

Bridgeport Hospital rated among highest in the nation for CABG surgery



Bridgeport Hospital cardiac surgeons and assistant professors of Surgery at Yale School of Medicine Michael Dewar, MD (left.) and Fabio Ramponi, MD (center), with Gabriele Di Luozzo, MD (right), section chief, Cardiac Surgery, Bridgeport Hospital, and associate professor of Surgery, YSM.

The Society of Thoracic Surgeons (STS) registry recently recognized Bridgeport Hospital with the highest national rating of three stars for the quality of our overall isolated CABG (coronary artery bypass grafting) surgery.

The rating, reflecting the July 2020 through June 2023 timeframe, places Bridgeport Hospital among the elite in the United States and Canada for CABG. About 20 percent of participants receive the three-star rating for isolated CABG surgery. STS is the premier quality improvement registry for cardiac surgery. At the Heart and Vascular Center, CABG surgery is performed by Drs. Micheal Dewar and Gabriele Di Luozzo. Cardiac surgeon Fabio Ramponi, who recently joined Bridgeport Hospital, will also be performing CABG procedures. Bridgeport Hospital is one of two hospitals in the state of Connecticut that holds this prestigious recognition.

“This recognition represents a significant achievement that requires a team approach from the cardiologists, anesthesiologists, nurses, physician assistants and wonderful office staff,” noted Gabriele Di Luozzo, MD,

section chief of Cardiac Surgery at Bridgeport Hospital’s Heart and Vascular Center, and associate professor of Surgery (Cardiac) at Yale School of Medicine (YSM). “Kudos to the entire team and special acknowledgement to Dr. Michael Dewar who has been a leader in CABG surgery at Bridgeport Hospital and was instrumental in our receiving this recognition.”

The Heart and Vascular Center at Bridgeport Hospital offers the most advanced and modern adult cardiac surgery and coronary bypass procedures including minimally invasive approaches and use of multi-arterial bypass techniques. The team is experienced with minimally invasive techniques, such as beating-heart surgery and hybrid approaches (both surgery and coronary stents) to advanced coronary artery disease.

Congratulations team!

Epic’s new Hyperdrive platform coming to BH March 3

The new, web-based platform brings a host of changes designed to make using Epic more efficient. Hyperdrive also makes future upgrades quicker and easier.

Hyperdrive is launching with a rolling go-live starting with Lawrence + Memorial and Westerly hospitals and select ambulatory sites on Feb. 5. Bridgeport Hospital and all other remaining locations are scheduled to go live March 3. Once live, users will notice a new icon for launching Epic and have access to new features and tools.

Visit Epic.ynhh.org to learn more about the coming changes and how to use them. Click Applications & Support Materials and select Epic Upgrade.

Medical Staff are invited to stop by the information tables at both the Bridgeport and Milford campuses on Friday, Feb. 23 from 11 am - 1 pm, outside the main cafeteria of each campus.

YNHHS and Yale University announce 'One IRB'

To enhance the impact of clinical and translational research conducted at Yale University and Yale New Haven Health System (YNHHS), the two entities have launched a 'One IRB' project to align processes, policies, and procedures between the entities as they relate to human subjects research, including the Institutional Review Board (IRB) review.

As a result of this initiative, all human subjects research conducted at YNHHS will be under the purview of the Yale University Human Research Protection Program (HRPP) and all YNHHS research will be reviewed by the Yale University IRB. Yale University HRPP will also review submissions for studies reviewed by external (non-Yale IRBs) e.g., when a review by a central IRB is required or preferred.

There are several advantages to moving to One IRB. The standardized submission and oversight of research will be beneficial for all research subjects and researchers. One IRB will also increase access to clinical trials and diversity of enrollment. Additionally, as regulatory issues related to research continue to evolve and become more complex, there will be one focus of expertise to scale systemwide.

An effective date for submitting new studies to the Yale University HRPP for IRB review is still being determined, but the change is anticipated to occur early this year. The transfer of existing studies currently under the purview of the Bridgeport IRB is anticipated to begin in April 2024.

YNHHS investigators, research staff, and other stakeholders are encouraged to attend one of the training sessions on the IRB submission processes. More information about the Yale Human Research Protection Program and Yale IRB is available on the Yale University HRPP website at <https://your.yale.edu/research-support/human-research-protection-program>.

To ensure that YNHHS investigators and partners receive support, the Yale University HRPP will designate a member of the HRPP staff to serve as the primary point of contact for YNHHS investigators. In the interim, questions and concerns related to the transition can be sent to Linda Coleman, HRPP director at linda.coleman@yale.edu or Monika Lau, HRPP assistant director at monika.lau@yale.edu.

C. difficile testing now automatically ordered for certain patients

Yale New Haven Health recently implemented a process in which C. difficile testing is automatically ordered for newly hospitalized patients identified in their emergency department or inpatient nursing clinical assessments as having diarrhea.

According to the process, which took effect Jan. 3, an order for LAB7877 C. DIFFICILE ASSAY will automatically and silently be generated in the Emergency Department or for inpatients during the first few days of admission who have:

- An admission diagnosis or chief complaint of diarrhea
- Nursing documentation indicating diarrhea in nursing flow sheets

A clinician co-sign will be required. The C. difficile assay order will populate the task list to be collected.

The new process was prompted by delays in ordering C. difficile testing for patients meeting these criteria. This led to delays in diagnoses of community-acquired C. difficile infection (CDI), delays in appropriate treatment and prolonged hospitalization.

In addition, these patients' CDI could be misclassified as being hospital-acquired. Failure to diagnose community-acquired CDI within the first three days of hospitalization penalizes YNHHS hospitals both in quality measures (such as Star Ratings and Leapfrog Hospital Safety Grades) as well as financially (in hospital-acquired condition penalties).

Feb. 5 webinar recognizes National Women Physicians Day

Tune in for Advocacy in Medicine: A tool for change and antidote for burnout - a physicians' webinar celebrating National Women Physicians Day.

Monday, Feb. 5., noon - 1 pm

Presenter: Pamela Kunz, MD

RSVP to Alison.Tighe@bpthosp.org to receive the webinar link.

New tool will help clinical staff intervene earlier when a patient's condition worsens

In 2011, Yale New Haven Hospital was among a handful of hospitals nationwide to pilot the Rothman Index, a tool designed to help clinical staff intervene earlier when a patient's condition begins to worsen.

For years, Yale New Haven Health has used the Rothman Index and another tool, the Epic Deterioration Index, to reduce complications and save lives. But a review of past cases showed a need for a different tool – one that would support even earlier and more accurate identification of patients whose conditions are deteriorating.

YNHHS is scheduled to launch eCART at Yale New Haven Hospital in January. The tool will be phased in at all Yale New Haven Health hospitals, including Bridgeport Hospital, throughout the spring. It will replace the Epic Deterioration Index and Rothman Index.

YNHHS decided to implement eCART after an extensive analysis of patients throughout the health system who experienced clinical deterioration. The analysis, which compared eCART to the Rothman Index and Epic Deterioration Index, showed that eCART was significantly more precise in predicting all-cause deterioration in patients.

The Rothman Index combines 26 variables – including vital signs, certain lab test results and clinician assessments – to create a score indicating a patient's likelihood of deteriorating. ECART uses 97 variables, along with artificial intelligence and other functions, to generate a score.

Other eCART advantages include:

- It will be integrated with nursing and physician workflows (clinical pathways) to help create standardized approaches to managing patients whose conditions are deteriorating.
- It continuously recalculates the probability of deterioration, from a patient's admission through discharge.
- The data eCART generates will help individual units, hospitals and the health system improve their responses to clinical deterioration

Watch for detailed training materials and other information about the ECART launch.

New YNHHS medical director for Accreditation and Regulatory Affairs named



Adam Ackerman, MD, FACP, has been named Yale New Haven Health's medical director for Accreditation and Regulatory Affairs. Dr. Ackerman joined Yale New Haven Hospital as a hospitalist in 2015 and will continue in that role. He is also associate director of Hospital Medicine at YNHHS; physician lead and co-chair of the Opioid Stewardship Program at

Yale New Haven Health; and assistant clinical professor, Department of Internal Medicine, Yale School of Medicine. Dr. Ackerman earned his MD from Tufts University School of Medicine and completed an internal medicine residency in the U.S. Air Force. He was recently honored by the American College of Physicians with an invited fellowship.

Safety Matters – RISE Report

The safety behavior for the month for January is Hand-Off Effectively using SBAR. Hand off communication is the transfer and acceptance of patient care responsibility and is done to ensure patient safety through the continuity of care. SBAR is the primary communication tool for transferring information in a standardized, concise, and complete format.

The SBAR acronym stands for:

S = Situation (a concise statement of the problem)

B = Background (pertinent and brief information related to the situation)

A = Assessment (analysis and considerations of options – what you found/think)

R = Recommendation (action requested/recommended – what you want)

Take away: Encourage staff to use SBAR during handoff communication. SBAR helps staff to communicate information in a structured and focused manner with assertion and confidence and the right amount of detail.

Digestive Health Virtual CME Series 2024: *Trust Your Gut*

Yale Medicine and Yale New Haven Health will continue to offer the free, monthly virtual Digestive Health CME series, called Trust Your Gut. The year-long series will again be held the third Thursday of each month at 5 pm throughout 2024. The series provides digestive health educational programming, professional development and networking opportunities for physicians and advanced practice providers.

Join Walter Longo, MD, and Piyal Alam, DO, on Feb. 15 for Managing Hemorrhoidal Disease in Ambulatory Setting.

Yale School of Medicine designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credits™ per session, a total of 12.0 AMA PRA Category 1 Credits™ for the series.

To register, visit the Yale CME portal at yale.cloud-cme.com. For questions, contact Joseph Mendes, executive director, clinical program development, Digestive Health at Joseph.Mendes@ynhh.org.

Register for Feb. 27 CME dinner

Join the Medical Staff for two presentations:
Contemporary approaches to aortic surgery
 by Gabriele Di Luozzo, MD
Advances in coronary artery surgery
 by Fabio Ramponi, MD

Tuesday, Feb. 27
6 pm

Fairfield Museum and History Center
 370 Beach Road, Fairfield

RSVP to alison.tighe@bpthosp.org

Next Medical Staff breakfast Feb. 29

You are cordially invited to the
Monthly Medical Staff Breakfast



Last Thursday of every month
 7 – 9 am

Medical Staff Lounge

A selection of breakfast foods
 will be served.

YaleNewHaven**Health**
 Bridgeport Hospital

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Newsletter submissions

Deadline for submission of content for the March 2024 issue of *Medical Staff News* is Friday, Feb. 23, 2024.

Please submit items for consideration to:
 Alison Tighe at alison.tighe@bpthosp.org or
 Myra Stanley at myra.stanley@ynhh.org.