

FOUNTAIN VALLEY REGIONAL HOSPITAL & MEDICAL CENTER

equipped for Care

fall
2008

Caring Staff

Innovative Technology

Qualified Physicians



Our Pediatrics Team

Healing Young Patients Inside and Out

Repairing Injured Rotator Cuffs

Advances in Treatment for Lung Cancer

Good News for Bunion Sufferers

NICU Nurses Handle
Tiny Patients with Care



Debbie Keel
FVRH CEO

Our Resolutions for 2009— Highest Quality Care and Customer Service

“We are expanding care at our Chest Pain Center and seeking accreditation as a Stroke Center.”

Like most of you, I marvel that 2008 is almost over and that 2009 is just over the horizon. I could easily list for you all of the many accomplishments of our fine facility, excellent physicians and extraordinary staff over the previous year. But it is probably more important that the community we serve knows what is in store for the New Year.

To begin with, you will see the next phase of our renovation project in the form of our new main entrance on Hospital Drive. The lobby is being expanded and a new canopied entrance is being constructed. The new entrance is closer to our 800 parking spots. And new campus signage will make it easier to find your way around our 35-acre campus.

As a result of that project, the old front entrance on Euclid will become the Emergency Room entrance. Our new Emergency Room lobby will more easily accommodate all the patients and families that choose our ER for service in a comfortable and spacious environment.

In the summer of 2009, we will add an expanded and refurbished non-interventional cardiology department, where patients can have a wide array of diagnostic cardiology exams like stress tests, echos and electrocardiograms.

To further support our very successful Certified Chest Pain Center, we will expand the number of beds in our Emergency Room to accommodate those patients presenting with chest pain.

In 2009, new physicians who have relocated here from other areas of the state and country, in specialties like vascular surgery, heart surgery, internal medicine, cardiology, pediatrics and ENT, will join our medical staff and establish a place on our campus, as well as with all of the major medical groups. If you ever need their services, you will find they add outstanding training and abilities to an already outstanding medical staff.

Next year, we also hope to become one of the county's regional Emergency Medical Services stroke receiving centers. Our team of nurses, neurologists, stroke intensivists, neurosurgeons and interventional radiologists has been working on the protocols and policies for nearly a year, and we have applied to be a Joint Commission Accredited Stroke Center as well.

Of course, you will continue to see FVRH commit to its quality goals and to raising the standard of care of all of its patients. In conjunction with our medical staff, we have worked hard to reduce infection, patient falls and other events that the federal government says (and we agree) should never happen in hospitals in this country.

All in all, we are in for a busy and productive 2009, and our New Years resolution is the same as it's always been: deliver the highest quality of care with a superb level of service to our patients.

Services



Heart & Vascular Care

- ▶ Orange County's First Accredited Chest Pain Center
- ▶ Qualified cardiologists and surgeons available 24/7
- ▶ Designated cardiac receiving station with surgical suites and ICU
- ▶ Cardiac Catheterization Lab

Spine Care

- ▶ Minimally Invasive Spine Surgery
- ▶ Congenital & Degenerative Disorders
- ▶ Cervical and Lumbar Spine
- ▶ Spinal Osteoporosis

Orthopedics

- ▶ Joint Replacement
- ▶ Sports Medicine

Neurosurgery

- ▶ Multi-Disciplinary Approach
- ▶ Brain
- ▶ Vascular
- ▶ Peripheral Nerves

Cancer Services

- ▶ Approved by the American College of Surgeons Commission on Cancer
- ▶ Outpatient Surgical Center
- ▶ Pediatric Oncology
- ▶ Center for Breast Care
- ▶ Imaging Center

Pediatrics

- ▶ Pediatrics
- ▶ 11-Bed Pediatric Intensive Care Unit
- ▶ 21-Bed Pediatric Unit CCS Certified
- ▶ 23-Bed Neonatal Intensive Care Unit CCS Certified
- ▶ Pediatric Transport Team

Weight Loss Surgery

- ▶ American Society for Bariatric Surgery (ASBS) Center of Excellence
- ▶ Evaluates your health and identifies obesity-related complications (such as high blood pressure, diabetes, heart disease) and works to treat them
- ▶ Helps you to establish your weight loss goals and to design a comprehensive weight loss program, to include diet, exercise and other lifestyle changes as well as psychological counseling and support.

Advances in Lung Cancer Treatment

Video-assisted surgeries are reducing post-operative pain and shortening hospitalizations



"This procedure shortens hospitalization and contributes to greater patient satisfaction," says Dr. Abraham.

Patients considering lung cancer surgery can now count on Fountain Valley Regional Hospital for a minimally invasive procedure called video-assisted thoracoscopic surgery (VATS).

The lungs are made of five lobes, and when disease makes it necessary to remove a lobe (lobectomy), surgeons typically enter the chest with large incisions that require spreading the ribs. The surgery is highly invasive.

Now, thanks to miniaturization technologies, physicians have been offered specialized surgical equipment that reduces chest wall trauma, scarring and post-operative pain. "The VATS lobectomy shortens hospitalization and contributes to greater patient satisfaction," states Reginald G. Abraham, M.D., the hospital's Medical Director.

Only three or four small incisions are required to gain entrance to the chest cavity when performing a VATS lobectomy. "The technique not only advances patient care levels but represents a skill set that thoracic surgeons are striving to acquire," comments Dr. Abraham, who champions



the new technique because of its patient benefits.

During the procedure, the surgeon inserts a small video camera (a thoroscope) and specialized surgical instruments into the incisions. The camera transmits images to a computer monitor, which guides surgeons as they remove the target tissue. In addition, in patients with early stage cancer, the technology can be used in the removal and biopsy of lymph nodes in the mid-chest area. This helps determine if a cancer is localized or has spread, and reduces the amount of discomfort for the patient.

According to Dr. Abraham, any patient that requires a traditional lobectomy would be a good candidate for the new procedure, as long as the cancer has not spread to other parts of the body. (Generally, that means patients with Stage I non-small cell lung cancer or patients with a single enlarging pulmonary nodule.)

Dr. Abraham is hopeful that once people learn that

this procedure is available, they will be less reluctant to seek care or follow up on a particular diagnosis. He explains, "Many people are frightened to approach physicians about possible lung cancer, because of a long history of tobacco usage. Also, some people diagnosed with lung cancer may not want to pursue the more definitive treatment that involves surgery. Instead, they might pursue a course that doesn't have as substantial an outcome as what surgery provides. When they learn about this procedure—which is less invasive but still offers the standard of care—they may be less reticent about following up."

The VATS lobectomy is a potent weapon in the battle against lung cancer, putting Fountain Valley Regional Hospital among those at the vanguard of the ongoing struggle against the disease. For more information about any of our extensive cancer, heart and vascular treatment services, please call us at **(714) 979-1408**.



ORANGE COUNTY
Regional Cancer Center

Helping Young Patients **HEAL** Inside and Out

Both physical and emotional care are important parts of the treatment plans for pediatric patients at FVRH.



“We can offer specialized care, balanced with the sensitivity that is required for the pediatric patient. All aspects of the child’s needs are taken care of.”

Lisa Sperry, R.N., B.S.N.,
Director of Pediatrics
and Pediatric
Intensive Care

At the Orange County Institute for Pediatrics at Fountain Valley Regional Hospital, young patients are prescribed regular doses of play and amusement while being treated for a range of problems, from acute ailments such as gastroenteritis to chronic diseases such as leukemia.

Patients at the 21-bed Pediatric Unit, which is certified by California Children’s Services (CCS), and the 11-bed Pediatric Intensive Care Unit (PICU) have access to services in practically every surgical and non-surgical pediatric subspecialty. Patients from area hospitals without pediatric units are transferred to FVRH

24/7 by a dedicated Pediatric Transport Team, which utilizes an ambulance modified with kid-friendly features, a DVD player and extra room for a parent. “We are able to mobilize quickly, transporting critically ill kids in a ‘hospital unit on wheels’, so they can get the higher level of care here that another hospital may be unable to provide,” explains Lisa Sperry, R.N., B.S.N., Director of Pediatrics and Pediatric Intensive Care.

Pediatric patients have access to a playroom, an outside play area and enough toys to please everyone from toddlers to adolescents. Another room offers computers and game systems just for

teens. Volunteers supply companionship and bring age-appropriate activities to children who are bedridden.

“If a child is stable enough to come to the playroom, even for a small time period, the progress that they make is usually amazing. A lot of times, it’s motivation to ambulate or walk, which then helps in recovery,” says Adrienne Feilden, B.A., C.C.L.S., Child Life Specialist.

For most children, having their families nearby also can be therapeutic. Visiting hours for parents are 24/7, and they are encouraged to stay overnight at bedside. Siblings are welcome in the playroom and at events such as movie nights and a Halloween parade.

To guide pediatric patients in striking a balance between physical and emotional healing, Feilden helps them develop skills to cope with fear, pain and the challenges of their diagnoses. “We try to empower them to ask questions... and to realize that they have a role in their own recovery,” says Feilden.

In addition to Feilden’s support, specialized services such as pediatric sedation can help young patients cope with tests such as the computed tomography (CT) scan where they must remain still. Another specialized service is video electroencephalogram (EEG) monitoring, which can study patients for up to 24 or 48 hours in screening for seizure disorders. To ensure a continuum of care, primary care physicians are updated daily.

“We can offer specialized care, balanced with the sensitivity that is required for the pediatric patient. All aspects of the child’s needs are taken care of,” says Sperry.

If you’d like more information about how our pediatric and neonatal intensive care units can benefit your family before your pregnancy or at a time when your family is struggling with a child’s illness, please call us at (714) 979-1408. We’ll be glad to share our expertise and help match you with the care you deserve.



Play is therapy for pediatric patients.



ORANGE COUNTY INSTITUTE
PEDIATRICS
at Fountain Valley Regional Hospital

NICU Nurses Handle Tiny Patients with CARE

Babies born prematurely or with complications can benefit from the nurturing care and sophisticated technology of the NICU.

When the smallest babies are born with the biggest problems, the Neonatal Intensive Care Unit (NICU) at Fountain Valley Regional Hospital (FVRH) is ready. The NICU, certified by California Children's Services (CCS), is rated Community Level IIIB, one of the highest designations. It is equipped to take care of babies born at 23-24 weeks or weighing 400 grams or more. Last year, the 23-bed unit served 492 babies who were born at FVRH or transferred from hospitals unable to handle critical cases.

These babies, who were born prematurely or with complications, benefit from the bond of primary nursing initiated upon their arrival. "One nurse will be a baby's primary nurse.



Ann McCarthy DeMaio, Clinical Nurse Specialist and Lisette Pedroncelli, NICU Nurse

She will get to know how the baby acts, what the baby likes and what it will tolerate," says Ann McCarthy DeMaio, R.N.C., M.S.N., Clinical Nurse Specialist, NICU.

This nurturing care is combined with sophisticated technology, such as the Giraffe OmniBed, an incubator equipped with humidity control to protect fragile young skin, in-bed scales for weight monitoring and in-bed phototherapy. It can be instantly transformed into an open radiant warmer for direct contact. A lazy Susan-type rotating mattress positions the baby for intubation, umbilical line placement or intravenous (IV) access with the least amount of disruption.

"Pain is our sixth vital sign. You're always assessing for it to make sure that the baby is comfortable. Anything can be stressful for them, and you want to give them a nice, calm environment so they can sleep and thrive and gain weight," says Lisette Pedroncelli, B.S.N., NICU Nurse. "We always try to cluster our care. When they require anesthesia, we use conscious sedation."

Using the Giraffe OmniBed, ophthalmologists can administer laser

eye surgery to treat retinopathy of prematurity (ROP), a condition in which changing blood oxygen levels cause abnormal development of blood vessels in the baby's eyes. Neonatal specialists can also correct patent ductus arteriosus (PDA), a condition in which the ductus arteriosus, which connects the aorta and the pulmonary artery, does not close after birth. "A lot of NICUs will take the baby to an operating room or ship the baby out, but we can do PDA ligation at the bedside," says McCarthy DeMaio.

The NICU also offers advanced techniques such as high-frequency oscillator ventilation and bloodless surgery, which avoids the need for banked (stored) blood or primary blood components by utilizing special blood conservation methods.

Babies usually leave the NICU for home when they can tolerate room air without oxygen, steadily gain weight and accept all feedings without breathing problems. "When the baby is ready to go home, there is a good degree of patient education for the parent so that they are not so upset that they can't



take care of the baby in an emergency," says Pedroncelli.

"We probably have the most vulnerable patients in the hospital, so we really try to be advocates for the babies," says Veeraiah Chundu, M.D., Medical Director of the NICU. "Everything can make a big difference when you're working with a baby that's so vulnerable."

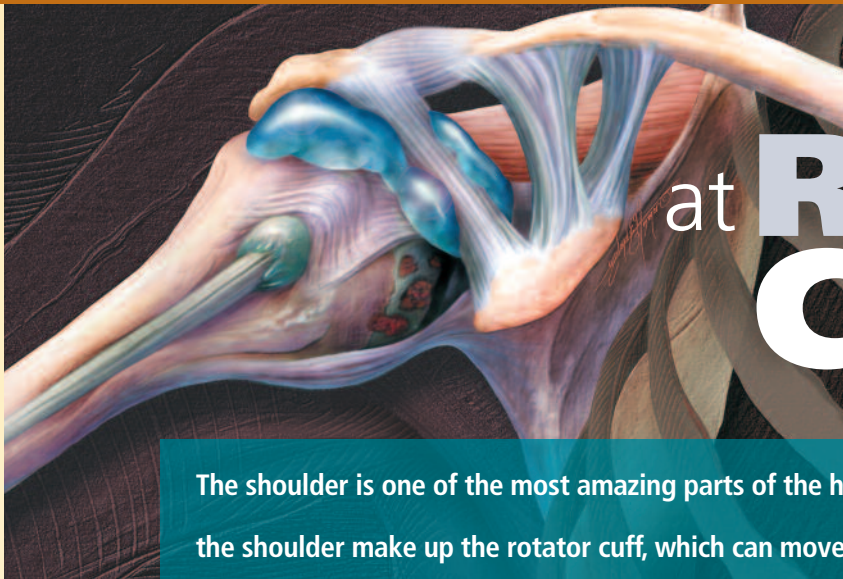
If you'd like more information about how our pediatric and neonatal intensive care units can benefit your family before your pregnancy or at a time when your family is struggling with a child's illness, please call us at (714) 979-1408. We'll be glad to share our expertise and help match you with the care you deserve.

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Veeraiah Chundu, M.D.,
Medical Director, NICU



ORANGE COUNTY INSTITUTE
PEDIATRICS
at Fountain Valley Regional Hospital



Taking a SWING at Rotator Cuff Injuries

The shoulder is one of the most amazing parts of the human body. The combination of four major muscles in the shoulder make up the rotator cuff, which can move and turn through a greater range of motion than any other joint in the body. Unfortunately, this flexibility comes at a price.

Rotator cuff injuries, which can result from repetitive stress or trauma, are not uncommon. Injury may occur gradually, as in the case of tendonitis (inflammation of the tendons due to overuse or overload) or bursitis (inflammation of the fluid-filled sac located between the shoulder joint and the overlying bone), or the rotator cuff tissues may suddenly tear. Not surprisingly, athletes and construction workers frequently experience rotator cuff injuries due to the repeated, significant strain put on rotator cuff muscles. Poor posture, weak shoulder muscles and age-related degeneration may increase a person's risk of rotator cuff injury.

At Fountain Valley Regional Hospital, orthopedic surgeons Christopher Ninh, M.D., and Trong Nguyen, M.D., treat all types of rotator cuff injuries and specialize in minimally invasive surgery to repair rotator cuff

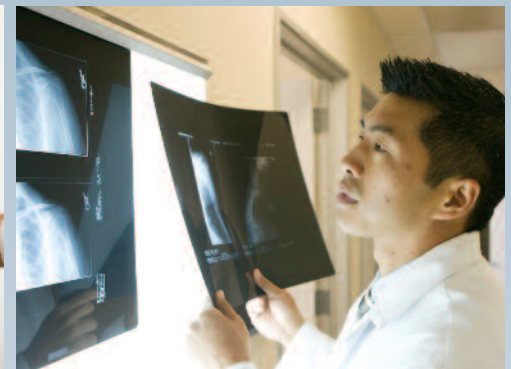
tears. Both doctors have advanced training in sports medicine and arthroscopic surgery.

"The era of 'open' surgery, which used to require repairing the rotator cuff through an incision of as much as seven inches long, is becoming less common," says Dr. Ninh. "Now, we can perform the surgery by making three to five incisions approximately one centimeter. There's less blood loss and much less trauma to the soft tissue of the shoulder. In addition, the sutures and fixation devices that we use to repair the rotator cuff have become easier to use and stronger."

Dr. Nguyen notes that even though the surgery has advanced, it's still a final resort in many cases. "Usually, we'll recommend non-operative measures first, such as physical therapy to strengthen the shoulder and cortisone injections to relieve pain. These measures work for many patients."



Christopher Ninh, M.D.



Trong Nguyen, M.D.

To diagnose rotator cuff injuries, Drs. Ninh and Nguyen do a thorough history and physical exam as well as additional diagnostic studies such as magnetic resonance imaging (MRI) or ultrasound scans, both available at Fountain Valley Regional Hospital's Imaging Center.

Prevention and Home Care

Regular shoulder exercises can not only strengthen muscles and tendons, but also protect the shoulder's range of motion. Ways to help prevent injury include maintaining good

posture and taking breaks at work or play to rest the shoulder if the job or activity is physically demanding.

For minor strains, try placing an ice pack on your shoulder for 15 to 20 minutes every two to three hours during the first day or so after an injury to help reduce inflammation and pain. Anti-inflammatory medications such as ibuprofen, aspirin or acetaminophen can also be helpful.

Seek medical attention if the pain persists longer than two days, if it prohibits normal activities such as sleeping, reaching overhead or engaging in sports, or if you hear or feel a painful click or pop when you move your shoulder.

Remember: You can count on the array of orthopedic specialists available to you at Fountain Valley Regional Hospital. For a convenient physician referral, just call **(714) 979-1408**.



ORANGE COUNTY INSTITUTE
ORTHOPEDICS
at Fountain Valley Regional Hospital

Conservative and surgical treatment options may relieve pain and suffering of a common musculoskeletal problem

Bunion Sufferers for Relief May Be Closer than You Think

Bunion sufferers face a proverbial bad news/good news scenario. In the bad news category, there is the considerable pain and sometimes debilitation that comes with the bulging growth of a bunion. Bunions are not just unsightly—they often impact quality of life, forming painful enlargements centered in the big toe and

causing the toe to point toward the smaller toes, in some cases leading to difficulty in walking, according to the American College of Foot and Ankle Surgeons.

But the good news is that there are effective treatments. Often, the condition can be successfully managed through conservative, early treatment that relieves pressure on the bunion, hinders further progression of joint deformity, and helps patients lead normal, active lives. This type of treatment includes:

- ▶ Padding and taping—measures that help normalize foot position and, in turn, alleviate pain.
- ▶ Medication—including anti-inflammatory drugs to reduce pain caused by joint deformities.
- ▶ Orthotics—such as shoe inserts that help control foot function, reduce symptoms and prevent increased deformity

In more severe cases, a podiatrist (foot specialist) may suggest surgery. Under what circumstances might surgery be recommended?

- ▶ Severe pain that limits normal activities, despite medication measures.
- ▶ Chronic inflammation that doesn't respond to conservative care.
- ▶ Significant deformity.
- ▶ Stiffness that hinders walking

Unfortunately, most patients don't address the condition until it reaches a critical level. "Usually, they come into my office when they are already experiencing a significant degree of pain, or they have reached the point where it's hard for them to even wear normal shoes," says R. Denis Russell, D.P.M., a specialist in foot care at Fountain Valley Regional Hospital with over 35 years experience. "Also, they may have become self-conscious when they go to places like

the beach, where their foot is exposed."

Podiatrists evaluate bunions based on description of symptoms, physical appearance and X-ray findings. When surgery is required, options include:

- ▶ A bunionectomy, where the bone lump is cut out.
- ▶ Surgical re-balancing of tendons and ligaments around the big toe.
- ▶ Osteotomy, when a bone wedge is removed from the big toe and/or metatarsal to straighten the toe.
- ▶ Removal and fusion of damaged joint surfaces (techniques employed in more severe cases).
- ▶ Joint replacement

While heredity is the main cause of bunions, they can also be caused by foot injuries, neuromuscular disorders, flat

feet and fallen arches, arthritis and occupational stress on legs and feet. Also, women are more prone to bunions than men, primarily because of certain kinds of restrictive footwear.

For anyone developing bunions, health-care professionals offer these tips:

- ▶ Apply bunion pads to the bony lump.
- ▶ Wear shoes with a wide and deep toe box.
- ▶ Apply ice packs when necessary.
- ▶ Seek a professional evaluation.

If you have questions regarding an ailment pertaining to your foot, Fountain Valley Regional Hospital and Medical Center can provide you with a convenient referral. Simply call (714) 979-1408.



R. Denis Russell, D.P.M.



ORANGE COUNTY INSTITUTE
ORTHOPEDICS
at Fountain Valley Regional Hospital

FVRH events



Maternity Orientation, Prepared Childbirth & Parenting Education Presented by Baby Blvd at Fountain Valley Regional Hospital

Advance registration is required to ensure preferred class times and dates. For a complete list of classes and registration information, please call (714) 979-1408 or visit www.fountainvalleyhospital.com.



ACS: Wig Bank

By appointment only on Mondays, Tuesdays and Wednesdays. Please call 1-800-227-2345.

Support Groups

For a complete list of support groups, classes and meeting times, please call (714) 979-1408.

Screenings and Lectures

Orange County Regional Cancer Center provides complimentary cancer screenings and lectures throughout the year. For a schedule of upcoming events please call FVRH Program Referral number at (714) 979-1408.

December 2008



Holiday Celebrations

Wednesday, December 17

10:30am-12pm

Palm Island Senior Community,
11300 Warner Ave.,
Fountain Valley

Thursday, December 18

11:30am-1:30pm

Founders Village
Community Center
17967 Bushard at Talbert,
Fountain Valley

January 2009



Palm Island Coffee Talk "Arthritis"

Friday, January 30 – 10:30am-12:00pm
11300 Warner Ave., Fountain Valley, CA 92708

February 2009



Palm Island Coffee Talk "Abdominal Aortic Aneurysms"

Friday, February 30 – 10:30am-12:00pm
11300 Warner Ave., Fountain Valley, CA 92708

**February is Heart Month.
Call (714) 979-1408
for Heart Screenings
at Fountain Valley
Regional Hospital.**



Fountain Valley Regional
HOSPITAL & MEDICAL CENTER

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Main Hospital **(714) 966-7200**