

From the Research and Clinical Trials Administration Office

Recurrent Epithelial Ovarian, Primary Fallopian and Primary Peritoneal Cancer Study

The Section of Hematology/Oncology is conducting a randomized, open-label study to determine the safety and benefits of a research drug compared to the drug Doxil in patients with recurrent epithelial ovarian, primary fallopian or primary peritoneal cancer. Subjects will be given an intravenous infusion of either the research drug (for at least 20 minutes once every three weeks) or Doxil (for more than one hour once every four weeks). Participation in this study will last as long as participants experience benefits.

Participants must meet the following criteria:

- Have epithelial ovarian, primary fallopian or primary peritoneal cancer
- Have progressive disease while receiving chemotherapy with platinum, or within six months after completion of such chemotherapy

The principal investigator at Rush is **Lydia Usha, MD**. For more information, including exclusion criteria, contact Linda Polzin at (312) 942-3608.

Late-life Major Depression Study

Psychiatric services is participating in a study to determine the efficacy of duloxetine, an FDA-approved medication for major depressive disorder, in the elderly population. To date, more than 200,000 patients have received duloxetine in controlled studies, but few patients were age 65 or older. Elderly depressed patients may take longer to respond to medications and are more likely than younger patients to have co-morbid medical conditions, including pain and other physical complaints, that may affect the safety and outcomes of antidepressant treatments.

Participants must meet the following criteria:

- Be age 65 or older
- Meet the criteria for major depression

The principal investigator at Rush is **Corey Goldstein, MD**. For more information, including exclusion criteria, contact the Treatment Research Center at (312) 980-6356.

Programs and Services Spotlight

The Coleman Foundation Comprehensive Prostate Cancer Clinic at Rush

The new Coleman Foundation Comprehensive Prostate Cancer Clinic at Rush provides state-of-the-art options in radiation, surgery and systemic treatment for prostate cancer, as well as vital support services to help patients and families deal with the physical and emotional side effects of cancer.

Patients at the clinic meet with experts from radiation oncology and urology who are trained in the latest treatment advances in their specialty areas. In addition to standard procedures like open prostatectomy, these specialists offer the most advanced treatment options available, including intensity modulated radiation therapy (IMRT), prostate brachytherapy and two new treatments that enable unparalleled precision:

- The **da Vinci Surgical System** integrates three-dimensional, high-definition laparoscopy and robotic technology to virtually extend the surgeon's eyes and hands into the surgical field. Da Vinci prostatectomies offer less postoperative pain, less blood loss and shorter recovery times than traditional prostatectomies. And the precision and 360-degree rotation of the micro-instruments help surgeons to avoid vital nerves, thus reducing the common side effects of many prostate treatments: incontinence and erectile dysfunction.
- The **TomoTherapy Hi-Art System** offers a new method of radiation therapy, using 3-D imaging from computed tomography to scan daily for changes in the position or size of the tumor, and precisely targeted radiation beams. The remarkable accuracy of the system makes it possible to direct a higher dose of radiation to a tumor with a lower risk of affecting surrounding tissue and organs.

Rush is the first medical center in Chicago to offer da Vinci with high-definition capabilities and the only academic medical center in Chicago that offers TomoTherapy.

In addition to these innovative treatment options, patients have access to a full range of complementary therapies and the latest clinical trials for new prostate cancer therapies. A dietitian and psychosocial oncologist are also available for consultations.

Participating Physicians

The Coleman Foundation
Comprehensive Prostate Cancer
Clinic at Rush
1725 W. Harrison St., Suite 863

Adam Dickler, MD
Radiation oncologist

Kalyan Latchamsetty, MD
Urologist

To refer a patient, call Melanie
Holman, comprehensive clinic
coordinator, at (312) 563-2155.

NEWS TO USE

Updating Your Physician Profile Just Got Easier

"Find a doctor" is one of the most visited links on the Rush Web site; it is used by both health care professionals for referral purposes and consumers who are searching online for a physician. In addition, more than 36,000 people called or e-mailed the Rush Physician Referral Service in 2006, leading to nearly 17,000 referrals to practices and physicians at Rush.

Profiles of physicians who practice at Rush are in the database used by both the online "find a doctor" and the physician referral service. Now, you can add or update your own profile using a convenient Web link.

Upon request, the link is sent directly to you via e-mail along with instructions on how to access the online profile form. You will need to have your physician ID number handy to use this Web tool. It's important to fill out the entire profile, including which insurance plans you accept. The more information you provide, the greater your chance of receiving referrals. Some information on the form is used solely for physician referral purposes and is not included on "find a doctor."

The new link enables you to update your information any time it changes, ensuring that "find a doctor" and the physician referral database contain the most up-to-date information. To request the link or for more information, contact Barb Krah, director of call center services and customer relationship management, at (312) 563-4273 or Barbara_J_Krah@rush.edu.



Clinical CORNER

Diagnosis Made Easier With SpyGlass

In July, Rush will become the first hospital in Chicago to use the SpyGlass system, a new adjunct to endoscopic retrograde cholangiopancreatography (ERCP), a procedure used to diagnose problems of the liver, gallbladder and bile ducts that is performed on nearly 445,000 people in the United States each year.

The latest addition to the interventional endoscopy program at Rush, SpyGlass dramatically increases the diagnostic and treatment capabilities of traditional ERCP procedures, according to **Sri Komanduri, MD**, director of endoscopic ultrasound.

With traditional ERCP, physicians use fluoroscopy and contrast injection to perform such tasks as opening obstructed bile ducts, removing gallstones and obtaining biopsies from suspected tumors. Because the camera used in traditional ERCP produces only two-dimensional, black-and-white images, studies have shown that up to 30 percent of diagnostic ERCPs are inconclusive, creating the need for additional testing.

SpyGlass uses a miniature four-dimensional, 6,000-pixel fiber optic probe that attaches to the camera head and provides endoscopic imaging of all four quadrants of the treatment area. The system is connected directly to a standard duodenal scope and allows physicians to take a biopsy, using SpyByte forceps, while directly viewing the area in which the biopsy is being taken.

The benefits of this enhanced, direct visualization are clear: To date, 91 percent of ERCP procedures using SpyGlass have resulted in a diagnosis. Another advantage to SpyGlass is that it requires only one physician to operate; traditional ERCP requires two.

For more information about ERCP and SpyGlass, or to refer a patient to the Department of Gastroenterology, contact Andrea B. Borowiecki, MPH, CHES, program manager – marketing, at (312) 942-8570.

Progress Notes and Kudos

Richard W. Byrne, MD, has been appointed as chairperson of the Department of Neurological Surgery. Byrne is currently associate professor and acting chairperson in the department. A leader in the region in the surgical management of epilepsy and brain tumors, his research has primarily focused on these two areas.

Kathy Liu, MD, general surgery, was recently named an Executive Leadership in Academic Medicine (ELAM) fellow. A core program of the Institute for Women's Health and Leadership at Drexel University College of Medicine, Philadelphia, ELAM is a one-year program of leadership training aimed at expanding the national pool of qualified women candidates for leadership in academic medicine, dentistry and public health.

Beverly Sha, MD, was honored in March by the AIDS Legal Council of Chicago as the 2007 Outstanding Health Care Advocate of the Year. Sha, a recognized expert on HIV in women, is associate professor in the Section of Infectious Diseases and director of the Weiss Memorial Clinic for the Treatment of Infectious Diseases at Rush.

INTRODUCTIONS

The following is a list of physicians who joined the Medical Staff of Rush University Medical Center between March 1, 2007, and April 30, 2007. The Medical Staff Office and the Office of Marketing and 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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Epic Update! Phase I Implementation is Under Way

On May 1, Rush implemented the most visible and far-reaching element of Epic to date — the introduction of the Epic billing, registration, clinical documentation and computerized provider order entry (CPOE) modules.

Throughout the first two weeks of go-live, hundreds of Information Services staff, Epic consultants and Rush employees worked side by side. They rounded in all areas of the hospital, answering questions and helping staff understand and use the system. A command center, set up to provide 24-hour coverage, took in more than 4,200 calls within the first week, answering questions and expediting resolutions to a variety of issues. Overall, the implementation went exceptionally well. Phase I implementation of Epic continues in June with OpTime, the surgery module.

Planning for Phase II

Staff members across the Medical Center are already hard at work on Epic phase II. At the end of implementation, clinicians will see the following:

- Unified scheduling across all Rush entities
- Electronic medical records
- Patient information access in physician offices, as well as in the hospital

Four teams have been formed to develop guiding principles and establish a governance structure for phase II: ambulatory, clinical documentation, electronic health record and scheduling. If you would like to join one of these teams, contact **Michael Silver, MD**, or **Julio Silva, MD**, co-chairs of the Epic clinician adoption team.

The Future of Epic

Phase II Go-Live: February – June 2008

- Full clinical and ambulatory documentation
- Scheduling
- Clinical data repository
- Health information management module
- Emergency department module
- Radiology module
- Enterprise document management

Phase III Go-Live: July – September 2009

- Critical care
- Care plans
- Clinical device integration
- Patient/physician portals
- Laboratory module

New Online Tool Helps Physicians Keep Patients Healthy

As part of the Medical Center's ongoing efforts to help people better manage their health and prevent serious health problems as they age, Rush recently launched an online health assessment, available at www.myrushhealthadvisor.com.

The assessment was developed by primary care physicians at Rush using guidelines published by the U.S. Preventive Services Task Force, an independent panel of experts in primary care and prevention. Unlike other online health tools, Rush's is action-based: It helps people determine their personal health risks, then, using that information, makes specific recommendations about lifestyle changes they should make, diagnostic tests and immunizations they need, and topics they should discuss with their physicians.

These recommendations are designed to serve as a guide for people to develop health action plans with their physicians. For people who don't have personal physicians, the tool also provides a form for requesting an appointment with a physician at Rush or for any of the recommended services, as well as a link to the online physician database.

Physicians at Rush are encouraged to recommend the online health assessment to their patients. In the coming weeks, you will receive brochures to share with your patients explaining how the tool works. If you have questions about the tool or need additional brochures, call Marie Mahoney, senior director, web and marketing communications, at (312) 942-7225.