



*Sutter Medical Center,
Sacramento*

A Sutter Health Affiliate

SMCS Physician

Message from Tom Gagen, CEO

November 2009

New Timeline Set for Midtown Construction Project

After a months-long evaluation process, The Boldt Co., the new general contractor for the midtown construction project, has given Sutter Medical Center, Sacramento a timeline of when certain milestones in the project should be met.

Unlike the traditional construction approach, wherein a contractor will give the earliest possible date that a project can be completed and then readjust the schedule as delays push the date further and further out, Boldt comes up with a reasonable, realistic timeline and then hopes to shave time off the schedule as its trade partners successfully meet or exceed efficiency goals.

Boldt believes in being transparent in its budgeting and scheduling. You can view the dates as the ceiling — the latest these milestones will be met. With many other general contractors, what you get is a floor, and it rises from there.

Here are four of these milestones:

- **Energy Center:** The switchover from the existing Energy Center off of 29th Street to the new Energy Center in the basement of Sutter Capitol Pavilion — **Feb. 19, 2010**. Demolition of the existing Energy Center is slated to begin later that month.
- **SGH Basement:** Completion date of the Sutter General Hospital basement and fifth floor, and department move-ins — **February 2010**.
- **Sutter Capitol Pavilion:** The date when services will start moving into the Sutter Capitol Pavilion medical office building and SMCS outpatient services center — **July 6, 2010**.
- **Ose Adams Medical Pavilion and Anderson Lucchetti Women's and Children's Center:** Move-in date for the Anderson Lucchetti Women's and Children's Center — **December 2012**. There still will be some residual work that will need to be accomplished, but the acute-care departments should be moving from Sutter Memorial Hospital to the Women's and Children's Center and the Ose Adams Medical Pavilion during that month or sooner.

The milestone dates are similar to those that the previous general contractor had set at the time Boldt was hired. As time progresses, more concrete dates for the opening of the Anderson Lucchetti Women's and Children's Center and the Ose Adams Medical Pavilion will be announced as the project moves forward and deadlines are met or bettered.

It is exciting to see the work on all the projects ramping up. While we may not see steel rising up from the Anderson Lucchetti site until later next year, we have confidence that steel erection will go faster and schedule dates will be met.

Soon, we will schedule the dates for the celebrations of the Sutter Capitol Pavilion opening. I will let you know as soon as they are set.

SMCS Welcomes New Medical Staff Members

Chandandeep S. Chahal, M.D.

2081 Arena Blvd., No. 160
Sacramento, CA 95834
(916) 285-8977
Specialty: Psychiatry

Neeharika Choudhry, M.D.

1020 29th St., Suite 480
Sacramento, CA 95816
(916) 733-3777
Specialty: Internal Medicine

Jay H. Curkendall, M.D.

77 Cadillac Drive, Suite 230
Sacramento, CA 95825
(916) 920-2080
Specialty: Obstetrics and
Gynecology

Maruja D. Diaz-Arjonilla, M.D.

1020 29th St., Suite 270
Sacramento, CA 95816
(916) 455-3700
Specialty: Endocrinology, Internal
Medicine

Crystal O. Masley, M.D.

1201 Alhambra Blvd., Suite 230
Sacramento, CA 95816
(916) 739-1007
Specialty: Family Medicine

Tarang B. Patel, M.D.

77 Cadillac Drive, Suite 130
Sacramento, CA 95825
(916) 929-8564
Specialty: Nephrology

Alireza Pessaran, M.D.

6437 Fair Oaks Blvd.
Carmichael, CA 95608
(916) 489-3641
Specialty: Family Medicine

Anne M. Prentice, M.D.

2800 L St., Suite 260
Sacramento, CA 95816
(916) 733-9556
Specialty: Surgery, Vascular

Physician Satisfaction Survey Deadline Nov. 12

The deadline for this year's Press Ganey Physician Satisfaction Survey is Thursday, Nov. 12. If you haven't filled it out yet, we encourage you to do so. When surveys were sent out in September, you received a pin number and instructions on completing the survey either by mail or on the Internet. If you need a survey or pin number, please contact Grange Fife at (916) 733-3097 or e-mail her at FifeK@sutterhealth.org.

The physician survey is an important tool for the SMCS Administrative Team to improve patient care and medical staff satisfaction at our hospitals.

All physicians who complete the survey and contact Grange Fife will receive a gift certificate for a car wash and will be entered into a raffle for one of five \$100 gift certificates to Biba restaurant.

HealthGrades Rates SMCS Orthopedic Care in Top 10%

Orthopedic care at Sutter Medical Center, Sacramento ranked in the top 10 percent in the nation by a new study released in October by HealthGrades, the leading independent healthcare ratings organization. The HealthGrades study evaluates objective patient outcomes in the nation's 5,000 hospitals.

In addition to being ranked in the top 10 percent in the nation for orthopedic surgery, the Sutter Orthopaedic Institute is also five-star rated for total knee replacement, total hip replacement and hip fracture repair, and the Sutter Neuroscience Institute received five stars for spinal fusion surgery.

The 2010 HealthGrades ratings are at www.healthgrades.com.

SMCS Physicians, Nurse Publish Article on Scoliosis Surgery

Four doctors and a nurse at Sutter Medical Center, Sacramento recently published their experience doing minimally invasive thoracic scoliosis correction surgery in adolescent patients.

George Picetti III, M.D. and Andy Fox, M.D. of the Sutter Neuroscience Medical Group, David Downs, M.D. and David Estep, M.D. of CASE Medical Group, and Tina Holland, R.N., in cooperation with the medical staff at the Istituto Ortopedico G. Pini, Milano, published their technique and results for thorascopic correction and instrumentation with fusion for idiopathic thoracic scoliosis in adolescences.

The article is titled, "Thorascopic Instrumentation Correction and Fusion of Idiopathic Adolescence Thoracic Scoliosis," and appeared in the "archivio di Ortopedia e Reumatologia" Vol. 120 N.1 2009. The article describes the indications, preoperative planning, surgical technique and results from the first 100 cases.

Improving Transfers Is Goal of New Regional Center

By Cecilia M. Hernandez, M.D., *SMCS Vice President of Medical Affairs*

Last month was a significant month with respect to transfers at Sutter Medical Center, Sacramento. October was the two-year anniversary of the Tertiary Care Committee, and it also marked the launch of the Regional Patient Transfer Center for Sutter Health Sacramento Sierra Region. The RPTC facilitates transfers between hospitals within the region as well as transfers from hospitals outside SHSSR. Over the past two years, the Tertiary Care Committee has done a lot of work to develop best practices with respect to appropriate transfers. Each one of you has played a role in developing these best practices. Your willingness to communicate what works, what doesn't work, and what will never work has helped to shape the direction we have taken in the past and will take in the future. This has been a true collaboration through thick and through thin. Thank you.

The Tertiary Care Committee was originally developed as an ad-hoc committee of the Medical Executive Committee to address physician issues relative to transfers from outside facilities. Primarily, there was a concern that the medical staff was unclear about when and why SMCS accepts transfers. One set of transfers is covered by federal Emergency Medical Treatment and Active Labor Act regulations that necessitate compliance. It is imperative that physicians understand their obligations under these regulations to avoid putting themselves and the hospital at risk of violation but also to avoid being falsely led into thinking they must accept what may be an inappropriate transfer.

In addition, there are the transfers that SMCS welcomes as part of the growth plan to build our tertiary and quaternary service lines, including Women's and Children's Services, Neurosciences, Cardiovascular, Orthopedics, Oncology and Psychiatry. Initially, one of the key barriers to accepting appropriate transfers was a lack of clarity around the specific roles played by the admitting and consulting physicians. Additionally, there were process issues around external marketing of services, transfer request management and the interface between the transfer coordinators and SMCS physicians, as well as between SMCS physicians and referring physicians. Finally, the committee needed to develop a system of data collection to define the scope of the issues as well as measuring progress in resolving those issues.

The committee consists of the chair of the UM Committee, the medical directors of the Hospitalist Program and the Surgical Hospitalist Program, representatives from Pulmonary Medicine Associates (PMA), Sutter Emergency Medical Associates (SEMA), nursing administration, the director of Sutter Specialty Network (SSN), the manager of the RPTC and me as VPMA and chair of the committee. Addressing role clarification, process issues and data collection resulted in the basic operational structure, which includes the following:

1. Transfers needing subspecialty consultation are first reviewed by the subspecialist to assess whether the transfer is appropriate and to ensure that the subspecialist is willing to consult.
2. Admissions are done by PMA or the hospitalist, depending on acuity: ICU vs. non-ICU.
3. Data collection includes detailed information about which specialties are requested, the hospitals requesting transfer to SMCS, percent of requests accepted, reasons transfers were not accepted, and payer mix of transfers accepted.

One of the first observations of the Tertiary Care Committee was the need for this work to occur for the entire region, creating a regional transfer center staffed by subject matter experts with the goal of utilizing the resources in the region optimally and providing the best transfer services to referring facilities. The concept was shared with the Regional Operations Team, as it was known at the time, and under Sarah Krevans' leadership that concept was brought into reality as the RPTC, which launched with a soft opening last month, starting with assuming the transfer responsibilities for SMCS during the daytime hours only. The soft opening of the RPTC has been marketed only to SHSSR facilities thus far, with the understanding that there would be a transitional period that would require working through operational bugs. The plan is to expand the hours covered by the RPTC by the end of November.

The Tertiary Care Committee continues to meet once a month to understand the growth needs of the service lines, review the data and address in a multidisciplinary and collaborative manner the barriers to providing the best tertiary and quaternary services to the communities we serve and to ease the burden of work to our medical staff with respect to transfers. In the future, we will be working closely with the RPTC on data collection with respect to the need for the transfer, establishing formal lines of communication between the committee and the RPTC, as well as between the committee and the SMCS medical staff. Finally, we will be working on an escalation/feedback process to further refine the relationships we have with our sending facilities.

I welcome your comments. Please email me at hernanc@sutterhealth.org