News Briefs

The following Internal Medicine faculty members will be listed in the forthcoming Castle Connolly Guide, America’s Top Doctors:

George Vetrovec, M.D. – Cardiology
Laurel Lyckholm, M.D. – Medical Oncology
Thomas Smith, M.D. – Medical Oncology
Christopher Wise, M.D. – Rheumatology
Gordon Archer, M.D. – Infectious Diseases
Kenneth Ellenbogen, M.D. – Cardiac Electrophysiology

Medicine Faculty in Nephrology Win Grants Over $500,000 Each

Dr. Elizabeth Ripley has received a Mentored Patient Oriented Research Career Development (K-23) Award. It is funded through the National Institute of Diabetes and Digestive and Kidney Diseases (NIH). The title of the project is “Pre-ESRD Syndrome in High Risk African American Adults.” The funding for the five-year grant is $593,750 for direct costs and $640,050 for total costs.

Dr. Dominic Sica was recently awarded $566,688 to fund the multiple-dose open-label parallel-group study of the pharmacokinetics of M100240 in subjects with renal impairment and in normal healthy subjects. The funding is provided by the Aventis Pharmaceuticals, Inc.

Medicine Specialties Clinic: The Value of the Nurse Manager

On an average day, 25 doctors see over 100 patients in this clinic. Sounds hectic? It is. Yet hardly anybody complains – that’s how smoothly the Medicine Specialties Clinic is operating. It appears that the key to the calm and wise way the things run here is in the hands of Margaret Carter, RN, the Nurse Manager.

Ms. Carter has been with MCVH for 30 years, 16 of which have been with this clinic. When asked what it takes to keep the many doctors and patients happy, Ms. Carter modestly says, “I guess it takes patience.” But there is no doubt it takes more than that. Thus, Dr. David Gardner, who regularly sees patients in this clinic, says, “Her organization and attention to detail result in a highly productive work environment for all who practice here.”

And, the success of the clinic lies in its great nursing team. Two of the nurses have been here for over ten years. It appears that the nursing shortage – so widespread in recent years – happily bypassed this clinic. The level of nursing care and the variety of services provided in the clinic are very high. For example, at least two infusions a day are performed, and the nurses do EKG, recover bronchoscopy patients, draw blood, etc. “Every day there’s something different, and we have to be prepared,” says Ms. Carter.

We have a wonderful group of doctors working in this clinic: But, to a large degree, the success of the clinic is a tribute to its nursing manager and her staff.
Critical Care Medicine at VCU/McGuire VA Hospital: A 40-Year Experience

The Division of Pulmonary and Critical Care Medicine provides diagnostic and therapeutic services to thousands of patients annually who present with both critical and complex illnesses. Division physicians direct many vital services throughout the VCU Health System. They provide leadership and lend direction to VCUHS and McGuire VA Hospital (VAMC) and their missions through medical directorships of Critical Care Medicine, the Medical Respiratory Intensive Care Unit, Respiratory Care Services, Pulmonary Function Laboratories, the Lung Transplant Service, Bronchoscopy services, asthma case management, and others.

Within the confines of critical care, this complex and strikingly important role has developed over years of advancement and defining of critical care medicine within Internal Medicine. The Division of Critical Care Medicine at VCU evolved from one of the first critical care units established in the United States: the MCV Respiratory Intensive Care Unit or RICU. The RICU was opened in 1961 with a grant from the NIH secured through the efforts of its principal founding members – Drs. John Patterson, Orhan Muren, and W. T. Thompson, Jr. For the next 20 years, the Pulmonary Division's focus centered on respiratory failure as Critical Care developed into a separate subspecialty. In 1976, Dr. Frederick Glauser became chairman of Pulmonary Diseases at VCU and McGuire Veterans Administration Hospitals (VAMH). An acclaimed clinician and teacher, Dr. Glauser laid foundations within the Division for the evolution of critical care as it is practiced here today. In his teachings, Dr. Glauser emphasized multi-system approaches to managing critically ill patients and pioneered the use of hemodynamic monitoring in the critical care environment. Having a gift for spotting future stars, he hired most of the current Division faculty.

At the present, all Pulmonary/Critical Care faculty at VCU and the VAMH have board certification in both pulmonary medicine and critical care. Critical care is approached as a complex issue and delivered in the critical care environment. Having a gift for spotting future stars, he hired most of the current Division faculty.

Beyond establishing its reputation for clinical service, Division faculty are highly regarded for excellence in teaching. Internal Medicine residents consistently rate their critical care rotations as among their best experiences. The Division offers a dynamic, learning-rich environment, where residents take care of extraordinarily difficult, high acuity patients under the guidance of experienced faculty. Since its inception, the Pulmonary/Critical Care Division has considered teaching a top priority. We are carrying on in the tradition of our predecessors,” says Dr. Alpha A. Fowler, III, Professor of Medicine and Chairman of the Division.

Critical Care Medicine at VCU/McGuire VA Hospital

Patient-based research is emerging as a new priority within the Division of Pulmonary and Critical Care Medicine. Employing bedside observations in the ICU setting, Dr. Curtis Sessler, director of critical care for the VCU Health System and the Medical Respiratory Intensive Care Unit, has developed new tools such as the Richmond Agitation and Sedation Scale to improve outcomes of patients on mechanical ventilation. A newly hired faculty member, Dr. Marjorie DeWit, will shortly complement the faculty’s scholarly efforts in the ICU environment. Dr. Fowler comments, “With Dr. DeWit’s arrival, our clinical research productivity will increase.”

From its beginnings four decades ago, Critical Care Medicine at VCU and the McGuire VA Hospital has evolved rapidly as the medicine has changed. Over this time, Pulmonary/Critical Care faculty have trained generations of physicians and improved the quality of life for countless thousands of patients. “Merging new tools and ideas to care for complex illness will remain a priority for the Division,” Dr. Fowler says. “Looking back where we’ve come from and the changes that have occurred, I anticipate the next 40 years to be even more phenomenal.”

Dr. Emmanuel Dessypris has recently accepted the position of Chief of the Medical Service at the VA Hunter Holmes McGuire Medical Center. He has been affiliated with the Veterans Administration for over 20 years and joined the VCU faculty in 1992.

In this new capacity, Dr. Dessypris is committed to providing the same high level of patient care regardless of the significant reduction in funds allocated to the VA. The VA Hospital will remain an integral part of the Medicine housestaff program, as teaching has always been a forte of the VA faculty. “Our goal is to keep supporting the high level of teaching,” says Dr. Dessypris. “We can do much more in this area, without applying for additional resources.” He is suggesting a new project that would combine pathophysiology with the clinical elements.

Another important venue for improvement is focusing on the ways to enhance the coordination of physicians and nurses at the VA Hospital. Finally, stressing research is also on the agenda of the new Chief of the Medical Service. In his opinion, clinical productivity has seen more emphasis in the last few years, and that has left little time and resources for research. Yet, Dr. Dessypris, a renowned researcher himself, is hopeful that scientific investigation will enjoy greater viability and weight during his tenure.

Sheldon Markowitz, M.D., M.S., Chief of Staff of the VA Medical Center, says, “Dr. Dessypris brings a deep well of clinical, managerial, and academic experiences to the position. His understanding of and commitment to the health of the academic affiliation will serve both institutions during these critical times. He will surely have a stabilizing influence on our largest clinical service.”

Critical Care Medicine at VCU/McGuire VA Hospital (continued from previous page)

Dr. Emmanuel Dessypris

Critical Care Medicine at VCU/McGuire VA Hospital

Dr. Arun Sanyal received the following letter:

This past Wednesday, 2/6, I was at MCV for a liver biopsy (I have been diagnosed with Hepatitis C). I just wanted to convey my thanks to your staff. I’ve had my share of surgery (two knee scopes, cervical disk, broken foot), and my experience at MCV was by far the most pleasant. Dr. (Tab) Stranz has been great, the doctor who performed the biopsy (whose name escapes me at the moment) was excellent, gave me all the information about the procedure, and was cheerful without being condescending. The nurses and other staff were all wonderful. You are all to be commended. Thank you.
NUMBER OF PATIENT DAYS ON ALL DEPARTMENT OF INTERNAL MEDICINE INPATIENT SERVICES AT MCVH BY MONTH NOVEMBER 1991 TO DECEMBER 2001

PATIENT DAYS

NOV 91  MAR 92  JUL 92  NOV 92  MAR 93  JUL 93  NOV 93  MAR 94  JUL 94  NOV 94  MAR 95  JUL 95  NOV 95  MAR 96  JUL 96  NOV 96  MAR 97  JUL 97  NOV 97  MAR 98  JUL 98  NOV 98  MAR 99  JUL 99  NOV 99  MAR 00  JUL 00  NOV 00  MAR 01  JUL 01  NOV 01

7000  6000  5000  4000  3000  2000  1000

1000  2000  3000  4000  5000  6000  7000  8000  9000  10000

PATIENTS ADMITTED TO ALL DEPARTMENT OF INTERNAL MEDICINE INPATIENT SERVICES AT MCVH BY MONTH NOVEMBER 1991 TO JANUARY 2002

ADMISSIONS

NOV 91  MAR 92  JUL 92  NOV 92  MAR 93  JUL 93  NOV 93  MAR 94  JUL 94  NOV 94  MAR 95  JUL 95  NOV 95  MAR 96  JUL 96  NOV 96  MAR 97  JUL 97  NOV 97  MAR 98  JUL 98  NOV 98  MAR 99  JUL 99  NOV 99  MAR 00  JUL 00  NOV 00  MAR 01  JUL 01  NOV 01

1200  1000  800  600  400  200

200  400  600  800  1000  1200

NUMBER OF OUTPATIENTS TREATED BY DOIM FACULTY IN ALL OF ITS OUTPATIENT CLINICS BY MONTH JULY 1994 TO DECEMBER 2001

BILLED VISITS

OCT 94  JAN 95  APR 95  JUL 95  OCT 95  JAN 96  APR 96  JUL 96  OCT 96  JAN 97  APR 97  JUL 97  OCT 97  JAN 98  APR 98  JUL 98  OCT 98  JAN 99  APR 99  JUL 99  OCT 99  JAN 00  APR 00  JUL 00  OCT 00  JAN 01  APR 01  JUL 01  OCT 01  JAN 02

10000  9000  8000  7000  6000  5000  4000  3000  2000  1000

4000  5000  6000  7000  8000  9000  10000


ACCOUNTS RECEIVABLE

CHARGES

RECEIPTS

APR 01  MAY 01  JUN 01  JUL 01  AUG 01  SEP 01  OCT 01  NOV 01  DEC 01  JAN 02  FEB 02


ANALYSIS OF DENIED CLAIMS FROM CHARGE/CODING ERRORS, FAILURE TO OBTAIN PRE-CERTIFICATIONS/REFERRALS, AND FROM INSURANCE/PATIENT REGISTRATION MISTAKES AS A PERCENTAGE OF TOTAL CLAIMS BILLED BY THE DEPARTMENT OF INTERNAL MEDICINE APRIL 2001 TO DECEMBER 2001

REGISTRATION DENIALS

CHARGE/CODING DENIALS

PRE-CERT DENIALS

APR 01  MAY 01  JUN 01  JUL 01  AUG 01  SEP 01  OCT 01  NOV 01  DEC 01  JAN 02  FEB 02