A WORD FROM THE RESIDENCY DIRECTOR

PAPERWORK! We all dread it and know there is too much of it, especially in health care. Our new computer system has eliminated much of the paperwork, but I am not so sure we are any better off yet. We still must record and use the information properly. Latterman has become essentially paperless with the new system. My only hope is that it enables us to provide better care to you, the patient, and at least not interfere with the care we provide.

All the Latterman staff, nurses and doctors are working hard to provide high quality care that will both prevent illness and restore health. We are striving to meet the many indicators of quality care that have been established and that are explained in this Letter. If we ask you about a preventive measure, such as a mammogram or eye exam, when you are here for something else, it is because these indicators are important and help us to give you the best care possible.

Every year in July we welcome a new group of residents. This group is pictured on the next page and have started very strong. Please welcome them to McKeesport.

William Markle, MD

SPOTLIGHT ON LATTERMAN STAFF

Cheryl McClelland began working at the Latterman Family Health Center in November 2008 as the practice manager to replace Marcy Martin. Prior to coming to Latterman she managed four UPMC practices in the Shadyside/Bloomfield area. She has also held various administrative and management positions at Allegheny General Hospital and the University of Pittsburgh Department of Medicine. She was born and raised in West Mifflin and currently resides there, so coming to McKeesport puts her closer to home. She has one daughter, Julianne, who is 25. In her spare time, she and her husband John, enjoy antique hunting, attending street rod events and cross country car trips. We are very fortunate to have Cheryl with us.

RESIDENT SPOTLIGHT

Olawale Akinmerese, MD was born in Lagos, Nigeria to a family of five. He had dreamed of being a medical doctor since childhood and was encouraged by his family. His dream was fulfilled when he was admitted to the best medical school in his country, the University of Ibadan. Medical school was tough, but interesting, and he was fortunate to graduate in the top of his class. He then had the opportunity to come to the U.S. and decided to pursue a residency in Family Medicine. “UPMC McKeesport has been a blessing to me and I have been greatly influenced by the excellent faculty and residents. The dedication to serving the local community is outstanding and has made me appreciate my role as a family doctor.”

“I take pride in my beautiful baby girl and my wife who is presently in nursing school. They are the most important people in my life. I also enjoy sports, especially soccer and basketball, and now I have caught the Steelers’ and Penguins’ fever.

My aspiration in life is to be the best doctor I can be, serve my community and enjoy a decent family life.”
RESIDENT SPOTLIGHT

Naeem Ahmad, MD was born in Lahore, Pakistan and completed his education in his home city. After graduating from Allama Iqbal Medical College he immigrated to the USA in pursuit of learning and better educational and training opportunities. He completed one year of general surgery training at West Virginia University and then began a Family Medicine residency at West Penn Hospital in Pittsburgh. When this program closed he joined the UPMC McKeesport Family Medicine program as a second year resident. “I am extremely grateful to the faculty, residents and staff at UPMC McKeesport for their support that has made this transition a pleasant learning experience for me.”

“In addition to medicine, my hobbies and interests include community welfare, sports, science and nature. I am blessed with a wonderful marriage and extended family. As a resident physician, the interaction with patients has always been very satisfying for me as it develops a relationship based on trust. I strive to alleviate suffering and improve quality of life by providing quality medical care and health education.

New Residents and Interns for 2009-10

First year Family Medicine Residents

Simon Chacko, MD
University of Szeged, Hungary

Ayman Fakeh, MD
University of Alexandria, Egypt

Divya Gangwar, MD
M.P. Shah Medical College, India

Maria (Rory) Gayanilo, MD
University of the Philippines

Mae Anne Sepulveda, MD
Cebu Institute of Medicine, Philippines

Rabelais Tatchum-Talom, MD
Saint George’s University, Grenada

Candace Wong, MD
Saba University, Netherlands Antilles

Osteopathic Interns

Aaron Bress, DO
Kansas City University of Medicine and Biosciences

Trasey Holloway, DO
Lake Erie College of Osteopathic Medicine

Family Medicine/Psychiatry

Tamar Carmel, MD
Northwestern University, Feinberg School of Medicine, Chicago
QUALITY CARE INDICATORS

If you have been listening to recent debates in health care, “QUALITY” is a term that has come up frequently. Patients may say they have received quality care if the receptionist is nice, if the doctor has a good bedside manner and if they get appointments in a timely way. However the quality indicators in the headlines are core measurements that insurance companies and hospitals look at to ensure that the patients are getting the best care possible from their providers. Here are a few areas that we at Latterman are looking at to improve the care we provide.

**Diabetes Care:**
1. Yearly screening for kidney disease by measuring urine protein,
2. Yearly eye exams,
3. Yearly cholesterol test and

**Breast Cancer Screening:** Yearly mammograms for women age 40 and over.

**Cervical Cancer Screening:**
1. All women should have pap smears beginning 3 years after beginning sexual intercourse, and no later than age 21 yr,
2. Testing is done every 2 years if the liquid-based pap smear is done like here at Latterman,
3. Women aged 30 years and over may be tested every 3 years if previous pap tests have been negative and they are negative for the Human Papilloma Virus (HPV).

**Well Child Care:**
1. Well child visits at 1, 2, 4, 6, 9, 12, 15, 18, 24, and 30 months, and yearly thereafter,
2. Developmental screens at 9, 18 and 30 months,
3. Autism screens at 18 and 24 months,
4. Anemia screen at 9 months,
5. Lead screens at 9 and 24 months.

Some of these guidelines and measures are new and represent changes based on evidence in the medical literature. There are many more measures that we are meeting to ensure good quality care. Please talk to your doctor if you have any questions about these measures.

Tracey Conti, MD

HEPATITIS C

Hepatitis is an inflammation of the liver. It can be caused by many things including alcohol, drugs and certain diseases. The most common cause is a viral infection with one of the hepatitis viruses (A, B, C, D, E or G). There are vaccines for types A and B and now Type C is the one most commonly seen in this area. You can be infected with a hepatitis virus through food, water or sexual contact, but the main way to contract hepatitis C is through contact with an infected person’s blood. People using intravenous drugs get infected from shared needles. Health care workers can be infected with accidental needle sticks. Tattoos and body piercing can be sources. Rare causes are passing the virus from mother to unborn child, sexual contact, and sharing razors or toothbrushes. Often the cause of hepatitis C is never known for sure. Blood transfusions are now screened for hepatitis but if you received a transfusion or transplant before 1992 you could have been infected. Hepatitis C is not spread by casual contact such as sneezing, coughing, shaking hands, hugging, kissing, sharing eating utensils, swimming in a pool, using public toilets or touching doorknobs. Usually the acute stage when you are first infected is minor and not recognized. The patient has no symptoms for years, but the virus stays in the liver and causes inflammation. It is a chronic disease that, if not treated, can lead to cirrhosis or cancer of the liver. Common symptoms after the virus has been present for some time may include fatigue, nausea, vomiting, no appetite, low grade fever, aching or there may be no symptoms at all.

If you have hepatitis C you should eat a healthy diet and exercise regularly. You must limit your use of alcohol and some medicines such as acetaminophen. If you have not already had them you should receive the vaccines for hepatitis A and B. For drug treatment you may be referred to a gastroenterologist. They will want complete blood testing and possibly a biopsy of the liver to assess the stage of the disease. Treatments vary but usually involve Interferon and Ribavirin. Treatment will clear the virus from the blood in 40-80% of hepatitis C cases. Treatment has significant side effects, especially early in treatment and it may not be possible if you have serious psychiatric illness or are still abusing drugs or alcohol. Drug treatment is not appropriate for everyone and the doctor will help you make this decision. With good follow-up and regular lab testing this disease can be managed and controlled like any chronic illness.


William Markle, MD
Behind the Scenes at Latterman

We want to extend a heartfelt *THANK YOU* to all of you who have been so patient during our recent transition to the new EpicCare electronic medical record. We began using this system in March of this year and are still learning how to use it! Your wait-times may have been longer, and perhaps impacted your family and those bringing you to see us. Thank you for your patience.

The furniture in the waiting area has been replaced and plans are in place to work on other aspects of the facility to improve its appearance and function. There is a new heating/air conditioning system and a new phone system as well. All these changes are meant to provide a better environment to improve care and make it more pleasant for you.

We have had a major change in staffing at Latterman. Our long-time Director, Dr. Patti Bearley, has moved to Ohio. Her husband was transferred there and she, herself, will be starting law school at the University of Dayton. We will truly miss her. She received her training here and most of our patients know and love her. With Dr. Bearley leaving, Dr. Markle will serve an additional role as Medical Director and Dr. Conti and I will be assisting him.

As we undergo this change, we want you, our patients, to be aware of what is going on behind the scenes. Expect to see this column, “*Behind the Scenes*”, in future newsletters. The purpose will be to let you know of projects, programs, grants, quality initiatives and changes we are working on. Latterman is your Center. If you are interested in serving on our advisory Committee, please let someone here know and we will contact you.

*Daphne Bicket, M.D.*