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New 3-Month Trial to *DynaMed*

The Medical Library is pleased to offer a free trial to EBSCO's *DynaMed* database from July 1, 2010 through September 30, 2010. *DynaMed* is a clinical reference tool created by physicians for physicians and other health care professionals for use primarily at the point-of-care. It is designed to provide the best available evidence to support clinical decision-making and includes clinically-organized summaries for more than 3,000 evidence-based clinical topics. *DynaMed* was selected because it is updated daily; all information is evidence-based; provides unlimited free access remotely and via mobile devices; is quick and easy to read; and, is concise and to the point.

Features of *DynaMed* include, but are not limited to:

- Clinically-Organized, Evidence-Based Topic Summaries
- Drug Information
- Detailed Reference Support
- ICD-9/ICD-10 Codes
- Continuing Medical Education (CME)
- Daily Updates
- Patient Information
- Unlimited Access (Onsite and Remotely)
- Full-Text Journals
- Medical Calculators
- EMR/HER Integration
- Smartphone/PDA Access

DynaMed is updated daily and monitors the content of over 500 medical journals and systematic evidence review databases directly and indirectly by using many journal review services. Each publication is reviewed cover-to-cover, and each article is evaluated for clinical relevance and scientific validity. The new evidence is then integrated with existing content, and overall conclusions are changed as appropriate representing a synthesis of the best available evidence. Through this process of systematic literature surveillance, the best available evidence determines the content of *DynaMed*.

To access *DynaMed* on the internet enter <http://search.ebscohost.com>. A link is also available on Torrance Memorial's *Focal Point* page. For user ID, password, additional information and feedback please contact Anita Klecker, Health Sciences Librarian/CME Coordinator, at anita.klecker@tmmc.com or (310) 517-4720.

Medical Executive Committee

The following items were approved at the June 8, 2010 meeting of the Medical Executive Committee:

Department of Medicine

- A. Revised Department of Medicine – Cardiovascular Disease/Cardiology Privilege Card
Revision:
40.05 – Impella 2.5
Qualifications: Cardiologist must hold interventionalist privileges. **Impella rep must be present for first 3 cases.**
Proctoring Requirements: **0-3 must have Impella rep present**

Department of Surgery

- A. Revised Department of Surgery – Orthopedic Surgery Privilege Card
Revision
Fluoroscopy: As required by California Department of Health Services, a current certificate must be submitted and on file in the Medical Staff Department. **Excludes 50.05 – Assistant Surgeon Privileges.**

Credentials Committee – Approvals filed in Medical Staff Services – please see Toni Woodard.

Infection Control/P&T Committee

- A. Med-Surg Transfer Orders
B. Ventilator Pre-Printed Orders
C. OB/GYN Physician's History & Physical
D. Premature Preterm Rupture of Membranes Orders per Protocol
E. Laparoscopic Radical Nephrectomy/Partial Nephrectomy Post-Op Orders
F. Critical Path – Pre and Intra Op: Lap Gastric Banding
G. Day of Admit Pre-Op Orders for Cardiac Surgery

Institutional Review Board – Approvals filed in Medical Staff Services – please see Yumi Lee.

Vascular Medicine Ad-Hoc Committee

- A. Departments of Medicine, Radiology & Surgery – Endovascular Privilege Card
Endovascular Qualifications: To be eligible for Endovascular privileges, the applicant must meet the following qualifications:
Education: M.D. or D.O.

Training:

1. Applicants to the medical staff must be Board Certified or meet the requirements for obtaining board certification with education, training, and experience as required by the board in Cardiovascular Diseases, or Radiology or Surgery. Boards recognized to satisfy the above requirements are those boards approved by the American Board of Medical Specialties, or the American Osteopathic Board.

and

2. Written documentation of the satisfactory completion of residency and/or fellowship training in one of the following: Cardiovascular Diseases, Radiology, Vascular Surgery, Cardiothoracic Surgery*.

Documentation: See Qualifications

42.25 – Peripheral Angioplasty and other Percutaneous Peripheral Vascular Intervention includes Aortic Arch Orifice Lesions (Endovascular Procedures, such as Percutaneous Transluminal Angioplasty (PTA), implantation of stent and/or vena cava filter, thrombolysis, embolization, stent-graft repair, angiogram, angiography, and atherectomy)

Qualifications/Criteria

SPECIFIC PROCEDURAL TRAINING & EXPERIENCE:

Specific training or experience in peripheral diagnostic angiography and peripheral percutaneous transluminal angioplasty may be obtained through one of the following:

Continued on Page 5...

Torrance Memorial Medical Center Medical Staff Calendar

July

Monday	Tuesday	Wednesday	Thursday	Friday
			1 7:00a Breast Tumor Board..WT-Aud 7:30a Tumor Board.....WT-D 12:30p MSPI.....WT-D	2 7:30a IRB.....WT-D
5 7:00a CV Advisory Board.....WT-D 12:30p Cardiology.....WT-D	6 8:00a Medical Staff Funds.....WT-D 5:00p Intensivist Program.....WT-D	7 7:00a CV Review Conference.WT-D	8 7:00a Breast Tumor Board..WT-Aud 7:30a Tumor Board.....WT-D 12:30p Critical Care.....WT-C 12:30p Pediatric PI.....WT-B	9 7:00a General Surgery.....WT-C 8:00a Oncology.....WT-D
12 12:30p Credentials.....WT-C 12:30p Ophthalmology.....WT-B	13 12:30p Infection Control.....WT-D 6:00p MEC.....WT-D	14 7:00a Anesthesia Dept..... WT-Aud 7:00a CV Review Conference.WT-D 8:30a TCU.....WT-C 12:30p CME Conference....HCC-1&2	15 7:00a Breast Tumor Board..WT-Aud 7:30a Tumor Board.....WT-Aud 7:30a Emergency Dept.....WT-D 12:30p Pediatric Dept.....WT-Aud	16 7:00a Surgery Advisory.....WT-D
19 7:30a Physician Alignment.....WT-B 12:00p Burn & Wound.....WT-C	20 12:30p Medicine Dept.....WT-D	21 7:00a CV Review Conference.WT-D 12:30p CME Conference....HCC-1&2	22 7:00a Breast Tumor Board..WT-Aud 7:30a Tumor Board.....WT-Aud 7:30a Family Practice Dept...WT-B 12:30p Credentials.....WT-C 12:30p Utilization Mgmt.....WT-D	23
26 12:30p Stroke.....WT-D 4:00p Bariatric Surgery.....WT-C	27 12:30p Bioethics.....WT-C 12:30p OB/GYN Dept.....WT-D	28 7:00a CV Review Conference.WT-D 12:30p CME Conference....HCC-1&2	29 12:30p Medical Records.....WT-C	30

CME CONFERENCES



Wednesdays, 12:30 pm
Health Conference Center

Torrance Memorial Medical Center is accredited by the Institute for Medical Quality/California Medical Association (IMQ/CME) to provide continuing medical education for physicians. Torrance Memorial Medical Center takes responsibility for the content, quality, and scientific integrity of this CME activity. Torrance Memorial Medical Center designates this educational activity for a maximum of 1 AMA PRA Category 1 credit™. Physicians should only claim credit commensurate with the extent of their participation in the activity. This credit may also be applied to the CME Certification in Continuing Medical Education.

July 7, 2010
NO CONFERENCE

July 14, 2010
"Pancreatic Cancer"
Oscar Hines, M.D.
UCLA School of Medicine
Commercial Support: None

July 21, 2010
"Cultural Issues & Breast Cancer"
Karen Lane, M.D.
UC Irvine School of Medicine
Commercial Support: None

July 28, 2010
"Prostate Cancer"
Ernest Agatstein, M.D.
UCLA School of Medicine
Commercial Support: None

August 4, 2010
NO CONFERENCE

August 11, 2010
"Advances in Breast Cancer Diagnosis and Treatment"
Christy Russell, M.D.
USC School of Medicine
Commercial Support: Sanofi-Aventis

Thelma McMillen Center and Betty Ford Center present:
Frontiers in Addiction Treatment Series

“Gambling Addiction and Recovery Process”

Timothy Fong, M.D.

Director UCLA Addiction Medicine
Co-Director UCLA Gambling Studies

Tuesday, July 20, 2010

9:00 a.m. – 11:30 a.m. (registration 8:30 a.m.)

Torrance Memorial Medical Center
Health Conference Center Rooms 1 & 2



HIPAA TIP

Close curtains and speak softly in semi-private rooms when discussing treatments and administering procedures.

Check with your patient prior to discussing PHI with your patient in the presence of others. You may need to ask family members and / or visitors to leave the room at the patient's request.

The Medical Staff Newsletter *Progress Notes* is published monthly for the Medical Staff of Torrance Memorial Medical Center.

David Rand, M.D.
Chief of Staff

Robin S. Camrin, CPMSM, CPCS
*Administrator, Medical Staff Services
Performance Improvement*

Physician Roster Updates

Change of Address

Sheila Arzani, M.D.
Pediatrics
23441 Madison St #305
Torrance, CA 90505
Phone: (310) 396-9999
Fax: (310) 664-8901

Juma Bharadia, M.D.
Interventional Cardiology
22617 Hawthorne Blvd.
Torrance, CA 90505
Phone: (310) 378-3993
Fax: (310) 378-5335

Michael Kammerman, M.D.
Internal Medicine
3330 Lomita Blvd. – TMHA 1st Floor
Torrance, CA 90505
Phone: (310) 891-6623
Fax: (310) 891-6673

Change of Phone/Fax

Stephen Marer, M.D.
Infectious Disease
Phone: (562) 933-2000
Fax: (562) 933-0125

Jerry Finklestein, M.D.
Pediatrics
Phone: (562) 728-5000
Fax: (562) 933-1815

Norma Sarao, M.D.
Oncology
Fax: (310) 371-3359

Gene Kim, M.D.
Electrophysiology, Cardiology
Fax: (310) 372-6504

Leave of Absence

Wasima Masoodi, M.D.
Surgery

Resignation

Jia-Yia Liu, M.D.
Infectious Diseases

Lisa A. Nelson, M.D.
OB/GYN

Gregory H. Rafijah, M.D.
Orthopedics

Retired

Herbert Burack, M.D.
Pediatrics

John Eugene, M.D.
Cardiothoracic Surgery

Sanford H. Gaynor, M.D.
Nephrology

Medical Executive Committee (continued)

Vascular Medicine Ad-Hoc Committee (Continued)

Proctoring Requirements: 5 Interventional Cases **# of cases required Init App:** See qualifications
of cases required Reapp: 25 interventions (includes at least one of the following: stenting, angioplasty, thrombolysis, percutaneous placement of large bore venous catheters, IVS filter placement, etc.) during the previous (2) years

42.26 – Carotid Stent

Qualifications/Criteria

1. Must hold [42.25] Peripheral Angiography, Peripheral Angioplasty and Other Percutaneous Peripheral Vascular Intervention (includes common carotid or aortic arch orifice lesions, not to include bifurcations or internal carotid lesions)
2. Documentation (in the form of operative reports) of performance of 30 carotid angiograms, of which 15 must be as primary operator
3. Documentation (in the form of operative reports) of performance of 10 carotid interventions (carotid intervention includes any part, common, bifurcation subclavian or any brachycephalic vessel. Also physician does not have to be primary operator, can be part of a team approach) and,

Cases will also require a mandatory 2nd opinion by three members of the Endovascular Sub-Committee (to include the operator).

Failure to maintain [42.25] Peripheral Angiography, Peripheral Angioplasty and Other Percutaneous Peripheral Vascular Intervention (includes common carotid or aortic arch orifice lesions, not to include bifurcations or internal carotid lesions) will result in loss of carotid stenting privileges.

100% review of all carotid stenting cases will be performed by the Endovascular Subcommittee.

Proctoring Requirements: 3 Cases **# of cases required Init App:** See qualifications **# of cases required Reapp:** 1

42.27 – Thoracic Aortic Stent Graft Repair

Qualifications/Criteria

1. Physicians must hold [42.25] Peripheral Angiography, Peripheral Angioplasty and Other Percutaneous Peripheral Vascular Intervention (includes common carotid or aortic arch orifice lesions, not to include bifurcations or internal carotid lesions)
2. Provide documentation of 25 Endovascular Abdominal Aneurysm Repair cases
3. Provide documentation of participation in 5 Thoracic Endovascular Aneurysm Repair (TEVAR) Cases
4. Requires current fluoroscopy certificate

Requires approval by the Vascular Medicine Committee for both initial requests and at reappointment.

100% retrospective review of all thoracic aortic endovascular cases will be reviewed at the Endovascular P.I. Committee

Proctoring Requirements: 3 Cases **# of cases required Init App:** See qualifications **# of cases required Reapp:** 1

XX.XX – Abdominal Aortic Stent Graft Repair

Qualifications/Criteria

1. Physicians must hold [42.25] Peripheral Angiography, Peripheral Angioplasty and Other Percutaneous Peripheral Vascular Intervention (includes common carotid or aortic arch orifice lesions, not to include bifurcations or internal carotid lesions)
2. Provide documentation of 25 Endovascular Abdominal Aneurysm Repair cases
3. Requires current fluoroscopy certificate

Proctoring Requirements: 3 Cases **# of cases required Init App:** See qualifications **# of cases required Reapp:** 1

XX.XX – Thoracic Aortic Stent Graft Repair For Cardiothoracic Co-Surgeons Only

Qualifications/Criteria

1. Must provide documentation of performing 15 Thoracic Endovascular Aneurysm Repair (TEVAR)
2. Must be performed in conjunction as a co surgeon with a physician that holds 42.25 and 42.27

Proctoring Requirements: 3 Cases **# of cases required Init App:** See qualifications **# of cases required Reapp:** 1

XX.XX – Interior Vena Cava (IVC) filters

Qualifications/Criteria

1. Must Hold [42.25] Peripheral Angiography, Peripheral Angioplasty and Other Percutaneous Peripheral Vascular Intervention (includes common carotid or aortic arch orifice lesions, not to include bifurcations or internal carotid lesions)
2. Documentation of participation in 3 IVC (inferior vena cava filter) cases.

Proctoring included as part of Peripheral Angiography procedures

Proctoring Requirements: See qualifications **# of cases required Init App:** 0 **# of cases required Reapp:** 0



Medical Staff Services

3330 Lomita Boulevard
Torrance, CA 90505
Phone: (310) 517-4616
Fax: (310) 784-8777
www.TorranceMemorial.org

ProgressNotes

Vol. 2 Issue 7

July 2010

MONTHLY
MEDICAL
STAFF
NEWSLETTER

ProgressNotes

TORRANCE MEMORIAL MEDICAL CENTER

*Torrance Memorial's
Planned New Main Tower*

