

## July 2010

### Aetna

As Novant and Aetna continue contract negotiations, Aetna has decided to extend in-network benefits to its members through July 31, 2010. We will continue to work in good faith to come to terms with Aetna so Novant Health physicians and hospitals can continue to serve all of its patients. We remain optimistic that we will accomplish this goal.

To view all updated communications concerning the Novant/Aetna negotiations, please visit the "Communication Memorandums" page located under the "Medical Staff Services" tab on MDLinks.

### Bruce Walley, MD

We are pleased to announce that Bruce Walley, MD, has accepted the position as senior vice president of medical staff services for the greater Winston-Salem market. As a key member of the GWS market leadership team, Dr. Walley will work closely with our physician and administrative leaders to support excellence in patient care and strive to achieve our vision of the Remarkable Patient Experience across Novant. Please join us in thanking Elms Allen, MD for the tremendous contributions he has made over the years to help FMC become one of the best hospitals in North Carolina, and welcoming Dr. Walley to his new leadership role.

### Athletic Trainers

The FMC Orthopedic department approved Strategic Sourcing funding for the provision of full-time certified athletic trainers to Winston-Salem Preparatory Academy and five other high schools of its choice. Except for Winston-Salem Prep, two athletics trainers will be assigned to each school. In return, the school system has offered the medical center advertising opportunities such as signs and announcements at sporting events, logos on school websites, and full-page ads in yearbooks.

### Patient Safety Story

*At another Novant hospital, a nurse noted an order for Coumadin which lacked an order for a PT and INR in the patient's record. The nurse called the physician and suggested these tests, but the physician simply repeated an order that Coumadin be given. The nurse knew that an INR was critical in the managing of Coumadin therapy and called the nursing supervisor for help. She wrote a "per protocol" order for a PT/INR. The INR proved to be 5.08--clearly a level at which Coumadin should not be given. However, even when the physician was informed of the elevated INR, he still ordered that the Coumadin be given. The nurse again contacted the nursing supervisor who spoke with the physician and obtained an order that Coumadin be held. A potential adverse outcome for the patient was avoided.*

This episode illustrates the importance of several of our identified safety behaviors:

- **Practice with a questioning attitude:** When the nurse noted that an INR was not in the chart or order, he stopped and asked the question.
- **Support each other:** When the nurse did not get the response expected from the physician, he escalated the concern up the chain of command.
- **Communication and the power gradient:** The communication between the ordering physician and the nurse was not ideal and one could perceive the presence of a power gradient between the physician and nurse making it difficult to get the best care for the patient.

If we are to have a culture of safety in which we will reduce our serious safety events by 80% over the next three years, we as physicians must not only Know the 5 Safety Behaviors but must be involved in Doing these behaviors as well. Hopefully sharing this event will make each of us more aware of the importance of teamwork in creating a safe environment for our patients.