

# Archives

Spring 2011

UNIVERSITY OF MISSOURI HEALTH SYSTEM



## Diversity at work

Multicultural team puts patient care on the map

### PLUS

**Chocolate toffee coffee**  
Decadence that won't ruin your New Year's resolutions  
Recipe on page 20

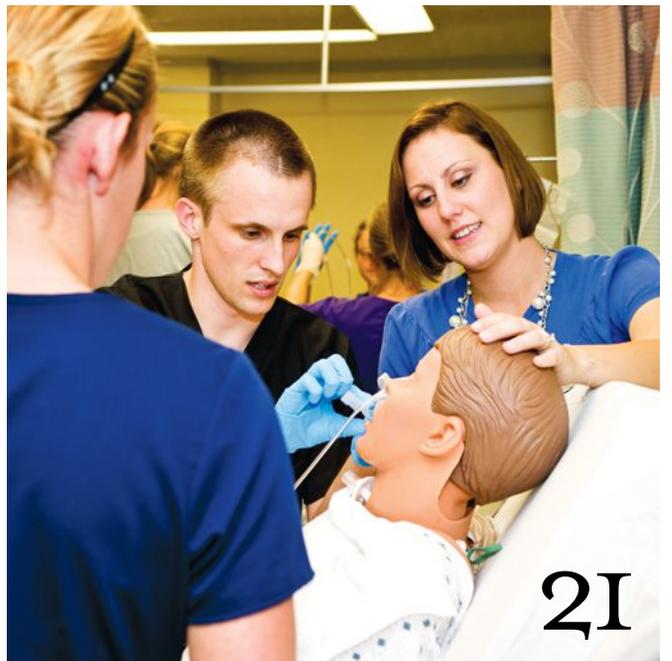
**It's a bird, it's a crane ...**  
The dirt on construction behind University Hospital

**Only in Columbia**  
Check out Missouri's first hospital dedicated to women and kids

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**Cover:** Staff nurse Muska Ibrahimovic, RN, phlebotomist Kimhon Inn and translator Clement Kirahagazwe left their homelands in hopes of finding better lives in America.

# Archives

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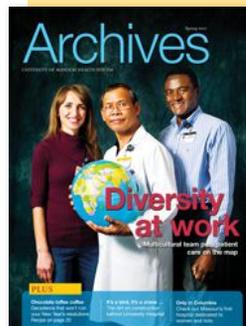
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## Enter to win movie tickets!

Answer this question correctly, and you'll be entered into a prize drawing for two movie tickets. Responses must be received by Thursday, **March 31**. Please send responses via e-mail to [hasnerv@health.missouri.edu](mailto:hasnerv@health.missouri.edu) with "quiz" in the subject line to enter.

What is the recommended age for an adult to start having a yearly colonoscopy screening for colorectal cancer?

- a) 40
- b) 50
- c) 60
- d) 65

## Congrats!

**Elena Penn, RN**, a nursing supervisor for surgery services, and **Karla Wiseman**, an office support staff member at the Missouri Psychiatric Center, won our "Find the paw" contest in the previous issue of Archives.

# International flair

MU Health Care benefits from city's diversity

Muska Ibrahimovic, RN



**A**lthough Columbia is not known for its ethnic communities in the same way as cities such as Chicago or San Francisco are, our Midwestern city is more diverse than one might think.

With a refugee resettlement program based in Jefferson City, neighboring Columbia is the host city to thousands of immigrants, many of whom have come here seeking asylum from strife-ridden countries throughout the world. Other international visitors are drawn here because of the University of Missouri. Even among our resident doctors, you'll see a rainbow of ethnic backgrounds represented.

To reflect our city's diversity, Peter Callan, director of talent recruitment and acquisition in the Department of Human Resources, said MU Health Care is committed to building a diverse workforce.

Because demographic information such as country of origin is only offered voluntarily on applications, Callan said it's impossible to know exactly how diverse we are. However, you'll find people from nearly every corner of the world, from Russia to Rwanda and from Costa Rica to China.

"From an HR perspective, we want our employee base to match our patients," Callan said. "When you bring someone in from a different culture, it's an opportunity to see things differently and, ultimately, to improve the patient experience."

Every year, about 60 languages are spoken by our patients, and about 200 patients a week use our medical interpreting services.

To ensure that patients can make informed decisions about their health care, MU Health Care relies on a battalion of interpreters — both face-to-face and available over the phone.

Grace Vega, coordinator of language services at MU Health Care, encourages employees to speak with co-workers about their backgrounds.

"People often don't really know who they work with, and it's fascinating and impressive," she said. "You'll find many people are happy to share their stories."

## Did you know?

According to the U.S. Census, about 8 percent of Columbia's residents were born in another country, and about 10 percent speak a language other than English at home.

# Muska Ibrahimovic

Muska Ibrahimovic, RN, is a 27-year-old nurse who serves surgical oncological patients on 5 East at University Hospital. At age 15, she moved to the U.S. from Bosnia to live with a family in Iowa. Eventually, she went to nursing school at the University of Iowa.

## Why did you come to the U.S.?

Initially, I came to attend school — I had a high school visa. Then, I began working on the process of becoming a permanent resident.

## Why did you leave Bosnia?

There was a war in Bosnia from 1992 to 1995. Basically, it's a war-torn country and even though the war was over many years ago, the country has not rebuilt itself. The economy never picked up again, especially industries.

## How did you end up in Columbia?

I was ready for a change but wanted to remain in the Midwest and be within driving distance of home.

## How did you learn English?

Prior to coming to the U.S., we had English classes two or three times a week starting in the fifth grade. Otherwise, I learned it in high school, most of it during my first year in the U.S.

## What other languages do you speak?

Bosnian and Spanish. I am familiar with Cyrillic and can read Arabic.

## What do you like about living in Columbia?

I like its size. It's big enough to do things, but you don't have to worry about traffic. I like its parks and trails.

## What do you like to do when you're not at work?

Walk, run, read, shop, visit with friends, chat with family and friends from Europe through MSN or Facebook.



# Clement Kirahagazwe

Clement Kirahagazwe is a 52-year-old medical interpreter at MU Health Care. He first came to Columbia in 1988 from Burundi to study journalism at the University of Missouri. A broadcast journalist, he left the Eastern African country for good in 1994, explaining that if he stayed, it was a certain death sentence.

## What does your job entail?

I facilitate communication between the care provider and the patient in a way they can both understand each other while speaking different languages.

## How did you learn English?

By practicing. Upon arrival in the United States, I was given only one month and a half of intensive English. I was wrong to believe those who thought my language skills were adequate to tackle my journalism study program at MU.

## What other languages do you speak?

French, Kirundi, Kinyarwanda, a little bit of Swahili and Spanish

Do you face cultural or language challenges in interacting with co-workers and patients? How do you overcome them?

I don't remember any challenge worth mentioning, cultural or linguistic, with a co-worker, probably because Columbia is becoming an international microcosm where people expect and accept differences.

What do you like about living in Columbia?

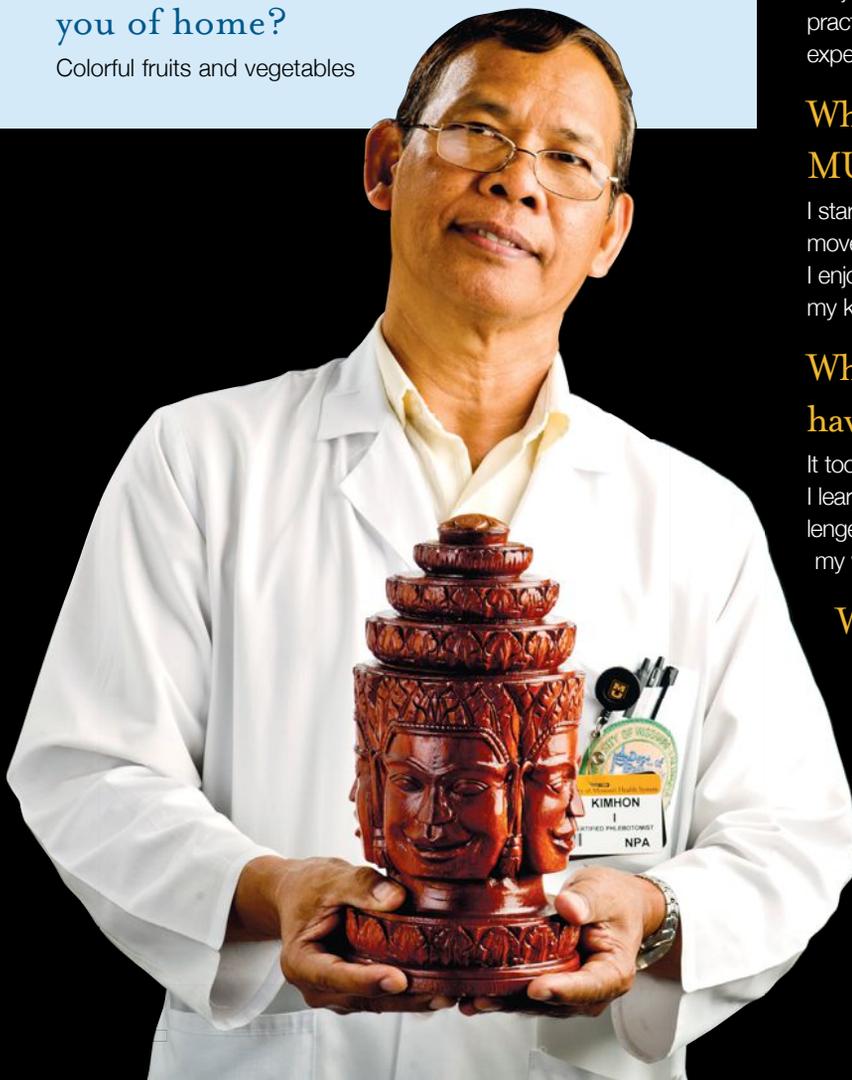
I like its concentration of higher education institutions, international flavor. It's a good place to raise a family, and mostly, its size and buildings still allow you to see the blue sky during the day, the stars and the moon at night, watch the sunrise and sunset, and hear the birds singing in the backyard

What do you like to do when you're not at work?

Play with my 5-year-old daughter, cook my favorite food, read and exercise

What food or dish most reminds you of home?

Colorful fruits and vegetables



# Kimhon Inn

Kimhon Inn, 63, is a certified phlebotomist at MU Health Care who came to the U.S. from Cambodia in 1988. He came here with his wife and four children seeking political asylum following civil wars in Cambodia.

He came to Columbia at the suggestion of his pastor in Cambodia, who said Columbia already had a small Cambodian community and was a good place to raise a family.

Are you a U.S. citizen?

Yes. I became a U.S. citizen Aug. 21, 1997. I am very proud of myself that I made it this far. I cannot describe how thankful I am to be a U.S. citizen because we did not plan to go back home.

How did you learn English?

I learned English when I was in nursing school along the Khmer-Thai border.

Why did you come to work at MU Health Care?

I enjoyed working with patients, which is why I became a licensed practical nurse in my native country. I got a job at MU Health Care expecting one day that I could use my skills I got from home.

What do you like about working for MU Health Care?

I started working here on Oct. 16, 1989, in housekeeping and moved up to vein puncture technician, then certified phlebotomist. I enjoy working with patients and having the chance to improve my knowledge.

What cultural or language challenges have you faced?

It took a lot of patience for the first four or five years. Even though I learned English back home, my accent caused me some challenges. Since I started in housekeeping, it gave me time to adjust my way of speaking somewhat.

What do you like to do when you're not at work?

My favorite thing to do is hang out with my grandkids.

What's your favorite American meal?

Steak and mashed potatoes with gravy. Turkey on Thanksgiving Day.

Kenny Souder, RN, and Andrew Elli, EMT, wheel Shayden Talbert, 7, through the new Children's Hospital. Shayden's mom, Sarah, follows.



# Mission accomplished

A behind-the-scenes look at moving kids and families into their new Children's Hospital

**T**he paint has dried. The pictures are hung. The boxes are unpacked. But this is far from your typical move. After years of planning and tons of support and encouragement from our community, Children's Hospital has moved into its new home at 404 Keene Street in Columbia.

Moving an entire children's hospital — patients, families, staff and medical equipment — is no small feat. Thanks to two years of planning and preparation by hundreds of employees, the move went smoothly. All patients were safely transported from University Hospital to Women's and Children's Hospital on Sept. 14, 2010.

Keri Simon, executive director of Women's and Children's Hospital, led a "Day of Move" planning committee that began meeting monthly with approximately 20 members. The team was dedicated to its mission: to safely move all sick children to their new hospital without any interruption in their care. If just one patient was not stable enough to transfer on the morning of the move, the date would be postponed.

The planning group gradually tripled and quadrupled in size as new tasks and questions arose during the process, pulling in the right people to address all details. As the move date neared, meetings were increased to weekly, with a final meeting held at 7 a.m. the day of the move.

"It's amazing some of the details we discovered along the way," said Cindy Brooks, RN, MSN, manager of pediatric services. "We examined lots of workflow processes. It really helped that we had crew resource training and took performance improvement and leadership development classes."

Brooks leads the nursing staff, which was obviously on the front lines of the move, and was represented at the planning meetings. Representatives



1.

connect and connect electronic medical equipment and computers, and troubleshoot issues. Before the move, the IT staff network mapped all computers and inventoried all computer ports to determine where equipment would be placed.



2.

Roger Higginbotham, interim director of support services, and his team assembled a command center team and a move planner packet. The packet could make one think of NASA — it was filled with maps, organization charts, lists of duties and schedules, including the dates various pieces of equipment would be moved and when various clinics would relocate and open.



3.

“Please think ahead,” Higginbotham urged at a meeting in August. “We have the resources, but we want to prevent any bottlenecks.”

The move was coordinated so that patients were moved into set-up rooms at Children’s Hospital. Items that could be moved before the move were, but many items remained in use and unpacked simply because they were needed for the patients. For weeks before the move, staff at Children’s Hospital marked items with labels to denote when and where they could be moved.

from other areas included the Children’s Hospital Transport Service, child life, clinical engineering, emergency services, facilities, food services, intensive care, information technology, media relations, medical records, pharmacy, physicians, radiology, registration, respiratory therapy, safety, support services (including hospitality, housekeeping and valet), surgery and telecommunications.

For months Brooks worked with various departments to create a checklist for the nursing staff. This list was used by every nurse. It had three sections: the night shift before the move on Sept. 13, departure steps on the move day and arrival steps.

Not only were both hospitals fully staffed with caregivers on the move day, but information technology employees were stationed at both hospitals to dis-

The media relations staff planned on welcoming local reporters while making sure no patient’s privacy was compromised and no families were inconvenienced. They distributed colored “I made the move with T.J.” T-shirts before the move. All employees involved in the move wore gold T-shirts during the move. On the night before the move, the Child Life staff helped identify patients and families who were willing to be photographed and interviewed and gave them gold shirts. All other patients and families wore white shirts — meaning they were off limits to the media. The T-shirts also helped families identify staff.

Identification bands were created for every patient, family and their belongings and then scanned upon departure from University Hospital and arrival to Women’s and Children’s

## By the numbers

- Nearly 60,000 square feet dedicated to Children’s Hospital
- 13 private patient rooms in a new Pediatric Intensive Care Unit
- 43 private rooms for pediatric and adolescent patients
- Patient rooms average 244 square feet.

Hospital. Registration staff members were assigned to the move at both locations.

Employees explained the process to patients and families before the move day, including calling families who would not be present during the move. The telecommunications staff prepared a script for callers on the move day and a flow chart for transferring calls during the move.

The Dining and Nutrition Services staff developed a plan for patients and employees on move day. Breakfast was delivered to pediatric patients at 7 a.m. at University Hospital. Nurses were instructed on their checklist to review the plan for lunch with the family. They could order room service at either facility. The food services staff would deliver box lunches to employees in departments that ordered the lunches in advance.

## Move Day

The tension and excitement was nearly palpable at the final move day meeting at 7 a.m. on Sept. 14. Participants met at both hospitals and communicated via telehealth technology. Every patient was stable enough to transfer — meaning the move was on. The team also learned that a patient was

en route by helicopter from northeast Missouri to Children's Hospital's Pediatric Intensive Care Unit (PICU). This patient became the first patient admitted to the new Children's Hospital.

The move of patients from University Hospital began at 8 a.m. The patients were moved two at a time, determined by a preset order of patients. The order of move was determined by each patient's medical condition and his or her scheduled lab work, medication and treatment for the day.

Clinical engineering staff members were present at both locations to coordinate and physically move clinical equipment that not being transported with the patients.

All patients were transported via ambulance. Four ambulances were used. The Children's Hospital Transport Service transported PICU patients, and the emergency medical services team transported all other patients. The ambulance route from University Hospital to Women's and Children's Hospital is less than five miles, but there was a crash cart placed along the route as an extra safety precaution. Fortunately, it was not needed.

Staff members in the command center recorded each patient's discharge from University Hospital and each admission into the new hospital. The command center in Women's and Children's Hospital was the hub of the move's communication and coordination.

MU Health Care staff moved 17 inpatients from University Hospital to Women's and Children's Hospital. The final inpatient from University Hospital was admitted to the new hospital at 11:40 a.m. Children's Hospital's first trauma patient at the new location was

transferred from the Frank L. Mitchell Jr., MD, Trauma Center at University Hospital in the evening.

## Looking back

Even with all the preparation, some things could not be predicted. For instance, the new IV pumps that were ordered and expected to arrive before the move did not come in until two weeks after the move. Also, the first patient admitted to the new Children's Hospital was not transferred from University Hospital but instead from a rural hospital 135 miles away.

"With our new facility, people in the community are more likely to recognize we're here to care for their children — and not only their children, but kids throughout the state," said Timothy Fete, MD, medical director of Children's Hospital, chair of the Department of Child Health at MU's School of Medicine and Children's Miracle Network Professor in Pediatrics.

Caregivers and families agreed that the move went smoothly.

"My patient was the sickest patient in the hospital at the time," said Jaime Dodson, RN, a nurse in the PICU, who waited anxiously at the new location for her patient to arrive. "There was no change in my patient's status, which was a big accomplishment. Everyone breathed a big sigh of relief."

Nicole Collins, RN, also a staff nurse in the PICU, said that she was still getting used to her new environment, but the move went a lot smoother than she expected for being such a large-scale move.

"It's a rare chance for a nurse to

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6.



be involved in such a move during her career," said Manda Robinson, RN, a clinical pediatrics supervisor. "It's very exciting to have been a part of the move and work at a women's and children's hospital."

*Story by Velvet Hasner  
Photography by Justin Kelley*

## An insider's look

1. More than 100 employees attended the move day briefing held at 7 a.m. at University Hospital and broadcast via telehealth to the Women's and Children's Hospital.
2. The moving crew at University Hospital bundled up supplies on a bed at 7:56 a.m. Leading up to this day, staff inventoried and labeled equipment to be moved.
3. Jessica Johnson, 18, of Columbia, bids adieu to the old Children's Hospital. She left University Hospital at 10:11 a.m. and was admitted to the new Women's and Children's Hospital at 10:28 a.m.
4. Stationed in the administration conference room at Women's and Children's Hospital, the Command Center served as the hub of communication and coordination during the move.
5. Shayden Talbert, 7, of Columbia, was transported in one of four ambulances used during the move.
6. Since the move, dozens of families have been welcomed at Children's Hospital. Here, Parker Eimers, 6, of Columbia draws with his parents, Mardy and Lisa Eimers, in his patient room on Dec. 7.



# Every stage of life

Women's Health Center provides comprehensive women's health care

**W**ith the September opening of Women's and Children's Hospital — the first of its kind in the state — University of Missouri Health Care also introduced the Women's Health Center. Located in a convenient location within Women's and Children's Hospital, near the crossroads of Interstate 70 and U.S. Highway 63

in Columbia, the center provides health care for women throughout every stage of life.

"We offer a full spectrum of medical services for women," said Hung Winn, MD, JD, MBA, the David G. Hall Professor and chair of the Department of Gynecology, Obstetrics and Women's Health. "In addition to providing general obstetrical and gynecological care, our physicians include experts in numerous specialties, including fertility, childbirth, high-risk pregnancy, gynecologic cancer and female continence."

## General obstetrics and gynecology

The Missouri OB/GYN Associates team of physicians at the Women's Health Center includes more than 10 specialists. They provide a range of women's health services, begin-

### Annual exams

Getting regular Pap tests and pelvic exams are important steps for early detection of abnormal cells that may turn into cancer. Physicians recommend women have a Pap test yearly, beginning three years after first sexual activity or by age 21 at the latest. To schedule a Pap test at Missouri OB/GYN Associates, please call **(573) 499-6084**.

Megan Widmer of Columbia kisses her newborn son, Jack, at the Family Birth Center at Women's and Children's Hospital.

**“In addition to providing general obstetrical and gynecological care, our physicians include experts in numerous specialties, including fertility, childbirth, high-risk pregnancy, gynecologic cancer and female continence.”**

*Hung Winn, MD, JD, MBA, the David G. Hall Professor and chair of the Department of Gynecology, Obstetrics and Women's Health*

ning with pediatric, adolescent and adult gynecology. The physicians also provide obstetrical care for pregnant women and treatment of gynecologic problems, such as uterine or vulvar diseases.

In addition to their facility at Women's and Children's Hospital, Women's Health Center physicians provide care at the University Physicians-Smiley Lane clinic in north Columbia.

Missouri OB/GYN Associates surgeons perform procedures using minimally invasive techniques and technologies. For example, Jonathan Thomas, MD, performs minimally invasive hysterectomies using the state-of-the-art da Vinci surgical robot at Women's and Children's Hospital.

“Through minimally invasive procedures like those with the da Vinci surgical system, our goal is to return patients to their normal lives as soon as possible,” Thomas said. “With the smaller incisions and less blood loss involved in minimally invasive surgery, women can return home and resume other activities days sooner than with traditional surgeries.”

## Family Birth Center

The Family Birth Center at Women's and Children's Hospital offers a comfortable environment for mothers and babies to receive the best care. All 28 private rooms in the birth center include a private bathroom with a shower, a television and a sleeper chair or sofa for a guest to spend the

## Women's Health Center

### Phone numbers at your fingertips

Family Birth Center ..... (573) 499-6100

Female Continence and  
Advanced Pelvic Surgery ..... (573) 817-3165

Gynecologic Oncology ..... (573) 882-1057

Maternal-fetal Medicine  
and Ultrasound ..... (573) 499-6041

Missouri OB/GYN Associates  
(general services) ..... (573) 499-6084

Reproductive Medicine  
and Fertility ..... (573) 499-6071

night. Before heading home, parents receive individual education on caring for their newborns, including lessons from certified lactation consultants.

The team at the Family Birth Center delivers more than 1,800 babies a year. And with an expert nursery staff and mid-Missouri's most comprehensive neonatal intensive care unit located within the same hospital, all babies receive the best care.

## Gynecologic oncology

The gynecologic oncologists at the Women's Health Center provide comprehensive care for gynecological cancers. By collaborating with colleagues at Ellis Fischel Cancer Center, they provide their patients the best cancer treatments. The center's gynecologic oncologists offer the most advanced treatments, such as minimally invasive surgery with the da Vinci robotic surgical system and access to national clinical trials for new cancer treatments.



Originally from Sedalia, Erin Tuller, MD, said she feels at home in Columbia. She sees patients with gynecologic cancers and pre-cancers.

## What is the HPV vaccine?

This vaccine is given to girls and young women to help prevent problems caused by infection with certain types of human papillomavirus (HPV). These types of HPV cause most cervical cancers and pre-cancers, as well as many cancers and pre-cancers of the vagina and vulva.

The HPV vaccine is given as a series of three shots during a six-month period. To work best, the HPV vaccine should be given before the patient has had any type of sexual contact with another person. It is recommended for girls ages 11 to 18 (ideally at age 11 or 12), but can be given to girls as young as 9.

Most forms of insurance cover the HPV vaccine. To make an appointment at Missouri OB/GYN Associates, please call **(573) 499-6084**.

## Fertility

One in 10 people is affected by infertility, and difficulties becoming pregnant can be stressful. However, the reproductive medicine and fertility team at the Women's Health Center has years of experience helping couples conceive. The center's multidisciplinary team includes board-certified reproductive endocrinologists, a board-certified urologist, a clinical embryologist and a clinical andrologist, a social worker and a financial counselor.

"We diagnose and treat any causes of infertility in both men and women, and we can treat them with the latest medical and surgical techniques," said Danny Schust, MD, director of the program.

## High-risk pregnancy

The maternal-fetal medicine physicians at the Women's Health Center evaluate and manage all aspects of complicated pregnancies. They monitor and treat conditions such as preeclampsia, gestational diabetes, preterm labor and many medical complications during pregnancy. In addition to individualized and compassionate care, they also offer the high-tech diagnostic tools to provide the best fetal medicine.

"Not only do we use standard ultrasound, but if the pregnancy warrants it, we can use 3-D or even 4-D technology," said Randall Floyd, MD, who directs the maternal-fetal medicine program with Winn. "With 3-D ultrasound, we are able to obtain a clearer image of the fetus. The use of 4-D technology takes this a step further — not only can we see in 3-D, but also in real time, so we can monitor fetal movement and behavior."

## Female continence

Millions of women experience problems with urinary continence and other pelvic issues as they become older, however, those problems are treatable. The physicians at the continence and advanced pelvic surgery center offer options to help women return to the activities they enjoy but may be avoiding.

"Incontinence can result from pregnancy or childbirth, injury to the pelvic region or spinal cord, neurologic disease or aging," said Raymond Foster, MD, director of the program. "Whatever the cause, early detection and treatment is key to a positive outcome."

*Story by Velvet Hasner*

*Photography by Justin Kelley*

# Going vertical

Story by Colin Planalp | Photography by Justin Kelley

**T**wo large cranes behind University Hospital will be used in the next phase of construction of the new seven-story patient care tower. The cranes measure 160 and 200 feet tall.

Site preparation for the new structure began in August of 2009. The \$203 million project is expected to be completed in 2013.

“Since last summer, we have been doing site preparation and relocating underground utilities,” said Clarissa Easton, AIA, chief facilities officer for University of Missouri Health Care. “The installation of these cranes will allow the project to go vertical, so now all additional construction is above ground.”

The new patient care tower will provide additional operating rooms, pre- and post-procedure rooms, 100 percent private patient rooms and a new facility for Ellis Fischel Cancer Center.

The first and second floors will house Ellis Fischel Cancer Center outpatient services, including space for clinical services such as chemotherapy treatment, radiation therapy and cancer screening. It also will include spaces designed to give patients and visitors a comfortable healing environment, including an outdoor garden and a boutique with items such as wigs for chemotherapy patients.

The third and fourth floors will house surgical services, including six state-of-the-art operating rooms and 25 pre- and post-procedure rooms, with future expansion space for another six operating rooms and 25 pre- and post-procedure rooms. It also will include a large, comfortable new waiting area for surgical patients’ families and visitors.

The fifth, six and seventh floors will house inpatient units with 90 private patient rooms for delivery of exceptional patient- and family-centered care, comfortable visitor lounges and state-of-the-art facilities for physicians, nurses and other health care providers to treat patients.

## Cranes facts

- **Time to climb the cranes:** 15 minutes.
- **Number of rungs to the top:** 140 in crane No. 1 and 100 in crane No. 2.
- **Maximum carrying capacity:** 40,000 pounds – the weight of four African elephants.
- **Time to construct the cranes:** four days.
- **Interesting tidbit:** For safety, when they are not being used, the cranes float freely in the wind like giant weathervanes.



# Weathering the

## Employees brave blizzard to keep hospitals open

**T**he blizzard of 2011 will be remembered for many reasons. The nearly 18-inch snowfall that blanketed the city Feb. 1 went down in the record books as Columbia's second largest 24-hour snowfall total. And while much of the city was paralyzed, and the University of Missouri canceled classes for three days, University of Missouri Health Care's four inpatient hospitals remained open throughout the storm thanks to hundreds of dedicated employees.

Preparations for the impending winter storm actually began days before its arrival.

"We had linen trucks and food suppliers come in early before the storm hit," said Chris Smith, MHA, coordinator of worker safety and emergency preparedness at MU Health Care. "We topped off all our fuel and oxygen tanks and made sure we had plenty of supplies in house so there would be no interruption in our services."

A command center was established at the Missouri Psychiatric Center to coordinate work schedules and transportation for critical staff. The hospital's transport center coordinated rides to work for nearly 400 MU Health Care employees. Meanwhile, an estimated 350 cots were distrib-

Staffing the command center, around the table from left, are: Chris Smith, MHA, coordinator of worker safety and emergency preparedness; Deborah Pasch, RN, MBA, executive director of the Missouri Orthopaedic Institute; Benji Long, expert system administrator for plant engineering; Jennifer Mantle, office support staff member for safety and patient support services; Mark Bollinger, assistant director of clinical engineering and informatics, Matt Wilp, MBA, manager of physician relations, and Marty McCormick, MBA, director of planning and business development.



The plant engineering staff plowed the entrance to University Hospital's Frank L. Mitchell Jr., MD, Trauma Center several times throughout the storm.

uted at University Hospital for the hundreds of staff members who spent the night at the hospital. Dozens more employees spent the night at Women's and Children's Hospital, the Missouri

Orthopaedic Institute and the Missouri Psychiatric Center. In total, approximately 500 dedicated employees spent the night in our hospitals on Tuesday.

Feeding our patients and these hard workers was the job of MU Health Care's Dining and Nutrition Services. Free meals were provided to all hospital employees. This allowed staff to focus on patient care responsibilities and job duties without worrying about where their next meal would come.

But not all employees could enjoy the warm confines of a hospital. Ambulance crews at University Hospital responded to dozens of medical emergencies during the blizzard. Eric Mills, NREMT-P, assistant manager of emergency services, said his crew worked courageously throughout the storm to respond to every emergency call.

"Our ambulance crew did an amazing job in some tough weather conditions," Mills said. "It makes me proud to work with such a dedicated group of professionals."



# storm



University Hospital's ambulances did not get a day off during the blizzard — crews responded to dozens of medical emergencies despite the ice, snow and treacherous conditions.

## BLIZZARD FACTS

- ❁ Sold 40 ice cleats at Medtique gift shop the day before the blizzard.
- ❁ Used approximately 1,000 bags of salt to de-ice outside surfaces.
- ❁ Served 2,500 meals to patients and staff
- ❁ Provided 5,240 cups of coffee and beverages

University Hospital staffed eight ambulances during the height of the storm. First responders worked closely with the City of Columbia's public works department to help plow areas ahead of the ambulances when necessary.

"Our crew adjusted well to the weather challenges presented to them and remained focused throughout the storm on delivering timely medical care," Mills said.

At Women's and Children's Hospital, eight new babies were welcomed into the world during the blizzard. With each

of these "blizzard babies" came a snow story that will be repeated by moms and dads for years to come.

The memorable snowfall left many Children's Hospital patients disappointed they couldn't go outside and play in the snow. To lift the spirits of these hospitalized kids, staff organized a pizza party in the 404 Diner.

Before the party, nurses and staff members helped patients create snowflakes out of coffee filters. The snowflakes were hung from the ceiling of the 404 Diner. Dining and Nutrition Service workers consulted with hospital dietitians to prepare a menu of pizzas. Cooks also prepared fruit arrangements for each table.

"We wanted these kids to remember this blizzard not for their time in the hospital, but for the fun they had at a pizza party," said Kim Nelson, assistant manager of Dining and Nutrition Services at Women's and Children's Hospital.

The pizza party proved to be a big thrill for Children's Hospital patients and

their parents.

"It was a fabulous idea on the part of Kim and her staff," said Sheila Langlotz, RN, assistant manager of pediatric services. "Our patients loved the party."

In southwest Missouri, employees at Missouri Rehabilitation Center in Mount Vernon also answered the call during the snowstorm. More than 30 employees stayed overnight at the rehabilitation center, including 20 employees from the Veterans Administration clinic.

Whether a pizza party or a paramedic walking through two-to-three foot tall snow drifts, the mission remained the same — delivering world-class care to all of our patients. It's a mission that hundreds of MU Health Care employees took to heart during the storm as they worked hard to ensure the Blizzard of 2011 will be remembered for all the right reasons.

*Story by Matt Splett*

*Photography by Justin Kelley*

# Getting the gold



## Hospital earns advanced primary stroke center accreditation

**I**n September, University Hospital's multidisciplinary stroke team members received news they were anticipating — the hospital's stroke program received certification as an advanced primary stroke center by the Joint Commission. News of the two-year certification came after a site visit on Aug. 13. The on-site surveyor found no deficiencies in the program.

**“Stroke center certification means that we are nationally recognized for our commitment to providing outstanding care to our patients and our community.”**

*Niranjan Singh, MD, neurologist and assistant professor of neurology*

The stroke program is led by co-directors Niranjan Singh, MD, a neurologist and an assistant professor of neurology, and Ashish Nanda, MD, a neurointerventionalist and assistant professor of neurology and radiology. The stroke team provides patients comprehensive care, from emergency treatment through rehabilitation.

“We're very proud to achieve this distinction from the Joint Commission,” Singh said. “Stroke center certification means that we are nationally recognized for our commitment to providing outstanding care to our patients and our community.”

In addition to neurology, the multidisciplinary team includes MU Health Care professionals in emergency services; critical care services; floors 4 West, 5 East and 6 West; pharmacy; radiology; occupational, physical and speech

therapy; laboratory and social work.

“Everyone on the stroke team did a magnificent job, as always, and we owe a lot to each individual on the team,” Nanda said.

Certification is based on recommendations for advanced primary stroke centers published by the Brain Attack Coalition and the American Stroke

Association. University Hospital's team demonstrated its skills in 10 performance measures that focus on accessing the patient and providing appropriate and timely stroke treatment, providing stroke education and assessing patients for rehabilitative care.

Time is of the essence when a patient suffers a stroke — patients and families should seek medical attention immediately upon noticing stroke symptoms. A typical stroke results in a loss of 1.9 million neurons each minute.

A clot-busting medication, tissue plasminogen activator (tPA) can only be administered within four-and-a-half hours after the stroke occurs. University Hospital's “door-to-needle” time averages approximately 30 to 40 minutes, meeting the national benchmark time of less than 60 minutes. The drug

**Call 9-1-1**

If you experience these symptoms or notice these warning signs in someone else, seek help immediately. Call 9-1-1 and do not drive yourself to the hospital if you have any of these warning signs:

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden, severe headache with no known cause



can stop an active stroke and possibly reverse some damages caused by the stroke.

Through the stroke center, patients are quickly diagnosed in the E.R., where treatment begins. Patients will undergo surgical procedures if needed, stay in the hospital for an average of two to three days, and then are discharged home. Patients requiring more extensive care after their hospital stay are discharged to a long-term acute care facility, skilled nursing facility or acute rehabilitation center. Rusk Rehabilitation Center, a joint venture of MU Health Care and HealthSouth, is recognized by the Joint Commission as a Stroke Rehabilitation Center of Excellence.

Additionally, University Hospital holds a clinic for patients at high risk for strokes or recovering from strokes.

Strokes are common — on average, someone suffers a stroke every 40 seconds. Stroke is the fourth leading cause of death in the United States. While some strokes are not preventable, lifestyle choices can reduce one's chances of having a stroke. Manageable risk factors include high blood pressure, high cholesterol, diabetes, tobacco use, excessive alcohol use, sleep apnea, obesity and physical inactivity.

"A stroke can happen at any time and any age, but research shows that by recognizing risk factors and practicing proper lifestyle management, the instances of stroke in most cases can be reduced significantly," said Pradeep Sahota, MD, a neurologist, professor and chair of the School of Medicine's Department of Neurology. "Stroke prevention and awareness is important for everyone."

## What is a stroke?

A stroke happens when a blood clot blocks an artery or a break in a blood vessel interrupts blood flow to the brain, cutting off oxygen to the brain and killing brain cells. Stroke survivors can suffer memory, movement and speech impairments. Learn more about strokes and how to reduce your risk factors for strokes at [www.muhealth.org/stroke](http://www.muhealth.org/stroke).

**Opposite page:** Patients brought to the emergency room with stroke-like symptoms are quickly assessed at University Hospital. Shown here are Jeni Bourke, EMT, emergency medical technician; Swapan Dholakia, MD, a resident physician in neurology; and Niranjan Singh, MD, a neurologist, an assistant professor of neurology and co-director of the hospital's stroke program.

**This page, left:** Ashish Nanda, MD, an assistant professor of neurology and radiology and co-director of the hospital's stroke program, views images of a patient's brain to determine the location of a clot.

**This page, right:** Nanda is experienced in performing complicated interventional neurology procedures, such as retrieving clots.

**To learn more or make an appointment with a neurologist at University Hospital, please call (573) 884-1515.**

## 3 accreditation tips

The stroke team offers these tips when seeking accreditation for a program.

- 1. Be patient.**  
 Expect the application and review process to be long and time-consuming. For example, the stroke team filed its application in April and received a site visit in August.
- 2. Learn as you go.**  
 As you work on the application process, you will learn what features of your program need improvement. Be open to suggestions.
- 3. Share your enthusiasm.**  
 If you are sincerely passionate about a project, others will notice and get on board.

*Story by Velvet Hasner*

*Photography by Justin Kelley*

# WIRED

Tiger Institute harnesses technology to advance health care

Every morning before her daily cereal, Susan checks her blood sugar levels. Today, she pulls out her glucose meter, sticks the tip of her finger and reads the display; blood sugar's a little off, again. She cooks her oatmeal and grabs a glass of orange juice to boost her sugar a bit. While she eats, her meter automatically sends the glucose information to her personal health record.

After breakfast, Susan turns on her computer and logs into her electronic personal health record. She looks at her blood glucose level from 30 minutes ago and compares it to her information from the past month. The graph on her computer screen shows that her blood sugar has been low every morning for the past couple of weeks. It's time to visit the doctor.

Susan clicks a button on her computer screen and enters MU Healthe. After a few keystrokes and clicks of the mouse, she schedules an appointment.

A couple of days later, after talking to Susan about how she has been feeling, Dr. Jones opens his clinic's electronic medical record on his laptop and selects Susan's file. He reviews Susan's glucose scores, her weight and her exercise log — all were automatically imported from Susan's personal health record.

"It looks like you're keeping up with your walking goals — more than 15,000 steps every day," Dr. Jones says. "You've also lost some weight, so we may need to adjust your insulin levels."

Susan's story is a glimpse at the future based on the vision behind the Tiger Institute for Health Innovation, a partnership between the University of Missouri and health information technology company Cerner Corp. The Tiger Institute for Health Innovation has two overarching goals:

First, the Tiger Institute's staff are working to upgrade MU Health Care's electronic medical record to become a state-of-the-art system, complete with bar-code scanning of medications, real-time access to patients' medical records and the ability for physicians to type orders directly into a computer. By November 2010, those improvements will be completed, and more will be on the way.

The second goal extends outside the walls of MU Health Care's hospitals and clinics. As part of MU Health Care, the institute aims to advance health care throughout the state and beyond by improving the usefulness of health technology. Staff at the Tiger Institute want to give physicians, nurses and other health care professionals the tools to better

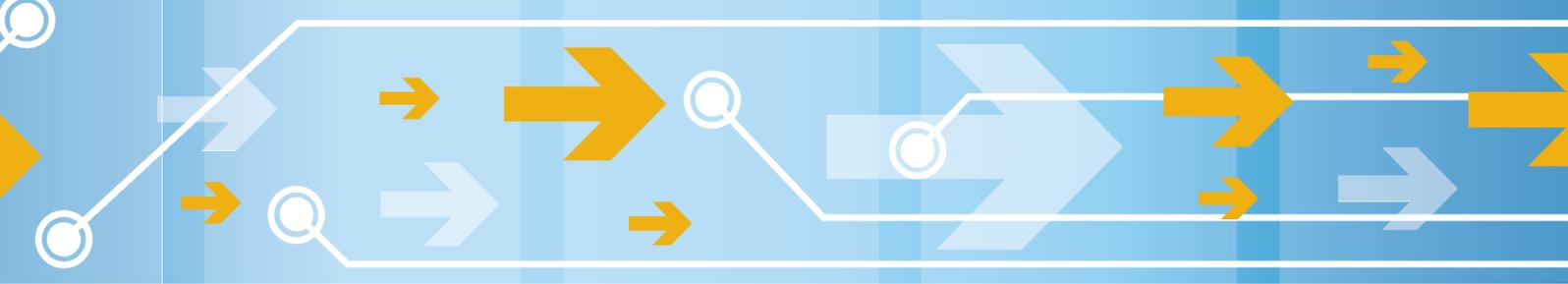
Medication	Date Started	Ordering Physician
acyclovir 400 mg oral tablet	Aug 3, 2010	Kochendorfer MD, Karl M
Anaprox-DS	Jun 23, 2010	Zerrer MD, Jason D
Aspir 81	Sep 15, 2010	Ithman MD, Muaid Hilmi
Avapro 150 mg oral tablet	Jun 25, 2010	Keplinger MD, Lynn E
Benefiber	Jun 23, 2010	Huhn DO, Stephanie
cephalexin monohydrate 500 mg oral tablet	Jun 29, 2010	Vellioff-Burris MD, Tara Marie
codeine-guafenesin 10 mg-300 mg oral tablet	Jun 22, 2010	Yanos MD, John
Colace 100 mg oral capsule	Jun 24, 2010	Rayburn MD, John Wesley
Demerol	Jul 19, 2010	
Demerol	Jul 19, 2010	
Depakote ER 500 mg oral tablet, extended release	Sep 15, 2010	Ithman MD, Muaid Hilmi
Flovent	Jun 23, 2010	Barger, Scott A
haloperidol 0.5 mg oral tablet	Sep 15, 2010	Ithman MD, Muaid Hilmi
lisinopril	May 26, 2010	
Metadate CD 20 mg/24 hr oral capsule, extended release	Aug 27, 2010	Selva MD, Thomas J

This personal electronic health record, MU Healthe, is being piloted at University of Missouri Health Care clinics. It lists patients medications, allergies, health conditions, procedures and immunizations — helping people keep track of and manage their health.

communicate and improve care. They also want to help patients better manage their health through technology.

## In the loop

Communication is key to any relationship, especially in health care, where patients often have multiple physicians. For example, Susan, an older patient with diabetes and heart disease who lives in Boonville, has a primary care physician in her hometown and a cardiologist, an endocrinologist and an ophthalmologist in Columbia. She goes to dozens of clinic appointments each year and takes numerous drugs to manage her health.



For Susan to receive the best care, each of her physicians needs to know the medications and treatment plans prescribed by her other physicians.

“One of the key questions we are looking at is, ‘how do you improve communication so you can achieve better

patients’ records from their colleagues at their fingertips.

“In an organization like ours, with an integrated electronic medical record, I can immediately see what happened if a patient of mine visits our neurology clinic in Columbia,” said Michael Lefevre, MD,

a family and community medicine physician and chief medical information officer for MU Health Care. “I can’t, however, see what happened if my patient is admitted to Capital Region Medical Center, 30 miles away in Jefferson City. Right now, I would have to request a copy of the paper records, which is an inefficient model of care.”

“The information exchange among physicians that a health network would enable will improve care,”

he said. “As a physician, the more information I have about my patients’ care and health history, the better care I can provide.”

### Taking a pulse

Imagine being Susan, with multiple complicated health conditions to manage. She watches her carbohydrate and sugar consumption to control her diabetes. She takes numerous prescriptions to manage her heart disease. She checks her blood sugar and administers insulin several times a day. She exercises regularly to maintain a healthy weight.

Keeping everything organized is tough, but her life depends on it.

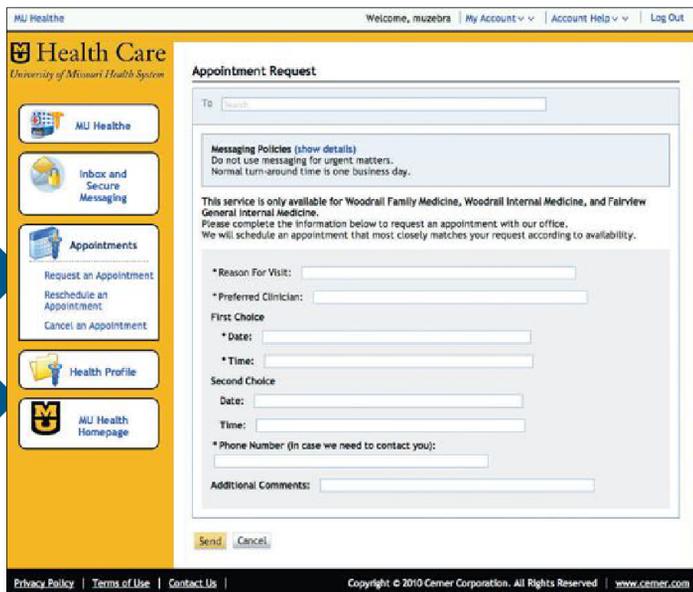
The staff at Tiger Institute want to use technology to help patients maintain their health. With the MU Healthe pilot program, the Tiger Institute is taking its first steps toward that goal.

Using MU Healthe, patients at the University Physicians-Fairview and University Physicians-Woodrail general internal medicine clinics are able to access key pieces of their medical information online. They can update their home addresses, request appointments, check their medication lists, request prescription refills or ask a quick question. In the coming months, the Tiger Institute plans to expand MU Healthe, offering it to patients throughout MU Health Care.

Working on the next generation of personal health records, the staff at Cerner Corp. are designing a personal health record for patients that incorporates more than information from the doctor’s office. With this new tool, people will be able to log dietary, exercise and other information. Cerner partners with medical device makers, such as those who make blood glucose meters, to enable the devices to wirelessly and automatically update patients’ health records.

When it is available in 2011, Cerner wants MU Health Care to be among the first organizations able to offer the personal health record to patients.

“Ninety-nine percent of the time, you only visit your doctor when you are sick,” said Jessica Oveys, a Cerner employee who is working with MU Health Care on MU Healthe. “We want to help patients do things to manage their health and track their progress when they aren’t at the doctor. It can empower patients to improve their health.”



Through MU Healthe, patients can use a computer to request or reschedule an appointment. Within one business day, staff at the clinic will schedule the appointment or contact the patient to arrange an appointment.

health outcomes?” said Mike Seda, director of the Tiger Health Alliance, Tiger Institute’s health network. “The first step is ensuring caregivers have the health information they need about their patients to make health care decisions.”

By building an electronic regional health network, the Tiger Institute plans to improve communication among health care providers. The network will link Susan’s electronic records at her primary care physician’s office to the electronic records of her cardiologist, endocrinologist and ophthalmologist at MU Health Care. All of the physicians will have their

Story by Colin Planalp

### Check yourself

Did you make a New Year's resolution to lose weight, eat healthier or exercise more – and then hit a roadblock and give up? According to Ashley Ritzo, RD, a clinical dietitian at University of Missouri Health Care, the key to improving your health may lie in baby steps. Instead of vowing to do a complete overhaul, Ritzo recommends picking one or two specific things to change. (See her checklist below for ideas.) Once you've accomplished these goals, you can add one or two more.

### Healthier you checklist

Pick one or two goals from the checklist below.

Once you've accomplished them, add another goal.

- I will exercise five to 10 minutes four days per week.
- I will stop adding salt at the table.
- I will eat breakfast four days per week.
- I will switch from two percent milk to skim milk.
- I will add one more serving of fruits or vegetables every day.
- I will eat 100 fewer calories every day. This could mean drinking one less can of soda (about 100 to 200 calories saved), ordering a cheeseburger instead of a double cheeseburger from McDonalds (140 calories saved) or snacking on a 100-calorie bag of popcorn instead of 24 Doritos chips (about 200 calories saved).
- I will use canola oil or olive oil for cooking instead of butter, shortening or animal fat.
- I will check my blood sugar at least once a day.
- I will switch from white bread to whole grain bread.
- I will eat the actual fruit instead of drinking the juice (for example, eat an orange instead of drinking orange juice, which will provide less calories and more fiber).

### Warm up and sip away

Like specialty coffee drinks but wanting to avoid high calories and fat? This recipe from Hungry Girl Newsletter provides a drink similar to toffee mocha at a popular coffee shop, but with 200 fewer calories, three grams less fat, less sugar and more fiber.

### Chocolate Toffee Coffee

One 25-calorie packet hot cocoa mix  
2 tsp. instant coffee granules  
1 tsp. unsweetened cocoa powder, or more for optional topping  
1/2 cup light vanilla soy milk, or more for optional frothed topping  
1 tbsp. sugar-free calorie-free English toffee-flavored syrup (like the kind by Torani)  
Optional topping: Cool Whip Free

Place the cocoa mix, coffee granules and cocoa powder in a large microwave-safe mug or glass. Add one cup hot water and stir to dissolve ingredients. Add soy milk and toffee syrup. Mix well. Microwave until hot, 30 to 45 seconds. If you like, top with Cool Whip or frothed milk and a pinch of additional cocoa powder. Makes 1 serving.

*Nutrition value per serving (12 oz.): 68 calories; 1.25 g total fat; 202 mg sodium; 10 g total carbohydrate; 2 g fiber; 5.75 g sugar; 5 g protein*



### Free 2011 calendars

If you would like University of Missouri Health Care's 2011 calendar, please contact Colin Planalp, senior information specialist, at (573) 884-1935 or [planalp@health.missouri.edu](mailto:planalp@health.missouri.edu). Please include your name, number of calendars you would like and your campus mailing address (DC code).



### Calendar of events

#### March

##### Colorectal Cancer Awareness Month

Colon cancer is the third most common cancer in the United States, yet it is one of the most preventable cancers if detected early. The first step to prevention is to schedule a routine colonoscopy beginning at age 50. To schedule a colonoscopy, please call the Missouri Digestive Health Center at (573) 882-1434.

**March 1** National Pancake Day to benefit Children's Hospital through the Children's Miracle Network, 7 a.m. to 10 p.m. at Columbia's IHOP restaurant, 51 Conley Road

**March 2** Literature in Health Care book club meeting, 5:30 p.m. at University Hospital, Room GL-11

**March 3-4** Children's Miracle Network Radiothon, 6 a.m. to 6 p.m. in Children's Hospital's lobby

**March 11** Pascale's Pals Benefit Auction for Children's Hospital, 5:30 p.m. at the Holiday Inn Executive Center. Tickets cost \$75 each. Learn more at [www.pascalespals.org](http://www.pascalespals.org).

**March 14** Dance Marathon to benefit Children's Hospital through the Children's Miracle Network, noon to midnight at MizzouRec on MU's campus

**March 15** "Firearms and Personal Safety Management," presentation, 6 to 7:30 p.m. at the Boone Electric Community Room at 1413 Rangeline Road in Columbia. To register, contact Andrea Kearns, coordinator of trauma services injury prevention and education outreach at (573) 884-6381.

**March 17** Ellis Fischel Cancer Center's Auxiliary Spring Bake Sale, 8 a.m. until sold out in the center's main lobby

**March 19** Thomas Lowe, MD, director of the Division of Hematology and Oncology at Children's Hospital, will join the mother of a cancer patient in shaving their heads to support childhood cancer research through the St. Baldrick's Foundation, 5 p.m. at the Columbia Knights of Columbus Hall, 2525 N. Stadium Blvd.

# Intensive learning

Nursing instructor brings the bedside to the classroom

**W**hen Nicole Bartow, RN, MSN, was an undergraduate studying nursing at Maryville University in St. Louis, she observed that there were tutors for a lot of subjects such as math and writing, but there weren't any for nursing students.

Bartow decided to tackle the void head-on: She started a tutoring service out of her dorm.

The service was a success, and when she graduated, her instructors asked her to stay as a teaching assistant. She did, and earned a master's degree in nursing education.

Training the nurses of tomorrow is a passion for Bartow, a mom whose husband is a medical resident at the University of Missouri.

For the past three years, Bartow has served as director of the Clinical Simulation Learning Center and an instructor at the Sinclair School of Nursing.

To walk through the third floor of the nursing school, where the sim lab is located, is to see a work in progress. In one room, lockers are being removed to clear way for a safe-practices room. In another classroom, workers are creating a mock intensive-care unit. Under her tutelage, the lab is growing from one room to five.

With the use of high-tech mannequins and actors, Bartow teaches skills such as administering medication, moving patients and inserting a catheter. Students are divided into small groups to practice.

"When I was in school, the teacher would show us how to insert a catheter and then we'd do it back and check it off the list," Bartow said. "But that's rarely the way it works in the real world."

So, to keep her students on their toes, there are usually twists. What if the patient can't move his legs? What if there is a disruptive family member in the room? What if the patient goes into shock?

"This is active learning, and this type of learning is essential for our students to get a sense of competence and



Nicole Bartow, second from left, models how to insert a nasogastric tube into a mannequin. Bartow, RN, MSN, was awarded the 2010 Betty Crim Faculty Enhancement Award from her students for excellence in teaching.

confidence," said Judith Miller, PhD, RN, dean of the Sinclair School of Nursing. "Nicole has been an enthusiastic pioneer for creating these types of learning opportunities."

Part of the reason why Bartow is so passionate about teaching

nurses is because she has seen the difference — positive and negative — the clinicians can have on the patient experience. Throughout her teen years, Bartow suffered from a chronic liver problem, which left her hospitalized for weeks at a time. Eventually, a liver transplant helped her resume a normal life and complete high school.

"I understand what it's like to be a patient," she said. "I practically lived in the hospital."

For now, Bartow is exactly where she wants to be.

"I want to prepare these students the best I can for what's ahead," she said.

## Nicole at a glance ...

### What's the best part of your job?

Being able to teach and interact with bright and compassionate nursing students, and witnessing the growth of students' clinical judgment while they incorporate evidence-based practices.

### What do you like to do when you're not at work?

Most of all, I enjoy spending time with my husband and 2-year-old daughter, Ava. I love being with my daughter as she discovers her surroundings and experiences new adventures. I also love the outdoors, beaches, snorkeling and my two dogs, Bailee and Maxwell.

Story by Liz Van Hooser

Photography by Justin Kelley

## M-I-Z ... Z-O-U!

The University of Missouri cheerleaders, Golden Girls and Marching Mizzou band pumped up a crowd in University Hospital's lobby during Missouri Spirit Day on Oct. 7. Head coaches Mike Anderson (men's basketball), Robin Pingeton (women's basketball) and Gary Pinkel (football) thanked the employees for their support. In addition to cheering for MU, employees brought canned items for the Food Bank for Central and Northeast Missouri and donated to the United Way. The pep rally was hosted by MU Health Care's Art in Health Care program.



## Missouri's No. 1 auxiliary

The Ellis Fischel Cancer Center Auxiliary was honored for its exceptional efforts as an auxiliary of its size with a 2010 Auxiliary of the Year Award from the Missouri Hospital Association. James H. Ross, chief executive officer of University of Missouri Health Care; Joyce Anderson, past president of the auxiliary; and Betty Evans, current president of the auxiliary, accepted the award at the MHA's 88th Annual Convention and Trade Show in Osage Beach on Nov. 4.



From June 1, 2009, to May 31, 2010, 60 members donated 13,810 hours of service and \$49,000 in funds and equipment to the cancer center and its related programs.

## Bras boost fundraising



More than 200 donors marveled at entries in the 2010 "Decorate-A-Bra" reception at Ellis Fischel Cancer Center on Oct. 7. The event raised more than \$7,500 for the center's breast cancer patient programs. Jennifer Lynn Goynes, left, won second place in the A-Cup "Amazing" category for her entry, "Seeds of Change."

## Boy sets hospital's 1,000th transplant record



Ethan Russell, 8, of Columbia, received a lifesaving donation and made history at University Hospital on Aug. 31. Diagnosed with kidney failure, his mother donated one of her kidneys for a kidney transplant procedure — the 1,000th kidney transplant at University Hospital. Ethan is pictured with his mother, Nancy; Mark Wakefield, MD, associate professor of surgery and director of the renal transplant program, his father, Emmett; his sister, Emma, 10; and Venkataraman Ramachandran, MD, an associate professor of surgery and a pediatric surgeon. The first kidney transplant procedure was performed at University Hospital on Feb. 11, 1972.

## Radiothon raises \$105,000



Although dubbed a “minithon” because it lasted only one day, the 2010 Miracle for Kids Radiothon for Children’s Hospital on Aug. 27 brought in big proceeds — \$105,261 in donations. The funds will go toward the hospital’s Neonatal Intensive Care Unit (NICU). Above, Felicity and Claire White, 7, of Bethel, share their story with radio personalities Scottie and Carissa from 99.3-FM Clear 99 in Children’s Hospital’s lobby. Claire was born at 25 weeks’ gestation and spent 115 days in the NICU.

## Breaking for a good cause



Hockman’s ATA Martial Arts has pledged \$25,000 to Children’s Hospital. On Dec. 3, Hockman students raised \$12,000 for Children’s Hospital through martial arts board “breakathon” fundraisers. Approximately 150 Hockman students raised at least \$10 each through donations to participate in the events at all three Columbia Hockman’s ATA Martial Arts locations as well as the Mexico, Mo., location. Students broke 4,000 boards at the fundraisers.

## Great catch!

Bridgett Robbins, RN, a house manager at University Hospital, won MU Health Care’s Great Catch Award. She was honored for always thinking on her feet to ensure safe patient care. Pictured are Karen Cox, RN, PhD, manager of quality and patient safety; Kelly Butler, a quality improvement and safety coordinator at the Missouri Psychiatric Center; Robbins and Laura Hirschinger, RN, a clinical improvement specialist.



## Nominate a coworker

The Great Catch Award recognizes employees, students or volunteers whose efforts have demonstrated dedication to patient safety at MU Health Care. Honorees receive a pin, certificate and candy in front of their peers during a surprise visit planned by their manager and the Office of Clinical Effectiveness staff. For more information or to nominate someone, please contact Sue Scott, RN, patient safety coordinator, at [scotts@health.missouri.edu](mailto:scotts@health.missouri.edu).



Employees are recognized as Service Excellence Champions for providing exemplary service to patients, visitors and staff.



University Hospital's 5 East staff

A patient nominated **the weekend nursing, housekeeping and transport staff on University Hospital's 5 East.**

"I cannot express enough the wonderful care that I received from these individuals — the orderlies, housekeeping and nursing staff," he said. "All expressed a warm atmosphere of caring and promptness. My daughter said she wanted to stay because they have room service.

"The nurse techs were very polite and kind, always asking if I needed anything and told me that if I did to just push the button," he said. "I cannot express how wonderful my nurses were. Jennifer and Lynn did a wonderful job.

"The care received from the weekend crew was outstanding and I cannot express enough my appreciation for this," he said. "You have a great group of employees through the weekend who did a wonderful job for me. I want to thank them so much for making my stay more acceptable and much more comfortable. They were wonderful and I cannot express this enough."

The family member of a patient nominated **Lisa Smith, RN**, a nurse on University Hospital's 5 West.

"My mother-in-law has been a very challenging patient," she said. "As a nurse, I can empathize with the frustration of caring for such a complex patient. Being a family member, I am experiencing a different kind of frustration and a definite loss. She has been confused before but never to the point of harming caregivers. I was crushed to hear she had acted in this manner. As a family, we have a lot to deal with now and on the horizon.

"Lisa Smith was fabulous to me and my family," she said. "She went way above and beyond to ensure that the crisis was calmed. She gave my family and my mother-in-law such personal attention. I was very impressed.

"I have always been very pleased with the care my family members have received while on 5 West," she said. "Your staff has the utmost professionalism, yet has been very warm and caring."

Ashley Church, RRT, a respiratory therapist at Missouri Rehabilitation Center (MRC), nominated biomedical equipment technicians **Allen Dingerson** and **Jonathan Howell** for their excellent work.

"They do a great job of responding quickly to repair broken or damaged equipment as well as ordering new equipment to help us deliver excellent patient care," Church said. "Whenever I have encountered a problem, I have called them and they



Allen Dingerson and Jonathan Howell

immediately come right up to help. They are great about getting the equipment we need and getting it quickly.

"Whether it is troubleshooting monitors or adapting patients' call lights, they are always willing to help," she said. "When I went to Allen because I was looking for some wires for a probe that I have had difficulty finding for some time, he had them for me in just a few days."



Michelle Wheeler, SLP and Shawna Dunnaway, OT

The mother of a patient nominated **Shawna Dunnaway, OT**, an occupational therapy clinical specialist, and **Michelle Wheeler, SLP**, a speech and language pathologist, in MRC's Assistive Technology Program.

"It has been a dream come true for me to see Rex communicating so well with the assistive technology device at the Southeast Missouri State Autism Center," she said. "He was so excited to be able to communicate with the device. He has asked to come back many times because he wants to use the 'talking computer.'"

"I, too, am excited," she said. "I am arranging financing to purchase the device. Thanks to Shawna and Michelle for helping us!"



H4 unit and intensive care unit

Mary Loftis, a house manager for nursing services at MRC, thanked employees in the center's **H4 unit and intensive care unit** for their teamwork on a hectic night.

"There were three late admissions on H4 and no patients in ICU," she said. "The day staff worked very hard to complete everything for admissions and Kristen Earnest and Christy Stallings even stayed late to ensure that almost everything was complete before leaving. They gave night shift a very detailed report of the things that needed to be finished.

"The night shift staff remained positive and energetic during an incredibly busy night," Loftis said. "I feel without this team effort from days and nights that our patients would have not received the excellent care that they did," she said.

The staff included nurses Amy Krtek, RN; Earlene Hawkins, RN; Sheryl Kyle, RN; Darale Kingry, senior LPN; and OeSuk Hackney, RN.

Brandon Rinker, a patient account representative in accounting at MRC, nominated **Kim Palade**, an administrative assistant, for calming a distressed

patient. The patient mistakenly arrived for her appointment early — at 7 a.m. instead of 11:15 a.m.

"She became very upset because we were not able to cash her government check so that she could eat some breakfast," Rinker said. "Her frustration of the morning came to a peak right outside of Kim's office and she was nearing a breakdown as she spilled all her belongings on the floor.

"Kim got her a new bag for her stuff and we picked everything up but she was not calming down," Rinker said. "She demanded someone cash her check so she could eat. Kim took the lady by the hand, walked her down to the cafeteria and bought the patient breakfast with her own money."

"Kim always takes great care of us in the accounting department, but, in this case, she provided great service to a customer," he said.

The wife of a patient at Missouri Rehabilitation Center met with Steve Patterson, chief quality officer, and expressed her appreciation to everyone who provided care to her husband



Kim Palade

To nominate a faculty member, staff member, student or volunteer, please e-mail [serviceexcellence@health.missouri.edu](mailto:serviceexcellence@health.missouri.edu).

while he was recovering from a brain injury. She thanked **MRC's Hearnest 6 Unit, Special Brain Injury Unit and traumatic brain injury team**.

The patient's spouse identified a few caregivers, including physicians **Kusai Umran, MD**, a physician; **Frederick Ulam**, a psychologist; **Joe Barchak**, case manager; **Kevin O'Neal**, rehabilitation case associate; and **Mike Powell**, manager of rehabilitation services. She also expressed thanks to **John** in physical therapy, **Shawn** and **Terry** in occupational therapy and **Meg** in speech and language therapy.

"She says she has never met a more compassionate group of people and that if she had a million dollars she would donate it to MRC," Patterson said. "When she walked into the family conference, it was just unbelievable to have 12 people who were able to give her the information and help that was needed. Kevin O'Neal set up a conference call so other family members could take part in the conferences. The staff told her to call them anytime. They were always glad to talk to her and answer her questions."



The Special Brain Injury Unit and traumatic brain injury team poses with patient Joyce Ray before her discharge.

“Since my last stay in your hospital, I noticed a change in the air at University Hospital. It just made me feel so good to know that I was being cared for in a place where I felt safe, at ease and valued.”

*Beverly Jones, Brunswick*

### CHILDREN'S HOSPITAL

“Everyone was very kind and helpful during my son's stay. The ladies and gentlemen who work at Children's Hospital are the most caring of any nurses or doctors I've ever met. They made my son feel happy and kept him comfortable despite all of his pain.

There is nothing, in my opinion, that they could change. I believe they are the best already. Thank God for Children's Hospital!”

*Shayla Crowe, New Cambria*

### ELLIS FISCHEL CANCER CENTER

“I was referred to Ellis Fischel for a follow-up to a mammogram. The receptionist was friendly and welcoming. The staff members at the breast screening area were professional and friendly.

“It was a potentially frightening experience and the technician who did my mammogram follow-up (I'm sorry I don't remember for sure, but I think her name is Cindy) was excellent! She was warm, professional, compassionate, understanding and cognizant of the potential outcomes. She seemed to be almost as happy as me with the very positive results. She said they really enjoy giving this news: ‘all clear, see you in a year.’

“I wish I had thanked her more profusely for the best possible experience in that situation, but I hope this message will do that for me.”

*Jane Roads, Moberly*

“We were placed in a room on the west end of the fifth floor after Laura's mastectomies. Our nurse through the weekend 12-hour day shifts and on the Monday morning 8-hour shift was a sweet lady named Loretta. She was absolutely outstanding.

“I have never met a nurse who was more respectful of privacy, pain and punctuality than this woman. She absolutely went above and beyond at every turn, and we would not be half as far along the road to recovery as we are without her help. She deserves a medal.

“Thanks so much, Loretta. We will not forget you!”

*Laura and Bill Latchford, Shelbina*

### UNIVERSITY HOSPITAL

“Since my last stay in your hospital, I noticed a change in the air at University Hospital. I could tell that everyone — doctors, nurses, food service workers, maintenance staff and volunteers — had one mission each day. That mission was to let the patients know that they were there to help them, be respectful of them and care for them. It just made me feel so good to know that I was being cared for in a place where I felt safe, at ease and valued. Kudos to all of you! You do make a difference! Thank you so much.”

*Beverly Jones, Brunswick*

“I am astonished at the quality of care I received during a weeklong stay on the fifth floor. One nurse in particular, Nancy, shocked me with her incredible bedside manner. She was very attentive, caring, kind and respectful. She took such great care of my family and me, evaluating my pain and anticipating my general needs.

“She has to be the best nurse or caregiver I've ever had. I just wanted to let you know what a wonderful person you have in your service. She obviously cares, not just about me, but about all her patients.”

*Ben Mace, Springfield*

“My wife and I are from a small rural town in north central Missouri. Recently, she became disoriented and forgetful. After numerous tests, it was established that she had three lesions in her brain and I feared for the worst.

“The hospital staff and, in particular, Dr. Scott Litofsky, were more like small town people than I would have imagined. The courtesy, concern and all-around professionalism have greatly impressed my wife and me.

“You all have made a very trying time so much more bearable that I can't express my thanks enough. Incidentally, my wife only suffered some light strokes and we believe that she will recover fully. Again, our thanks!”

*Teresa and James R. Harris, Richmond*

### MISSOURI REHABILITATION CENTER

“I am writing to express my appreciation for the professionalism demonstrated by Teri Alderman, the registered respiratory therapist who conducted by recent sleep study. Her demeanor reflected a high degree of expertise and dedication. She was organized, efficient, personable and patient-oriented. I believe her performance is a reflection of an organization with outstanding leadership. To Teri in particular and to the entire staff, I send my thanks and appreciation for making me comfortable during a stressful procedure.

“While I usually don't write letters of commendation, Teri's performance was so above the norm that I felt I needed to show my sincere appreciation. I wanted to be certain that not only Teri receive my thanks, but that her superiors realize what a great reflection she is of their organizational leadership.”

*Jason M. Thomas, Joplin*

# Tearing down walls

Employees donate time to upgrade teen center

When a supporter approached Valorie Livingston, executive director of Boys and Girls Club of Missouri, offering to donate a new facility, she was overwhelmed by the donor's generosity. The location, just across the street from Hickman High School, was perfect at a time when the club was looking to expand its nationally accredited after-school programs for Columbia children and teens.

The organization was serving 150 at-risk children and had a waiting list of 200. The new facility would allow them to add another 100 kids. There was one hurdle, though: As a former photography studio, the building needed renovations to be transformed into a teen center.

"University of Missouri Health Care has been a lifeline," Livingston said. "Having an ally as strong as the university has made our new teen facility nicer and has helped us accomplish in 12 months what could have taken us years without their support."

MU Health Care staff have been volunteering at Boys and Girls Club since 2008, when employees repaired lights, painted walls and fixed doors at the club's main facility during the United Way's Day of Caring. Since that day, the partnership has continued, with MU Health Care staff donating their own time. For example, Boys and Girls Club had a room full of books that university volunteers researched and ordered into a library.

When the club took ownership of



Boys and Girls Club is one of 31 United Way agencies in mid-Missouri. In 2010, MU Health System raised **\$234,000** for the United Way. One in three mid-Missourians benefits from a United Way agency.



its new building, two dozen MU Health Care staff members pitched in to fix it up. Workers built new walls, laid flooring, repaired the heating and air conditioning system and installed a security system.

"I have been really impressed with how the people at Boys and Girls Club help their kids," said Larry Hall, assistant director of engineering and building operations, who has volunteered at the club. "I think they are having a positive impact, and playing a part in that feels good."

Valorie Livingston, executive director of Boys and Girls Club of Missouri, holds a laptop that was donated to the club by the Tiger Institute for Health Innovation.

Larry Hall, assistant director of engineering and building services, was one of dozens of University of Missouri Health Care employees who volunteered their time to renovate the Boys and Girls Club's new teen center, pictured above.

Story by Colin Planalp

Photography by Justin Kelley

# TOUGHNESS

comes in ALL sizes

**M**U senior forward Justin Safford proves his toughness on the basketball court. Seven-year-old Shayden proves his toughness, too, while fighting cancer. One thing Justin and Shayden share is determination and a fighting spirit. Please join Justin and the Missouri Tigers in cheering on Shayden and the dedicated specialists at MU Children's Hospital. To support Children's Hospital, please call (573) 219-4200.



*University of Missouri Health Care*

[www.muchildrenshospital.org](http://www.muchildrenshospital.org)

