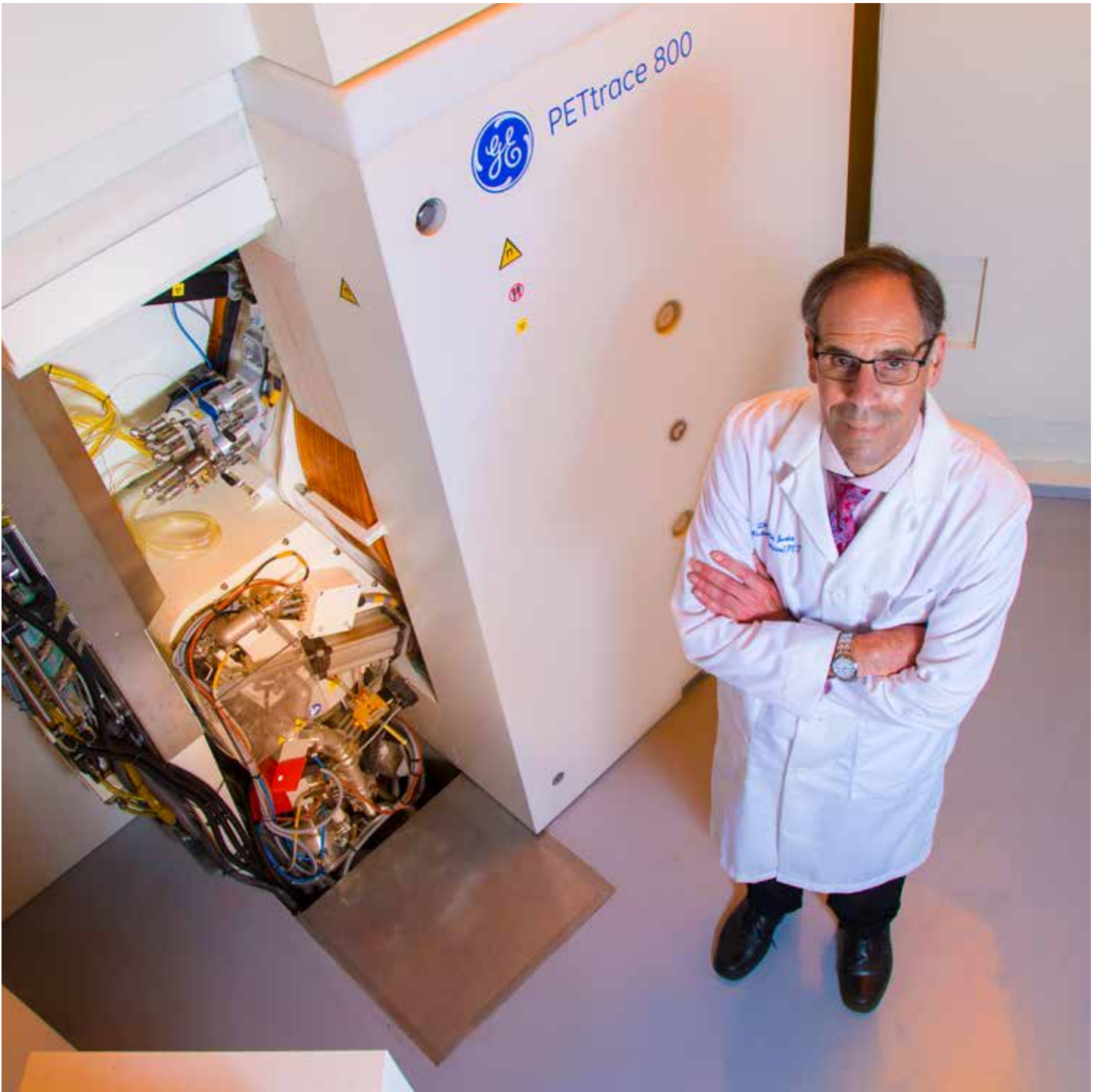


PHYSICIAN QUARTERLY

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Inside

New cyclotron enhances treatment options • Construction continues on Piqua medical complex

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On Our Cover
Martin Jacobs, MD, and the new Cyclotron at Kettering Medical Center. (read more on pg. 28)

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WE NEED PHYSICIAN EXPERTS!

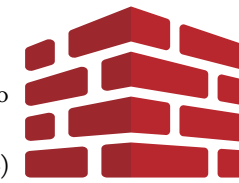
Are you willing to volunteer your expertise in any of the following areas?



Email physicianquarterly@ketteringhealth.org or call (937) 762-1073

65,775

Number of bricks used to construct the new Piqua medical complex (pg. 24)



2,500

Patients served in the first two months of On-Demand care operations (pg. 12)



11

Years the battery lasts in the Inspire sleep system (pg. 30)

9

Physicians constituting the new Urology service line (pg. 14)

60



Average attendees at network Research Bootcamps (pg. 18)

Our people shape our culture, and this recognition reflects their commitment to living our values and working together for the higher purpose of providing whole person health care in the communities we serve. Their passion and dedication to our mission is truly inspiring.

Fred Manchur, CEO, on Kettering Health Network being named one of the 2020 Fortune 100 Best Companies to Work For®. (pg. 20)

We want to create access points for more patients to receive the compassionate, high-quality care for which Kettering Health Network is known.

Eric Lunde, president of Troy Hospital, on the network's expansion to Piqua. (pg. 24)

... the need is growing. We need to make sure we are strategically placed to continue taking care of patients here at home.

Lisa Geloff, director of operations for Urology and Hospital Medicine for Kettering Physician Network, on the development of a Urology service line. (pg. 14)

PET MI is uniquely positioned to provide the data and exclusive information that will allow us to more fully define the potential of molecular medicine.

Raymond Poelstra, neurosurgeon and interim chairman of the PET MI Steering Committee, on the advantages of the new cyclotron. (pg. 28)

For many, it's incredibly encouraging to see that someone else has been able to overcome the challenge you're currently facing.

Rae Norrod, manager of Cancer Support Services for Kettering Health Network, on the effect cancer support groups can have on cancer patients. (pg. 10)

ESO Alerting Enhances Communication with Emergency Medical Services

Kettering Health Network has recently implemented ESO Alerting. The user-friendly software helps EMS providers securely and efficiently communicate with emergency departments. This technology is a communication tool that improves efficiency of care.

The first implementation in the state

The parent company of ESO Alerting, ESO, has a variety of software applications, some of which already offer bidirectional information sharing between the Epic medical record and EMS providers' patient care record. However, the network's implementation of ESO Alerting is the first in the state of Ohio.

"With this product, we can share information from the first time our EMS providers make contact with a patient in the field," said John Weimer, MS, RN, AEMT, CEN, NEA-BC, FACHE, vice president of Emergency, Trauma, and Network Operations Command Center (NOCC) for Kettering Health Network.

"In trauma situations, you're walking into the unknown," said Chris Vecchi, MPA, NRP, EMSI, manager of Network Air and Ground Transportation for Kettering Health Network. "Trauma events usually involve multiple injury patterns and multiple specialties. EMS providers are caring for patients minute-by-minute. With this technology, instead of scribbling notes on whatever they can, EMS providers can document and relay findings in real time so that the hospital knows exactly what's coming."

Extending expertise into the community

The NOCC will have access to the data shared through ESO Alerting as it helps determine where a patient should be placed and what interventions they need. The network is building processes to determine how this shared information can best be leveraged. "We're always looking to reduce the time it takes to get patients the best care," Weimer said.

"Over the last few decades, the resources on the pre-hospital side have advanced significantly," said Vecchi. "A lot of times, we think of our patient care starting at the point of entry to the hospital. But it starts in the field. And this technology gives us an extension of physician care into the community."

"In the simplest form, ESO Alerting is a way of using telehealth and sharing information in real time," said Weimer. "Whether it be stroke, trauma, or cardiac care—the possibilities are endless. This gives us the opportunity to put the expertise of our providers directly into the field."

To learn more, email John.Weimer@ketteringhealth.org or Chris.Vecchi@ketteringhealth.org. More information can also be found at eso.com/hospital/alerting-software



Benefits of ESO Alerting

This new software will enhance communication and efficiency between EMS providers and physicians in the hospital. Some benefits of ESO Alerting include

- **Sharing data in real time:** ESO Alerting allows EMS providers to directly input vitals, assessments, photos, and videos for the hospital's use.
- **HIPAA compliance:** The technology is secure, with state-of-the-art encryption and compliance with privacy requirements.
- **Instant feedback:** The software has full photo- and video-sharing capabilities, making it easy for EMS providers to snap pictures at the patient's side to share with hospital providers and get instant feedback.
- **Knowing what's coming:** Early notification means better preparation. Hospital emergency departments can adequately prepare to treat patients immediately when they arrive from the ambulance.
- **Configurable options:** ESO Alerting can be configured to EMS and hospital protocols to integrate seamlessly with current processes.



SALEEM AHMAD, MD
INTERNAL MEDICINE

Thank you, Dr. Ahmad, for being such an amazing doctor to your patients. You are one of the best electrophysiologists in the field and patients are so lucky to have a provider like you. Not only are you wonderful to patients but you are one of the best doctors to work with every day. We appreciate you!

ARTHUR ALTMAN, MD
OB/GYN

You have always been kind, caring, and so very personable. Congratulations on your upcoming retirement—you deserve some relaxation!

GARY ANDERSON, DO
GENERAL SURGERY

Dr. Gary Anderson was my surgeon for my breast cancer lumpectomy. He was compassionate, honest, and got every bit of malignancy. If it wasn't for Dr. Anderson, I wouldn't be here today to live every beautiful day with my loving family. Thank you so much, Dr. Anderson.

JORGE ARZOLA, MD
UROLOGY

Your skill, kindness, and professionalism has left me well taken care of. I pray for your safety in dealing with all patients and for your family.

SCOTT BALONIER, DO
EMERGENCY MEDICINE

Thank you, a million times, for all that you are doing right now in the emergency rooms! We truly appreciate you!

NICHOLAS BELLANCO, MD
FAMILY MEDICINE

Your compassion, knowledge and kindness are immeasurable! We appreciate you and your staff so much.

PETER BOUZ, MD
NEUROSURGERY

Thank you so much for telling us about the unique and new procedure that you performed on our mother. Our mother is doing extremely well considering all the medical challenges she has recently experienced. Thank you!

RICHARD BYERS, MD
FAMILY MEDICINE

Thank you for being there for my family. You and your office personnel have always made me feel like I am important to you and I'm sure you make all your patients feel that way.

JEFFERY CUSHMAN, DO
RADIOLOGY

Your expertise, humor, and calm manner really helped me feel at ease during my recent preop procedure and surgery. Thank you for being a doctor who makes a difference in patient care!

ELIZABETH DULANEY-CRIPE, MD
ORTHOPEDICS

You are truly appreciated and adored by my family! Thank you so very much for taking care of my dad and healing him. Praying that you and your family are abundantly blessed for the great work you do.

RONALD HALE, MD
ONCOLOGY

God bless you as you continue helping to save lives as such a caring and patient specialist in radiation oncology. Thank you for ... choosing to fight and believing in God's intervention with me.

FRANKLIN HANDEL, MD
CARDIOLOGY

Thank you for all the many years of taking care of the hearts of the men in my life—my father, my father-in-law, and my husband. You've been kind, trustworthy, and an excellent cardiologist to our family.

PRIYA JAIN, MD
ONCOLOGY

I want to thank you for the wonderful care that I have received. You are an amazing woman and doctor. You found a problem and decided what treatment would be beneficial and I have felt so confident in those decisions.

CURRAN JONES, DO
ANESTHESIA

Thank you for all you do for the anesthesia department! You are so appreciated, for your kindness, compassion, and patience!

ERIN MATHEWS, MD
FAMILY MEDICINE

Thank you for the great care you take in our patients' health. The compassion and concern you have for your patients follows throughout the office! We are blessed to have you!

THOMAS MERLE, MD
CARDIOTHORACIC SURGERY

Your skilled hands replaced my aortic valve. You truly extended my life for many years to come. I feel great and am working and loving life. Thank you so much, you are my hero!

ANTHONY PARVATI, MD
ONCOLOGY

Thank you for your sharing your expertise, planning, and caring while I was having my radiation treatments following my cancer surgery.

SHANTHI RAJARTNAM, MD
FAMILY MEDICINE

Thank you for all the years you have served as a caring and excellent physician taking care of not only my family but many other families in our community.

JAMES TYTKO, MD
FAMILY MEDICINE

Dr. Tytko was my family doctor and cared so deeply for my wife and four children for 30 years. You are a trusted and valued physician and friend to us all. I thank you for your love and being there for all our medical needs.

JONATHAN VELASCO, MD
GENERAL SURGERY

Dr. Velasco is one of the most compassionate human beings I've ever met. Not only is he an amazing surgeon but he cares deeply for his staff. I have worked with hundreds of surgeons in my career, and he is among the most wonderful, caring, and amazing.



THANK YOU!

Information Systems Update

You may have heard the term Epic Refuel—the network project to fully utilize our enterprise electronic medical record to drive standardization based on best practices across the network clinical and revenue cycle settings. Another synonymous term you may have heard is “driving systemness.”

An evaluation by Epic personnel and network representatives has identified over 600 potential Epic optimizations to improve clinician use and interaction with the Epic software. From a physician perspective, one of the major areas of improvement identified was end-user (physician) training, and we are working on a plan to revamp this process. It will involve physician trainers in the classroom with the Epic trainer, and it will be much more specialty-specific. Basic Epic navigation will be via eLearning. This new training will be required of all physician end-users.

Other identified projects include

- Improving medication reconciliation
- Problem-oriented charting
- Note standardization for provider efficiency, improved quality, and regulatory/payer compliance
- Specialty-specific optimization of the work space and processes to provide end-user efficiency

You will undoubtedly be hearing more regarding this wide-ranging initiative in the coming weeks, so stay tuned.



by
Charles Watson, DO, Chief Medical Information Officer for Kettering Health Network

Partnership with The Little Clinic Creates New Possibilities for Patient Care, Access



Shelley Perez, MD

Hundreds of Dayton-area residents rely on Kroger Health’s “The Little Clinics” every day. There, board-certified nurse practitioners treat common illnesses and injuries, offer annual physicals, give vaccinations, and perform health screenings and diagnostic tests. Now, those clinics can add one more service to the list: referrals to Kettering Health Network providers.

As part of a partnership between the network and Kroger Health, The Little Clinic team will refer patients to Kettering Health Network physicians when follow-up care is needed. They also can refer patients to a Kettering Health Network facility for additional services, such as imaging and suturing.

The relationship is reciprocal, in that Kettering Health Network providers can refer patients to The Little Clinics for same-day, after-hours, and weekend care. This arrangement could reduce unnecessary emergency department visits and minimize the need for extended hours at network primary care practices.

A shared vision

“As leaders from both organizations explored this partnership, we realized how much our mission, values, and vision overlap,” said **Shelley Perez, MD**, physician leader of Episodic Care Strategy with Kettering Physician Network. “Kettering Health Network and Kroger Health can help each other achieve the quadruple aim of improving patient outcomes and providing a better patient experience while reducing stress on clinicians—all at a lower cost to the consumer.”

The connection between The Little Clinics and Kettering Health Network is not new. Many of the nurse practitioners who see patients at The Little Clinics graduated from Kettering College or were at one time employed at a Kettering Health Network facility. Some continue to work part-time at Kettering Health Network emergency

departments. In recent years, several Kettering Health Network physicians provided clinical oversight to the Kroger Little Clinics—the new partnership formalizes this arrangement at all 11 clinic locations.

Kroger Health consists of not just The Little Clinics, but several other services and resources including

- **Kroger Rx Savings Club**, which offers significant discounts on hundreds of prescription drugs.
- **Sync Up**, a prescription auto-refill program that improves patient medication adherence.
- **Dietitian Direct**, which allows dietitians to share nutritional information with consumers via two-way video chat.
- **In-store dietitians** available for medical nutrition therapy (with a physician referral), nutrition coaching, personal shopping and weight loss support.
- **OptUp**, Kroger’s proprietary nutrition rating system, which assigns nutritional scores to hundreds of foods in its stores. It’s available on an app on Android and iOS phones.

“In this era of value-based health care, where physicians are being held responsible for patient outcomes long after patients have left the office, it is important to partner with resources in the community, such as Kroger Health,” Dr. Perez said. “Community partners can help us increase patient access to appropriate episodic care and improve patient compliance with medication and dietary treatment plans leading to better outcomes. This partnership is good for the patient, good for the physician, and good for the community.”

Beyond Treatment

Support and resources for the emotional well-being of cancer patients

What does it mean to care for patients holistically? At Kettering Health Network, treating patients means supporting more than just their physical well-being. To that end, Kettering Cancer Care offers several support groups and classes specifically designed to care for cancer patients in mind, body, and spirit.



“Both the groups and classes are intended to help the patient and their support person get information and guidance,” said Rae Norrod, MS, RN, AOCN, CNS, manager of Cancer Support Services for Kettering Health Network.

Support groups offer a powerful opportunity to connect with others, as cancer can be an emotionally, socially, and physically isolating disease. “Meeting others and finding out you’re not the only one can be a powerful and positive first step,” Norrod said. “For many, it’s incredibly encouraging to see that someone else has been able to overcome the challenge you’re currently facing.”

The network’s support groups include

- **CLIMB (Children’s Lives Include Moments of Bravery):** CLIMB is a six-week program for children ages 5-12 who have a family member with cancer. The course uses creative projects and focuses on the child’s strengths to increase their ability to cope with the stress associated with the illness. Facilitators help children figure out how to express and deal with their feelings and ask questions.
- **Healing Through Art:** Offered once a month, Healing Through Art is open to patients, as well as their family and friends. A professional art teacher leads the class and all materials are provided.
- **Meditation:** Meditation can ease daily stresses, improve sleep, and help us to become more resilient, calm, creative, and compassionate. These sessions are open to everyone, with or without experience.
- **Powerful Tools for Caregivers:** This six-week program is offered as an educational workshop for caregivers of a family member or friend. The curriculum is specifically designed to support and improve the well-being of the caregiver.

- **Seeing God in Your Cancer Journey:** This nine-week, scripture-based support group explores how a person’s Christian faith can impact a cancer journey. Patients, survivors, and care partners are all welcome.
- **Southwest Ohio Brain Tumor Group:** This support group is open to all patients who have brain tumors and is not limited to cancer. Family members, friends, and caregivers are all welcome.
- **Spiritual Support Group:** This weekly support group is led by a chaplain and provides opportunities for cancer patients to connect with others.
- **Survivors and Caregivers United:** Patients, survivors, and their support people are all welcome. The group includes guest speakers and discussion topics.

The network also offers a variety of classes:

- **The Chemo Class:** This class is for anyone who is beginning their cancer treatment. It includes overviews of chemotherapy, biotherapy/immunotherapy, targeted therapy, common side effects, and resources. Patients are welcome to bring their friends or family members.
- **Integrative Medicine Topics:** Integrative medicine services offer classes on aromatherapy, Caring Touch massage therapy, and reflexology.
- **Look Good Feel Better:** This class helps women manage the appearance-related side effects of cancer treatment. Class leaders are trained and certified by the Look Good Feel Better Foundation and the Professional Beauty Association.
- **Navigating the Breast Cancer Journey:** The class is offered to both breast cancer patients and their family members or friends.

Participants receive resources to understand the breast cancer disease process and treatment options. They also get to meet team members from the Renew Boutique and Spa, where patients have access to wigs, breast prostheses, hats, scarves, wellness treatments, and more.

- **Nutrition Class:** Offered in partnership with Maple Tree Cancer Alliance, the class delves into the role of nutrition in the cancer journey.
- **Cancer Yoga:** This free, 60-minute class is designed to accommodate restrictions from cancer treatment. No experience is necessary for patients to attend. Yoga is offered in partnership with Maple Tree Cancer Alliance.

Beyond the physical diagnosis

“What we offer at Kettering Health Network is unique,” said Norrod. Kettering Cancer Care offers a much more comprehensive array of classes and support services than elsewhere in the region. “Cancer is more than a physical disease—it impacts every part of a patient’s life. Our goal is to give our patients more tools and resources to cope with their diagnosis.” Norrod pointed out that a cancer diagnosis can affect how people communicate with their loved ones, manage their energy, and find transportation. “It’s important to provide support that goes beyond the physical disease.”

Norrod shared that she commonly hears other people say that working in cancer care must be discouraging. “Actually,” Norrod said, “I’m amazed by the courage and positive attitudes I see in our patients. The patients I see every day are an inspiration.”

For more information, call 1-855-500-2873, or visit ketteringhealth.org/cancercare

On-Demand Care Proves to be in High Demand

By now you've probably seen the ads for Kettering Health Network's three new On-Demand Care clinics. Maybe you've even referred patients there for acute care after hours. But do you know the concept behind this care model and how it benefits patients? We sat down with **Ward Blair, MD**, to find out. Dr. Blair is medical director of Springboro Health Center. He and **Jolinda Caswell, MD**, a family medicine physician at Kettering Physician Network Primary Care - CenterMed, are collaborating physicians for the On-Demand Care locations, which opened in late 2019.



Ward Blair, MD



Jolinda Caswell, MD

What is the concept behind On-Demand Care?

Dr. Blair: For a while now, the Kettering Physician Network Primary Care service line has been working hard to expand patient access—all practices offer same-day appointments, extended hours, and e-visits. On-Demand Care is our next big step forward in patient access.

On-Demand Care is an extension of the Kettering Physician Network Primary Care service line. These clinics serve two different groups of people. The first is patients who are already established with a network primary care provider. They can come to an On-Demand Care with an acute medical need when it's after hours or their usual provider can't fit them into that day's schedule. The care team will be able to access their medical record and easily route a care note back to their provider. We hope patients feel like they are seeing their provider's partner—just in a different location.

The second group is patients who have an acute need but don't have a Kettering Physician Network primary care provider. Anyone is welcome to seek and receive care with these convenient On-Demand Care clinics, regardless of their primary

care home. If they do not yet have a primary care home, then our team can refer them to a Kettering Physician Network primary care provider for follow-up and ongoing care.

How does this differ from urgent care?

Dr. Blair: Kettering Health Network has urgent care centers in Huber Heights, Beavercreek, and Xenia. They see the same types of conditions and offer similar medical services as On-Demand Care practices, such as X-ray and same-day lab tests. But urgent care is staffed by physicians and advanced practice providers and is often more of a one-off. It is not set up to provide the same level of integration with our primary care practices. Also, for most insurance, urgent care and certainly the emergency department are more expensive than On-Demand Care, which bills at the same rates that primary care practices do.

Who provides care at these practices?

Dr. Blair: Advanced practice providers—both nurse practitioners and physician assistants—lead clinical teams at the On-Demand Care locations. Dr. Caswell and I are available for clinical collaborative support, and all three practices are backed up by the full resources of Kettering Health Network. The care team can make referrals to a primary care provider and network specialists, order tests at a network hospital, and consult with providers at any network facility as is deemed appropriate.

Can patients reserve a spot in advance?

Dr. Blair: People can go to ketteringhealth.org/ondemand to see wait times and save a spot, reserve a spot using MyChart, or they can just walk in.

For more information, visit ketteringhealth.org/urgent-care/on-demand-care

Network Focuses on a Culture of Provider Well-being

Kettering Health Network is implementing a focused effort on improving physician and advanced practice provider wellness. Our goal is to identify areas where the network can further promote a culture of well-being, both through additional access to resources and improved operational efficiencies.

Stanford Medicine has created an approach called the WellMD Professional Fulfillment Model to promote clinicians' well-being. Stanford asserts that there are three domain areas required for well-being: culture of wellness, efficiency of practice, and personal resilience.

These three domains can be thought of like a three-legged stool: if one leg breaks, the whole seat collapses. As an organization, our responsibility is to create a culture of wellness and improve our efficiencies so that clinicians have the time and ability to build personal resilience.

Culture of wellness

Creating a culture of wellness is an organizational responsibility. We must give physicians and advanced practice providers space and opportunity to create balance. As medical providers, many messages about wellness center around creating healthy lifestyle habits. But if, as a network, we are not giving physicians any time to build their resilience, even the best exercise habits can't eliminate the risk of burnout.

Part of our culture of wellness is providing mental health counselors and resources for providers. On the "Physicians Only" tab at ketteringhealth.org, there is a list of vetted, approved mental health counselors. These clinicians are not affiliated with Kettering Health Network in any way, and thus are 100% confidential resources. The site provides a list of insurances accepted by these counselors, as well as webinars and free seminars on establishing balance and promoting mental health.

Efficiency of practice

If our practice operations are not running efficiently, physicians and advanced practice providers don't have the necessary resources to do their jobs well. One of the ways the network is actively working on improving our practice operations is through the Epic Refuel initiative. This series of updates to our emergency medical records addresses the need to optimize Epic and create more efficient workflows.

We've also begun a program of orientation by specialty for new providers. This hospital-based orientation began at Fort Hamilton Hospital and is currently in pilot stages at Soin Medical Center and Greene Memorial Hospital. Under the program, when physicians show up for onboarding, they have a clear pathway through which they meet with leaders in their specialty area and complete logistical items such as activating their badge and logging into Epic. For one physician, the onboarding process involved meeting with the director of surgery and surgical technicians to talk through best practices for dressings, post-surgical positioning, and necessary materials. By the time the physician started seeing patients on Monday, all logistical onboarding steps had already been completed.

Personal resilience

Building resilience is the physician's responsibility and involves practicing good health habits, such as proper nutrition and adequate exercise. While avoiding stress altogether is impossible, there are tools that help us to build resilience so that we can deal with stress in a healthy way. In future initiatives, the network has an aim to help physicians collaborate with each other in building better lifestyle habits.



by **Robert Smith, MD**, Chief Medical Officer for Kettering Health Network and **Kathy Perno, RN**



For more information on physician well-being initiatives, please reach out to Robert.Smith@ketteringhealth.org.

Kettering Physician Network Focuses on Urology Service Line Growth



Craig Nicholson, MD



Douglas Gaker, MD



Daniel Pucheril, MD



Raj Singh, MD

Projections show an increasing need for urological care providers over the next five years, and in response, Kettering Physician Network has built a Urology service line with nine physicians and eight advanced practice providers.

Some of these new physicians have been onboarded in response to a direct need in specific communities. For example, **Craig Nicholson, MD**, practices in Wapakoneta, the furthest north the network has expanded. **Douglas Gaker, MD**, has brought specialty services to Kettering Physician Network Urology Middletown. Kettering Physician Network also recently added **Daniel Pucheril, MD**, the first physician in the network to have fellowship training as a urological oncologist, and **Raj Singh, MD**, who is seeing patients at Kettering Health Network Middletown, and Kettering and Soin medical centers.

A national shortage by 2025

Lisa Geloff, director of operations for Urology and Hospital Medicine for Kettering Physician Network, noted the growth of network urology services is a strategic effort. “Data shows that there will be a national shortage of urology health care providers by 2025,” said Geloff. “With that knowledge comes a realization that our largest age population is that of baby boomers, who are the primary patients in need of these services.”

Focusing on the recruitment of urology providers is part of the network’s strategic plan to ensure that it can keep offering top-rate care close to home. “We need to expand services and provide good coverage—we don’t want to get to the point that if a patient presents with a kidney stone, they need to be referred elsewhere,” said Geloff.

Care close to home

Geloff noted that the Urology service line is working on subspecialties to meet patient needs, including centers of excellence. “We have a very collaborative nature which leads to continued advances in the field,” Geloff said. For example, Troy Hospital now has a MOSES laser—a state-of-the-art lithotripsy machine. The addition of this laser—the first in the network—allows for kidney stones to be broken down and removed more efficiently. Providing all services under this service line means that all urological care, such as renal, male reproductive, or kidney stones, can be taken care of within the network.

“Urology is not always a highly sought-after specialty,” said Geloff, “but the need is growing. We need to make sure we are strategically placed to continue taking care of patients here at home.”

For more information visit ketteringphysiciannetwork.org/urology



InterStim training photos courtesy of Jorge Arzola, MD

KETTERING PHYSICIAN NETWORK UROLOGIST PROVIDES INTERSTIM TRAINING



Jorge Arzola, MD

As Kettering Physician Network grows, one of its priorities is to share expertise with others. Last October, **Jorge Arzola, MD**, urologist with Kettering Physician Network Urology, trained four physicians from Central America to perform InterStim implantation procedures.

The InterStim device involves having a lead placed directly onto the nerve that controls the bladder and rectum. The treatment is indicated for refractory overactive bladder, fecal incontinence, and nonobstructive urinary retention. Dr. Arzola is the highest volume implanter of InterStim in the Dayton area, making the network a center of excellence for InterStim. In addition to InterStim, Dr. Arzola was also awarded a center of

excellence designation for Urolift—a treatment for benign prostatic hyperplasia.

Before October, InterStim procedures had not been performed in Central America. The four physicians trained with Dr. Arzola for two days, observing eight cases. By early January, two of the physicians collaborated to perform the very first InterStim surgery in Guatemala as a result of those teaching sessions.

“I do truly believe that InterStim is a lifechanging procedure,” Dr. Arzola said. “It’s amazing how fruitful it was to pass it on to others. I know the nuances of the procedure, but teaching it helps you learn something to an even further degree. It’s amazing to see this flourish in other parts of the world.”

Physician Advisors

Ready, willing, and able to support your clinical documentation needs

Clinical documentation may seem like mere bureaucracy at times, but what's in a patient's chart drives everything: quality of care, length of hospital stay, severity of illness, mortality risk, the prescribed therapies, staffing decisions, hospital reimbursements, and what doctors are paid. Kettering Health Network recently appointed a team of five physician advisors to help clinicians document accurately in the medical record.

In the old days, physician advisors were often known more as utilization review medical directors. Now a physician advisor is an expert clinician with certain additional skills who acts as a liaison between hospital administration and clinical staff. These additional skills are in areas such as documentation improvement and utilization management. Physician advisors help improve documentation practices, perform medical necessity reviews, and engage insurance companies in peer-to-peer conversations.

Improving documentation quality, not quantity

Clinical documentation is a part of utilization management, the goal of which is to effectively steward our resources to accomplish our mission. "Clinical documentation isn't about changing how we deliver clinical care or doing more documentation, it's about recording what we do accurately," said **Becky Ramirez, MD**, the network's chief transformation officer. "The health care market has changed dramatically, and payers are moving quickly toward value-based rather than volume-based care. They want to see the highest quality care provided at the lowest possible cost, and documentation is used to assess the quality of care delivered. Clinical documentation also justifies the use of clinical resources to care for patients, optimizes reimbursement, and improves the quality of life for the people we serve."

Physician advisors are the bridge between real-time care delivery and back-end organizational functions, creating new operational capability. Current responsibilities include

- Training and coaching clinicians in clinical documentation skills. This means clinicians get the credit they deserve for taking care of sick patients.
- Building good working relationships with payers
- Following up on insurance denials (physicians no longer have to do medical necessity peer-to-peers themselves)
- Working with care managers and social workers to improve processes related to patient transfers, length of stay, etc.

The bigger picture

The physician advisors are part of a major initiative at Kettering Health Network that began last year to use a clinical revenue cycle management process. This process administers all functions associated with patient service revenue throughout a patient's care journey, from scheduling and account creation to billing and final payment. Clinical revenue cycle management is a team effort across the entire network, involving everyone from physicians and social workers to the Information Systems and Clinical Documentation Integrity departments.



Becky Ramirez, MD



Richard Gregg, MD

Leveraging data to support providers

Richard Gregg, MD, chief physician informaticist at the network, is working with Information Systems teams to help bring a project improvement focus to the clinical revenue cycle management process. One area of focus is patient charts. "We want to simplify and standardize patient charts so that it's easier for physicians to provide excellent documentation," Dr. Gregg explained. "Physicians report that the electronic medical record is difficult to navigate, and that it's too easy to make errors or write long notes that don't really say anything. Improving the system could increase physician satisfaction and facilitate easier clinical handoffs."

The physician advisors, utilization review, clinical documentation improvement, care management, and social work teams have been conducting process improvement events to address standard work, handoffs between the teams, and escalation of complex or difficult cases.

For more information, feel free to reach out to one of the physician advisors, or contact Rebecca.Ramirez@ketteringhealth.org

Meet the Physician Advisors



Chowdry Bashir, MD
Kettering and Sycamore medical centers, and Troy Hospital



Warren Muth, MD
Kettering and Sycamore medical centers, and Troy Hospital



Sharon Merryman, DO
Grandview and Southview medical centers



Doug Paul, DO
(part-time)
Greene Memorial Hospital and Soin Medical Center

Not pictured
Anh Quan Nguyen, MD
(part-time)
Fort Hamilton Hospital

Why Should You Attend the Research Bootcamp?

Finding the tools and resources you need to start research and get published

Over the last few years, Kettering Health Network has identified a need to increase the available resources around research and publication. In response, the network has created the Research Bootcamp—a free workshop designed to give busy clinicians the tools they need to incorporate research into their practice.

Learning opportunities for everyone

“Historically, one of the challenges to growing research is that people don’t always have the confidence to start projects on their own,” said Mary Connolly, PhD, director of Innovation, Research, and Grants for Kettering Health Network. “What the bootcamp does is bring people who are complete novices to research, giving them the tools and resources they need to start their own project.”

The upcoming Research Bootcamp on October 14 will be the third annual event. Past years have seen an average attendance of 60 people from different areas of the network. Residents across the organization, faculty physicians, students from Kettering College, stroke coordinators, nurses, outside research coordinators, and employees from quality control have all attended the day-long intensive to learn about research.



“Although our primary target has been residents,” said Connolly, “the bootcamp is open to anyone across the network who wants to do research. Even people who have been doing research for 20 years will find something they can learn.”

Accreditation achievements

The bootcamp began as a response to evolving Accreditation Council for Graduate Medical Education (ACGME) requirements for osteopathic residency programs. Under these changes, residents have an increased requirement for participation in scholarly activity and research. The network built two events to provide further training in this area: the Writer’s Workshop in February and the Research Bootcamp in October.

The network had until this year to meet the new accreditation requirements—a deadline that Kettering Health Network successfully met. All residencies have achieved initial accreditation, with the next step being continued accreditation. Five of the 12 residencies have already reached this goal: radiology, anesthesiology, family medicine, internal medicine, and neurology.

In January, during the on-site accreditation visit, Kettering Health Network’s Continuing Medical Education (CME) Department was awarded a six-year accreditation with commendation, becoming the first program in the state of Ohio to receive this status under the new standards.

The most efficient way to get the knowledge you need

“Research benefits everyone,” Connolly noted. “Scholarly activity raises the profile of the network, of Kettering College, and helps make our residents better candidates for top-quality fellowship programs.” While events like the Research Bootcamp are common at academic medical centers, the offering is unique in a community hospital setting.

One of the challenges in a community hospital is that most providers don’t have time allotted in their schedule to dedicate solely to research. One of the goals of the Research Bootcamp is to provide practical advice for integrating research into clinical practice. “One of the other pieces that’s incredibly helpful is how to disseminate your research,” said **Carrie Baker, DO**, director of Graduate Medical Education Research and Medical Informatics. “Our presenters offer specific, practical steps for how to publish your research.”



Carrie Baker, DO

Dr. Baker noted that the Research Bootcamp is an efficient, easily accessible way to get the necessary resources. “This event is how you can get the most bang for your buck. It’s the shortest, most efficient way to get the knowledge you need. If you tried to take an online class or read a book, there’s no way you could get all of this information in such a consolidated amount of time.”

Participants in the Research Bootcamp receive six hours of category one continuing medical education credit. The event is free and counts for faculty development hours. Attendees also leave with a research toolkit, which includes a flash drive of all the files from the event so that participants have information to reference to in the future. Stephanie Balsom, MPH, RN, Kettering Health Network resident research advisor, explained that she has sent many residents copies of the bootcamp presentations to assist in choosing or starting a research project. “It’s amazing that in six hours, attendees can gain the foundation to understand and conduct ethical, practical, and meaningful research right here at Kettering Health Network,” said Balsom. “They also have the opportunity to network with clinicians from many different specialties to find out about similar interests and design multidisciplinary projects.”

“One of our primary goals is to help people understand that research doesn’t have to be scary,” said Dr. Baker. “We’re here to offer support and resources to make this more accessible.”

For questions or to reserve your spot in the Research Bootcamp, email GMEResearch@ketteringhealth.org



Event photos courtesy of Stephanie Balsom

Kettering Health Network named a Fortune 100 Best Companies to Work For®

Great Place to Work® and Fortune have named Kettering Health Network one of the 2020 Fortune 100 Best Companies to Work For®. The list is based on responses from more than 650,000 employees at Great Place to Work-Certified™ organizations across the country. Great Place to Work, a global people analytics and consulting firm, evaluated more than 60 elements of team members' experience on the job. These included the extent to which employees trust leaders, the respect with which employees are treated, the fairness of workplace decisions, and how much camaraderie exists within the company. Rankings are based on employees' feedback and reward companies who best include all employees—regardless of their role.

"We are honored and humbled to be named one of the 2020 Fortune 100 Best Companies to Work For," says Fred Manchur, chief executive officer of Kettering Health Network. "Our people shape our culture, and this recognition reflects their commitment to living our values and working together for the higher purpose of providing whole person health care in the communities we serve. Their passion and dedication to our mission is truly inspiring."



Our mission constantly reminds us of our purpose—to improve the quality of life of the people in the communities we serve through health care and education. This culture of caring is affirmed regularly at meetings and events through prayer and continuous improvement. As a medical resident, faculty from multiple specialties made me feel like family through education and mentorship, and when I had breast cancer, emergency physicians and nurses sent flowers and cards of support, created a meal train, participated in community cancer events, and carried me through treatment. As Kettering Cancer Care was developed, network leaders listened to patient recommendations and took their suggestions to heart—including recommendations I made as a member of the patient advisory council. The trauma surgery director used the term The Kettering Way to describe our culture—what truly set us apart. Kettering Health Network prioritizes a spiritual mission, fosters mutual respect, and takes whole-person care seriously. Recognition as one of the Fortune 100 Best Companies to Work For is well-deserved. I came to Kettering Health Network for a job, but I'm staying for the culture.

Carrie Baker, DO



Residents Create a Stress-Busting Resource for Intern Onboarding

First-year residents can worry less about Epic and focus more on developing their clinical skills during their first weeks of being on call, thanks to a recent resident-led quality improvement project.

The project involved customizing the Epic training software that first-year residents use during the onboarding process. The goal was to add patient charts to the software's practice environment that more closely mirror the real-life experience of using Epic. This meant adding practice patient charts that were as complex as real ones.

"We couldn't use actual patient charts, due to concerns about protecting patient privacy," said Carrie Baker, DO, director of Graduate Medical Education Research and Medical Informatics for Kettering Health Network. "So, we established a quality improvement project in which the residents worked collaboratively with Information Systems to build a practice patient environment using de-identified patient charts."

Dr. Baker provided oversight and support for the quality improvement project, along with Greg Volk, DO, director of the internal medicine residency program at Grandview Medical Center, and Charles Watson, DO, chief medical information officer for the network.

"This was a great learning experience for me and the other residents on the quality improvement team," said Wilson Phu, DO, now a third-year resident at Grandview Medical Center. "It gave us an opportunity to reflect on the learning curve with Epic—what was easy, what we wish we'd known before we were on call, and how we could have avoided some of the challenges we faced as first-year residents."

Dr. Phu, along with Kenneth Yam, DO, and Benjamin Bale, DO, used de-identified charts from two patients who had previously received inpatient care at Grandview. One of the patients was admitted to the ICU with diabetic

ketoacidosis, and the other pneumonia. With help from Epic clinical analyst Tara Walker, the residents repurposed the charts and added them to the Epic training software. Now, first-year residents can enter practice mode and essentially assume the role of a treating physician. They can review patient labs, pull up sample notes, open note tabs, and type in notes. When they are finished, the charts reset to their native state.

"Our goal was to prepare first-year residents by reducing the complexity of Epic, allowing them to focus more on patient care while seamlessly navigating the electronic medical record environment," said Dr. Yam, who is a third-year resident at Grandview. "With the hard work and dedication from our Information Systems team, we made that a reality and helped first-year residents be more efficient in their daily workflow."

First-year residents began using the new tool this year, and feedback has been positive. The project received approval from the Institutional Review Board if the quality improvement team wishes to pursue publication.

The project was part of a larger effort to provide residents with the opportunity to do quality improvement projects and incorporate medical informatics into the training experience at Kettering Health Network, Dr. Baker said. "Informatics is becoming an increasingly important field for medical practice, and our residents need to be prepared," she explained.

Dr. Baker recently developed a curriculum for a Clinical Informatics Fellowship program, which was approved by the Accreditation Council for Graduate Medical Education in February. She hopes to welcome the program's first fellows in July 2020.



Carrie Baker, DO



Wilson Phu, DO



Greg Volk, DO



Kenneth Yam, DO



Charles Watson, DO



Benjamin Bale, DO

Kettering Cancer Care at Troy Hospital Now Open

With the completion of the radiation oncology center in January, Kettering Cancer Care at Troy Hospital is now offering comprehensive, advanced therapies and technologies to care for virtually any form of cancer.

Kettering Cancer Care at Troy Hospital is based on the existing models at Kettering and Soin medical centers, and Fort Hamilton Hospital. “It’s a model that we know works exceptionally well,” said Tricia Tobe, clinical director of Oncology for Kettering Health Network.

The new facility, which opened in early October 2019, has a mix of 10 private and semi-private infusion bays. The layout for the infusion room was designed in response to the feedback of former cancer patients, who sat on the patient advisory council and helped design Kettering’s cancer center. Infusion bays are all within the line of sight of the nursing station. There are also nine exam rooms on the medical oncology side and four exam rooms in radiation oncology. On the first floor, the facility has large windows to bring in more natural light, offering a warm, relaxing environment for patients. The cancer center also has a state-of-the-art linear accelerator. This LINAC is the same type that is available at each Kettering Cancer Care location so that patients can be ensured continuity of care.

Joseph Lavelle, DO, and **James Sabiers, MD**, are offering medical oncology services at Troy, and **Jonathan Moayyad, MD**, practices radiation oncology. The team at Kettering Cancer Care at Troy also includes a social worker, dietitian,

nurse navigators, financial navigation resources, and mental health services. These mental health services are also currently offered at Kettering Medical Center. The program has been so successful there that the network has added another mental health nurse practitioner in oncology to keep up with demand.

Caring with compassion

“When someone crosses the threshold of any Kettering Health Network facility, 9 out of 10 times, it’s not because something good has happened to them,” said Eric Lunde, president of Troy Hospital. “They’re walking in the door because something is wrong, and they’re handing us their trust. They trust our expertise, our quality and outcomes, and the culture we’ve created. It’s a sacred trust they’re placing in our hands.”

All Kettering Cancer Care locations have a unifying mission—to exceptionally care for mind, body, and spirit. As Tobe described, Kettering Cancer Care uses a unique model to provide all types of oncology treatment under one roof. Under this model, Kettering Health Network offers comprehensive, holistic care for all patients. The result is a reduced strain on patients—physical, emotional, and financial. By offering this care close to home, patients in northern communities no longer must drive 30–45 miles just to access care.

“When someone receives a cancer diagnosis, it affects all areas of their life and those who love them. Cancer doesn’t discriminate or differentiate,” said Tobe. “We are here to make a difference in the lives of the people we serve and are so happy to be able to extend this service to Troy and the surrounding communities.”

With the opening of these cancer services, the network is merging the strategic and the personal. “We opened services in Troy because of the identified need in the community,” Lunde said. “This aligns directly with our strategy of providing care close to home. And while there is a tangible way that we’re helping people get well, we are

also providing exceptional care through the way we compassionately handle a patient’s sacred trust in us. We couldn’t do any of this without our exceptional physicians and staff, who put our mission into action every day.”

To learn more, visit
ketteringhealth.org/cancercenter/troy



Joseph Lavelle, DO



James Sabiers, MD



Jonathan Moayyad, MD

A New Medical Complex Rises in Piqua



Construction is on track for the network's newest emergency center and medical office building, located in Piqua. The \$30 million, 31,175-square-foot complex will employ about 75 people, including nurses, respiratory therapists, imaging and lab technicians, and support staff.

The two-story facility will be located at 1 Kettering Way, near Looney Road, about nine miles from Troy Hospital, which the network opened in June 2019. The new complex will include

- An emergency department with 12 exam rooms; imaging (computed tomography, ultrasound, and X-ray); and an outpatient laboratory.

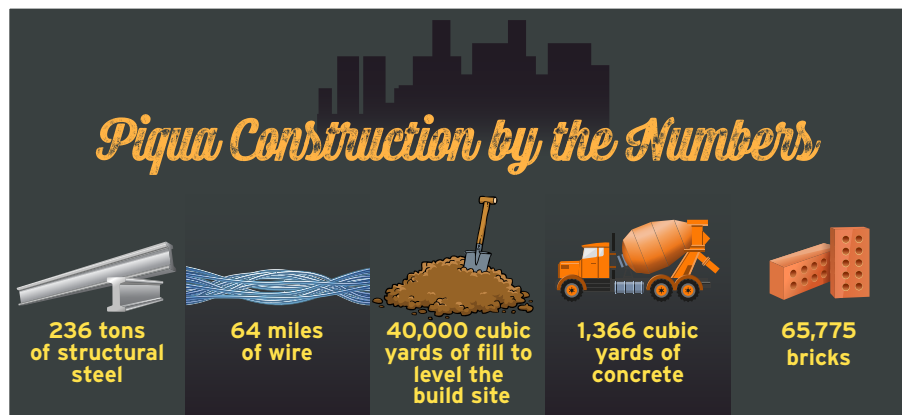
- Primary and specialty care physician practices with 14 exam rooms; shell space to accommodate expansion; and a classroom for community education classes.

A telehealth service will allow emergency medicine providers to access specialists across the network when they need a consult for patients who present with stroke symptoms, behavioral health issues, or other acute conditions.

Kettering Health Network is building this complex to meet the growing need for more primary care and emergency medicine services in Miami County, said Eric Lunde, president of Troy Hospital, who is overseeing the Piqua project. "We want to create access points for more patients to receive the compassionate, high-quality care for which Kettering Health Network is known," he explained.

As the building takes shape, hiring and onboarding are becoming priorities. "One thing we learned as we expanded in the region is as we staff new facilities we need to hire current employees and people who are new to the network. This allows us to preserve our network culture, in which patients are treated with dignity and respect, and also bring new energy to the patient care setting."

Lunde said Kettering Health Network is actively recruiting primary care physicians for the medical office building. Specialists will likely come from existing network practices.



Caccamo's Corner

One constant in the human experience is change. Big changes can come at any age, time, and season of life, and often when we least expect it.

We have all heard that change is good, but when it happens to us, we may struggle with it. Change is stressful. Change is something that we generally fear. Most of us dislike change, whether it is in our job, personal relationships, or rearranging the furniture in our house.

Uncertainty about the future leaves us insecure and anxious about the unknown. It challenges our expectations and our routines. As medical providers, it seems we are facing change daily. New technologies and groundbreaking research change the way we care for patients, and economic realities change the way we run the business side of health care; things are changing so fast that it's hard to keep up.

I recently faced a significant change when I was asked to become the chief medical officer at Grandview Medical Center. The decision to say "yes" was not difficult from a spiritual standpoint—I felt God wanted me to do it. But familiar questions danced around in my mind. What challenges should I anticipate? What surprises are ahead? This reminded me of the Serenity Prayer, which was written almost 100 years ago by the American theologian Reinhold Niebuhr:

God, grant me the serenity to accept the things I cannot change,

Courage to change the things I can,

And wisdom to know the difference.

This prayer gives me peace in moments of uncertainty and stress. I'm also comforted to know that God has a plan for my life. If we trust in God and allow change to happen, we will grow to become more like Jesus Christ in how we respond and act.

The Bible is full of encouraging words that give us peace:

"For I know the plans I have for you," declares the LORD. "Plans to prosper you and not to harm you, plans to give you hope and a future."

—Jeremiah 29:11

"Have I not commanded you? Be strong and courageous. Do not be afraid; do not be discouraged, for the LORD your God will be with you wherever you go."

—Joshua 1:9

"The Lord himself will lead you and be with you. He will not fail you or abandon you, so do not lose courage or be afraid."

—Deuteronomy 31:8

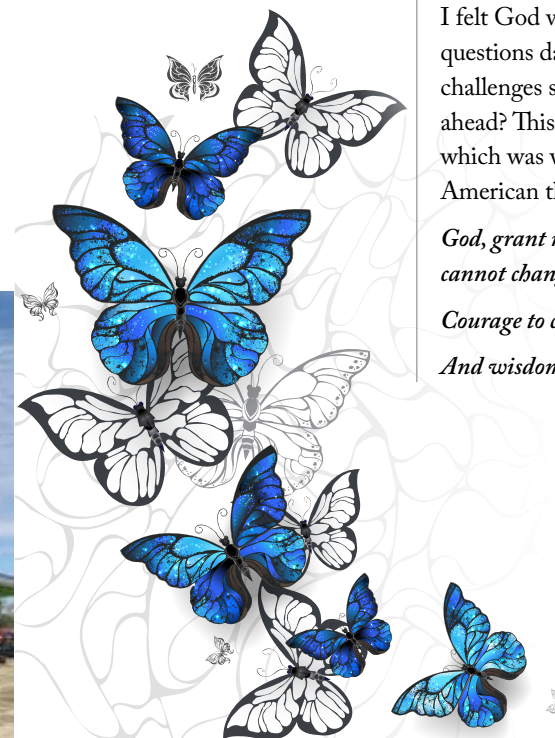
"And we know that in all things God works for the good of those who love him and have been called according to his purpose."

—Romans 8:28

Remember: nothing in our lives is random. We have a destiny, one that only we can fulfill. Psalm 139:16 says, "all the days planned for me were written in your book before I was one day old." God has placed us here, together at this time—not by accident but according to His divine plan. God is good. He loves us. He will take care of us. Even when we feel overwhelmed by all of life's changes.



by
Michael Caccamo, DO, CCD,
Chief Medical Officer at Grandview and
Southview medical centers



Collaborative Spirit Strengthens Network Pandemic Response

COVID-19 brought incredible amounts of uncertainty and fear—little was known about the transmission, symptoms, origin, or severity of the disease. More than just providing care, health care workers were forced to be agents of truth, peace keepers, and sources of valuable information. It was imperative that those working in the hospitals work together with media members, community organizers, and faith leaders to make sure our cities and people were kept healthy and informed—this situation required collaboration and efficiency.

Looking back to the beginning of the COVID-19 pandemic, I can't help but think how quickly we moved into action. Just a few months ago, we had no data, limited personal protective equipment, little testing, and no confirmed treatments for this new infection—that is a drastic comparison to the state we are in now. We have a better understanding of the virus and ample personal protective equipment. Multiple treatment options have already been evaluated, several reasonable treatments are available, and we can use a few testing options for different scenarios.

This progress would not be possible without an overwhelming amount of support and collaboration. Physicians—employed by the network and private alike—were coming together and working harder than ever. Private internists and hospitalists were telling me that they were ready to stay at Fort Hamilton Hospital 24/7 if needed. Anesthesia and emergency departments were ready to double night presence and volunteered to help with night time coverage and assist with ICU management of straight forward patients to relieve intensivists if necessary; my group was ready to close office and quadruple hospital presence should the need arise.

The collaborative spirit even became part of our approach in combatting the virus itself, working with other departments across the organization to find the best way to care for those in our communities. Respiratory Therapy departments were brainstorming and concocting devices with us to decrease aerosolization. It took only a couple days for the hospital lab manager to provide us with COVID-19 testing that had a 36-hour swab to result time instead of usual 5-7 days, which at a time, has literally revolutionized our approach. Given rapid development of the situation and new information we were receiving daily, there was a lot of sand to wash to get a rare gem, so to speak.

The COVID-19 pandemic, like any disaster, has brought out the best in people. Moving forward, this pandemic will bring out more innovation, dedication, and quick responses from our care teams. I have been encouraged by my colleagues and how they have been dedicated to the network's commitment to care for each other and the community and am hopeful that Kettering Health Network will continue to lead both as physicians and servants as we navigate this pandemic.



by **Michael I. Gabrilovich, MD, PhD, FCCP**,
Medical Director, ICU; Medical Director, Center for
Advanced Endoscopy, Fort Hamilton Hospital

Shout Outs



Patrick Lytle, DO

Patrick Lytle, DO, has been named vice president of Clinical Outcomes for Kettering Health Network. Dr. Lytle will be responsible for the strategic leadership for alignment of service line clinical processes and implementation of best practices. Dr. Lytle most recently served as chief of staff at Fort Hamilton Hospital.



Michael Mewhirter

Michael Mewhirter, MBA, has been named chief financial officer for Kettering Health Network, and will leave his current role as vice president of Finance for Grandview and Southview Medical Centers, where he oversaw financial performance, clinical and business operations, and led network alignment.



Dann Hotelling

Dann Hotelling, MBA, has been named vice president of Finance for Kettering Health Network and will assume responsibility for general accounting, supply chain, and joint venture management.



Kayla Winkler

Kayla Winkler, MHA, has been named director of the Heart & Vascular service line for Kettering Physician Network.



Luis Chanaga

Luis Chanaga, MBA, has been named president of Sycamore Medical Center. Luis has been chief operating officer for Kettering Physician Network since 2018, where he has been responsible for service line operations and worked to align physician and facility leaders to a system structure.



Kathleen Lang, MD

Kathleen Lang, MD, received the YWCA Hamilton Outstanding Women of Achievement award. Dr. Lang was the first female primary care doctor and the first woman to do obstetrics in Hamilton.



Brad Morrison

Brad Morrison, RN, MPH, has been named Fort Hamilton Hospital's vice president of patient care services and chief nursing officer, replacing Jennifer Shull, RN, MHA, who recently was named Kettering Health Network's senior vice president and chief nursing officer.



Wendi Barber

Wendi Barber, MBA, has been named chief financial officer for the Kettering Medical Center system, and will transition from her role as vice president of Finance and Operations for Soin Medical Center and Greene Memorial Hospital.



William Villegas

William Villegas, MBA, has been named chief financial officer for the Grandview Medical Center system. William has nearly 20 years of health care experience including oversight in support services, perioperative services, ancillary services, and patient access.

Kettering Physician Network Primary Care - Middletown has received National Committee for Quality Assurance (NCQA) Patient-Centered Medical Home (PCMH) recognition. The NCQA PCMH is a model of primary care that combines teamwork and information technology to improve care, improve patients' experience of care and reduce costs.

Cyclotron Expands PET Technology to Enhance Diagnostic and Treatment Options



Raymond Poelstra, MD

Kettering Health Network, with generous contributions from the Boonshoft family and Gala of Hope Foundation, recently funded the purchase of a new cyclotron at Kettering Medical Center. The first cyclotron at Kettering Health Network was primarily employed over the last 30 years to aid advanced research tied to positron emission tomography (PET) molecular imaging (MI). The new accelerator invites a host of new capabilities in the expanding field of clinical PET MI.

PET MI allows clinicians to better visualize the body and observe a patient's biochemistry. Medical cyclotrons make short-lived radioisotopes (positron-emitters) that are then attached to specialized chemical compounds and injected into the body. These compounds are designed to insinuate into a specific pre-determined biochemical reaction. A PET MI scanner then records the location of the positron annihilation, which in turn lets physicians monitor the location of the unique biochemistry or physiology of a disease inside the patient.

The historical context of PET in the network

Having a cyclotron at all is unique in a community hospital setting, noted **Martin Satter, PhD**, chief PET physicist at Kettering Medical Center. "Usually, cyclotrons are only found at academic centers, so it's remarkable for the network to be installing our second cyclotron. Because of the short half-lives of the positron-emitting radioisotopes, having an on-site cyclotron enables a wide variety of sophisticated biochemical probes to be synthesized for imaging patients. In turn, we can offer personalized medicine for patients, with treatment matched to the patient's particular biochemistry, in near real-time."

"In the past, the cyclotron only made radioactive isotopes of carbon, nitrogen, oxygen, and fluorine," explained Elaine Gagermeier, director of Nuclear Medicine and PET MI for Kettering, Sycamore, and Grandview medical centers. "The

new cyclotron allows us to make additional new radioisotopes, such as gallium, iodine, and copper. As this new accelerator is much more powerful, we can also make far greater quantities of all the radioisotopes."

"PET MI has been used extensively in the network to characterize and delineate brain tumors for over 20 years. In combination with image-guided technologies, the use of c-11 methionine has expanded our ability to treat brain tumors more aggressively, with greater precision, and, in many cases, earlier in the detection cycle. This technology has also allowed the care team consisting of neurosurgeons, radiation oncologists, radiologists, and oncologists to follow the patient's progress more proactively," said **Raymond Poelstra, MD**, neurosurgeon, interim chairman of the PET MI steering committee, and interim medical director of the Brain & Spine service line.

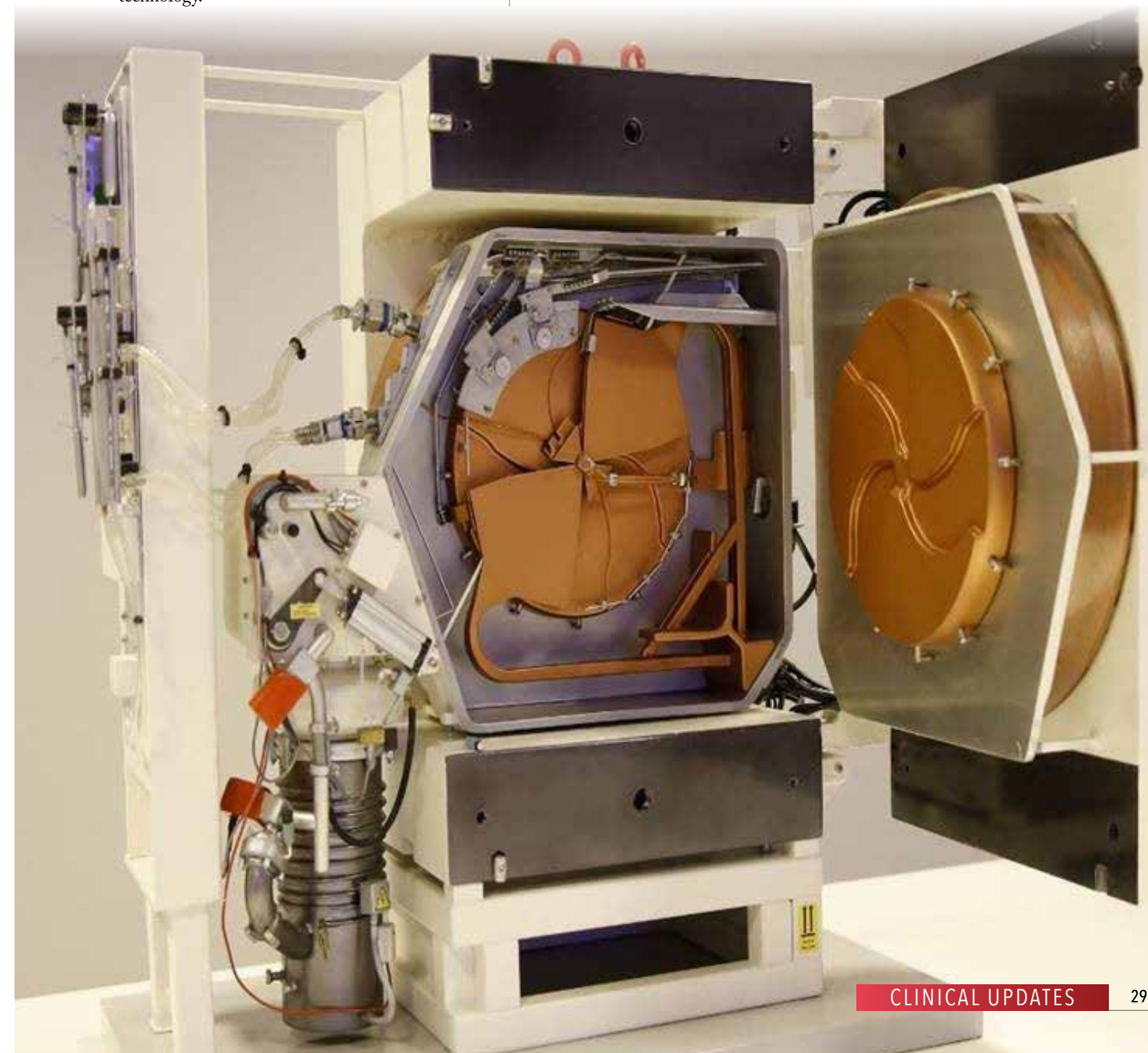
Growth and recent developments

For many years, PET scans were used in response to a single biochemical question. For example: what is the glucose metabolism in a patient's cancer? Decades of research have led to new PET MI agents that offer innovative ways to care for patients. These new agents allow for monitoring even more complex disease biochemistry. New PET MI agents have been shown to provide the earliest discovery and specific insight into the optimal treatment of prostate cancer, cardiac disease, breast cancer, as well as provide novel approaches to potentially treating Alzheimer's disease.

"As we continue to discover the complexities of our cellular biochemistry and the abnormal biochemistry of a disease process, we will be better equipped to personalize treatment. PET MI is uniquely positioned to provide the data and exclusive information that will allow us to more fully define the potential of molecular medicine," noted Dr. Poelstra.

"We've been waiting for this moment for a long time," Dr. Satter said. "Kettering Health Network has been a leader in clinical PET research and, with the new cyclotron, we are perfectly poised to continue to lead in the clinical implementation and expansion of this powerful imaging technology."

To learn more about the advanced PET MI capabilities the new cyclotron offers, please reach out to Martin.Satter@ketteringhealth.org or Raymond.Poelstra@ketteringhealth.org



"Inspired" New Treatment for Sleep Apnea

Kettering Health Network is the first in Dayton to offer this innovative option



Kevin Carter, DO

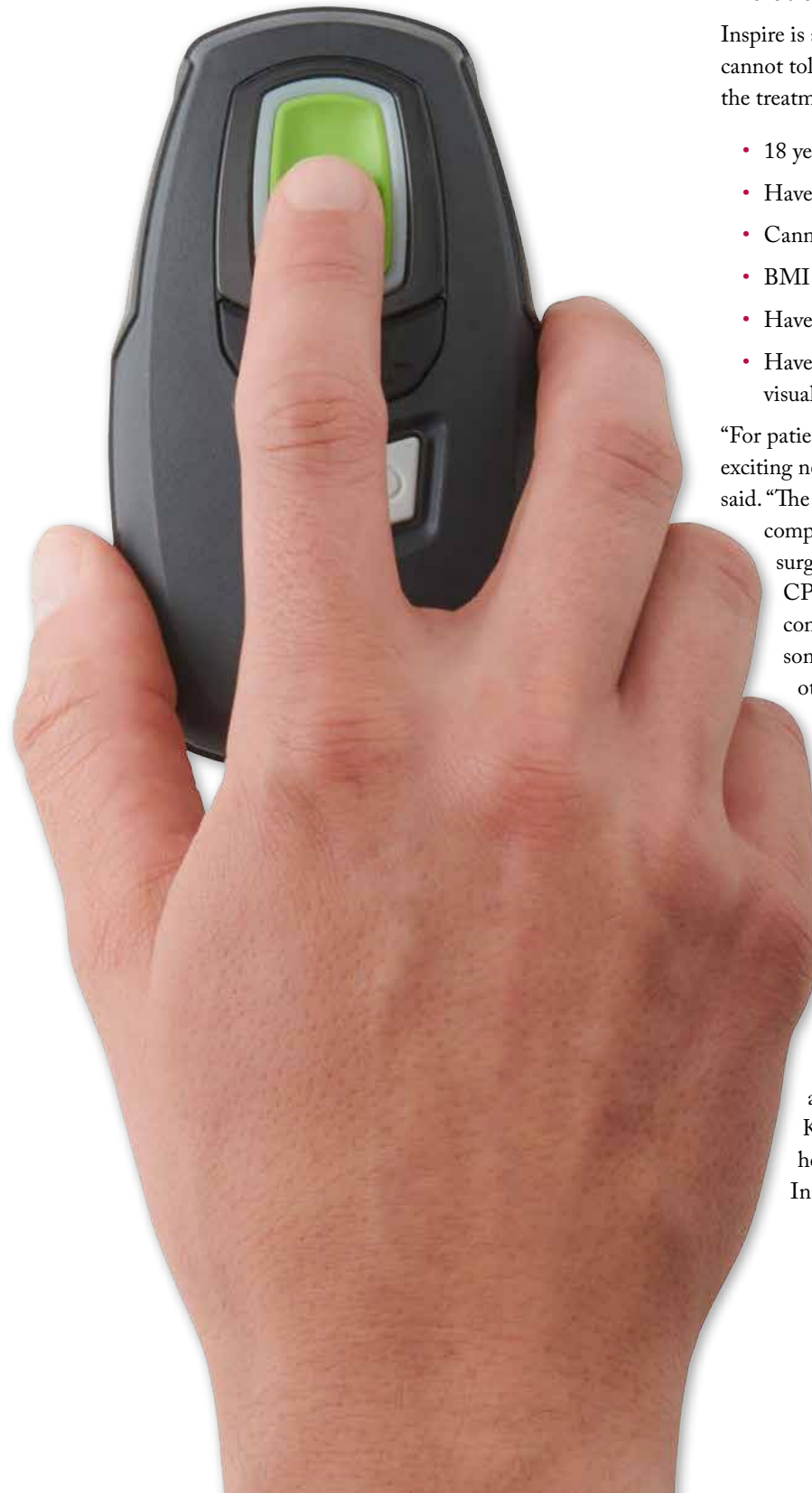
When a patient is diagnosed with obstructive sleep apnea (OSA), the first line of treatment usually includes a continuous positive airway pressure (CPAP) machine. However, for some patients who are unable to use CPAP, the new Inspire sleep system offers an innovative, FDA-approved option.

How does the system work?

The Inspire system uses a small, implantable device to open a patient's airway. **Daniel Larson, MD**, otolaryngologist with Southwest Ohio ENT Specialists, explained that Inspire works by stimulating the cranial nerve that controls muscle function of the tongue and back of the throat. The device signals specific branches of the hypoglossal nerve to prevent collapse during sleep apnea.

Inspire is controlled by a handheld remote, so patients can turn the device on before bed, and off when they wake up in the morning. The battery in the device is designed to last up to 11 years and can be replaced through an outpatient procedure. Patients are advised to schedule follow-up appointments to check the function of Inspire every six to 12 months.

During the initial placement of the Inspire system, the surgeon positions the device through the neck, under the patient's jaw. The device runs down to a battery pack and microprocessor that sits at the top of the chest with leads running to the intercostal muscles. Similar to a pacemaker, these leads sense when the patient is breathing in and send a message to the processor to stimulate the hypoglossal nerve. The system is programmed to send this stimulation only when the patient is inhaling. The surgery itself takes around two to three hours and is normally an outpatient procedure.



Who is a candidate?

Inspire is appropriate for a subset of patients who cannot tolerate CPAP treatment. Candidates for the treatment must meet the following criteria:

- 18 years old or older
- Have moderate to severe sleep apnea
- Cannot tolerate CPAP
- BMI is less than 32
- Have less than 25% central sleep apnea
- Have had an initial sleep endoscopy to visualize the pattern of collapse

"For patients who meet these criteria, this is an exciting new avenue of treatment," Dr. Larson said. "The system has the potential to get patients completely off of CPAP, as opposed to past surgeries that are designed to improve CPAP tolerance. While we often can't completely cure OSA, this treatment offers some significant improvements over many other options."

The impact of expanding treatment

"Often, patients who can't tolerate CPAP simply don't use a machine at all," said Elizabeth Steele, manager of Kettering, Sycamore, Englewood, and Beaver View sleep centers. "But OSA can have a big impact on a patient's life, causing sleepiness, memory loss, and even car accidents. By offering this alternative, we're specifically targeting our patients who aren't currently being treated." Currently, Kettering Health Network is the only health system in the Dayton area to offer Inspire.

"Up to 30% of patients who try CPAP will stop for various reasons," says **Kevin Carter, DO, FAASM**, medical director of the Sleep Center at Kettering Medical Center. "Inspire gives those untreated patients an opportunity to sleep better and live a healthier life."

In addition to CPAP and now Inspire, Kettering Health Network also offers oral appliance therapy under the expertise of **Ron Dean, DMD, D.ABDSM**. Typically, sleep dentistry is an effective option for patients with mild forms of sleep apnea, while Inspire is indicated for those with moderate to severe cases.



Physicians can refer patients for an Inspire consultation to Dr. Carter at Kettering Sleep Center through Epic or by faxing a referral to (937) 395-8821.

When to Refer a Patient to Wound Care



“A common misconception is that you should wait until a wound is serious before you send a patient for specialized care,” said **Louis Pilati, MD**, medical director for Kettering Health Network’s wound centers at Sycamore Medical Center and Beavercreek Health Park. “The fact is that most wounds appear simple but may have underlying causes that inhibit healing. The sooner our wound care team evaluates the patient, the sooner we can establish a comprehensive treatment plan.”



Louis Pilati, MD

“By initiating wound care early, we are able to reduce days to heal, contribute to reduced inpatient days, provide follow-up care upon discharge, and reduce readmissions from wound-related illnesses,” he added. “Studies show that diabetic foot ulcers and venous leg ulcers close over twice as fast on average with weekly wound care versus every-other-week care, evidencing the value of post-discharge care in our network wound centers.”

Dr. Pilati explained that a referral is appropriate for any patient with a wound that isn’t healing within a week of initial treatment, and for inpatients who have a nonhealing wound. This includes patients who have

- Complex and chronic wounds, such as diabetic, venous, and pressure ulcers, as well as non-healing surgical wounds
- Radiation injuries to the soft tissue and bone
- A closed wound, such as a bruise or deep tissue injury that may quickly develop into a complex wound
- Medical conditions, such as diabetes, peripheral vascular disease, and venous insufficiency, which inhibit the wound healing process

Most referrals come from primary care physicians, emergency medicine, podiatrists, and surgeons.

About 40% of wound care patients have venous wounds, 30% have diabetic wounds, 20% pressure wounds, and 10% surgical wounds.

Comprehensive wound care

“We provide comprehensive wound care across the continuum, including outpatient and inpatient care, and at extended care facilities,” said Dr. Pilati. “Our philosophy is to focus not just on the wound itself but on the contributing factors to a nonhealing wound. For example, evaluating a patient with diabetes, we’re checking their hemoglobin A1C, vascular and nutrition status, and off-loading methods. We utilize orthotics, compression therapy, and off-loading devices.”

Physicians at each of the network’s four wound centers work closely with wound-certified nurses, nurse practitioners, and other clinic staff to achieve wound healing rates as high as 98%. Services include

- Comprehensive evaluation
- Vascular testing
- Debridement
- Hyperbaric oxygen (HBO) therapy (at Sycamore Medical Center and Fort Hamilton Hospital)
- Advanced wound dressings
- Advanced skin grafting, including bioengineered skin substitutes
- Boots and casting to provide off-loading
- Negative pressure wound therapy
- Amputation prevention for chronic and critical limb ischemia
- Coordination with home health care

Inpatient consults

A wound care consult can be invaluable in the inpatient setting, Pilati added. Within 24 hours of receiving the referral, a physician or nurse practitioner will see the patient in the hospital

for a comprehensive evaluation. “We initiate early treatment and ensure patients have supplies and follow-up care after discharge in our wound centers or in a nursing home,” he explained. “We coordinate with subspecialties necessary in their care, such as vascular surgery, infectious disease, nutritional counseling, and interventional radiology, for treatment to be successful.”

If you are caring for a patient with a wound, consider referring sooner rather than later. The risks of waiting can be significant. Patients with nonhealing wounds may experience chronic pain, loss of function and mobility, increased social stress and isolation, depression and anxiety, prolonged hospitalization, increased financial burden, and increased morbidity and mortality.

To refer a patient for wound care or hyperbaric therapy, use Epic or contact one of the centers directly.

Outpatient Wound Care Locations

Wound Healing and Hyperbaric Medicine Centers

Sycamore Medical Center*
(937) 384-8772

*Hyperbaric medicine also available

Beavercreek Health Park
(937) 458-4460

Grandview Medical Center Wound Healing

(937) 723-4231

Center for Wound Healing at Fort Hamilton Hospital*

(513) 867-3166

*Hyperbaric medicine also available

Inpatient wound care is available at Greene Memorial Hospital, and Grandview, Kettering, Soin, and Sycamore medical centers.



Welcome Providers

Kettering | Sycamore | Troy New Physicians and Advanced Practice Providers

December 2019-February 2020

ANESTHESIOLOGY

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(937) 723-3276

Jason Leffew, APRN-CNP
Soin ICU

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INTERNAL MEDICINE

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KPN Brain & Spine
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Mollie Strauchon, DO
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Richard Scharrer, MD
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UROLOGY

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Welcome Providers

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December 2019-February 2020

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Peter Lewis, DO
Milton Nathan, MD
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Grandview ICU
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Catherine Mudd, APRN-CNP
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SURGERY

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Welcome Providers

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December 2019-February 2020

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Oxford
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Ashantice Higgins, MD
Malek Safa, MD
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Soin | Greene New Physicians and Advanced Practice Providers

December 2019-February 2020

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Matar Matar, MD
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Welcome Providers

Kettering Physician Network New Physicians and Advanced Practice Providers

December 2019-February 2020

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Thank you!

Kettering Health Network would like to thank our physicians for their **dedication and leadership** during the COVID-19 crisis. We appreciate your commitment to **caring for our communities and being on the front lines** as the network battles this pandemic.

together. supporting each other.