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Clinical CORNER

New Portable Kidney Dialysis Device

RUSH is the first hospital in Chicago to offer a new portable dialysis system to patients. The system allows kidney failure patients to perform their dialysis at home or when traveling. The new system also reduces the time between treatments in half, thereby reducing stress on the body by clearing toxins more frequently.

"Patients have more energy, a better appetite, improved blood pressure and fewer side effects such as cramps, headache and nausea," says Stephen Korbet, MD, nephrologist at RUSH. Daily dialysis patients take fewer medications, spend fewer days in the hospital and report feeling better than do in-center patients, according to Korbet.

New Study Shows Mild Cognitive Impairment in Older People Is an Indicator of Alzheimer's Disease or Cerebral Vascular Disease

Mild cognitive impairment in older people is not a normal part of growing old but rather appears to be an indicator of Alzheimer's disease or cerebral vascular disease, according to a study published in the March 8 issue of the journal, *Neurology*. Study participants took tests of memory, language, attention and other cognitive abilities each year to document their clinical status. The diagnosis of mild cognitive impairment was made when impaired performance on these tests was not severe enough to warrant a diagnosis of dementia.

"The study shows that mild cognitive impairment is often the earliest clinical manifestation of one or both of two common age-related neurologic diseases," says David A. Bennett, MD, director of the RUSH Alzheimer's Disease Center and the principal author of the paper. "From a clinical standpoint, even mild loss of cognitive function in older people should not be viewed as normal, but as an indication of a disease process," says Bennett.

RUSH Programs and Services Spotlight

The Sleep Disorders Center

The Sleep Disorders Center has established a national reputation for clinical excellence, for innovation in sleep medicine research and for providing superior training to the next generation of sleep professionals. The sleep disorders team is multidisciplinary, including board-certified experts in psychology, neurology and pulmonary medicine. Our experts also consult with RUSH specialists in internal medicine, pediatrics, otolaryngology, psychiatry and bariatric surgery.

Following an outpatient consultation and evaluation (typically lasting an hour), patients are scheduled for diagnostic testing, as appropriate. This may consist of a nighttime or daytime sleep study, home ambulatory activity monitoring, psychological testing or other medical tests. Treatment for a sleep disorder can usually be arranged through the center, through at-home medical equipment vendors or in coordination with a primary care physician. Long-term follow-up is provided by our clinicians if indicated.

Treatment options include the following:

- Continuous positive airway pressure
- Phototherapy
- Polysomnography
- Psychological assessment
- Medication
- Multiple sleep latency testing
- Wrist actigraphy

Physicians should refer patients to the Sleep Disorders Center when:

- You or the patient suspect a primary sleep disorder (sleep apnea, narcolepsy). This is usually signaled by a patient who is falling asleep at work or while driving, or a report from a bed partner of witnessed apneas.
- Patients with insomnia should be sent if the difficulty sleeping is chronic and causes daytime impairment.

Sleep Specialists

Neurology

Anthony Proske MD, D, ABSM (movement disorders, narcolepsy)

Psychology

Rosalind Cartwright PhD, D, ABSM (parasomnia)

Edward Stepanski PhD, D, ABSM; Director (insomnia)

James Wyatt PhD, D, ABSM (circadian rhythm disorders)

Pulmonary medicine

Isabel Crisostomo MD, D, ABSM (sleep-disordered breathing)

All patients are seen at 710 S. Paulina Street, 6 South JRB, with appointments scheduled at (312) 942-5440.

NEWS TO USE

New Program for Caregivers and Older Adults: RUSH Generations

RUSH Generations is a free health and aging membership program for older adults and people who care for older adults. The program provides free resources and evolving benefits that promote healthy and vital living, including the following:

- Personalized needs assessments for individuals, families and caregivers
- Toll-free older adult, family and caregiver support line
- Workshops and community programs
- Health resource library (through the Anne Byron Waud Resource Center)
- And much more

People do not need to be RUSH patients to join; membership is free and open to all ages.

For more information, contact Robyn Golden, program director, at (312) 942-4436 or robyn_golden@rush.edu.

RUSH Pediatric Hospitalist Program Available for Referring Physicians

The RUSH Pediatric Hospitalist Program, led by medical director Keith Boyd, MD, allows pediatricians and other physicians who care for children to collaborate with hospital-based physicians at RUSH Children's Hospital to provide quality inpatient care. Our hospitalist physicians communicate directly with referring physicians and provide patients with continuous, high-level care.

RUSH Children's Hospital has a neonatal intensive care unit with 24-hour, in-house coverage by neonatologists, a state-of-the-art center for pediatric

kidney dialysis and transplantation, a pediatric intensive care unit, the RUSH Hemophilia Center, the RUSH Cystic Fibrosis Center and many other specialized programs. RUSH Children's Hospital is also a regional referral center for adolescents and young adults with eating disorders.

To admit a patient, call (312) 942-1000. Our registration staff will record demographic information, and a physician will return your call promptly. (Note: For referring physicians at RUSH, this is an alternative method for admitting a patient: If your current method works, you do not need to change what you are doing.)

For information on RUSH's pediatric services, call physician liaison Karen Clayton at (312) 942-6194 or e-mail Karen_K_Clayton@rush.edu.

From the RUSH Clinical Trials Office

Major Depressive Disorder Study

The Department of Psychiatry is participating in a multicenter research study to compare the efficacy of a study drug to placebo as adjunctive treatment to a marketed antidepressant therapy in patients who demonstrate an incomplete response to marketed antidepressant therapy alone. The objective is to evaluate the safety and tolerability of the study drug as antidepressant therapy in patients with major depressive disorder. The study consists of three phases: a screening phase, a prospective treatment phase and a nonresponders phase. Study subjects will benefit from frequent office visits and close monitoring.

To participate, patients must be between the ages of 18 and 65 and diagnosed with a single or recurrent, nonpsychotic episode of major depressive disorder. The current episode must be at least eight weeks in duration and must demonstrate an inadequate response to at least one, and no more than three, adequate antidepressant treatments.

For more information, contact John Zajecka, MD, at the RUSH University Medical Center Treatment Research Center at (312) 980-6356.

Treatment of Patients With Coronary Heart Disease or Risk Equivalents

The Department of Preventive Medicine is participating in a multicenter research study to demonstrate whether the combination of two study drugs can incrementally reduce the risk for future occurrence of major cardiovascular disease events in subjects with coronary heart disease or other risk equivalents when compared to a single study drug alone. Participants in this study may reduce their risk of a cardiovascular event, such as heart attack or stroke. Participants may also receive (at no cost) study medication, EKGs and lab procedures, up to \$300 for active enrollment, and/or parking validation or CTA fare.

Eligible volunteers are between the ages of 45 and 75, are currently on a cholesterol lowering medication (Lipitor, Zocor, etc.) and have cardiovascular risk such as the following:

- Type II diabetes
- Myocardial infarction
- Congestive heart disease
- Carotid artery disease

Patients who have high cholesterol, a low HDL or high LDL or high triglycerides, may also qualify.

For more information, contact William J. Elliott, MD, PhD, at the RUSH University Medical Center Department of Preventive Medicine at (312) 942-2146.

INTRODUCTIONS The following is a list of physicians who joined the RUSH medical staff between January 1, 2005 and February 28, 2005. The Medical Staff Office and the Office of Marketing Communications have made every effort to publish accurate information that is as complete as possible; however, if the information below is incorrect or we have omitted information, we apologize and ask that you contact Muriel Coleman in the Medical Staff Office at (312) 942-5496.

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COMPLIANCE CENTRAL

HIPAA Security: What Does it Mean for Physicians at RUSH?

The HIPAA security rule requirements become effective April 21, 2005. These requirements supplement the earlier HIPAA privacy rule, which addresses how and to whom protected health information is disclosed.

The security rule requires covered providers like RUSH to develop policies and procedures to prevent unauthorized access to patients' protected health information (PHI) and to detect, contain and correct security violations. Unlike the privacy rule, which governs all forms of PHI (paper, oral and electronic), the security rule applies only to information that is stored or transmitted electronically via any of the following:

- Computers
- PDAs
- Computer networks

- Any computer storage devices such as tapes, disks, CDs, USB drives or similar devices, including clinical devices that store patient information

What can you do to continue to protect the electronic security of our patient information?

- **Protect your IDs and passwords from unauthorized use.** You are responsible for all activity that occurs under your user IDs; don't share your passwords with anyone.
- **Password protect any laptops, PDAs, USB drives or other portable storage devices on which you keep protected health information.**

- **Practice safe computing:**
 - ▶ Avoid emailing PHI whenever possible.
 - ▶ Don't open any unknown attachments or unrecognizable emails.
 - ▶ Log off clinical applications when you are not using them.
 - ▶ Only download software that has been approved by IS.
 - ▶ Make sure your practice has in place practice-level information management procedures.
- **Complete the mandatory HIPAA Privacy and Security module on HES** (iris.rush.edu/hes).

For more information on the HIPAA security rule, call the Privacy Office at (312) 942-5303. Stay tuned to your RUSH email for updates.

focus on CONTINUING AND GRADUATE MEDICAL EDUCATION

Upcoming CME Courses at RUSH

Issues in Aging 2005

April 22, 2005

Credit hours: 7

Course director: Anthony J. Perry, MD

Sponsoring department: Department of Medicine, Section of Geriatric Medicine

Location: Rush University Medical Center

Cost: Contact Laurie Waters for information

Contact: Laurie Waters

Phone: (312) 942-3600

Email: Laurie_A_Waters@rush.edu

Impacting Your Needs in the Management of Acid-Related Disorders

June 16 - 28, 2005 - Rosemont, IL

Credit hours: 1.5

Course director: Seymour M. Sabesin, MD

Sponsoring department: Department of Medicine, Division of Gastroenterology

Cost: None

Contact: Seymour M. Sabesin, MD

Phone: (312) 563-3877

Email: ssabesin@rush.edu