

PET/CT IMAGING REVOLUTIONIZES THE WAY DOCTORS DEAL WITH CANCER

New mobile scanner to be available at three Southcoast sites

It's one of the most revolutionary developments in medicine in the 21st century," said Jonathan Bojarski, MD, Radiologist at St. Luke's Hospital, referring to positron emission tomography (PET) combined with computed tomography (CT), imaging modalities in which he has had extensive training. "And it has revolutionized the way doctors deal with cancer."

The cutting-edge diagnostic imaging technology became available five days a week at Southcoast's Center for Women's Health on Faunce Corner Road in Dartmouth in July. Beginning in early 2009, the state-of-the-art mobile scanner will provide services one day a week at the Truesdale Clinic in Fall River and, next June, the scanner is slated to be available at Tobey Hospital.

The scanner will move from the Center for Women's Health to Southcoast's new cancer center in Fairhaven when construction is completed in 2009.

What makes PET/CT so revolutionary

By integrating the two imaging modalities into a single device, doctors can collect two kinds of diagnostic information at the same time. The highly sensitive PET scan detects the metabolic signal of actively growing cancer cells in the body while the CT scan provides a detailed picture of the internal anatomy that reveals the location, size and shape of cancerous growths.

For the PET portion of the exam, patients are given an intravenous dose of a radioactive "tracer" made of a glucose (sugar) compound called FDG, which travels through the body. Because

cancer cells absorb sugar faster than normal cells, they "light up" on the images created by the PET scanner when it detects the tracer, showing biologic data about the cellular activity of a tumor.

Separately each imaging test has particular benefits and limitations, but when the results of PET and CT scans are merged the combined image provides complete information on cancer location and metabolism.

"As a result, we can detect the presence of a tumor far earlier than with CT alone," Dr. Bojarski said.

"This has tremendous implications for managing and treating cancer, including differentiating malignant from benign lesions, staging malignant disease, detecting recurrent or metastatic disease and image-guided therapy planning," he said. PET is also useful in treatment monitoring.

"Before PET, after a patient received chemotherapy or radiation, it would take months to determine if the treatment was effective using CT alone," Dr. Bojarski said. "Now we can do PET within days or weeks of treatment and see changes in a tumor's

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The Benefits of PET/CT

- Produces information that is different and often unattainable from other imaging procedures.
- Enhanced disease detection.
- Helps avoid more invasive diagnostic procedures.
- Effective tracking of the response to treatment.
- Greater accuracy in staging cancer and more precise treatment planning.
- Safe, fast and painless procedure.

PET/CT Imaging

continued from cover

metabolic activity, letting us know if the treatment is working or not.

“Now oncologists can make adjustments in treatment much more rapidly, identify the most effective treatment for that cancer and tweak it as needed. This all translates into better care and potentially better outcomes.”

PET has been shown to be effective in the evaluation of various tumors including breast, lung and colorectal cancer, lymphoma and melanoma. It is also useful in patient follow-up after chemotherapy or surgery, when postoperative changes or scar tissue can complicate CT or magnetic resonance (MR) imaging.

An extensive planning process

Southcoast’s acquisition of its PET/CT scanner is the culmination of a nearly six-year planning process.

“The new PET/CT scanner helps us meet the health care needs of our community, particularly because there is a growing oncology population here in southeastern Massachusetts,” said Peter Guresh, OTR/L, Vice President of Allied Health Services.

A mobile scanner makes the technology more accessible

The decision to invest in a mobile scanner instead of a fixed unit also was made with the community’s best interests in mind.

“With a mobile service, we can offer this technology in all three areas served by Southcoast, making it more convenient for patients,” said Debra A. Desmarais, CRA, RT, Director of Radiology Imaging Services. A specially trained driver moves the van at night so it doesn’t interrupt the scanning schedule. Staff travels to wherever the van is in operation.

PET/CT images are stored centrally on Southcoast’s PACS system — along with all other X-ray, CT, MRI and ultrasound images — so radiologists across the system can pull up the images regardless of where they practice, Desmarais said.

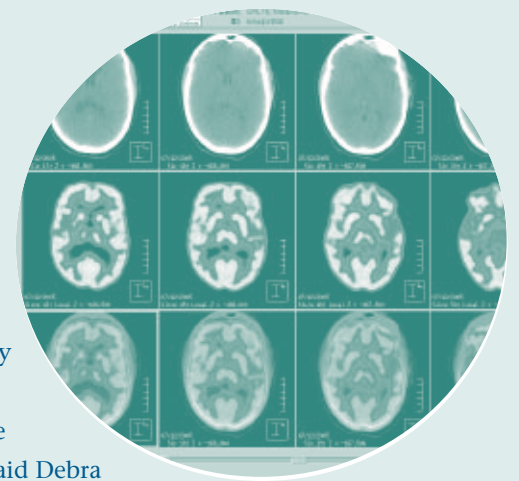
What the future holds

While Southcoast’s PET/CT scanner initially will be used in cancer treatment, the technology also can be used in cardiology and neurology. In these cases, it can help determine appropriate heart disease treatment and provide accurate information about the brain for such conditions as Alzheimer’s disease and epileptic seizures.

“We will expand our use of PET/CT to these patient populations as we move forward,” said Mark Kershaw, CRA, RT, Manager of Nuclear Medicine & PET/CT.

“Southcoast really is on the cutting edge with this technology,” said Rose Wach, CRA, RT, Manager of CT, MR and Interventional Services. “As the first site in this region to have a PET/CT scanner open every weekday, we not only surpass most community hospitals in the state but also in the entire country.”

by Roxanne Jones



Above & Beyond

Above and Beyond looks the same in many departments — the people who take an extra second to pick a paper napkin up off the floor, to direct a visitor or to smile at a co-worker. In our department we have an extra component — the philosophy that “food is love.” I think of Mike, Gerry, Ray, Alex and Danny and many other cooks working so hard over special food items for patients with complex allergies and dietary restrictions, making sure that not only are the items correct, but that they are delicious. They work hard physically and mentally but never lose sight of the fact that their sometimes repetitive tasks may be a patient’s first meal after a lengthy fast, or the last meal they get to enjoy. Production and catering staff also work together to bring “above and beyond” to Southcoast special events big and small.

In the retail area, our staff is also aware that working in a hospital is not like working in any other restaurant. They know the physicians, nurses and other staff members they serve need a break from their intense and hectic day. Cassandra, Gloria, Kelly, Susan and many others know the preferences of their “regulars” and greet everyone with a smile while trying to make the lines move as quickly as possible.

Our tray-line staff has to translate the patient’s order from the menu with the food produced by the chefs, and quickly assemble an attractive tray for each patient, three times a day, with dish-washing in between. Their “above and beyond” is to remember that despite their “assembly line” style of work, each tray is special and important to one patient, and deserves their personal attention. The kitchen workers who transport patient meals and make our kitchen a sanitary and cheerful place to work also add to the great atmosphere in our department. Their “above and beyond” acts include anonymously donating many weeks of vacation time



Staff members of the diet office, kitchen workers, trayline, production and cafeteria.

to co-workers in their time of need.

The diet office is on the “front lines,” serving meals to patients correctly and efficiently, while making sure they appear unrushed in every room. Anyone who has ever tried to feed a sick person unfamiliar food while enforcing a diet restriction can appreciate that it is not easy. The diet office and dietitians often go “above and beyond” to purchase special food items and work with the chefs and trayline to meet patient needs. Dietitians spend hours researching nutrition support for critically ill patients, working with Palliative Care Services on end-of-life feeding decisions, transferring patients to dietitians in home care and dialysis clinics and teaching patients and families that food can still be a pleasure despite multiple diet restrictions. While we do many different jobs in our department, all try every day to go above and beyond for our patients, their families, other hospital staff and our co-workers.

*by Beth Winthrop, RD,
Chief Dietitian for Southcoast*

Three receive HealthQuest Recognition Awards

Learn how making lifestyle changes lead three of your co-workers to improved health

Sometimes a spark of inspiration ignites our desire for positive change and becomes the catalyst that motivates us to re-evaluate our wellness and alter an unhealthy lifestyle.



Helena Soares, Emergency Department Secretary, St. Luke's



Paula Gifford, Nursing Payroll Coordinator, Tobey



Louise Laquerre, RN, Intensive Care Unit, Charlton

HealthQuest has been that kind of catalyst for employees of the Southcoast Hospitals Group since its inception in the fall of 2005. As participants work toward their own healthier lifestyles, they inspire their coworkers to join them on the journey to better health.

Approximately 17 percent of Southcoast's employees participated in HealthQuest programs in 2006 — the program's first full year of service. Just one year later, in 2007, that figure almost doubled to 31 percent.

Each year Southcoast employees are asked to nominate a co-worker whom they feel best exemplifies a commitment to personal health and fitness. Three Southcoast employees, one from each site, are chosen for the HealthQuest Recognition Award.

"The recognition awards are important because they allow coworkers to nominate their peers who serve as role models," said Kris Aimone, Southcoast Wellness Coordinator. "They help to inspire others in making healthy lifestyles changes."

This year's winners are Helena Soares, a Secretary in the Emergency Department at St. Luke's, Paula Gifford, Nursing Payroll Coordinator at Tobey and Louise Laquerre, RN, a nurse in the Intensive Care Unit at Charlton.

"Last year I was teaching at a skills day and decided to check my cholesterol and do a health risk assessment," Soares said. "My results scared me. My cholesterol was up and my health risk assessment results indicated I was at risk for heart disease and stroke. I have two young children. I needed to make a change in my life."

Soares joined the Healthtrax health club and a weight management program, and through hard work and determination lost 29 pounds over the next 12 weeks. She proudly stated that she has lost another nine pounds recently.

She joined the HealthQuest walking program and has begun to run. Her cholesterol level is now normal.

"I'm so much more physically active with my children now. I feel good and have more energy," she said. "People comment on how well I've done. I suggest that they do what I did. Four others in my department have."

Gifford said her bad "smoker's cough" was one of the reasons she gave up smoking seven years ago. When she did stop, she began to gain weight.

"I tried to deal with the weight gain, but it was difficult,"

Gifford said.

She decided to join Weight Watchers and now also utilizes the HealthQuest walking and wellness screening programs offered to Southcoast employees.

"I've lost 25 pounds in the last year," Gifford said. "I don't cough any more and my yearly screenings are better."

She now tries to inspire other people to make positive life style changes.

"I try to motivate other people with the knowledge that I've gained about quitting smoking and dieting," she said. "There are times you may not be doing as well as you'd like, but you have to keep going and not give up. You have to have a positive attitude."

Laquerre participated in the HealthQuest screening offered during her yearly skills day. She said the results of her health risk assessment startled her when it uncovered the fact that her cholesterol was on the high side of normal. Since that time she has been working toward eating a healthier diet and exercising more often. Her hard work has paid high dividends.

"I have brought my cholesterol down 30 points and I have more energy," Laquerre said. "The positive attitude I now have is continuously rewarding. It is the key to wellness and has been my motivation for making a positive difference in the lives of my family, my coworkers and my patients. Their support contributed greatly to my achieving my wellness goals."

Aimone hopes that attitude is contagious.

"Our goal is to increase participation in HealthQuest activities," she said. "We want to challenge employees to improve their health behaviors and provide them with the support they need to meet that challenge." ■

Get your Health Risk Assessment

Southcoast Hospitals Group has teamed up with the Wellness Councils of America to offer its employees "Wellstream," a voluntary health risk assessment (HRA) as part of HealthQuest. The HRA is free of charge — as are the majority of the activities offered — and can be filled out in about 15 minutes, either online or in a paper version. The information provided is strictly confidential and will not be seen by anyone at Southcoast. It does, however, provide participants with a customized report that identifies their risk factors for disease and other health conditions, and is a starting point on the road to a healthier lifestyle. Those who completed an HRA received a \$15 gift card good at a variety of stores and a one-month membership at either Healthtrax or any Southcoast YMCA. More than 400 employees completed HRAs in 2006 and more than 700 completed the assessment in 2007.

Biometric screenings, which include a non-fasting cholesterol, glucose and blood pressure checks, is also offered free of charge typically between January and May.

For more information about the HealthQuest program contact Kris Aimone at 65-5054 or at aimonek@southcoast.org.



Health Tips

- ✓ Take the stairs.
- ✓ Park further away.
- ✓ Wash your hands.
- ✓ Exercise regularly.
- ✓ Keep in touch with friends and family.
- ✓ Think positively.
- ✓ Believe in yourself.
- ✓ Be a volunteer.
- ✓ Learn something new each day.
- ✓ Take time for yourself.
- ✓ Take a meditation or yoga class.
- ✓ Don't smoke.

by Marsha Zeitz

News Briefs

Carol Conley, RN, has joined Southcoast as Vice President of Patient Care Services at Charlton. Conley most recently worked as Vice President for Patient Care Services/Chief Nursing Officer at Caritas Norwood Hospital. Prior to serving in that position she was the Assistant Vice President at St. Elizabeth's Medical Center in Brighton, Director of Parent/Child Services at South Shore Hospital in Weymouth, Director of Women & Newborn Health at Brigham & Women's Hospital in Boston and held several other leadership positions. Conley earned a Masters of Science in Management from Emmanuel College in Boston, a Bachelor of Science and Associates Degree in Nursing from the State University of New York at Albany and graduated from the Licensed Practical Nurse Program at Pondville Hospital in Waltham.

Two new appointments have been made to increase human resource services to physician and other corporations and to enhance physician recruitment efforts.

Debbie Pickup, Director of Physician Recruitment, has broadened her role to include serving as the Director of Human Resources for Southcoast Physician Services and Southcoast Physician's Network. In her expanded role, Pickup will provide professional oversight and leadership on all HR issues within the two physician corporations as well as Southcoast Ventures.

Phyllis O'Brien has joined Southcoast as a Physician Recruiter. O'Brien most recently worked as the Physician Recruiter for Brockton Hospital. She brings a wealth of experience from the highly competitive marketplace.

Christian Boucher has accepted the position of Home Care Information Systems Manager. Boucher has played a major role in the technical design and implementation of the Cerner integrated solution for the Southcoast Home Care and the VNA of Southeastern Massachusetts. He previously worked as Systems Engineer at Southcoast Home Care.

In Memoriam

Harry Ainsworth, MD, passed away peacefully at his home in New Bedford on June 7 after fighting a valiant battle against cancer. Dr. Ainsworth was a well-respected and well-liked member of the medical staff at St. Luke's Hospital for 30 years, having served as the Laboratory Director and Chair of Pathology for 10 of those years. He had a wide presence on medical staff committees. Dr. Ainsworth leaves behind his wife, Sally, as well as many children, grandchildren and relatives.

Patient Comment

"The staff was very kind, attentive and respectful. They kept me involved in all aspects of my care." 📷

Partnering for the security and safety of our patients and the community

St. Luke's Hospital has teamed up with the New Bedford Outreach Workers on a nonviolence/gang prevention program

As the summer heats up, so can violence in the city. But New Bedford has made great strides in its anti-gang and anti-violence activity, thanks to the efforts of New Bedford Police Department's HOPE Collaborative and its New Bedford Outreach Workers.



(left to right)
Ray Price, Director of Safety & Security,
Southcoast Hospitals Group

Lisa Bechard, Director of Emergency Services,
St. Luke's Hospital

Ronald Teachman, Chief of Police, New Bedford

Teny Gross, Executive Director,
Institute of the Study & Practice of Nonviolence

Capt. Gino Olaes, Director of Security,
Rhode Island Hospital

The outreach workers work with youth before they become gang members and if there is a flare up take steps to reduce tensions and prevent retaliatory violence.

"Research across the country shows that outreach programs work and they are working here," said New Bedford Police Chief Ronald Teachman. "Three years ago, the city had nine homicides, two years ago seven and last year two. Also, the city has had a 66 percent reduction in gun violence."

St. Luke's is collaborating with the city's program, serving as a vital link between victims of violent crimes and the potential for further violence in the city.

When victims of violent crimes arrive at the hospital, St. Luke's Security is responsible for securing the area and handling any gathering crowd. Health care providers are concerned with the wellbeing of the patient, and social workers are working closely with the patients and their families.

"The Outreach Workers serve as a valuable resource between these entities and law enforcement because they are familiar with the individuals and their liaisons," said Ray Price, Director of Safety & Security for Southcoast Hospitals. "This critical link can help identify any pockets of conflict and assist with communication within the hospital and beyond."

"Our Security department works closely with the New Bedford Police and other law enforcement agencies, which ensures that our hospital is a safe and secure facility for our patients, staff and visitors," he said. "The New Bedford Outreach Workers are an important part of this collaboration."

The New Bedford Outreach Workers program is modeled after the Providence Streetworker program, which is part of The Institute for the Study & Practice of Nonviolence's city outreach program. The Streetworkers began working with Rhode Island Hospital in Providence five years ago and now tour the country lecturing on their successful partnership.

"We were initially skeptical that this kind of program would work," said Capt. Gino Olaes, Director of Rhode Island Hospital Security, who along with Teny Gross, the Executive Director of The Institute for the Study & Practice of Nonviolence, and Chief Teachman met with staff from the St. Luke's Emergency Department and representatives from St. Luke's and Charlton Security departments. "We had to learn to work together, but now when they come through the doors we all breathe a sigh of relief," Capt. Olaes said. "Before the Streetworkers were on board, we would have incidents in the emergency department all the time — last year we did not have one."

Gross brought the program to Providence in 2000 after working on a similar program now called the "Boston Miracle," which was credited with cutting Boston's gang violence in half during the 1990s.

"We took the best practices from around the country," Gross said. "One of the strengths is partnership and realizing we are one more component in the hospital's team. We make sure everyone is

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Nursing certifications on the increase at Southcoast

Help is available for nurses interested in advancing their practice by earning certification

Nurses are the faces of medicine that patients see most frequently. The compassionate care they provide often colors the perspective and positively influences the perception patients have of their hospital stay. Nurses are teachers, counselors, project managers and patient advocates, integral to the well being of those in their care.

They are also skilled clinical professionals with advanced technical knowledge they call upon on a daily basis to the benefit of their patients.

For a growing number of nurses the next step in career development is the advanced medical education that a certification in their specialty provides. Certification not only empowers nurses within their professional sphere of activity and contributes to better patient outcomes, it is a source of achievement and pride.

“Certification validates a nurse’s skills, knowledge and abilities,” said Marcia Liggin, RN, NEA-BC, Senior Vice President & Chief Nursing Officer. “It also validates a nurse’s specialized knowledge, indicates a level of clinical competence and enhances professional credibility with patients, their families and peers.”

At Southcoast, 234 nurses hold national certifications in specialties. This represents a significant increase over the last several years — from 9 percent in 2004 to 14 percent today.

“Our goal is to have 20 percent of our nurses certified within the next three years,” said Robert Ready, RN, NEA-BC, Director of Professional Development. “Certification is a national benchmark. Certified nurses measure up to other nurses nationally within their specialty. Research shows that the more nurses that are certified on a unit, the better the unit’s patient outcomes are.”

Ilda Lourenco, RN, BC, ONC, Resource Nurse on the Wilkes unit at St. Luke’s, said doctors and patients are more confident knowing they are working with nurses who are certified.

“I feel good about my certification,” Lourenco said. “It’s very rewarding when you are recognized by your peers as an expert in your specialty. Now, I encourage other nurses on my unit to get their certification.”



“Nurses wishing to become certified complete a course of study, take an exam and work a set number of hours in their specialty to maintain their competency,” said Jo Ann Rapoza, RN, NEA-BC, Vice President of Patient Services at St. Luke’s. “We offer free study groups and test taking classes to prepare for the exam. The text books and study guides for various specialties are in our libraries and available to staff.”

Aimee Levesque, RN, PCCN, a nurse on the Cardiovascular Step-Down Unit at Charlton, said some people are intimidated by the certification test.

“It’s not as hard as they think,” she said. “I did it. We all can do it. Certification gives you the satisfaction that you’ve gone the extra mile to enhance your knowledge.”

On Charlton’s Cardiovascular ICU, certification has fostered team spirit.

“The certification keeps me up to date on the newest evidence-based practices, and I bring that to my patients and unit,” said Tiffini Young-Kershaw, RN, CCRN, of the Cardiovascular Critical Care unit. “I encouraged other nurses to become certified and several of them have gone on to do that. We all supported and encouraged each other.”

Encouragement comes from leadership as well.

“Certified nurses benefit their patients and Southcoast by having up-to-date information on new trends and treatments,” Rapoza said. “I would encourage all nursing staff to seek professional recognition through certification programs because it will elevate their practice.”

by Marsha Zeitz

How to get certified

Before nurses can sit for a certification exam they must prove they hold RN licenses and have the appropriate education and experience in the specialty field.

Tests are based on the scope and standards of practice approved by the American Nurses Association Congress of Nursing Practice and Economics and are administered by the American Nurses Credentialing Center. Southcoast helps to defray the cost of certification and recertification.

For more information please call:

Robert Ready
Director, Professional Development

508-961-5538 or
508-679-3131 Ext 2987.

Why I give:

“Contributing to something I really believe in.”

The workdays for Susan Miller, RN, CNOR, go by quickly — some days even a little too quickly. As manager of the Operating Room Service Group in Perioperative Services at St. Luke’s, Miller enjoys the pace. She is no stranger to Southcoast, having worked for 22 years at Charlton until she transferred to St. Luke’s five years ago.

When asked what she most likes about her work, Miller is quick to respond. “The people,” she said. “We’ve got a great team in the OR and staff are like family.”

“Sometimes when I tell people on the outside what a great place this hospital is, the response is, ‘Well, that’s because you work there and you’re biased.’”

“The truth is, it’s because I work here that I know the high quality of the care we deliver,” Miller said. “And the longevity of the staff — some here for 30 or 40 years — also says a lot about the hospital.”

Why would an employee like Miller feel so strongly about supporting the Employee Appeal when she already gives so much of her time and energy to her job?

“I’m paid for what I’m doing here,” she said. “And I like the idea of giving back. It would be great to see 100 percent employee giving since some of the money comes right back to the department to help with equipment purchases and service needs. Every little bit helps, and people don’t always understand how expensive equipment and supplies can be.”

Miller feels so strongly about supporting the Employee Appeal that she hasn’t missed a year since 1994. “I do it through payroll deduction,” she said. “The money doesn’t pass through my hands so I don’t miss it, and what’s more, I feel good contributing to something I really believe in.”



Susan Miller, RN, CNOR (right) with Jodie Gauthier, RN, CNOR, who also contributes to the Employee Appeal



Quality & Safety

Ronald B. Goodspeed,
MD, MPH, FACP, FACPE
Executive Vice President, Southcoast Health System



This month we will continue our updates on patient satisfaction and share some good news about ventilator-associated pneumonia (VAP), patient fall rates and swallow screening.

Service Outcomes: *Inpatient satisfaction* worsened slightly in April, but has maintained the year-to-date average of 80 percent of patients stating they would “definitely recommend Southcoast.” With a concentrated effort, we can still achieve our goal of 82 percent for the year. *Emergency Department satisfaction* improved to 60 percent in April from 55 percent the previous month following implementation of several action plans. *Outpatient satisfaction* improved to 90 percent in April, also after implementing a number of action plans.

Clinical Outcomes: *VAP* continues to approach zero infections for the last reported quarter. Only one VAP occurred in nearly 1,200 days of ventilator care delivered. The single VAP case will be thoroughly reviewed for any lessons that can be learned. *Medication error rates* are within acceptable levels. The *Medication Error Index* improved to 1.96 — the second best rate ever reported at Southcoast over the past four years.

The *patient falls rate* continues to be better than the national benchmark and the *Falls Harm Index* continues to be better than goal. The Quality Steering Committee will soon identify a new goal for the falls harm index to push improvement to a better level. Of the 169 falls that occurred during the last reported quarter, 31 falls, or 18 percent, resulted in some form of temporary harm and included one death that was unrelated to the fall. Each case of harm is

reviewed by nursing management and Risk Management. The Quality Steering Committee will identify new performance targets to reduce the number of falls associated with injury.

Dysphagia screening (swallowing screening) for stroke patients continues to occur at a rate better than that Massachusetts average, but improvements are still needed. Improvement actions are regularly identified and acted upon via the Stroke Committees.

Efficiency: Length-of-stay remains unchanged and worse than goal. A review of actions taken and actions planned will be reviewed in detail at upcoming Board meetings.

Patient Safety Needs & Other Important Safety Procedures:

- Sign/date/time every entry in the medical record.
- Verbal and telephone orders must be authenticated and signed, dated and timed by a physician within 48 hours.
- Pain assessment must be documented using the pain scale for all patients in all areas.
- “Do No Use Abbreviations” are never permitted in the medical record.
- Wash your hands before and after every patient encounter.
- Control clutter: No carts can be parked in areas that block egress and never store or park rolling equipment on both sides of a corridor.
- Smoke only in authorized areas. 🚭

Partnering for security and safety

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safe and take the steps to make sure there is no further retaliation.”

The New Bedford Outreach Workers are called to the hospital by the New Bedford Police Department, but if the need arises, the hospital can contact them directly. The Outreach Workers wear blue hooded sweatshirts or T-shirts with New Bedford Outreach Worker printed on the back. Security also has individual photos on file for easy identification. The primary contact for the outreach workers is security, but the medical staff will determine the level of access and interaction based on the patient’s condition and wishes. Patient privacy and private health information are also a top priority.

“It is in the best interest of the hospital and the community to work with the Outreach Workers,” said Lisa Bechard, RN, Director of Emergency Services at St. Luke’s. “When any patient comes through our doors it is our top priority to provide the

highest standard of quality medical and health care. The outreach workers can diffuse situations in the waiting areas, outside the hospital and serve as a familiar connection for the patient and family members.”

“The New Bedford Outreach Workers are a supplement — not a substitute — for hospital staff,” Chief Teachman said. “They have a relationship with these kids before they become gang members and if there is a flare up, they are working on it before it becomes an incident. They are also able to assess a situation quickly because they know the players.”

Charlton has a similar program in Fall River. Representatives from the hospital’s Emergency Department, Security staff and nursing supervisors are working with members of the Fall River Outreach Workers, who are part of the Fall River Strategic Approach to Reduce Gang Engagement (SARGE) program. 🚭

the Interview

Abigail Finger

Participant in Southcoast School-to-Career program

Southcoast's School-to-Career program, headed up by

Elaine Wilcox, RN, Training Specialist, promotes

health care careers among area students and

ensures that students are preparing for health

careers by taking the right classes in high school.

Wilcox also sets up internships at Southcoast hospitals to

help students get a real taste of what it is like to work in a hospital setting.

Coastlines recently talked to Dartmouth High School senior Abigail Finger about

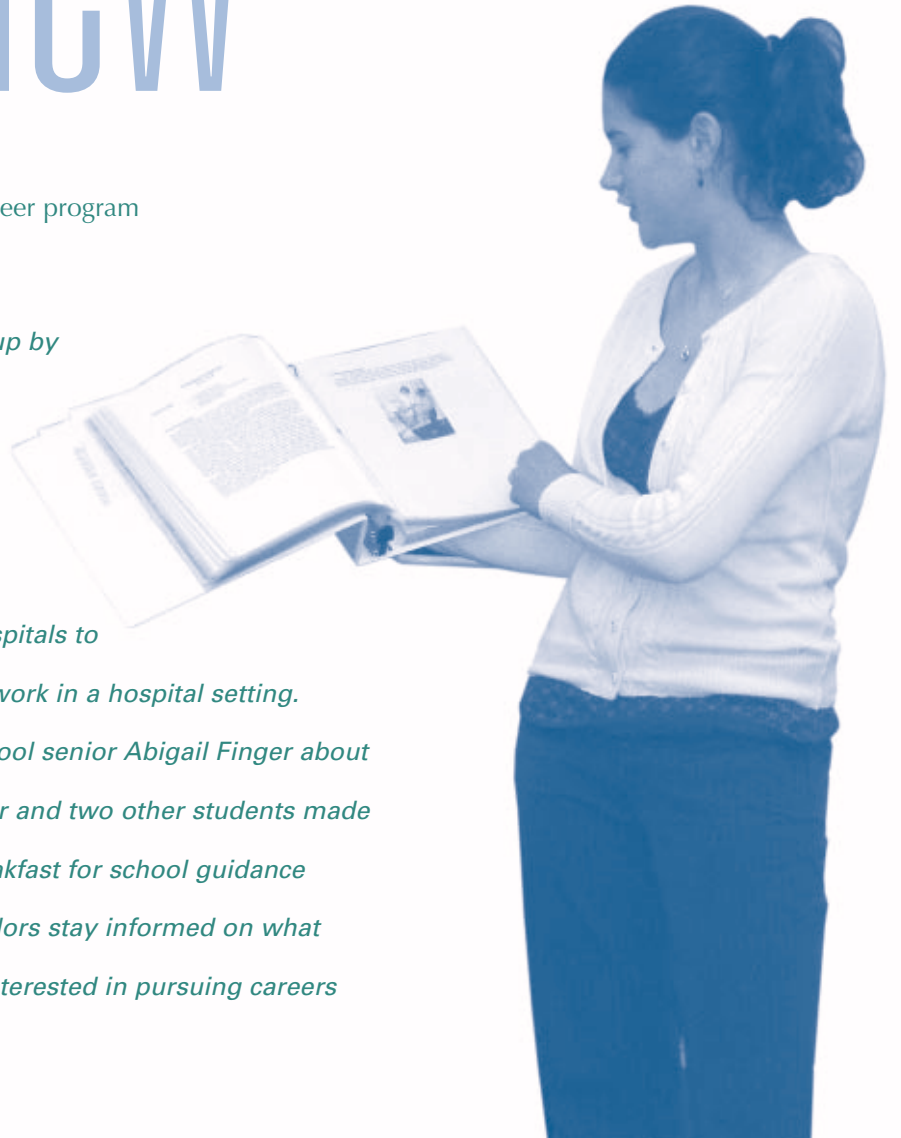
her experiences as an intern at Southcoast. Finger and two other students made

presentations at the annual School-to-Career breakfast for school guidance

counselors. The breakfast helps guidance counselors stay informed on what

Southcoast has to offer students who might be interested in pursuing careers

in health care.



What will you be doing next year?

I will be attending Cornell University, majoring in biochemistry on a pre-medical track.

What did you do as an intern at St. Luke's?

On Mondays, Thursdays and Fridays I did a job shadow with Adam Pisapia, a clinical instructor in Nuclear Medicine. I spent Tuesdays and Wednesdays at the surgery center with Dr. [J. Greer] McBratney. He would take me into the operating rooms and explain what was happening. The surgeons usually let me get pretty close to the table and explained what they were doing.

How long was your internship?

I was at the hospital Monday through Friday mornings from 7:30 to 8:45 from September to January.

Why did you want to do an internship at St. Luke's?

I thought I wanted to take a pre-medical course, but first I wanted to see if I liked the atmosphere in the hospital and if I could handle being in the environment.

What did you see and do in Nuclear Medicine?

I was able to observe many of the different tests that they administer. I was also shown the pictures from the tests on the computer. I also got to call in patients from the waiting room and set up the rooms before the tests.

What did you find most interesting about it?

I think the most interesting thing about Nuclear Medicine was how the cameras can pick up the radiation in the body and create an extraordinary image that doctors can use to pinpoint problems.

What did you find out about yourself during your internship?

I found out that I really like surgery. I found the whole experience fascinating. I thought it was a great experience.

How do you think the internship helped prepare you for the future?

My internship prepared me for my future because now I have spent time in the hospital environment and know that it is a place that I want to be. I now have a clearer view of what I want to do as I enter college. 📖

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