

CLINICAL MICAL



Pictured: James Pan, MD, RPVI, places a peritoneal dialysis catheter in FMC's OR with the assistance of Kristy Hudson, surgical first assist; Karen Souders, traveling scrub tech and Josh Roe, RN circulator.

Summer 2021

Feature Story

ADVANCING VASCULAR CARE

Pictured: Krishna Mannava, MD, and Jason André, MD, place a carotid stent in FMC's Vascular Interventional Radiology Lab.

With a long-established vascular presence in the region, Fairfield Medical Center's venous program continues to thrive, focusing on growth and advancement in patient care. Recently, vascular surgeon James Pan, MD, RPVI, shared his insight on developments in the treatment of DVT and PE at Fairfield Medical Center.

"Adopting percutaneous mechanical thrombectomy methods has given us the opportunity to provide better care to patients at FMC," Dr. Pan said. "Without these minimally invasive interventions, patients would have to rely heavily on thrombolysis – which significantly increases the risk for bleeding complications – or travel to Columbus, particularly in cases where anticoagulants and clot-dissolving drugs are contraindicated."

Percutaneous thrombectomy is indicated for the non-surgical removal of thrombi and emboli from blood vessels, specifically in patients with extensive lower extremity DVTs involving the common femoral veins and/or iliac veins, as well as those exhibiting clinical evidence of submassive PE. This technology works by capturing the clot burden in a single session while eliminating the need for thrombolytic therapy. Bypassing the use of lytic agents can also eliminate the need for ICU admission. Some can even be done on an outpatient basis to avoid hospitalization altogether.

In addition to the successful treatment of acute conditions and related symptoms, direct extraction of clots improves patient outcomes and quality of life by decreasing the incidence of post-thrombotic syndrome associated with DVT.



"We've had patients come in for rechecks with complete resolution of swelling and no report of leg pain or discomfort associated with a DVT," Dr. Pan shared. "By immediately alleviating the obstruction, we're minimizing irreparable damage to the vascular system and saving our patients from chronic, costly and potentially debilitating consequences."

Patients treated via percutaneous mechanical thrombectomy are typically prescribed a standard treatment plan of pharmacological and/or mechanical prophylaxis following their procedure.

The Fairfield Healthcare Processionals Vascular Surgery office remains available to manage and monitor these patients in collaboration with primary care providers. Additionally, patients experiencing long-term sequelae related to the massive pulmonary arteries receive comprehensive care and prolonged follow-up from FHP's pulmonologists.

"This type of vascular treatment is unique outside of large city centers," Dr. Pan added. "My colleagues and I are excited to share these advancements with the community."

Vascular Surgery Program at FMC



In addition to advanced thrombectomy and embolectomy, the vascular surgery program at Fairfield Medical Center offers a variety of services and treatments, including:

- Open and endovascular repair of AAA
- Carotid endarterectomy
- Peripheral artery bypass
- IVC filter placement
- Laser and radio frequency ablation
- Sclerotherapy
- Supervised exercise therapy (SET) for PAD
- Comprehensive dialysis access program



To refer a patient to FHP Vascular Surgery, please call 740-687-6910.

Pictured above: James Pan, MD, RPVI, creates an AV fistula in FMC's OR with the assistance of Karen Souders, traveling scrub tech; Kristy Hudson, surgical first assist and Jamie Nihiser, RN circulator.

Pictured left: Blood clots removed via Inari Medical ClotTriever® technology.

Feature Story (cont.)



DVT Case Study

By Jason André, MD



processes in our patient population with a definite rise in cases during the COVID-19 pandemic. At Fairfield Medical Center, we provide a full spectrum of treatment for venous thromboembolism.

Pulmonary embolism and deep venous thrombosis are common disease

Jason André, MD

Recently, we were consulted on a patient admitted to the hospital after being transferred from a surrounding hospital for definitive care of an extensive deep venous thrombosis. The patient is a 60-year-old male from Logan, OH. During his evaluation and discussion of treatment options, it was

also discovered that he had significant shortness of breath found to be due to extensive bilateral pulmonary emboli. This was a challenging case in determining how to treat both issues for him.

After a lengthy discussion with the patient, we proceeded to perform lytic therapy for his pulmonary emboli, followed 24 hours later with a percutaneous thrombectomy of his extensive left leg deep venous thrombosis. In doing so, we were able to minimize his exposure to lytic therapy, thereby decreasing his bleeding risk. The patient was discharged within 48 hours of his admission.

In follow-up, he is now back to working in his shop pain-free and breathing normally. More importantly, he did not have to travel any further than Lancaster to receive optimal care for a complex problem.

Dialysis Access at FMC

At FMC, we understand the unique needs of dialysis access patients, as well as the importance of minimizing the use of hemodialysis catheters by creating and maintaining a well-functioning access. Our dialysis access coordinators are dedicated to expediting maintenance procedures, including same-day interventions when necessary. They work closely with the vascular surgeons, dialysis centers, nephrologists and patients to coordinate care so that lifesaving dialysis treatment is resumed as soon as possible. We also offer the innovative WavelinQ[™] technology - a minimally invasive alternative to surgical access creation that uses radio frequency to connect a vein with an artery to form a fistula.

Dialysis Access Services

- · Creation of dialysis access, including:
 - AV fistula
 - AV graft
 - Laparoscopically placed peritoneal dialysis (PD) catheter
- Revision and maintenance of dialysis access, including:
 - Fistulogram
 - Angioplasty
 - Stenting
 - Thrombectomy/embolization

If you would like more information about dialysis access at FMC, or if you would like to meet with our dialysis access coordinators to schedule training or education for your staff, please call 740-689-4425.

Pictured top left: Jason André, MD, and Krishna Mannava, MD, place a carotid stent in FMC's Vascular Intervention Lab.

Service Line Spotlights

Bariatric Services

Program Granted National Accreditation

Fairfield Medical Center's Bariatric Services program received national recognition from the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP), certifying the service as a comprehensive Center of Excellence in March 2021. The program has also enrolled in the MBSAQIP's national data registry, designed to establish standards of care and identify opportunities for quality improvement.

"We do this procedure for the medical reasons on paper, but what we're really trying to do is help people get their life back," said Timothy Custer, MD, Bariatric Program Medical Director and bariatric surgeon. "For our team and this program to be recognized as leaders in the field of bariatric surgery is incredible. Our ultimate goal is to provide our patients with the comprehensive, personalized care they deserve – this accreditation reaffirms that we're doing exactly that."

FMC's extensive bariatric program features a dedicated team and patient-centered experience, offering access to:

- Bariatric surgeon and physician assistant
- Registered dietitian specializing in bariatric nutrition
- Psychiatric and behavioral health providers
- · Program and eligibility coordinators
- In-depth pre-surgical education classes
- · One-on-one consultations throughout the process
- Post-operative follow-up and support group opportunities

FMC offers two types of bariatric surgical techniques: Roux-en-Y gastric bypass and sleeve gastrectomy.

Pictured above: Timothy Custer, MD, performs a gastrectomy.

Pictured below (left to right): Angeline Stergiou, MD; Elizabeth Beougher; Kimberly Kohli, Ph.D; Timothy Custer, MD; Bethany Smith, PA; Emily Schmelzer, RD and Angela Rowe.



When to Refer: FMC's Bariatric Services Program

Patients meeting the following criteria may qualify for bariatric surgery at Fairfield Medical Center:

- 18 years of age or older
- BMI of 35 or greater with at least one comorbidity
- BMI of 40 or greater, regardless of comorbid conditions

Patients interested in pursuing weight loss surgery are encouraged to attend a free information seminar prior to consultation. Our program coordinators work on a case-by-case basis to identify insurance benefits and navigate requirements, allowing our patients to focus on their health and transformation.

To refer a patient to Fairfield Medical Center Bariatric Services, contact 740-475-0442.



Service Line Spotlights

Infectious Disease

Managing Your Patients' Liver Health



Jim Reeves, CNP

FHP Infectious Disease offers FibroScan[®] – a specialized ultrasound technology with comparable results to liver biopsy but in a painless, non-invasive and less expensive procedure. "FibroScan[®] measures fibrosis [scarring] and stetosis [fatty changes] in the liver and can help determine the cause of elevated liver enzymes, monitor the degree of fatty liver disease and evaluate for cirrhosis," said Jim Reeves, CNP, at FHP Infectious Disease.

Patients that would benefit from this test include those with abnormal liver function testing, diabetes mellitus, NASH, HBV, HCV and chronic abdominal pain. FibroScan[®] is not recommended for patients with fluid in the abdomen, acute hepatitis, right heart failure, severe obesity, small rib spaces or an inability to lay flat.

We are able to schedule patients quickly and provide results within 1-2 business days. FibroScan[®] is covered by most insurance, and no prior authorization is needed.



To order a FibroScan[®], fax a request with patient information to 740-687-8803. For more information, call FHP Infectious Disease at 740-687-8805.

<u>Cardiovascular</u>

Longer Term Cardiac Monitoring Beneficial in Arrhythmia Detection

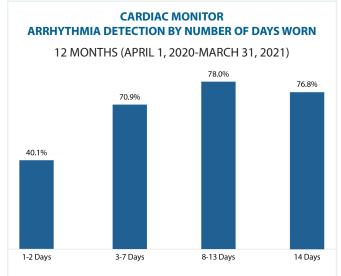
Extended continuous monitors have become increasingly useful in the detection and identification of cardiac arrhythmias. While these tools have traditionally been prescribed for brief durations – typically 24-48 hours – studies now indicate higher diagnostic yield when monitors remain in place for longer periods.

"Based on FMC data over the past year, we can see that there is almost a 2-fold increase in arrhythmia detection when increasing monitoring time from the standard 2-day event monitor to a 7-14-day monitor," explained electrophysiologist Michael Reinig, DO. "This comes at no additional cost to the patient, and it avoids their returning for a second monitor after the initially brief monitoring period."

Additionally, as this technology has evolved to accommodate patient comfort, compliance rates, even with longer durations, have remained largely unchanged.

"The other benefit of a longer monitoring period is an increased probability of the patient having a symptomatic event captured on the monitor," Dr. Reinig added. "This occurrence would help our diagnostic yield substantially and allow for symptom correlation."

For questions regarding cardiac monitoring, contact FHP Cardiology at 740-689-4480.



Data provided by ZIO by iRhythm

Service Line Spotlights

<u>Pulmonology</u>

Recovering Lung Health Following a COVID-19 Diagnosis





The volume of respiratory-burdened patients across the nation has increased as a result of the coronavirus pandemic. Due to gym closures, stay-at-home orders and the persistent need for caution, many of those with existing pulmonary disease have experienced a worsening of symptoms associated with deconditioning. This population has also been doubly taxed following SARS-CoV-2 infection. Meanwhile, individuals without preexisting respiratory conditions continue to find themselves struggling to recover lung health well after contracting the virus.

"It's important that pulmonary specialists and primary care providers continue to work together in these cases," said Ashley Wilkett, CNP, of Fairfield Healthcare Professionals Pulmonology & Critical Care. "Especially in terms of COVID 'long-haulers' and those with lasting lung damage. Each case is unique and requires an individualized plan, and close partnerships with internal and family medicine providers will play a key role in evaluating and determining treatment success."

"Our team – including Drs. Bruce, Twehues and Tenzca – encourage providers to reach out to our office any time they feel we may be of help," said Ginger Davis, CNP, of FHP Pulmonology & Critical Care. "Our ultimate goal is to return patients to health and help them breathe easier - literally and figuratively."

When to Refer: FHP Pulmonology & Critical Care

Patients may benefit from pulmonology consultation if they are experiencing:

- Prolonged shortness of breath
- Persistent fatigue
- Unresolving cough, with or without production
- Worsening or uncontrolled lung disease
- Recurring chronic bronchitis or cold-like symptoms

Patients can reach FHP Pulmonology & Critical Care at 740-689-6833.

Cancer

Varian TrueBeam[®] System to Advance Radiation Treatment

This fall, Fairfield Medical Center will be improving patient care through the addition of a Varian TrueBeam® system to our radiation oncology department. The new linear accelerator will expand treatment options for our patients and improve the speed and precision of their care.

Benefits include:

- Reduction in treatment times
- Less treatments required
- Less damage to healthy tissue
- Ability to treat tumors we have previously not been able to treat, including small brain tumors

"We are going to change the amount of time some patients are on the machine from 40 minutes down to 5 or 10 minutes, and we also are going to be able to treat smaller tumors than we ever have before," explains radiation oncologist Mark Becker, MD. "When patients come to Fairfield Medical Center, they can expect to receive the highest quality of care in the most timely and effective manner that is available to them anywhere in the United States."





To refer a patient to FHP Radiation Oncology, please call 740-687-8550.

Audiology & Hearing

Improving Balance and Reducing Dizziness

FMC offers diagnosis and treatment for patients who are experiencing dizziness and problems with balance stemming from a vestibular condition. We work closely with referring providers and our physical therapy team to create a personalized rehabilitation plan for each patient.

Our testing includes:

- Electrocochleography (ECochG): Measures the electrical potentials generated in the inner ear to determine if the cochlea has an excessive amount of fluid or if there is a lesion in the auditory nerve.
- Videonystagmography (VNG): Measures oculomotor function and nystagmus to identify peripheral pathologies, such as benign paroxysmal positional vertigo, vestibular neuritis and Meniere's disease.
- Cervical and ocular vestibular evoked myogenic potentials (cVEMP and oVEMP): Identifies site specific lesions in the vestibular nerve by measuring the saccule and inferior branch (cVEMP) and the utricle and superior branch (oVEMP).

Patients with vestibular disorders find that simple activities of daily living are difficult, leading them to develop a sedentary lifestyle. With effective treatment, they find their energy, stamina, ability to concentrate and quality of life return.

When to Refer: Vestibular Services at FMC

Patients in need of a vestibular evaluation can present with symptoms that are positional, spontaneous, persistent or induced by head movement. Symptoms may last seconds, minutes or days and can be chronic or acute (1-3 days):

- · Dizziness or light-headedness
- · Neck tightness, stiffness or pain
- Vision problems, such as nystagmus, double vision or blurriness
- Vertigo
- Problems with balance or frequent falls
- Tinnitus or fullness/pressure in the ear
- Headaches



Pediatrics

Specialized Pediatric Care in Partnership with Nationwide Children's Hospital

FMC is providing more comprehensive care to its youngest patients, while decreasing the need for them to travel to Columbus, thanks to a partnership with Nationwide Children's Hospital. Currently, there are four pediatric hospitalists at FMC who are responsible for our well-baby nursery, attendance at all C-sections, newborn resuscitation, short-stay pediatric observation, ED consults and pediatric support.

Direct admits are quick and easy:

- Call PerfectService at 1-888-880-7205 and request "Pediatrics" (or select "Pediatrics-FMC" on the PerfectServe app).
- You will be connected with a pediatric hospitalist to discuss your patient.
- We then take care of all the admission details.
- We will notify you with updates.
- 8 We will fax a concise discharge summary to your office.



When your child needs a hospital, everything matters.⁵⁴



Medical Director



Jennifer Gibson, MD





Kara Tencza, MD

Scan this QR code to read more about the patients featured in this section.



<u>Heartburn</u>

Acid Reflux Medications Can Mask GERD

For four years, Drew Mace, 29, took acid reflux medication that had been prescribed by his PCP. While it was effective in controlling his symptoms, Drew didn't realize he was still regurgitating until his dentist noticed that he had significant erosion on his tooth enamel – a lesser known side effect of gastroesophageal reflux disease (GERD). Drew's dentist referred him to the Fairfield Medical Heartburn Center, where Drew underwent an esophageal manometry, an upper endoscopy and ambulatory pH monitoring. The tests confirmed a diagnosis of GERD, as well as a hiatal hernia and esophageal dysmotility. Jeffrey Yenchar, MD, Medical Director for the Heartburn Center, recommended a Nissen fundoplication to permanently correct Drew's reflux.

"Before a patient commits to daily medication of any kind, we recommend they be evaluated to determine if it's the best course of action, or if other treatment options should be considered," said Tonya Mundy, RN, nurse coordinator for the Heartburn Center. "While medication can be effective in relieving patients of their symptoms by controlling the amount of acid, it does not fix the underlying problem."

Following the procedure, Drew resumed his normal diet and active lifestyle – which no longer includes medication. If you have a patient who is experiencing acid reflux on a regular basis, they should be evaluated for GERD. The Fairfield Medical Heartburn Center offers a free consultation to all patients, and will work with the patient and their PCP to develop a treatment plan that may include medication, surgery or lifestyle changes.

To help your patient find relief from heartburn, call the Fairfield Medical Heartburn Center, at 740-689-6486.

Orthopedics & Outpatient Therapy

Help for Patients with Joint Pain

A torn meniscus caused by osteoarthritis was keeping Sam Price, 70, from fully enjoying his retirement. The pain and joint inflammation were so severe that Sam was taking ibuprofen multiple times a day. He eventually decided to undergo an evaluation with orthopedic surgeon Jason Reed, DO, of FHP Orthopedics and Physical Medicine & Rehabilitation. Dr. Reed recommended two outpatient partial knee replacement surgeries and repair of Sam's meniscus. "Large meniscus tears can occur as arthritis worsens in the knee, and if left untreated, the pain and locking of the joint will typically persist," Dr. Reed said.

Sam underwent surgery on his right knee first, then had his second surgery two months later. Both surgeries were accompanied by six weeks of intensive outpatient therapy at FMC's Outpatient Therapy Services. Six months later, Sam has resumed his active lifestyle, free of pain. If your patient is experiencing joint pain, our dedicated orthopedic and therapy services teams are here to help.

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To help your patients move more freely without pain, call FHP Orthopedics and Physical Medicine & Rehabilitation at 740-689-4935. To refer a patient to Outpatient Therapy Services, call 740-687-8622.

Provider/Office Updates

FHP Welcomes Buckeye Spine & Rehab



Frank Meszaros, MD, Brian Higgins, DO, and Brian Buck, PA-C

Brian Higgins, DO, Frank Meszaros, MD, and Brian Buck, PA-C, of Buckeye Spine and Rehab joined the FHP Orthopedics and Physical Medicine & Rehabilitation practice at the River Valley Campus in June.

Buckeye Spine and Rehab has served the Lancaster community for more than 25 years and has extensive experience caring for spinal, musculoskeletal and neurological injuries and diseases.

The practice joins the FHP Orthopedics and Physical Medicine & Rehabilitation team of: Trevor Call, DO; Jason Reed, DO; Jordan Bonier, DO; MS; Nicole Sabatina, DO; Jonathan Pearlman, MD; Brian Oricoli, MD; John Walter, DO; Timothy Norman, PA-C and Jim Wright, PA-C.

Conditions Treated by FHP Orthopedics and Physical Medicine & Rehabilitation

When you refer a patient, our goal is to develop a comprehensive plan to reduce pain and restore functional ability and quality of life. Diseases and injuries treated include:

- Spine and joints: radiculopathy, facet arthropathy, disc disorders and injuries, sacroiliac pain and injury, spinal stenosis, whiplash, arthritis, work injuries, headaches, myofascial pain syndrome, piriformis syndrome
- Non-operative sports injuries: sprains, strains and ligament injuries
- Neurological rehabilitation: carpal tunnel, nerve injury, diabetic neuropathy, thoracic outlet syndrome, peripheral nerve injury, brachial plexus injury

FHP Orthopedics and Physical Medicine & Rehabilitation has offices in Lancaster and Millersport. To refer, contact 740-689-4935.

FMC welcomes the following providers:



Seth Levin, DO

FHP Gastroenterology 1500 E. Main St., Lancaster 740-687-9182 Fellowship: St. John Oakland Hospital Residency: Doctors Hospital Medical School: Philadelphia College of Osteopathic Medicine



Megan Robison, CNP FHP Internal Medicine 2405 N. Columbus St., Suite 280, Lancaster 740-689-4470 Masters of Science in Nursing:

The Ohio State University



Jeanette Carpenter, CNP Colonnade PrimeMD 1981 Granville Pike., Lancaster 740-654-0232 Masters of Science in Nursing: Chamberlain University

Diley Ridge Medical Center Providers

FHP offers primary care and rheumatology at its Diley Ridge Medical Center location in Canal Winchester.



Tarun Mehra, MD Primary Care 614-829-6138



Sarah Ball, CNP Primary Care 614-829-6138



Irving Rosenberg, MD Rheumatology 740-689-6408



Patient Experience

The following comments were submitted by FMC patients and compiled through Press Ganey.



Trevor Call, DO, FHP Orthopedics and Physical Medicine & Rehab

"Dr. Call was absolutely amazing with my mom and took his time to explain and make sure she understood about her rotator cuff ... the care he took with her was over and above, and he is the best specialty doctor I've taken her to."



Jennifer Heck, CNP, FHP Gastroenterology

"Jennifer Heck did a great job. She is a good listener, and I could tell she cared ... She was professional, empathetic and knowledgeable."



Rachel Pan, MD, FHP Neurology

"Dr. Pan has a great bedside manner. I have been suffering from this condition for 7 years, and she listened to me and came up with a treatment plan to help me. I am excited and have hope that I can finally get the treatment I need to get better and improve my quality of life."



David Hasl, MD, FHP General Surgery

"Dr. Hasl has been a blessing. I've had medical issues for quite some time and this doctor provided the most thorough and caring care possible. Exceptional professionalism along with a calming bedside manner. We are truly happy being under his care – I feel confident under his supervision."



Stephanie Ott, MD, FHP Rheumatology

"Dr. Ott is the best doctor! She listens, and you can tell she really cares for her patients ... Dr. Ott and her team have been wonderful and have helped me so much."



Margaret Sawyer, MD, General Surgical Associates

"Dr. Sawyer and the entire FMC staff were truly wonderful and caring."

Clinical Connections is designed to share information about Fairfield Medical Center's medical staff, services and capabilities with healthcare providers in southeastern Ohio. If there is anything you would like to learn more about, or if you would like to be removed from our mailing list, please call 740-687-6929.

Quick Reference Fairfield Medical Center



Fairfield Medical Center 401 N. Ewing St., Lancaster, OH 43130 740-687-8000 fmchealth.org



Located in Lancaster, OH, we are a nonprofit organization that provides full-service, general acute health services.



We serve more than 250,000 residents in Fairfield, Pickaway, Perry, Hocking and Athens counties.



In addition to our Main and River Valley campuses, we have more than a dozen satellite locations specializing in primary care, specialty care, urgent care, lab and imaging services.



Fairfield Healthcare Professionals (FHP) is a multispecialty medical group of more than 90 providers owned and operated by Fairfield Medical Center.



401 N. Ewing St. Lancaster, OH 43130-3371 fmchealth.org

Experience the **Support**

Outpatient Therapy Services

Two convenient locations in Lancaster:

- 2384 N. Memorial Drive (River Valley Campus)
- 1143 E. Main St. (near Kroger)

We accept all insurances and offer telehealth appointments.

Adult Services

- ✓ Aquatic therapy
- ✓ Audiology and hearing services
- ✓ AlterG[®] Antigravity Treadmill
- ✓ Hand and foot orthotics
- ✓ Hand therapy
- ✓ Industrial rehabilitation
- Lymphedema management
- ✓ Neurological rehabilitation

Pediatric Services

✓ Aquatic therapy

- Audiology and hearing services
- ✓ Physical therapy

- ✓ Occupational therapy
- Physical therapy
- ✓ Speech therapy
- ✓ Sports medicine
- ✓ Spine and orthopedic rehab
- ✓ Trigger point dry needling
- ✓ Women's health services
- Vestibular rehabilitation

Speech therapySports medicine



