CDH Begins “Train and Maintain” Initiative

Not long ago, 84 hospitals in Arkansas received teleconferencing equipment from the Arkansas Department of Health and Human Services, Division of Health (DOH). The DOH funded the equipment through a grant it received from the Health Resources and Services Administration (HRSA) National Bioterrorism Hospital Preparedness Program. Today, much of this valuable equipment remains unused, primarily because regional hospitals do not have the resources to train their staff on its use.

Enter the UAMS Center for Distance Health (CDH), with its Train and Maintain program. The DOH has contracted with CDH to provide training at all 84 hospitals, not only to prepare them in case of an emergency, but also to encourage them to use the teleconferencing equipment for other, routine purposes.

“They can use it for anything, including education and clinical situations,” explained Jenna Schell, one of three Train and Maintain administrators. “The regional leaders currently use it for their monthly meetings. The more they use it, the more inclined they’ll be to continue using it, and the better prepared they’ll be in case an emergency does occur.”

Train and Maintain personnel, including Schell, Kim Ruple and Michael Manley, will provide telehealth expertise to the hospitals using teleconferencing, online resources, and off- and on-site visits. They will work primarily with each hospital’s bioterrorism preparedness coordinator, as well as infection control nurses, clinical laboratory directors and hospital administrators.

“The first assessment will cover the big picture – we’ll inventory the equipment and organize everything,” Schell said. “During the second assessment, we’ll begin the training program — give them protocols on how and when to use it — and then, throughout the course of the year, we’ll have training drills.”

In addition, a toll-free, 24-hour support line will be available to provide technical assistance.

Train and Maintain will also facilitate connections among the three Arkansas telehealth networks: the DOH Bioterrorism Hospital Preparedness Network, the DOH Local Health Unit Network and the UAMS Network. Not only will this assure optimal communications during times of emergency, it will also increase educational and clinical opportunities statewide through an expanded distance health network.
Call Center Sees Changes

The ANGELS Call Center has witnessed some recent changes, which will facilitate calls and expand service.

A new phone system was implemented Dec. 1, 2006. This system tracks incoming and outgoing calls, places callers in queue if all lines are busy, and then sends calls to voice mail after a specified period of time if Call Center personnel are unable to reach the queued calls. In addition, the system allows Call Center nurses to forward their phones and take calls at home, if necessary. These forwarded calls are also tracked.

The Call Center now schedules new patient referrals for Arkansas Reproductive Genetics and has expanded its staff to handle the additional responsibilities.

Physicians who need to schedule or reschedule a new or existing patient may call the following numbers (you will be prompted to press “1” for patient appointments). These calls will be directed to the ANGELS Call Center:

- (800) 358-7229 (outside Pulaski County)
- (501) 296-1700 (within Pulaski County)

Physicians may also call the toll-free ANGELS number directly at (866)273-3835.

To speak with a genetics counselor and/or a physician regarding patient care, or with MSAFP/Quad screen laboratory coordinators, please use the numbers listed above for scheduling patients, but do not press “1.” These calls will be directed to the Genetics office, where an attendant will connect you with the appropriate party. If you need to speak with a lab director immediately, you may contact the lab at (501) 686-7171.

Guidelines Update

All ANGELS Guidelines are updated annually in order to provide physicians with the most current evidence-based information available. These updates are done through an affiliation with the UAMS Library, which conducts expert, extensive searches of journal literature with the goal to provide a focused, yet comprehensive view of a topic at the clinical level. Literature searches for new guideline topics are limited to the last five full years plus the current year. Topic updates are limited to the last full year plus the current year.

All databases of Evidence Based Medicine Reviews, including the entire Cochrane collection, are used in these searches. In addition, the following databases are also regularly used: MEDLINE, MEDLINE In Process Records, CINAHLPlus, HealthSource, PsychInfo, Science Citation Index, UAMS Library Catalog, National Library of Medicine’s Catalog and WorldCat. Other more specialized databases are utilized as needed, including International Pharmaceutical Abstracts and Social Science Citation Index.

In addition to the regularly scheduled ANGELS searches, the librarians provide enhanced searches for the authors on specific aspects of guideline topics as requested.

The following guidelines are planned for distribution between July 2007 and June 2008.

Obstetric Guidelines:

- Operative Vaginal Delivery
- Bariatric Surgery
- Maternal Trauma
- Care of the OB Patient with Breast Cancer
- Varicella Exposure & Treatment in Pregnancy
- Management of Common Biliary Tract and Pancreatic Disorders in Pregnancy
- Postpartum Infection
- First Trimester Screening
- Common Drug Teratogens Affecting Pregnancy
- Dealing Emotionally with Pregnancy Loss

Neonatal Guidelines:

- Nutrition/Formula Feeding When Breast Milk Is Not Available
- Feeding the Ex-premature Once He Leaves the Nursery
- Drug-Exposed Newborns
- Discharge of the High-Risk Neonate
- Ductal-Dependent Heart Lesions and PDAs
- Newborn Blood Screening
- Swallowing Studies
- UAC/UVC/PIC Line/Central Line Access and Care Issue
- Car Seat Testing
- The Use of Nasal Cannula Flow vs. Nasal CPAP in the Neonate with Respiratory Distress
There's nothing like a little on-the-job variety to really spice things up, as Shannon Barringer, M.S., C.G.C., can testify.

Barringer, a genetics counselor, has worn many hats during her 10-year tenure at the University of Arkansas for Medical Sciences. “I worked in Obstetrics for seven years, and then I left to help start the master’s program in genetic counseling in the College of Health Related Professions,” she said. “Once we received national approval and got our first classes started, I wanted to come back and work for Curtis [Lowery, M.D.]. The ANGELS program needed a genetics person to help see patients here at the hospital, and also to help with obstetrics telemedicine.”

But today, in addition to counseling patients in the high-risk pregnancy clinic once a week and participating in the high-risk telemedicine clinic each Friday, Barringer serves as an envoy for the Center for Distance Health at UAMS, a newly established venture based upon the remarkable successes seen by the ANGELS telemedicine program.

“My main job as far as telemedicine goes is to try and help other specialties at UAMS get onboard, learn about telemedicine, and see what that media can do for them. I’ll visit with business managers and particular doctors who have expressed an interest and try to assess what they may be looking for.”

Departmental interest has run the gamut from clinical to educational, to research, including a desire to extend clinical trials statewide via telemedicine, so that people who live outside the commuting range to UAMS may also participate.

“We have a good working relationship with the Department of Psychiatry and have helped them establish a telemedicine clinic that allows them to see older patients in southwest Arkansas, many who have severe depression and need better management than their primary care physicians can provide,” Barringer said. “We’re also looking into other avenues that we can pursue with Psychiatry, such as perhaps providing mental health services to the prisons across the state. We’re also helping a UAMS psychiatrist who is doing a research project on whether telemedicine can effectively be used to treat depression.”

Others at UAMS who have expressed an interest include the Department of Urology, whose physicians would like to follow up with prostate cancer patients and increase clinical trial participation via telemedicine, and infertility specialists within the Department of Obstetrics and Gynecology, who will be able to review blood draws, ultrasounds and other data from patients in northwest Arkansas before they come to Little Rock for treatment.

Barringer facilitates new telemedicine participants by inviting them to an actual telemedicine clinic to see how it works, and by reviewing their patient records and referral bases to determine which telemedicine clinics or sites within the state would most effectively reach their patients and best suit their needs. She also works closely with the ANGELS outreach staff, who are responsible for bringing referring physicians throughout Arkansas into the telemedicine program.

“I really like this part of my job, even though it has nothing to do with genetics,” Barringer said. “I’m thrilled to work here – I get up every day and think I’m one of the luckiest people. It’s a flexible work environment where I can have my hands in a number of projects – I still see patients, which I enjoy doing; I’m involved with some of Dr. Lowery’s research, and of course I help spread the word about telemedicine.”
The 23rd annual UAMS Perinatal Conference was held at the Wyndham Hotel in North Little Rock, Arkansas on January 25 and 26. This year’s theme was “old versus new in obstetrical and neonatal care.” Discussions focused on the differences between the management of obstetrical and neonatal patients in past years compared to the current, evidence-based practices seen today.

The first morning included a keynote address by J. Gerald Quirk, Professor and Chairman, Department of Obstetrics and Gynecology & Reproductive Medicine, the University at Stony Brook, New York. A former UAMS Department of Obstetrics and Gynecology chairman, Dr. Quirk recounted stories from the beginning of his obstetrical career, exploring how medicine has evolved into the 21st century. It was wonderful to have Dr. Quirk back telling stories of the good old days. Following Dr. Quirk’s discussion, neonatologist Robert Arrington, Professor of Pediatrics, Division of Neonatology, UAMS College of Medicine and Arkansas Children’s Hospital, reviewed neonatology and its advancements in practice over the course of his career. Like Dr. Quirk, Dr. Arrington had fabulous pictures, anecdotes, and examples of how neonatology has evolved.

Attendees were invited to attend a cocktail hour at the end of day one. This event was held in the vendor area and gave everyone a chance to unwind after a long day of lectures. Following the cocktail hour, approximately 50 UAMS OB-GYN alumni attended a dinner held in their honor and enjoyed renewing old acquaintances.

In addition to other general sessions on both days led by some of the state’s experts in their respective fields, several “hot topics” in neonatal and obstetrical care were discussed in concurrent sessions. The conference concluded with a lecture by respected local medical defense attorney Laura Hensley-Smith addressing some of the legal aspects encountered in obstetrics and neonatology.

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**Mark Your Calendars**

**The ONE Team**

(Obstetrical Nursing Exchange) - first Friday of each month from 8 - 9 a.m.

**The Neonatal Case Conference**

- third Thursday of each month from 12:30 - 1:30 p.m.

These teleconferences are held in Shorey, 5th Floor, Room 25. For more information, call (501) 526-7425 or visit www.uams.edu/angels/teleconferences.asp