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FEBRUARY PHYSICIAN PHOTOGRAPHER
NING LIN O.D., M.D.

Yellowstone in Winter

We went to Grand Targhee ski resort and Grand Teton National Park for cross country skiing at the end of last year. After 4 days there, we drove to West Yellowstone and joined snow coach tours within Yellowstone National Park. This is the second time I have visited Yellowstone. The first was almost 30 years ago in the summer. In the winter, the Park roads are closed to private vehicles. The only way to visit Old Faithful and Yellowstone Falls in the winter is by guided snow coach or snowmobile. After cross country skiing in temperatures of minus 10 to 20 degrees F for 3 days, sitting in the snow coach is comfortable and relaxing. The winter scenery is totally different than what I saw in the summer. Our first tour was the canyon tour, which included Yellowstone falls. When I reached the view point, I was shocked by the beautiful color and shape of the falls formed by snow and ice. The next day we joined another tour to Old Faithful and other geysers. The geyser fields are more vividly colored due to snow. This snowy wonderland was like a dream world I have never experienced. For more images, please visit my Flickr account with this link: www.flickr.com/photos/thelinvision/albums and search: Yellowstone in Winter.

Physician Editor:
David L. Slater M.D., FCAP
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Manager, Physician Education and Communication

Deadline to submit articles for the March 2016 issue of Physicians’ Edition is Friday, February 19.
CMC’s 11th Annual Winter Symposium: My Wrap Up

Community’s 11th Annual Winter Symposium was seen as a tremendous success by attendees in Scottsdale this past month. A survey of the audience indicated a mix of new and prior participants. As always it was a great venue and everyone seemed to have a great time both in and out of conference sessions. A special thanks to Community’s Education Committee and our friends at Santé Health Foundation for putting together a dynamic and interesting program, delivered with top-notch organizational skill and accompanied by the warmest hospitality for all attendees and guests.

Highlights included:

An excellent presentation by Dr. Robert Wachter from UCSF which focused on information technology and how we are striving to keep up with the rapid pace if integration into healthcare. His talk was followed by a discussion with our own CMIO, Dr. Judi Binderman identifying the challenges and successes in our own organization.

Dr. John Hensing of the large Banner Health System provided an outline of their successful physician and hospital integration across a multi-state health conglomerate. This was achieved while keeping costs to a minimum and it capitalized on having reached consistent quality levels through their comprehensive integration efforts. His talk stimulated conversations regarding Community’s and Santé’s unique opportunity to develop such programs.

Community Spotlights on the Radin Breast Center and its accomplishments (at Clovis Community) in addition to a comprehensive introduction to the University Neurosurgical Program (at Community Regional) were both presented by our own medical staff superstars.

A stimulating session with Pulitzer Prize winning author Siddhartha Mukherjee followed by less than a year the Ken Burns PBS Special Series based on Dr. Mukherjee’s book, “The Emperor of All Maladies: A Biography of Cancer.” He provided an interesting perspective on the evolution of cancer in medicine. Many historical anecdotes were included, along with his highly informed best guesses about where Cancer Care and Cancer Biology go from here. Editor’s note: The Book is widely available and the highly acclaimed DVD set is available on PBS’s web site.

A political spotlight from Andrew Card who served in three administrations illustrated from a non-partisan perspective the inner workings and complexities of Washington, including a first hand account of the morning of 9/11. The famous photo of President Bush in the Florida classroom as he heard the news was put in fascinating first-person context for our audience.

As usual, the Symposium identified how our system has evolved to be one of the top performers in healthcare on the west coast by remaining profitable and delivering high quality care in an ever-changing environment of healthcare. At the same time it stimulated conversation and gives direction as to where we need to focus in order to continue to provide the best care that we can. A central theme to all of the presentations was that weathering ongoing change and achievement of continued success is on the shoulders of the medical staff through advocacy, integration of care, and involvement in operations across the entire continuum of patient care. And beyond “care”, there is “population health management”, and the many non-healthcare inputs, which drive a population’s collective health status. CMC’s Lynne Ashbeck and Aldo DeLaTorre presented CMC’s opportunities with that large challenge.

We would hope that all members of our medical staff would consider attending a Community Winter Symposium in the future.
Knowing the history, mission and vision of Community Medical Centers, it is truly an honor to take the reins as the new chairman of the Board of Trustees.

It’s an unusually challenging and exciting time for healthcare generally, and for Community in particular. I don’t claim to have all the answers. One thing I will claim, though, is a deep understanding of the central San Joaquin Valley and the vital role Community plays.

I served for many years as the Administrative Officer for Fresno County, and in that role I negotiated the agreement that transitioned the county hospital to CMC in 1996. Shortly after my county service, from 2003 to 2005, I served as Community’s Senior VP for Human Resources. And recently I’ve served on several local, public-benefit boards in addition to Community’s.

Three of my biggest priorities as CMC chairman will be these:

Employee engagement. A highly skilled, engaged, service-minded staff deserves excellent benefits, new educational opportunities, and modernized work environments. We’ve made great progress, and I’m determined to keep this employer-of-choice momentum moving forward.

Physician satisfaction. If we’re going to succeed at managing patient care with increasing quality and efficiency, we must provide doctors with the tools and support you need. Community has earned a physician-friendly reputation, and I intend to keep that.

Access to care. Community truly is the hospital system for everyone. We will be challenged, however, to keep expanding capacity to meet the need. We must manage resources carefully now, to allow for bold expansion in the next few years.

The Board, management and staff at Community are exceptional, and we have some of the best partners imaginable. I hope you’re as excited about our future as I am.

Submitted by UCSF Fresno

Fresno County’s search-and-rescue-team was honored recently for its role in finding Miyuki Harwood, a Folsom resident who was lost in the Sierra National Forest for nine days. Harwood was flown to Community Regional Medical Center for treatment. Roger Mortimer, MD was among those honored. Mortimer is interim chief of UCSF Fresno’s Department of Family & Community Medicine.

Kudos to Dr. Mortimer and the entire team.
UCSF Fresno Selected to Participate in National Professional Development Program

Submitted by UCSF Fresno

UCSF Fresno Medical Education Program is one of only nine institutions selected to participate in an exciting, new national professional development program, Professionals Accelerating Clinical and Educational Redesign (PACER). PACER is a three-year, grant-funded program that will help build interprofessional faculty teams capable of transforming their clinical practices and educational programs to better prepare trainees to work together in high performing patient-centered medical homes.

“My colleagues and I are honored to have been selected for the PACER program and we look forward to participating,” said Serena Yang, MD, MPH, associate clinical professor, UCSF Fresno Department of Pediatrics and team leader of UCSF Fresno’s PACER. “This program will enhance our knowledge and skills to provide and teach interprofessional, team-based, comprehensive and continuous health care with the goal of achieving maximized health outcomes for patients at the Deran Koligian Ambulatory Care Center as a Patient-Centered Medical Home at Community Regional Medical Center. This is consistent with what we aim for every day at UCSF Fresno.”

The nine selectees, including UCSF Fresno, have assembled outstanding teams of faculty from the three primary care disciplines in medicine (i.e. family medicine, internal medicine and pediatrics) as well as nursing, physician assistant, pharmacy, behavioral health and other professional training programs. These PACER interprofessional teams will attend training sessions and work closely with expert coaches to develop and implement new models of interprofessional training in their primary care practices. Together, these nine teams across the United States form a powerful learning community of educators that is well positioned to transform primary care medicine and foster interprofessional, collaborative patient-centered care.

Ultimately, PACER will create a sustainable model of faculty development that evolves over time, starting with the training of these nine interprofessional teams who will then collaborate with other primary care residencies in their region. PACER will eventually create three regional centers that will provide support, training and resources to expand the learning collaborative to other primary care and health professions training programs.

The nine institutions selected to participate in PACER include:

• Eastern Virginia Medical School; Children’s Hospital of the King’s Daughters; Old Dominion University;
• Mayo Clinic College of Medicine
• The North Shore-Long Island Jewish Health System (soon to be Northwell Health), Division of Internal Medicine, Department of Family Medicine, and Department of Pediatrics; Hofstra North Shore-LJI School of Graduate Nursing and Physician Assistant Studies; St. John’s College of Pharmacy and Health Sciences, Department of Clinical Pharmacy
• Palmetto Health and the University of South Carolina
• UC Davis School of Medicine and School of Nursing; University of California Health System; Sacramento County Primary Care Center; Transforming Education and Community Health (TEACH) Clinic
• UCSF Fresno Medical Education Program; Community Regional Medical Center
• University of Colorado School of Medicine, College of Nursing, Skaggs School of Pharmacy, and Physician Assistant Program
• Western Michigan University Homer Stryker M.D. School of Medicine, Bronson School of Nursing, and Department of Psychology
• Wright State University Boonshoft School of Medicine, College of Nursing and Health, and School of Professional Psychology; Cedarville University School of Pharmacy; Kettering College Physician Assistant Program

PACER is funded by the Josiah Macy Jr. Foundation with matching funding from the Boards of Family Medicine, Internal Medicine and Pediatrics and the Accreditation Council for Graduate Medical Education. The project is implemented and evaluated by educational researchers in the department of family medicine at Oregon Health & Science University.

For more information about PACER, please visit www.pcpacer.org or contact project coordinator Ari Galper at galper@ohsu.edu.
UCSF Fresno Global Health Curriculum was delighted to host Fresno-based Ophthalmologist Dr. Mehdi Ghajarnia in January. Dr. Ghajarnia discussed his recent travels to Tajikistan and the intricacies of international medicine. This past year, Dr. Ghajarnia partnered with an NGO called PASHA, which provides sustainable solutions for healthcare delivery to underserved regions around the world. Through the support of this NGO and local contacts, he was able to travel to Tajikistan where he performed and taught Manual Small Incision Cataract Surgery (MSICS). His talk was inspiring as he shared not only his insights in the nuances of eye surgery, but the equally delicate maneuvers that are required to innovate in a foreign country and culture in a limited amount of time.

Currently, cataracts are the leading cause of preventable blindness worldwide, which reflects the need for many more surgical services globally. Cataracts can be associated with diabetes, steroid use, diet, and exposure to sunlight, but the tragedy of their global prevalence is that there are simple treatments for them if patients have access to appropriate resources. Dr. Ghajarnia’s presentation focused on three methods of performing cataract surgery: (1) Extracapsular Cataract Extraction (ECCE) (2) Phacoemulsification and (3) Manual Small Incision Cataract Surgery (MSICS). In resource limited settings, Dr. Ghajarnia and his colleagues prefer MSICS because it is easier to master, cost effective, time efficient, requires less equipment, and has had better outcomes than other techniques. In brief, it is the superior technique even though older, harder techniques are still in vogue in many countries.

Beyond the specifics of the ophthalmic techniques, Dr. Ghajarnia talked at length about defining and adopting a global health project. He discussed the limited NGO presence in Tajikistan, which is a landlocked and mountainous country nestled between Iran and Russia much like Nepal, where many Tajik physicians go to receive additional training. The most significant burden of cataracts, predominantly impacts the poor, and the work of PASHA has received the support of the government Ministry of Health. A summary of PASHA’s strategy, which is applicable to many global health issues, is pictured. This lecture was, literally, an eye-opening experience!

UCSF Fresno Global Health Curriculum is open to staff and faculty from all departments. If you are interested in more Global Health news and stories, please join our mailing list by sending a message to rvohra@fresno.ucsf.edu.
Training Community-Minded Pediatricians
Submitted by Serena Yang M.D.

Child health in the 21st century has become more dependent on social, community, and environmental factors. To adequately address these social determinants of child health and wellbeing, pediatricians must integrate their clinical skills with advocacy and population-based approaches to their practice (American Academy of Pediatrics Policy Statement, 2013). Child health and wellbeing are particularly threatened in the San Joaquin Valley of California, where poverty affects one quarter of its children and disproportionally affects children of ethnic and racial minority backgrounds.

In the UCSF Fresno Pediatrics Residency Program, they prepare the residents to promote health and reduce disease for the Central Valley's children with community-oriented training that is integrated into all 3 years of residency. We believe in training all our residents to be skilled in the delivery of care within the context of families and communities, whether they aspire to a pediatric career in primary care, hospital medicine, subspecialty, or critical care. In hospital and ambulatory clinical settings, our residents train in providing healthcare throughout a child's life course across multiple life stages. They routinely collaborate with physicians from pediatrics, family medicine, internal medicine, emergency medicine, OB-GYN, psychiatry, and surgery. Residents train in interprofessional teams with non-physician providers including midlevels, nurses, social workers, chaplains, mental health providers, pharmacists, and occupational and physical therapists.

To strengthen their knowledge and skills in addressing social and environmental factors impacting child health, our residents train in community-based experiences that go beyond the clinic and hospital setting. During their Child Development, Adolescent Medicine, and Community Pediatrics rotations, residents work alongside professionals in the care of children in local public schools and other community-based organizations. Residents partner with Fresno Unified School District students and teachers to promote health topics, such as obesity prevention. For over 2 years now, our residents have partnered with 2nd and 3rd grade students and teachers from a local elementary school in group dance (“Dance with your Doctor”) regularly throughout the school year to promote physical activity. Residents mentor a variety of students, ranging from medical students from the San Joaquin Valley PRIME program (a medical school pathway program to train the next generation of Valley physicians), to middle school and high school students in the UCSF Fresno Doctor's Academy (a pipeline program in Fresno public schools for youth from backgrounds traditionally underrepresented in the health professions), to high school students in the Women's Alliance (a Fresno Unified School District program where at-risk students learn personal and academic skills). Residents conduct home visits to build relationships with their continuity clinic patients and families in the home setting, while appreciating the environment and community in which their families live. Residents also have the opportunity to travel abroad to gain experience in other countries with causes of childhood morbidity and mortality different from that of the U.S., in the context of contrasting systems of healthcare, cultures, languages, and health beliefs.

We train our residents to be advocates for child health, not only on an individual patient level but also at a population level. Residents write health-related editorials for the Fresno Bee, speak on Valley Public Radio, advocate on the steps of the State Capitol in Sacramento, California on CMA/ AAP Annual Legislative Day, write to their state legislators in support of child health bills, and lead projects in quality improvement of clinical systems and medical education curricula. Residents have disseminated results of their community-based projects to regional and national forums such as Western Society for Pediatric Research; Pediatric Academic Societies; American Academy of Pediatrics National Conference and Exhibition; American Thoracic Society; American College of Medical Genetics; North American Society for Pediatric Gastroenterology, Hepatology and Nutrition; and Western Group on Educational Affairs (a regional meeting for the Association of American Medical Colleges). Residents also have been successful in obtaining funding from the American Academy of Pediatrics to support their scholarly efforts in the community. This year, Dr. Clarisse Casilang, 2nd year resident, completed a rotation in Health Journalism sponsored by ABC News, where she learned skills in communicating evidence-based health information to the public through various forms of media.

In July 2014, we launched our department's first fellowship in Community Pediatrics, with a 1-year track providing advanced training in medical education (includes completion of the UCSF Health Professions Education Pathway) and a 2-year track in population/public health (includes completion of an MPH at UC Berkeley School of Public Health). Residents have been successful in securing additional funding from various organizations to support their community projects and have had many of their scholarly efforts published or presented at local and regional meetings.
Going Beyond Bedside to the Doorstep

By John G. Taylor, Director
Public Affairs, Community Medical Centers

The current edition of “Your Community at Work,” the Community Medical Centers corporate social responsibility report, focuses on extending the best health practices beyond the bedside and into the communities our hospital system serves. At Community Regional Medical Center, that includes partnering with local and federal officials on revitalization projects in the Yokomi Elementary School neighborhood. Community outreach specialist Alma Martinez and our interpreter services program also help connect underserved populations with medical and administrative services.

“Your Community at Work” began publication in May 2014. It runs monthly in The Fresno Bee. It’s also published in the Business Journal and the California Advocate, and its contents are available through Community’s website, public affairs newsletter and elsewhere.

This type of report, sometimes referred to as an “advertorial,” has become an important communications tool for corporations around the world. It allows industry leaders to report back to stakeholders on how well they are meeting their mission, acting ethically and being good stewards of financial and human resources. Given that Community is a locally owned, non-profit health system, we are in a real sense reporting to our owners.

CMC’s content fits under these six categories: making care accessible, building relationships, advancing clinical quality, shaping patient care, stewarding our resources, and caring for our workforce. John Taylor, Community’s public affairs director, serves as primary editor.

Worldwide online publication “PR Daily” has twice named “Your Community at Work” as among annual finalists for “Best Publication” in its corporate social responsibility contest.

Here’s a link to the Web page that contains the current report as well as previous editions. Please scroll down to the “Your Community at Work” archive.

www.communitymedical.org/news-events/facts-reports-publications

Print readers: Go to Communitymedical.org > News and Events > Facts, Reports and Publications > scroll down to “Your Community at Work.”

Pediatricians

Continued from page 7

Public Health). Our 2 current fellows are graduates of our residency program, Dr. Aysun Azimi, on the 1-year track, and Dr. Soniya Mehra, on the 2-year track. Regarded as junior faculty in our department, both fellows are committed to an academic career in teaching and clinical practice with a lens in population health.

Whether it be through direct patient care, mentoring youth, testing clinical systems improvements, innovating medical education curricula, or advocating at the steps of the State Capitol or through the media, we as community pediatricians at UCSF Fresno are at the ready to partner with others to promote the health and wellbeing of children, families, and communities.

We encourage our colleagues at CCFMG and other Connections newsletter readers to contact us in the Department of Pediatrics, and welcome the opportunity for collaboration in supporting the health of children and families in the San Joaquin Valley.

“...if you believe passionately in what you are doing and whom you are doing it with, success is bound to follow.”

– Anisa Kamadoli Costa, Chairperson of Tiffany’s Charitable Foundation

Avoid Queries for clarification by documenting the part of omentum removed: Enhanced documentation = assigning codes that accurately reflect the patient’s severity of illness, risk of mortality and intensity of service.

When describing omental biopsy or excision, the portion must be identified as:

• Greater
• Lesser

ICD-10 requires the above differentiation for procedure code assignment; no classification exists for omentum without further specification.

If you would like more information or have any questions, please do not hesitate to contact Sandra Sidel. I can be reached at (559) 459-6003/Ext.: 56003 or ssidel@communitymedical.org.
Seems like 2016 is speeding onward! The new year will bring many changes, both internal and external, that impact everyone. CMS changes have been proposed which will redirect the focus from usage of the EMR to having meaningful information across multiple systems and points of care along the patient journey; these changes also impact the quality programs, forcing the organization to focus on providing cost-efficient, process-effective care for patients. We’re looking at the length of stay for patients and identifying barriers to progress along their journey to care – from receiving radiology results in a timely manner, to finding SNF or rehab placements when patients are first ready to move, to ensuring we have appropriate community support and care once the patient is discharged.

You’ve heard about the joint venture with Adventist to offer our own insurance product, which involves taking on risk for managing these patients – we have to anticipate when they might need hospitalization, as opposed to when we can successfully manage them in an outpatient setting. You’ve also heard that we’re essentially building a peds hospital within our CRMC hospital – full services, including specialists. And finally, you’ve heard that we’re continuing to experience significant increases in patient volumes at all our facilities; building patient towers and new office buildings will help, but it’s a struggle to ‘get ahead’.

To be successful and make sound decisions for where to focus energies on next steps, we need information. Not only do we need financial data, but also we need data pulled right out of our EMR that is available in near-real time. The data can then be used to determine patient care choices, strategic priorities, appropriate funding, and putting the right number of resources in key places to ensure success. The Informatics impact of this is enormous...we need to formalize and standardize initial training in EPIC and care workflows for everyone, not just physicians, so we get information into the EMR (data in will assist with data out). We need to better support people and reinforce robust use of EMR functions the same way across the system. We need to respond in a timely manner to requests to provide tools and support within the EMR to support best practices and processes that have been redesigned. Finally, we need to grow the ‘data curiosity’ of everyone, and mature the knowledge of data usage within the division.

All this means lots of work to build programs, right-size the support and training foundation, and collaborate closely with the IT build team to respond in a timely manner to the growth we’re facing. Since October we’ve added Stephanie Holcomb, PharmD as the Manager of Clinical Content Tools, along with a team to coordinate the development of toolkits within EPIC to support changes. We’ve initiated a new governance structure to prioritize requests for changes within our clinical IT systems to facilitate transparency around what supports system and facility strategic plans. Most recently, I made a difficult decision to eliminate the CNIO position until a time when the organization can focus significant attention on standardized processes and nursing care documentation. This decision resulted in the departure of David Boyd from Informatics. David had been at CMC for over 30 years, providing leadership in a number of nursing roles. His contributions were numerous, and for that, I am appreciative. The Informatics Division will continue to grow over the next year to provide this support, taking on responsibility for EPIC training and skill-building for users, adding non-IT builders to assist with some of the less complex changes needed to support new programs and processes, and adding more at-the-elbow resources to support users on a daily basis.

Whew! Here I thought things would be settling down as I moved past the 6-month mark... I’m bringing out the rocket roller skates, and having a ball! More to come as we move through exciting times....
ANNOUNCING UPDATED ORDER SETS BEING RELEASED

Submitted by Quality/Performance Improvement

Please see below for a list of Order Sets that were released into production between 01/05/2016 to 01/19/2016. If you identify a problem with one of the order sets please follow the procedure for corrective action. The appropriate form may be found on the FORUM: Short Cuts & Tools > Clinical Tools > New Order Set Request/Modification.

<table>
<thead>
<tr>
<th>Epic PRL #</th>
<th>Order Set Name</th>
<th>Description of Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>525</td>
<td>Abdominal Peritoneal Paracentesis</td>
<td>Biennial Review&lt;br&gt;  • Updated lab section to be current&lt;br&gt;  • Removed “standby to assist Dr. Garbutt with procedure” order</td>
</tr>
<tr>
<td>1310</td>
<td>Acute Subarachnoid Hemorrhage Admission</td>
<td>Comprehensive Multidisciplinary Review&lt;br&gt;  • Updated nursing stroke swallow screen order&lt;br&gt;  • Nursing to advance diet as tolerated order modified&lt;br&gt;  • Vital sign monitoring updated&lt;br&gt;  • Indwelling urinary catheters updated to comply with CAUTI Adult Prevention Program policy&lt;br&gt;  • Physician notification orders updated&lt;br&gt;  • Updated clinical lab section to be current&lt;br&gt;  • IV Fluid section updated&lt;br&gt;  • Respiratory care orders updated&lt;br&gt;  • Medication section modified to comply with patient safety standards&lt;br&gt;  • Evaluation/Consults modified</td>
</tr>
<tr>
<td>629</td>
<td>Adult Burn Service</td>
<td>Under fluid resuscitation guidelines, modified “first 8 hours lactated ringers” line</td>
</tr>
<tr>
<td>231</td>
<td>Epidural / Spinal Analgesia and Patient Controlled Analgesia (Adult)</td>
<td>Updated hyperlink to Lucidoc policies</td>
</tr>
<tr>
<td>1471</td>
<td>Gyn Post Op Major Surgery</td>
<td>Advance diet as tolerated order modified</td>
</tr>
<tr>
<td>1291</td>
<td>NICU Eye Exam</td>
<td>• Pre-medications moved under “Manual Eye Exam”&lt;br&gt;  • Under “Ret Cam Eye Exam” – medication orders made selectable</td>
</tr>
<tr>
<td>1527</td>
<td>Post Op Total Hip Arthroplasty</td>
<td>Full review, multiple changes, order set name change</td>
</tr>
<tr>
<td>1520</td>
<td>Post Procedure Endoscopy</td>
<td>Biennial Review&lt;br&gt;  • Updated clinical lab section to be current&lt;br&gt;  • Updated medication section&lt;br&gt;  • IV Fluid orders updated&lt;br&gt;  • Removed reference to Procedural Sedation and Analgesia by Non Anesthesia Professionals Policy&lt;br&gt;  • Modified reference to Discharge Policy</td>
</tr>
<tr>
<td>1546</td>
<td>Post-Op Total Knee Arthroplasty</td>
<td>Full review, multiple changes, order set name change</td>
</tr>
<tr>
<td>585</td>
<td>Pre-Interventional Endovascular Orders - patient in hospital</td>
<td>Biennial Review&lt;br&gt;  • Antibiotics have been given the Indication of Surgical Prophylaxis</td>
</tr>
<tr>
<td>1320</td>
<td>Pre-Interventional Endovascular Orders (AMB)</td>
<td>Antibiotics have been given the Indication of Surgical Prophylaxis</td>
</tr>
<tr>
<td>1393</td>
<td>Prevention of Contrast Induced Nephropathy</td>
<td>Biennial Review&lt;br&gt;  • Moved “angiotension” to general guidelines section</td>
</tr>
<tr>
<td>24</td>
<td>Transfusion Orders (Adult)</td>
<td>Updated hyperlink to Lucidoc policies</td>
</tr>
<tr>
<td>362</td>
<td>Transfusion Orders (NICU/Pediatric)</td>
<td>Updated hyperlink to Lucidoc policies</td>
</tr>
</tbody>
</table>

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As part of the Catheter Associated Urinary Tract Infection (CAUTI) Adult Prevention Program five urinary catheter orders (see Table 1) will be updated on February 16, 2016. All order sets have been modified with the updated orders. The urinary catheter order names will remain unchanged or be very similar; only the Epic build has been modified.

If you have any of the non-updated orders saved to your Favorites, the orders will no longer appear as of February 16, 2016. You will need to add the updated order to your Favorites on the Preference List.

Table 1. Urinary Catheter Orders

<table>
<thead>
<tr>
<th>Order Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insert Indwelling Urinary Catheter (Adult and Pediatric)</td>
</tr>
<tr>
<td>(Indwelling) Catheter Care</td>
</tr>
<tr>
<td>Do Not Remove Foley</td>
</tr>
<tr>
<td>Foley/Urology Care</td>
</tr>
<tr>
<td>Suprapubic Catheter Care</td>
</tr>
</tbody>
</table>

To add an order to your Favorites on the Preference List search for the desired order, select, and click on the star (★) to the right of the order. This will open up the Add to Preference List box.

If you have any questions or concerns please contact your facility Informatics representative.

Choosing Wisely continues to grow and is now a substantive resource for physicians and patients. A major new section is that of the Physician Communication Modules. The American Board of Internal Medicine Foundation funded the Drexel University College of Medicine to develop a set of interactive instructional modules to enhance physician and patient communication around the specialty society recommendations from the Choosing Wisely campaign. Developed in collaboration with nine medical specialty societies, these modules are designed to help physicians, patients and other health care stakeholders think and talk about overuse of health care resources by providing strategies for physicians to build trust and address patient attitudes and beliefs that more care is not always better care.

We will feature links to a number of these in future issues. This month, check out the module developed by the American College of Physicians. It includes sections on key communication skills, has video examples of communication skills, and features expanded discussions of that Society’s 5 Choosing Wisely Recommendations (Pre-OP chest x-ray, routine ECG, to name two). Print readers can find it by going to Choosingwisely.org < Resources < Physician Communication Modules.
Community Medical Centers has received a $1 million gift from Robert E. Smittcamp and the Smittcamp Family Foundation to expand neuroscience services for the San Joaquin Valley. The gift will help expand a vital medical care not available elsewhere in the region.

“I understand the critical need for stroke, head trauma and spine care in our region. And the terrific neuroscience program they’re building at Community Regional Medical Center needs to keep growing,” said Bob Smittcamp, chairman and CEO of Lyons Magnus, Co., Inc. in Fresno. “It’s my privilege to support this. I have confidence in the leadership at Community, and I know they’re creating a truly special medical unit that any of us might need, without a moment’s notice. I hope many others will likewise consider supporting this vital community resource.”

Community Regional in downtown Fresno provides the only Level 1 trauma care between Los Angeles and Sacramento, and a significant number of trauma cases involve brain and spine injuries. Neuroscience experts on site perform life-saving work around-the-clock.

Community’s neuroscience program also cares for patients suffering from strokes, brain tumors, spine disorders, and neurological diseases such as Parkinson’s Disease, ALS and epilepsy.

“I’m impressed with Mr. Smittcamp’s leadership and his sincere commitment to help us create a comprehensive, world-class neuroscience center for the region,” said Tim Joslin, Community Medical Centers’ CEO. “We’re investing in state-of-the-art technology, dedicated bed space, and recruitment of top physician specialists to enhance our capabilities.”

Katie Zenovich, Community’s vice president for corporate development, said the Smittcamp gift is the largest single donation ever directed to the medical center’s neuroscience program and that it comes at a perfect time. “I know many people in our community assume that treatment for complicated neuro cases must occur outside the Valley. But more and more, that’s not true. And this generous investment in our neuro program will prompt others to take note of the medical advancements we’re making.”

In 2015, Community Regional averaged nearly 100 stroke patients a month, with about 48 percent over the age of 65. The hospital saw more than 2,400 neurology cases. And since 2013, Community Regional has done more than a third of all the brain surgeries in a seven county area.
Patients and families from all over rely on Community to provide top care and support during some of the most stressful and challenging times in their lives. But as healthcare providers, we don’t always think about when WE become the patient or the worried family member.

Sanger residents Dr. Bruno Garcia, who works in primary care at Adventist Health Centers in Selma and Caruthers, and his wife Sabrina, a nurse at Adventist’s Reedley hospital, experienced one of the worst days of their lives as they were rushed to Community Regional Medical Center to save the life of their not yet born son, Ruben.

“We are so used to taking care of other people that we didn’t realize what it would be like the other way around,” Dr. Garcia said.

The Garcias couldn’t bear to be far from their baby who was in critical condition, delivered 13 weeks early and weighed just over 2 lbs. That’s when they were told about Terry’s House, Community Regional’s hospitality home located directly across the street. The Garcias stayed at Terry’s House for about three months until they could take their healthy little boy home.

“It meant the world to be in a facility that was close to my son in the NICU and for my wife to have access to him,” Dr. Garcia said. “When patients have the comfort and support of their family, it makes all the difference and I experienced that first-hand.”

Terry’s House celebrates its fifth anniversary since opening its doors in January 2011, serving more than 3,600 families like the Garcias from 43 states and 23 countries.

“There’s an extraordinary need and my guess is that if you had four or five Terry’s Houses they would be all be full,” Dr. Garcia said. “I am so thankful to all who made Terry’s House a reality and I encourage everyone in our community to make an effort to keep it here for a million more years.”

Terry’s House was built and continues to operate with private support from donor-investors. To find out how YOU can make a difference, call 559-459-2670 or visit www.TerrysHouseFresno.com.
Editor’s Note: Readers who function as primary care providers for women should be aware of this important – and these days inevitably controversial – Breast Cancer Screening Guideline update. Attendees at the January CMC Winter Symposium heard comments regarding this from Breast Radiologist Judy Champaign M.D. and her Radin Center colleagues. The Guidelines update was published in JAMA’s October 20, 2015 issue. Print readers can easily find the document on line (access does not require a JAMA subscription).

The Guideline Recommendations were summarized as follows. Please note the key qualifiers about factors, which remove a woman from being considered “average risk”:

These recommendations represent guidance from the American Cancer Society (ACS) for women at average risk of breast cancer: women without a personal history of breast cancer, a suspected or confirmed genetic mutation known to increase risk of breast cancer (eg, BRCA), or a history of previous radiotherapy to the chest at a young age.

The ACS recommends that all women should become familiar with the potential benefits, limitations, and harms associated with breast cancer screening.

Recommendations:
1. Women with an average risk of breast cancer should undergo regular screening mammography starting at age 45 years. (Strong Recommendation)
   1a. Women aged 45 to 54 years should be screened annually. (Qualified Recommendation)
   1b. Women 55 years and older should transition to biennial screening or have the opportunity to continue screening annually. (Qualified Recommendation)
   1c. Women should have the opportunity to begin annual screening between the ages of 40 and 44 years. (Qualified Recommendation)
2. Women should continue screening mammography as long as their overall health is good and they have a life expectancy of 10 years or longer. (Qualified Recommendation)
3. The ACS does not recommend clinical breast examination for breast cancer screening among average-risk women at any age. (Qualified Recommendation)

There is a thoughtful and helpful editorial in that same issue of JAMA regarding the new ACS Guideline, written by Drs. Nancy Keating and Lydia Pace of the Harvard School of Public Health. In fact, it is so clearly written that it could be considered appropriate to share with patients who have particular interest or concerns. The editorial is also available without a subscription.

One paragraph in the editorial describes what will be “striking” to all concerned, and goes on to discuss those aspects:

“Several aspects of this new guideline will be particularly striking to patients, clinicians, and others involved in health care:

1. the more conservative starting age for mammography (45 vs. 40 years), which brings the ACS recommendations closer to the US Preventive Services Task Force (USPSTF) guidelines (both the 2009 guideline and the April 2015 draft recommendation statement), which endorse biennial screening for women aged 50 to 74 years;
2. the proposal for more frequent – annual – screening intervals among women aged 45 to 54 years;
3. the recommendation against routine screening CBE, a marked deviation from prior ACS guidelines and a stronger statement than that of the USPSTF, which in 2009 concluded that the evidence was insufficient to recommend for or against CBE; and
4. the recommendation to stop screening among women with a life expectancy of less than 10 years (the USPSTF concluded that evidence is insufficient to assess benefits and harms in women aged ≥75 years).”
## Pediatric Lecture Series

**Title:** “Endoscopic Retrograde Cholangiopancreatography (ERCP)”  
**Date:** Tuesday, February 9, 2016  
**Time:** 12:30pm-1:30pm  
**Speaker:** Roberto Gugig M.D.  
**Place:** CRMC-10 West Conference Room  
**CME:** 1 CME

**Title:** “Chronic Diarrhea”  
**Date:** Thursday, February 11, 2016  
**Time:** 12:30pm-1:30pm  
**Speaker:** Marvin Ament M.D.  
**Place:** CRMC-10 West Conference Room  
**CME:** 1 CME

**Title:** “Carbohydrate Disorders of Metabolism”  
**Date:** Tuesday, February 16, 2016  
**Time:** 12:30pm-1:30pm  
**Speaker:** Minesh Patel M.D.  
**Place:** CRMC-10 West Conference Room  
**CME:** 1 CME

## UCSF Fresno Department of Surgery Trauma Critical Care Conference

**Title:** “ICP Management”  
**Date:** Thursday, February 25, 2016  
**Speakers:** Arash Afshinnik M.D.  
**Time:** 12:00pm-1:00pm  
**Place:** CRMC-Seqouia East Conference Room  
**Contact:** Kelley Medico Montgomery, 559-459-3722 or kmedico@fresno.ucsf.edu  
**CME:** 1 CME

## Save the Date

**Title:** “Medical Update in the Valley”  
**Date:** Friday and Saturday, March 11 & 12, 2016  
**Speakers:** Various  
**Time:** Friday 4:00-8:00pm and Saturday 8:00am-5:15pm  
**Place:** UCSF Fresno Center Auditorium  
**Contact:** Monica Sozinho, 559-499-6421 or msozinho@fresno.ucsf.edu  
**CME:** 11.25 CME Applied for

## CRMC Presents: UCSF Fresno Psychiatry Department

**Title:** “Uplifting Depression”  
**Date:** Thursday, February 18, 2016  
**Speakers:** Karndeep Samran M.D. and Joanna Geckior M.D.  
**Time:** 4:00pm-5:00pm  
**Place:** UCSF Fresno Center, 155 N. Fresno Street, Fresno, CA 93701, Room 116  
**CME:** 1 CME

## CRMC Perinatal M & M

**Title:** “Diabetes in Pregnancy”  
**Date:** Wednesday, February 25, 2016  
**Speakers:** Marian Pak D.O., Alok Kumar M.D., Subhashini Ladella M.D., FACOG  
**Time:** 12:30pm-1:30pm  
**Place:** UCSF Fresno Center, 155 N. Fresno Street, Fresno, CA 93701, Room 136  
**Contact:** Bernadette Neve, 559-459-7059  
**CME:** 1 CME

## CCMC Presents: Breastfeeding with Maternal Infections

**Title:** “Breastfeeding with Maternal Infections”  
**Date:** Tuesday, March 8, 2016  
**Speakers:** Amy Evans M.D., FAAP, FABM  
**Time:** 6:00pm-7:00pm  
**Place:** CCMC H. Marcus Radin Conference Center, The Palm Room  
**Dinner will be provided**  
**Contact:** Jessica Lipsius, 559-324-4002 or jlipsius@communitymedical.org  
**CME:** 1 CME

## Save the Date

**Title:** “Frontiers in Gastroenterology and Hepatology Symposium”  
**Date:** Saturday, April 2, 2016  
**Speakers:** TBA  
**Time:** 8:00am-12:00pm  
**Place:** CCMC H. Marcus Radin Center Conference  
**Contact:** Jessica Lipsius, 559-324-4002 or jlipsius@communitymedical.org  
**CME:** 4 CME Applied for

Please also see the enclosed individual flyers for more on these & other upcoming local CME activities to meet your CME needs.
FEBRUARY PHYSICIAN PHOTOGRAPHER
NING LIN O.D., M.D.
See page 2 for details
CME Dinner Lecture
Non Cardiac Chest Pain: A Gastroenterologist Perspective

SPEAKER:
Vivek Mittal, M. D.
Gastroenterology, Esophageal Disorders
Assistant Clinical Professor, UCSF

DATE/TIME:
February 4, 2016
Thursday, 6:30 p.m. to 8:30 p.m.

ATTENDEES WILL:
1. Be able to apply current guidelines for management of chest pain and apply this knowledge in practice.
2. Learn key concepts of strategies to analyze treatment options and achieve better patient outcomes.
3. Be able to collaborate with different specialists to manage the patient more effectively.

TARGET AUDIENCE:
Primary Care Physicians, Cardiologists, Emergency Room Physicians, GI, Nurse Practitioner, Physician’s Assistant’s and RN’s

RSVP e-mail to:
cmersvp@communitymedical.org
Or contact Ric Morales at
Rmorales3@communitymedical.org
Ph. (559) 459-6211

CME 1.0
Dinner provided (Vegetarian options available)

www.CommunityRegional.org

Community Medical Centers is accredited by the Institute for Medical Quality/California Medical Association (IMQ/CMA) to provide continuing medical education for physicians.

Community Medical Centers designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

This credit may also be applied to the CMA Certification in Continuing Medical Education.

Disclosures: Speaker Vivek Mittal, M.D. and event planners - Steve Esqueda, Kimberly Goldring, Ric Morales and Louis Triana have no disclosures to make.
CME Dinner Lecture

UltraSound First:
The Role Of Pediatric Sonography

SPEAKER: Joy Guthrie, PhD.
Advanced Practice Sonographer

DATE/TIME: February 24, 2016
Wednesday - 6:30 pm - 8:30 pm

ATTENDEES WILL:

1. Improve patient outcomes by following the national initiatives of Imaging Gently and Ultrasound First in screening for pediatric disease to reduce the amount of ionizing radiation in the pediatric population.

2. Apply in clinical practice the various types of pediatric sonography procedures that are currently available.

3. Understand the challenges of appropriate communication, diagnosis and treatment related to gender, ethnicity and pediatric specific examinations.

TARGET AUDIENCE:
Neonatologists, Pediatricians, Family Practice Physicians, Nurse Practitioners, RN’s, Medical Students and Sonographers.

RSVP e-mail to: cmersvp@communitymedical.org
Or contact Ric Morales at Rmorales3@communitymedical.org.
Ph. (559) 459-6211

LOCATION: Bella Luna Bistro
350 W. Main St., Merced, CA

CME 1.0

Dinner provided (Vegetarian options available)

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This credit may also be applied to the CMA Certification in Continuing Medical Education.

Disclosures: Speaker: Joy Guthrie, PhD. and event planners: Steve Esqueda, Ric Morales and Louis Triana have no disclosures to make.

www.CommunityRegional.org
CME Dinner Lecture
Update In Neurosurgery: Brain Tumors, Neurocritical Care

SPEAKER: Yu-Hung Kuo, M.D.
Neurosurgeon
Arash Afshinnik, M.D.
Neurointensivist
University | Neurosciences Institute

DATE/TIME: February 25, 2016
Thursday, 6:30 p.m. to 8:30 p.m.

ATTENDEES WILL:

1. Better understand the goal of surgical resection in brain and spinal metastases treatment in order to improve one’s practice.

2. Will know how to identify the indications for radiosurgery and will be able to add this competency to one’s practice.

3. Gain a better understanding the role of the Neurosurgeon as part of a multidisciplinary team.

4. Gain better understanding of the role of NeuroIntensivist in a comprehensive neuroscience institute.

5. Learn and become familiar with the role of a Neurointensivist, and the management of Acute Neurologic and Neurosurgical injury patients in an emergency room setting.

TARGET AUDIENCE:
ER Physicians, Critical Care Physicians, Primary Care Physicians, Internal Medicine, Family Practice, and Oncologist, Physician Assistants, Nurse Practitioners, RN’s and all Allied Health Professionals who work in primary care field.

RSVP to: Kimberly Goldring, (559) 260-4613
e-mail: KGoldring@communitymedical.org or email: cmersvp@communitymedical.org

CME 1.0
Dinner provided (vegetarian options available)

LOCATION: Galletto Ristorante
1101 “J” St., Modesto, CA 95354

Community Medical Centers is accredited by the Institute for Medical Quality/California Medical Association (IMQ/CMA) to provide continuing medical education for physicians.
Community Medical Centers designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. This credit may also be applied to the CMA Certification in Continuing Medical Education.

Disclosures: Speakers: Yu-Hung Kuo, M.D. and Arash Afshinnik, M.D. and event planner Kimberly Goldring have no disclosures to make.

www.CommunityRegional.org
Perinatal M & M Presents:

“Diabetes in Pregnancy”

Thursday, February 25, 2016 from 12:30pm – 1:30pm

UCSF – Fresno, Room: 136
155 N. Fresno Street, Fresno, CA  93701

Case Presentation
Obstetrics: Marian Pak, DO
Neonatology: Alok Kumar, MD

Principal Discussants
Perinatology: Subhashini Ladella M.D., FACOG
Neonatology: Dr. Alok Kumar, MD

Target Audience
Any staff physician, resident physician, nurse, nurse practitioner, nurse midwife, physician assistant, or allied health professional working with the perinatal, neonatal, and/or pediatric population.

Objectives
At the end of the session, attendees will be able to:

1) Apply to practice, current clinical evidence and guidelines relating to diabetes in pregnancy.
2) Gain insight into diabetes in pregnancy, thereby improving patient safety & outcomes.
3) Identify ethical concerns that apply to the clinical situation and anticipate barriers that may adversely impact outcomes if not addressed across a diverse population.

1 CME will be offered
RSVP is not required
Lunch will be provided

Program Director Dr. K. Rajani; and Program Planner Bernadette Neve have no relevant commercial relationships to disclose.

This is an activity offered by Community Medical Centers, a CMA-accredited provider.
Records of attendance are based on sign-in registration and are maintained only for Community Medical Centers staff members who are credentialled as an MD, DO, CNM, NP, or PA.

Community Medical Centers is accredited by the Institute for Medical Quality/California Medical Association (IMQ/CMA) to provide continuing medical education for physicians.

Community Medical Centers designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. This credit may also be applied to the CMA Certification in Continuing Medical Education.
DATE:
Tuesday, March 8, 2016
6:00 pm - 7:00 pm
Dinner will be provided

LOCATION:
H. Marcus Radin Conference Center
The Palm Room

TARGET AUDIENCE:
All physicians, nurses and allied health professionals.

CME: 1.0

RSVP:
Jessica Lipsius at:
(559) 324-4002
jlipsius@communitymedical.org

ATTENDEES WILL:

- Improve patient outcomes by learning up-to-date information based on clinical scenarios that physicians often encounter during patient care focusing on maternal infections and how that relates to babies who are breastfeeding.
- Gain an understanding of possible treatment options for maternal infections and the recipient infant including current medications and apply that knowledge in practice.
- Review recommended maternal vaccinations and the safety of these to the nursing infants in order to improve patient safety.
- Become familiar with where to go for advice and further help for maternal infections and the safety for their breastfeeding infant to achieve better outcomes and allow safe breastfeeding to continue.

SPEAKER:

AMY EVANS, MD, FAAP, FABM

COMMUNITY MEDICAL CENTERS is accredited by the Institute for Medical Quality/California Medical Association (IMQ/CMA) to provide continuing medical education for physicians. Community Medical Centers takes responsibility for the content, quality and scientific integrity of this CME activity. Community Medical Centers designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. This credit may also be applied to the CMA Certification in Continuing Medical Education.

Disclosures: Speaker and Activities Director, Amy Evans, MD has no Commercial Disclosures to make. Planner, Jessica Lipsius has no Commercial Disclosures to make.
UCSF Fresno Department of Internal Medicine Presents:

2ND ANNUAL

MEDICAL UPDATE
IN THE VALLEY

MARCH 11-12, 2016

UCSF Fresno Center Auditorium
155 North Fresno St.
Fresno, CA 93701
(corner of Divisadero & Fresno)

SAVE THE DATE

AN EDUCATIONAL PROGRAM DESIGNED FOR INTERNSISTS, FAMILY PRACTITIONERS, PRIMARY CARE PHYSICIANS, AND NURSE PRACTITIONERS WHO WORK IN THE PRIMARY CARE FIELD.

Course Directors:
John Ambrose, MD, FACC
Vipul Jain, MD, MS

CME: 11.25 (applied for)
Early Registration Fee: $200
By February 12, 2016
After Feb. 12, Registration Fee: $249

Friday, March 11 | 4pm-8pm

<table>
<thead>
<tr>
<th>Topic</th>
<th>Speaker</th>
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</thead>
<tbody>
<tr>
<td>MRSA</td>
<td>Nael N. Nassar, MD, FACP</td>
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<tr>
<td>Atrial Fibrillation</td>
<td>Ralph Wessel, MD</td>
</tr>
<tr>
<td>Women and Heart Disease</td>
<td>Teresa Daniele, MD</td>
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<tr>
<td>Hypertension Update</td>
<td>Sundararajan Srikanth, MD</td>
</tr>
</tbody>
</table>

Saturday, March 12 | 8am-5:15pm

<table>
<thead>
<tr>
<th>Topic</th>
<th>Speaker</th>
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<tbody>
<tr>
<td>What do I do With a Lung Nodule Found on a CT Scan?</td>
<td>Michael W. Peterson, MD</td>
</tr>
<tr>
<td>Clinical Strategies in PFT Interpretation: Lessons Learned But Not Taught</td>
<td>Vipul Jain, MD, MS</td>
</tr>
<tr>
<td>Allergen Immunotherapy / Therapeutic Vaccines for Allergic Diseases</td>
<td>A.M. Aminian, MD, FAAAAI</td>
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<tr>
<td>Fighting Against the Epidemic of Obesity: Current and Future Treatments</td>
<td>Anupama Poliyedath, MD</td>
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<tr>
<td>Stroke / TIA</td>
<td>Tanya Warwick, MD</td>
</tr>
<tr>
<td>Mild Traumatic Brain Injury / Concussion</td>
<td>Chris M. Bauer, PhD, Neuropsychologist</td>
</tr>
<tr>
<td>Pain Management</td>
<td>Ernestina, Saxton, MD, PhD</td>
</tr>
<tr>
<td>The Difficult Patient: Personality Disorders in Primary Care</td>
<td>Shawn B. Hersevoort, MD, MPH</td>
</tr>
<tr>
<td>Prostate Cancer</td>
<td>Narayana Ambati, MD</td>
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<tr>
<td>Dermatology Pearls</td>
<td>Leslie Storey, MD</td>
</tr>
<tr>
<td>Evaluation of Abdominal Pain</td>
<td>Vivek Mittal, MD</td>
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<tr>
<td>Controversies in the Management of Hypothyroidism</td>
<td>Soe Naing, MD, MRCP (UK), FACE</td>
</tr>
<tr>
<td>The A, B, Ca and D of Osteoporosis</td>
<td>Alan Kelton, MD</td>
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<tr>
<td>Sports Related Injuries in Primary Care</td>
<td>Siddharth Joglekar, MBBS</td>
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<tr>
<td>Update on Gout</td>
<td>Shefali Majmudar, DO</td>
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<tr>
<td>New Treatment Options for Rheumatoid Arthritis</td>
<td>Candice Yuvienco, MD, RhMSUS</td>
</tr>
</tbody>
</table>

Registration includes all educational programming and meals. Evening Welcome Reception (Friday, March 11 | 6-8pm)

Register at: www.fresno.ucsf.edu/conferences/update2016

For more information, contact Monica Sozinho at msozinho@fresno.ucsf.edu or 559-499-6421
## Symposium Topics

<table>
<thead>
<tr>
<th>Symposium Topics</th>
<th>Speakers</th>
</tr>
</thead>
</table>
| Opening Remarks                                            | Michael W. Peterson, MD  
Interim Associate Dean  
Professor of Medicine  
UCSF Fresno |
| Air Pollution and its Impact on Airway Disease             | Jose Joseph Vempilly, MD  
Associate Professor of Medicine  
UCSF Fresno |
| Air Pollution and its Impact on Systematic Disease         | Daya Upadhyay, MD  
UCSF Fresno |
| Air Pollution in the US: The Best and Worst Over the Past 10 Years | Bonnie Holmes-Gen, Senior Director,  
Air Quality and Climate Change,  
American Lung Association in California |
| State of Air in the Central Valley Over the Past Decade    | Mr. Samir Sheikh, Deputy Pollution Control Officer, San Joaquin Valley Air Pollution Control District |
| Climate Change and Effects on Human Health                 | William Rom, MD, MPH  
New York University |
| Climate Change: The Consequences for the Next Century for Business as Usual Strategy | Helene G. Margolis, MA., PHD  
University of California, Davis |
| Solutions for Reducing the Burden of Global Air Pollution  | Joel D. Kaufman, MD, MHP  
University of Washington |

Course Director: Jose Joseph Vempilly, MD  
Co-Director: Daya Upadhyay, MD  
CME: 5.5 (Applied For)

Early Registration Fee: $25  
(By March 4, 2016)  
After March 4th, Registration Fee: $50

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**Saturday, April 23, 2016 – 7:30am to 2:00pm**

To Register Visit: [www.fresno.ucsf.edu/conferences/air2016](http://www.fresno.ucsf.edu/conferences/air2016)

For More Information Call: 559-499-6421 or Email msozinho@fresno.ucsf.edu

UCSF Fresno Center – Auditorium  
155 N. Fresno Street – Corner of Fresno and Divisadero
2016 HIGH SIERRA
Wilderness & Travel Medicine Conference

May 18-20, 2016
The Pines Resort at Bass Lake, CA

Testimonials from past attendees:

“Great use of actual animal tissue for skills; good hands-on practice.”
“Hands on practical labs very useful. Love the techniques!”

For more information and to register online, go to:
http://www.ucsfcmecme.com/2016/MMC16025/info.html

Danielle Campagne, MD, FACEP
Assistant Clinical Professor of Emergency Medicine
UCSF School of Medicine
February 2016

**February 4**
“Neighborhood Violent Crime and Adolescent Health: Preliminary Findings from California”
Sidra Goldman-Mellor, Ph.D., M.P.H., Presenter
Assistant Professor of Public Health
School of Social Sciences, Humanities, and Arts
University of California, Merced

**February 11**
No Grand Rounds – Resident Open Meeting

**February 18**
“Uplifting Depression”
Karndeep Samran MD, Presenter
Joanna Gedzior, MD, Advisor
UCSF Fresno Psychiatry Residency Program

**February 25**
“Guilt and the Aging Combat Veteran”
Robert Hierholzer, MD
Health Sciences Clinical Professor
UCSF Fresno Psychiatry Residency Program
Associate Chief of Staff for Research
VACCHCS

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Community Medical Centers designates this live activity for a maximum of 1.0 "AMA PRA Category 1 Credit(s)™". Physicians should claim only the credit commensurate with the extent of their participation in the activity.

This credit may also be applied to the CMA Certification in Continuing Medical Education.
Target Audience: CMC Faculty, community physicians, house officers, physician assistants, nurse practitioners, nurses and others potentially involved with patient care.

Objectives:
- Increased knowledge and improved proficiency in the management of critically ill patients.
- Increased knowledge and awareness of the utility of comprehensive trauma and critical care management.
- Improved awareness and management of the physiologic alterations associated with trauma.

BCPS and Program Director Nancy Parks, MD and Program Planner Kelley Medico Montgomery have no relevant commercial relationships to disclose.
Tuesday, February 2, 2016  
12:30-1:30 p.m.  
“NAFLD”  
(Non-Alcoholic Fatty Liver Disease)  
Roberto Gugig, M.D.

Thursday, February 4, 2016  
12:30-1:30 p.m.  
“Celiac Disease”  
Marvin Ament, M.D.

Tuesday, February 9, 2016  
12:30-1:30 p.m.  
“ERCP”  
(Endoscopic Retrograde Cholangiopancreatography)  
Roberto Gugig, M.D.

Thursday, February 11, 2016  
12:30-1:30 p.m.  
“Chronic Diarrhea”  
Marvin Ament, M.D.

Tuesday, February 16, 2016  
12:30-1:30 p.m.  
“Carbohydrate Disorders of Metabolism”  
Minesh Patel, M.D.

Thursday, February 18, 2016  
12:30-1:30 p.m.  
“Schwartz Rounds”  
Linda Keele, M.D.

Tuesday, February 23, 2016  
12:30-1:30 p.m.  
“Constipation”  
Anita Sicolo, M.D.

Thursday, February 25, 2016  
12:30-1:30 p.m.  
“TBA”  
Syed Hamid, M.D.
<table>
<thead>
<tr>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
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<tbody>
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<td>1</td>
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<tr>
<td>6:30 -</td>
<td>7:15 am</td>
<td>Ortho Surg.-Foot/Ankle/Hand SPOC</td>
<td>7:00-</td>
<td>Ortho Surg-Adult Recon GR- Ortho Surgery Conf. Rm.</td>
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<tr>
<td>7:00-</td>
<td>8:00 am</td>
<td>Orthopaedic X-Ray GR Ortho Surgery Conf. Rm.</td>
<td>7:00-</td>
<td>Ortho Surg-Adult Recon GR- Ortho Surgery Conf. Rm</td>
</tr>
<tr>
<td>8:00 -</td>
<td>9:00 am</td>
<td>Medicine Grand Rounds UCSF Fresno Auditorium</td>
<td>7:15-</td>
<td>Neuroscience Pt. Case Present. East Med. Plaza-NORC Conf. Rm</td>
</tr>
<tr>
<td>7:30-</td>
<td>8:30 am</td>
<td>FP Faculty Development UCSF Fresno Rm. 329</td>
<td>7:30-</td>
<td>Cancer Conference CRMC-Sequoia West Conf. Rm</td>
</tr>
<tr>
<td>11:30-</td>
<td>1:30 pm</td>
<td>Neurovascular Conference CRMC-Sequoia East Conf Rm</td>
<td>7:30-</td>
<td>Cardiac Cath &amp; Intervention Cath Lab</td>
</tr>
<tr>
<td>12:30-</td>
<td>1:30 pm</td>
<td>Children’s Peds Lecture CRMC 10 West Conf. Rm.</td>
<td>12:00-</td>
<td>Brain Tumor/Cyberknife Conf-Lower Level-Rad-Onc</td>
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<td>Ortho Surg.-Foot/Ankle/Hand SPOC</td>
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<td>Ortho Surg-Adult Recon GR- Ortho Surgery Conf. Rm.</td>
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<td>Orthopaedic X-Ray GR Ortho Surgery Conf. Rm.</td>
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<td>Ortho Surg-Adult Recon GR- Ortho Surgery Conf. Rm</td>
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<td>8:00 -</td>
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<td>Medicine Grand Rounds UCSF Fresno Auditorium</td>
<td>7:30-</td>
<td>Cancer Conference CRMC-Sequoia West Conf. Rm</td>
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<td>12:00-</td>
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<td>Neurovascular Conference CRMC-Sequoia East Conf Rm</td>
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<td>Cardiac Cath &amp; Intervention Cath Lab</td>
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<td>Children’s Peds Lecture CRMC 10 West Conf. Rm.</td>
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As of 1/28/16