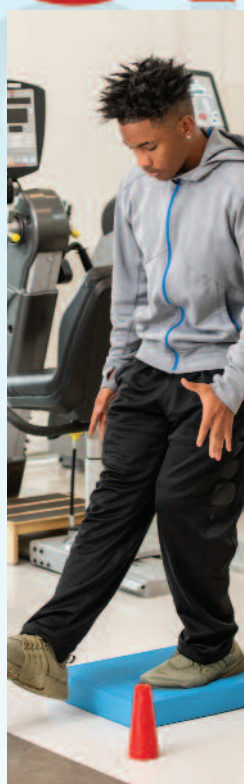


MICROSCOPE



A New Place for Kids Healing from Catastrophic Injury & Illness

WakeMed Rehab has always offered comprehensive inpatient care for children recovering from serious injuries and illness. But, like many rehab hospitals, pediatric rehab inpatients were intermixed with adult rehab inpatients. That will soon change at WakeMed.

In mid-March, WakeMed Children's Rehab will open inside the WakeMed Children's Hospital. WakeMed Children's Rehab will welcome children as young as 4, adolescents and young adults (as appropriate) with traumatic injuries and illness such as:

BRAIN INJURY • SPINAL CORD INJURY
STROKE • AMPUTATION • MULTI-FRACTURE

Children's Rehab includes five private patient rooms, a therapy gym with kid-size equipment, a dining area and access to other Children's Hospital amenities, including:

RONALD MCDONALD HOUSE SERVICES

CHILDREN'S PLAYROOM • TEEN ROOM • NOURISHMENT AREA

The care team is different from that of a typical pediatric inpatient unit. Children's Rehab inpatients will be cared for by our outstanding team of pediatric hospitalists, nurses and child life specialists as well as:

- Physiatrists – physicians who specialize in physical rehabilitation
- Pediatric physical, occupational and recreational therapists
- Pediatric speech/language pathologists
- Pediatric neuropsychologists
- Clinical case managers
- Everybody's favorite facility dog – Pistachio!

No matter a patient's age, the process to qualify for care in any inpatient rehab facility is much more complex than it is for a stay in a regular, acute care hospital. As always, the WakeMed Rehab Admissions team is ready to go to work for parents and providers looking for intensive inpatient pediatric rehab services. After their inpatient stay, children can continue their rehabilitation at one of WakeMed Rehab's nine outpatient offices in Wake County and Clayton.



WakeMed Launches ECMO Treatment

In February, WakeMed launched a comprehensive ECMO program in partnership with Duke Health and our *Heart Care Plus+* collaborative. Extracorporeal membrane oxygenation (ECMO) is an advanced life support technique used in patients whose heart and/or lungs aren't working properly due to severe injury or illness. ECMO is used when all other standard treatments have failed and can support patients for weeks – allowing the heart and lungs time to recover while physicians treat the underlying condition(s).

"A successful ECMO program is an essential building block for bringing new and advanced therapies to our cardiovascular and thoracic programs here at WakeMed," explains **David Kirk, MD**, executive medical director, critical care medicine.

ECMO requires specialized training and the support of many areas within the hospital, including nursing, respiratory therapy, cath lab, pharmacy, information services and our physician practices. In 2016, WakeMed began initiating ECMO for pediatric patients who were then transferred to Duke, however this is the first time we have had a fully-supported program that allows patients to stay at our facility.

Depending on the type, ECMO can do the job a healthy heart or lungs typically performs. Like the lungs, ECMO can remove carbon dioxide and provide oxygen to the blood. ECMO can also work like the heart by pumping oxygenated blood back into the bloodstream.

"I am excited to leverage our expertise in pulmonary and critical care medicine with our top-rated heart surgery program to bring this innovative therapy," shares **Judson Williams, MD**, executive medical director, Heart & Vascular.

"This is one example of our *Heart Care Plus+* collaboration that is impacting our patients right here in Wake County."

Heart Care Plus+

WakeMed  DukeHealth

WHAT'S NEW AT NORTH HOSPITAL *growing to serve our community*

What began as an outpatient services center in 2002 is today a growing hospital complex that is treating higher acuity patients of all ages and continues to add new services and specialties to meet the needs of our community. Here is a quick overview of some of the recent and upcoming changes in store for North Hospital.

- **New Name, Same Great Service:** To better reflect the current scope and services, the facility's new "official" name is WakeMed North Hospital. When the hospital opened in 2015, WakeMed North Family Health & Women's Hospital accurately reflected our area of focus, but we've added a wide range of services for the whole family since then – and will continue to do so in the coming years.
- **New Intermediate Care Unit Now Open:** To better serve patients in northern Wake County, we recently opened a 6-bed intermediate care unit – designed to care for patients that previously would have been transferred to another hospital. To support this change, we've added a dedicated team with experience in step-down care and increased nursing ratios. Starting in March, the unit will be supported by eICU services.
- **Emergency Department Expansion:** Construction will begin this spring to increase the size and capacity of the emergency department. The project should take less than a year to complete and allow us to serve up to 10,000 more patients annually. With this expansion, we'll implement a new dual-track model of care that will allow us to care for minor and major injuries/illnesses in a more efficient and streamlined manner.
- **Expanded Specialty Coverage:** Expanded specialty care coverage for Emergency Department patients began in January with general surgery. Cardiology and orthopaedics will be added to the coverage rotation soon, allowing more emergency department patients to be cared for at North Hospital.
- **Advanced Cardiovascular Testing:** This year we're adding several advanced diagnostic services, including a new stress echo machine and a new Doppler ultrasound machine, allowing us to better identify life-threatening conditions such as a potential blood clot, a blocked artery or other vascular problems. Plus, adding new staff to support these diagnostic services will allow us to expand the hours/availability of other existing services.
- **New Imaging Services:** North Hospital is also adding an additional CT scanner this year, which will allow us to provide routine CT scans without delaying urgent scans for emergency patients.

"Since the WakeMed North campus opened to patients in 2002, it has been evolving to meet the needs of our growing community," explains **Tom Gough**, senior vice president & administrator, Community Hospitals. "Our goal is to continue responding to the needs of our patients – of all genders and all ages – by adding convenient and innovative services that can help improve the health of the community."



Leveraging Data as a Catalyst for Positive Change

As WakeMed continues our efforts to become a top 10 organization for quality, we have signed an agreement with Health Catalyst, a leading provider of data and analytics technology. Health Catalyst works with health systems across the country to support clinical transformation and the journey to value-based care. Health Catalyst tools will help us manage the incredible amount of clinical, business and operational data we have by bringing it together in one platform and delivering real-time insights.

“Health care is changing at a rapid pace, and this kind of partnership will help equip our incredible teams with the information they need to help WakeMed continuously improve,” explains **Pete Marks**, PhD, vice president & Chief Information Officer.

WakeMed plans to implement two Health Catalyst tools to help us provide more efficient, quality care:

- Data Operating System (DOS) is a data-first, analytics and application platform used to capture and map raw data into meaningful, actionable insights.
- Rapid Response Analytics (RRA) includes tools that allow analytics teams to integrate and customize data, logic and algorithms.

With the agreement now in place, we will spend the next several months building the infrastructure and governance needed to put these tools in place and launch new, analytics-enabled projects.

“This is an opportunity to accelerate innovation and support positive outcomes for our patients, families and communities by providing the right information, at the right time, in the right place,” said **Chris DeRienzo**, MD, senior vice president, Quality & Chief Medical Officer. “I’ve seen firsthand how powerful the right analytics can be in the hands of a team committed to driving continuous improvement, and we couldn’t be more excited about starting that work today.”

Stay tuned for more information and updates about these new analytics tools as this work gets underway.



HELP US COLLECT POSITIVE PATIENT *stories*

WakeMed employees, physicians and volunteers are all unique, talented and contribute so much to our community every day. Help us share these stories of talent, compassion, commitment and care with the world.

Do you know of a patient, family member or friend who would like to share their personal experience regarding their visit to WakeMed? If so, please encourage them to share their experience by completing the form at www.wakemed.org/share-your-story or sending an email to share@wakemed.org. If you receive a patient story in any form, please forward it to share@wakemed.org and include the individuals’ contact information. We will follow proper privacy protocols to learn more about their story. We look forward to hearing all the wonderful things each of you are doing to help make our patients, their families and friends feel welcome and at home at WakeMed. Thank you for your help spreading the word of how our patients can share their unique story.

EFFICIENCY IN ACTION

Improving Inpatient Consults

It’s very common for patients in the hospital to require consultation with a specialist – in fact, over 300 inpatient consults are ordered every day at WakeMed. Historically, requesting these consults was a largely manual process involving multiple phone calls, texts and pages, often over the course of several hours. It’s no surprise this was a common cause of frustration and delay for patients, providers and staff.



Over the last year, a small team led by **Ted Tsomides**, MD (Hospital Medicine) has been working to improve the inpatient consult process by developing a faster, more efficient method. The new process allows providers to order consults in Epic with the desired specialist or practice – and the appropriate on-call provider receives a

secure, HIPAA-compliant text message via RapidConnect within seconds.

Creating the workflow and getting providers on board with the new process took a lot of effort – but that work is paying off for patients. Today the median read time for inpatient consult requests is less than a minute! Some of the additional advantages include:

- Call schedules are maintained within RapidConnect so the appropriate provider is contacted
- Secure, HIPAA-compliant messaging permits more detail than simple texting
- The requesting physician can see a "read receipt" confirming the message was delivered
- Providers do not need to be logged into Epic to learn of a new consult request

The new process has been rolled out specialty-by-specialty and approximately 2,400 providers are now able to participate in it.

“This was a major change – as some providers had been using the same process for decades, and now we are asking them to do something new,” commented Dr. Tsomides. “As with any project, we experienced both technical and workflow issues along the way, but we have addressed many of them and continue to refine the new process. It is gratifying that our providers have been receptive to new ideas, with an outcome of improved speed and accuracy of provider communication around new inpatient consults hundreds of times each day.”

Above: Members of the team that created and implemented the new inpatient consult request process include (left to right) **Sal Haliloglu**, **Christopher Bober**, **Ted Tsomides**, MD, and **Rex Nufer**, along with (not pictured) **Kelly Johnson** and **Mary Anderson** (of RapidConnect).

WW2E Update: Standardizing On-Call Contact Processes

WakeMed is also using RapidConnect to improve the process for identifying and contacting on-call providers.

Over the years, clinical staff have used numerous “sources” to find contact information for on-call providers. The lack of a standard process led to mis-connections, staff and provider dissatisfaction and delays in patient care. Following an RPIW held last summer, Cary Hospital recently adopted RapidConnect as the one source for properly identifying and contacting on-call providers. The new process was rolled out in December, and has received positive feedback from nursing staff. Plans are underway to implement this standard work at Raleigh Campus and North Hospital by May 1.



PROVIDING EXCEPTIONAL CARE DURING A BUSY FLU SEASON

For four of WakeMed’s seven emergency departments, February 4, 2020, was a memorable day – a day that cumulatively set new records for patient volumes! Since then, many of WakeMed’s emergency departments have continued to break records. This winter has been an incredibly busy one system-wide, due to flu season and other infectious illnesses that are impacting Wake County residents in an aggressive manner. Of course, high numbers of patients in our Emergency Departments also mean record numbers of admissions to our pediatric and adult inpatient units as well! Thank you to everyone who has helped care for our community during this cold and flu season – you have enabled us to care for very ill patients in their time of need while still delivering the scheduled care many patients have planned for. Keep washing your hands and let’s hope the worst of flu season is behind us!



HOW MAY I LEAVE YOUR DOOR?

Pearls is a system-wide initiative that builds on our Wake Way behaviors by highlighting brief, easy-to-remember tools and actions that demonstrate respect, support patient dignity and improve communication. These intentional behaviors should become part of your daily work routine.

We are pleased to introduce our second pearl: “How may I leave your door?”

Putting it in Practice: When you are exiting a patient’s room, always ask the patient how they would like their door. Asking an open-ended question allows the patient to choose if they want their door open, closed or halfway open.

- **Words to Use:** “To be respectful of your privacy, how may I leave your door?” or “To be respectful of your privacy, how would you like your door?”
- **Words to Avoid:** “Do you want your door open or closed?” This leaves no opportunity for patient input or decision-making.

Every patient care situation is different and there will be times when doors must remain open or closed based on clinical or safety needs. Always use your best judgement to support the safety and healing process of your patients and the surrounding area.

Don’t forget to continue with Pearl #1: knock, announce and ask permission before entering a patient’s room.

CHASING ZERO UPDATE

IHIT AIMS
FOR ZERO
INFECTIONS

Sternal wound infection is a serious, debilitating and expensive complication that can occur after cardiothoracic surgery. Patients who experience these infections face an intensive treatment plan, higher mortality rates and tremendous added costs – all in addition to recovering from open heart surgery.



Nationally, between 1 and 8 percent of open-heart surgery patients experience sternal wound infections – and while the WakeMed rate of all sternal wound infections of ~1.6 percent is very good, it isn't good enough for our top-rated cardiothoracic surgery team. The "I Hate Infections Team" (IHIT) initiative has embraced "Chasing Zero" and is focusing efforts on eliminating sternal wound infections at WakeMed.

This work began last summer when IHIT was formed. "The goal was to create a multidisciplinary infection control team and use evidence-based concepts to minimize our patient's infection risk – from pre-op to the step-down unit and everything in between. The hope is that we create lasting changes to our processes that will both improve patient outcomes and reduce cost," commented **Michael Modrow**, PA-C. Modrow has designed and

spearheaded this bold initiative with his CV surgery APP colleagues and is quick to acknowledge that, "all WakeMed CV surgery and service line colleagues are a part of this team."

In just six months, numerous positive changes have been made – some small, some large – but all impactful. In one example, the team evaluated the process for screening outpatient patients for MRSA. This screening is important because the results determine the type of antibiotic patients receive in the OR to head off infections. The team introduced new, more efficient processes to ensure all patients are screened and receive tailored antibiotics.

Other important changes include:

- Engaging our valued Environmental Services team to standardize and optimize cleaning and maintenance efforts to ensure a clean OR environment.
- Re-training staff and providers on surgical scrubbing.
- Piloting efforts to reduce the introduction of bacteria into the ORs, including transporting patients on clean stretchers, rather than patient beds from the unit.
- Focusing attention on limiting how often the OR door is opened and closed during a procedure.
- Piloting new products – including disposable EKG leads and new neck line dressings – that are easier to use and maintain, thereby removing the opportunity for human error.

The ever expanding IHIT team can be proud of these efforts. "Seeing Mike and many others on this team come together to achieve positive change has been remarkable and represents what I love about WakeMed. Our patients and community will continue to benefit from this work for many years to come," commented **Judson Williams**, MD, MHS, executive medical director, Heart & Vascular. One long-term goal is to replicate the IHIT framework for other surgical service areas.

A New Way to See Patient Images

Patient images (x-rays, scans, swallow studies and much more) are key pieces of information that help providers make sound clinical decisions in the best interest of their patients. Until recently, patient images at WakeMed were stored in several locations, on computers and platforms that did not always communicate with each other well. The result? Images were not easily accessible for providers, and rarely available for patients.

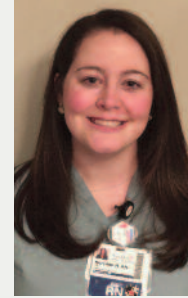
In an effort to bring together all patient images into one, standardized location, last fall, WakeMed implemented Fuji's VNA (vendor neutral archive). Some of the benefits of this new tool are:

- Increased accessibility for providers and patients
- Improved continuity of care and provider satisfaction
- Standard workflow for acquiring, storing and accessing patient images

Today, Fuji VNA is being used to store cardiology, radiology, speech, wound and sensitive Children's Emergency Department images. In the coming months, we will add speech videos, images from Surgical Services Stryker towers, Endosee, dental images and QPath to the platform. All of these images will be accessible with the Fuji Mobility Viewer, along with images stored in WakeOrtho PACS and MFM ViewPoint PACS.

Bringing the Fuji VNA platform online has been an interdisciplinary effort that involved departments across the health system working together. This is just one more way WakeMed is working to create standard work and improve efficiency in the interest of delivering exceptional patient care.

GOOD CATCH



WakeMed's Good Catch Program encourages staff to positively impact patient safety by speaking up, reporting good catches and sharing their experiences. If you have made a good catch, share it by clicking the "Report a Good Catch" link on the WakeMedWeb.

Meredith Manning, RN, (Surgical Services – Raleigh Campus) made a Good Catch while she was assisting with a surgical procedure on a patient who was 34 weeks pregnant. The surgery was not related to the pregnancy, but when Meredith was placing the patient's catheter, she noticed signs of infection and possible cervical fluid. Meredith called the OB-GYN resident to examine the patient and test for infection. The OB team found that the patient's water had broken, and a fetal stress test showed she was experiencing contractions. The patient was transferred to Labor & Delivery and had a C-section the next day due to an infection that the baby was not tolerating well.

WOW, WHAT AN EMPLOYEE!

Kelly Thompson-Brazill, NP, (Heart & Vascular Physicians) published an article titled "Pain Control in the Cardiothoracic Surgery Patient" in the journal *Critical Care Nursing Clinics*.

Siddhartha Rao, MD, (Heart & Vascular) has been selected as national principal investigator for an upcoming peripheral vascular clinical trial.

A paper comparing different bariatric surgery approaches coauthored by **Paul Enochs**, MD; **Scott Bovard**, MD; and **David Pilati**, MD (all of Bariatric Surgery & Medical Weight Loss) and others has become the most read paper on the *Surgery for Obesity and Related Diseases* website.

Trauma Research resident **Mary Kate Bryant** (WPP Clinical Research), presented two topics at the Southeastern Surgical Congress (SESC): "Does Blood Alcohol Content Affect Clinical Outcomes After Trauma in Older Adult Patients" and "Exploring Functional Outcome and Return to Work after Blunt Chest Injury."



Congratulations to **Scott Stewart**, **Mesha Martin** and **Mark Walker** (all of Surgical Services – Raleigh Campus) who recently earned certification in reprocessing flexible endoscopes and were promoted to Endoscopy Technician II. Only about 1,000 people nationwide hold this certification – and these employees are the first in our area.

Tracy Brock was promoted to manager of Talent Acquisition & Employment.

Chloe Kongs, RN, and **Michael Bisette**, RN, (both of 2 West Intermediate Care – Cary Hospital); and **Chris Salter**, RN (1C Clinical Evaluation Area) earned bachelor's degrees in nursing (BSN).

Michael Musa (1C Clinical Evaluation Area) earned his ADN.

Abby Dickinson, BSN, RN, (5B Neuro Intermediate Care) was promoted to Clinical Educator/Supervisor.

The Mother's Milk Bank was featured in *ISE Magazine* for the work that was done with one of their community partners.

COMINGS & GOINGS

The Compensation team welcomes **Vira Hogan**.

CICU welcomes **Shannon Starke**, RN, and **Susanna Hodge**, RN.

6C Surgery & Trauma welcomes **Aidan Wilson**.

Emergency Department – North Hospital welcomes **Whitney Zimmerman**; **Nicole Moody**, RN; **Carmen Obregon**; **Nancy Reavis**, RN; and **Blake Watkins**, RN.

1 East Clinical Evaluation Area – Cary Hospital welcomes **Isabelle Berube**, **Vanessa Castro**, **Stacey McManamy**, **Chris Jarvis** and **Allen Williamson**, RN.

Health Information Management welcomes **Karen Barry** and **Valerie Bullock**.

Pathology Transfusion Services welcomes **Sarah Jensen**.

OneCall welcomes **Megan Phillips**.

Heart & Vascular – North welcomes **Sylvetta Bryant**, RN.

6A CVIC welcomes **Rosalyn Monds** and **Zee Howard**, RN.

Heart Center Inn welcomes **Ashley Westbrook**.

Home Health welcomes **Patricia Mendoza**, RN; **Youngmee Hahn**, SLP; **Sarah Fleming**, OT; and **Patrice Brown Parker**, RN.

Financial Clearance welcomes **Brinda Rangasamy**.

4C Mother/Baby welcomes **Nikki Sexton**, RN; **Jazmine Bakare**, RN; **Sandy Freeman**, RN; and **Kat Czesznecki**.

ADDITIONS + ATTACHMENTS

Becky Riggan (Mother/Baby – Raleigh Campus) married Larry Rochelle on January 31.

WakeMed Named TCAR Center of Excellence



WakeMed was recently named a 2019 TCAR Center of Excellence for improving carotid artery disease treatment using a new procedure called TransCarotid Artery Revascularization (TCAR). TCAR is a clinically proven, minimally invasive and safe approach for high-risk surgical patients to reduce their risk of stroke.

TCAR developer, Silk Road Medical, reviewed hospitals across the country to recognize the centers that have demonstrated excellent patient outcomes through appropriate patient selection and a well-trained and credentialed vascular specialist team. This recognition demonstrates WakeMed's commitment to delivering the highest quality care for carotid artery disease.

Congratulations, Health Care Heroes!

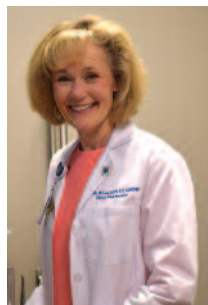


The *Triangle Business Journal* recently announced its 2020 class of Health Care Heroes and two members of the WakeMed family and one close partner are among this year's list of 24 honorees. The annual program recognizes leaders in their field who have made significant contributions to health care.

Kris Wolfe, PT, (Physical Therapy – Cambridge Village) specializes in working with older adults and knows that people who are afraid they are going to fall often stop participating in activities and social events they enjoy. To help address a need for more falls-prevention education and programs to keep seniors safe and steady on their feet, she helped develop Ready, Steady, Go!, a free WakeMed program for seniors and adults whose parent(s) are unsteady on their feet. Launched in 2018, Ready, Steady, Go!, focuses on awareness, prevention, risk factors, and ways to achieve optimal balance, muscle strength and improved coordination.



After three years as a WakeMed chaplain, **Mallory Magelli McKeown** moved into the role of WakeMed Children's family navigator in 2018. Today, she advocates with and for WakeMed Children's families when medical decisions need to be made or when there are crisis moments in their child's care. Whether it is helping families through a hospital stay, providing support in times of loss or, in one memorable instance, officiating the wedding of the parents of a NICU patient, she consistently goes above and beyond to provide compassionate care. Magelli McKeown also oversees several NICU support programs and is a facilitator for You Are Not Alone, a support group for those with mental health issues and their loved ones.



As a Transitional Care Navigator with *Cancer Care Plus+*, **Brenda Wilcox**, CNS, is a familiar face at WakeMed. A Duke Health employee who is based at Raleigh Campus, Wilcox helps families navigate the complex world of follow-up care that comes with a cancer diagnosis. She is a resource for all WakeMed patients with a Duke referral who receive a cancer diagnosis to help them understand next steps as they transition from WakeMed to Duke oncology services in Wake County. She also works closely with care team members to ensure patients have a comprehensive care plan and identify opportunities to streamline the process for patients.

WakeMed APPs Recognized by County Commissioners



On Monday, February 17, the Wake County Board of Commissioners recognized WakeMed's Advanced Practice Providers (APPs) with a resolution that declares the first week of March as "Advanced Practice Providers Appreciation Week" in Wake County! Our dedicated team of APPs, represented by **Michelle Schweitzer**, NP, executive director, APPs, was honored for their excellent patient care, their dedication to their profession and commitment to teaching the next generation of health care professionals. The designation will be celebrated during the first annual APP Symposium in March. Congratulations to all of our APPs and thank you for all you do for WakeMed and the patients we serve!

SERVICE AWARDS MICROSCOPE CORRECTION

We learned that several employees were left out of the recent Service Awards issue of *Microscope*. On behalf of Human Resources and Marketing & Communications, please accept our sincere apologies for this oversight.

30
Years of Service



Teresa Batten
Respiratory Care
Services

5
Years of Service

Sonja Aal-Anubia, RN, Staffing Resources – Cary Hospital

Stacy Abbott, Urgent Care

Amber Adams, Therapy Services Supplemental Pool

Jessica Adams, NP, Heart & Vascular

Eva Aguirre, Therapy Services Supplemental Pool

Alice Alford, 5C Medicine

Cynthia Allen, Environmental Services – Raleigh Campus

Nathan Allen, Invasive Cardiology

Elizabeth Ameka, RN, 3C Rehab

Carmencita Archila, Primary Care

Laura Asermely, RN, 3 West Med/Surg – Cary Hospital

Jody Atherton, Pharmacy – Raleigh Campus

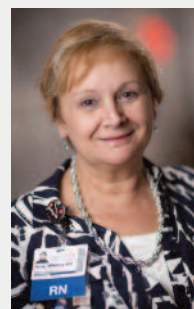
Nicole Aune, RN, NICU

Abdul Chaudhry, MD, Heart & Vascular



Doug Trocinski, MD, Named Chief Medical Officer, Cary Hospital

Doug Trocinski, MD, an emergency services physician with Wake Emergency Physicians, PA, (WEPPA) has been named Chief Medical Officer (CMO) for Cary Hospital. As CMO, Dr. Trocinski will work in dyad leadership with **Tom Gough**, senior vice president & administrator, Community Hospitals, to lead the strategic performance, operations and growth of the enterprise. Dr. Trocinski will also serve as the leader for Cary Hospital medical affairs, working closely with **Chris DeRienzo**, MD, senior vice president, Quality & Chief Medical Officer. Dr. Trocinski has been a physician with WEPPA since 2002, providing care for WakeMed patients for nearly 20 years and serving in numerous leadership positions.



Vicki Whitley Transitions to Executive Director, Ambulatory Services

After serving as executive director for Nursing at Cary Hospital for five years, **Vicki Whitley**, MHA, BSN, RN, has been named executive director of Ambulatory Services. In this role, Whitley will be responsible for the clinical, operating and financial outcomes of WakeMed Healthplex facilities in Apex, Brier Creek and Garner. In addition, she will oversee clinical practice for Corporate & Community Health and our mobile wellness program. Whitley has more than 30 years of nursing leadership experience and previously served as the director of the ambulatory Emergency Departments and held leadership roles at the Raleigh Campus and former North Healthplex (now hospital) emergency departments.

NEWS FROM WakeMed Physician Practices

Welcome New Advanced Practice Providers

Melissa Scott, PA
Hospital Medicine

Mark VanViegen, NP
Urgent Care

We've Moved!

WakeMed Children's PM Pediatrics Urgent Care – Morrisville has moved to a new location at:
1125 Hatches Pond Lane
Suite 101
Morrisville, NC 27560
Open daily, noon to midnight.



Don't Forget Your Biometric Screening Biometric Screenings are ongoing through April 2

Things to remember:

- Know the time and location of your screening and allow approximately 25 minutes, start to finish.
- The screening includes height, weight, waist circumference, blood pressure and a basic lipid panel (cholesterol) with blood glucose.
- Employees can also bring current blood work results to the screening (to qualify, it must have been conducted after January 1, 2020, and must include full lipid panel and a total glucose).
- The cholesterol screening requires fasting for a minimum of eight hours unless prohibited for medical reasons. Pregnant employees do not need to fast.

Screening results will be posted to WakeMed MyChart, usually within 72 hours. Blood work results (lipid panel and glucose) will be under "View Test Results" and measurements (height, weight and BMI) can be found in "Letters".

Remember, you must meet a certain level on each standard to receive the reward. If you do not meet the standards, you can complete an alternate standard requirement to make up points. More details about alternate standards will be shared next month. Questions? Contact Bob Nelson, ext. 06903.

Ted Tsomides, MD, (Hospital Medicine) recently received the Transitions LifeCare's "Champion of Palliative Care" award. The award recognizes outstanding WakeMed staff who demonstrate the values of palliative medicine for their patients and families each day. Transitions LifeCare cares for individuals and families with compassion, support, and expertise as they navigate the end of life or life-changing illness.



A huge thank you to Athens Drive Magnet High School, who recently raised over \$6,000 for the WakeMed Children's Hospital at their Second Annual Charity Gala. Additionally, the Athens Drive HOSA-Future Health Professionals club made and donated beautiful paper flowers, which our volunteers passed out to patients on Valentine's Day!



The annual Well-Being Fairs (left) were held in January, providing staff with an opportunity to learn about health and wellness benefits available to WakeMed employees. Participants could also get their blood pressure checked, enjoy chair or hand massages and sample new café menu items. Thanks to everyone who came out to these great events and to all the groups that provided information!



WakeMed's Core Lab (above) recently upgraded to a brand new, state-of-the-art automation line. The new machine provides automation for hematology testing and will help eliminate our current manual process for loading/unloading hematology specimens. Members of the Pathology team gathered for a ribbon cutting shortly after the machine was installed.

WakeMed Children's and Marbles Kids Museum teamed up to bring a new speaker series to our community. The series will feature a variety of speakers and interactive programs throughout the year – some just for parents, and others that foster positive interaction between parent and child. The goal of the series is to spark the imagination of parents as they face everyday challenges of parenting and childhood. Visit www.wakemed.org/playfulparenting to learn more.



WAKEMED GOES RED!

On Friday, February 7, employees from across WakeMed dressed in their best reds for Go Red for Women Day! This annual event is part of American Heart Month and is intended to help raise awareness of cardiovascular disease. It's also a great way to recognize everyone at WakeMed who provides compassionate care and service to our heart patients and their families!



Students from the NC State Master of Accounting program took time out between classes, midterms and case studies to make special Valentine's Day cards for WakeMed Children's Hospital patients. These students were one of several community groups and organizations that showered our patients with love on Valentine's Day.



WakeMed President & CEO **Donald Gintzig** addressed members of the North Carolina Healthcare Association at a meeting in February. Gintzig is Chair of the organization's Executive Committee of the Board of Trustees this year.



MICROSCOPE

Microscope is a monthly newsletter written by and for the employees of WakeMed. Our goal is to provide employees and friends of WakeMed with the most up-to-date news on all of the hospital system's activities. The Marketing & Communications department thanks all of the employees who contributed to this publication.

We welcome comments and suggestions on this publication and its content. Call (919) 350-8120, e-mail microscope@wakemed.org, or write Microscope, WakeMed Marketing & Communications, 3000 New Bern Avenue, Raleigh, NC 27610.

Kate Wilkes, Editor
WakeMed Employees, Photos

© WakeMed Marketing & Communications, February/March 2020

APRIL

Diversity & Inclusion Month

Every April, WakeMed celebrates Diversity & Inclusion Awareness month with educational opportunities and fun events! Mark your calendars for the fourth annual food truck fair at Raleigh Campus on Wednesday, April 29. The event will feature several food trucks with food available for purchase. Stay tuned to the WakeMed Weekly and MyWakeMed for details about all of the Diversity & Inclusion Awareness activities taking place in April.

WakeMed's New Diversity Council

WakeMed understands the significance of having a diverse workforce to better serve our patient population, provide an inclusive environment for our team and provide a competitive advantage. It is with great pleasure that we announce the launch of WakeMed's new Diversity Council. This committee will be responsible for assessing the needs of our organization around acceptance and inclusion and implementing strategies and solutions that will benefit our patients and employees, while building on our mission of delivering outstanding and compassionate care to all.



Follow us!



WakeMedHospitals



@WakeMed



WakeMed & WakeMed Children's



WakeMed App

Want to learn more about what's happening at WakeMed? Follow us on social media or download the WakeMed App!

CALENDAR OF EVENTS

To help you plan ahead, this calendar lists upcoming system-wide events, training classes and community events. For details and fee information, visit MyWakeMed. Send calendar submissions to Marketing & Communication or email microscope@wakemed.org.

Employee Forums 2020

Don't miss this opportunity to talk informally with WakeMed President & CEO Donald Gintzig and hear what's on the horizon for WakeMed in the months ahead. Employees are welcome to attend any session at any facility, regardless of where they work.

North Hospital – Tuesday, March 10, 2:30 pm

Raleigh Campus – Thursday, March 12, 2:30 pm

Cary Hospital – Tuesday, March 31, 2:30 pm

Corporate Center – Thursday, April 2, 10 am

Garner Healthplex – Tuesday, April 14, 2:30 pm

Apex Healthplex – Thursday, April 23, 2:30 pm

Brier Creek Healthplex – Tuesday, May 19, 2:30 pm

Macy's Sales

The Volunteers at WakeMed will host fundraising events at each of our three hospitals in April. Pre-shop weeks are available at Crabtree Valley Mall.

Cary Hospital

Tuesday, April 7, 7 am to 4 pm, Conference Center

Pre-shop: March 30 – April 5

North Hospital

Tuesday, April 14, 7 am to 4 pm, Conference Center

Pre-shop: April 6 – 12 (pickup only)

Raleigh Campus

Wednesday, April 15, 7 am to 4 pm, Andrews Center

Pre-shop: April 6 – 12

Stepping into the Future: Pediatric and Neonatal Conference

April 1 & 2

Andrews Center

Presented by WakeMed Children's & Nursing Education

Fees, registration and further details are available at <https://2020wakemedpediatricneonatalconference.eventbrite.com>.

Nursing Education

Searching the Medical Literature – March 19, 9 to 10:30 am, Cary Hospital (WakeMedU code: NE 014-19035)

Generalist Nurses Caring for the Suffering of Mentally Ill Patients – March 31, 9 am to 3:30 pm, Raleigh Campus; April 21, 9 am to 3:30 pm, Raleigh Campus (WakeMedU code: NE014-18004)

The Older Adult Education Series: Polypharmacy, Beers Criteria and the Elder Patient – April 5, 7:30 to 8:30 am, Raleigh Campus (WakeMedU code: NE014-18012)

The Role of the Competency Validator – April 15, 10 am to 12:15 pm, Raleigh Campus (WakeMedU code: NE014-17108)

Essential Oil Basics: Aromatherapy at WakeMed – April 20, 11 am to 12:30 pm, Raleigh Campus; April 23, 7:30 to 9 am, Cary Hospital (WakeMedU code: NE014-19108)

Wake AHEC

Behavioral Treatment of Chronic Pain: Evidence-Based Tools to Move from Hurt to Hope – March 9, Andrews Center

10th Annual Faith Connections on Mental Illness Conference – Hope and Healing: Faithfully Practicing Community Inclusion – March 13, McKimmon Center

North Carolina Surgery: Time Out for Colon Health – March 14, North Carolina Heart & Vascular Hospital

March of Dimes: Social & Policy Impact: Reproductive Justice and Incarcerated Women: Understanding the Nexus of Reproductive Health, Mass Incarceration, and Social Justice – March 18, live webinar

Motivational Interviewing II - Practice & Feedback – March 19, Andrews Center

2nd Annual Diabetes Management Conference: Navigating the Journey from Hospital to Home – March 21, Andrews Center

Trauma Informed Care/ ACES – March 30, Andrews Center

4th Annual CCEP Program: Safety in Complex Healthcare Environments – April 3, Andrews Center

Ethics Reboot: Aligning Your Digital Practices with Current Ethical Standards – April 15, Andrews Center

Balancing Change and Acceptance: Use of Dialectical Behavioral Strategies in Work with Families – April 16, Andrews Center