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# Chicago Hospital News<sup>TM</sup> and HEALTHCARE REPORT

THE REGION'S MONTHLY NEWSPAPER FOR HEALTHCARE PROFESSIONALS & PHYSICIANS

## Human Resources in 2013: Challenges Old and New

2013 presents both old and new challenges to human resource professionals. The "old" challenge of monitoring wage and hour practices continues as employee lawsuits seeking recovery for unpaid wages and overtime continue to fill court dockets. The good news is that proactive policies can help protect a hospital from liability for those claims.

In *White v. Baptist Memorial Health Care Corporation*, for example, a United States Court of Appeals refused to hold a hos-

pital liable to an entire class of employees who claimed they worked "off the clock" during unpaid breaks, where the hospital instituted a "reasonable" exception procedure to report time worked during those unpaid breaks. Specifically, in *White*, the hospital automatically deducted unpaid breaks from a non-exempt employee's work hours. Employees were required to report any work performed during unpaid breaks through an established "exception procedure," which would increase the

work hours and corresponding pay for that week. The *White* plaintiff nevertheless sued the hospital for payment for time that she and a class of similar employees allegedly worked "off the clock" during unpaid breaks. Even though she was aware of the exception procedure and used it on some occasions, the plaintiff claimed the hospital "should have known" she and others were working without pay during breaks. Importantly, there was no evidence that any-

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Jody A. Boquist

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### CARDIOLOGY

## Does It Matter That "Boys Will Be Boys and Girls Will Be Girls" or Are We All Indeed Equal?

BY VIRGINIA H. HUXLEY, PH.D.



Dr. Virginia H. Huxley

What if I told you that males and females were different? You'd probably say "duh." If you were worried about being politically correct, you might even wince a little. So why do I care if you care?

Because, with respect to the cardiovascular system, it is becoming clear that similarities and differences matter. The architecture of how vessels and the heart are connected appears

to be similar for males and females, but their size differs and that can impact the design of things like surgical instruments, for example. The interesting part, and why we care most, is that some vessel functions of key organs like the heart, brain and kidneys, show sex-specificity. And while these differences may not matter when you are healthy, they can really matter when your organ systems are stressed and can result in disease.

The fun part of research is learning how beautiful and adaptable the living system is

and how it works to keep us functioning at our best. It is widely believed that simple explanations are best; therefore we assume that "sex", being male or female, is without consequence. Except we know that men suffer from heart disease at a younger age than women and that beyond menopause, the incidence of heart disease rises to the level of men. We also now know that the symptoms of heart attacks present differently in women. But what we do not know is why. What causes these

*Continued on page 14*

### EDUCATION

## Psychiatric Mental Health Nurse Practitioner: New Program to Address the Needs in Illinois

BY DEENA NARDI, PH.D., PMHCNS-BC, FAAN, DORIS VAN BYSSUM, PSY.D., PMHNP, AND CAROL WILSON, PH.D., FNP-BC

There is a critical need for more qualified, graduate degree-prepared nurses to address our nation's increasing mental healthcare needs (Institute of Medicine, "Future of Nursing", 2010). The National Alliance on Mental Illness (NAMI) has given Illinois a failing grade in provision of mental health services, including mental health service co-pays, inpatient services, infrastructure and overall access to mental

health services (Cantrell, 2006). In 2007, 19% of the population in Illinois was treated for a mental illness (Holzer & Nguyen, 2007). HRSA reports that of the 203 counties listed for Illinois, there were a total of 1,070 designated mental health shortage areas (HRSA, 2012).

In an effort to respond to the lack of mental health services, the University of St. Francis (USF) in Joliet, Ill. will be rolling out a very unique post-master's certificate this summer. It is a program intended for registered nurses with a clinically based graduate degree in the mental health field who wish to attain their Psychiatric Mental Health Nurse

Practitioner (PMHNP) certification. This program is especially intended for Psychiatric Mental Health Clinical Nurse Specialists (PMH CNSs) who would like to ensure their future by respecializing as PMHNPs; this is important since the American Nurses Credentialing Center is retiring the certification for the PMH CNS. Qualified individuals will be able to complete the 500 required clinical hours over one summer. This intensive practicum experience will exemplify what PMHNPs are capable of, and will meet the needs of students who are able to complete a full-time

*Continued on page 8*

### Career Change Do's

The prospect of changing careers is generally frightening and intimidating. Even when you know exactly what you want to pursue, it is easy to become overwhelmed by the challenges the career-change process presents. Employ these strategies to make that career change a reality.



BY MARY SPEISER

**Determine Your Objective**  
Inventory the skills and experiences you can leverage in your career transition. Examples include:

**Transferable Skills:** In most cases, skills you've honed in a job or previous experiences will be relevant in the next. Communication, relationship building, project management, leadership, sales, customer service, analytical and problem solving, training and numerous other abilities are all common transferable skills.

**Experience:** Look back and review what you've done in previous jobs. What are the things that you've enjoyed most: involvement with a merger, acquisition, launch of a new product or model, corporate crisis, etc?

**Environment:** Do you thrive in "pressure-cooker" environments? Dealt with unions? Worked independently? Seek a mentor? Think of the times when you were at your best.

**Company Type:** Leverage your knowledge regarding the kinds of companies you've worked for. Non-profit versus for-profit, family owned or owner-operated businesses, public or private sector, etc. Know what the differences are and the cultures typically associated with a type of business.

**Networks:** Utilize your current relationships to find entry points into a new field or organization. All it takes is a different kind of conversation to get started. Ask contacts whom they know. Never ask for a job, ask for information, advice and connections. Follow up on their leads, keep them informed, and thank each and every person along the way.

#### Effectively Articulate Your Objective

If you know why you want to make the change and what you and the organization will gain from it, you'll increase your odds of success. Be sure to articulate reasons to potential employers. Employers don't want to feel like you are running away from something, rather than running to something for passion and interest.

#### Avoid Over Analysis

Gaining a strong understanding of yourself and taking inventory is imperative to managing your career transition, but try to avoid "analysis paralysis". You must act your way through a career change, not dream about it.

#### Connect with People

When changing careers, your resume is a tool, yet it is not your most useful marketing tool. Building your network is the most critical aspect of most career changes. Connect with people to validate your interest and to learn about them and other organizations. If you are truly networking, opportunities often present themselves.

#### Make a Lasting Impression

Reveal your industry knowledge and mention industry events you've attended or industry associations that you represent. If you blog related to that industry, mention that as well.

Stand out by talking about the actions that you've taken that prove your commitment to the field. Talk about projects that you lead or are involved in. Be engaged, show interest and passion, that's what excites employers about bringing on new talent.

*Mary Speiser is a Senior Consultant at First Transitions, Inc., a corporate-sponsored career transition and executive coaching firm specializing in the healthcare field. She can be reached at (630) 571-3311, (312) 541-0294 or at mspeiser@firsttransitions.com. You can also visit the website at www.firsttransitions.com.*

## Making the Most of Your Bonus or Raise

If you're receiving a raise or a bonus this year, you may feel a little bit wealthier when you see your suddenly inflated bank account or paycheck. But it's no secret that this money can disappear quickly.

Resolve to take extra care with your bonus or raise this year and make sure to get the most of it. This requires you to think beyond the new flat screen TV or summer vacation, and consider how the extra money could help you in the long run.

#### The extra tax hit

A boost in your wages this year won't mean quite as much as it did in the past due to the rise in payroll taxes. Any raise or bonus you receive is subject to payroll taxes, which increased for all wage earners and those who are self-employed in 2013. The employee's share of the Social Security payroll tax has reverted to 6.2 percent for 2013 after being reduced to 4.2 percent in the two previous years. That means you'll have \$20 less in take home pay for every \$1,000 you earn. The tax applies to the first \$113,700 of income earned in 2013. In short, this tax increase may counteract a boost to your paycheck to some extent, depending on your circumstance.

For those at higher income levels, additional taxes may be incurred:

- The addition Medicare surtax of 0.9 percent. This applies to wage or self-employment income over \$200,000 for single tax filers and above \$250,000 for married couples filing a joint return.
- A higher federal income tax rate of 39.6 percent applies for taxable incomes above \$400,000 for single taxpayers and above \$450,000 for married couples filing jointly. This is higher than the 35 percent rate that applied in prior years.

Virtually all wage earners will feel the extra tax hit in 2013.

#### Maximizing the impact

Once you've calculated the "take-home" value of your bonus or raise, it comes down to a matter of spending the money now, paying down existing debt, saving and investing it, or a combination of the three.



BY NANCY S. BUERGER

After receiving a bonus check, it's often tempting to make a purchase of something that's long been on your wish list. Before you do, think about whether that money could have more impact in other ways.

If you have significant debts, particularly high interest credit cards or other loans, you may want to use some of the extra cash to pay down those loans and dramatically reduce future interest

costs. The faster you can eliminate debt, the more money you will have left from your paycheck for other purposes.

Alternatively, you can apply some of the extra money to help achieve your key financial goals. These can include:

- Having sufficient emergency cash reserves in place (you should have enough to cover at least three to six months of expenses).
- Investing more money for long-term goals like retirement or your children's education
- Increasing the level of insurance coverage you have in place to prepare for the unexpected, such as death, disability or medical needs.

#### Getting more from your raise

If you've received your annual salary increase, the change to your bottom line is more gradual, but it also means you can take steps to steadily improve your long-term financial outlook. You could consider:

- boosting pre-tax deferrals into your workplace retirement savings plan;
- devoting a portion of the increase to other retirement savings, such as an IRA; or
- directing more money to other investment accounts, such as a 529 college savings plan

Every dollar invested this year has the opportunity to grow as time passes. That is a powerful way to multiply the impact of this year's pay hike.

*Nancy S. Buerger is a Certified Financial Planner with Ameriprise Financial Services, Inc. She can be reached at (630) 396-1826 or nancy.s.buerger@ampf.com.*

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## Advocate Good Samaritan Hospital Offers Donor Breast Milk to Tiniest Patients

BY MARIE LEVY

Advocate Good Samaritan Hospital is the first hospital in DuPage County to offer a unique feeding choice for the tiniest patients at the hospital. Mothers are now given the option to feed their infants pasteurized donor human milk when they are unable to provide their own.

The Neonatal Intensive Care Unit at Good Samaritan Hospital is a Perinatal Level III, the highest designation assigned by the state of Illinois. While the hospital boasts a 91 percent breastfeeding rate, there is still a need for those others to receive the next best thing to their own mother's milk, pasteurized donor human milk.

Good Samaritan Hospital set up a relationship with the Indiana Mother's Milk Bank and Advocate Lutheran General Hospital to assist in obtaining donor milk for Good Samaritan Hospital's NICU population.

The hospital also saw the need to offer this as an option to non-NICU infants. Several full-term infants have used pasteurized donor human milk as a feeding option.

*Marie Levy is Manager Perinatal Services at Advocate Good Samaritan Hospital. For more information, visit [www.advocatehealth.com/gsam](http://www.advocatehealth.com/gsam).*



## Advocate Lutheran General Launches Neuroendovascular Program

Advocate Lutheran General Hospital is excited to announce the launch of its neuroendovascular program led by Dr. Thomas Grobelny, interventional neuroradiologist. This program expands Lutheran General's acute stroke care so that we are now able to provide the most advanced acute stroke care to patients throughout the Northern region of Chicago. Under Dr. Grobelny's guidance, new minimally invasive interventions are now being performed which improve outcomes and reduce recovery time.

In the 6 days following the launch of the program, 3 patients had already been transferred to Lutheran General from Advocate Condell Medical Center and Advocate Good Shepherd Hospital, to receive advanced stroke care. All patients are doing remarkably well after being treated for the following conditions:

- A cerebral/carotid vessel blood clot
- A cerebral aneurysm along with subarachnoid hemorrhage
- Vision loss in one eye and a stenosed carotid artery

In treating these patients, Dr. Thomas Grobelny worked alongside the acute stroke care team. This multidisciplinary team includes physicians, nurses, and technicians from numerous areas of the hospital including: Emergency Medicine, Neurology, Neurosurgery, Radiology, Intensive Care and Physical Medicine. Using this approach to stroke care, Advocate Lutheran General Hospital is now able to provide the most comprehensive stroke care available.



*Dr. Thomas Grobelny*

## Presence Saint Joseph Medical Center and Aunt Martha's Youth Center Open New West Joliet Location



*(l-r) Lyndean Brick, Chair, Presence Saint Joseph Medical Center Board of Directors; Beth Hughes, President and CEO, Presence Saint Joseph Medical Center; Raul Garza, CEO, Aunt Martha's Youth Center, Inc.; and Deborah Watson, Chair, Aunt Martha's Youth Center, Inc. Board of Directors.*

With the opening of a new Community Health Center, Presence Saint Joseph Medical Center and Aunt Martha's Youth Center, Inc. have partnered to improve access to care for the medically underserved on the west side of the Greater Joliet community.

Presence Saint Joseph and Aunt Martha's recently celebrated the grand opening of Aunt Martha's Health Center West Joliet, a new 4,500 square foot Community Health Center operated by Aunt Martha's within the Medical Center in space adjacent to its Emergency Department.

The new Health Center provides a full spectrum of preventive and primary health care services, including essential ancillary services such as lab testing. A significant focus of the Health Center is obstetrical care for a substantially underserved and high risk population.

## Northwestern Medicine® Announces New Glenview Outpatient Center

Northwestern Medicine® announced that it has opened a new Outpatient Center in Glenview, IL. At this new center, 20-30 physicians will offer patients a wide range of primary care and specialty clinical services.

Primary care services to be offered at the Glenview Outpatient Center include internal medicine and pediatrics. Specialty services will include cardiology, dermatology, gastroenterology, general surgery, neurology, oncology, ophthalmology, optometry, orthopaedics, otolaryngology, sports medicine and urology. Laboratory and X-ray services will be offered immediately with advanced imaging services—like MRI screens and CT scanning—to be offered by summer 2013.

A major clinical offering of this site will be Northwestern Immediate Care, which opens late spring. Immediate Care requires no appointment and accepts walk-in, or ambulatory, minor emergencies. It will address emergent ailments like flu and fevers, lacerations, strains and sprains and more. Major injuries and traumas should still be directed to full-service emergency rooms.

## Cover Story: Human Resources in 2013: Challenges Old and New

*Continued from page 1*

one discouraged the plaintiff from using the exception procedure. The White court ultimately rejected the plaintiff's claims because the hospital's process to report work done during unpaid breaks was reasonable. Employees who failed to use that process prevented the hospital from knowing it owed additional compensation, and therefore the hospital could not be held liable for unpaid wages and attorneys' fees to those individuals.

There are also "new" challenges in the discrimination law area to consider, particularly for those hospitals requiring mandatory flu vaccines. Mandatory vaccination programs at hospitals are generally permissible. However, an employer must provide "reasonable accommodations" for employees who are either: 1) disabled and for whom vaccination is contraindicated; or 2) have a "sincerely held" religious belief that prohibits the employee from getting the vaccine. If an employee refuses to get a mandatory vaccine on religious grounds, human resource professionals should keep in mind that it may not be clear what will constitute a "sincerely held" religious belief.

In *Chenzira v. Cincinnati Children's Hospital Medical Center*, the court rejected a motion to dismiss a religious discrimination claim by a hospital worker who was dis-

charged for refusing to have a mandatory flu vaccination, where the claimed religion was veganism. The former hospital worker contended that she could not get the flu vaccine because "she is a vegan, a person who does not ingest any animal or animal by-products." The hospital argued that, as a matter of law, veganism is a dietary preference or social philosophy, not a religion. The court disagreed, and found it "plausible" that the plaintiff's belief in veganism could be so sincerely held that it could equate to a "traditional religious view." It is important to note that the court did not rule in favor of the plaintiff on the merits, but the outcome will depend on further fact discovery.

In summary, hospital human resource professionals will face old and new challenges in the coming year, particularly in the areas of wage and hour compliance and potential discrimination claims. As always, regular wage and hour policy audits and advance legal review of termination decisions can help avoid costly employment litigation claims.

*Jody Boquist, a shareholder for Littler Mendelson, can be reached at [jboquist@littler.com](mailto:jboquist@littler.com) or (312) 795-3208 or visit [www.littler.com](http://www.littler.com).*

## Dr. John Levitt Joins Linden Oaks to Lead Eating Disorders, Self-injury Programs

John Levitt, Ph.D., has joined Linden Oaks at Edward as Clinical Director of the Eating Disorders and Self-Injury Programs. Dr. Levitt has worked with eating disorders, trauma and complex patients for more than 30 years. He has been an active participant in the field of eating disorders as a clinician, program developer, supervisor/trainer and presenter.

Dr. Levitt has taught widely, co-authored one book, co-edited three other books and authored numerous other publications. He has presented nationally and internationally on the topics of eating disorders, trauma, self-injury, complex symptomatology, assessment and intervention.



Dr. John Levitt

## Alexian Brothers Health System Names New President and CEO of St. Alexius Medical Center

Alexian Brothers Health System has named Leonard Wilk as the next President and Chief Executive Officer of St. Alexius Medical Center.

Wilk comes to Alexian Brothers Health System after more than 20 years with Aurora Health Care of Milwaukee, where he had served as President and Chief Administrative Officer of Aurora Medical Center in Grafton, WI since 2010. He earlier led two other Aurora Health Care hospitals in Sheboygan, WI and Milwaukee. He also served for more than four years as Vice President, Physician Support & Business Development, for Aurora Health Care.

Early in his career, he served as Director, Medical Staff Development, at St. Joseph's Hospital & Health Care Center in Chicago, and as Corporate Manager, Physician Support Services, at Franciscan Sisters HealthCare System in Little Falls, MN.



Leonard Wilk

## La Rabida CEO Brenda Wolf Named to State-Wide Board

La Rabida President and CEO Brenda Wolf was recently named to the trustee board of the Illinois Hospital Association (IHA), bringing more than 20 years of corporate leadership, government relations, and advocacy experience to the board. In 2011, Wolf was named La Rabida's CEO after a long-time stint as chief operating officer.



Brenda Wolf

## Cadence Health Names John Orsini as Chief Financial Officer

Cadence Health recently announced that John Orsini has been appointed Chief Financial Officer and Executive Vice President. Orsini comes to Cadence Health from Presence Health.

A licensed Certified Public Accountant, Orsini began his career in auditing for the Arizona Department of Health Services. He's held corporate finance positions at Catholic Healthcare West in Arizona, California and Nevada and served as Corporate Vice President, Finance and Treasurer at Scripps Health in San Diego.



John Orsini

## AHIMA Appoints Chief Operating Officer and Chief Financial Officer

The American Health Information Management Association (AHIMA) has appointed Deborah Green, MBA, RHIA, as Executive Vice President, Operations and Chief Operating Officer. Denise Froemming, CPA, MBA, CAE has been promoted to Executive Vice President and Chief Financial Officer.

With more than 20 years of HIM experience, Green joined AHIMA from LaVie Care, where she served as CIO for 10 years. Prior to her work at LaVie Care, Green led systems strategy and enterprise-wide initiatives for Mariner Post-Acute Network (now Sava Senior Care).

Froemming joined AHIMA in 2011 after serving in a variety of mission critical positions at the College of American Pathologists (CAP). Froemming rose to Director of Accounting, Tax and Operations during her tenure at CAP where she was primarily responsible for the integrity of the financial information and systems for the \$150 million healthcare organization.



Deborah Green



Denise Froemming

## Oak Forest Resident Named Nurse Manager of the Emergency Department

Advocate South Suburban Hospital is pleased to announce that Brad Daniels, R.N., B.S.N., has been named Nurse Manager of the Emergency Department.

Daniels has 14 years of emergency department experience, including 5 years at Advocate South Suburban Hospital's ED. He has more than 10 years of ED leadership and supervisory experience in roles such as Assistant ED Manager at South Suburban Hospital and ED Director at Weiss Memorial Hospital.

Daniels earned his Bachelor of Science in Nursing from St. Francis College of Nursing. He also served our country in the U.S. Navy for eight years, where he was trained as a naval firefighter.



Brad Daniels

## La Grange Memorial Hospital Foundation Names Three to Board

The La Grange Memorial Hospital Foundation has named Dr. May T. Chow, Michael D. Doepke and Lori A. Birkey to its board of directors.

Dr. Chow works with Nephrology Associates of Northern Illinois in La Grange. She is also the medical director of the Fresenius Medical Care Willowbrook Dialysis Unit and has worked with the medicine patient care committee at Adventist La Grange Memorial and Adventist Hinsdale hospitals.

Doepke is co-owner of Home Helpers Home Care in Hinsdale. He serves as vice president and board member with Aging Care Connections in La Grange and has worked as a board member with the Association of Senior Service Providers.

Birkey is the director of talent management with True Value Company in Chicago. She leads the Associate Board for True Value Foundation. She has a master's degree in psychology from Illinois State University and a bachelor's degree in psychology from Illinois Wesleyan University.



Dr. May T. Chow



Michael D. Doepke

## Sue Grelak Named Manager of Quality Improvement at Advocate South Suburban Hospital

Sue Grelak, RN, BSN, MSN, has been named Manager of Quality Improvement at Advocate South Suburban Hospital.

Grelak served as Coordinator of Quality Assurance at Advocate South Suburban Hospital since 2011. Her experience also includes 10 years at St. James Hospital in Olympia Fields, IL, where she was a Case Manager and then a Quality Improvement Analyst. In addition, Grelak has held a number of frontline nursing positions throughout her career.



: Sue Grelak



Lori A. Birkey

E-mail your administrative, staff and physician announcements to [judy@hospitalnews.org](mailto:judy@hospitalnews.org)

# Around the Region... Around the Region... Around the Region...

## Riverside's Watseka Specialty Services Hires New Family Nurse Practitioner

Riverside Medical Center is proud to welcome one of its own to the Watseka Specialty Services campus as a new family nurse practitioner. LaRee Shule, MS, APN/CNS, APN/FNP-BC, CCRN-CSC, CNRN, has more than 28 years of nursing experience with Riverside and recently earned her nurse practitioner certificate.

Shule completed her Bachelor of Science degree in nursing at Olivet Nazarene University. She received a Master of Science degree as a clinical nurse specialist in critical care from Governors State University and earned her Master of Science in Nursing as a Family Nurse Practitioner from Olivet Nazarene University.



LaRee Shule

## Vice President for Mission and Spiritual Care Appointed for Advocate Children's Hospital

Rev. Stacey Jutila, a staff chaplain at Advocate Christ Medical Center in Oak Lawn, has been appointed vice president of mission and spiritual care for Advocate Children's Hospital.

Rev. Jutila joined Advocate Christ Medical Center as a staff chaplain in 2007 and was later named a bereavement coordinator for the medical center. Previously, she served as a staff chaplain at Children's Memorial Hospital – now Lurie Children's Hospital – in Chicago.

She earned her Master of Divinity from the Lutheran School of Theology at Chicago and a Bachelor of Arts degree in medical anthropology from Middlebury College, Middlebury, VT. In addition, she completed hospital chaplaincy internship and residency programs at St. Mary's Medical Center, Duluth, MN and the Mayo Clinic in Rochester, MN.



Rev. Stacey Jutila

## Peggy Gilbertsen New Clinical Trials Recruitment Coordinator

Peggy Gilbertsen, R.N., is the Clinical Trials Recruitment Coordinator, a newly-created position within the Robert H. Lurie Comprehensive Cancer Center of Northwestern University's Clinical Research Office (CRO). In this role, Gilbertsen will develop a clinical trial recruitment program focusing on minority and underrepresented patients, and those patients historically excluded from participation in clinical trials.

Gilbertsen, an experienced Clinical Research Nurse with a long history at the Lurie Cancer Center, will create and distribute culturally-appropriate clinical trial educational materials for newly-diagnosed patients of all literacy levels. In addition, she will work closely with the Lurie Cancer Center's Office of Health Disparities and Special Population Initiatives to strengthen existing community partnerships and help establish new outreach initiatives.



Peggy Gilbertsen

## Gallagher Joins Illinois Hospital Association

The Illinois Hospital Association (IHA) welcomes Patrick Gallagher as Group Vice President, Health Delivery & Payment Systems. In this role, Gallagher is responsible for initiating and responding to key proposals for the transformation of Illinois health care. Specifically, he will provide policy, advocacy and analytical leadership on strategic policy, payment systems and health care reform issues affecting hospitals and health systems locally and nationally.

Gallagher comes to IHA from the Illinois State Medical Society where he was Vice President, Health Policy Research and Advocacy. Prior to that, he worked for the American Medical Association as Director, Physician Payment Policy and Systems. He has a MBA from Northwestern University and a bachelor's degree in Business Administration from DePaul University.



Patrick Gallagher

# Make a Difficult Discussion Easier

## Hospice Discussion Guide Gets Patients and Families Talking

Patients and families often need help understanding the facts about hospice. In fact, many people are confused about what hospice is and how to make the most of all it has to offer.

Filled with conversation topics, this **free downloadable guide** helps healthcare professionals address hospice issues with patients and their loved ones. It's a structured way to help patients and families make informed decisions about end-of-life care—and make a difficult conversation easier on everyone.

There are three easy ways to share this guide with your patients and their loved ones:

1. Download **Considering Hospice Care: A Discussion Guide for Families**, print it, then distribute it to appropriate patients or families when you visit with them.
2. Forward your patients the link so they can download the Guide at home.
3. Download the Guide and forward it to your patients as an attachment.

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**VITAS**



Download the Discussion Guide at [hospicecanhelp.com](http://hospicecanhelp.com) or scan the QR code with iPhone or Android.

For more information please call 1.800.723.3233



## GSU Now Offers Midwest's First Mindfulness and Psychotherapy Certificate Program

"We can spend our whole lives escaping from the monsters of our minds."

— Pema Chodron (Buddhist nun, author, and teacher)

More and more research studies indicate how mindfulness and meditation-based practices help clients in psychotherapy treatment achieve emotional regulation, modulate their anxiety and depression, lower their blood pressure, enhance their immune system, and increase concentration and attention span.

To that end, the College of Education and College of Health and Human Services of Governors State University (GSU) have joined forces to provide the first-of-its-kind program in the Midwest.

Mindfulness and Psychotherapy is a two-year, 18-credit-hour certificate program designed to teach post-master's level practitioners and advanced graduate students how to integrate mindfulness-based interventions into their clinical practice. The program combines classroom instruction, labs, and weekend retreats to enhance the skills and competency of licensed professionals in the mental, physical, or allied health professional fields.

Spearheading the Mindfulness and Psychotherapy Certificate Program are Maristela Zell, Ph.D., LCSW, Associate Professor of Social Work, and Tim Pedigo, Ph.D., University Lecturer in Psychology. Both academicians have received and are still undertaking extensive training in meditation and mindfulness practices; quite literally, they practice what they preach.

### First of Its Kind

"This is a unique certificate program," Dr. Zell stated. "Unlike the East and West coasts, the Midwest is a barren land for academic training programs of this nature."

"Our program is practical," Dr. Zell said. "Students are not only going to learn about these mindfulness practices, but they will also learn how to APPLY them to the populations they work with. That's a big emphasis of the program – the integration of mindfulness into the basis of their work."

The concept of mindfulness is nothing new to Drs. Zell and Pedigo. For the past four years, they have hosted weekly meditation sessions, as well as an annual symposium on Mindfulness in Higher Education for staff, faculty, and students on the south suburban campus. The Psychology Department at GSU has recently developed a special concentration in mindfulness studies. Renowned psychologist and "Emotional Intelligence (EQ)" expert Daniel Goleman also presented a seminar at GSU recently and Dr. Pedigo presented on "Mindfulness and EQ" as part of the event.

"We were seeing a whole lot of interest in the field among social workers, psychologists, mental health professionals in general, and other allied health professionals," Dr. Pedigo said. "When you think about the impact of mindfulness on concentration, attention, creativity, well-being, stress relief for students—you can see that this can add a whole other dimension to the work of people like us: people



Dr. Maristela Zell



Dr. Tim Pedigo

include:

- Post-master's level practitioners (e.g., social workers, addiction counselors, psychotherapists, marriage and family therapists), and other health-related professionals who currently work in clinical settings (e.g., occupational therapists, physical therapists and nurses); and

- Current master's level GSU students enrolled in clinically-oriented programs who are in their final year of advanced clinical practicum.

"It's really community-focused, since it can benefit the professional community and educate them in a new and exciting area. But it's also for our graduate students here," Dr. Pedigo said.

Additional instructors in GSU's Mindfulness and Psychotherapy Certificate Program include Jon Carlson, Psy.D., a Full Professor of Psychology at GSU; Barbara Gormley, Ph.D., Assistant Professor of Psychology at GSU; and David O'Donnell, MHS, a lecturer in the Addictions Studies and Behavioral Health Department at GSU.

For more information about GSU's Mindfulness and Psychotherapy Certificate Program, contact Dr. Maristela Zell at [mzell@govst.edu](mailto:mzell@govst.edu) or (708) 235-2235.

who work with people in pain, be it physical or emotional, as well as children and families," Dr. Pedigo said.

"We deal with a population not just of students, but people in general – who live very stress-filled lives. It's important they find ways to relieve their stress," Dr. Pedigo added.

### A Holistic Approach

The Mindfulness and Psychotherapy Certificate program emphasizes a holistic approach to education, Dr. Zell noted. "It's important to view both students and patients in a holistic way, not just in an academic way. Education, from our perspective, isn't just intellectual. We believe in teaching and caring for the full person, in terms of their growth and development as a human being. We're holistic educators, in that sense."

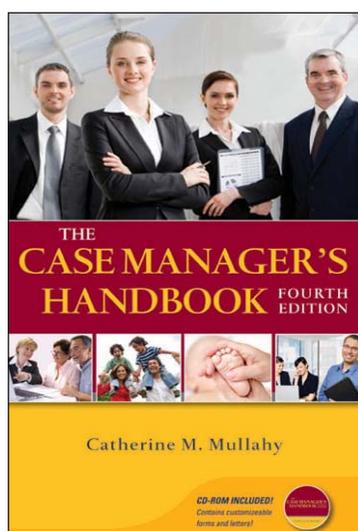
Currently those who are eligible to enroll in GSU's Mindfulness and Psychotherapy Certificate Program

## The Case Manager's Handbook Continuing Education Test Taken Online Now Approved for Continuing Education (CE) Credits

Mullahy & Associates, LLC has announced that *The Case Manager's Handbook Continuing Education Test*, which can be taken online, has been approved by the Commission for Case Management Certification for 60 Continuing Education (CE) Credits for CCM-certified case managers who take the test and want to maintain the active status of their CCM certification. In addition, *The Case Manager's Handbook Continuing Education Test* has been approved for 54 Continuing Education (CE) Credits for Registered Nurses (RNs), Social Workers (SWs) and Licensed Professional Counselors (LPCs) helping them to meet their respective states' licensing requirements relating to continuing education.

The CE-test is based on *The Case Manager's Handbook* authored by Mullahy & Associates President Catherine M. Mullahy, RN, CRRN, CCM. The 875-page text has become the definitive resource for information on "Best in Class" case management practices. This ultimate how-to-guide is widely used in colleges and university Schools of Nursing, by professional associations' and leading healthcare educational providers' continuing education programs, and for the in-house training programs of healthcare providers, managed care companies and other organizations.

Now in its fourth edition, *The Case Manager's Handbook*, provides a comprehensive overview on case management; how it developed, has evolved and how it should be practiced. The hardcover text is accompanied by a Free CD-ROM with customizable forms and letters. The CE-test is based solely on the book's content.



To purchase *The Case Manager's Handbook*, the CE-Test or both, visit [www.mullahyassociates.com](http://www.mullahyassociates.com) or call (631) 673-0406.

## AMA Physicians, Medical Students Urge Congress: Retain Funding for Residency Programs, Increase Training Positions to Address Doctor Shortage

Physicians and medical students from across the country are urging Congress to retain Medicare funding for graduate medical education (GME) programs, known as residencies, and to lift the cap on the number of available residency slots. As the nation deals with a physician shortage, it is important that all medical students can complete their training and care for patients.

"Residency training gives new physicians hands-on experience and provides high-quality care to patients," said AMA President Jeremy Lazarus, M.D. "Limiting the slots available to train physicians as they leave medical school creates a bottleneck in the system and prevents the physician workforce from growing to meet the needs of our nation's patients."

The demand for physicians will grow as the U.S. population continues to age, 30 million newly-insured Americans have increased access to health care services from the Affordable Care Act and life expectancies become longer.

Medical schools are expanding enrollment and making changes to prepare students for the future practice of medicine, and the AMA has announced a \$10 million initiative to further accelerate change in undergraduate medical education. But that is just part of the continuum of medical education essential to produce physicians ready to meet future demands. The number of GME slots has been frozen by the federal government since 1997. As a result, U.S. medical school graduates will exceed the number of available slots as soon as 2015.

## Loyola School of Nursing's Health Center Provides Needed Primary Care and Education in School Setting

Loyola University Chicago Marcella Niehoff School of Nursing faculty established a school-based health center in Proviso East High School more than a decade ago in response to growing health-care disparities in this underserved community. Since its inception, thousands of students have benefited from the center's primary health care, school physicals, immunizations and social work, mental health, nutrition and laboratory services.

"The school-based health center provides easy access to health-care and education for students who might not otherwise receive treatment and preventive services," said Diana Hackbarth, PhD, RN, FAAN, professor and SBHC project director, Loyola's Marcella Niehoff School of Nursing. "These resources have helped students thrive both inside and outside of the classroom."

Program highlights for the facility, which is supported by federal, state and private foundation funding, were recently featured in the 2011/2012 Annual Report for the School-Based Health Center.

### Lunch Program Protects Students Who Go to School Hungry

Many Proviso students go to school without eating breakfast. By lunch time, these students are famished. In response to this concern, the SBHC began offering



Loyola University Chicago medical student Joanne Tisak educates Proviso East High School students about concussions at a health fair sponsored by the school-based health center.

Lunch Bunch, a program that provides students with a balanced lunch accompanied by health and nutrition education three days a week. The program has been so successful that teachers and coaches have asked the SBHC registered dietitians to provide nutrition lessons to their classes and teams beyond the lunch period. Loyola faculty and students also offer a Lunch Bunch program strictly for teachers and staff once per semester to increase their awareness of nutrition education resources and SBHC services.

The center's nutrition programs also

include counseling, weight-loss guidance and junk-free zones where students eat nutritional snacks.

### Mental Health Care a Necessity for High School Students

High school is often a time when students struggle with peer pressure, substance abuse, bullying, depression, anger management and family issues. The SBHC staff provides mental health classroom presentations and individual therapy throughout the year to help students cope with these issues. The SBHC social work-

er and community outreach nurse also have taken these programs out into the community.

### SBHC Offers Alternative to In-School Suspension

In collaboration with the Proviso Dean of Students, the SBHC developed an alternative to the school's traditional suspension program. The Positive Interpersonal Relationships Aiming Towards Enhancements (PIRATE) Program teaches students conflict resolution, anger-management skills and coping and relaxation techniques to decrease future disciplinary action and to create a more positive school environment. Forty-one students were referred to the program from October 2011 to March 2012. Twenty-nine students completed the program, and 61 percent of these adolescents did not have additional suspensions.

### SBHC Cares for Future Proviso Students

The SBHC services have expanded beyond Proviso. Approximately 350 elementary school students in District 89, located in Maywood, Melrose Park and Broadview, recently received the flu shot from Loyola faculty and students. This effort took place through the Vaccines for Children program in preparation for what is expected to be a difficult flu season.

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## Cover Story: Psychiatric Mental Health Nurse Practitioner: New Program to Address the Needs in Illinois

Continued from page 1

immersion experience during the summer. In addition, the MSN degree for the Psychiatric Mental Health Nurse Practitioner will begin accepting students this fall. This is for the more traditional student who is interested in completing a master's degree in psychiatric mental health nursing. USF's online graduate nursing programs were recently ranked number one in Illinois by U.S. News & World Report.

The idea for the PMHNP program at

USF emerged from faculty who worked at the university's St. Francis Health and Wellness Center (HWC) and saw the unmet need for qualified mental health services for the chronically mentally ill and people struggling with multiple chronic conditions, including depression, addictions and bipolar disorders. The HWC exemplified a new nursing model of affordable holistic primary care services, with integration of mental and physical primary health care services for all regardless of employment status or income level.

The HWC restructured as the St. Francis Health Center in 2011 and in the summer of 2012 became affiliated with Aunt Martha's Federally Qualified Healthcare Center in Joliet so patients would have uninterrupted care. The model of being nurse-managed and providing interprofessional services remains, and the now-Aunt Martha's St. Francis Health Center will be one of the primary sites where PMHNP students from USF will be able to obtain their clinical experiences starting this summer.

PMHNP students at USF will develop specialty expertise in the care of vulnerable populations and develop outcomes-based comprehensive psychiatric/mental health programs of care. Online distance learners will have their clinical practica arranged in healthcare settings in their locale with specialists who may be PMHNPs, psychologists, or psychiatrists. PMHNPs can significantly impact the treatment of mental illness in Illinois by providing direct diagnostic evaluation and treatment, psychotherapy, consultation, case management, program direction, clinical research, education, and liaison services. Board-certified PMHNPs are licensed Advanced Practice Nurses (APNs)-- registered nurses with a graduate degree in nursing, who are prepared for advanced psychiatric/mental health practice in primary care throughout the lifespan in accordance with the ANA's scope and standards of psychiatric and mental health nursing. This practice includes independent and interdependent decision-making and direct accountability for clinical judgment. PMHNPs assess, diagnose, prescribe for and treat a variety of psychiatric, behavioral, and physical



BY DEENA NARDI, PH.D., PMHCNS-BC, FAAN, DORIS VAN BYSSUM, PSY.D., PMHNP, AND CAROL WILSON, PH.D., FNP-BC

conditions. PMHNPs from the USF program who have participated in didactic and clinical interprofessional education learning activities will "enable effective collaboration and improve health outcomes" (World Health Organization, 2010, p.7). PMHNPs can significantly relieve shortages in mental health care and providers, particularly in Mental Health Professional Shortage areas in Illinois.

*Dr. Deena Nardi is professor and director in the Doctor of Nursing Practice Program; Dr. Doris Van Byssum is assistant professor; and Dr. Carol Wilson is dean and professor - all in the John & Cecily Leach College of Nursing at University of St. Francis. For more information about the Psychiatric Mental Health Nurse Practitioner (PMHNP) program, contact Dr. Van Byssum at (815) 740-3668 or [dvanbyssum@stfrancis.edu](mailto:dvanbyssum@stfrancis.edu).*

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## Chamberlain College of Nursing Establishes New Campus in Tinley Park

Chamberlain College of Nursing is opening a new campus in Tinley Park, IL, and is now accepting applications for admission to the summer semester, which begins May 6, 2013. This new campus opening reinforces Chamberlain's commitment to increasing access to nursing education and addresses the growing demand for nurses in Illinois. The new Chamberlain Tinley Park campus offers an on-site Bachelor of Science of Nursing (BSN) degree program that can be completed in as few as three years of year-round study instead of the typical four years with summers off. The campus features Chamberlain's SIMCARE CENTERTM, which provides high-tech simulated patient care in clinical learning environments, and a Center for Academic Success, which provides students with comprehensive academic resources and support.

Bonnie Saucier, PhD, MSN, MEd, RN, serves as president of the new campus. Dr. Saucier brings to Chamberlain nearly 40 years of experience in nursing higher education in both instructional and leadership roles, most recently as associate vice president for academic affairs and dean of nursing and health sciences at Linfield College in Portland, OR.



Dr. Bonnie Saucier

For more information about Chamberlain College of Nursing's Tinley Park campus, visit [chamberlain.edu/tinleypark](http://chamberlain.edu/tinleypark).

## American Sentinel University Examines How BSN Degrees Help Advance the Nursing Profession

Nursing professionals play a vital role in transforming the U.S. health care system and those who hold advanced nursing degrees, such as a bachelor of science in nursing (BSN), possess a broader knowledge base of patient care, quality standards, business acumen and other skills that result in improved patient outcomes.

"The debate of the value of having a BSN versus an ADN (associate degree in nursing) has been ongoing in the nursing industry. Although both degrees fulfill the educational requirements to become a RN, a BSN degree offers nurses greater opportunity for career advancement, improved prospects for job mobility and security and higher potential earnings," says Cheryl Wagner, Ph.D., MSN/MBA, RN, associate dean of graduate nursing programs at American Sentinel University.

Today more hospitals are expecting RNs to be able to make business decisions that impact the bottom-line and patient outcomes, not just clinical or acute care.

"ADN programs prepare nurses for basic bedside clinical care of patients, which is slowly moving into the realm of the nursing assistant or the licensed practice nurse," says Dr. Wagner. "Registered nurses are required to know more about the overall condition of the patient as well as being able to work independently in the community and make leadership decisions."

She points out that with the massive explosion of health care knowledge in the

last decade and the expectation that it is only going to increase, nurses would be foolish to think they are adequately prepared for what lies ahead for them in just two years.

"There is no way that nurses can get all of the needed knowledge with only an ADN degree," adds Dr. Wagner.

In addition, many health care employers now require incoming nurses to have their BSN degree and while many employers still hire RNs with diplomas or associate degrees, Dr. Wagner says that there is a strong preference among employers today for more educated nursing candidates.

She adds that many career advancement opportunities are only open to nurses who hold BSN degrees.

A BSN degree makes RNs more desirable for advanced career options in nursing specialty fields such as pediatrics, geriatrics, forensics, informatics, case management, infection prevention and control and also offers an opportunity to explore a specific type of interest rather than just general practice.

Nurses who graduate with a BSN degree will also find it easier to enter faculty teaching positions, higher level administrative roles in hospitals or other health care environments and state and federal government nursing jobs.

"Some nurses find these roles are more satisfying, allowing the individual to affect change at a more global level than one-on-one nursing," says Dr. Wagner.

Most importantly, Dr. Wagner notes that advanced nursing degrees are important because the industry values education and credentials as part of its culture.

"Nurses with an ADN are not as well prepared to be contributing members of the profession, which dooms nursing to a role of following doctor's orders," adds Dr. Wagner.

Dr. Wagner says that without the needed background in leadership, nurses cannot sit at the table with physicians, CEOs and heads of departments to make the right decisions that impact nursing.

"Without the needed background in research, nurses cannot advance the knowledge base of the profession. Without the needed background in community nursing, they cannot help the poor and impoverished – as nursing was intended to do," says Dr. Wagner.

While an experienced, talented nurse with an ADN can move up the nursing ladder into management and leadership roles, those nurses with a BSN can make the climb a little less steep and much quicker.

"Whatever career path nurses take, the essential wisdom is for them to continue enhancing their skills and education so that their community, organization and patients benefit from their broadened view of the world," adds Dr. Wagner. "Nurses have to step up to the plate or the ability to make decisions about the nursing profession will be taken from their hands."

## The Resource Guide

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# Accolades Accolades

## Hospital Painter a Handyman All His Life

Adventist Bolingbrook Hospital painter Michael Woodruff remembers trailing along with his father when he'd have a job to paint a place.

He was around 8 years old when he started going with his brother and father on commercial painting jobs, too young to paint yet, but he could prep a site, scraping off the old paint before his dad would put on a fresh coat. Two years later, Woodruff would join his father, brush in hand. Woodruff was recently named employee of the year for 2012 at Adventist Bolingbrook Hospital. Woodruff has worked in the health care industry for 11 years, working at an area nursing home just prior to joining the hospital staff in October 2007. When the hospital job arose, he applied hoping to grow his professional knowledge.



Michael Woodruff

## No Problem Too Great for Financial Services Employee

Jon Varriale is not one to give up on a problem quickly. It's the competitive streak in him that often makes him a terror at playing games with other people. This willingness to tackle difficult situations helped lead Varriale to being named the employee of the year for 2012 with Adventist Health Partners. He works in Adventist Midwest Health's regional office in Bolingbrook. Varriale was honored along with other employees of the year at an Adventist Midwest Health, receiving a plaque and a \$1,000 award.

Varriale works in patient financial services, and spends many of his days running needed reports or solving technical computer problems for his co-workers.



Jon Varriale

## Edward Hospital Registered Nurse Named Top National Winner of Cherokee Inspired Comfort Award

Cherokee Uniforms recently announced that Jill Zuleg, an obstetrical registered nurse (RN) with Edward Hospital, is a winner of its 10th annual Cherokee Inspired Comfort Award. Jill is among five healthcare professionals across the country to be named an award winner, selected for their impact on the lives of others through extraordinary patient care, sacrifice and innovation while serving as an inspiration to others. Jill is the top national winner of the Cherokee Inspired Comfort Award in the RN category.

Jill has taken her experience of the ultimate tragedy – the loss of a child – and turned it into a program that honors her son by helping others going through the unthinkable, selfless decision of donating a loved one's organs. When her son Kyle was tragically killed by a falling tree limb, Jill and her husband opted to donate his organs in order to share the gift of life with five recipients. The long process of keeping Kyle on life support while matches for organs were found was extremely difficult emotionally. To support other grieving families going through this process, the Zulegs established the Kyle Zuleg Foundation. The Foundation, in partnership with the Gift of Hope Organ and Tissue Donor Network, provides comfort in the form of warm blankets and gift baskets as families spend final long hours at the bedside of their loved one. The blanket design includes the words "Forever in Our Hearts." Jill's hope is that the blankets provide a tangible sign of appreciation for the incredible gift of organ donation. Jill has also created the Kyle Zuleg Foundation Annual Scholarship, which is offered to high school seniors who will major in the same field that Kyle intended.



Jill Zuleg

## A Leader in Improving Care for Older Adults

Rush Oak Park Hospital is now one of 10 hospitals in Illinois to have earned New York University College of Nursing's Nurses Improving Care for Healthsystem Elders (NICHE) designation. Most patients at Rush Oak Park Hospital are 65 or older, and caring for this patient population has long been a priority. Primary care physicians specializing in geriatric medicine seek to help adults through the changes that come with aging, taking into account not only medical issues but other underlying concerns—for instance, social, financial or mental—that can impact overall health. Through Age-WISE, doctors and nurses offer free community outreach and education on topics of particular interest to older adults. Now, through the NICHE program, Rush Oak Park Hospital's goal is to be recognized as a leader in holistic health care that's sensitive to the unique needs of older adults across the continuum of care. As part of that goal, it has committed to practicing evidence-based care centered on the patient and family.

## Brian Cole, M.D., Named One of the Best in Sports Medicine

The chairman of Rush Oak Park Hospital's Department of Surgery was selected as one of the top 19 sports medicine specialists in the country, according to a new report in Orthopedics This Week. Brian Cole, M.D., sports medicine and cartilage restoration orthopedic surgeon at Midwest Orthopedics at Rush, was appointed chairman of the Department of Surgery at Rush Oak Park Hospital in 2011 and has been seeing patients in Oak Park since he joined the medical staff in 1997. As team physician for the Chicago Bulls, last year Dr. Cole performed knee surgery to repair Derrick Rose's torn ACL. He is also co-team physician for the Chicago White Sox and DePaul University, and a professor at Rush University Medical Center, where he is section head of the Cartilage Research Program in the Department of Orthopedic Surgery.



Dr. Brian Cole

## David W. Hecht, M.D., Named Loyola's Senior Vice President for Clinical Affairs and Chief Medical Officer

David W. Hecht, M.D., MS, MBA, has been named Senior Vice President for Clinical Affairs and Chief Medical Officer for Loyola University Health System (LUHS). Dr. Hecht has been serving as interim Senior VP for Clinical Affairs since January, 2012. Dr. Hecht, who joined Loyola in 1988, is the John W. Clarke Professor of Medicine and Chair of the Department of Medicine of Loyola University Chicago Stritch School of Medicine. Dr. Hecht will continue to serve as department chair until a replacement is named. Dr. Hecht, an infectious disease specialist and internationally known researcher, is also a staff physician at Edward Hines, Jr. VA Hospital. He also serves as a member of the Board of Directors of The Clinical and Laboratory Standards Institute, Wayne PA.



Dr. David W. Hecht

## Cadence Health Names Margo Shoup, M.D., Medical Leader of the Cancer Program and Medical Director of Surgical Oncology

Cadence Health recently announced that Margo Shoup, M.D., has been appointed Medical Leader of the Cancer Program, Cadence Health, and Medical Director of Surgical Oncology, Cadence Physician Group. Dr. Shoup joins Cadence Health after 10 years at Loyola University Medical Center (LUMC) where she served most recently as the Chief of Division of Surgical Oncology and was the vice chairman for clinical outcomes research in the department of surgery and assistant dean for clinical and translational research.



Dr. Margo Shoup

## Internal Medicine Physicians Join Northwestern Memorial Physicians Group

Internal medicine physicians Larry Kaskel, M.D., Monika McLain, M.D., and Lisa Newman, M.D., of Deerpath Primary Care have joined Northwestern Memorial Physicians Group. Dr. Kaskel founded Deerpath Primary Care in 2001 and established the Heart Attack Prevention Center within the practice in 2005, where he served as medical director. He was a staff physician at Deerpath Medical Associates from 1999 to 2001 and has been an attending physician at Northwestern Lake Forest Hospital since 1999. Dr. McLain co-founded Deerpath Primary Care in 2002 with Dr. Kaskel and was a staff physician at Deerpath Medical Associates from 1995 to 2001. She has been a member of the Northwestern Lake Forest Hospital medical staff since 1991. Dr. Newman has been an attending physician at Deerpath Primary Care since 2004. Previously she served as an attending physician in the department of family medicine at West Suburban Hospital and a faculty member at West Suburban Hospital Family Practice Residency Program.



Dr. Larry Kaskel



Dr. Monika McLain



Dr. Lisa Newman

## New Medical Director of Anesthesia Appointed at OSF Saint Elizabeth Medical Center

Nelson Arnold, M.D., has accepted the position of medical director of the anesthesia department at OSF Saint Elizabeth Medical Center. He was honored as "Most Outstanding Resident" at The Brookdale Hospital Medical Center in Brooklyn, New York prior to joining the staff at OSF Saint Elizabeth. Dr. Arnold attended the University of Illinois as an undergraduate. He has been employed with OSF Saint Elizabeth since 2011.



Dr. Nelson Arnold

## DuPage Medical Group Adds Physician, Services in Plainfield

DuPage Medical Group (DMG) continues its expansion with the addition of a new family practice physician, as well as new service offerings, at its location in Plainfield, IL.

Dr. James Bell is a board-certified family medicine doctor with more than 10 years of experience practicing in Chicago's western suburbs. Bell earned his medical degree from Loyola University Stritch School of Medicine in Maywood, IL, and completed his residency at the Adventist LaGrange Memorial Hospital Family Residency Program in LaGrange, IL.



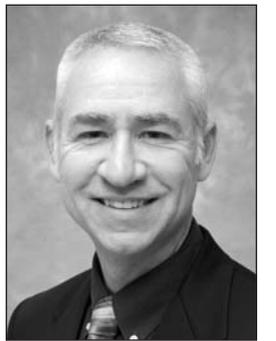
Dr. James Bell

## National Melanoma, Breast Cancer Expert Appointed Medical Director of Christ Medical Center Cancer Institute

A physician nationally known for the study and treatment of melanoma and breast cancer has been appointed medical director of the Advocate Christ Medical Center Cancer Institute.

Adam I. Riker, M.D., FACS, an Advocate Medical Group physician who has been leading and developing Christ Medical Center's melanoma program since 2011, takes the reins of a Cancer Institute that has been achieving tremendous growth and attaining national prominence.

Before his recruitment to Christ Medical Center in 2011, Dr. Riker was medical director of cancer services for the Ochsner Cancer Institute in New Orleans. He also served previously as director of cancer screening programs for the Ochsner Health System; director of the comprehensive breast cancer program at Ochsner-Baptist Medical Center; chief of surgical oncology at the Mitchell Cancer Institute of the University of South Alabama; and assistant professor of surgery in the department of interdisciplinary oncology, cutaneous oncology and comprehensive breast cancer program in the H. Lee Moffitt Cancer Center and Research Institute.



Dr. Adam I. Riker

## Advocate Lutheran General Hospital Welcomes General Surgeon Fabio Sbrana, M.D.

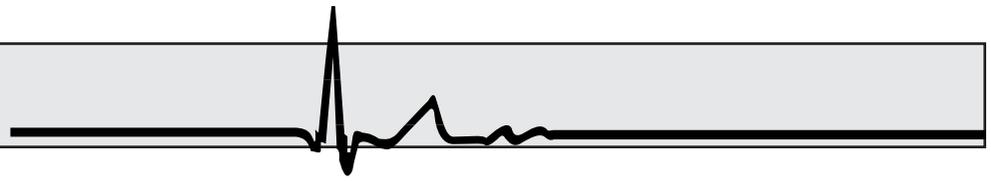
Advocate Lutheran General Hospital is pleased to welcome general surgeon and da Vinci® robotic system expert Fabio Sbrana, M.D. He is seeing patients at AMG – Park Ridge – General Surgery and The Center for Robotic Surgery at Advocate Lutheran General Hospital in Park Ridge, IL. Dr. Sbrana studied medicine at Pisa University in Pisa, Tuscany-Italy. He completed a residency in digestive surgery and surgical endoscopy at Pisa University and in thoracic surgery at University of Siena in Siena, Tuscany.

## Two Physicians Join Presence Saint Joseph Medical Center

Presence Saint Joseph Medical Center is pleased to welcome Sandhya Seetharam, M.D., and Kishore Karamchandani, M.D., who will be providing services in Joliet and surrounding communities.

Dr. Seetharam, Internal Medicine, received her medical degree from the Kempegowda Institute of Medical Sciences, Bangalore, India. She completed her residency at Westlake Hospital, Melrose Park, IL.

Dr. Karamchandani, Telemedicine, is board certified in Internal Medicine. Dr. Karamchandani received his medical degree from Bombay University, Bombay, India. He completed his residency at Mount Carmel Medical Center and his fellowship at Loyola University Medical Center.



## Riverside Medical Center Performs Area's First LARIAT Procedure

**P**aul Rather, of Chesterton, Indiana, was just 68 years old when he suffered a stroke. Fortunately this was a minor stroke with no permanent effects, but since the stroke could be aggravated by his blood thinning medication, he could no longer take them as treatment for his Atrial Fibrillation.

A-fib, a common type of heart rhythm disorder in which the heart has an irregular fast rhythm, causes serious complications including heart failure, stroke and early death. A-fib related deaths have increased over the past two decades and now account for one-quarter of all strokes in the elderly.

"Without the blood thinners, I was just kind of rolling the dice," said Rather. "I felt like a walking time bomb. I could have thrown a blood clot and had another stroke or die."

During a routine check of Rather's pacemaker, he learned from his nurse practitioner that Dr. Brad Suprenant, DO with Midwest Arrhythmia Consultants was working on a new procedure at Riverside Medical Center that could prevent blood clots in the heart.

The procedure, known as LAA occlusion, is performed using the FDA-approved LARIAT® Suture Delivery Device.

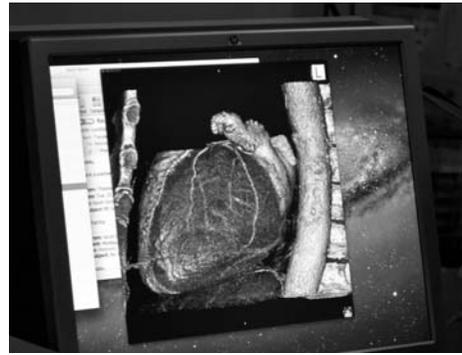
"Essentially we are tying off the area where the most blood clots leading to

stroke in patients with A-fib," said Cassie Brown, Riverside Cardiac Cath Lab nurse manager. "We use a suture that looks like a lasso to tie it off so those clots can't form and subsequently travel."

The act of tying off the left atrial appendage (LAA) is not new; however, it used to only be done through open heart surgery. The LARIAT® procedure is performed in a cardiac cath lab. Dr. Suprenant, and Dr. Vikas Patel of Cardiovascular Consultants inserted a catheter under Rather's rib cage into the sac around the heart. The suture to tie off the LAA was delivered through that catheter. Another catheter was inserted in a blood vessel in the groin up into the heart, and positioned inside the LAA. This catheter was used to guide the suture over the LAA. The outpatient procedure took just two hours.

"Any time we can offer our patients an outpatient procedure instead of surgery, we are decreasing the risk of infection and complication. Recovery times are generally faster and patients can get back to living their normal lives sooner," said Dr. Suprenant.

"I went home the next evening with nothing more than what looked like a mosquito bite on my chest," said Rather. "What little pain I had, the nurses and staff at Riverside took care of. They were wonderful people."



In this image of Rather's heart, the top right area is the left atrial appendage, or the area closed off during the first LARIAT procedure at Riverside Medical Center.

A common treatment method for A-fib is drug therapy, but some patients cannot tolerate the drugs or the side effects cause too much risk. Because Rather had already had a bleeding-type of stroke, he was no longer a candidate for blood thinners, leaving him with no options—until he heard about the LARIAT® procedure.

"With this procedure, we are eliminating the number one source of heart related stroke and avoiding the potentially serious side effects of blood thinners," said Dr. Suprenant.

The procedure was approved by the FDA in May 2009. Riverside is one of five hospitals in Illinois performing the procedure.



Drs. Brad Suprenant (right) and Vikas Patel review the film and discuss deploying the LARIAT device as part of the outpatient procedure performed in Riverside Medical Center's Cardiac Cath Lab.

"Dr. Suprenant put in my first pacemaker in 1997. I felt that he wouldn't be suggesting [this procedure] if he didn't think I needed it," said Rather. "I would encourage others to do it, even if just for peace of mind. They told me I wasn't supposed to feel different, but I feel better than I have in a long time."

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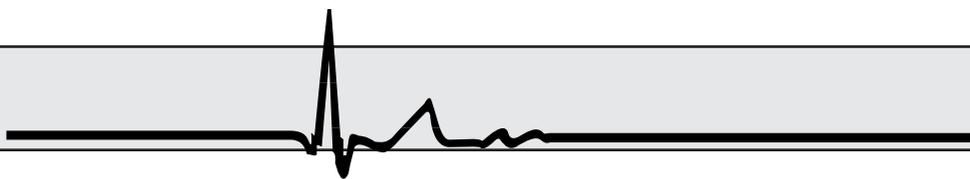
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## It Takes a Village: Physicians and Employees Celebrate TAVR Teamwork



Patients with aortic stenosis who need a transfemoral aortic valve replacement (TAVR) may never know all of those people behind the scenes who care for them. But the teamwork involved in performing this new, less invasive transcatheter procedure to restore normal blood flow through the aortic valve is enormous.

"It's not typical to have so many people required for just one procedure," said Jean Skelskey, RN, Valve and Structural Heart Coordinator at NorthShore University HealthSystem (NorthShore) who explained that most procedures may involve no more than five to 10 team members. That is the reason why a group of the nearly 40 NorthShore physicians and employees who make up the TAVR team came together for a group photo.

The multidisciplinary team includes interventional cardiologists, cardiovascular surgeons, echo cardiologists, neurologists, imaging radiologists and anesthesiologists, who together provide a comprehensive evaluation of each patient.

"In addition to these physicians, the team involves advanced practice nurses, research nurses, physician assistants, and staff from the cardiac catheterization lab, cardiac imaging, radiology, the intensive care and cardiac care units, and the operating room," said Ted Feldman, MD, Director of the Cardiac Catheterization Lab.

NorthShore began the TAVR procedure five years ago as part of a research trial and this is the second time the team has gathered together for a group photo.

"I am truly excited to be part of such new and innovative technology at the imaging level," said Amy Daily, CT technician, a team member who plays a key role in helping visualize a patient's vascular access for procedure planning. "It's an impressive team, and I'm proud to be part of it from the ground up."

## Loyola Point-of-Care Aids Emergency Cardiac Patients

Hannah Gorman had been feeling unwell for several days but when she awoke to chest pains at 3:30 a.m., the Oak Park resident took action. "I believed I was having a heart attack," said the 20 year-old nursing student. "I am aware of the medical symptoms from my medical training and I also have a family history of heart disease."

Gorman was taken immediately to Loyola University Health System's Emergency Department where a physician utilized point-of-care technology. "Swift assessment of patients complaining of chest pain means faster treatment and improved outcomes," said Mark Cichon, D.O., chair, Loyola department of emergency medicine, whose team cared for Gorman. Using a hand-held device, the physician took a single blood sample that was used to analyze cardiac troponin, an indicator of heart disease, as well as blood glucose and blood gas levels. Results were available within minutes.

"I felt immediately cared for because the staff was taking action and, in minutes, I learned my test results and course of action for care," the St. Louis University junior said. "Time matters in heart treatment and Loyola made each second count in my favor."

Loyola is the only academic medical center in Chicago to offer appropriate emergency department patients point-of-care testing. "Loyola is currently also testing use of the point-of-care testing in ambulances to help speed the diagnosis of heart disease which speeds the initiation of lifesaving care," said Cichon, who has directed Loyola's ED for the past 17 years. "Key to our research is that the accuracy of the results in the moving ambulance are equal to those conducted in the emergency department."

## Survey Finds 40 Percent of Free Clinic Visits Related to Heart Disease

Forty percent of all patient visits to free clinics – two out of every five visits – are for cardiovascular disease, according to clinics surveyed by the global health and disaster relief organization AmeriCares. Free clinic officials also reported 50 percent of their patients have high blood pressure – much higher than national averages for the uninsured. Nationwide, 20 percent of uninsured adults in the U.S. have hypertension, according to the latest U.S. Centers for Disease Control and Prevention statistics. AmeriCares is releasing the findings to raise awareness about the prevalence of heart disease among free clinic patients during American Heart Month.

The online survey was sent to 318 free and charitable clinics that receive donated medicines and supplies from AmeriCares U.S. Medical Assistance Program to better inform its donations of prescription and over-the-counter medicines. More than half of the clinics responded to the survey, representing 18 percent of all free clinics nationwide.

"While it's been well documented that low-income, uninsured Americans are disproportionately affected by chronic disease, the survey results are startling because of the degree of disparity," said AmeriCares Director of U.S. Programs Leslie McGuire. "More research needs to be done to determine why so many free clinic patients have heart disease so that interventions specific to this vulnerable population can be developed."

"There is a wealth of data on the uninsured in the United States, but there is very little information specific to free clinics and the patients they serve," McGuire said. "As we expand our work in the United States, we are doing more surveys of this kind to guide our aid deliveries."

The survey backs up a previous AmeriCares study that identified caring for patients with heart disease as a major burden for safety net clinics. Clinic directors surveyed in 2011 ranked cardiovascular medicines as among their top needs, second only to diabetes medications. The AmeriCares 2011 survey of free clinics nationwide found more than half were forced to turn away eligible patients due to resource constraints such as limited medical and support staff, expensive lab tests and medications, inadequate facility space and declining financial support.

## Taking a Chilly Approach to Treating Heart Rhythm Disorders

You may get a cold heart, but doctors at Advocate Christ Medical Center say that could prove the best treatment for a common heart rhythm disorder.

Using a device called the Arctic Front Advance™ Cardiac CryoAblation Catheter, physicians at Christ Medical Center are releasing a coolant inside a small balloon, which is placed in the left atrium of the heart, to treat paroxysmal atrial fibrillation (PAF). PAF is a disorder in which the heartbeat sporadically goes out of rhythm – seems to skip beats, flip-flop or quiver – before returning to normal. The coolant, delivered in the form of a gas, drops the temperature of the heart tissue to approximately minus-40 degrees Centigrade. The freezing prompts formation of scar tissue and destroys the cells creating abnormal electrical signals that result in atrial fibrillation.

Until now, physicians have relied on the use of radio-frequency ablation, a traditional, minimally invasive procedure that applies heat to the offending heart cells that are causing the A-fib. However, the new, arctic-therapy technology is resulting in a shorter procedure time and allowing physicians to treat the triggers of atrial fibrillation safely and more effectively, according to Manoj Duggal, M.D., cardiologist specializing in electrophysiology at Christ Medical Center.

To apply the freezing gas to the heart, the cardiologist inserts a catheter into the patient's femoral vein in the groin area and then threads it up to the heart under the guidance of ultrasound and X-ray imaging. When the pulmonary vein has been reached on the left side of the heart and then isolated, physicians use an inflatable balloon on the catheter to release the coolant and create the scar tissue, thereby killing the cells that trigger abnormal electrical signals.

Both the hot (radio-frequency) and cold (cryoablation) procedures work well for specific patients, Dr. Duggal emphasized. "What's important is that we now have great flexibility to choose the right procedure for the individual patient and consistently achieve the best possible outcomes."

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## What Does Heart Health Mean for You?



BY CLYDE  
YANCY, M.D.

In today's world, health and healthcare have now become everyday words. All of us are engaged in discussions about how we pay for healthcare, i.e., more taxes (!), and preserve health. Frankly, some of this is frightening. As much as we have debated health care reform, it is clear that we should be focused on health reform. So let's go back to the basics and adopt a disruptive new direction that saves money and saves lives.

Heart and blood vessel diseases represent the largest health dilemma for adults. But, it really doesn't have to be this way. News flash - you don't have to die from heart disease. Today, we fully understand how to prevent these diseases and when heart and blood vessel diseases do occur, we can now treat those illnesses better than ever. The sizzle is in our new procedures, sophisticated new diagnostics and breakthrough drug discoveries but the substance is in prevention. No matter how good we are at treating heart diseases - (and we are good with 50% fewer deaths due to heart disease in the last 20 years) - it is still better to not have heart disease.

There is a wealth of new information that makes it clear - if we can just make it to middle age with the fewest risk factors for heart disease, we can avoid heart disease and anticipate a much longer life of good quality and high productivity. And if we already have risk factors or have established disease, we can reduce the consequences just by focusing on lowering our risks. The even more provocative news here is that the same avoidance of risk for heart disease leads to a lower incidence of cancer. That takes care of the top two leading causes of death and disability in this country. This message should really get your rapt attention now.

#### HERE IS WHAT YOU NEED TO KNOW:

- 1) Don't smoke. Period.
- 2) Have a moderate level of physical activity. No need to join a health club or invest in a trainer. Just spend time, 30 minutes per day, walking.
- 3) Weight. This is the friction point for so many of us but it's

also the greatest opportunity. There are so many approaches and so many defined "plans" - just watch late night cable TV! Make it simple - "do more and eat less". But be patient. Losing 2-3 lbs per month equals 25-30 lbs in a year. That amount of weight loss translates into major health benefits - lower blood pressure, lower likelihood of diabetes and a better quality of life.

4) Diet. Again, this area can get confusing and even frustrating so make it simple; portion control. Ultimately the key consideration is calorie intake. If you can't see the bottom of your plate, there is too much food on it. Don't "biggie" anything. And certain kinds of calories are especially troublesome including sugar sweetened beverages, complex carbohydrates and saturated fats, trans fats especially so. Look at the labels or ask about the nutritional content of your meals. It is very hard to burn off a 1500 calorie "snack", "quick bite to eat", or "great dessert". And if you plan to have a big celebratory meal, e.g., steak dinner, which is about 2500 calories, think at least a half-marathon of exercise. Do try to focus on lean meats, fish, lots of fruits and vegetables and make water your go-to liquid.

5) Know your numbers. Much like you know your social security number, your address and your cell phone #, know your blood pressure, cholesterol level and blood sugar level and review the results with your health care provider.

We've learned that the majority of our risk for heart disease really comes from our decision-making - what we eat, how we manage our weight and how we spend our time. A small investment here has a big return. Let's think about becoming more aware of our risk for heart disease and avoiding those risks. The payoff is huge and it is now more than just avoiding disease, it involves having a better quality of life, saving our health and health care system and maybe even lowering our tax bills.

Dr. Clyde Yancy is the Chief of Cardiology at Northwestern's Bluhm Cardiovascular Institute. For more information about the Bluhm Cardiovascular Institute, call (312) 695-4965 or visit us online at [www.heart.nmh.org](http://www.heart.nmh.org).

## Cover Story: Does It Matter That "Boys Will Be Boys and Girls Will Be Girls" or Are We All Indeed Equal?

Continued from page 1

differences and what impact do they have on how heart disease is prevented, recognized, or treated?

Sex hormones, such as estrogen and testosterone, indeed play a role. Notice the use of "a", not "the", because interventions like surgical menopause (hysterectomy) diminish the "female advantage". The sex hormone story is complicated - testosterone replacement can be beneficial for men but not women, and vice versa for estrogen. The estrogen story for women wouldn't be complete without including other hormones, especially progesterone, or considering the biological reasons for monthly fluctuations in hormone levels. What has been discovered recently is that cells have sex. Not "reproductive sex", silly! Sex - as defined by their genes - XY for males and XX for females. While every cell in the body is so marked, most researchers did not think it mattered beyond reproductive function.

We were wrong.

This genetic marker makes cells in the cardiovascular system respond in sex-specific ways, even when the cells are grown in the absence of sex hormones. Cells "sex" makes no difference when you're healthy. The differences show up when the system is stressed - by emotional stress, exercise, aging, pregnancy and disease. That is when the implications of sex differences become

important.

Lining all blood vessels, creating the barrier between circulating blood and metabolizing tissue, and generating a variety of substances vital to vascular function are the endothelial cells. These cells are like the members of an orchestra that all play music, but not by using the same instruments. Studying endothelial cells from a single organ, in the absence of hormones, can reveal sex differences with respect to size, growth rate, stiffness, cell signaling molecules, protein expression and cellular responses. As an analogy, the entire orchestra may sit on the same stage, a jazz piece may only call on members of the wind section, whereas a baroque piece may call largely on the strings with an occasional voice from the wind instruments. What we need to find out now is whether these differences persist or change in endothelial cells from diseased individuals or whether they can alter cardiovascular function.

And that discovery could lead to sex-specific medical care.

Dr. Virginia H. Huxley, Director of the National Center for Gender Physiology at the University of Missouri, can be reached at (573) 882 8069 or [huxleyv@health.missouri.edu](mailto:huxleyv@health.missouri.edu).

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## ADVOCATE GOOD SAMARITAN HOSPITAL

### Apoor Gami, M.D.

Dr. Apoor Gami is a cardiac electrophysiologist at Advocate Good Samaritan Hospital in Downers Grove and Advocate Medical Group – Midwest Heart Specialists. Dr. Gami completed his internship and residency in internal medicine with a fellowship in cardiovascular disease and cardiac electrophysiology and pacing at Mayo Clinic in Rochester, Minn. He is board certified in internal medicine, cardiovascular disease and cardiac electrophysiology. Dr. Gami is on the cutting edge of treating abnormal heart rhythms with the latest procedures.



### Peter Kerwin, M.D.

Dr. Peter Kerwin is the medical director of the cardiac catheterization laboratory at Advocate Good Samaritan Hospital in Downers Grove. His development of the Cardiac Alert protocol has helped to generate industry-wide improvements in American health care. Dr. Kerwin graduated from the University of Illinois at Chicago College of Medicine, Chicago, and completed a residency in internal medicine and fellowship in cardiovascular diseases at Loyola University Foster McGraw Hospital, Maywood. In addition, he was chief cardiology fellow and fellow of interventional cardiology and angioplasty. Dr. Kerwin is board certified in internal medicine, cardiovascular disease and interventional radiology.



## RIVERSIDE MEDICAL CENTER

### Brad Suprenant, D.O.

Dr. Brad Suprenant could be called a pioneer at Riverside Medical Center in Kankakee, Illinois. He has brought two very new procedures to Riverside in the last 18 months - implantation of the MADIT-CRT, or Multicenter Automatic Defibrillator Implantation Trial – Cardiac Resynchronization Therapy, and the LARIAT® procedure.

“I have a passion for finding solutions to patients’ complex arrhythmia problems. Cardiac electrophysiology is such a challenging and dynamic field. The science is ever changing with new technology, techniques and principles. With the current procedures available and a seemingly endless horizon of innovations, for me, there’s nothing better than being able to tell a patient he or she can look forward to getting better.”

Dr. Suprenant, of Midwest Arrhythmia Consultants, specializes in clinical cardiac electrophysiology. He received his medical degree from Chicago College of Osteopathic Medicine Medical School. He completed his residency and fellowship at Olympia Fields Hospital and Medical Center. He currently holds a teaching appointment with the Midwestern University College of Allied Health Professions.



### Vikas Patel, M.D.

Dr. Vikas Patel of Cardiovascular Consultants in Kankakee, Illinois cares about his patients’ recoveries and outcomes. The doctor, who specializes in interventional cardiology, has played a role in multiple new procedures at Riverside Medical Center in Kankakee.

“As medicine advances, so do the techniques and the way we think about caring for the heart,” said Patel. “Many of these advances make the experience less traumatic and safer for the patient.”

Dr. Patel, who is also certified in internal medicine, cardiovascular disease and nuclear cardiology, received his medical degree from Ross University School of Medicine. He completed his residency at the University of Illinois as well as two fellowship programs at the University of Illinois at Chicago—the first in cardiology and the second in interventional cardiology.

Patel recently performed his first LARIAT® procedure, in which the left atrial appendage is tied off through the use of two catheters, at Riverside. Last year he was one of the first doctors in the area to repair atrial septal defects (ASD) and patent foramen ovale (PFO) using a minimally invasive approach.



## INGALLS MEMORIAL HOSPITAL

### Andy C. Lin, M.D., Ph.D.

Andy C. Lin, M.D., Ph.D., brings his considerable expertise in cardiac electrophysiology (EP) to the medical staff of Ingalls Memorial Hospital in Harvey, where he offers sophisticated treatment for a wide range of arrhythmias.

Dr. Lin has extensive experience in the use of three-dimensional electro-anatomic mapping systems and catheter ablation technologies to diagnose and treat atrial flutter, atrial fibrillation, paroxysmal supraventricular tachycardia and ventricular tachycardia. He also implants permanent pacemakers, cardioverter-defibrillators and bi-ventricular cardiac resynchronization devices for advanced heart failure.

A Florida native, Dr. Lin trained at some of the most prestigious university medical centers in the country, including New York Presbyterian Hospital - Weill Cornell Medical Center, where he completed fellowships in both Cardiovascular Diseases and Clinical Cardiac Electrophysiology.

Dr. Lin is a member of the Heart Rhythm Society, a respected researcher and published author on catheter ablation of atrial fibrillation. He is in practice with Advanced Heart Group.



### Edgar Chedrawy, M.D., MSc, FRCSC, FACS, MHA

An accomplished cardiovascular and thoracic surgeon, Edgar Chedrawy, M.D., recently joined the medical staff of Ingalls Memorial Hospital in Harvey. Dr. Chedrawy has special expertise in heart failure, minimally invasive heart valve repair and replacement, and video-assisted thoracic procedures for lung cancer and non-malignant intrathoracic diseases.

A noted author and lecturer on cardiovascular and thoracic issues, Dr. Chedrawy has published numerous articles and book chapters. In addition to performing surgery, Dr. Chedrawy serves as associate professor at the University of Illinois Department of Surgery.

He received his medical degree from Dalhousie Medical School in Halifax, Nova Scotia, and completed a cardiac surgery residency at McGill University in Montreal. Dr. Chedrawy went on to complete a fellowship in cardiopulmonary transplantation/mechanical circulatory support at Stanford University. He is a fellow of the Royal College of Surgeons in Canada and the American College of Surgeons.

Dr. Chedrawy is in practice with Cardiac Surgery Associates, SC.



## CARDIOLOGIST NAMED MEDICAL DIRECTOR OF NORTHWESTERN MEDICINE® GLENVIEW OUTPATIENT CENTER

Cardiologist Micah J. Eimer, M.D., FACC, has been named medical director of Northwestern Medicine’s® newest north suburban clinic, the Glenview Outpatient Center, which officially opened March 1. Dr. Eimer joins the medical staff of the Bluhm Cardiovascular Institute at Northwestern Lake Forest Hospital.

Board certified in internal medicine, cardiovascular diseases, echocardiography and nuclear cardiology, Dr. Eimer comes to the Bluhm Cardiovascular Institute at Northwestern Lake Forest Hospital from the Cardiovascular Associates of Glenbrook and Evanston where he developed a very successful private practice.

Dr. Eimer holds a bachelor degree in economics from New York University and received his medical degree from Northwestern University Medical School in 1998. He completed an internship in general surgery at the University of Chicago Hospitals from 1998 to 1999 and completed a residency in internal medicine at Northwestern from 1999 to 2001. He was a fellow in the Division of Cardiology at Northwestern University Feinberg School of Medicine from 2003 to 2006, and served as the chief medical resident at Northwestern from 2002 to 2003.

Dr. Eimer has held several teaching positions. He was an Assistant Professor of Clinical Medicine at the Northwestern University Feinberg School of Medicine from 2006 to 2009 and Clinical Assistant Professor of Medicine in the Division of Cardiology at the University of Chicago Medical School from 2009 to 2012. He also has served as Instructor of Physical Diagnosis and Lecturer in Advanced ECG Interpretation at Northwestern University. He is a Cardiology Rotation Mentor at Northwestern University Feinberg School of Medicine.



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