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OPIOIDS

The Perfect Storm

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A photograph of a woman with long dark hair, wearing a light blue spaghetti-strap top, breastfeeding her newborn baby. The woman is looking down at the baby with a gentle expression. The baby is wrapped in a white blanket with a floral pattern. The background is a white surface with a floral pattern.

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Slow down everyone. You're moving too fast. Frames can't catch you when you're moving like that.

-Jack Johnson,
Inaudible Melodies



BEING AWARE of your body's rate of movement will go a long way to improve your grace and health.

There is a speed to life. It's cultural. High speed offers many attractions—more accomplishments, avoidance of the quiet, strategic confusion, strategic focus. Speed of life, like

wind and fire, offers gifts or trouble, depending on the use.

The subtle movements of the body perform in conjunction with the fluctuations of the mind. There is a speed of health.

Ever play a musical instrument? One of the worst things you can do is try to play too fast—before you're ready. Few people are actual musical geniuses. All the time we see people moving fast, driving fast, talking fast. Some are ready for it. Some move at that pace. But most people are moving too fast. You can see it all around. Faster is slower and messier, if moving outside the natural rhythm.

The world is often like a slick salesman. It delivers news, information, and self-righteous ideas so fast that we don't take a moment to realize the ridiculousness of it all. It often delivers a message of pressure to move from a life of wellness to battle an unnecessary cause, and to feel unnecessary pain. The motives, while delivered righteously, are questionable. Anything to take your attention from a point of wellness must be considered carefully.

Despite the world culture, and messages of more and faster, we can train ourselves to control our pace. Watch people rushing around. Watch people moving too fast. Watch people pretending to get more done than they really are. Know that many may have a burden in their mind, as evidenced by the body. It's interesting to see. We hope it's temporary. We've all struggled with an overly ambitious schedule, with self-imposed rankings of high priorities. I often wonder what we're accomplishing, or hiding from, or selling, and wonder about the sanity of it all.

Sometimes moving too fast is fun. It's a rush. People enjoy it. It can be like riding way too fast on a motorcycle on the open road—a somewhat controlled exhilaration with inherent risks. Testing the boundaries of life is often a pleasure. When it's a conscious decision, the rush is a healthy choice. For some it's an opportunity to feel success, and to feel alive. What is success, if it's not peace of mind?

Tai Chi is an example of a practice which helps with the control of movements and fluctuations of the mind. Play with bringing the physical movements down a few octaves to observe and find a more ideal, or alternative pace for the mind through the movements of the body. It's another form of calming the mind by first calming the body. Of course, it's all connected. It's certainly worthy of consideration.

There's so much to do, and so much to see. The experiences of life are meant to be enjoyed. The experiences are meant to be lighthearted, and appreciated for their uniqueness, and appreciated for the pleasures of being ordinary. As we ride through it all, doing what we should do, at the speed of health, sharing life with the like-hearted, we support our own well-being. That's the best we can do.

When speaking with patients, we have an opportunity to notice their speed of life. We notice their pace and their relationship to their own pace. It may be an opportunity to recommend a practice of meditation, or play, which encourages a speed of well-being. It's not just about going slower. For some, it may be about going faster. It's about finding the speed that feels right. Only the individual will know the best speed of life. But, mindfulness of speed of life is usually an unconsidered concept in the flow. Just presenting the idea of speed of health may be sufficient for improving health. It's best to be a living example.

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Opioids

The Perfect Storm

One on One with **William "Beau" Clark, MD**

Coroner, East Baton Rouge Parish

William "Beau" Clark is President of Louisiana State Coroner's Association, President of the Louisiana State Medical Society and currently serving his second term as Coroner of East Baton Rouge Parish. Dr. Clark is a native of Baton Rouge. He received his undergraduate degree from Louisiana Tech, majoring in biology. He later graduated from Louisiana State University School of Medicine in New Orleans and completed his residency in Emergency Medicine at Earl K. Long Medical Center in Baton Rouge. He is board certified by the American Board of Emergency Medicine. Dr. Clark has served our community in many capacities during his career, from emergency medicine doctor, to a member of the East Baton Rouge Parish Sheriff's Office SWAT team. He has been in the medical field for over 17 years and in law enforcement for nearly 14 years. Since taking office in 2012, Dr. Clark's mission has been to engage his office fully in his three jurisdictions: death investigations, mental health investigations, and sexual assault investigations.





William "Beau" Clark, MD

"Louisiana was one of the first states to address prescription limits from both a health care provider standpoint and an insurance standpoint."

Chief Editor Smith W. Hartley How did opioids become such a problem in the first place?

William "Beau" Clark, MD 1. The Louisiana legislature formally mandated a life sentence for the distribution of heroin, which is considered a schedule I narcotic. However, in an effort to prevent the incarceration of non-violent criminals, the mandatory sentencing was greatly reduced to the five-year range in early 2000.

2. In 2010, the Louisiana Board of Pharmacy created and implemented the Prescription Monitoring Program (PMP) in an effort to assist physicians and the DEA to prevent doctor shopping, otherwise known as narcotics diversion. The supply of opioid prescriptions readily available on the street was reduced and their street value increased. Waiting on the sidelines was the presence of heroin, and it was cheap.

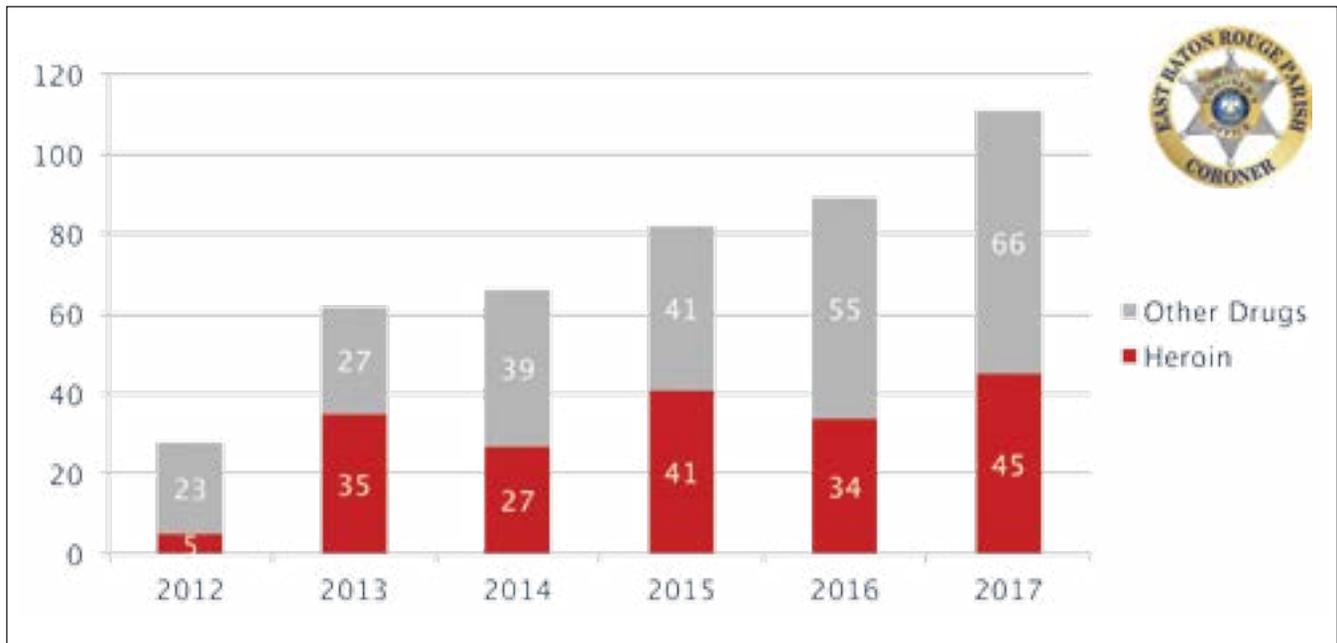
3. The Pain Scale- At around the same time as Oxycontin's FDA approval, the American Pain Society, introduced the pain as the 5th vital sign campaign, followed soon thereafter by the VA adopting that campaign as part of their national pain management strategy. This declaration was not accompanied by the release of any device which could objectively measure pain, as was done with all previous vital signs, making it the first and only subjective vital sign. Further, the Joint Commission joins the list in 2001, issuing standards requiring the use of a pain scale and stressing the safety of opioids. They even published a guide sponsored by Purdue Pharma. This guide reportedly stated, "Some clinicians have inaccurate and exaggerated concerns about addiction, tolerance and risk of death. This attitude prevails despite the fact there is no evidence that addiction is a significant issue when persons are given opioids for pain control." The Joint Commission framed pain as a patient's rights issue, inferring that inadequate control of pain would lead to sanctions. What have we discovered since? Opioids are addictive, and they lied to us.

4. Patient Satisfaction Surveys deserve a place within the storm. They monetized their concept, selling not only surveys, but also consulting services to help hospitals improve their scores. Unfortunately, the correlation between patient satisfaction and quality is unclear, with a study from UC Davis suggesting that high satisfaction is actually dangerous, correlating it to higher expenditures, higher rates of hospitalization, and a higher risk of death. But acknowledging such literature would affect Press Ganey's lucrative survey sales, so such studies are ignored. CMS developed the value-based purchasing program to shift from pay for volume to pay for value. Hospitals are scored based on their performance on measures of processes of care, outcomes of care, efficiency, and the patient experience. The patient experience is based on scoring on HCAHPS surveys that are sent to patients, which includes patient scoring of their satisfaction with their pain control. CMS decided that a patient's satisfaction was as important as whether a patient developed a hospital-acquired condition, or even survived their hospitalization, and weighted satisfaction at 30 percent of the overall score. Because CMS was now attaching significant reimbursement to patient satisfaction, hospital administrators developed initiatives to improve their scores and avoid a penalty. Therefore, if a patient was not satisfied with how high they got, the practitioner was at risk for sanctions.

Editor Are we doing anything unique in Louisiana to address the problem?

Dr. Clark Louisiana was one of the first states to address prescription limits from both a health care provider standpoint and an insurance standpoint. This was the responsible prescribing legislation of 2016 and the state's Medicaid program limiting prescriptions.

Editor How is it that opioid prescriptions have decreased nationally 22% between 2013 and 2017?



Louisiana deaths attributed to heroin and other opioids between 2012 and 2017.

Dr. Clark I do not believe they have. It is my understanding that there are more prescriptions now than ever. Most of the data suggests there are more than enough prescriptions in circulation for every man, woman, and child in the state of Louisiana. It is possible that the data shows an increased use of the prescription-monitoring program; however, there are plenty of prescription opioids available, as well as illicit opioids.

Editor Can you elaborate on other treatment strategies for chronic pain?

Dr. Clark I am not a chronic pain specialist; therefore, the answer would be better from an expert in the specialty. However, I would anecdotally state that the use of opioids should be a treatment of last resort and only used in the most controlled environments. Other non-opioid treatments, such as therapy, massage, non-opioid drugs, acupuncture, ice packs, and “suck it up, buttercup” should be considered.

Editor How important are payors with regard to opioid usage?

Dr. Clark I believe they play an important role. Think about the simple concept of prescriptions in bulk. If an insurer gets a discount by mail ordering a prescription, and the patient receives a 90-day supply for a cheaper price, then this activity might be encouraged by the insurer. If the prescription is an opioid, then here comes a 90-day supply to the patient’s doorstep.

Editor How dangerous are opioids really? When are they the right decision?

Dr. Clark I believe they are incredibly dangerous for a lot of reasons. First, there has been very little quality research to suggest that they even work at all. The pharmaceutical companies pay for most of the studies; therefore, I question their bias. If you compare and contrast opioid studies to antibiotic studies, there is definitive evidence of antibiotics killing bacteria. However, there is only subjective evidence that the opioid even works based on the patient’s response. Furthermore, our inability to pick an addict out of a crowded patient waiting room further complicates the issue. It’s a minefield. As a prescriber, how do you know that the prescription you write will not lead

down the path of addiction? Why do some patients take one pill and can’t stand the way it makes them feel, and others absolutely fall in love with it? This is why limited prescriptions or responsible prescribing is so important. Opioids may be the right decision if all other treatment fails, and they are given and monitored under extreme scrutiny. Even then, I am unsure if they are the right decision.

Editor What else can you tell us about the opioid epidemic of Louisiana?

Dr. Clark Let’s talk solutions. It’s not fair to tell this apocalyptic story and not offer the readers a solution. I believe the solution has three parts, and they must all be accomplished or the epidemic will not end.

1. Responsible prescribing to prevent new addictions from taking place
2. Treatment, both medical and psychological, of the current population of addicts through the use of Medically Assisted Treatment (MAT) and Cognitive Behavioral Therapy (CBT)
3. The war on illicit opioids such as heroin, fentanyl, and car-fentanyl. ■

Some Doctors Still Billing Medicare for the Most Complicated, Expensive Office Visits

A Closer Look at
Medicare Part B

By Charles Ornstein and Ryann Grochowski Jones
Propublica



Thousands of times a year, Medicare patients file into Dr. Mark Roberts' family practice clinic in rural Evergreen, Alabama, for standard office visits. And almost every time they did in 2015, Roberts billed Medicare for the most complex, and most expensive, type of office visit – one that typically takes 40 minutes and for which Medicare reimbursed him an average of \$94. He billed for 4,765 such high-level visits that year, according to federal data, more than any other doctor in the country. And for that, he collected nearly \$450,000 from Medicare.



ROBERTS' BILLING PATTERN was highly unusual compared to his peers. All told, family medicine doctors in Alabama billed for such visits only 5 percent of the time. Roberts did so 95 percent of the time. Even some doctors who had sicker patients billed for top-level visits less often, Medicare data show. Several messages left at Roberts' office were not returned.

For years, internal government watchdogs have been warning the federal Medicare program that some doctors were overcharging for office visits. And for years, federal health officials have been promising to focus on the problem.

But a new *ProPublica* analysis shows very little has changed since we first wrote about the issue in 2014. *ProPublica* found that 1,825 health professionals, including Roberts,

billed Medicare for the most expensive type of office visits for established patients at least 90 percent of the time in 2015. That was almost the same as the 1,807 that we found based on 2012 data. Some physicians that were billing Medicare this way in 2012 still were in 2015, we found.

Office visits are a staple of medicine. In 2016, Medicare paid for more than 227 million of them at a cost of \$13.2 billion (including Medicare outlays and patient copayments). They are far from the most expensive services that Medicare provides, but they are ubiquitous.

While it's possible that some physicians only treat the sickest patients who require the highest level office visits, "I don't think it's very probable," said Dwayne Grant, regional inspector general for evaluation

and inspections for the U.S. Department of Health and Human Services in Atlanta. Grant's team produced reports in 2012 and 2014 that said Medicare needed to do more to address improper billing.

"We continue to believe that focusing on these high-coding physicians is going to improve oversight, reduce overpayments and really serve as a deterrent effect," he said.

Among the 1,825 physicians who billed most often for complex office visits was Dr. Jose Prieto, an internist in Hialeah, Florida. He billed for 721 office visits in 2015, all of them at the highest level, Medicare data show. Medicare revoked Prieto's ability to participate in the program in December 2016 for falsified information, according to data provided under the Freedom of Information Act.

Prieto did not respond to a phone call and email seeking comment. A woman who returned a call placed to his office said Prieto is an infectious disease doctor who treats patients with HIV and routinely spends 45 minutes with each patient. The woman disputed that Prieto exclusively bills for the highest level office visits, as Medicare data shows. "He bills for the time he spends with his patients," she said.

Another is Dr. James Beale, an orthopedic surgeon in Warren, Michigan. All 1,150 of his Medicare office visits were billed at the highest level in 2015. Beale has been disciplined three times by Michigan's medical board, most recently in May 2016 when he was suspended for failing to respond to a 2015 board complaint that he prescribed controlled substances for patients without adequate justification. Beale also extensively billed Medicare for psychotherapy services in 2015. He

90%

"ProPublica found that 1,825 health professionals billed Medicare for the most expensive type of office visits for established patients at least 90 percent of the time in 2015."

could not be reached for comment.

Also, on the list is Dr. Rand Ritchie, a Pismo Beach, California psychiatrist. He billed 1,475 visits at the highest level, or 97 percent of his Medicare office visits, in 2015. The California medical board has disciplined Ritchie twice for alcohol abuse and multiple convictions for driving under the influence of alcohol. He completed probation most recently in 2014 and currently has an unrestricted license.

Ritchie's office manager, Darryl Schumacher, who handles billing for the practice, said Ritchie had started accepting Medicare around 2015 because no other psychiatrists in private practice in the area did so. "He was taking on many new patients and the complexity of some of these patients, because they had either gone without treatment for many years or had gone without a psychiatrist, was pretty difficult at the beginning," Schumacher said.

Schumacher also said that no one from Medicare had contacted the practice to ask about Ritchie's numbers and that questions from *ProPublica* were the first indication that his billing pattern was unlike that of his peers. As for his discipline, Schumacher said Ritchie fulfilled the requirements of his probation and is once again board certified in psychiatry.

Asked for comment, a spokeswoman for the Centers for Medicare and Medicaid Services said the agency is exploring how to make changes to its billing rules for office visits to reduce the burden on doctors and better reflect the way medicine is practiced and care is coordinated.

In a notice in the Federal Register in November, CMS said the guidelines governing how health professionals bill for office visits, more formally called Evaluation and Management visits, date to 1995 and 1997. CMS said the process for updating them could take several years.

As it stands now, doctors and their staffs decide how to bill for a patient visit based on a host of factors, including how thoroughly they review a patient's medical history, the intensity of the physical exam and how complicated the medical decision-making was.

The coding system developed by the American Medical Association gives doctors five options.

An uncomplicated visit, typically of short duration and which may not require a physician, is coded a 1; a visit that involves more intense examination and often consumes more time is coded a 5. The most common codes for visits are in the middle, 3 and 4.

Most health professionals had a tiny percentage, if any, visits billed at level 5, but more than 1,250 billed only at the highest level in 2015, *ProPublica* found. Another 570 billed that way more than 90 percent of the time. That was very similar to what we found three years earlier.

Cyndee Weston, executive director of the American Medical Billing Association, an industry trade group, said such numbers raise red flags. "It's not likely that every patient that comes to a doctor's office is a level 5," she said.

The doctors who billed at the top level in 2015 were not all the same as those who did so in 2012. Of the 1,825, 650 were on the list in both years. Another 536 billed for a lesser share of visits at the highest level in 2012. And the remaining health providers did not bill Medicare in 2012 for office visits involving at least 11 patients.

For some doctors, the shift was jarring.

In 2012, Roberts, the Evergreen, Alabama, family doctor, never billed for high-level office visits. He billed Medicare 4,681 times for level 3 visits, for which Medicare paid him an average of \$43.57, less than half as much as he received per visit in 2015.

In Oak Harbor, Washington, doctors Robert Lycksell and Zayan Kanjo also didn't bill for level 5 visits in 2012. Lycksell billed for 1,948 level 5 visits in 2015 and Kanjo 1,297 in 2015. The doctors did not return phone calls seeking comment.

Weston said it's disappointing that the same problems identified years ago appear to remain today. Some of what's happening, she said, is related to electronic medical record systems that assign billing codes based on the computer boxes doctors click during office visits.

"Those programs tend to upcode,"

meaning to bill at a higher level than justified, Weston said. If doctors copy and paste phrases about a patient's condition and their electronic medical record automatically decides how to bill for the visit, "that is worrisome."

HOW WE DID THIS ANALYSIS

For this story, *ProPublica* analyzed provider billing patterns for standard office visits in Medicare. We focused on those for established patients who had been seen at least one time by the provider previously. These are among the most common services performed in the program.

We used data released by the Centers for Medicare and Medicaid Services showing the services provided by and payments made to providers in Medicare's Part B program in 2015. Medicare redacted data on services when a provider billed for a service for fewer than 11 patients.

More than 490,000 providers billed the program for standard office visits for at least 11 patients in 2015.

Office visits are coded using the Current Procedural Terminology system devised by the American Medical Association and used by Medicare. The severity of each visit depends on three criteria: the thoroughness of the review of a patient's medical history, the comprehensiveness of the physical exam and the complexity of medical decision-making involved.

An uncomplicated visit, typically of short duration, should be coded a 99211; a visit that involves more intense examination and often consumes more time should be coded a 99215. The most common codes for visits are in the middle, a 99213 or 99214.

To protect against variation hidden by redactions, we focused on the nearly 364,000 providers who billed for at least 100 standard visits in 2015.

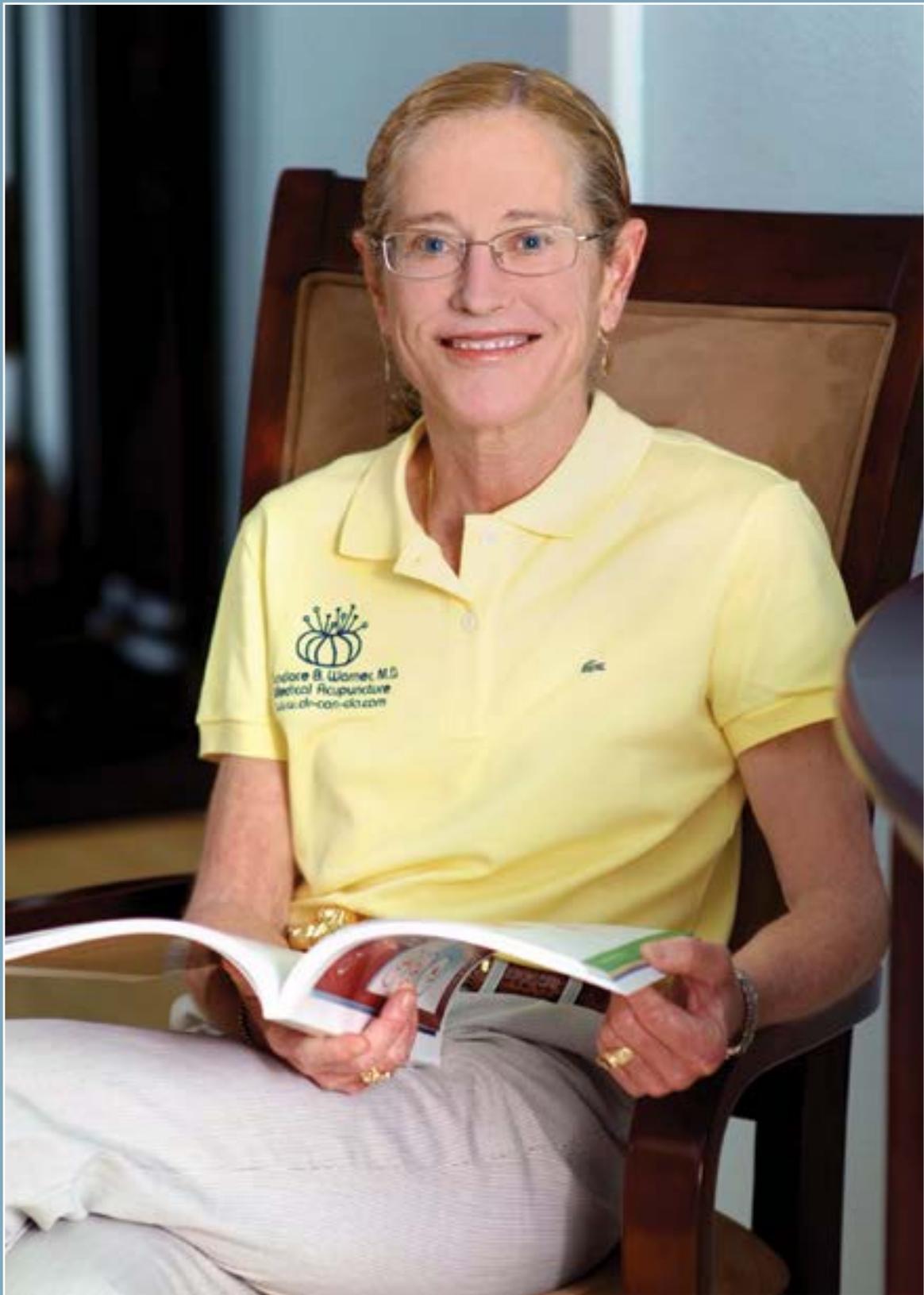
We identified more than 1,250 providers who billed for every office visit using the 99215 code. We found another 570 providers who billed level 5 visits at least 90 percent of the time. ■

A Q&A WITH

Candace Warner, MD

INTRODUCING ACUPUNCTURE

CANDACE B. WARNER, MD is the only board certified Physician Acupuncturist in Louisiana. She is a Fellow of the American Academy of Medical Acupuncture, and is also board certified in infectious diseases, hyperbaric medicine, and internal medicine. Dr. Warner graduated Magna Cum Laude from Vanderbilt University in 1981, and first in her class from Rush Medical School, Chicago, in 1985. She continued her medical training at Mayo Graduate School of Medicine in Rochester, Minnesota with an Internal Medicine Fellowship and an Infectious Diseases Fellowship. Dr. Warner's Medical Acupuncture training began at UCLA in 1998 and continues to the present.



DIALOGUE

Chief Editor Smith W. Hartley How did you get started in acupuncture?

Candace Warner, MD I came to Baton Rouge in 1991, after completing a residency in Internal Medicine, and a Fellowship in Infectious Diseases at the Mayo Clinic. I started learning about acupuncture in the nineties because I wanted to practice more outpatient medicine. I have been practicing acupuncture exclusively since 2002. I am the only board certified Medical Acupuncturist in Baton Rouge.

Editor When is acupuncture ideal for a patient?

Dr. Warner The ideal patient would be one that presented early on in their disease process. Most of the time now, patients are sent to me after multiple failed procedures and surgeries. That isn't to say that changes can't be attained later. Over medication is rampant. Acupuncture offers a healthy option to address numerous medical problems. Besides pain problems, acupuncture can be used to address smoking cessation, weight loss, hypertension, dizziness, sinus congestion, and a host of other conditions.

Editor Do you have an opinion on why acupuncture has not been more accepted as a treatment option?

Dr. Warner I think that is changing, though slowly. We are a conservative medical community. Many people don't want to pay for any form of health care out of pocket. Most of the constraints have arisen from poor insurance coverage. It is ironic that Medicare and Tricare don't cover acupuncture, yet they cover chiropractic care, physical therapy, podiatry, and even massage therapy. They cover seemingly unlimited steroid injections and surgeries without enough emphasis on wellness or preventative care. Since narcotic abuse has become a national issue, I am hoping that insurance coverage will expand.

Editor Can you explain Louisiana's regulations for being an acupuncture provider?

Dr. Warner All practitioners must have a separate acupuncture license. Licensed acupuncturists (Lac) who are trained in state acupuncture schools no longer require a supervising physician. I don't think physical therapists are required to have a license to perform dry needling.

Editor What exactly happens during an acupuncture visit?

Dr. Warner A full history is obtained. The details of the injury or condition, including duration, severity, and past treatments are reviewed. The patient is examined, which includes looking at the tongue and feeling the six pulses. The tongue represents the past medical history, while the pulse is the more present situation.

Point selection is a huge topic beyond the scope of this Q & A, but I will attempt a summary. There are 12 Principle Meridians (PM) with 388 points. There are also 8 Curious Meridians, which borrow points from the PM and address endocrine issues. There are also 8 distinct meridians, which address



“Acupuncture offers a healthy option to address numerous medical problems. Besides pain problems, acupuncture can be used to address smoking cessation, weight loss, hypertension, dizziness, sinus congestion, and a host of other conditions.”



“If the state and health insurers were truly concerned about the opioid epidemic, they would reestablish coverage.”

There is only so much that can be done in a one-hour session, and all of my appointments are scheduled for one hour. I might use one set of points to treat a frozen shoulder, and then another point grouping to drain sinuses. I will often incorporate auricular points for relaxation and to amplify organ function or modulate the nervous system.

Editor What is new in the field of acupuncture?

Dr. Warner The Veteran's Choice program was started last year. I have been asked by the VA to see and treat patients outside their clinic system. This program has been a great start for the private-public partnership to provide services veterans need and deserve. This month Congress will have an opportunity to pass The VA Mission Act, which provides critical funding for more health care capacity, including the Veteran's First Choice program. President Trump set a Memorial Day deadline for congress to pass this bill. I have been treating pain and PTSD, along with other service related conditions, in these veterans for about one year.

There have also been advances in acupuncture microsystems, such as Scalp and Battlefield Acupuncture, to address neurologic injuries, such as stroke and trauma/triage. Five-phase acupuncture is a growing field focused more on spiritual and psychiatric problems. Addiction medicine often incorporates auricular acupuncture in their programs.

Editor Does insurance ever pay for acupuncture services?

Dr. Warner BCBS Federal, some Aetna and Cigna plans do. The state (OGB and LSU)

plans covered acupuncture up until March of 2015, when coverage was abruptly terminated. No reason was given for the change. I have appealed repeatedly, to no avail. If the state and health insurers were truly concerned about the opioid epidemic, they would reestablish coverage. I treat several VA and W/C patients.

Dry Needling, a form of acupuncture performed by physical therapists, (PT) is not covered either. This is a common misconception. Therapists can code and bill for a different modality, such as ultrasound. There is quite a bit of ongoing controversy regarding this issue. I am all for more acupuncture, but I don't feel that Physical Therapists are adequately trained to perform needling. They also treat beyond their scope of practice in using electrical stimulation, which is forbidden under the statute. I have seen patients who have been over needled with resultant soft tissue injury. A carefully placed acupuncture needle in a specific acupuncture point causes energy or Qi to move. Acupuncture accomplishes more than simply sticking a needle in a large muscle group to illicit a twitch. The meridians follow the nerve pathways, so an astutely inserted needle in a specific point is much more precise than dry needling.

Editor What would you like to communicate to the people of the greater Baton Rouge area with regard to acupuncture as a treatment option?

Dr. Warner Try acupuncture early on for best results, before having that steroid injection or surgery. Acupuncture is safe and effective, and has virtually no side effects. If you are a state employee, lobby for the return of acupuncture insurance coverage. ■

dense organ dysfunction. Point attributes are determined by location on the meridian, traditional Chinese medicine (TCM), and clinical observation. I might treat a pain problem by selecting points based on anatomic location, or whether the point is sedating, tonifying, or a phase point. I might also want to deactivate a trigger point, which is the premise behind dry needling. I use a needle holder and always needle transversely to better isolate the muscle and protect underlying structures. If I am treating an internal medicine issue, I select points based on the patient's biopsychotype and clinical presentation. For example, if there were a fertility issue I would select points on the CM called Chong Mo and Dai Mo, which encompass the pelvis. There are also adjunct points on microsystems including the ear and scalp. Auricular points are used in battlefield acupuncture to address trauma. They are also used in addiction medicine and PTSD protocols. The scalp microsystem is employed to address dense neurologic conditions such as stroke and paralysis.



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Healthcare Briefs

LOL Children's Health Tips for a Safe Summer

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Our Lady of the Lake Children's Health Offers Tips for a Safe Summer

Summer is a fun time of the year for children and families to enjoy together while school is out of session. But with high temperatures, pesky bugs and mosquitos, and a lot of time spent in potentially dangerous water, there are also a lot of safety concerns during this time of year.

Dr. Gregory Gelpi, pediatrician with Our Lady of the Lake Children's Health, recognizes that despite the many concerns about safety during the summer, these risks can be prevented with a little preparation and education.

Here are his top 10 tips for a safe summer:

Limit sun exposure. When possible, avoid or limit the amount of time spent outside between 10 a.m. and 4 p.m. These are the most hazardous times for UV exposure, so plan indoor activities for this time. If this is not possible, seek shade when possible and allow for breaks from the sun, especially for babies and young children who are more susceptible to exposure from the sun.

Protect children with sunscreen and proper clothing. When out in the sun, choose a physical or chemical-free sunscreen with an SPF of 30 and made with zinc oxide or titanium dioxide to protect from UVA and UVB rays. Apply generously 30 minutes before a child goes outside and reapply at least every two hours. Protective clothing, a hat, and sunglasses can also help protect the child from the sun.

Stay hydrated. Make sure children drink plenty of fluids every day, especially before, during, and after physical activity, and when outside in the sun. Children should drink two to four cups of water every hour during outside play, while also avoiding sugary drinks because those can actually cause dehydration.

Never leave children in a hot car. Cars can get up to dangerous temperatures in a short amount of time in the Louisiana heat, even with cracked windows. Children are at even greater risk for heat stroke as their bodies can heat up three to five times faster than that of an adult.

Practice water safety. Drowning is the leading cause of injury-related death among children between one and four years old, and the third leading cause of death among children of all ages. Never assume someone else is watching your child. If swimming somewhere without a



Tim Barrett, CPA

trained lifeguard, designate a water watcher to ensure someone has their undivided attention on children in and around the pool at all times.

Utilize proper pool safety equipment. Make sure young children or inexperienced swimmers wear U.S. Coast Guard approved life jackets. Keep rescue equipment like rescue ropes and safety rings poolside. Remove toys from the water when children are not in the pool because a child might fall into the pool trying to reach a toy still in the water from previous swimming sessions.

Beware of bugs. Not only are bugs a summer nuisance, but they also carry risk of infection and disease. Insect repellents containing the chemical DEET are considered to be the most effective at keeping bugs away and can provide protection for up to eight hours.

Learn how to fight the bite. Most reactions to insect bites include only mild swelling, but some can cause more painful reactions. If stung by bees, wasps, or similar insects, be sure the stinger has been removed from the site of the sting and wash the area with soap and water. Icing the infected area may also help reduce swelling and ease pain. Over-the-counter pain relievers may help, but be sure to follow any dosing instructions for your child. Consult a doctor if your child develops any of the following symptoms within three weeks following a bite: rash, fever, body aches, fatigue, headache, stiff neck, or disorientation.

Prevent summer time injuries. Falls at home and on playgrounds are common injuries seen during summer months. Check any playground equipment to make sure it has been well maintained, and that surrounding surfaces are not hazardous for falls. Make sure young children are supervised at all times on any equipment that can lead to falls.

Schedule your child's annual checkup. Summer is the perfect time to schedule your child's annual wellness visit to be sure he or she is in good health. For older children that play organized sports, sports physicals can be given during summer months. It's also an opportunity to ensure your child is up to date on all vaccines so they are protected from communicable diseases.

Tim Barrett, CPA, CEO of Radiology Associates, LLC, is Secretary/ Parliamentarian of RBMA

Tim Barrett, CPA, CEO of Radiology Associates, LLC, is the secretary/parliamentarian of the Radiology Business Management Association (RBMA) Board of Directors for the 2018–2019 term. The RBMA Board of Directors met and elected its new officers for 2018–2019 at PaRADigm, their annual conference held in San Diego this spring.

The volunteers serving as the 2018–2019 officers of the RBMA Board of Directors are Christie D. James, MS, FRBMA, president, Massachusetts General Physicians Organization; Sarah Mountford, CPC, RCC, FRBMA, president elect, Zotec Partners; Thomas C. Dickerson, EdD, FACHE, immediate past president, Clinical Radiologists, SC; Tim Barrett, secretary/parliamentarian, CPA, Radiology Associates, LLC; and Michael Langenberg, CPA, treasurer, Association of University Radiologists, PC.

Serving alongside RBMA's new officers, the rest of the 2018–2019 board includes Michael Gonzales, FRBMA, PBS West; Thomas Greeson, MBA, JD, FRBMA, Reed Smith, LLP; Carol Hamilton, MBA, SPHR, FACMPE, FRBMA, West County Radiological Group, Inc.; Pam Kassing, MPA, RCC, FRBMA, American College of Radiology; Parke Keith, MSCH, MBA, Radiology of Huntsville PC; Jennifer Kroken, MBA, Healthcare Resource Providers, LLC; Charles McRae, MBA, Columbus Radiology Corporation; and Shannon Wilson, Bay Imaging Consultants Medical Group.

LSU's Pennington Biomedical Research Center Marks Three Decades of Military Research

With 130 U.S. Defense Department-funded studies over the past 30 years, LSU's Pennington Biomedical Research Center has provided nutritional research for America's military.



The latest of the Defense Department awards is the Collaborative Research to Optimize Warfighter Nutrition III project, or CROWN III. The \$6.7 million study will test the ways to best use nutrition to keep warfighters physically and mentally healthy in the field.

Warfighters often experience environmental and operational stress in and out of battle. CROWN III is aimed at ensuring a healthy, fit military, ready for deployment and resilient to those stressors.

"This work is of utmost importance to our country since it has the potential to provide the scientific data necessary to develop new and improved military health policies that promote healthy weight, military readiness, and novel tools soldiers need to stay in top condition," Dr. Donna Ryan, Pennington Biomedical's executive director at the time, said in announcing the award in September.

Pennington Biomedical's first research project began in 1989, and involved a request from the U.S. Army to look at the effects of diet on soldiers' performance. In the 30 years since, the U.S. military has provided Pennington Biomedical with \$80 million in grant funding for studies

on warfighter health.

The joint efforts of Pennington Biomedical and military researchers have led to significant improvements of operational rations, better understanding of warfighter energy and nutritional requirements, and modifications in garrison feeding, said Dr. Jennifer Rood, PhD, Pennington Biomedical associate executive director for cores and resources and the principal investigator of the CROWN III project.

Among other things, Pennington Biomedical's work provided the basis for operational recommendations aimed at improving warfighter resiliency to, and recovery from burning more calories than they can consume, Rood said. The research center also provided new information that can be used to optimize the nutrient content of rations to better protect soldiers from muscle wasting during missions at high altitude and to sustain performance during physically strenuous assignments.

Other highlights of Pennington Biomedical's work with the U.S. military include:

Helping develop the First Strike Ration, an alternative ration used during periods of highly intense combat. Each First Strike contains an average of 2,900 calories, or 24 hours of nutrition

Tiffany Stewart, PhD, Dudley & Beverly Coates Endowed Professor, director of the Behavior Technology Laboratory at LSU Pennington Biomedical Research Center, and Michael Switzer, project manager for military studies at Pennington Biomedical and first lieutenant. Over the past 30 years, LSU's Pennington Biomedical Research Center has provided nutritional research for America's military.

for warfighters on the move.

Developing the Healthy Eating Activity Lifestyle Training Headquarters (H.E.A.L.T.H.) program. The program helps soldiers and their families stay fit and ready in the face of deployment stressors. The Louisiana National Guard has helped hone and test the program. All soldiers in the Army currently have access to H.E.A.L.T.H., and more than 15,000 active-duty, reservists, and National Guard soldiers and their families have used the program.

The Louisiana National Guard also helped Pennington Biomedical develop the H.E.A.L.T.H. Intensive program. Under this project, the people closest to the soldiers—their spouses, significant others, live-in relatives, and even older children—encourage them to make healthier choices like getting enough sleep, eating nutritious meals, and managing stress.

Studying arginine, an essential amino acid thought to help improve blood flow and immune function, to examine whether it can benefit warfighter performance.

Dr. Tiffany Stewart, PhD, director of Pennington Biomedical's Behavior Technology Laboratory and principal investigator for the Army H.E.A.L.T.H. program, said the program includes developing and providing cutting-edge technology—a web/smartphone app—to aid soldiers and their families with nutrition, fitness, sleep, and resilience.

The H.E.A.L.T.H. program also serves a key purpose in aiding soldiers in meeting Army standards for performance, Stewart said.

In addition, Pennington Biomedical's new work aims to tackle eating disorders in the military and to develop and test a pre-recruitment program for young people hoping to join the military, Stewart said. At present, 71 percent of young Americans aged 17-24 are too unfit for service.

"At Pennington Biomedical, we are looking at the health of the whole soldier," Stewart said. "We want our men and women in uniform to be

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ready for whatever they may face during their service, and that means being physically and mentally optimized and resilient.”

CIS Offers Free Vascular Screenings at Wine and Wellness Event

Cardiovascular Institute of the South (CIS) recently hosted a free Wine and Wellness Event featuring vascular ultrasounds and electrocardiogram (EKG) screenings at the CIS Baton Rouge clinic on Picardy Avenue. A vascular ultrasound is a painless exam to test for venous disease, a condition which develops when vein valves become damaged or diseased. This test is ideal for those who experience leg pain, swelling, or varicose veins.

EKGs were also being offered to check the electrical signals of the heart. This screening can detect blockages, the thickness of the heart wall, past heart attacks and more. An EKG is recommended for those with risk factors of heart disease, or those who experience symptoms such as chest pain, shortness of breath, an irregular heartbeat, or heavy heartbeats. The event also included hors d'oeuvres and red wine sampling.

World No Tobacco Day Focus is Tobacco and Heart Disease

World No Tobacco Day (WNTD) is an annual program of the World Health Organization (WHO) which highlights the health risks associated with tobacco use, and advocates for effective policies to reduce tobacco consumption. The focus of this year's World No Tobacco Day is Tobacco and Heart Disease.

The 2018 campaign is designed to increase awareness about the link between tobacco and heart and other cardiovascular diseases, including stroke, which combined, are the world's leading causes of death.

In recognition of World No Tobacco Day 2018, the Smoking Cessation Trust encouraged Louisiana smokers (22.8 percent according to the United Health Foundation's 2017 America's Health Rankings® Report) to take this opportunity to eliminate tobacco from their lives. Tobacco use is the leading cause of preventable death in the United States, imposing a toll in health, lives, and dollars on families, businesses, and government. Tobacco kills 480,000 people annually—more



Wine and Wellness Event hosted by Cardiovascular Institute of the South

than AIDS, alcohol, car accidents, illegal drugs, murders, and suicides combined. Annually, tobacco costs Louisiana \$1.89 billion in healthcare expenditures and \$2.49 billion in lost productivity.

“With the tobacco industry now admitting publicly that there is a definitive link between smoking and heart disease, we can confidently say that the cessation services we provide at no charge to eligible Louisiana residents are successfully helping people to completely eliminate the harmful effects of smoking cigarettes from their lives,” said Mike Rogers, CEO of the Smoking Cessation Trust Management Services (“SCTMS”).

To date, Smoking Cessation Trust has reached more than 90,000 Louisianans with the message that quitting now is one of the best things they can do for their health, their families, and their wallets.

For more information, or to apply for the free products and services provided by the trust, visit www.smokefreela.org; or call locally at (504) 529-5665, or toll-free at (855) 259-6346.

Louisiana Healthcare Connections Expands Leadership Team

Louisiana Healthcare Connections, the state's largest Medicaid health plan, with more than

475,000 members and offices in Baton Rouge, New Orleans, Covington, and Lafayette, has added three individuals to its leadership team.

Steven L. Higgs has been named the vice president of network development and contracting. Formerly of Chattanooga, Tennessee, Higgs holds a Bachelor's in Business Administration from the University of Montevallo in Alabama, and an MBA from the University of Tennessee. An avid volunteer for diabetes and multiple sclerosis-focused organizations, he has also worked with Tennessee's Breast Cancer Foundation and the Lance Armstrong Foundation. Higgs leads all aspects of provider network and contracting strategies, including incentive-based contracting, process improvement, and network operations.

Michael P. Smith has been named the vice president of product development. A New Orleans native, Smith holds a Master's in Management with healthcare concentration from Troy University, and a BBA in Finance from Loyola University. He brings more than 20 year of experience in managed care and healthcare operations to Louisiana Healthcare Connections. Smith has oversight responsibility for products and programs designed to support the further growth of Louisiana Healthcare Connections,



Steven L. Higgs



Michael P. Smith



Akiko Barrow

and represents the organization in relationships with key stakeholders related to product development.

Akiko Barrow has been named the director of provider network performance. With more than 12 years of experience in provider relations, including six with Louisiana Healthcare Connections, Barrow holds a BBA from the University of Louisiana at Lafayette. She has a leadership role in the development and implementation of programs and resources to support providers in delivering quality, cost-effective care. She is a member of the American Academy of Professional Coders, Mewelde Moore's Knowledge First Foundation, and Alpha Kappa Alpha Sorority, Inc.

New Guidelines Recommend Earlier Colorectal Cancer Screening

New guidelines developed by the American Cancer Society (ACS) recommend that screening for colorectal cancer for average-risk adults begin at age 45, five years earlier than the previous recommendation. The guideline update, published as an Early View paper in *CA: A Cancer Journal for Clinicians*, was co-authored by Elizabeth, T. H. Fontham, DrPH, emeritus professor and founding dean of LSU Health New Orleans School of Public Health and co-chair of the American Cancer Society's Screening Guideline Development Group.

The recommendations are based in part on research that found an increased incidence of colorectal cancer in younger adults. Among adults younger than 55 years, there was a 51 percent increase in the incidence of colorectal cancer (CRC) from 1994 to 2014 and an 11 percent increase in deaths 2005 to 2015. The authors

reported that colorectal cancer incidence has declined steadily over the past two decades in people 55 and older, partly due to screening that result in the removal of polyps. A recent analysis found that adults born around 1990 have twice the risk of colon cancer and four times the risk of rectal cancer compared with adults born around 1950, who have the lowest risk. Studies suggest that the increased risk for younger people will remain as they age.

Colorectal cancer is the fourth most commonly diagnosed cancer. It is the second leading cause of cancer deaths. When detected and treated early, the five-year survival rate is near 70 percent. "The options for colorectal cancer screening are fecal immunochemical test annually; high-sensitivity, guaiac-based fecal occult blood test annually; multitarget stool DNA test every three years; colonoscopy every 10 years; computed tomography colonography every five years; and flexible sigmoidoscopy every five years," said Dr. Fontham. "It is important to note that all positive results on non-colonoscopy screening tests should be followed up with timely colonoscopy."

The Guideline Committee also developed new materials to facilitate conversations between clinicians and patients to help patients decide which test is best for them.

"Given the evidence that adults vary in their test preferences, we believe that screening rates could be improved by endorsing the full range of tests without preference. People should have a conversation with their physicians to decide which type of screening is best for them," Fontham added.

The guidelines recommended in the paper focus on people at average risk. Those at high

risk for colorectal cancer, including those with a family history, a personal history of inflammatory bowel disease, or polyps diagnosed before age 60, should discuss their risk and appropriate screening with their physicians.

The authors conclude, "The ACS recommends that all U.S. adults at average risk of CRC undergo regular screening with any of the six options outlined in this guideline, beginning at age 45 years. Adults in good health should continue screening until age 75 years, beyond which the decision to continue screening should be individualized based on patient preferences, health status, life expectancy, and screening history. Ascribing to the adage that the best CRC screening test is the one that gets done, and done well, the ACS recommends that patients initiating screening or previously non-adherent with screening be offered a choice of tests based on the availability of high-quality options. It is our hope that widespread adoption of this guideline will have a major impact on the incidence, suffering, and mortality caused by CRC."

The Guideline Development Subgroup for this new guideline was led by Dr. Andrew Wolfe, MD, University of Virginia School of Medicine. Co-authors also include faculty from University of Minnesota, Emory University School of Medicine, University of Pennsylvania Medical Center, University of Washington, Duke Center for Oncology Primary Care, University of Texas MD Anderson Cancer Center, University of California San Francisco, and researchers from divisions of the American Cancer Society.

Pointe Coupee Hospice Named a 2018 Hospice Honors Recipient

Pointe Coupee Hospice has been named a 2018 Hospice Honors recipient by HEALTHCAREfirst, a provider of web-based home health and hospice software, billing, and coding services, CAHPS surveys, and advanced analytics. Hospice Honors is a prestigious program that recognizes hospices providing the highest level of quality as measured from the caregiver's point of view.

"We are excited to recognize the 2018 Hospice Honors recipients for their hard work and dedication to providing exceptional care," said J. Kevin Porter of HEALTHCAREfirst. "I congratulate Pointe Coupee Hospice on its success in achieving this highest of honors."



Ronald "Ron" E. Hoga

Award criteria were based on Hospice CAHPS survey results for an evaluation period of October of 2016 through September of 2017. Award recipients were identified by evaluating performance on a set of 24 quality indicator measures. Performance scores were aggregated from all completed surveys and were compared on a question-by-question basis to a national performance score calculated from all partnering hospices contained in the HEALTHCAREfirst's Hospice CAHPS database.

Pointe Coupee Hospice Nursing Director Dana Gebhart, RN, BSN, credits her staff with providing personalized, professional, and exceptional hospice care, which are factors contributing to the agency being named a 2018 Hospice Honors recipient. "Our hospice staff appreciates every opportunity given to provide hospice care to the residents in our service area and our staff takes a personal interest in providing this care," said Gebhart.

Carpenter Health Network Announces New Chief Operating Officer

The Carpenter Health Network, a Baton Rouge-based healthcare company, announced that Ronald "Ron" E. Hoga will join the company as chief operating officer.

As COO, Hoga will provide leadership and management to ensure operational efficiency, excellence, and financial strength across the company. He will also oversee development and execution of programs designed for the patients and families, providers, and communities served by The Carpenter Health Network.

"Ron will be an excellent addition to The

Carpenter Health Network," said Pat Mitchell, chief executive officer of The Carpenter Health Network. "His broad knowledge of healthcare business priorities will impact the boardroom. Ron's core compassion and moral compass will impact those whom we serve."

Hogan most recently served as chief administrative officer for the University of Louisiana-Monroe. In this role, he provided project leadership for ULM in its efforts to partner with an established college of osteopathic medicine. He also served on the ULM Executive Council and as executive leader for multiple departments.

Prior to working with the University of Louisiana-Monroe, Hogan served as regional chief financial officer for three years at Franciscan Missionaries of Our Lady Health System, Louisiana's largest Catholic healthcare organization. Hogan also worked as senior vice-president and chief financial officer for St. Francis Medical Center in Monroe, where he held additional executive finance and operations roles for 18 years.

Ron received his BBA degree in accounting from Delta State University and earned a Master of Business Administration degree from the University of Louisiana-Monroe.

Ron and his wife, Sabrina, reside in Monroe.

They enjoy family recreational time, water sports, and basketball. They have six children, three grandchildren, and are expecting a fourth grandchild.

LAMMICO CEO Thomas H. Grimstad, MD Announces Retirement

After more than 20 years with LAMMICO, Thomas H. Grimstad, MD, has announced his retirement as LAMMICO president and CEO, effective March 1, 2019.

The board of directors has elected LAMMICO's current board chairman, J. Michael Conerly, MD, to succeed Dr. Grimstad as president and CEO.

Grimstad joined LAMMICO as a member of the Risk Management Committee in 1995, and was elected to the board of directors in 1998. He has also served on the Claims Committee, and was appointed senior vice president of the Underwriting Committee in 1999. He served in that capacity until October of 2005, when he became the senior vice president of LAMMICO's Underwriting Department. In January of 2008, Grimstad was named LAMMICO's president and CEO.

Conerly is a long-standing member of LAMMICO leadership, having served as a member of



J. Michael Conerly, MD (l) succeeds retiring Thomas H. Grimstad (r) as president and CEO of LAMMICO.

the Executive, Marketing, Underwriting & Joint Risk Assessment, Governance and Audit Committees over the last 20 years. He was elected to his current role as chairman of the board of directors in 2011.

Drs. Grimstad and Conerly will work closely together in the coming months, through an established transition plan, to ensure a smooth change in leadership. Upon his retirement, Grimstad will remain a member of the LAMMICO Board of Directors.

Baton Rouge Ordinance Bans Smoking in Bars, Casinos

As of June 1, smoking inside bars and casinos is prohibited in Baton Rouge.

Rather than smoking outside, the physicians and certified tobacco treatment specialists at Ochsner Baton Rouge encourage people to quit.

They realize that quitting is difficult, but offer a comprehensive program that is free to those who qualify.

"Most tobacco users know smoking is bad for them, but feel that their addiction is just too strong to overcome," says local Ochsner family medicine physician Rebecca Meiners, MD.

A treatment specialist will not lecture smokers about the health risks if they don't stop. Instead, they give smokers information about smoking, how nicotine affects the body and tips to beat the addiction.

Here are five tips to help you quit smoking:

- Understand that quitting cold turkey is usually only effective for a short period. The cold turkey approach typically doesn't help smokers stay quit, especially long-term smokers (15+ years), which carries a 98 percent failure rate after one year.
- Try smoking only half of each cigarette. This is a quick way to cut down nicotine dependence in preparation for quitting. Smokers should not save half a cigarette for later use. Re-lighting a used cigarette creates more chemicals that are harmful to the body.
- Determine your biggest smoking trigger, such as after dinner, and drink milk instead of smoking. This will make a cigarette taste bad if you try to smoke. There are several other foods that can help lead to disinterest in smoking.
- Check your blood pressure often. If the diastolic (bottom) number is over 90, and you are



Bruce D. Greenstein

a smoker, then this likely means that smoking is narrowing your arteries. Sometimes this fear of a heart attack or stroke is the motivator to quit.

- Use smoking cessation medications that are over-the-counter or prescribed by a physician, such as nicotine gum, lozenges, patches, inhalers, nasal spray, and Wellbutrin and Chantix, in combination with counseling from a tobacco treatment specialist. The combination of both counseling and medications is far more effective for long-term quitting success.

Bruce D. Greenstein Joins LHC Group as Chief Innovation & Technology Officer

LHC Group, Inc. (the Company or LHC Group) (NASDAQ: LHCG) announced that Bruce D. Greenstein, U.S. Health and Human Services (HHS) chief technology officer, has left Washington, D.C. and returned to Louisiana to lead innovation at LHC Group as chief innovation & technology officer in June of this year. Greenstein brings an extensive healthcare industry background in both government and the private sector. Greenstein was also a cabinet member in Louisiana, serving as secretary of the Department of Health and Hospitals.

"Bruce is internationally recognized as a respected leader and innovator in the healthcare industry—a combination which makes him a perfect addition to our management team today, as LHC Group continues leading the way in a growth industry," said Keith G. Myers, LHC Group's chairman and CEO. "He will lead our enhanced emphasis on innovation and technology to improve the efficiency and effectiveness of healthcare services. Bruce will also play a key role

in the development of value-based models for our core business and additional business lines, as well as new arrangements with our managed care partners."

Last month, LHC Group completed its merger with Almost Family, Inc., creating one of the largest in-home healthcare providers in the country, with an expanded geographic service territory of 37 states covering over 60 percent of the U.S. population aged 65 and over.

Ochsner: What to Expect When You're Expecting During Hurricane Season

With hurricane season upon us, pregnant women and families with small children need to take extra precautions to ensure that things go smoothly, whether evacuating or staying in place. This can be a scary thought, but making preparations now can spare a new mother from unnecessary worry during power outages and storm recovery later.

In order to help prevent any stress that may occur down the road, try some of these helpful tips in order to have an evacuation plan already in place, should a need arise.

Create a family communication action plan so everyone is clear about what needs to take place before and during evacuation.

It is also highly recommended to plan an alternate birth location in the event of road problems or evacuation, especially if it's close to the delivery date or if the pregnancy is considered high-risk. Communicate with your doctor's office to let them know where you will be, and discuss whether it is safe for you to leave prior to the storm.

As part of your evacuation checklist, include the following items:

- Copy of the prenatal care record and immunizations
- Two weeks of medications, including prenatal vitamins and prescriptions
- Phone numbers and locations for local obstetricians and midwives, in the event you cannot reach your regular provider during evacuation
- Your birth bag

Go to www.acog.org and find an OB/GYN in other areas of the state or country if you know where you are headed.

If seeking help at a shelter, immediately notify

them of your pregnancy and get information about the location of hospitals in the area.

Floodwaters after a storm may carry all forms of infectious agents and toxic chemicals, which can harm both mom and baby. If you are in a flood-prone area, it's probably a good idea to fall back on your plan and evacuate so you avoid being put in such a situation.

Know the signs of preterm labor and contact help as soon as possible if you experience any of the following:

- Contractions every 10 minutes or more
- Leaking vaginal fluid or bleeding
- Feeling that baby is pushing down
- Low, dull backache
- Abdominal cramps

Remember, hurricanes do not directly cause labor to happen. Labor is expected anytime between 37 and 42 weeks, and should be planned for accordingly. Stress is a major factor in preterm labor, but early preparation and planning will help reduce stress levels.

Feeding your baby

It's important to create a food hurricane kit for the entire family that can either be used at home or during a car ride to safer ground.

Make sure mom has enough high-protein snacks and clean drinking water to prevent dehydration.

For babies less than six months old, breast milk is the sole source of recommended nutrition. It's also always available and sterile. Therefore, try to remember to pack a battery operated quality pump or hand pump, clean storage bottles or bags, and a method of freezing or cold storage.

Pumped milk will last about eight days refrigerated; previously frozen milk will last about 24 hours in the fridge. Pack at least three full days and nights worth of pre-washed bottles, nipples, and formula.

New Report on Senior Health Shows Rural Health Disparities Persist, Suicide Rates Are Up

A new report benchmarking the health of seniors in America finds poorer health outcomes for rural senior citizens, compared with their urban and suburban peers, and increased national suicide rates. An analysis within the report also highlights the risk of social isolation and its association with poor health for seniors.

The 2018 United Health Foundation's America's Health Rankings® Senior Report provides the latest check-up on the health and well-being of the nation's seniors. Using 34 measures of senior health, the report highlights successes and challenges this population faces on a national and state-by-state basis.

Key findings across states show that rural seniors are:

- More likely to be physically inactive (34.3 percent compared to 30.4 percent in suburban, and 30.1 percent in urban areas).
- More likely to report a fall (32.4 percent compared to 28.5 percent in suburban areas, and 29.5 percent in urban areas).
- Seven percent less likely to report receiving a flu vaccination than urban seniors (57.2 percent vs. 61.4 percent, respectively).
- Less likely to receive health screenings compared with both suburban and urban seniors (66.4 percent vs. 74.3 percent and 75.3 percent, respectively).

Additional key findings of the report, which benchmarks the overall health of seniors in Louisiana, include:

- The suicide rate among Louisiana seniors decreased 1.1 percent from 18.5 to 18.3 deaths per 100,000 adults aged 65+ since the 2017 edition of the Senior Report.
- Food insecurity among Louisiana seniors decreased 1.3 percent in the past year from 23.7 percent to 23.4 percent.
- The number of home healthcare workers in Louisiana decreased 3.4 percent from 159.7 to 154.3 since 2013 (per 1,000 adults age 75 and older).
- Nursing home quality* increased 17 percent since 2017 from 27 percent to 31.6 percent (*percentage of beds rated four- or five-stars)

Another key finding of the report is that the national suicide rate among seniors has increased 12 percent since the 2014 edition of the Senior Report. Wyoming, New Mexico, and Utah have seen the largest increases. There is variability among states, with the rate 3.9 times higher in Nevada than in Massachusetts (32.3 deaths per 100,000 vs. 8.3 deaths per 100,000).

The report also features a new analysis that measures and identifies locations where seniors are most at risk for social isolation. It builds on the AARP Foundation's Isolation Framework Project and supporting literature. Social isolation risk

among seniors is highest in Mississippi and Louisiana, and is lowest in Utah and New Hampshire. Contributing factors include divorce, separation, widowhood, never having married, poverty, disability, difficulty living independently, and living alone.

Each year, America's Health Rankings determines the healthiest states for seniors:

- Utah (No. 1), followed by Hawaii (No. 2), New Hampshire (No. 3), Minnesota (No. 4), and Colorado (No. 5). All these states ranked in the top five in 2017.
- Louisiana has the most challenges at No. 50, followed by Mississippi (No. 49), Kentucky (No. 48), Arkansas (No. 47), and Oklahoma (No. 46). "It is our goal with this report to help seniors, family caregivers, and advocates better understand the specific health concerns in their own communities so we can all work together to address them," said Rhonda Randall, DO, senior adviser to the United Health Foundation and chief medical officer and executive vice president, UnitedHealthcare Retiree Solutions. "By examining the differences in health between seniors living in rural areas and those living in urban and suburban areas, for example, we believe we can empower communities to help seniors access the resources and services they need to live happier, healthier lives."

Open Health Care Clinic CEO Wins Louisiana Public Health Association Founders Award

Tim Young, CEO of Open Health Care Clinic and HIV/AIDS Alliance Region Two, Inc. (HAART), received the esteemed Louisiana Public Health Association's Founders Award at their annual conference held in New Orleans. The award recognizes significant achievement in research or outstanding pioneering performance in public health by any resident of Louisiana.

Young has been the executive director of HAART for more than 20 years, and has accomplished major achievements for people living with HIV (PLWH). In 1996, Young began working at HAART as executive director and the only employee. Since then, the agency has grown from an annual budget of \$50,000 to serving as the second largest HIV service organization in Louisiana. Under his tenure, Young has established grant-funded programs to meet more needs of



Tim Young



Justin Crochet



John Dunbar

the HIV population, particularly in the areas of HUD-funded housing and insurance services.

Faced with a shortage of HIV providers in Baton Rouge, HAART opened a primary care clinic in 2007 to provide affordable, quality medical services alongside inclusive HIV management and treatment. "Through his leadership and the organization's mission, he secured additional funding to expand HIV supportive and medical care services within community-based organizations. His efforts ultimately led to increased services and greater access," said Jamie Roques, a member of LPHA.

In 2015, Young successfully converted HAART and its partner clinic to a Federally Qualified Health Center funded by the Health Resources & Services Administration (HRSA). Rebranded Open Health Care Clinic, the FQHC moved into a 22,000 square-foot facility to accommodate more than 5,000 patients seeking healthcare services for adults and children in primary care, dentistry, and behavioral health. Today, the organization generates more than \$27 million dollars in revenue annually and has nearly 100 employees.

Young is a graduate of University of Louisiana at Lafayette and the Johnson & Johnson-sponsored Health Care Executives program at the UCLA School of Management. He is on the board of directors of the Louisiana Primary Care Association and the Capital Area Alliance for the Homeless.

Justin Crochet Honored as Acadian Ambulance Capital Region Paramedic of the Year

Morgan City native Justin Crochet was selected as Acadian Ambulance Capital District regional

Paramedic of the Year, and was a finalist for the overall Louisiana/Mississippi honor. The region spans West and East Baton Rouge, Pointe Coupee, Iberville, East Feliciana, Ascension, and Livingston parishes. Crochet has been with Acadian for six years. He is a graduate of Morgan City High School.

Crochet began his career at Acadian as an EMT in Thibodaux before earning his paramedic and Critical Care Paramedic certifications through National EMS Academy.

Crochet works out of Port Allen as a Critical Care Paramedic, is a preceptor to new hires, and serves as an Advanced Cardiac Life Support (ACLS) instructor.

Operations Manager Justin Cox said, "I have witnessed firsthand his caring and professional demeanor when treating patients and interacting with the public."

Operations Supervisor Justin Alleman added, "Justin works many additional hours without complaint. He speaks up for his patients and will do everything he can to make sure they get what they need. Justin has a smile on his face and looks at the positive side of things every day."

John Dunbar Honored as Acadian Ambulance Capital Region EMT of the Year

Youngsville native John Dunbar was selected as the Acadian Ambulance Capital District regional EMT of the Year, and was a finalist for the overall Louisiana/Mississippi honor. The region spans West and East Baton Rouge, Pointe Coupee, Iberville, East Feliciana, Ascension, and Livingston parishes. Dunbar is a graduate of Lafayette High School and Louisiana State University, earning a

bachelor's degree in kinesiology. He earned his EMT certification from the LSU Fire & Emergency Training Institute before joining Acadian.

Dunbar works in Livingston Parish, and is currently enrolled in the National EMS Academy paramedic program. He aspires to become a physician's assistant.

Paramedic Field Supervisor Drew King said, "John is a shining example of what I want new employees to strive for. His compassion for his patients and his fellow medics is extraordinary. John's calming nature is a necessity in a field of chaos, and in addition, he is an excellent clinician."

LSU Pennington Biomedical Research Center Study Shows Tiny Area of Brain Helps Regulate Weight

A new study from LSU's Pennington Biomedical Research Center shows that the brain's preoptic area helps mice regulate their body weight, and that temperature-sensing nerve cells in that part of the brain could be used to curb weight gain.

The preoptic area (POA) is a small site critical to maintaining body temperature in warm-blooded animals, including humans, via temperature-sensing neurons. These nerve cells express the receptor for the hormone leptin, well-known for its effect on regulating body temperature and weight.

The team of Dr. Heike Muenzberg-Gruening, a professor in Pennington Biomedical's Leptin Signaling in the Brain Laboratory, showed that apart from maintaining core body temperature, the preoptic area also contributes to body weight regulation.

"This fact has been largely overlooked in the past," said Muenzberg-Gruening.

The study, "Preoptic leptin signaling modulates energy balance independent of body temperature regulation," was published in the May 15 edition of the journal *eLife*. Dr. Sangho Yu, an assistant professor in the neurobiology of energy balance, is the lead author of the study.

POA leptin neurons regulated energy homeostasis via leptin-dependent and -independent pathways, and represent a novel target to curb body weight. Stimulating POA leptin neurons suppresses both food intake and energy expenditure.



Dr. Heike Muenzberg-Gruening

The next step for the Muenzberg Lab is to understand whether or not temperature and leptin-dependent body weight changes act independently of each other and can be targeted separately in metabolic diseases like obesity, said Muenzberg-Gruening.

"For me, one important direction would be figuring out the POA_{Lepr} neural circuit that mediates food intake suppression," said Yu. "Then we might be able to selectively stimulate this circuit without affecting the circuit that decreases energy expenditure to curb weight gain."

This study was supported by the National Institutes of Health under grants P30DK072476, P20GM103528, R01DK092587, DK101379, 1HL122829, DK099598, DK105032, DK047348, 1DK117281; the American Heart Association, AHA053298N and AHA17GRNT32960003; the American Diabetes Association Foundation, ADA1-17-PDF-138; and the U.S. Department of Agriculture, USDA/CRIS3092-5-001-059.

Coalition, EBR Metro Council Members Celebrate Healthier Air for All in East Baton Rouge

The implementation of a comprehensive smoke-free air ordinance to protect all employees in the East Baton Rouge workforce has come to fruition. The ordinance, co-authored by seven Metro Council members, was passed on August 8, 2017 and was recently placed into implementation.

Those who were left behind in the 2007 Smoke-Free Louisiana policy, including bartenders and bar employees, gaming facility employees, entertainers, and vendors, will now be guaranteed the right to breathe clean air. The ordinance declares

that all workplaces, including bars and gaming establishments, be completely smoke-free as of June 1, 2018.

"Today is a step forward and a change for the health outcomes in Louisiana due to the harmful realities of secondhand smoke," said Raegan Carter, spokesperson for the Smoke-Free EBR coalition and Region 2 Manager for the Louisiana Campaign for Tobacco-Free Living (TFL), during a celebration of the ordinance implementation. "We are grateful to the Metro Council for listening to the voices of their constituents and protecting those who struggle between having to choose between their health and a paycheck."

Smoking kills more than 7,200 Louisianans and costs Louisiana taxpayers \$1.89 billion in health-care expenses every year. The evidence on secondhand smoke's toll on public health is clear—secondhand smoke contains more than 7,000 chemicals. Hundreds of them are toxic and at least 70 cause cancer. In addition, the Surgeon General has found that secondhand smoke causes heart disease and lung cancer in non-smoking adults, as well as causing respiratory problems, sudden infant death syndrome, and low birth weight in infants and children.

"We are tremendously grateful to the leadership of East Baton Rouge Parish, who took action to protect the health of the community," says Ashley Hebert, government relations director for the American Heart Association in Louisiana. "We are optimistic that we will one day soon see a policy that protects the workforce in the entire state of Louisiana."

East Baton Rouge Parish follows other cities in Louisiana who have closed the gap in the 2007 Louisiana Smoke-Free Air Act. Those cities include Alexandria, Woodworth, Monroe, Cheneyville, New Orleans, Lafayette, and Hammond.

The Smoke-free EBR Coalition comprises the American Cancer Society Cancer Action Network, the American Lung Association, the American Heart Association, the Louisiana Campaign for Tobacco-Free Living, Americans for Nonsmokers' Rights, the Campaign for Tobacco Free Kids, the Louisiana Cultural Economy Foundation, and numerous other local and national organizations. For more information, visit SmokefreeEBR.org.

Baton Rouge Named Among Most Water Wise

The city of Baton Rouge was named one of five national winners in the 7th Annual Wyland National Mayor's Challenge for Water Conservation by pledging to reduce their water use by 32.7 million gallons of water over the next year.

The annual month-long public awareness campaign to promote drought resiliency and water quality ended on April 30 with mayors from 35 states vying to see whose city could be the nation's most water wise. In addition to Baton Rouge, the cities with the highest percentage of residents making pledges during the campaign included Gallup, New Mexico; Westminster, California; Tucson, Arizona; and Las Vegas, Nevada. Overall, residents around the nation, from Anchorage to the Florida Keys, made 618,444 pledges to change behaviors ranging from fixing home leaks to reducing harmful runoff into local rivers and streams. The challenge, presented by the Wyland Foundation and Toyota, with support from the U.S. EPA, National League of Cities, The Toro Company, Earth Friendly Products, and Conserva Irrigation, addresses the growing importance of educating consumers about the many ways they use water.

"The challenge is a serious reminder to everyone about the importance of water to our cities and our country," said marine life artist Wyland, who founded the Wyland Foundation in 1993. "This year we encouraged people to think about their consumption practices and see if they could find new ways to reduce pollution runoff and limit waste."

Residents from winning cities will now be entered into a drawing for thousands of dollars in water-saving or eco-friendly prizes, including \$5,000 toward their annual home utility bill, Greening Your Home cleaning kits from Earth Friendly Products (ECOS), and home irrigation equipment from The Toro Company. A \$500 home improvement store shopping spree will also be chosen from among the entire pool of United States participants. Additionally, participating residents were asked to nominate a deserving charity in their community to receive a 2018 Toyota RAV4 Hybrid.

In addition to reducing water, challenge participants in 50 states pledged to reduce the use of 8 million single-use plastic water bottles and eliminate 177,000 pounds of hazardous waste from entering watersheds. By altering daily lifestyle



Former LSU Tigers, NFL Star Justin Vincent, and UnitedHealthcare Donate Sports Equipment to Cristo Rey Baton Rouge Franciscan High School

Former LSU Tiger and NFL running back Justin Vincent teamed up with UnitedHealthcare to donate new sports equipment to Cristo Rey Baton Rouge Franciscan High School. The donation replaces equipment damaged in recent floods.

The donation was made possible by a \$10,000 grant from UnitedHealthcare to Vincent's Dream-builders program. Vincent was at the school recently with UnitedHealthcare leaders and students to dedicate and demonstrate the new equipment.

Present for the donation were Vincent, Claire Willis, Cristo Rey Baton Rouge Franciscan High School principal, and Joe Ochipinti, UnitedHealthcare-Gulf States CEO.

choices, pledges also resulted in potentially 79.9 million fewer pounds in landfills. Potential savings of 22.2 million gallons of oil, 12.6 billion pounds of carbon dioxide, 191.9 million kilowatt hours of electricity, and \$38.4 million in consumer cost savings rounded out the final pledge results.

DEA Sponsors National Prescription Drug Take Back Day

National Prescription Drug Take Back Day is a nationwide effort, sponsored by the federal Drug Enforcement Agency (DEA), to rid homes of potentially dangerous expired, unused, or unwanted prescription drugs, which is then properly disposed of safely by law enforcement.

This year, members of the Baton Rouge Health District and all local law enforcement agencies (including the local DEA representative) held a free event at Baton Rouge Police headquarters centered on Drug Take Back Day.

Several healthcare companies handed out information and giveaways, and some offered free health screenings. Kids checked out police cars, an ambulance, and an Air Med helicopter.

Other locations across Louisiana were also

available for drop-offs. Additionally, Louisiana residents may visit bcbsla.com/safedrugdrop for a list of permanent drop-off boxes around the state.

In Louisiana, the drug overdose rate is higher than the national average. More than 600 residents die from opioid overdoses each year. There are more opioid prescriptions than state residents.

Do Vitamins Contribute to Good Health?

Vitamins are very prevalent in society today. Everyone has the best intentions for good health and wants to take care of themselves and look for ways to live longer, happier, healthier lives.

Ochsner board-certified family and integrative medicine physician Dr. Kate Freeman was asked about vitamins, and whether or not they really contribute to good health, or if they could hurt consumers.

"The basics of a healthy lifestyle include good nutrition, adequate sleep, plenty of exercise, and strong social connections," explained Freeman. "For far too many, vitamins are self-prescribed

to make up for the deficiencies associated with our lifestyle."

It's important to note that some marketing claims related to vitamins are not supported by good medical evidence. Senior citizens are often the target of marketing materials, and according to a 2013 Gallup poll, 68 percent of people over 65 are taking vitamin supplements. Many people take four or more supplements each day. "Taking supplements has the real potential for doing more harm than good," said Freeman. "Keep in mind that if it seems too good to be true, it probably is. There is no magic pill available that will make you Superman. The truth is that the best way to get the complete spectrum of vitamins and minerals we need is to eat a varied diet, full of plant-based foods like fresh or frozen fruits and vegetables."

It is tough to reproduce the effect that good food has on our bodies. Fruits and vegetables, especially brightly colored ones, contain chemicals called phytonutrients that work to keep our body functioning properly.

"Instead of a rainbow of supplements in your pill box, aim for a rainbow of colors on your plate.

Healthcare Briefs

Try to choose a diet full of colorful, fresh foods every day. How about strawberries with breakfast, leafy green spinach in a salad at lunch, roasted dark purple eggplant with dinner and an orange for dessert? Adding a rainbow of foods like this to your diet packs a powerful punch when it comes to vitamins and minerals," said Freeman.

Unfortunately, there are instances where vitamins can have the opposite effect of its desired outcome. Supplements of Vitamin E, once thought to protect the heart, were later shown to increase the risk of heart failure, prostate cancer, and death when taken in high doses. Too much supplemental calcium can cause kidney stones, and may even increase the risk of heart disease.

Consumers should have a conversation with their primary care doctor about supplements they are taking or are considering taking. There are certainly cases where a doctor will suggest or prescribe vitamins. Doctors regularly prescribe folic acid to women who are pregnant or who may become pregnant because it is proven to help prevent birth defects. Others who may need supplements are those with anemia, a history of weight loss surgery, or specific vitamin deficiencies.

Freeman added, "Our philosophy as physicians is to be cautious when it comes to recommending anything without good medical evidence to support it. As more research comes out, our advice on the topic may change. For now, you can't go wrong with improving the quality of foods you put into your body. Eat well, get moving, smile more, and remember, laughter is the best medicine, and the best vitamin too."

Louisiana First Lady Donna Edwards, United Health Foundation, Whole Kids Foundation Award 16 Garden Grants

Louisiana first lady, Donna Edwards, joined United Health Foundation and Whole Kids Foundation to award 16 grants, totaling \$40,000, to Louisiana schools and youth organizations.

Each grant recipient will receive a grant to build or expand existing vegetable gardens, salad bars, or beehives, and provide educational resources about agriculture, caring for the environment, and maintaining healthy lifestyles. The grants are being provided by a partnership between United



United Health Foundation/Whole Kids Foundation event at Grow Dat Youth Farm

Pictured L-R: Grant recipient Christy Kane, Encore Academy-New Orleans; Nona Evans, president & executive director of Whole Kids Foundation; Louisiana First Lady Donna Edwards; Devon Turner, executive director Grow Dat Youth Farm; Grant recipient Rene Merino Encore Academy-New Orleans; and Dr. Julie Morial, chief medical officer of UnitedHealthcare Community Plan of Louisiana.

Health Foundation and Whole Kids Foundation to address hunger and support nutrition education.

Grant recipients include:

- Rapides Exploratory Education House, Inc.—Alexandria
- Berchmans Academy of the Sacred Heart—Grand Coteau
- Shady Grove Elementary—Monroe
- Bayou Vista Elementary School—Morgan City
- Livingston Collegiate (part of Collegiate Academies network)—New Orleans
- Encore Academy—New Orleans
- Mary D. Coghill Charter School—New Orleans
- Fannie C. Williams Charter School—New Orleans
- Dolores T. Aaron Academy—New Orleans
- Audubon Nature Institute, Inc.—New Orleans
- Little Pearl Elementary School—Pearl River
- Ruston Elementary School—Ruston
- Saint Martin Parish Schools/St. Martinville

Primary School—St. Martinville

- Evangeline Parish School Board—Ville Platte
- Live Oak Middle School—Watson

"Nourishing minds and bodies is critical to helping children succeed in school," said Edwards. "Research shows that eating a healthy breakfast and lunch improves student attendance, discipline, and academic performance."

Edwards, UnitedHealthcare Community Plan of Louisiana Chief Medical Officer Dr. Julie Morial, Whole Kids Foundation President and Executive Director Nona Evans, Grow Dat Youth Farm Executive Director Devon Turner, and other education and health care leaders hosted a discussion about health challenges facing their communities at the Grow Dat Youth Farm in New Orleans, one of the grant recipients. Grow Dat Youth Leaders led guests on a Walk and Talk around the farm.

"Magic happens when a child plants a seed that grows into something natural and healthy to eat,"

Evans said. "These grants will help give many children the opportunity to grow their own nutritious food, and this experience will shape healthy eating choices for the rest of their lives."

Studies show school gardening, combined with a healthy lunch program or nutrition education, encourages healthier food choices. Children are also more likely to eat fruits and vegetables they have grown themselves.

According to America's Health Rankings, more than a third of Louisiana children age 10-17 are overweight or obese. This is higher than the national average of 31 percent.

"These schools and organizations are creating a positive environment where young people can make healthy choices that will sustain them for a lifetime," said Dr. Morial. "On behalf of United Health Foundation, we are grateful for the opportunity to be a part of this initiative to give students the tools they need to succeed and become healthy, productive adults."

Pennington Study Shows Intermittent Fasting Helps Control Blood Sugar, Blood Pressure

A pilot study conducted at LSU's Pennington Biomedical Research Center shows that eating all of your meals by mid-afternoon and fasting the rest of the day improves blood sugar control, blood pressure, and oxidative stress, even when people don't change what they eat.

"Ours is the first study in humans that shows consuming all of your calories in a six-hour period provides metabolic advantages compared to eating the exact same amount over 12 hours or more, even if you don't lose weight," said Dr. Eric Ravussin, associate executive director of Pennington Biomedical, director of the Nutrition Obesity Research Center, and one of the study's co-authors. "Our data also indicate that our feeding regimen has to be synchronized with the body's circadian rhythm and our biological clock."

Ravussin is a world-renowned expert in the conduct of translational research in obesity and type 2 diabetes. Over his more than 30-year career, he has conducted numerous clinical investigations on measures of energy expenditure, body composition, carbohydrate metabolism, and biomarkers of aging in health and disease states.

Dr. Courtney Peterson, an adjunct assistant professor at Pennington Biomedical and an assistant professor at the University of Alabama at Birmingham, was the primary investigator on the study. The study will be published in the journal *Cell Metabolism*.

The research is important because it shows for the first time in humans that the benefits of intermittent fasting are not solely due to eating less. Practicing intermittent fasting has intrinsic benefits regardless of what you eat. Also, the study shows that eating early in the day may be a particularly beneficial form of intermittent fasting.

Peterson hopes that the research will also raise awareness of the role of the body's internal biological clock, called the circadian system, in health.

"If you eat late at night, it's bad for your metabolism," Peterson said. "Our bodies are optimized to do certain things at certain times of the day, and eating in sync with our circadian rhythms seems to improve our health in multiple ways. For instance, our body's ability to keep our blood sugar under control is better in the morning than it is in the afternoon and the evening, so it makes sense to eat most of our food in the morning and early afternoon."

Previous studies showed intermittent fasting improves metabolism and health. However, researchers didn't know whether these effects are simply because people ate less and lost weight.

Peterson and her colleagues decided to conduct the first highly controlled study to determine whether the benefits of intermittent fasting are solely due to eating less. The study was also the first to test a form of intermittent fasting called early time-restricted feeding, or eTRF in humans. Early time-restricted feeding involves combining time-restricted feeding—a type of intermittent fasting where people eat in an eight-hour or shorter period each day—with eating early in the day to be in alignment with the body's circadian rhythms in metabolism. It is tantamount to eating dinner mid-afternoon and then fasting for the rest of the day. In the study, eight men with prediabetes tried following eTRF and eating at typical American meal times for five weeks each. On the eTRF schedule, the men each started breakfast between 6:30–8:30 a.m. each morning, finished eating six hours later, and then fasted for the rest of the day—about 18 hours. Everyone

finished dinner no later than 3 p.m. By contrast, on the typical American schedule, they ate their meals spread across a 12-hour period. The men ate the same foods on each schedule, and the researchers carefully monitored the men to make sure that they ate at the correct times, and only ate the food researchers gave them.

Researchers found that eTRF improved insulin sensitivity, which reflects how quickly cells can take up blood sugar, and it also improved the ability of their pancreas to respond to rising blood sugar levels. Researchers also found that eTRF dramatically lowered the men's blood pressure, as well as their oxidative stress and appetite levels in the evening.

These findings could lead to better ways to help prevent type 2 diabetes and hypertension. In light of these promising results, Peterson said more research is needed on intermittent fasting and meal timing to find out how they affect health, and to determine what approaches are feasible for most people.

This study was supported by U54GM104940 from the National Institute of General Medical Sciences, by KL2TR001419 from the National Center for Advancing Translational Sciences, and by a Pennington Biomedical Nutrition and Obesity Research Center Grant (P30DK072476), titled "Nutrition and Metabolic Health Through the Lifespan." Dr. Elaine F. Sutton, co-author, was supported by F31HD084199 from the National Institute of Child Health and Human Development.

"State of the Air" Report Shows Improvement for Louisiana

The American Lung Association's 2018 "State of the Air" report found Louisiana has earned improved grades for the nation's most widespread air pollutants. Compared to the 2017 report, Louisiana has seen a slight cut in ozone pollution. This is in spite of a trend seen across the nation of higher ozone pollution levels. Monroe, Ruston, and Bastrop experienced zero unhealthy days of high ozone and rank on the cleanest cities list for ozone pollution. Alexandria, Houma, Thibodaux, Lafayette, Opelousas, Morgan City, Lake Charles, Jennings, Monroe, Ruston, Bastrop, New Orleans, Metairie, Hammond, Shreveport, and Bossier City were named among the cleanest cities for short-term particle pollution, and experienced zero unhealthy air days.

Baton Rouge saw increased levels of year-round particle pollution, and tied 58th for most polluted city in the nation for year-round particle pollution. Year-round particle pollution in New Orleans was slightly worse, but still met the national standard and was tied 66th most polluted city for year-round particle pollution.

"The 2018 'State of the Air' report finds that unhealthful levels of year-round pollution in Louisiana puts our citizens at risk for premature death and other serious health effects such as asthma attacks and greater difficulty breathing for those living with a lung disease like COPD. Such high levels of year-round particle pollution mean our citizens also face an increased risk for lung cancer," said Ashley Lyerly, regional director of public policy of the American Lung Association. "Across the nation, the report found continued improvement in air quality, but still, more than four in 10 Americans—133.9 million—live in counties that have unhealthful levels of either ozone or particle pollution, where their health is at risk."

The trends reported in this year's report, which covers data collected by states, cities, counties, tribes, and federal agencies in 2014–2016, reflect the ongoing challenges to reduce each pollutant in the changing political and outdoor climate.

"We can and should do more to save lives," Lyerly said. "The Lung Association in Louisiana calls on our members of Congress to defend the Clean Air Act, currently under threat from those who want to weaken this effective public health law. We also call on the U.S. Environmental Protection Agency to implement and enforce the law instead of trying to roll back major safeguards like the Clean Power Plan and cleaner cars, both steps that help us fight climate change and reduce air pollution."

Each year the "State of the Air" provides a report card on the two most widespread outdoor air pollutants: ozone pollution, also known as smog, and particle pollution, also called soot. The report analyzes particle pollution in two ways: through average annual particle pollution levels and short-term spikes in particle pollution. Both ozone and particle pollution are dangerous to public health and can increase the risk of premature death and other serious health effects such as lung cancer, asthma attacks, cardiovascular damage, and developmental and reproductive harm.

Ozone Pollution in Louisiana

Compared to the 2017 report, Louisiana experienced fewer unhealthy days of high ozone in this year's report. Monroe, Ruston, and Bastrop experienced zero unhealthy days of high ozone, and rank on the cleanest cities list for ozone pollution.

"Ozone especially harms children, older adults, and those with asthma and other lung diseases," said Lyerly. "When older adults or children with asthma breathe ozone-polluted air, too often they end up in the doctor's office, the hospital, or the emergency room. Ozone can even shorten life itself."

This report documents how warmer temperatures brought on by climate change make ozone more likely to form and harder to clean up. This year's report showed that ozone levels increased in most cities nationwide, in large part due to warmer temperatures in 2016, the second hottest year on record in the U.S. Over the past decade, ozone pollution has decreased nationwide because the nation has cleaned up major sources of the emissions that create ozone, especially coal-fired power plants and vehicles.

Particle Pollution in Louisiana

The 2018 report also found year-round particle pollution levels slightly higher than the 2017 report. Nationwide, the best progress in this year's report came in reducing year-round levels of particle pollution.

"Particle pollution is made of soot or tiny particles that come from coal-fired power plants, diesel emissions, wildfires, and wood-burning devices. These particles are so small that they can lodge deep in the lungs and trigger asthma attacks, heart attacks and strokes, and can even be lethal," said Lyerly. "Year-round particle pollution levels have dropped thanks to the cleanup of coal-fired power plants and the retirement of old, dirty diesel engines."

"State of the Air" 2018 also tracked short-term spikes in particle pollution, as these can be extremely dangerous and even lethal. The report found that Louisiana has fewer days when short-term particle pollution has reached unhealthy levels in 2014–2016. This continues a trend toward fewer short-term spikes in particle pollution in Louisiana

While the report examined data from 2014–2016, this 19th annual report provides online information on air pollution trends back to the

first report covering 1996–1998. Learn more about city rankings, as well as air quality across Louisiana and the nation, in the 2018 "State of the Air" report at Lung.org/sota.

SmileDirectClub Opens on S. Sherwood Forest Blvd.

SmileDirectClub opened their Baton Rouge brick-and-mortar SmileShop location at 2834 S. Sherwood Forest Blvd. SmileDirectClub has a digital network of more than 200 affiliated licensed dentists and orthodontists overseeing customer treatment plans, from impressions made with at-home kits or from a digital scan at one of 70 SmileShops across the United States.

DEQ 2018 Disaster Parish Resource Book Available Online

The Louisiana Department of Environmental Quality has added the updated 2018 Natural and Catastrophic Disaster Parish Resource Book to their website. The book contains information pertaining to disaster/emergency recovery assistance as it relates to permitting, debris collection, and environmental cleanup resources.

The LDEQ compiles the book for the parishes, and the book is available to parish emergency response officials and the public online at <http://deq.louisiana.gov/page/parish-resource-book>. The book is updated regularly, and can be downloaded and printed to have on hand in an emergency.

The manual contains vital information such as:

- Emergency contact information
- DEQ Regional office information
- Re-entry information
- Emergency debris site requests
- Lists of pre-approved debris sites and locations
- A comprehensive plan for disaster cleanup and debris management
- Air permitting application information and instructions
- Examples of an emergency general permit, short-term general permit, and short-term emergency discharge permits
- All publicly owned treatment works for the parishes

Parishes and the public are encouraged to download and print this information prior to an emergency, and to regularly check the website for updates.

Clinicians Participating in Child-Parent Psychotherapy Learning Collaborative

Thirty-five licensed mental health professionals (LMHPs) across the state have been awarded an invitation to participate in the 2018–2019 Child-Parent Psychotherapy (CPP) Learning Collaborative. CPP is a trauma-informed, evidence-based, and relationship-based therapeutic treatment for children ages birth–6 who have early trauma history and/or are experiencing emotional, behavioral, attachment, and/or mental health problems. Upon completion of the training, these clinicians will be eligible for inclusion on the national roster of trained CPP providers and will receive 19.5 continuing education credits (CEUs) from the National Association of Social Workers-Louisiana.

“There is a shortage of clinicians trained to provide CPP services in Louisiana, and we appreciate these providers for their commitment to closing that gap. This training represents a prestigious opportunity for these clinicians to advance professionally, and we look forward to partnering with them to bring evidence-based CPP services to the children of our state,” said Richard Dalton, MD, behavioral health medical director for Louisiana Healthcare Connections.

LMHPs who have been accepted into the program include:

- From Baton Rouge—Shawn Joseph, Peak Behavioral Health; Yolanda Lowery, Adolescent and Family Counseling Services; and Britany Santora, Red Stick Pediatrics.
- From Chalmette—Rebecca Callaway, Adam D’Arensbourg, Michelle Hebert, and Charles Strong, The Guidance Center.
- From DeRidder—Sarakay Reid, Beauregard Behavioral Health Clinic.
- From Gretna—Kimberly Andres, The First Step Youth and Family Services; Elaine Lane, Elaine J. Lane, LPC; and Yelitza Gray, Family Affairs Counseling Agency.
- From Houma—Anastasia Arceneaux, South Central Louisiana Human Service Authority.
- From Metairie—Shonell Dillon, Dillon Counseling Services.
- From Monroe—Carolyn Bruce, River City Professional Counseling Services; and Alisa Turner, Transitions Counseling & Development Center.
- From Morgan City—Jamie Huffman and Brandie Levy, St. Mary Behavioral Health Center.
- From New Orleans—Angela Breidenstine, Tulane Dept. of Child and Adolescent Psychology; Anice Butler, Community Care Solutions; Elizabeth LeCorgne, Children’s Bureau of New Orleans; Dionne Parker-George, Inspiring Hope; Natasha Pena, Enhanced Destiny Services; and Renee Woods, Community Therapeutic Services.
- From Plaquemine—Dymphna Landry, The Village Life Center.
- From Raceland—Emily Callais, Lafourche Behavioral Health Center; Leighanna Fulton, Wrap Around Services of Raceland; and Henry Mitchell, South Central Louisiana Human Services Authority.
- From Shreveport—Kristal Chambers, Assured Behavioral Concepts; Ashley Enders Clinger, Clinger Family Counseling Services; E. Mary Cone, Superior Counseling Services; Marzett Harris, Family Services Unlimited; Reneka Hayes, Metropolitan Circles; and Lisa Malham, Seedlinks Behavior Management. From Thibodaux, La.—Dawn Chadwick, Strategic Interventions; and Megan Jackson Warren, Magnolia Family Services, LLC.

LOPH: Measles Confirmed in Louisiana

The Louisiana Office of Public Health (LOPH) confirmed the first case of measles in the state this year in a visitor from Europe. The individual visited New Orleans for a public event while infectious (from April 5 through April 8). LOPH worked extensively with healthcare providers and the City of New Orleans to notify individuals who may have been exposed, and to make recommendations concerning vaccination and other measures for susceptible contacts.

Healthcare providers in the City of New Orleans should proactively identify and update the immunity status of their patients, and be vigilant for the possibility of additional cases of measles.

From January 1 to March 30, 2018, 34 people from 11 states (Arkansas, California, Illinois, Indiana, Kansas, Michigan, New York, Oklahoma, Pennsylvania, Tennessee, and Texas) were reported to have measles.

Healthcare providers in Louisiana, and especially New Orleans, should consider measles in patients who:

- present with febrile rash illness and clinically

compatible measles symptoms (cough, coryza (runny nose) or conjunctivitis)

- have recently traveled internationally or were exposed to someone who recently traveled
 - have not been vaccinated against measles
- Healthcare providers should also consider measles when evaluating patients for other febrile rash illnesses, including dengue and Kawasaki disease.

If you suspect measles, do the following immediately:

1. Promptly isolate patients to minimize disease transmission (See management of patients below).
2. Immediately report a suspected measles case to the Louisiana Office of Public Health Infectious Disease Epidemiology Hotline at (800) 256-2748.
3. Obtain specimens for testing from patients with suspected measles. Get specimen collection advice by calling (800) 256-2748.

Management of patients with febrile rash illness:

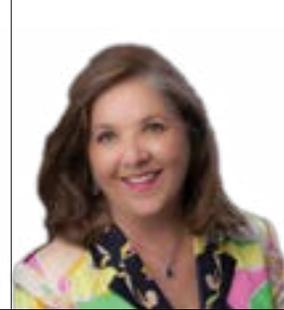
- Ideally, all patients with suspected measles should be placed immediately into a negative air pressure room. This greatly reduces the risk of the transmission of measles to others in the facility, and can minimize the post-exposure control measures required. The other steps listed below (e.g., masking patient, placing in a private room) may reduce the spread of measles, but usually do not eliminate the need for full post-exposure control measures.
- Only staff with evidence of immunity to measles should attend suspected measles patients.
- Ensure that you have vaccination records of all staff available to ensure those who are caring for the patient are vaccinated.
- Assess, screen, and mask all patients with febrile rash illness immediately on arrival.
- Escort masked patients to a separate waiting area or place them immediately in a private room, preferably at negative air pressure relative to other patient care areas. ■

The 2018 Regular Session of the Louisiana Legislature: **Implications for Professional Nursing Practice**

The 2018 Regular Session of the Louisiana Legislature adjourned early on May 18, 2018, in order to allow for a second special session to address Louisiana's budget shortfall. This session was fairly active, with the Louisiana State Board of Nursing (LSBN) tracking twenty-nine bills, thirteen of which were classified as medium or high priority for LSBN.

THE MOST IMPORTANT ACCOMPLISHMENT of this legislative session for nursing was the passage of Senator Barrow Peacock's SB 202 regarding adoption of the Enhanced Nurse Licensure Compact. Senator Peacock worked with Colonel Neuman from Barksdale Air Force Base in Bossier City, LA, and his RN wife, Shellie Neuman, who provided expert testimony about how she had been able to work in multiple states, all under the umbrella of her Texas Nurse Compact license. SB 202 enacts Part V of Chapter 11 of Title 37 of the Louisiana Revised Statutes of 1950, to be comprised of R.S. 37:1018 through 1020, relative to the Nurse Licensure Compact; to provide for enactment of the model language required to participate in the compact; to provide for appointment of an administrator; to provide for enforcement and rulemaking authority; to provide for an effective date; and to provide for related matters.¹ Louisiana was the 31st state to pass the enhanced Nurse Licensure Compact. Nurses benefit from a multistate license for a variety of reasons. The foremost reason is that a nurse will not need individual licenses in each state where the nurse needs authority to practice. Obtaining individual licenses is a burdensome, costly, and time-consuming process to achieve portability and mobility. Nurses are required to be licensed in the state where the recipient of nursing practice is located at the time service is provided. Any nurse who needs to practice in multiple states benefits significantly from a multistate license. These nurses include military spouses, telehealth nurses, case managers, nurse executives, nurses living on borders, nurses engaged in remote patient monitoring, school nurses, travel nurses, call center nurses, online nursing faculty, home health nurses, nurses doing follow up care, and countless more. Governor Edwards signed the bill into law on May 31, 2018.

Karen C. Lyon, PhD APRN, NEA
Executive Director, Louisiana State Board of Nursing



“HB 579, by Representatives James and Cox, enacts legislation allowing for recommendation of marijuana for therapeutic use, and adoption of rules and regulations relating to the dispensing of recommended marijuana for therapeutic use.”



Another bill that had special meaning for the nursing board was Senate Bill 40, by Senator Mills. This bill transferred LSBN and twenty-three other health profession licensing agencies, and forty-one health-related agencies, commissions, and departments to the Louisiana Department of Health. The agencies will continue to be comprised and selected as provided by law, and each shall continue to exercise all of the powers, duties, functions, and responsibilities provided or authorized for each by the constitution or laws, which are in the nature of policymaking, rulemaking, licensing, regulation, enforcement, or adjudication.² The bill added at least one consumer member to each health licensing board. LSBN was not affected by these additions, as two consumer members had been added to the Board through revision of LRS 911 et seq. in 2016.

HB 372, by Representative Connick, created the Occupational Board Compliance Act. This act establishes the Occupational Licensing Review Commission to provide active supervision of occupational licensing boards, review rules and regulations of those boards, and otherwise ensure that

licensing boards avoid liability under federal antitrust laws. The Commission is also charged with reviewing rules, regulations, and processes of licensing boards in promoting the least restrictive regulation necessary to protect consumers from present or potential harm that threatens public health, welfare, or safety. Beginning January 1, 2019, the commission is responsible for the active supervision of state executive branch occupational licensing boards controlled by active market participants, to ensure compliance with state policy in the adoption of occupational regulations promulgated by an occupational licensing board. The required active supervision does not extend to individual disciplinary actions taken or imposed by an occupational licensing board against any active market participant subject to the jurisdiction of the occupational licensing board. The Commission will also have the responsibility for reviewing all occupational rules and regulations promulgated by these agencies, and either approving or disapproving them with recommendations for compliance with the Administrative Procedure Act.³

HB 748, by Representative Emerson, is related to HB 372 discussed above, and establishes the Occupational Licensing Review Act (substitute for HB 562). This allows the governor of Louisiana to request and receive information from all occupational licensing agencies related to rules, regulations, procedures, examination standards and criteria, qualifications for admission to the occupation or profession, fees and fines, disciplinary actions, and any other information that may be of legitimate interest to the executive branch. Finally, the governor shall review annually, not less than twenty percent of the agencies engaged in regulatory and licensing activities, such that within five years, all such agencies will have been reviewed, and information will be available to the public.⁴

HB 579, by Representatives James and Cox, enacts legislation allowing for recommendation of marijuana for therapeutic use, and adoption of rules and regulations relating to the dispensing of recommended marijuana for therapeutic use. Any physician licensed in good standing with the Louisiana State Board of Medical Ex-

aminers (LSBME), and domiciled in Louisiana, may recommend marijuana for therapeutic use in any form permitted by the Louisiana Board of Pharmacy, except for inhalation, raw or crude marijuana, tetrahydrocannabinols or any chemical derivatives thereof, for patients clinically diagnosed with a debilitating medical condition. For purposes of this bill, debilitating medical condition means cancer, glaucoma, Parkinson's disease, positive status for human immunodeficiency virus, acquired immune deficiency syndrome, cachexia or wasting syndrome, seizure disorders, epilepsy, spasticity, severe muscle spasms, intractable pain, Crohn's disease, muscular dystrophy, [or] multiple sclerosis, or post-traumatic stress disorder.⁵

HB 755, by Representative Dustin Miller, APRN, FNP, authorizes each public and nonpublic school governing authority to adopt a policy relative to the supply and administration of naloxone and other opioid antagonists. Elementary and secondary schools are already required to provide education relative to alcohol, tobacco, drug, and substance abuse prevention. Schools must now include in their teaching materials the dangers of mixing opioids and alcohol. The bill also grants the governing authority of each public and nonpublic elementary and secondary school the choice to adopt a policy that authorizes the school to maintain a supply of naloxone or other opioid antagonist, and authorizes a school nurse or other school employee to administer these drugs in the event of an actual or perceived opioid emergency.⁶

House Concurrent Resolution 55, by Representatives Hoffman, Bagley, Cox, Hensgens, Horton, Pope, Richard, and Stokes, urges both LSBME and LSBN to disseminate information concerning bone marrow donations to our licensees for the purpose of enhancing public awareness of the need for bone marrow transplants. The federal Be the Match program, authorized in 1987 by the United States Congress, has resulted in more than seventy-four thousand marrow and umbilical cord blood

transplants, but that is only a fraction of the people who can benefit from this program. Greater than seventy percent of patients who need a donor do not have a familial match, and rely on donor matches from the national registry. In order to increase the number of registrants on the national registry, this resolution calls on LSBME and LSBN to disseminate information on the need for bone marrow donations, the patient populations that would benefit from bone marrow donations, how to join the national registry, and how to acquire a free buccal swab kit from the national bone marrow registry.⁷

The final resolutions that have implications for LSBN include HCR 70 Military Veteran Healthcare License by Representatives Hodges, Bagley, Chaney, Cox, Hensgens, Hoffmann, Horton, Jackson, and Dustin Miller, and HR 140 Military Occupational or Professional Licenses by Representatives Gaines, Armes, Steve Carter, Cox, Crews, Cromer, Foil, Gisclair, Hazel, Howard, and Terry Landry. Both of these resolutions are directed at facilitating licensure for military members and family members involved in healthcare professions, and developing timely and cost effective pathways for military veterans with medical training to practice lawfully as licensed practical nurses, physician assistants, registered nurses, physical therapists, or other healthcare professionals. Health licensing boards, including LSBN, have been charged to develop and report on steps they are taking to provide credit for prior military training and certifications.⁸

The challenges represented by these legislative directives are just a sampling of what we do in our policy work on behalf of nurses in the state. Additional issues that we are working on include review and revision of LSBN rules published in Louisiana Administrative Code 46:XLVII.Subpart 2 Registered Nurses. For 2017 and 2018, rule changes that have been approved and published include removal of Chapter 40 and Section 3405 of Chapter 34 regarding self-reporting of HBV, HCV, and HIV expo-

sure; revision of Chapter 31, Section 3105 related to removal of two ex-officio physician members of the Board and replacing them with two consumer members with full voting privileges; revision of sections 3411 and 3415 of Chapter 34 requiring that, in cases of summary suspension of licenses, a board hearing to approve said suspension will be held at the next available board hearing, and that nurses whose licenses were previously revoked have the right to request a reinstatement hearing; revision of sections 4505 and 4513 of Chapter 45 changing the administrative management of collaborative practice agreements between APRNs and physicians; revision of section 3419 in Chapter 34 to update the terminology from "chemical dependency" to "substance use disorder – mild, moderate, severe"; and revision of section 3331 of Chapter 33 that revises the criteria for delay/denial of licensure by endorsement, reinstatement, or the right to practice as a student nurse. The rule changes promulgated over the last twelve months have included the advice and input of nursing experts throughout Louisiana. We value the exceptional expertise within our nursing community, and we will continue to reach out to our many partners within the state to work with us on improving nursing practice and patient care outcomes. ■

REFERENCES

- ¹Legiscon Louisiana. Senate Bill No. 202. Senators Peacock and Johns. 2018 Regular Session, as enrolled.
- ²Legiscon Louisiana. Senate Bill No. 40. Senator Mills. 2018 Regular Session, as enrolled.
- ³Legiscon Louisiana. House Bill No. 372. Representative Connick. 2018 Regular Session, as enrolled.
- ⁴Legiscon Louisiana. House Bill No. 748. Representative Emerson. 2018 Regular Session, as enrolled.
- ⁵Legiscon Louisiana. House Bill No. 579. Representatives James and Cox. 2018 Regular Session, as enrolled.
- ⁶Legiscon Louisiana. House Bill No. 755. Representative Miller. 2018 Regular Session, as enrolled.
- ⁷Legiscon Louisiana. House Concurrent Resolution No. 55. Representatives Hoffmann, Bagley, Cox, Hensgens, Horton, Pope, Richard, and Stokes. 2018 Regular Session, as enrolled.
- ⁸Legiscon Louisiana. House Concurrent Resolution No. 70. Representatives Hodges, Bagley, Chaney, Cox, Hensgens, Hoffmann, Horton, Jackson, and Dustin Miller. House Resolution No. 140. Representatives Gaines, Armes, Steve Carter, Cox, Crews, Cromer, Foil, Gisclair, Hazel, Howard, and Terry Landry. 2018 Regular Session, as enrolled.

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Taking Aim at **Cancer** in Louisiana



L-R: Kristy Duffey, UnitedHealth Group Chief Clinical Officer and board member of United Health Foundation; Governor John Bel Edwards, Dr. Rebekah Gee, Secretary of the Louisiana Department of Health. United Health Foundation has provided a \$500,000 grant to the Louisiana Cancer Research Center to develop a coordinated strategy to improve care, patient support, and outcomes for the people of Louisiana. The Louisiana Department of Health will provide leadership support throughout this initiative.

LOUISIANA now has a statewide collaborative effort to address cancer in our state. Recently, I was joined by Governor John Bel Edwards, Kristy Duffey, UnitedHealth Group Chief Clinical Officer and board member of United Health Foundation, and many leaders in health care, business, government, and others to announce a focused initiative called Taking Aim at Cancer in Louisiana.

Louisiana has the fourth-worst cancer outcomes in the United States, with more than 175 people dying from cancer every week. Data also shows significant racial disparities across populations and regions of the state.

The goals of Taking Aim at Cancer in Louisiana include improving early detection, improving patient care and treatment, and ultimately helping cancer patients of all races and regions beat the disease. Additionally, the initiative places emphasis on the committed action that is needed from partners throughout the state to better align policies, programs, and practices among all who treat and diagnose cancer.

From screening, to accessing care and treatment, there are strategic efforts taking shape with doctors, hospitals, clinics, insurers, and others from across the state to improve quality of care, reduce costs, and increase survivorship. This effort is led by the Louisiana Department of Health. It brings together our state's leading cancer experts.

This collaborative effort is important for patients, families, and our entire state, as it will work to reduce disparities in care across populations, and improve standards of care.

As part of the initial announcement in May, over 100 leaders from various sectors met to review comprehensive research on cancer in Louisiana, and to take a deeper look at treatment, disparities, and

Rebekah E. Gee, MD, MPH
Secretary, Louisiana DHH



Five Leading Cancer-Related Causes of Death in Louisiana							
Average Annual Cases & Incidence per 100,000 (Age-Adjusted)				Average Annual # Deaths & Mortality per 100,000 (Age-Adjusted)			
Cancer Type	Louisiana (2011-2015) ¹		U.S. (2010-2014) ²	Cancer Type	Louisiana (2011-2015) ¹		U.S. (2011-2015) ²
	Average Annual # Cases	Incidence Rate	Incidence Rate		Average Annual # Deaths	Mortality Rate	Mortality Rate
Lung	3,515	68.8	61.2	Lung	2,701	53.6	43.4
Breast (female)	3,340	124.1	123.5	Breast (female)	651	23.7	20.9
Prostate	3,387	137.4	114.8	Prostate	412	21.6	19.5
Colorectal	2,347	46.5	39.8	Colorectal	874	17.5	14.5
Pancreas	725	14.4	12.5	Pancreas	653	13.1	10.9
All Cancer	22,506	475.9	443.6	All Cancer	9,362	187.8	163.5

“Louisiana has the fourth-worst cancer outcomes in the United States, with more than 175 people dying from cancer every week.”

Source: Louisiana Comprehensive Cancer Control Plan 2017-2021; 1 - Louisiana Tumor Registry; 2 - NIH/CDC State Health Facts

outcomes for two cancers that will be addressed first: breast and colorectal cancer. Other types of cancer will be reviewed in the future.

United Health Foundation has provided

a \$500,000 grant to the Louisiana Cancer Research Center to develop a coordinated strategy to improve care, patient support, and outcomes for the people of Louisiana. The Louisiana Department of Health will

provide leadership support throughout this initiative.

For more information on Taking Aim at Cancer in Louisiana visit www.ldh.la.gov/cancer. ■



More than 100 leaders joined the first meeting for the initiative Taking Aim at Cancer in Louisiana. The group focused on breast and colorectal cancers, with plans to review other types of cancers in the future.

THE INTEGRATED CARE MODEL, which coordinates care among physical and mental health providers, has won the endorsement of nearly every healthcare professional organization, from the American Psychiatric Association (APA) to the American Medical Association (AMA). Given the tremendous research indicating improved outcomes, better access and reduced costs when patients receive integrated care, Louisiana Healthcare Connections implemented an innovative pilot in late 2017 to drive coordinated care in pediatric practices. Licensed clinical social workers (LCSWs) were placed within two quality-focused pediatric clinics—Red Stick Pediatrics in Baton Rouge, and The Pediatric Center of Southwest Louisiana in Lake Charles—to assist physicians in identifying and addressing barriers to care for children with behavioral health concerns. Now nearing the end of the program’s first year, the physicians and LCSWs are reporting that connecting patients to the resources and services they need at the point of care is helping to improve outcomes.

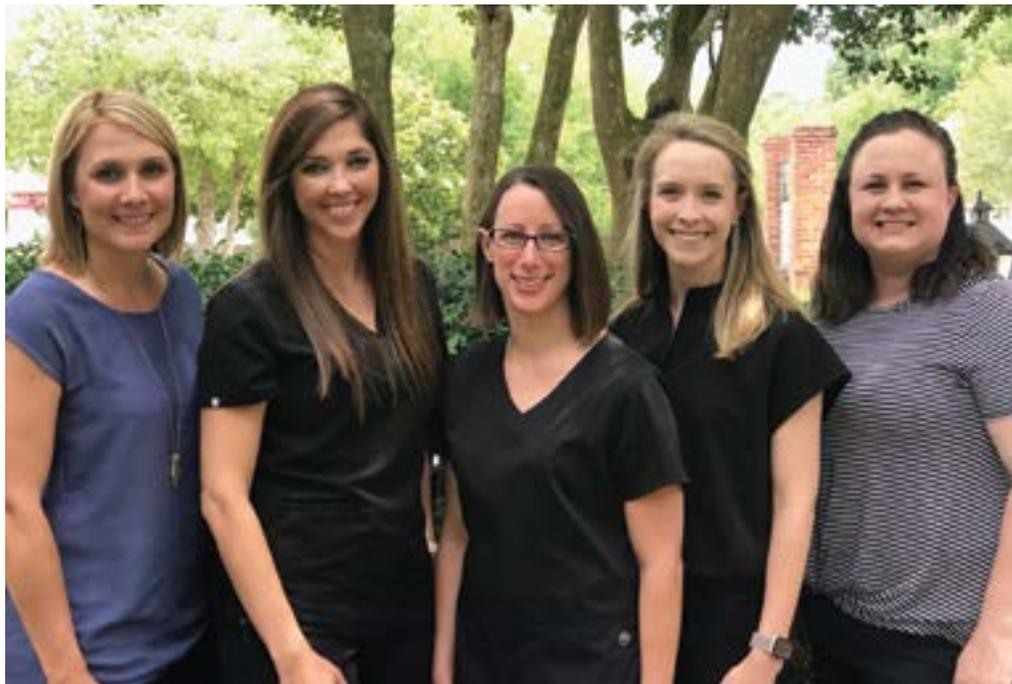
CONNECTING CARE: **Integrating Care in Pediatric Practices**

The Physicians’ Perspective

At Red Stick Pediatrics, physician partners Drs. Dawn Vick, George Schwartzenburg, Stephanie Kelleher, Laura Boudreaux, and Stephen Sanches recognized immediately the value of having an LCSW onsite to address patients’ needs.

“Having a social worker on site and readily available for consult with the medical providers was an opportunity to truly meet the patients and their needs where and when they needed them,” says Vick. “With the shortage of mental health resources available for our patient population, especially those that are available in a convenient and patient-friendly way, we saw the incorporation of a social worker as the most well rounded way to help address these needs.”

For Dr. Albert Richert with The Pediatric Center of Southwest Louisiana, the value of having an LCSW onsite was two-fold: first, the assistance of the social worker in making an accurate diagnosis, and second,



From left, Emily Grezafi, MD, FAAP; Rachael Simms, APRN, CPNP; Rachel Stephenson, APRN, CPNP; Leslie Irby, APRN, CPNP; and Brittney Santora, LCSW coordinate physical and behavioral health services for the patients at Red Stick Pediatrics in Baton Rouge as part of Louisiana Healthcare Connection’s innovative integrated care pilot program. The health plan is exploring opportunities to expand the model to other practices and specialties across the state.



Stewart T. Gordon, MD, FAAP
Chief Medical Officer, Medical Affairs
Louisiana Healthcare Connections



“There is a great need in our state for improved mental health for children. Primary care pediatricians should act as leaders in the process of making those improvements. We understand our patients’ needs better than anybody, and we are in the best position to provide services that meet those needs.”

– Albert Richert, Jr., MD

the availability of improved and more effective therapy.

“When I’m evaluating a child with emotional or behavioral problems, I can use standardized evaluation forms to look for things like ADHD or anxiety. But those forms don’t tell me much about the environment in which that child lives. I’ve always thought that having a social worker involved in the evaluation would provide much more information about the child and the issues that may be exacerbating their problems.”

Richert continues, “Second, when we do make a diagnosis like anxiety, a social worker can provide important treatment options. I’m not trained to offer much more than a prescription, but a social worker can spend time helping the child and parent understand the anxiety, and teach them ways to handle it.”

The Social Workers’ Perspective

Amanda Turner, MSW, LCSW, marked her first year at The Pediatric Center in May, and in that time, she’s been working to connect patients from ages three to 20 to the right resources while helping the pediatricians to rule out, or rule in, behavioral health diagnoses.

“For the most part, when a patient is re-

ferred to me, it’s because they have some sort of diagnosis or there’s a need to rule out a diagnosis, and then the need to rule it out causes certain behavior,” Turner explains. “My first approach as a social worker is to see if anything is causing the behavior before we give you a pill, because sometimes a pill doesn’t make you better.”

Brittney Santora, LCSW, has been at Red Stick Pediatrics for nearly a year. She echoes the importance of working with the pediatricians to identify symptoms that may have an underlying behavioral health condition. The pediatricians at Red Stick conduct assessments to identify issues that may be contributing to behavioral changes, and they require children who are prescribed medication for conditions like ADHD to meet with her at every medication follow-up, Santora says.

“The pediatricians do a wonderful job of explaining what I do and how I can help the child and the family,” she explains. “They trust the pediatricians, and they’re comfortable in this environment, so having me here in the same location helps them be more open to working with me to build skills and locate the right resources to help them.”

Often, according to Turner, resources to help families overcome socioeconomic

factors like language barriers or an absent parent can make a significant difference in the management of the behavioral issue.

“A lot of what I do is teaching families how to find and use resources like translation and transportation services, or support programs like Big Brothers and Big Sisters to bridge gaps for single-parent homes. It’s walking these families through the process and helping them to navigate the social services web of care. For many families, they simply don’t know those resources are available or how to find them,” says Turner.

Santora agrees, “I’ll often have a parent disclose things like domestic violence incidents in the home, or transportation issues. I provide them with information about community resources, or connect our more complex patients to the care management team at Louisiana Healthcare Connections. These resources have been very beneficial for our patients and their families in improving outcomes.”

The Early Results

Though clinical data regarding outcomes is still being generated, the early response from the participating practices and their patients has been overwhelmingly positive. For Red Stick Pediatrics, in



“In a patient population with so many challenges accessing care and achieving good health due to social and environmental obstacles, providing mental health resources that are convenient, easy to access, and well-coordinated with medical providers is probably the most critical thing we can offer these children and their families.”

– Dawn Vick, MD

addition to streamlining referral processes for staff, having an LCSW onsite has helped to address the needs of patients with mild to moderate diagnoses, in turn reducing the progression of those patients to more significant needs.

“The program has been very well received by both our patients and providers,” says Vick. “The ability to coordinate appointments has saved the families’ time and resources, and dramatically improved the ability to have patients get the dual therapy—medical and counseling—that is optimal for the most common mental health conditions, such as anxiety and ADHD.”

At The Pediatric Center, Richert says patient feedback has been positive, and preliminary results show a positive impact on outcomes for children with anxiety.

“Kids almost never come to the office complaining of anxiety. They come complaining of stomach aches or feeling bad, while their parents complain about mood swings or temper tantrums. When you can help kids and parents understand that anxiety is at the root of these problems, it suddenly changes the dynamic from a child who is misbehaving to a child struggling with a problem that we need to help them with. I have seen the education and therapy that our social worker provides have a significant positive impact on children and families with these issues.”

Turner notes, too, that she’s seeing improvements in compliance with care plans.

“It creates a one-stop-shop for the patient. They can schedule back-to-back appointments, so they only need transportation once, and they can schedule follow-up care before they leave. I can also directly contact their doctor, as opposed to having to call and wait for a call back, or wait for a fax, and I have timely access to their information.”

Adds Santora, “The families are feeling more empowered. They know there are things they can do apart from medication, which may have side effects or wear off. Now they have steps to follow and tools to use, and a place where they can get advice and support.”

Taking It Further

Based on the pilot’s success, Louisiana Healthcare Connections is exploring opportunities to bring the program to other practices and specialties across the state. Red Stick Pediatrics and The Pediatric Center of Southwest Louisiana have served as shining examples of the success of the integrated care model, with their physicians providing clear insight on how other providers can and should implement integrated services.

Says Vick, “In a patient population with so many challenges accessing care and achieving good health due to social and environmental obstacles, providing mental health resources that are convenient, easy to access, and well-coordinated with medical providers is probably the most

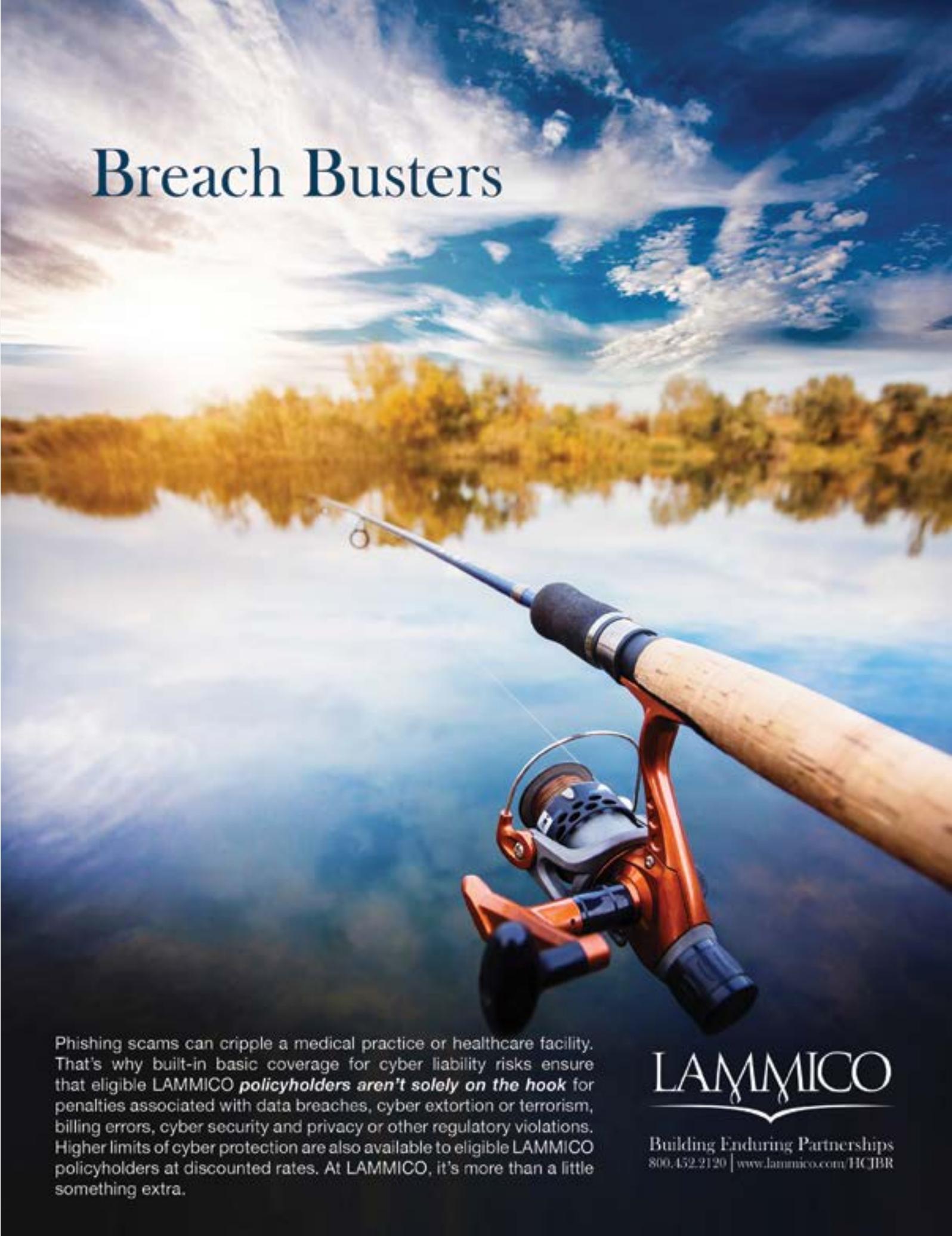
critical thing we can offer these children and their families.”

“There is a great need in our state for improved mental health for children. Primary care pediatricians should act as leaders in the process of making those improvements. We understand our patients’ needs better than anybody, and we are in the best position to provide services that meet those needs,” adds Richert. “We are grateful to Louisiana Healthcare Connections for allowing us to participate in this program.” ■

Stewart T. Gordon, MD, FAAP, is a general pediatrician who worked for 18 years as professor of clinical pediatrics and chief of pediatrics at LSU Health Sciences Center/Earl K. Long Medical Center. A graduate of Louisiana State University and LSU Medical School in New Orleans, Dr. Gordon completed his training in pediatrics at Charity Hospital and Children’s Hospital. His clinical practice predominantly involved providing medical services to underserved children and families. As Chief Medical Officer for Louisiana Healthcare Connections, he provides peer-based support for enhanced communication and collaboration with the LHCC provider network. Dr. Gordon’s areas of interest include advancing public policy for children’s health issues, especially focusing on investing in early childhood education. He is an active member of the Louisiana Chapter of the American Academy of Pediatrics, helping to shape health policy reform. Dr. Gordon serves on the boards of the Capital Area United Way and the Louisiana Partnership for Children & Families.

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Barbara W. Auten
Executive Director
Alzheimer's Services of the Capital Area

In an effort to reduce the use of antipsychotic drugs in nursing homes, the Center for Medicare and Medicaid Services (CMS) is using multiple efforts to achieve the goal of improving care and reducing costs. In 2012, Louisiana was 49th of 50 states in the ratings of antipsychotic drug use in nursing homes. Today Louisiana is ranked 40th of the 50 states because of the efforts made by many.

Training Offered to Identify Behavioral Triggers

THE CHARACTERISTICS of Alzheimer's disease and other memory-related dementias can often manifest in undesirable behaviors that can often be addressed with antipsychotic drugs. By implementing a person-centered care approach, undesirable behaviors can often be addressed by finding the root cause of the behavior. For example, an affected individual may be uncooperative in bathing early in the day because it was routine for them to bathe in the evening. Adapting to previous routines may easily solve this behavior problem.

As a partner with the Louisiana Department of Health's initiative, Partner to Improve Dementia Care, Alzheimer's Services provides a complimentary five-hour Dementia Care Training for nursing home staff, paid for by CMS (through Civil Money Penalties). This training meets the required annual training for nursing home staff mandated by the state legislature in Act 571. By offering the person-centered care model and alternate strategies for care, the trainings have reduced the average use of antipsychotic drugs by 14% in 70 nursing homes since 2016. This reduction in antipsychotic drug use translates into a cost savings

to Medicare and Medicaid—and ultimately the taxpayer—while improving the care provided.

The interactive training provides simple ways to implement person-centered care that empowers nursing home staff to look deeper into the root cause of behaviors, and reduce or avoid the use of antipsychotic drugs by providing redirection, alternate activities, and tweaking schedules. The training is complemented with the Recollection Collection Kit, a ready-to-use group and individualized kit with activities and program components that provide socialization and cognitive activities that are more meaningful or purposeful for residents to engage in. Some of the items included in the Recollection Collection Kit are a training DVD by acclaimed speaker and author, Teepa Snow, sample activities especially suited for Alzheimer's affected individuals, an octoband (group physical activity), Coach Broyle's Playbook, conversation cards, personal CD player, fidget apron, and manipulatives.

Following a recent training, one participant—a registered nurse, commented, "I have been in the long-term care industry for

over 25 years, and honestly, this is the best training I have ever taken. All we usually get for training is videos. Thank you for an enlightening and interactive presentation."

Another Nursing Home Activity Coordinator offered, "The kit helps residents with all their needs; it helps with memory, using their hands, speech, and mobility."

The free trainings for the 2018-2019 fiscal year offered across the state can be scheduled now for dates beginning on or after August 1, 2018. Trainings should include at least 10 staff members. Additionally, family caregivers are invited to participate, as they should be included in their loved one's care plan. To schedule a training, please contact Molly Phillips at Alzheimer's Services of the Capital Area at 225-334-7494.

Raising awareness of Alzheimer's disease is just one aspect of the mission of the organization, and we do it in a big way through the ANNUAL WALK/RUN TO REMEMBER scheduled for October 6, 2018, at the LSU campus' Old Front Nine. This year is the 25th anniversary of the event, with Honorary Chair Roger Cador, retired Southern University Baseball Coach, who will also share a little of the spotlight in remembrance of Buckskin Bill, the first Honorary Chair, who passed away this past year. Teams from across the region participate to increase awareness and raise funds. To register or form a team, go to www.alzbr.org and select the Walk/Run to Remember in the top menu bar. The main event is the 5K Walk/Run, which includes an official timed run administered by Club South Runners, and a walk through the LSU campus. Additionally, there is a Memory Market Exhibit area, complimentary food and drinks, a Children's Village, and music by Storywood Band. If you are interested in being a sponsor or exhibitor, please contact Londyn Pope May at 225-334-7494.

One in 10 individuals over age 65 develops Alzheimer's disease; Alzheimer's Services is here to serve all of them and their caregivers. ■

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Woman's Hospital Reminds Summer Drivers to Remember Their Tiny Passengers

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Woman's Hospital Provides Free Backseat Reminder Hangtags

It happens every year, but no parent thinks it will happen to them. Hot-car deaths are occurring as temperatures rise, and in an effort to prevent tragedy, Woman's Hospital is again offering free reminder hangtags.

According to Kids and Cars, a child advocacy group, a major contributing factor to hot-car deaths is a change in routine, such as a parent temporarily being responsible for daycare drop-off instead of going straight to work. Tragedy occurs quickly, as it only takes minutes for a child's core body temperature to reach 105 degrees and begin to shut down. Kids and Cars encourages parents and caregivers to get in the habit of checking the backseat every time they arrive at a destination.

Though the hangtags are not intended to replace alertness, they serve as an extra reminder to check for the child in the backseat. Parents are also encouraged to leave an always-used or necessary item in the backseat, such as a laptop bag, purse, or left shoe.

The hangtags are available at Woman's Hospital, 100 Woman's Way, Airline Highway and Pecue Lane; and Woman's Center for Wellness, 9637 Jefferson Highway (corner of Bluebonnet and Jefferson).

The tags can also be downloaded and printed by visiting <http://www.womans.org/our-services/mother-and-baby/newborn-care/car-seat-safety/look-back>.

Baton Rouge General Celebrates Patients and Their Families at Annual Luncheon

Baton Rouge General Foundation celebrated patients and their families at the annual Experience the Difference luncheon. The event, sponsored by Hancock Whitney and held at the Renaissance Hotel, raised money to support patients at Baton Rouge General.

New Roads resident Wendy Carnes spoke at the event, sharing her story about being treated at BRG's Regional Burn Center when 25 percent of her body was burned in a kitchen fire, just months after she signed a modeling contract.

"The doctors at my local hospital immediately knew that Baton Rouge General was the only place that could treat my burns," said Carnes.



Baton Rouge General Foundation celebrated patients and their families at the annual Experience the Difference luncheon held at the Renaissance Hotel. Kris Kirkpatrick, Annette Barton, BRG Foundation Board Chair Gwen Hamilton, Wendy Carnes, Kristy Furlow, BRG Foundation President Beth Veazey, and BRG President and CEO Edgardo Tenreiro were pictured, left to right, at the event.

"After six weeks of treatment and 16 inpatient and outpatient surgeries, I can say the care of the entire BRG burn team is truly exceptional. And I'm grateful for the doctors, nurses, and therapists, who in my darkest moment, ensured that I would have the most amazing life. Baton Rouge General will forever hold a special place in my heart."

"I'm fortunate to work with a team that not only delivers exceptional patient care, but also goes out of their way to change lives for the better," said Edgardo Tenreiro, president and CEO of BRG. "That's the type of spirit that defines Baton Rouge General."

Other former patients and their families offered their stories via video. When Kristy Furlow's husband Clay was diagnosed with an inoperable brain tumor in 2016, he was given three to four months to live.

"Because we went to BRG's Pennington Cancer Center for Clay's treatment, he came home every day and slept in his own bed. Our kids were able to go back to their daily lives, and we got 16 months together from the time he was diagnosed," recalled Kristy. "If you have to go through something like this, you want to be surrounded by

people who take care of the needs of your entire family, and also make you feel like family. That's what we found at Baton Rouge General."

Funds raised at the luncheon were matched by Baton Rouge Radiology Group, Hospital Housekeeping Systems, and Himmel's Architectural Doors & Hardware. The money will be used to support patients through technology, equipment, and other resources.

Baton Rouge General Receives Baby-Friendly Designation from UNICEF/WHO

Baton Rouge General (BRG) announced that it has received the prestigious Baby-Friendly designation from the Baby-Friendly Hospital Initiative, a global program sponsored by the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO). The designation was created to assist hospitals in providing support and education to new moms about the benefits of breastfeeding. Research shows that babies who are breastfed have fewer ear infections and are less likely to have asthma, obesity, or type 2 diabetes. As part of the Baby-Friendly initiative, all

healthy newborns at Baton Rouge General have skin-to-skin contact with their mothers immediately after birth. Bonding time is not interrupted for unnecessary medical procedures and babies are encouraged to stay with their parents throughout their stay in the Birth Center.

The CDC and WHO recommend that mothers exclusively breastfeed for the first six months of a child's life, but today, only one in four babies in the United States meet those recommendations. Out of more than 6,000 hospitals and birthing centers nationwide, just over 500 have received the Baby-Friendly designation. BRG is one of only 12 hospitals in Louisiana to earn the recognition.

Earning the designation is a multi-year process that requires years of planning and preparation, followed by an on-site survey that ensures the hospital is practicing the Ten Steps to Successful Breastfeeding. "By helping our new moms nourish, nurture, and bond with their new little ones, they will have the confidence and skills they need to successfully start and continue breastfeeding their babies," said Chief Nursing Officer Monica Nijoka. "This designation demonstrates our focus on offering moms everything they need to give their babies the best possible start in life."

For more information about the U.S. Baby-Friendly Hospital Initiative, visit www.babyfriendlyusa.org. For details about BRG's Birth Center, visit www.brgeneral.org.

Woman's Hospital Named a Blue Distinction Center for Maternity Care

Woman's Hospital has earned the Blue Distinction Specialty Care Center (BDC) designation for maternity care from Blue Cross Blue Shield, which recognizes healthcare providers for expertise and a commitment to quality care for vaginal and cesarean section deliveries. The BDC designation demonstrates better overall patient satisfaction and a lower percentage of early elective deliveries and helps patients seeking maternity services find quality care; only those providers that meet nationally established, objective quality measures for Blue Distinction Centers can be considered for designation.

Quality selection criteria included:

- Accreditation by a national accreditation organization such as The Joint Commission.
- The percent of early, elective (non-medically

necessary) deliveries is at or below 5 percent.

- The Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean Birth rate is at or below 27 percent; this rate identifies live babies born via cesarean at or beyond 37.0 weeks gestation to women in their first pregnancy, that are singleton (no twins or beyond), and in the vertex position (no breech or transverse positions).
- The episiotomy rate is at or below 15 percent.

In addition to being recognized for its maternity care, the Woman's bariatric surgery program has also been recognized by Blue Cross Blue Shield. In early 2018, the Woman's bariatric surgery program earned the Blue Distinction Specialty Care Center Plus (BDC+) designation for quality and value.

North Oaks Sports Medicine Names Student-Athletes of the 2018 Spring Season

North Oaks Sports Medicine certified athletic trainers have joined North Oaks Physician Group orthopaedic surgeons to select Michael Lee, Leslie Matherne, Madison Knight, and Ty Moran as the 2018 Student-Athletes of the Spring Season in Tangipahoa and Livingston parishes.

Female and male students were chosen from both parishes, representing the months of February-April 2018.

St. Thomas Aquinas Regional Catholic High School senior Leslie Matherne played first base for the Lady Falcons Softball team, and graduated with a 4.0 GPA. She signed with Rhodes College softball in Birmingham, Alabama.

Aside from playing first base, Matherne had a batting average of .358, which includes 21 runs, seven doubles, and one triple with 19 total RBIs this season. She has been named to the All-District First Team for three years and the Academic All-State Composite Team this year.

Off the softball field, Head Softball Coach Jamie Flanagan noted that Matherne was actively involved with a multitude of organizations, including the National Honor Society, Beta Club, Light Team, ACT 30+ Club, and Young Woman Bible Study. Matherne was a school ambassador and volunteered with Cancer Services of Baton Rouge as a camp counselor.

Matherne received the Neighbor's Way Award, the Tangipahoa Young Woman of Excellence Award, and was named a Student of the Year

Finalist.

Hammond High Magnet School senior Michael Lee graduated with a 3.45 GPA, where he was the top pitcher for the Tors baseball team, and could cover first base when called upon.

In addition to being the top pitcher for the Tors, Lee earned a batting average of .420, including nine doubles, two home runs, and 20 RBIs this season.

Off the field, Lee earned honor roll placement all four years and belonged to the school's leadership team.

Head Baseball Coach Stephen Ceravolo affirmed, "Michael continuously demonstrated selflessness through his actions. He truly felt it was his duty to encourage his teammates and help them grow."

Madison Knight completed her sophomore year at Albany High School with a 3.9 GPA. She played second base for the Albany High Lady Hornets Softball team.

Not only does Knight have a batting average of .409 with a 480 on-base percentage, but she also had 92 attempts in the field with 92 put outs this season. She was named to the All-District First Team for 2016 and 2017 in addition to being named to the All-Parish and All-State First Team in 2017.

Knight also excelled as a cheerleader for the 2016-17 year. She won the mile in track and field for District 7B for both Parish and District in 2017, qualifying her to compete in state finals that same year.

"This outstanding student-athlete has gone above and beyond the call of duty," shared Head Softball Coach David Knight. "She spearheaded a group Bible study for the team, and led our team in prayer before and after every single game."

Off the field, Knight belonged to the National Beta Club, the Fellowship of Christian Athletes, and the Livingston Parish Gifted and Talented Theater and Music.

Springfield High School senior Ty Moran was the catcher for the Bulldogs baseball team, played football, and graduated with a 3.4 GPA.

Moran's earned a .360 batting average, a .533 on-base percentage, and 14 RBIs this season.

"Ty leads by example every day with a positive attitude," Head Baseball Coach Michael Rutland explained. "He's a respectful young man with a great personality."

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Principals, coaches, and athletic directors from high schools in Tangipahoa and Livingston parishes nominate student-athletes. Candidates must have a 3.0 GPA or higher, excel in athletic competition, participate in school and community organizations, and have earned the respect of coaches, teammates, officials, teachers, and their peers. In June, the North Oaks Sports Medicine team will choose a Student-Athlete of the Year from all season honorees.

Nomination forms are available online at www.northoaks.org/athlete or can be requested by calling North Oaks Sports Medicine at (985) 230-5248.

Seven Baton Rouge General Nurses Recognized for Extraordinary Contributions

Nursing professionals were honored for their leadership and contributions at Baton Rouge General's annual Nurse Excellence Awards Ceremony and Banquet held at the Renaissance Hotel.

The nurses recognized at this year's banquet wear many hats during their shifts—from one-on-one training with employees, to jumping in when a patient is coding, to meeting with executives about how to improve the discharge planning process.

"Nursing is a calling, and one of the greatest opportunities for service that anyone can choose. Our nurses are there when life begins, when it ends, and for the many challenging moments in between," said Monica Nijoka, chief nursing officer and vice president of patient care at BRG. "By touching the lives of patients and their families in this way, Baton Rouge General's nurses elevate their profession to the highest degree. The gift of nursing comes with taking ownership of your calling, and the skill of nursing excellence comes with giving it away."

BRG's 2018 Nurse Excellence Award winners are:

- Non-Traditional Nurse of the Year (tie)—Adriane Ruggiero, RN, nursing manager of endoscopy, and Margie Sevier, RN, house supervisor of nursing services
- Rookie of the Year—Heather Sullivan, RN, critical care
- Patient Care Associate of the Year—Jacob Way, PCA, oncology
- Edith LoBue Leadership Award (tie)—Wanda Hughes, RN, PhD, director of patient safety and quality, and Jobe Nasca, RN, nursing manager



Nursing professionals were honored for their leadership and contributions at Baton Rouge General's annual Nurse Excellence Awards Ceremony and Banquet held at the Renaissance Hotel. Pictured at the awards event, left to right, are Monica Nijoka, Brenda Brown, and JoAnn Lappin.

of critical care

- Traditional Nurse of the Year—Misty Rabalais, RN, emergency department
 - Baton Rouge General Nursing Hall of Fame—Brenda Brown, RN, BSN, Retiree
 - Nursing Scholarship Recipient—Adriane Ruggiero, RN, nursing manager of endoscopy
- ICU nurse Meredith Cooper, BSN, RN, CCRN, was also recognized for being named the Louisiana Hospital Association's Clinical Practice Nurse of the Year in March. Nominations were submitted by peers, leaders, and in some cases, entire departments.

BRG was recently the only hospital in Baton Rouge to receive the Healthgrades 2018 Patient Safety Excellence Award, ranking in the top 10 percent of hospitals across the country for patient safety. BRG was also named #1 in Greater Baton Rouge for Overall Medical Care by CareChex for 2015, 2016, and 2017, was named in the top 2 percent of hospitals nationwide for Overall Medical Care by CareChex in 2017 and received the Patient Safety Excellence Award from Healthgrades in 2016.

Our Lady of the Lake Receives Quality Achievement Award for Stroke Care

Our Lady of the Lake Regional Medical Center has received the American Heart Association/American Stroke Association's Get With the Guidelines®-Stroke Gold Plus Quality Achievement Award with Target: StrokeSM Honor Roll Elite Plus. The award recognizes the hospital's commitment to ensuring stroke patients receive the most appropriate treatment, according to nationally recognized, research-based guidelines based on the latest scientific evidence.

"On average, every 40 seconds someone in the United States suffers from a stroke," explained Glenn Kidder, MD, neurologist and physician lead for the stroke program at Our Lady of the Lake. "We are always pursuing excellence and this recognition shows our commitment to providing the best treatment to stroke patients."

Our Lady of the Lake has earned the Stroke Gold Plus award for six consecutive years, and this year is being recognized for the first time as a Target: Stroke Honor Roll Elite Plus recipient, the



Children's Hospital Wraps Up Record-Breaking Driving the Future Car Raffle

Our Lady of the Lake Children's Hospital wrapped up the eighth annual Driving the Future car raffle, raising a record-breaking total of more than \$1 million to benefit the new freestanding children's hospital. Five winners, announced in a drawing at Price LeBlanc, selected their Lexus vehicles live on WAFB-TV.

This year's winners are:

Yolanda Haynes, Baton Rouge

Mary Geismar, Prairieville

Kellie Barton, Baton Rouge

Cleora Johnson, Zachary

Carlos Brooks, Baton Rouge

The new freestanding Our Lady of the Lake Children's Hospital is expected to open in the fall of 2019. To follow construction updates, view footage from a live web cam, see hospital renderings, and learn more about the project, visit letsbuildamazing.com.

highest Target honor. The hospital is Joint Commission-accredited as a Certified Primary Stroke Center of Excellence for its comprehensive system for rapid diagnosis and treatment of stroke

patients.

To receive the Gold Plus Quality Achievement Award, hospitals must achieve 85 percent or higher adherence to all Get With The

Guidelines-Stroke achievement indicators for two or more consecutive 12-month periods, and achieve 75 percent or higher compliance with five of eight Get With The Guidelines-Stroke Quality measures.

To qualify for the Target: Stroke Honor Roll Elite Plus, hospitals must meet quality measures developed to reduce the time between the patient's arrival at the hospital and treatment with the clot-buster tissue plasminogen activator, or tPA, the only drug approved by the U.S. Food and Drug Administration to treat ischemic stroke. If given intravenously in the first three hours after the start of stroke symptoms, tPA has been shown to significantly reduce the effects of stroke and lessen the chance of permanent disability. Our Lady of the Lake achieved this honor by meeting or exceeding specific quality achievement measures for the diagnosis and treatment of stroke patients for a sustained period.

These quality measures are designed to help hospital teams follow the most up-to-date, evidence-based guidelines, with the goal of speeding recovery and reducing death and disability for stroke patients.

"We are pleased to recognize Our Lady of the Lake for their commitment to stroke care," said Eric E. Smith, MD, national chairman of the Get With The Guidelines Steering Committee and an associate professor of neurology at the University of Calgary in Alberta, Canada. "Research has shown that hospitals adhering to clinical measures through the Get With The Guidelines quality improvement initiative can often see fewer readmissions and lower mortality rates."

According to the American Heart Association/American Stroke Association, stroke is the No. 5 cause of death and a leading cause of adult disability in the United States. On average, someone in the United States suffers a stroke every 40 seconds, and nearly 795,000 people suffer a new or recurrent stroke each year.

Baton Rouge General Opens Clinics in Zachary and Slaughter

Baton Rouge General (BRG) opened two new locations of its Louisiana Internal Medicine Associates (LIMA) clinics in Zachary and Slaughter, offering comprehensive primary care services for patients over the age of 18.

The clinics are Louisiana Internal Medicine

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Associates-Zachary, 19850 Old Scenic Highway, Suite 300 in Zachary, and Louisiana Internal Medicine Associates-Slaughter, 1169 Highway 19, Suite B in Slaughter.

Staffed by Internal Medicine Specialist Dr. Venu Kakarala and Nurse Practitioners Nicole Jarreau and Amy Tomb, the clinics manage patients' overall primary care health, including prevention, diagnosis, and treatment.

"Our primary care services have been consistently recognized for quality," said Edgardo Tenreiro, president and CEO of BRG. "These clinics will make BRG's award-winning healthcare easier to access for residents in Zachary and Slaughter."

The clinic on Old Scenic Highway expands BRG's presence in Zachary, building on its cancer care partnership with Lane which was established in 2014, when the Radiation Oncology Center opened. The first LIMA clinic on BRG's Bluebonnet campus opened in December of 2017.

With two hospital campuses at Bluebonnet and in Mid City, and a neighborhood hospital planned for Ascension Parish next year, the new clinics are the latest addition to BRG's growing regional presence. In late March, BRG's Pennington Cancer Center began the first phase of the 30,000-square foot expansion announced last year by opening The Healing Boutique, specializing in comfort care for cancer recovery. Expansions to BRG's Pennington Cancer Center, Critical Care Tower, and Regional Burn Center are expected to be complete in 2019. In February, BRG's Mid City Medicine clinic expanded its services to accommodate walk-in patients. In addition, there are 20 Baton Rouge General Physician clinics throughout the region, with two affiliated urgent care clinics in Baton Rouge and Prairieville. Baton Rouge General Physicians has received repeated awards from Blue Cross Blue Shield of Louisiana for its high-quality treatment of patients with high blood pressure, diabetes, kidney disease, and heart disease.

The clinics see primary care patients from 8 a.m. to 5 p.m. on Monday, 8 a.m. to 4 p.m. Tuesday through Thursday, and 8 a.m. – 12 p.m. on Friday. For more information, visit <https://www.brgeneral.org/LIMA>.

Baton Rouge General Donates New Playground Equipment to Promote Physical Activity for Kids

Baton Rouge General (BRG) and the

Capital Area American Heart Association (AHA) donated new playground equipment to students at Bernard Terrace Elementary School. The Recess Reboot included 500 water bottles, 100 jump ropes, 100 basketballs, some playground balls, and a \$200 gift card to U.S. Games for additional supplies.

Since the 1970s, the rate of childhood obesity has more than tripled in the United States, increasing the rate of disability and obesity in adulthood, in addition to putting children at an increased risk for diabetes and heart disease later in life. In Louisiana, more than one third of all children (34 percent) and adults (35.5 percent) are obese, one of the highest rates in the country. To combat that, the AHA recommends at least one hour of physical activity every day for children and adolescents. Unfortunately, less than half of 6-11 year olds and only 8 percent of 12-19 year olds are meeting those guidelines.

"Establishing good exercise habits as a child helps makes physical activity more likely as an adult," said Chatsy Thomas, nurse practitioner with Baton Rouge General Physicians. "And by staying active, people can reduce blood pressure, control weight, reduce risk for diabetes, and improve psychological well-being."

Inactive children are more likely to become inactive adults, but studies show that schools can positively influence healthy behavior in children. Recess provides one opportunity to promote physical activity; however, only five states currently require recess in elementary schools. Louisiana is not one of them. Even so, many schools, including Bernard Terrace Elementary School, offer recess to their students.

The Recess Reboot program refreshes and revitalizes playgrounds by providing the equipment schools need for physical education activities, and by encouraging kids to get active.

"This new equipment will be a great fit for my students," said Coach Alicia Johnson, health and physical education teacher at Bernard Terrace Elementary. "The more fun we can make exercise for kids, the more likely they are to continue the habit as adults."

Ochsner Hosts Cancer Center Celebration

In honor of National Cancer Survivors Day, Ochsner Cancer Center-Baton Rouge hosted a Cancer

Center Celebration. The event featured tours of the cancer center, free screenings, activities for children, refreshments, and giveaways.

Free screenings included cancer genetics risk assessment, skin cancer, colon cancer, head and neck cancer, peripheral vascular disease, cardiology oncology, blood sugar, cholesterol, and blood pressure.

National Cancer Survivors Day is the first Sunday in June. The day is meant to demonstrate that life after a cancer diagnosis can be a reality.

House Bill 2 Provides Critical Funding for Freestanding Our Lady of the Lake Children's Hospital

Gov. John Bel Edwards officially signed House Bill 2, also known as Capital Outlay, into law. Included in the fiscal year 2019 capital outlay budget was \$5,000,000 in priority one, and \$7,763,900 in priority two.

"On behalf of our entire ministry and Louisiana's children, we want to thank those Baton Rouge area legislators who worked so diligently to secure critical funding for the freestanding Our Lady of the Lake Children's Hospital," said K. Scott Wester, president and CEO of Our Lady of the Lake. "Without their extraordinary efforts this funding would not have been possible. We'd also like to thank Gov. Edwards for his continued support. The health of countless children from throughout Louisiana will be improved because of their efforts."

"I'd like to specifically thank Senators Regina Barrow, Gerald Boudreaux, Dan Claitor, Yvonne Colomb, Dale Erdey, Eddie Lambert, Edward Price, Rick Ward, and Mack 'Bodi' White and Representatives Chad Brown, Barbara Carpenter, Steve Carter, Franklin Foil, Kenneth Havard, 'Ted' James, Edmond Jordan, Denice Marcelle, Rogers Pope, Patricia Smith, and Major Thibaut."

The new freestanding Our Lady of the Lake Children's Hospital is currently under construction and is set to open in 2019. To learn more about the project, visit www.letsbuildamazing.com.

Our Lady of the Lake Foundation Announces New Board Members

Our Lady of the Lake Foundation has welcomed Kristen Pforr, Bonnie Marcantel, and Michael Pernciaro, MD, to its board of directors for 2018.

Pforr is the vice president of operations, Chemical Intermediates for BASF, and has been with the organization since 2008. Marcantel, a director for Postlethwaite & Netterville, is a CPA who brings experience serving on many boards across the region throughout her career. Perniciaro is a GYN specialist with Louisiana Women's Healthcare, and is a member of the American Board of Obstetrics and Gynecology, the East Baton Rouge Parish Medical Society, and the Louisiana State Medical Society.

The board of Our Lady of the Lake Foundation is made up of business professionals, community leaders, physicians, and Franciscan Missionaries of Our Lady Sisters. Board members dedicate their time and services to furthering the work and mission of Our Lady of the Lake Foundation, and serve three-year terms.

Hospitals Partner to Bring Donor Family, Kidney Recipient Together

As part of National Donate Life Month, Our Lady of the Lake Regional Medical Center in Baton Rouge, Tulane Medical Center in New Orleans, and the Louisiana Organ Procurement Agency (LOPA) partnered to bring an organ transplant recipient—and the family of the organ donor that gave her a second chance at life—together for the first time.

Six months ago, Lee and Valerie Benoit and Tamara Huggins were strangers. Now they share a bond forged by a selfless gift.

After a tragic accident in September of 2017, the Benoit's five-year-old grandson, Xander Cruz, came to Our Lady of the Lake Regional Medical Center and left a hero, saving and enhancing four lives through organ donation after his passing.

"The decision to become an organ donor is a selfless act," said Terrie Sterling, chief operating officer at Our Lady of the Lake Regional Medical Center. "Meetings between donor families and recipients are an opportunity to heal and see that their loved one's decision helped someone else live. We are proud to be a partner for such an important cause."

On April 5, Tamara Huggins, along with her son Peppi and daughter Timeshia, had the opportunity to meet Lee and Valerie Benoit and share their appreciation for the decision the Benois made.

Tamara is one of the lives Xander saved. She received both of his kidneys at Tulane Medical



Donor and recipient family members with representatives from Our Lady of the Lake Regional Medical Center, Tulane Medical Center and LOPA.

Center, and has since been given a second chance at life.

"Organ donation offers one person incredible power to change lives and leave a legacy of hope," said Gigi Spicer, vice president of the Tulane Transplant Institute in New Orleans. "We are proud to work with LOPA and medical facilities across the state of Louisiana to help fulfill the greatest gift of all for patients like Tamara—the gift of life."

Even from his young age, Xander knew that saving lives was his calling and often told his family that he wanted to be a first responder. To honor and remember Xander's gift, a bear dressed in a police officer's uniform was given to each family. What made each bear special was that they each had five hearts inside—one for Xander, and four others for each of the recipients he touched through the gift of donation.

"Xander made a very big impact for such a little kid," said Kelly Ranum, CEO of LOPA. "Even though he was only five, he already knew he wanted to help others. It's a privilege to work with families like his, and we hope his story will inspire others to learn the facts and say yes to donation."

Today, Xander is a hero who lives on through those who received his organs.

Three Appointed to Lane Board of Commissioners

Thomas Scott, Jr., Doze Y. Butler, PhD, and Reagan Elkins, MD, were recently appointed by the Metropolitan Council of East Baton Rouge Parish to the Lane Regional Medical Center Board of Commissioners. Scott replaces Joan Lansing, who retired from the board after two four-year terms; Butler replaces Jimmy Jackson, who retired after completing three four-year terms; and Elkins replaces Dr. Kent Rhodes, who completed his current term.

A lifelong resident of Zachary, Scott is a graduate of Zachary High, and received a degree in accounting from Northwestern State University. He has worked in the financial sector since 2003, and gained more than 10 years of experience with the Louisiana state government before joining Edward Jones Investments in 2014. He is a licensed stock broker and investment advisor.

Scott and his wife of 12 years, Brandi, have two daughters, Aubri and Addison. He is active in Zachary where he is currently director of the Legendz Jr. Broncos, serves on the Planning and Zoning Commission, is on the board for the Chamber of Commerce and YMCA Americana, and is a member of the deacon board at Poplar Springs

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Baptist Church. Scott also enjoys playing music, coaching youth sports, and spending time with his family.

Originally from Tallulah, Butler is a resident of Baker. She is a professor and program leader for Apparel Merchandising and Textiles at Southern University and Agricultural & Mechanical College in Baton Rouge. Her educational background includes a home economics degree from Southern University, a Masters in Education from the University of Louisiana-Monroe, a Masters in Business Administration from Texas A&M University-Corpus Christi, and a Doctorate in Clothing and Fashion Merchandising from Texas Woman's University.

She received the 2016 Baton Rouge Area Volunteer Advocate award, and currently volunteers with St. Vincent de Paul, Habitat for Humanity, and the American Red Cross. She is a member of, and assistant Sunday School teacher at the Greater King David Baptist Church. Butler also enjoys designing apparel, accessories, small home furnishings, and greeting cards from recycled and recyclable materials, as well as going to high tea and travelling abroad.

Elkins, has been a family medicine physician at Zachary Family Practice since 2008. He received his undergraduate degree and graduated summa cum laude from Louisiana College in Pineville, received his medical education from LSU School of Medicine in New Orleans, and completed his residency training at LSU Family Medicine Residency in Alexandria. He and his wife, Leslie, live in Zachary with their daughter, Joy Vianne.

The Lane Regional Medical Center board of commissioners is comprised of nine board members. In addition to Thomas Scott, Doze Butler, and Reagan Elkins, current board members include Gaynell Young, chair, and members at large Jordan Charlet, Patricia Gauthier, Donna Kline, Harold Rideau, and Mark Thompson.

Our Lady of the Lake Rubicon Gives Total of \$1M to Mary Bird Perkins Cancer Center

Rubicon LLC, a chemical manufacturer located in Geismar, and 25-year supporter of Mary Bird Perkins Cancer Center, has reached a cumulative giving total of \$1 million. These funds contributed to the center have been generated through a number of initiatives, including an annual golf



Rubicon's annual golf tournament resulted in a recent \$100,000 gift to Mary Bird Perkins Cancer Center, bringing the company's giving total to \$1 million. Pictured, left to right, are Ethan Bush, vice president and chief development officer, Mary Bird Perkins; Mark Dearman, general manager of Rubicon and Huntsman Americas senior operations director; Sherrie Kinamore, golf tournament chair; and Todd Stevens, president and CEO, Mary Bird Perkins Cancer Center.

tournament and employee giving. The dollars raised have provided funding for the organization's prevention, research, survivorship, innovation, teamwork, and patient assistance programs.

"Everyone is touched by cancer and some of our employees have experienced the disease firsthand or had friends or family members diagnosed; it's a challenging disease in so many ways," said Mark Dearman, general manager of Rubicon and Huntsman Americas senior operations director.

"The fight against cancer is a shared endeavor that works best when the community unites around the cause—co-workers, friends, and neighbors working together to expand preventative services, treatments, and other resources for as many people as possible."

Rubicon's annual golf tournament has engaged the company's employees and vendors from around the country, raising almost \$100,000, annually. And through a yearly workplace giving program, a number of the company's employees contribute personally, raising thousands of dollars since its inception.

"Rubicon and its employees and partners have impacted thousands of patients through their generosity and volunteerism," said Todd Stevens,

Mary Bird Perkins Cancer Center president and CEO. "Rubicon's support is vital to ensuring that we are able to serve the many needs of cancer patients and their families. We appreciate Rubicon's efforts and hope it inspires others to join us in our fight to do more for the thousands of people in Louisiana touched by this disease."

Key 2018 sponsors for the Rubicon Annual Charity Golf Tournament include Gold Sponsor - Brock Services; Silver Sponsors - Air Products, Cajun Industries, LLC, Heniff Transportation Systems, LLC, HydroChemPSC, RJ Daigle and Sons, OxyChem, and Turner Industries; and Hole in One Sponsor - Price Leblanc. Cart Sponsor was Ascension Golf Carts.

All of the funds contributed to the Mary Bird Perkins Cancer Center stay local to benefit patient care.

Ochsner's O Bar Uses Interactive Health Technology to Engage Patients

Visiting the O Bar is not a typical visit to a doctor's office. The prescription calls for health apps, wireless technology, and activity monitors—all to use in the comfort and privacy of one's own home.

Ochsner's nationally recognized O Bar has redefined healthcare services around the patient, utilizing innovation and technology to enhance the patient experience.

Located at Ochsner Health Center-O'Neal, next to Ochsner Medical Center-Baton Rouge, the newest O Bar marks Ochsner's fifth location, joining one in Covington, Marrero, and two in New Orleans.

"Patients are at the center of everything we do," said Aldo Russo, MD, regional medical director, Ochsner Baton Rouge. "The focus has shifted toward teaching people how to stay healthy, keeping them well, and working together to avoid trips to the doctor's office.

"We recognize that delivery of care has many facets and our patients are demanding effective digital interactions to handle issues that will not require an office visit. Our strategy consists of creating a digital infrastructure that complements our physical presence. The O Bar is the beginning of this journey."

Ochsner Health System was the first in the country to introduce the concept of a genius bar in a health setting. The O Bar carries a variety of physician-recommended products and features a state-of-the-art iPad® bar which allows patients to test drive more than 100 Ochsner-approved health apps. Featured apps focus on wellness, nutrition, fitness, diabetes, women's health, smoking cessation, and more.

The semi-retail space stocks the latest devices, including Bluetooth blood glucose monitors, wireless blood pressure cuffs, wireless scales, activity monitors, and others that sync with a smartphone and can update results directly into a patient's Ochsner electronic medical record.

For those who are technologically challenged, the O Bar is staffed with a technology specialist behind the counter between 8 a.m.–4 p.m., Monday through Friday. It's free to speak with the specialist, who is there to answer questions, assist in choosing the right product or app for a consumer's lifestyle, and provide setup, guidance, and support.

"Innovation is part of our mission and we are relentless about using the latest breakthroughs in science and technology to save and change more lives in the communities we serve," said Aimee Quirk, chief executive officer, innovationOchsner. "The O Bar is a community resource that engages patients in technology and tools to improve their health and well-being. It's just one of the ways Ochsner is leading the way in digital health, both regionally and nationally."

Anyone can go to the O Bar for helpful information and to learn about new technology and apps that help people lead a healthier life. O Bar is located on the Ochsner Medical Center-Baton Rouge campus off I-12 (Exit 7, O'Neal) in Plaza I. A second O Bar will open in 2019 at the new High Grove Medical Complex off I-10 (between Bluebonnet & Siegen).

Baton Rouge General Shows Appreciation for Volunteers' 40,000 Hours of Service

During National Volunteer Week, Baton Rouge General recognized the more than 450 volunteers who share their time and energy to support patients, families, and community.

"We are fortunate to have generous and caring volunteers at Baton Rouge General," says Symil LeDoux, director of community engagement. "Their attentiveness to patients and guests is part of what makes BRG's care so exceptional."

Last year, 240 adults and 210 college and high school students generously provided more than 40,000 service hours in 16 departments across the Mid City and Bluebonnet campuses, including the surgery waiting room, gift shops, information desks, outpatient infusion, inpatient rehab, pediatric rehab, regional burn center, outpatient physical and occupational therapy, and Arts in Medicine programs. In addition, the Volunteer Auxiliary donated more than \$235,000 back to Baton Rouge General through fundraising and profits from the gift shops at Mid City and Bluebonnet in 2017.

"Hospital stays can be stressful, so I like to be a calm and pleasant presence for patients and guests," says BRG Volunteer Auxiliary President Deborah Reeves, a volunteer for nearly 12 years. "I encourage anyone looking for ways to help in the community to contact Baton Rouge General. The community and compassion here are incredible."

Volunteers received tokens of appreciation at a special luncheon where WAFB news anchor Donna Britt served as honorary emcee for a fashion show with attire from Chico's of Towne Center.

Cancer survivor walking group participates in Spring Sprint 5k

Ascension Parish cancer survivors are demonstrating that individuals can live healthy, active lives following a cancer diagnosis. Members of a walking group, organized by the THRIVE survivorship program at Mary Bird Perkins Cancer Center in Gonzales, recently participated in the First Annual Ascension Chamber Spring Sprint 5k.

All cancer survivors and their friends and family members are invited to join the walking group, which meets every Thursday from 9–10 a.m. at Jambalaya Park. The running group is just one of the many survivorship programs offered by Mary Bird Perkins Cancer Center in Gonzales.



Ochsner's nationally recognized O Bar has redefined healthcare services around the patient, utilizing innovation and technology to enhance the patient experience.

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All Ascension Parish cancer survivors are eligible to participate in the THRIVE program at no cost, thanks to the generosity of the Gonzales Area Foundation.

For more information, contact Rachel Mumphrey, survivorship coordinator, at (225) 644-1205.

Our Lady of the Lake Honors Volunteers

More than 200 individuals volunteered greater than 12,000 hours of their time at Our Lady of the Lake in 2017 in various programs throughout the hospital, helping to provide exceptional care to patients and their families.

As part of National Volunteer Week, Our Lady of the Lake recognized volunteers from the Silver SAINTS for their commitment to service. The Silver SAINTS (Seniors Available in Needful Times Sharing in Service) are a group of hospital volunteers age 55 and over who spend their time in many parts of the hospital, including pastoral care, oncology, admissions, and senior services, among others.

Silver SAINTS were honored for their hours volunteered in 2017 and their years of service. Awards were presented in Joyfulness of Spirit, Most Years of Service, Most Volunteer Hours in 2017, Most Volunteer Hours Overall, and the Presidential Lifetime Achievement Volunteer Service Award.

"Our volunteers do incredible work for our patients, visitors, and team members. Last year, our volunteers committed more than 12,000 hours of their time to serve those walking through our doors," said Carletha Quincy, supervisor of volunteer services at Our Lady of the Lake Regional Medical Center. "It's an inspiration to see their commitment to service and we are grateful to have them as part of the Our Lady of the Lake team."

Awards were presented to the following Silver SAINTS:

Joyfulness of Spirit

This award is given to individuals who uphold Our Lady of the Lake's core value of Joyfulness of Spirit—an awareness of being blessed by God in all things. These volunteers enter each day with a smile on their face, ready to serve our patients, guests, and team members.

- Melba Weiss, a retired LPN nurse, began volunteering at Our Lady of the Lake in June of 2014.
- Fran Haydel began volunteering in September



Patty Taber, a retired LPN, who began volunteering in 2011, was presented by the hospital with the Presidential Lifetime Achievement Award for her years of service.

of 1995 as a Eucharistic minister, serving communion to patients and their families.

Most Years of Service

- Cecelia St. Romain has volunteered with Our Lady of the Lake for 28 years.

Most Volunteer Hours in 2017

- June Crump volunteered more than 700 hours in 2017.
- Mike Cullen volunteered more than 600 hours last year.
- Antonio Carrillo volunteered more than 500 hours in 2017.

Presidential Lifetime Achievement Award

This award is given to individuals who have completed 4,000 or more hours in their lifetime. Along with the ultimate honor of presidential recognition, recipients receive a personalized certificate, an official pin, medallion, or coin, and a congratulatory letter from the president of the United States.

Patty Taber, a retired LPN, began volunteering in 2011 at the front desk of the Assisi Village building and has since volunteered more than 5,000 hours of her time. Patty was also honored this year for Most Hours in a Year, with 1,000 hours served, and Most Hours Overall, reaching a milestone of more than 5,000 hours.

Visit www.ololmc.com to learn more about volunteering at Our Lady of the Lake.

North Oaks Invites Community to Public Forum

The North Oaks Board of Commissioners and President/Chief Executive Officer Michele Sutton invited the community to a public forum held in the E. Brent Dufreche Conference Center, located within North Oaks Diagnostic Center in Hammond.

Sutton gave an update on new services with the majority of the evening spent answering questions from the audience.

"We want to know what's important to our friends and neighbors," Sutton explained. "All questions are welcome, with the exception of those pertaining to specific patient care or billing issues. Those will be addressed privately to protect confidentiality."

All questions and answers were posted to the health system's website at www.northoaks.org.

North Oaks hosts biannual public forums in the fall and spring.

Baton Rouge General Partners with the CDC to Help Louisianans at Risk for Type 2 Diabetes

Baton Rouge General (BRG) announced that the organization is partnering with the Centers of Disease Control (CDC) to pilot a yearlong diabetes prevention program to assist people at risk for diabetes.

Consistently ranked in the top 10 states with the most people with type 2 diabetes, Louisiana's diagnoses of the adult-onset disease continue to trend upward.

Twelve at-risk Baton Rougeans are participating in BRG's diabetes prevention program pilot class, consisting of 26 group sessions that focus on proper nutrition, physical fitness, and stress management. Throughout the year, participants meet on BRG's Bluebonnet campus and receive support from a lifestyle coach, insight from physician guest speakers, and tips from the hospital's dietitians and fitness team.

Family Medicine Specialist Dr. Wayne Gravois with Baton Rouge General Physicians-Family Health Center medically supervises the program. "Whether you've already been diagnosed with prediabetes or are concerned that this diagnosis is in your future, making changes now can help you avoid some of its scary complications like kidney damage, vision loss, and heart disease," said Dr.



R. Scott Daugherty, Jr., MD

Gravois. "A year might seem like a long commitment, but a lifetime of managing an irreversible disease is even longer."

The CDC requires that participants be at least 18 years old, have a body mass index above 25, have no previous diagnosis of type 1 or type 2 diabetes, and have tested in the pre-diabetic range within the past year. Although BRG's initial class is full, contact Rachel Punch at (225) 819-1177 or Rachel.Punch@brgeneral.org to join a waiting list for future classes.

For more information on the accredited diabetes education program that BRG established in 2013, visit BRGeneral.org/service/wellness/diabetes-education.

Our Lady of the Lake Welcomes Colon Rectal Surgeon

R. Scott Daugherty, Jr., MD, has joined Our Lady of the Lake Physician Group Baton Rouge Colon Rectal Associates, where he teams with a group of board-certified colorectal surgeons providing care in the evaluation and treatment of all diseases and disorders affecting the small intestine, colon, rectum, and anus.

Daugherty received his medical degree from the LSU Health Sciences Center School of Medicine in New Orleans in 2010. He completed his general surgery residency at the same institution, followed by a colorectal surgery fellowship at LSU Shreveport. He is an associate fellow of the American Board of Surgery and is a member of the Society of American Gastrointestinal and Endoscopic Surgeons. Daugherty is also a candidate member of the American Society of Colon and Rectal Surgeons.

Daugherty joins colon rectal surgeons Louis

Barfield, MD, Richard Byrd, MD, and Kelly Finan, MD, at the practice located at 7777 Hennessy Blvd., Suite 206.

Baton Rouge General Named One of Nation's Safest Hospitals

Baton Rouge General (BRG) received the Healthgrades 2018 Patient Safety Excellence Award, placing BRG in the top 10 percent of hospitals across the country for patient safety. BRG was the only hospital in Baton Rouge, and just one of nine in Louisiana, to receive the designation.

Across the nation, 485 hospitals earned the award, including BRG's Mid City and Bluebonnet campuses. The distinction places this elite group of hospitals within the top 10 percent of all hospitals evaluated for their performance in safeguarding patients from serious, potentially preventable complications during their hospital stays.

"Preserving and restoring health for our patients means a constant drive toward perfection and zero harm," said BRG President and CEO Edgardo Tenreiro. "This recognition is a testament to the teamwork of our physicians, nurses, clinicians, and WorkExcellence department."

Patient Safety Excellence Award recipients were determined by evaluating the occurrence of observed incidents and expected performance for 13 Patient Safety Indicators as defined by the Agency for Healthcare Research and Quality (AHRQ). On average, 126,342 patient safety events could have been avoided if all hospitals performed similarly to those recognized.

Four types of events make up nearly 75 percent of all patient safety events reported by hospitals-- accidental cut, puncture, or hemorrhage; collapsed lung; infections; and bed sores.

BRG was also named #1 in Greater Baton Rouge for Overall Medical Care by CareChex for 2015, 2016, and 2017; was named in the top 2 percent of hospitals nationwide for Overall Medical Care by CareChex in 2017; and received the Patient Safety Excellence Award from Healthgrades in 2016.

Our Lady of the Lake Physician Group Family Health-Watson Returns to Denham Springs

Signs of flood recovery continue in Denham Springs with the return of Our Lady of the Lake Physician Group Family Health-Watson to the Live Oak neighborhood in Denham Springs.

"With more than 90 percent of the clinic patient population affected by the flood, we are thrilled to be able to provide families with the quality care they deserve in their own neighborhood," said Dr. Durwin Walker, MD. "The Denham Springs community has been resilient through the rebuilding process, and we are ready to provide them with normalcy in a newly renovated space."

The clinic was severely damaged by the August flood in 2016, and is the last of three affected clinics to return to their permanent location. After the flood, Our Lady of the Lake Physician Group Family Health-Watson was servicing patients at an office on Highway 1019, but is excited to return to its Live Oak neighborhood location with new providers.

Providers at Physician Group Family Health-Watson include Durwin Walker, MD, Patrick Walker, MD, and Kori Juban, NP.

Located at 31995 LA Highway 16, the clinic provides care related to the diagnosis and treatment of a broad range of medical issues, including preventive healthcare and the evaluation and care of illnesses and minor injuries.

Our Lady of the Lake Physician Group Family Health-Watson is open Monday through Friday from 8 a.m. to 5 p.m., and is currently accepting new patients from children, beginning at two years old, through adults.

BRG Art Exhibit at Manship Shows Unique Side of Patient Care

Baton Rouge General's (BRG) Arts in Medicine program has helped more than 10,000 patients since 2012, but the artists and volunteers who facilitate the program are often surprised by how inspired and gratified they feel after the sessions. These unexpected emotions are captured in the program's latest exhibit at the Manship Theatre, "A View Into Our World—An Artist's Way."

The only hospital in the state with a program of this kind, BRG Arts in Medicine participants enjoy activities such as painting, drawing, arts and crafts, music, and storytelling in ways that inspire hope and promote healing. Private and group art therapy sessions are hosted by the hospital's artists-in-residence and volunteers, giving patients something to focus on other than their illness, and providing emotional and physical benefits.

"People always ask me what it's like to have an impact on patients every day, but we feel like

Hospital Rounds



Baton Rouge General's Arts in Medicine program has helped more than 10,000 patients since 2012, but the artists and volunteers who facilitate the program are often surprised by how inspired and gratified they feel after the sessions. These unexpected emotions are captured in the program's latest exhibit at the Manship Theatre, "A View Into Our World – An Artist's Way." An example of the exhibit's work is shown here.

"we're the ones who leave the sessions inspired," said Patti Bailey, artist in residence at BRG. "This exhibit is a great way for us to show how our work unexpectedly puts us on the receiving end of art therapy."

A portion of sales benefits BRG's Arts in Medicine program. The exhibit will run through September.

To purchase artwork, visit the Manship Theatre. To learn more about BRG's Arts in Medicine Program, call (225) 387-7040.

Our Lady of the Lake Hosts Free Joint Replacement Seminar

Our Lady of the Lake and Dr. Joseph Broyles with the Bone and Joint Clinic of Baton Rouge recently teamed up to host a free educational seminar on joint replacement at the Renaissance Baton Rouge Hotel. Participants learned more about the common causes, symptoms, and treatment options for osteoarthritis, as well as the benefits of joint replacement surgery for the knees and hip.

Dr. Broyles is board-certified by the American Board of Orthopaedic Surgery. After receiving his medical degree from the LSU School of Medicine in Shreveport, Broyles completed his residency at John Peter Smith Hospital in Ft. Worth, Texas, and a fellowship in total joint replacement in St. Louis, Missouri, under Dr. Leo Whiteside.

Ochsner Baton Rouge Receives an A for Patient Safety

The Leapfrog Group, a Washington D.C. based organization aiming to improve health care quality and safety for consumers and purchasers, today released the new Leapfrog Hospital Safety Grades. Ochsner Medical Center Baton Rouge (OMCBR) was one of 750 awarded an A for its efforts in protecting patients from harm and meeting the highest safety standards in the U.S. The Safety Grade assigns an A, B, C, D, or F grade to hospitals across the country based on their performance in preventing medical errors, infections and other harm among patients in their care.

"All of our healthcare providers and staff are

focused on improving health outcomes," said OMCBR CEO Eric McMillen. "Ochsner believes in always putting patients first, which is why our quality and safety continue to be among the best in the country."

OMCBR has an impressive track record of consistent and measurable quality, earning its sixth consecutive Leapfrog A grade. OMCBR has been named a Distinguished Hospital for Clinical Excellence by Healthgrades, and earned the Healthgrades Patient Safety Excellence Award each year since 2015. It is the only hospital in the Capital Region ranked among IBM Watson Health's 100 Top Hospitals.

"This is the only national rating of how well hospitals protect patients from preventable harm and death, such as medical errors, infections, and injuries," said Leah Binder, president and CEO of The Leapfrog Group. "Receiving an A Safety Grade means a hospital is among the best in the country for preventing these terrible problems and putting their patients first, 24 hours a day." Developed under the guidance of an expert panel, the Leapfrog Hospital Safety Grade uses 27 measures of publicly available hospital safety data to assign grades to approximately 2,500 U.S. hospitals twice per year. It is peer reviewed, fully transparent, and free to the public.

St. Elizabeth Hospital Receives Recognition for Bariatric Surgery

Blue Cross and Blue Shield of Louisiana has recognized St. Elizabeth Hospital with a Blue Distinction® Center+ for Bariatric Surgery designation as part of the Blue Distinction Specialty Care program. Blue Distinction Centers are nationally designated hospitals that show expertise in delivering improved patient safety and better health outcomes, based on objective measures that were developed with input from the medical community.

To receive a Blue Distinction Center+ for Bariatric Surgery designation, a healthcare facility must demonstrate success in meeting patient safety measures, as well as bariatric-specific quality measures, including complication and readmission rate for laparoscopic procedures in sleeve gastrectomy, gastric bypass, and adjustable gastric band. A healthcare facility must also be nationally accredited at both the facility and bariatric program-specific levels. The facility should also

have demonstrated cost-efficiency compared to its peers.

In 2017, the Blue Distinction Centers for Bariatric Surgery program expanded to include not only the type of service provided, but also the site of care. Healthcare facilities were evaluated as either a comprehensive center or as an ambulatory surgery center.

"We have always maintained a focus on providing safe, quality, and effective surgical options for those qualifying for weight loss surgery," said Holly Edmonds, bariatric surgery coordinator for St. Elizabeth Hospital. "We are pleased to have been designated a Blue Distinction+ Center for Bariatric Surgery. We hope that the designation will provide additional peace of mind to patients who choose to have weight loss surgery with us," she said.

Bariatric surgeries are among the most common elective surgeries in the United States. There were 196,000 bariatric surgeries performed in 2015, according to the American Society of Metabolic and Bariatric Surgery (ASMBS), and the average cost is more than \$28,000 per episode, according to the Journal of the American Medical Association. It is estimated that nearly 36.5 percent of adults in the United States and 17 percent of youth are obese and impacted by obesity-related health conditions, according to the Centers for Disease Control and Prevention (CDC). The estimated annual health care costs of obesity-related conditions are nearly \$210 billion per year in the United States, according to the Journal of Health Economics. On average, healthcare costs were reduced by 29 percent within five years following bariatric surgery, due to the reduction or elimination of obesity-related conditions, according to ASMBS.

Keep Summer Safe with Tips from BRG's Verified Regional Burn Center

Each year, more than 15,000 patients visit emergency rooms for burns involving grills. Baton Rouge General Regional Burn Center Medical Director Dr. Tracee Short offers five simple burn safety tips.

"It's easy to associate burns with heater fires in the winter," said Short. "Unfortunately, we see a lot of patients each summer with burns from grills, campfires, and fireworks—which can all be

prevented by using the right safety measures."

For a safer summer, follow these tips:

1. Only use grills outside, and keep a three-foot safe zone around them.
2. Never let children play around a grill.
3. Check to make sure propane tank connections are secure on gas grills.
4. Build campfires at least 15 feet away from tent walls, shrubs, or other materials that burn.
5. Never use gasoline or other accelerants on campfires.

BRG has the only verified burn center between Florida and Texas, and is one of only 68 in the United States that is held to specific standards by the American Burn Association through its verified status. Established in 1970, BRG's Regional Burn Center plays an integral role in supporting other Gulf Coast states when the need arises.

Learn more about the BRG Regional Burn Center's resources and team of experts by visiting BRGeneral.org/Burn or by contacting (225) 387-7717 or Burn@BRGeneral.org.

Pediatric Feeding Clinic Established at Our Lady of the Lake Children's Health

Our Lady of the Lake Children's Health welcomes Melissa Gonzalez, PhD, to its growing team of specialists who work with children with developmental disabilities and autism spectrum disorders. Gonzalez is a clinical psychologist and doctoral-level licensed behavior analyst (BCBA-D) who specializes in pediatric feeding disorders.

Feeding problems are frequently a concern of caregivers, and may have serious short and long term health and social consequences for children and their families. Gonzalez, who brings elite-level experience and knowledge to help families overcome these difficulties, has established the Pediatric Feeding Clinic at the Our Lady of the Lake Children's Health Pediatric Development and Therapy Center, with an interdisciplinary approach to assess and treat feeding difficulties in children up to 10 years of age.

"So many families struggle with their children at meal time, and research tells us that it's often more than simply being a picky eater," said Shaun Kemmerly, MD, chief medical officer for Our Lady of the Lake Children's Hospital. "We are thrilled to have someone with the experience and talent of Dr. Gonzalez, who can work with families in



Melissa Gonzalez, PhD

finding the best solution to help their children get the nutrition they need while making meal time a more pleasant experience for everyone."

Gonzalez earned her doctorate in clinical psychology with a specialization in developmental disabilities in 2008 from Louisiana State University. She continued her post-doctoral training at Kennedy Krieger Institute and the Department of Pediatrics at Johns Hopkins Medicine in Baltimore, Maryland, where she further specialized in working with children with feeding disorders and severe behavior disorders/self-injurious behavior.

Gonzalez joined the faculty of Kennedy Krieger Institute in 2009, and later earned the academic appointment of assistant professor in the Department of Psychiatry and Behavioral Sciences at Johns Hopkins Medicine where she supervised clinical care of inpatients and outpatients in the Pediatric Feeding Disorders Program. She provided training and supervision to doctoral interns and fellows, and conducted clinical research related to pediatric feeding disorders.

To help children overcome complex and debilitating feeding disorders, the interdisciplinary feeding team collaboratively develops treatment plans based on a patient's individualized needs. In addition to psychology, the interdisciplinary feeding team includes specialists in the areas of developmental pediatrics, speech-language pathology, and occupational therapy.

"Feeding difficulties often arise as a result of multiple factors, and frequently require an interdisciplinary approach to treatment," Gonzalez explained. "We are partners with each family on their unique journey. The overall goal is to develop strategies so that the caregivers can support the child in practicing new skills at home to

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Our Lady of the Lake Reveals Inspiration for Interior of New Freestanding Children's Hospital

Our Lady of the Lake Children's Hospital released new details about the inspiration behind a first-of-its-kind interior design style for the future freestanding children's hospital campus.

"As Louisiana's Children's Hospital, we want everyone who walks through our doors to see a little piece of their home," said K. Scott Wester, president and CEO of Our Lady of the Lake. "Our Louisiana roots run deep and we wanted to build a special place where you receive not only state-of-the-art health-care, but also feel at home."

Each floor depicts a different ecosystem of Louisiana, complete with a color story and animal ambassadors to guide patients with wayfinding icons. Each region, color palette, and animal were specifically thought through and designed to illustrate the diverse and rich heritage of Louisiana.

"From the plains and piney woods to our bayous and wetlands, each region is represented and the animal icons will not only guide families, but also

offer a whimsical and child-friendly atmosphere," said Shaun Kemmerly, MD, chief medical officer of Our Lady of the Lake Children's Hospital. "This piece of the hospital design is the icing on the cake. We are not only building a statewide network of medical care, but we are building a structure that speaks to our home state and celebrates all that this state is and will be."

This design with many references to nature also serves as a tribute to St. Francis of Assisi, a nod to Our Lady of the Lake's founding order, the Franciscan Missionaries of Our Lady. St. Francis is known for his love of nature and creation, especially animals.

This unique interior theme was created through a collaboration between HKS Architects who brought forth the ecosystem concept, and Our Lady of the Lake team members who designed and conceptualized the animal ambassadors. Examples include a pelican, an alligator, a beaver, a crab, a black bear, and a roseate spoonbill. Our Lady of the



Lake Children's Hospital will bring these wayfinding icons to life as cartoon brand characters to serve as friends and ambassadors for our patients and team members.

The new Our Lady of the Lake Children's Hospital is expected to open in fall of 2019. To follow construction updates, view footage from a live web cam, see hospital renderings, and learn more about the project, visit letsbuildamazing.com.

re-establish mealtime as a positive experience for the family, and develop opportunities for the child to have greater community and social participation. These skills are a basis for children to be healthy, happy, and engaged members of our community."

Our Lady of the Lake Children's Health Pediatric Development and Therapy Center is located at 8415 Goodwood Boulevard, Suite 200, in Baton Rouge. Visit ololchildrens.org/childdevelopment to learn more or to request a patient information packet.

Our Lady of the Lake Children's Hospital to Host Mother-Son Dance

On Sept. 16, Our Lady of the Lake Foundation is hosting the Mother-Son Dance at the Crowne Plaza from 4-6 p.m., with proceeds from the event going toward the new freestanding hospital set to open in fall of 2019.

"There has been a lot of community support in helping us build the new Our Lady of the Lake Children's Hospital, and the Mother-Son Dance is a perfect partner to help us reach our fundraising

goals," said Kelly Hurtado, executive director of the Our Lady of the Lake Foundation. "A group of very dedicated volunteers and mothers have come together to support our children's hospital, and it will be rewarding to see so many mothers enjoy this special time with their sons."

The Mother-Son Dance will include dancing contests, face painting, balloon artists, superhero costumed characters, games, and more. Heavy hors d'oeuvres and drinks will be served. The event also will feature a raffle silent auction, giving moms and sons a chance to win some prize packages.

Tickets are \$50 each and are available on a first-come, first-served basis. For more information, or to purchase tickets, visit ololchildrens.org/mothersondance.

BRG Hosts Lunch & Learn on Heart Health

Baton Rouge General and Baton Rouge Cardiology Center's Dr. Evens Rodney recently offered tips about how to measure and maintain good heart health at BRG's Bluebonnet location. At the free lunch event, Rodney explained which

measurements are related to heart health.

Understanding one's numbers is the best way to control them, and by taking measurements such as blood pressure, blood sugar, cholesterol, and body mass index, a patient and their doctor can keep track of one's personal risk of developing heart disease. More than 10,000 people in Louisiana die each year from heart disease, and another 3,000 die from strokes. The state is ranked the fifth most obese in the nation, and at least 40 percent of residents have been diagnosed with high blood pressure. When left untreated, the damage that high blood pressure does to the circulatory system is a significant contributing factor to heart attack and stroke.

"Some of the factors that increase risk for heart disease are beyond our control, but we can manage key measurements like blood pressure and blood sugar," said Rodney. "And by using the information these numbers give us, we can start protecting ourselves from life-changing diagnoses."

This session was the last of a five-event educational series about keeping a healthy heart. ■

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