

Dying for Better Care

A recent article in JAMA, *The Journal of the American Medical Association*, concluded that dying patients did not commonly receive enough pain medication and emotional support. The writers interviewed the survivors of more than 1,500 people who died in hospitals, nursing homes and at home in 22 states.

Families also complained that communication and even basic respect were often lacking from the professionals providing care.

The findings, said the lead author, Dr. Joan M. Teno of Brown Medical School, suggest that "changing the culture of dying" will require a vast amount of work. Sixty-seven percent of the people whose cases were examined died in hospitals or nursing homes.

Inadequate pain management was 60 percent more likely to occur in a nursing home than in a patient's home, where the patient was also receiving hospice care, the study reported. Survivors whose loved one died in a nursing home or hospital often felt that not enough emotional support was provided to them as well.

Please welcome these new Tyler employees:

Mackiw, Debra
Occupational Health

Taylor, Ernest
Radiology

Williams, Dawn LPN

McGowan, Edward
Security Guard

Dulsky, Patsy
Dietary Aide

Bug of the Month

Kathy Ritter, RN, *infection control manager*



Holiday humbug! A time for

family, they say. Well, how about my family? It's not bad enough that my name means "creeping." I can't remember our last invitation. Truth is, invitations aren't too important to us... we're on board in one out of five mobile homes over the age of 12, anyway. That's about 45 million... better demographics than Starbucks.

The eight of us are a close-knit bunch (leave room in your "contact" manager - we keep finding new skeletons in our closet). We're a little sexist, favoring the female persuasion 50% more often than the clueless other option. And here's the key to our family legacy... we never go away! Once on board, always on board. We especially relate to your most immortal of cults... I think you call them teens! You might want to lay some CEUs onto this group, like, education fer shur. Check out www.asha.org to help stop the spread!

As a family, we tend to gang up on our hosts. Lots of road trips up and down neurons, that sort of thing. We can drop in, yet remain silent, lying low and waiting for something to set us off. Stress, fatigue, taxes... or we can be screamers, going ballistic many times a year,

causing no end of owies and emotions. Some of us are simply as bad as we want to be.

Intros, please. I'm the Simplest. You can call me "1." Then there's "2." (You can tell that Mom wasn't very creative in the name game.) Third in line is "Z." His nickname has something to do with roofing. Next comes EB. Took two people to name this lethargic loafer. CM is fifth. Don't even try to spell his real name... just keep your immunos intact. Lastly, there's 6, 7 and 8, along with their unsavory associates.

How do we get around? Some of us are partial to skin-to-skin. Others like the STeeDee route. Still others waft about as airborne-agains. We're all pretty opportunistic, especially CM.

So, this holiday season, may your sleigh bells ring, but you may want to keep your fa-la-la's protected. For a free trip to Paris, or a special gift--whichever is less--name my pathogenic partridge family.

The correct answer to January's Bug of the Month was Influenza. Meg in Radiology was the first correct answer, but declined a prize since she won the month before. Two additional winners were Barb in HIM and Amy in HR. Both received a fabulous prize. So... don't be shy. Just dial ext 242 with your best guess.

TYLER *Times*

A publication for the employees of Tyler Memorial Hospital

February 2004

More patients, more \$?

If you think the hospital has been busy lately - and because of that, we should be doing better financially - well you would be sort of right, according to Tyler's financial gurus.

"Although we are still not where we would like to be financially," explained Thomas Dougherty, chief financial officer, "we have seen some small improvements in our bottom line over the last few months."

Mr. Dougherty pointed out that it is almost impossible to predict the level of healthcare revenue for any given month. "In recent months our deficit has been significantly less, compared to last year at the same time and I am encouraged by that; but we can never be certain what tomorrow will bring," he cautioned.

Dan Diljak, accounting manager, explained that Tyler's fiscal year runs from July through June. For the first six months, ending in December, Tyler had 4,300 patient days. If this level of activity continues for the remainder of the year, Tyler will record 8,600 patient days - which is 400 more patient days than last year's 8,200.

"We ran a deficit of \$130,000 in December," Dan explained. "Half of that amount was the holiday bonus and the rest reflects the costs associated with hiring temporary personnel for openings in the OR and nursing; but we are definitely moving in the right direction," he assured.

In 2003, Dan and Bill Milligan, president/CEO, hosted informational seminars for employees to explain the hospital's financial position. "I feel those sessions helped get us all on the same page," Dan explained. "I think everyone understands now that we have certain fixed expenses that we must meet whether we have 15 patients or double that amount."

The hospital is budgeted for 23 patients a day, so by maintaining or exceeding that number, controlling expenses and reducing dependency on agency personnel, Tyler's position becomes stronger. Last year March and May were the hospital's busiest months.

Adding to the complexity of the hospital's financial profile, is the need for not only enough patients, but the right mix of patients, explained Mr. Milligan. "The right case mix, which ideally should include a variety of surgical procedures and medical admissions, is also crucial to profitability," he explained.

"When we look at the formula for success, we need the right case mix and both inpatient and outpatient volumes to be good," he said. "Healthcare financing is pretty complicated."

Dan was appreciative of the hard work of some of Tyler's managers and employees in monitoring and reducing expenses. "Working together, we can continue to move the hospital forward," he said.

Please...please

Lech's Pharmacy, very generously, provides a variety of magazines for the front lobby. The most recent edition of each magazine is placed in a green plastic holder and displayed in a special rack, also provided by Lech's.

Well folks, the magazines and the holders have almost all vanished. If you have a holder, please return it to the front desk or PR. Feel free to use the magazines, but please do not remove the most recent editions from their folders or the lobby. Thank you for your cooperation.

Gladys Bernet

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Dear Tyler

In December, I was brought to the emergency department with a broken arm. The following day, four pins were placed in the arm.

I would like to thank all of you from the emergency department to the operating room - and everyone in between for your kind and professional care. You made a difficult time easier.

Name withheld for patient privacy

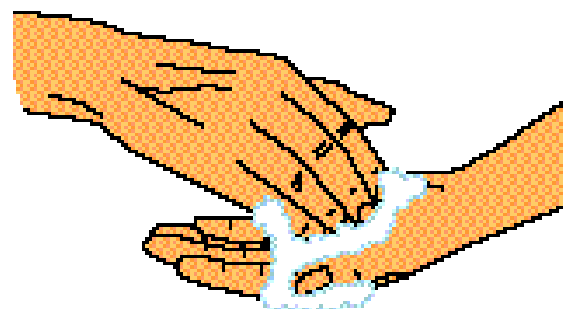
If you have a letter you would like to share, please send it to the Public Relations Department. Names may be withheld to protect the privacy of our patients. Letters may be edited for space and/or clarity.

Practicing Good Respiratory Hygiene

Use a tissue whenever possible, if you cough or sneeze.

If tissues aren't available, please cover your mouth with your hand or arm.

*Wash or use alcohol gel after coughing, sneezing or nose blowing.



Masks are available in the hospital if you need one.

When those around you have respiratory symptoms, wash fre-

Blood Drive for Jill Wetzel

March 10, 2004
10 A.M. - 4 P.M.

Hospital Parking Lot

Sign-up sheet will be available in February. Watch for posters.

Brain teasers

1. What question can you never answer "yes" to?
2. What statement can you never make?
3. How would you rearrange the letters in the words "new door" to make one word?
4. What word starts with "is", ends in "nd" and has "la" in the middle?
5. My friend says his grandmother is younger than his mother. How can this be?
6. How many grooves are there on each side of a standard 33 1/3 record album that has six songs on each side?

Atkins quitters face weight gain

Tyler dieters on the Atkins plan find that the weight comes off fast as long as they follow the rules correctly.

It sounds simple. You eat almost no carbohydrates, but you can eat steaks, burgers, bacon, cheese, and eggs as long as you don't gorge yourself.

The problem, for most Atkins dieters, is that they miss fruits, vegetables, bread, and sweets. When they add any of these into their daily fare, along with the burgers and bacon, they can gain weight instead of losing it.

Atkins people who can maintain the diet requirements until meeting the lifetime maintenance phase have more choices. It can take months to get there, however, and people give up or cheat.

Other diets don't penalize you much for sneaking a piece of cake or a dinner roll. On the Atkins, however, the fat-burning state is easily broken by cheating.

At Atkins Health & Medical Information Services, they say a piece of cake won't ruin your diet, but you lose some serious fat burning for a couple of days. If you give in twice a week, you're in trouble.

Some employees are now trying the South Beach Diet, which though similar, allows for more fruits and vegetables. Whatever works.

A Minute with Milligan

Once again January has turned into one of those damn cold months, with February not far behind. I don't think we have had the high amounts of snow as in past years, but nonetheless, visions of green grass and warmer days persist.

In my past life, I lived in Vermont, where the winters are said to end in July and begin again in August. Actually, the first two weeks of July are relatively warm - similar to our climate, but by September 1, there is always the hint of cold weather already arriving.

How cold is it in Vermont? It is so cold in Vermont, that there is a legend that tells how families survived the long, brutal winters by giving a few family members a dose of a special medicine, which put them into a deep

"...even two-feet of snow, doesn't keep them from making it in to care for our patients." *Bil Milligan*

trance. The unconscious individuals were then buried in the back yard and covered with pine boughs. When spring arrived, they would be dug up, thawed out and brought back to life by being soaked in a large tub of warm water.

At this point, you are probably asking what this story has to do with anything? The answer is of course nothing, except it appears to me that Pennsylvanians don't seem to have the time or inclination to be hibernating - except when the snow is two feet deep. And for our staff, even two-feet of snow, doesn't keep them from making it in to care for our patients.

Every day some event, note or letter arrives that reminds me how great a staff we have here at Tyler. Trekking through the snow and sub zero temperatures makes your dedication and sac-



rifices more obvious, but all year long, I appreciate the efforts of each and every one of you. Thank you.

On another subject, I'd like to comment on the recent news articles that report about the money that Tyler, and other hospitals in the region, will be receiving from increased Medicare reimbursements. While it is true we are probably getting funds, the question of how much it will be - and for how long, probably won't be known for sometime.

Malpractice problems, on the other hand, have not gone away and will continue to threaten physicians and hospitals alike because of the constant increases in premiums. Articles published across the state, constantly identify a physician here or there leaving the state because of these premium increases.

Another topic you will be hearing more about over the coming months, is the most recent requirement of the federal government that hospitals furnish information on the quality of their operations. In addition, Pennsylvania is requiring hospitals to provide more information on infections, such as SARS, TB and patient safety data.

All of these issues and changes are combining to create another year of challenges for Tyler and our hospital family. Stay tuned.

You can contribute to heart health

...a reminder from the Tyler Memorial Hospital Cardiac Rehab Program.

Winter can be a time of inactivity, overeating and weight gain. This hibernation behavior can contribute to heart disease, which is still the leading cause of death and disability in the United States. Every year over one million American men and women experience a heart attack or chest pain (angina). Of that number, approximately 450,000 will die.

Cardiac Rehabilitation, a medically supervised program of exercise, education and support for persons who have had a cardiac event, is being celebrated at Tyler Memorial Hospital the week of February 8 to 14 and is a time for everyone to think about cardiac health.

According to Joyce Enders, RN, cardiac rehabilitation nurse manager, cardiac rehab provides a safe, supportive environment in which a patient can maximize his or her recovery following a heart attack or heart surgery.

“Cardiac events are frightening for both the patient and family,” Joyce explained. “Our program recognizes those feelings and works with patients to ease them into a supervised exercise program, help them create a healthier lifestyle and build their self confidence, enabling a safe return to an active life.”

Joyce explained that making lifestyle changes is a challenge, but the benefits are well worth the effort. By establishing a pattern of appropriate exercise, healthy diet, reducing stress and maintaining the medication regime directed by the physician, the chance of a second event occurring can be minimized - and in some cases, heart damage can even be reversed.

The American Heart Association identifies risk factors for developing heart disease. Although you cannot change your age, gender or family history, you can reduce your risk by modifying the other risk factors.

The risk factors are:

- * *Age: (men over 45 and women over 55)*
- * *Gender: (men are at a greater risk for heart disease)*
- * *Family history: (heart disease has a familial link)*
- * *High cholesterol:*
- * *High Blood pressure:*
- * *Diabetes: (Two - three times more likely to have cardiac event)*
- * *Smoking:*
- * *Obesity:*
- * *Physical inactivity:*

Joyce points out that physical inactivity is one of the easiest risk factors to change. Most Americans don't get enough exercise from daily work and leisure activities and evidence suggests that moderate to vigorous exercise provides both short and long-term benefits for the heart, such as:

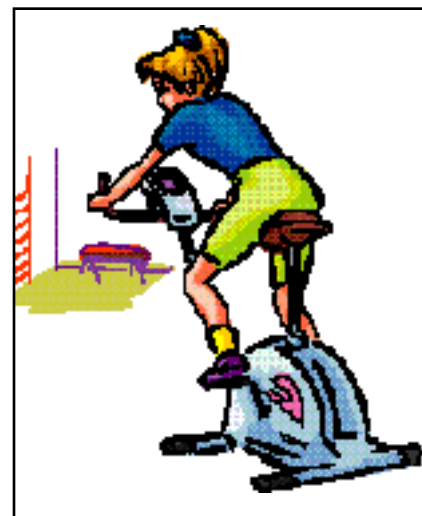
- * *More energy and capacity for work and leisure activities*
- * *Greater resistance to stress, fatigue, anxiety and depression*
- * *Increased stamina, strength and flexibility*
- * *Weight loss and reduction of body fat*
- * *Lower blood pressure and cholesterol levels*
- * *Reduced risk of heart attack and stroke*

Are there risks associated with exercise?

- * *Muscle and/or joint injuries (but these can be prevented or easily treated)*
- * *Heat exhaustion on hot days (this is rare, especially if the proper precautions are taken)*
- * *Aggravation of existing or hidden heart problems*

How do I start?

- * *Talk with your doctor to make*



sure exercise is right for you.

- * *Find activities that are fun. Walk, ride a bike, dance! Even everyday activities, like working in a garden and cleaning the house have benefits.*
- * *Wear clothes and shoes that are comfortable.*
- * *Start slowly and warm up your muscles.*
- * *Find an exercise partner.*

How do I know I am exercising correctly?

- * *Start your activities slowly and build up speed and intensity.*
- * *Exercise at an even pace. You should still be able to talk while exercising.*
- * *Remember, you are not in a contest.*
- * *Work up to a total of 30 minutes of activity on most days. You can do 15 minutes twice or 10 minutes three times a day if you prefer.*
- * *Always cool down for a few minutes when you stop.*
- * *Stretch your muscles at the end of each workout.*
- * *Stay active. Make exercise a habit.*

Tyler's JR Volunteer Program

It's that time of year when I start gearing up for the annual migration of high school students into the hospital. Applications for the Tyler Junior Volunteer Program will be available from the Volunteer Office at the end of February. Applications are also sent to the local school districts in March. All students 14 years of age and older, who have completed the eighth grade, are welcome to apply.

Students need to complete the application, along with a parental consent, physician OK and a reference from their guidance counselors. Applications are due back to my office by May 1, 2004.

Interviews are arranged in cooperation with the students and the school districts and are held in

the counselors' offices. If accepted into the program, students receive a confirmation letter in June outlining the orientation and program start dates.

Junior volunteers are usually assigned to Tyler Wing and help the nurses by passing water, making beds and delivering meal trays.

They are also assigned to patient transport, copying and limited filing. Other areas where juniors have worked are HIM, maintenance & physical therapy.

If you know of a student who would be interested in this program, please contact me at extension 276. I'd also like to hear from department managers who anticipate a need for a junior volunteer this summer.

Maria Thorne, volunteer director

Where are you parked?

The brutally cold winter temperatures and sometimes icy or snow-covered parking lot make it very tempting to park a little closer to the hospital. But please don't.

When you park in the Emergency, Outpatient or Visitor spaces, you make it more difficult for a patient or visitor to access the hospital. In addition, hospital policy forbids employees to park anywhere but the employee lots. This policy includes non-Tyler employees working on the third and fourth floors, Communication Center staff, Dialysis personnel, students, etc.

If a temporary medical condition makes it impossible to use the employee lots, please discuss your concerns with Ron Coolbaugh, maintenance department.

Tyler is committed to excellent customer service and we can't provide that if visitors have difficulty parking.

Your cooperation is expected and appreciated.

Social security calculation

Social Security retirement benefits are determined based on your highest 35 years of earnings covered by Social Security, indexed for inflation.

To get the top benefit of \$1,741 a month in 2003, you must have earned and paid Social Security on the maximum amount subject to Social Security in each of those 35 years. For more information, visit www.ssa.gov/pubs/1