

YALE HEALTH CARE

news from Yale Health
fall 2018

Flu facts

Opioid management

We hear you



ADVANCE DIRECTIVE

BLOOD PRESSURE

HIV PROTECTION



A Shot Worth Taking

Some facts about the flu vaccine

EACH FALL, YOU HAVE A DECISION TO MAKE for you and your family. The reminder emails from Yale Health will come and you will probably hear about it on the news. Daycare centers, schools or your employer may require documentation. You might even hear a story or two from a friend about what happened to someone they know. Ultimately, the decision is yours. Should you get a flu shot?

What is the Flu?

Influenza (flu) is a sickness caused by a virus that easily spreads from person to person in different ways. Anyone can get the flu and serious problems can occur at any age, but some people are at high risk of developing serious flu-related complications if they get sick. This includes people 65 years and older, people of any age with certain chronic medical conditions (such as asthma, diabetes, or heart disease), pregnant women, and young children.

Yale Health administered 20,600 free flu shots to members of the Yale Community and Yale Health members during the 2017–18 flu season. Photo by Heather Smith.

FLU FACTS CONTINUED ON NEXT PAGE

FLU FACTS CONTINUED FROM PREVIOUS PAGE

How Does it Spread?

Flu viruses spread mainly by tiny droplets made when people with flu cough, sneeze or talk. These droplets can land in your mouth or nose. Less often, you might also get the flu by touching a surface or object that has flu virus on it and then touching your own mouth, nose or eyes.

You may be able to pass on the flu to someone else before you know you are sick, as well as while you are sick. Although you are most contagious in the first three to four days after your illness begins, you may be able to infect others beginning one day before symptoms develop and up to five to seven days after becoming sick.

While seasonal flu viruses are detected year-round in the United States, they are most common during the fall and winter, with activity increasing in October and peaking between December and February.

How Do I Prevent Getting the Flu?

Get your flu shot every year. The Centers for Disease Control and Prevention (CDC) recommends everyone 6 months and older should get a flu vaccine each year. Flu vaccines cause antibodies to develop in your body about two weeks after vaccination.

Yale Health administered 20,600 free flu shots to members of the Yale Community and Yale Health members during the 2017-18 flu season.

“The University has made a strong commitment to making the flu vaccine available free of charge to all students, employees, and Yale Health members,” said Dr. Madeline Wilson, medical director for population health and clinical informatics. “Yale Health’s flu clinics vaccinate large numbers of people quickly and efficiently. We strongly urge all members of the Yale Community to get the flu vaccine this fall.”

The CDC also recommends routine preventive actions such as avoiding others who are sick, covering coughs and sneezes, and frequent handwashing.

Can the Flu Shot Give Me the Flu?

No. Flu vaccines are made with viruses that have been inactivated and are not infectious. The most common side effects from a flu shot are soreness, redness, tenderness or swelling where the shot was given. Low-grade fever, headache, and muscle aches also may occur.

Why Do Some People Still Get the Flu?

There are many different flu viruses and they are constantly changing. These small

genetic changes can build up over time and result in viruses that your body’s immune system may not recognize. The contents of flu vaccines are reviewed yearly and updated as needed to match spreading flu viruses. Flu vaccines protect against the viruses that research suggests will be most common.

Although not 100 percent effective due to those changing viruses, studies have shown that those who reported getting the flu after receiving a flu shot experienced less severe symptoms than those who did not receive a flu shot. For more on symptoms, see page 8.

“Last year was a tough flu season, with more severe illness in both adults and children and higher rates of hospitalization nationally,” Wilson said. “Vaccination can reduce the severity of headaches, body aches, and fever if you do get the flu. For those with chronic medical problems who are at risk for more severe flu, the vaccine can be lifesaving. Getting the vaccine not only protects you, but also protects those you work with and members of your family.”

For more information on the flu and flu vaccine, listen to the healthcasts “Why Should I get a Flu Shot?” and “How Do I Know if it’s the Flu?” at yalehealth.yale.edu/healthcasts.

Flu Shot Schedule

- ◆ Flu shots are free for all Yale staff, faculty, students, seniors and Yale Health members.
- ◆ Adults and children over 5 years of age can go to any of the flu clinics.
- ◆ **Children 6 months through 4 years** can ONLY go to the flu clinics offered at the Yale Health Pediatrics Department.
- ◆ Children under 18 years old must be accompanied by a parent or guardian.
- ◆ High dose flu vaccine is available at all of the flu clinics **except** the ones at the Yale Health Pediatrics Department.
- ◆ All flu clinics are available on a walk-in basis for Yale Health members, Yale University employees, and Yale University students.

5 years and older	Mon. Oct. 1* 10 am to 3 pm Yale Health Center, 1st Floor	Wed. Oct. 10 10 am to 3 pm Yale School of Medicine, Harkness Lounge	Fri. Oct. 19* 10 am to 3 pm Yale Health Center, 1st Floor	Tues. Oct. 30* 10 am to 3 pm Yale Health Center, 1st Floor	Fri. Nov. 2 10 am to 2 pm West Campus, School of Nursing	Tues. Nov. 6 10 am to 3 pm Yale School of Medicine, Harkness Lounge	Thurs. Nov. 15* 2 pm to 7 pm Yale Health Center, 1st Floor	Tues. Nov. 27* 2 pm to 7 pm Yale Health Center, 1st Floor
	Sat. Oct. 13 9 am to 1 pm Yale Health Pediatrics, 3rd Floor	Wed. Oct. 24 4:30 pm to 7 pm Yale Health Pediatrics, 3rd Floor	Sat. Oct. 27 9 am to 1 pm Yale Health Pediatrics, 3rd Floor	Sat. Nov. 17 9 am to 1 pm Yale Health Pediatrics, 3rd Floor	Sat. Dec. 1 9 am to 1 pm Yale Health Pediatrics, 3rd Floor			

* On these dates Flu FIT home-based colon cancer screening kits will be available for eligible adults with a Yale Health primary care provider.



We read all written comments, share them with our staff, and use your suggestions to improve performance across the organization.

FROM THE DESK OF PAUL GENECHIN, MD

A patient-centered healthcare organization not only collects patient feedback, but also acts on it. We know that patient surveys are not perfect tools and you may not realize the importance of submitting them. However, surveys provide invaluable information to supplement the feedback you share with us through the Patient & Family Council, comment cards, interactions with Member Services, and other sources of member communication. My hope is that you will be more eager to complete our survey if you know what we do with your feedback.

Yale Health surveys its members through Press Ganey, a company that has administered surveys on behalf of healthcare organizations for more than 30 years. Press Ganey aggregates your responses and provides us with sophisticated reporting to track our progress from your point of view. We look at the big picture, and we drill down to granular data that our staff uses to guide changes to our practice. We read all written comments, share them with our staff, and use your suggestions to improve performance across the organization. **We measure access to care, ease of making appointments, specifics about visit experience, performance of individual staff members, ease of using our facilities such as the lab, radiology and pharmacy, along with many other aspects of your care experience.**

One of the tenets of patient centeredness is transparency, defined as exchanging information with you so that you understand as much as possible about your care. **In our quest for greater transparency, we share our Press Ganey data with you on our website at yalehealth.yale.edu/resources/we-hear-you so that you can see the information you have provided for our use.** You will notice that many of these metrics trend in a favorable direction. This is not because we share only positive results. In reality, we see improvement in these areas because we are using your feedback to help guide us in better meeting your needs.

A good example is the markedly positive trend in patient experience at our Pharmacy where we measure the friendliness and courtesy of staff, ease of obtaining refills, and wait times. The positive trend with a 10 percent improvement in average score from 2015 to 2017 has been the direct result of using your feedback to simplify and improve our pharmacy system. This included moving to one line for all services, investing in new point of sale registers, and using machines that more quickly dispense your medications.

Nearly 8,000 of our members completed surveys in 2017 and we aim to increase this number significantly. I hope that by communicating our results, you understand why we ask for your feedback and the importance of you sharing it with us.

Please look out for these surveys and take a few minutes to tell us your perceptions to help us continue to identify ways to improve your care.

To read more on patient surveys, see page 6.

Director



Opioids are a class of drugs naturally found in the opium poppy plant. Some prescription opioids are made from the plant directly and others are made in labs using the same chemical structure. Opioids contain chemicals that relax the body and can relieve pain.

Helping to Combat the Crisis

Yale Health partners with patients to manage opioid use

ON OCTOBER 26, 2017, Health and Human Services Secretary Eric D. Hargan declared a nationwide public health emergency regarding the opioid crisis, as requested by President Donald Trump. When you look at the numbers, words like “emergency” and “crisis” seem more than appropriate.

Every day, more than 140 Americans die from drug overdoses, 91 specifically due to opioids. Connecticut is among the top 10 states with the highest rates of opioid-related overdose deaths. From 1999 through 2012, the death rate in Connecticut hovered near the national average. Through 2016, those numbers increased from 5.7 deaths per 100,000 persons to 24.5 deaths per 100,000 persons, according to the National Institute on Drug Abuse. The national average in 2016 was 13.3 deaths per 100,000 persons.

“For years, the medical community has been focused on treating pain almost to the point that it was looked at as taking any other vital sign,” said Dr. Borislav Meandzija, chief of the Behavioral Health Department. “The medical community has taken advantage of more and more opioid medications available. That might have led to an overprescribing of (opioid) pain medications.”

In response to a new state law and to ensure patient safety, Yale Health implemented a Safe Pain Management (SPM) Program. The program took effect January 1st, 2016 and includes any patient who is prescribed an opioid pain medication on a long-term basis.

Opioids include morphine, codeine, and related drugs such as oxycodone (OxyContin, Percocet), hydrocodone (Vicodin), and tramadol (Ultram).

The SPM program applies only to patients who are taking long-term, daily opioid medications, although Yale Health takes short-term use just as seriously. The program involves careful risk assessment prior to starting opioid medications and consideration of alternative methods for managing pain, including lower-risk medications, physical therapy, and counseling.

“Now that opioids and opioid addiction have become topics in the medical community, including at Yale Health, we have started instituting programs to continue prescribing to the people in need, but being mindful not to overprescribe,” Meandzija said.

Patients who are taking long-term, daily opioid medications review and enter into a signed pain management agreement outlining their responsibilities with their primary care provider (PCP). They must have at least quarterly face-to-face visits with their prescribing clinician and prescription orders will be scheduled at those visits, if appropriate. Prescriptions will generally be for a 28-day supply and early orders will not be permitted.

Peter Steere, RPh, MBA, director of pharmacy and medication management and patient-centered innovations, said entering into this agreement might help relieve patient anxiety around these prescriptions, particularly when it comes to their next order.

“Often times, there is an anxiety about the next prescription because they are dealing with real pain,” Steere said. “When a patient goes into these programs, they tend to do really well because there is an agreement that we acknowledge your pain and we’re committed to helping you with it. Some of that anxiety goes away because that guesswork about your provider writing the next prescription goes away. There’s an expectation set.”

As part of the SPM program, patients who are prescribed these medications also need to submit urine samples at least once a year, and possibly more often, to screen for appropriate use of the medication.

The new state law requires clinicians to check a state database quarterly that records all controlled substances prescribed to a patient by all providers, including those outside of Yale Health.

“While not all pain requires opioids, and, in fact, some sources of pain are better managed in other ways, these drugs exist for a reason and, when used properly, are really important,” Steere said. “Yale Health’s responsibility is to find a combination of pain management that works and provides relief without introducing new issues.”

Yale Health, in partnership with the Yale Health Pharmacy, has used nationally recognized guidelines in setting up the program. To further enhance safety for chronic opioid pain patients, Yale Health clinicians are following a national standard of making the prescription drug Narcan available to patients. Narcan is a rescue

drug that can reverse the toxicity associated with an opioid overdose and can save lives when administered in a timely fashion.

“In the short time since making changes to this category of care, we’ve found both patients and clinicians to be much more confident in how they can better manage pain,” Steere said.

Opioid addiction includes both a physical and mental aspect. The potential for misuse or addiction increases the longer an opioid is prescribed and used, causing an increased tolerance. Once your body has adjusted to a certain level of opioids, you may develop withdrawal symptoms upon stopping use including nausea, sweating, and anxiety. The mental part of

“Yale Health’s responsibility is to find a combination of pain management that works and provides relief without introducing new issues.”

Peter Steere, RPh, MBA, director of pharmacy and medication management and patient-centered innovations

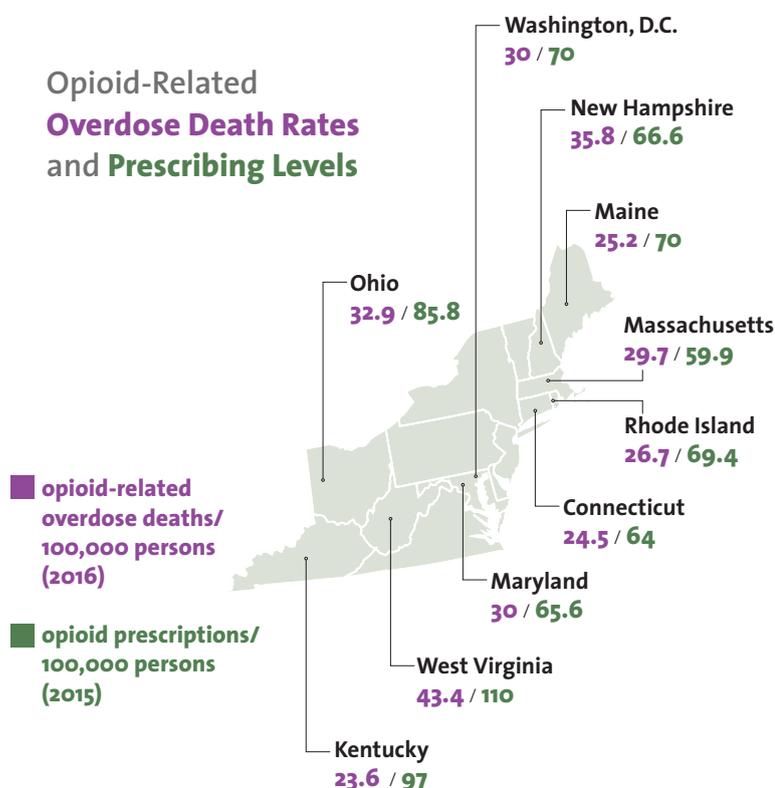
addiction is that you may feel taking the medication is helping you relieve other concerns such as stress, which may make you want to continue taking that medication, even if not for its intended purpose.

“The combination of these two things can quickly lead, in some people, to being dependent on opioids even when the pain is gone,” Meandzija said. “The mind is very good at rationalizing. Nobody intends to become addicted to opioids, but one step leads to another and people can slide into it.”

Mental health and addiction services can range from inpatient detoxification, which lasts a few days, to inpatient substance abuse rehabilitation, which could last two to four weeks. There are also intensive outpatient programs as well as various medical treatments and maintenance medications available for those dealing with opioid abuse.

If you have any questions or concerns regarding your use of opioid medication, speak with your PCP to help determine the best resources available to you.

The best way to **dispose of unused opioids** is to take them to a local police station with a drug box disposal program. For available locations, visit ct.gov/deep and search “medication disposal”.



OB/GYN Welcomes New Clinician



Melanie Mund, MD

OBSTETRICS AND GYNECOLOGY

Melanie Mund has joined the Obstetrics and Gynecology Department after spending the last three years caring for patients at Naugatuck Valley Women's Health Specialists in Middlebury and Saint Mary's Hospital in Waterbury.

She earned her undergraduate degree in English from the University of Pennsylvania in 2004, her Master of Bioethics Degree from the University of Pennsylvania School of Medicine in 2006, and her MD from the State University of New York Downstate College of Medicine in 2011. Mund completed her residency in the Department of Obstetrics and Gynecology at the University of Connecticut in Farmington.

Her clinical skills and interests include general obstetrics, midwifery collaboration, high-risk pregnancy, minimally invasive surgery including robotics, and medical ethics. She has served on several teams and committees related to medical ethics including the Curriculum Design Team for the Hofstra University School of Medicine: Ethics, Humanism and Professionalism. Mund was also a Hospital Ethics Committee member for the University Hospital of Brooklyn/SUNY Downstate Medical Center, Kings County Hospital, and St. Mary's Hospital in Bayside, NY. She was a founding and steering committee member for the Osler Society of New York, which organized programming to promote physicianship, professionalism, medical ethics, humanism, and foster an appreciation of the history of medicine and its role in medical education.

Mund holds certifications from the American Board of Obstetrics and Gynecology and the United States Medical Licensing Examination.

We Hear You

FROM AMAZON TO UBER, you have probably received more email invitations to “tell us about your experience” than you can remember. More times than not, you most likely hit the delete button pretty quickly.

Perhaps you feel that your personal opinion is not worth sharing or that it will not make a difference or lead to any change. Maybe you had a positive experience and only let someone know when your experience was unsatisfactory.

Whatever the reason, Yale Health has a small favor to ask of you. Please do not hit delete.

PARTNERSHIP FOR PATIENT-CENTERED CARE

Gathering and sharing your feedback is critical to the process of providing the highest quality care possible. Press Ganey, an independent company based in South Bend, Indiana, conducts online surveys on behalf of Yale Health. The

organization works with more than 26,000 healthcare facilities nationwide, including over 60 percent of all U.S. hospitals.

Surveys are sent a few days following your appointment in all primary care departments and most specialty departments. If you see the same provider within a 90-day period, you will only receive a survey for that first visit. Your responses are kept confidential, unless you choose to identify yourself and request follow up by a Yale Health team member.

Yale Health has a small favor to ask of you. Please do not hit delete.

Yale Health is committed to transparency as part of its Partnership for Patient-Centered Care initiative. As part of that commitment, year-over-year survey results are now being shared with you at yalehealth.yale.edu/resources/we-hear-you.

Press Ganey administers two types of surveys for Yale Health. Patients seen in primary care and specialty departments receive the Medical Practice survey. Patients seen in Acute Care receive the Urgent Care survey.

Each survey asks about your experience in the areas of access, moving through your visit, nurse/assistant, care provider, personal issues, and overall assessment. It also asks about your experience with lab tests, Diagnostic Imaging (radiology), and the Pharmacy, whether or not you used those services during the appointment date being surveyed. If you did not use those services on the appointment date, you can simply skip those sections.

All survey results are combined to offer a “picture” of the typical patient experience. Yale Health uses these results to identify areas that need attention in order to improve your experience.

To read a message on patient surveys from Dr. Paul Genecin, see page 3.

END-OF-LIFE CARE**What is an Advance Directive?**

⊕ An Advance Directive is a legal document that states your wishes for end-of-life care. The form includes assigning a healthcare representative and establishing a living will.

Assigning a healthcare representative includes naming a person who will be able to communicate with your healthcare team on your behalf if you become ill or unable to do so. This is typically a family member or close friend. A healthcare representative cannot be a healthcare provider.

A living will establishes your care choices and treatment preferences for different situations so your loved ones understand your wishes when that time comes.

Yale Health's Advance Directive is established in conjunction with Yale New Haven Health System. Completing and submitting the form is free and requires two witness signatures to make it legal. No lawyer or notary is required. You can change your wishes or healthcare representative at any time.

Forms and educational materials are distributed to every person age 65 and older who has a visit with their primary care provider at the Yale Health Center.



The form is also available online at yalehealth.yale.edu/resources/forms.

Slawomir Mejnartowicz, MD
Internal Medicine

LIFESTYLE**How Can I Manage My Blood Pressure?**

⊕ Blood pressure measures the force of the blood against the arteries when your heart contracts and relaxes. The top number, or systolic blood pressure, measures when your heart contracts while the bottom number, or diastolic blood pressure, measures when your heart relaxes.

Recent guidelines now consider a blood pressure above 120/80 to be elevated. To help control high blood pressure, focus on lifestyle changes including maintaining a healthy weight, exercising regularly, not smoking, limiting your alcohol intake, managing stress, and eating a healthy diet. Dietary measures such as limiting salt intake, particularly in processed or packaged foods, and eating more foods high in potassium such as fruits and vegetables have been shown to help reduce high blood pressure. A variety of medications are also available, if needed, that would be part of a care plan along with those lifestyle changes.

You can keep track of your own blood pressure at home with a blood pressure monitor. They are available on the market and at the Yale Health Pharmacy. If you are going to purchase a blood pressure monitor, ones



that measure on the arm are preferred over measuring on the wrist or finger. Blood pressure numbers tend to be higher in a medical office so it can be helpful to see some readings from home at different points of the day.

Jennifer Brackett, APRN
Care Management

Making the Rounds

**HEALTH AND WELLNESS INFORMATION
FROM YALE HEALTH STAFF**

PROTECTION**How Can I Protect Myself from HIV?**

⊕ The Centers for Disease Control and Prevention estimate there are at least one million people with active HIV living in the U.S., with about 40,000 new cases every year.

Of those new cases, roughly 60 percent are a higher-risk group comprised of young men ages 14-24 who have unprotected anal sex. Also at risk are people who use intravenous drugs, have sex with an HIV positive partner, and participate in high-risk sexual behaviors such as being sexually active with sex workers or with multiple partners without knowledge of their HIV status.

HIV screening is important and screenings are available through Yale Health. Consistent use of condoms is very effective in preventing the transmission of HIV, but despite these options, the number of new infections each year still has not dropped.

PrEP (pre-exposure prophylaxis) is a newer option that has been shown to be over 95 percent effective, if taken daily, in stopping transmission if you are exposed to HIV. It is a daily oral medication that can be used as part of a treatment plan for those infected with HIV and was released for pre-exposure use in 2012. It has very few side effects, including nausea and fatigue, which typically go away within a few weeks.

You can stay on the medication as long as you are at risk for exposure. Even if you are taking PrEP, you should continue to use a condom during sexual activity.



The biggest limitation of PrEP is that most people do not know that it is available.

Gillian Ralls, PA-C
Student Health



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

YALE HEALTH CARE

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KEEP IN MIND

Pharmacy Academic Hours

The Pharmacy has resumed academic year hours effective Tuesday, September 4th.

Monday – Friday 8:00 am–6:30 pm
Saturday 8:30 am–3:30 pm

Cold or Flu?

SIGNS & SYMPTOMS	INFLUENZA	or	COLD
symptom onset	ABRUPT		GRADUAL
fever	USUAL		RARE
aches	USUAL		SLIGHT
chills	USUAL		SOMETIMES
fatigue, weakness	USUAL		SOMETIMES
sneezing	SOMETIMES		COMMON
stuffy nose	SOMETIMES		COMMON
sore throat	SOMETIMES		COMMON
chest discomfort, cough	COMMON		MILD TO MODERATE
headache	COMMON		RARE

Source: Centers for Disease Control and Prevention

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