Caring for the Whole Patient

From diagnosis to recovery, patients have confidence in their care

WHILE WAITING TO HAVE A BLOOD TEST at a Quest Diagnostics lab near her home recently, Doris Yarick-Cross found herself in a conversation with the man sitting next to her.

He told her about his complicated health situation and how difficult he found it to navigate his healthcare system. Scheduling appointments, balancing medications from different clinicians and trying to facilitate communication between his doctors left him tired and frustrated.

“I didn’t say anything out loud, but I remember thinking how lucky we are,” said Yarick-Cross, a Yale Health member since 1983.

Doris Yarick-Cross and her husband Richard Cross share a smile with staff members in Yale Health’s Infusion Center. Front row from left: Myunghee Shim, RN, Doris Yarick-Cross, Suzette Bailey, RN and Molly Meyer, APRN. Back: Richard Cross.

Photo by Beatrix Roeller.
Yarick-Cross, professor of voice and opera and the artistic director of the Yale Opera Program at the Yale School of Music, was diagnosed with stage 3 colon cancer on her birthday in 2008. Less than a week later, she had surgery at Yale-New Haven Hospital.

Following six months of chemotherapy treatment, Yarick-Cross is now cancer-free.

After she ran down the list of services she has used at Yale Health including Internal Medicine, Endoscopy, Diagnostic Imaging, Oncology and Infusion, Yarick-Cross said it was the people that cared for her that meant the most.

“I just felt like I couldn’t have been any place better where people watched everything about me and cared enough to make sure I was going to be alright,” she said. “I couldn’t have gone through this with nicer people. I felt that I was the most important patient that any of them had ever dealt with.”

In fact, she has stayed in touch with several Yale Health staff members who cared for her including Molly Meyer, APRN, Oncology.

“Molly is one of the most caring people I’ve ever met in my life,” she said. “I feel she is one of my closest and dearest friends now because of the way she took care of me. And the nurses in the Infusion Center, they’re just wonderful, wonderful people. I will never forget them for the wonderful care they gave me.”

“You have to realize that it’s not just about the patient,” Meyer said. “It’s about the family and everyone who cares about them. The cancer is about everyone in their lives. You also have to realize that cancer does not define who you are. It’s only a part of your life.”

But it wasn’t only the care that impressed Yarick-Cross, it was also the communication among her clinicians.

“Because of that coordination, you feel like everybody knows what they need to know and they can really focus on your care,” she said. “I know that my records are right there on the computer. From the time I arrived at Yale until today, they are up to date and any time anybody wants to know anything about me, they put my name in and it’s right there. They know what tests I’ve had and the results. It’s fantastic.”

Richard Cross, Yarick-Cross’s husband of nearly 49 years and a lecturer in voice at the Yale School of Music, said it was an “enormous stress relief” to have confidence in the care his wife was receiving.

“We were given a recipe for everything,” he said. “We didn’t have to go through any of this on our own.”

While Cross was impressed with Yale Health during his wife’s cancer treatment, he also came to appreciate it while dealing with his own health issues.

Cross had knee replacement surgery in 2009 and a laminectomy in the 4th and 5th lumbar in 2011 to ease pressure that was causing sciatic pain in his legs.

“Yale Health has worked very well for us both and I don’t know what we would have done without the advice and the expertise,” he said. “I just feel like my care is in somebody else’s hands and if they were to drop it, I don’t know what I would do. I’m confident, where I am, that they won’t drop it.”

**Caring continued from previous page**

**Briefs**

**WHCRA Services**

The Women’s Health and Cancer Rights Act (WHCRA) of 1998 provides benefits for mastectomy related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedemas.

Call the Yale Health Care Coordination Department at 203-436-5791 for more information.

**Travel Assistance**

All Yale faculty, staff and their accompanying family members are automatically covered by FrontierMEDEX, which provides 24/7 travel assistance coverage anytime you travel more than 100 miles from your permanent residence (in the U.S. and abroad).

In addition to helping with medical emergencies, FrontierMEDEX provides other services such as help if you lose your wallet or travel documents. If you do not have a FrontierMEDEX card, you can pick one up in Member Services or print one at yale.edu/finance/controller/riskman/medex.html.

**Pharmacy Summer Hours**

Tuesday, May 29th through Saturday, September 1st

Monday through Friday
8:30 am-6:00 pm
Saturday
8:30 am-2:30 pm

“I felt that I was the most important patient that any of them had ever dealt with.”

Doris Yarick-Cross, Yale Health member
From the Desk of Paul Genecin, MD

For many years, those of us who teach have felt strongly about the role of Yale Health as it pertains to the educational mission of Yale University. Our highest priority is the clinical care of the entire Yale community. We try to ensure that our students, faculty and staff stay healthy so that they are able to fully contribute to the educational and research missions of this great institution. But many of our staff members also teach, and we do so across a broad spectrum of disciplines, instructing medical students and residents, nursing, pharmacy and medical assistant students among others. We teach at the Yale Health Center as well as Yale-New Haven Hospital, Yale Medical School and in the community.

At Yale Health, we have a special opportunity to pass along important lessons to the next generation of healthcare providers. We define one of our core values, compassion, as “remembering that caring is as important as care. The highest calling of our profession is to provide comfort to those who are in distress.” It is vitally important that trainees take this message to heart. When I was a student, I remember worrying about whether I would ever master the technique for placing intravenous lines in patients with poor vascular access. Our students are now more apt to fret about learning the complexities of the ever-changing electronic health record. As teachers, we must constantly remind our students that these are not the true challenges. All bright and capable students somehow master the technical requirements, but we must constantly help them to hone their skills in the humane arts of medicine, nursing and the allied healthcare disciplines.

Patients at Yale Health receive care in a wide variety of clinical areas. Those with complex problems get vital assistance in navigating the complexities of the healthcare system. Students and residents at Yale Health are learning much more than the clinical diagnosis and management of diabetes. They are learning about the complexity of coordinating health care across many disciplines, including internal medicine, ophthalmology, nephrology, vascular surgery, cardiology and a host of others. They come to appreciate the coordinated care we provide our patients and get a sense of the challenges patients with multiple health problems face when receiving their care from other health plans that might be fragmented or poorly coordinated.

At the same time, the students learn about the solutions we have developed at Yale Health for simplifying the healthcare experience for our patients.

We teach our students that health care is much more complicated than the specific discipline in which they happen to encounter a patient. We want students to learn that to provide outstanding health care, we must address the patient’s entire spectrum of needs. At Yale Health, students learn about a system in which patients can be treated for most of their problems on-site and experience the benefit of care coordination across many disciplines and healthcare settings. We strive to provide care that is safe, timely, effective, convenient and compassionate. When you think about how important these lessons are, it should come as no surprise that our clinicians receive high marks as teachers and that we strongly believe that we have important knowledge to impart to tomorrow’s healthcare providers.

Paul Genecin
Influencing the Next Generation of Doctors

NEIL VASAN LEARNED HOW TO MANAGE chronic conditions such as diabetes and hypertension while sitting in a classroom at Yale Medical School. But it wasn’t until he did his clinical rotation at the Yale Health Center that he learned how to care for a patient with those chronic conditions.

“Learning those black and white things that you do in the classroom doesn’t necessarily tell you what to do for that individual patient who doesn’t fit into that box,” said Vasan, a third-year medical student who finished his four-week clinical rotation at Yale Health in March. “You have to manage all of the other medications they’re on and take other factors into account. Learning to look at the patient as a whole is really what you get out of it.”

Third-year Yale Medical School students have been doing their clinical rotations at Yale Health for the last 19 years. They spend most of their time in Internal Medicine, but also work in Acute Care, Dermatology, Ophthalmology and Diagnostic Imaging.

The students are assigned to clinician preceptors for their four-week rotation. During their time in Internal Medicine, they meet with patients about their health issues and do a preliminary examination prior to presenting their findings and discussing diagnostic and management issues with the clinician.

“The clinician then examines the patient with the student present. Following the examination, the student writes up the information in the patient’s electronic chart and meets with the clinician to go over the notes and discuss each case.

Dr. David Smith, Yale Health’s site coordinator for the program, said students often spend the first few days of a clinical rotation “getting their feet wet.” “They are figuring out what is the right amount of information to write down and how to present it,” he said. “We give them feedback and by the midpoint, they are working well within the expectations of the system.”

“It gives you a chance to be independent, but to still work in the environment with someone with a lot of clinical years to make sure you’re on the right track,” said Brooks Udelsman, a third-year medical student who also did his clinical rotation at Yale Health. “It’s also good to see how the clinicians interact with patients and how they form that therapeutic bond.”

Vasan said it’s not only seeing patients, but also learning from the clinicians that is important.

“They’ve been incredible,” he said. “You could be in with a patient and think you know what’s going on and then they’ll find a way to make a unique clinical pearl of wisdom out of it. That’s what makes a good teacher.”

Smith, who was recently named the 2011 Ambulatory Internal Medicine Teacher of the Year by the Yale School of Medicine, said patients are always asked if they are comfortable seeing a medical student prior to scheduling the appointment.

“Generally, I think the patients are very supportive of this,” Smith said. “We’re helping to shape the next generation of doctors. The students we have here can really make a difference in the future of medicine.”

Brooks Udelsman, a third-year medical student, discusses a patient with Dr. Delli Alcantara during his clinical rotation at Yale Health.
What Are Generic Medications?

Generic medications become available after a brand name medication’s patent has expired. A patent lasts for 20 years, but when that expires, the medication can be sold in generic form.

Brand name medications are granted a 20-year patent because their manufacturers need time to recoup money they spent on research, approval and marketing.

People should not associate the price of medication with its quality as a generic. Although less expensive, generics are the legal and appropriate equivalent of the brand name medication.

Manufacturers are simply able to sell them at a lower cost because they didn’t have to spend the money on the costly development, approval and marketing process.

The government has provided guidelines to show when a generic is truly the equivalent product of the brand name medication. There are several designations, but Yale Health recognizes only those that achieve an AB rating. A generic medication is rated as AB when it is determined to be the same strength, delivers the same blood levels and has the same effects as the brand name medication.

When medications become available in generic form, the Yale Health Pharmacy moves the medication along with its brand name to the appropriate tiers.

Yale Health uses a three-tier copay system. Medications in tier 1 or 2 have been determined to be more appropriate first steps in drug therapy. Tier 3 drugs are largely brand name medications that have generic equivalents in tier 1.

If a medication is listed in tier 2 and the generic becomes available, that medication would move to a tier 3 and the generic would typically be listed in tier 1.

For example, Lipitor was a tier 2 medication until its generic, Atorvastatin, became available last year.

Lipitor then moved to a tier 3 product and Atorvastatin became a tier 1.

You should discuss your medication options with your primary care clinician to see if a generic or other preferred option might be available. If a generic is a suitable option, it would be a tier 1 product and offer the lowest copay at Yale Health.

You can check which tier your medications fall under by visiting yalehealth.yale.edu/druglist.

Peter Steere, RPh, MBA
Assistant Director, Pharmacy

For more, listen to the healthcast on yalehealth.yale.edu/healthcasts.
New Clinician Joins Internal Medicine

Helen Dzujna, PA-C
INTERNAL MEDICINE

After spending the last 17 years providing primary and urgent medical care to pediatric, adult and geriatric patients at Family Health Care Associates in Shelton, Helen Dzujna (pronounced joina) recently joined the Internal Medicine Department.

She also worked in the Emergency Department at Bridgeport Hospital for three years.

Dzujna earned her undergraduate degree in biology from Boston College in 1990 and graduated with a BS in Health Science from S.U.N.Y., Stony Brook in 1994.

She is certified by the National Commission on Certification of Physician Assistants and a member of the American Academy of Physician Assistants and the Connecticut Academy of Physician Assistants.

Dzujna is also fluent in Spanish.

Call First

When the unexpected happens, call your primary care department to speak with a nurse before walking in to Acute Care.

After hours, weekends, and holidays, call Acute Care directly at 203-432-0123.

For life-threatening emergencies, immediately call 911.
Prescriptions

What is on my prescription label?

The first thing you should do when you receive your prescription is look at the label to make sure it is for the correct person and it is the correct medication.

The label also contains the prescribing clinician’s name as well as directions for taking the medication.

The prescription number (Rx#) helps ensure the prescription goes to the correct person and that you are getting your most current prescription. It is also used when refilling a prescription via telephone or online.

Your medical record number (MRN#) is located to the right of the prescription number and is the unique identifier assigned to each Yale Health member.

The warning label contains proper precautions for taking the medication as well as warnings for pregnant patients.

If you have any questions regarding your medications, you can call the pharmacy at 203-432-0033 to speak to a pharmacist.

James Laspino, RPh
Pharmacy

Insect Bites

How can I prevent tick bites and Lyme disease?

Lyme disease is transmitted by the bite of an infected tick and is the most common tick-borne disease in the Western world. It can affect the skin, joints, heart and central nervous system.

In the U.S., Lyme disease is transmitted by deer ticks, which are abundant in our area and typically live in wooded areas or brushy fields. They feed on warm-blooded animals and are generally found on high grasses or leaves where they wait to attach to a host.

They survive by eating blood from their hosts, which they find by detecting body heat, movement and carbon dioxide.

Ticks are more active in the warm weather, so make sure you take precautions to help prevent tick bites.

Wearing long sleeves and pants and tucking your pants into your socks when possible helps to minimize the area of exposed skin to which the tick can attach. You should apply insect repellent with DEET to any exposed skin when outdoors.

It is important that you check yourself for ticks when you return indoors. Deer ticks are often only 2-3 millimeters wide, the size of a pinhead.

It is only during the feeding process that the infected deer tick can transmit Lyme disease and it is rare for someone to get infected during the first 36-48 hours of tick attachment.

If you find an attached tick, remove it immediately using tweezers or small forceps. Grasp the tick as closely to the skin as possible and pull straight up. Avoid twisting or yanking movements that may puncture or crush the tick.

If you find a tick and are unsure how long it has been attached or if you see a rash that looks like a bull’s-eye, but don’t see a tick, you should schedule an appointment with your primary care clinician.

Christiane Nockels-Fabbri, PA-C, PhD
Internal Medicine

Safety

How can I keep my kids safe during the summer?

The summer months mean a lot of time outdoors, which often means a lot of bike riding, rollerblading, swimming and other activities where safety precautions should be taken.

Bike helmets are essential for every child even if they are riding in the driveway as accidents can happen anywhere.

If your kids ride skateboards or use rollerblades, they should have extra equipment such as wrist guards to protect themselves from falling on their outstretched hands, which can cause common fractures.

Swimming is a life skill your children need to know, but swim lessons are not a substitute for parental supervision. You should be present with your children in the water and, in the case of infants and toddlers, should always be within an arm’s length.

Remember to apply sunscreen to your children older than six months and reapply every two hours. They should also dress in long sleeves and pants when possible for protection from the sun and insects. You can apply insect repellent with 10-30% DEET to your children older than two months.

Hannah Mark, APRN
Pediatrics

For more on these topics, listen to the complete healthcasts on yalehealth.yale.edu/healthcasts.
Pharmacy Closing
The Yale Health Center Pharmacy will be closed on Saturday, June 30th for annual inventory. It will reopen Monday, July 2nd at 8:30 am. The Pharmacy will be closed 4th of July and Labor Day (September 3rd).

Take Care of Your Health
Visit the Take Care of Your Health section on yalehealth.yale.edu to educate yourself on some of our most searched health topics, calculate your body mass index or check your symptoms. Learn more about men’s health, women’s health and children’s health or search over 7,000 health topics on Healthwise.

Register for Yale Health Online
Register for a Yale Health Online account at yalehealthonline.yale.edu to request appointments, send secure messages to participating Yale Health clinicians and view certain parts of your medical history.

Change Your Address or Phone Number on the Yale University Portal
Now changes to your contact information with the University are done in one place, the Yale University Portal (portal.yale.edu). Changes made there are automatically transferred to Yale Health.