in 2006. Perlotto is a member of the admissions committee for Yale School of Medicine, where he is an Associate Clinical Professor of Medicine.

Questions or comments about the newsletter? We'd like to hear from you. Drop a note to member.services@yale.edu and put "newsletter" in the subject line.

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