## Health System Update



## Penn Presbyterian Medical Center



David J. Bozentka, MD

Chief of Orthopaedic Surgery, Penn Presbyterian Medical Center



It has been an exceptional year for the Department of Orthopaedic Surgery at Penn Presbyterian Medical Center (PPMC). There is now a greater physical presence of the department on the PPMC campus as two new facilities have opened. In addition the development of the musculoskeletal service line has led to multiple initiatives allowing continued advancements in patient care.

Penn Medicine at University City (PMUC) located on 3737 Market Street opened in August 2014. The Department of Orthopaedic Surgery moved its clinical and administrative offices from PPMC and the Hospital of the University of Pennsylvania (HUP) to the new 150,000 square foot facility. The gala opening was held on September 12<sup>th</sup> and was well attended including many dignitaries throughout the region. An Excellence in Orthopaedic Surgery Symposium took place the following day with lectures by leaders in the field including Bruce D. Browner, MD, William P. Cooney, MD, Michael Gagnon, MD, Richard H. Gelberman, MD, Joseph P. Iannotti, MD, Marvin E. Steinberg, MD, Peter J. Stern, MD, Thomas P. Vail, MD, and Gerald R. Williams, MD.

The Department of Orthopaedic Surgery is now an integral component of the Penn Center for Musculoskeletal Care located in PMUC. The center allows an integrated unified approach in the treatment of patients with musculoskeletal disorders and injuries. The orthopaedic clinical space encompasses the seventh and eighth floors of the building and is arranged in modules according to department section. A concierge service streamlines the patient visit which includes interactive educational material. The facility houses a comprehensive array of services including physical medicine, radiology, rheumatology, internal medicine, neurology and physical therapy. The proximity of the various departments improves the bidirectional communication of information critical for patient care as well as the coordination of combined lectures and research initiatives. In addition medical imaging, diagnostic testing services and a pharmacy are available at the facility allowing one stop service for patients.

The ambulatory surgery center has opened this year at PMUC with six operating rooms for out-patient same day surgical procedures. The state of the art operating suites are equipped with the latest in video technology for minimally invasive procedures. The highly efficient center has the benefit of a talented regional block anesthesia service led by Drs. Nabil Elkassabany, MD and Jiabin Lui, MD. The high quality service provided is evident by the notable patient experience data.

Outpatient rehabilitation therapy is performed through Good Shepherd Penn Partners, a partnership developed between Good Shepherd and the University of Pennsylvania Health System. The therapy division includes 22 physical therapists and six occupational therapists residing on the second and third floors. The unit encompasses over 28,000 square feet of space and provides a full range of services including a therapeutic pool with variable depths and an underwater treadmill. A satellite occupational therapy unit within the hand surgery module allows same day appointments and direct transition of care.

At noon on February 4, 2015 the regional level I trauma center for Penn Medicine switched from HUP to PPMC. On the morning of the move, several city streets were closed to allow for the transfer of the trauma in-patients from the HUP to the new center which includes the Advanced Care Hospital Pavilion on the corner of 38<sup>th</sup> street and Powelton Avenue. The new 178,000 square foot building at PPMC houses the facilities for critical care, emergency and surgical trauma including the John Pryor Trauma Bay. The new trauma resuscitation area for patient evaluation and stabilization has upgraded emergency and radiology services for improved efficiency. In addition a helipad is available for the Penn Star flight program for transportation of critically injured patients.

The musculoskeletal service line has been organized with the new transition. A component of the service line structure includes the Quality and Patient Safety Committee led by Dr. Eric Hume with the support of Ms. Finnah Pio. The group has been instrumental in the implementation of multiple initiatives for improvement in patient care. A Penn Chart Acute Transfer Tool has been developed to facilitate the transfer of patient information and communication with post-acute providers. The Penn Arthroplasty Post-Acute Pathway has also standardized the peri-operative process and provides information regarding wound care, activity level with mobility plan and goals for the care team. In addition a care and communication pathway for patients with a post-operative



fever or a potentially infected joint has been developed. The algorithm uses readily available criteria including the patient's temperature, heart rate, white blood cell count, and C reactive protein levels to determine the likelihood a patient will require an orthopedic evaluation and re-admission. These highly successful efforts have allowed the various care team members to provide consistent safe care limiting unnecessary hospital admissions. The remarkably low department 30 days unplanned readmission rate is one metric confirming

the success of these projects. Other initiatives underway through the service line include Pre-admission Center Testing Enhancement with the support of Fabian Marechal, Trauma Clinical Variations led by Dr. Samir Mehta, and Joint Replacement Development led by Dr. Charles Nelson.

This is an extraordinary time for the Department of Orthopaedic Surgery at PPMC. The group has taken another step forward as it expands its role as the leader in musculoskeletal medicine.