



SOUTHCOAST CENTERS FOR CANCER CARE ANNOUNCES AFFILIATION WITH M. D. ANDERSON PHYSICIANS NETWORK

Southcoast is working with the nation's leader in cancer care to offer advanced treatment for cancer patients in Southeastern Massachusetts.

Southcoast Hospitals Group recently announced its Southcoast Centers for Cancer Care has formed an exclusive regional affiliation with M. D. Anderson Physicians Network®.

M. D. Anderson Physicians Network is a subsidiary of The University of Texas M. D. Anderson Cancer Center, one of the world's most respected leaders in cancer care and ranked No. 1 in the nation, by U.S. News & World Report's "Best Cancer Hospitals" survey for six of the past eight years including 2009.

Combining the region's top cancer provider with the expertise of the nation's leader in cancer care, the affiliation will offer new hope and state-of-the-art care for cancer patients in the South Coast region.

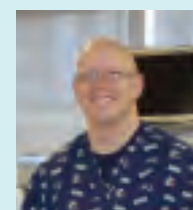
"Southcoast's affiliation with M. D. Anderson Physicians Network further solidifies our mission and commitment to provide the most advanced health care services to residents of the South Coast region," said Keith A. Hovan, President & CEO of Southcoast Hospitals Group.

"Southcoast Centers for Cancer Care are dedicated to creating a caring environment that integrates patient care, research and prevention," Hovan said. "This affiliation is firmly based on bringing an unprecedented level of cancer care for patients in our community."

Southcoast Hospitals Group through its Southcoast Centers for Cancer Care is the first hospital in New England to have an exclusive local affiliation with the prestigious M. D. Anderson Physicians Network and is one of only a few affiliates in the U.S. The M. D. Anderson Physicians Network affiliation is offered selectively to qualified community hospitals and their medical staffs in the U.S. only after a rigorous and extensive evaluation process based on evidence-based treatment guidelines and quality management. This affiliation will enable patients to be treated at Southcoast with the assurance of best national practices in patient care. Because of this relationship the expert staff and physicians of Southcoast Centers for Cancer Care will be able to closely collaborate with M. D. Anderson and bring more than 100 evidence-based treatment regimens for almost every type and phase of cancer to the community.

"We look forward to a very strong three-year clinical program with Southcoast and the implementation of the M. D. Anderson Cancer Center Best Practices and Quality Improvement model," said David Tubergen, MD, Medical Director of M. D. Anderson Physicians Network.

continued on page 2



E-mail a Patient program hits a milestone



John Teixeira, Volunteer Services.

For the first time since its inception in 2007, Southcoast's E-mail a Patient program delivered more than 100 e-mails to inpatients in a single month.

"We're excited the program had been growing steadily over the years and has hit this milestone," said Jim Rattray, Vice President of Marketing & Public Affairs for Southcoast. "E-mail is great for family and friends — both from the community and afar — to connect with a patient in our hospitals."

"The service we provide brings so many smiles to our patients," said John Teixeira, Team Leader of Volunteer Services at St. Luke's, who delivers many of the e-mails. "Receiving a personalized e-mail from your granddaughter in California or your brother in Maine is the next best thing to being there."

In 2007, its first year, the program delivered 462 e-mails to patients. In 2009, that number grew to 767. As of March of this year, 233 e-mails were delivered.

"We encourage staff to tell their patients about our e-mail program so they can share the information with their family and friends," Rattray said. "The program is easy to use and e-mails are generally delivered on the same day they are received."

To learn more about Southcoast's E-mail a Patient program, log on to: www.southcoast.org/email.

In Memoriam

Steven Labrode, MLT, a Medical Technologist who worked at St. Luke's since September 2000, died on March 15. He is survived by his daughter, Renee, his mother and five brothers and sisters.

Karen Crissman, RRT, a Respiratory Therapist who worked at Charlton for 22 years, died on March 15. She is survived by her husband, Alan; sons, Joshua and Jeremy; and her mother, sister and grandchildren. 📧

Cancer Care Affiliation Announcement

continued from cover

Raising the bar for South Coast cancer patients

"The Southcoast Centers for Cancer Care are working with the nation's leader in cancer care to bring new hope and advanced standards of care to cancer patients in our community," Hovan said. "The Physicians Network program provides access to the evidence-based guidelines developed by M. D. Anderson. It provides reassurance to our patients that the comprehensive cancer services at Southcoast are based on advanced standards of care and proven best practices.

"By assuring that residents of the South Coast have access to comprehensive, high-quality care, Southcoast is raising the bar in our community. Making sure Southcoast's physicians and caregivers follow these standards of care, will help us deliver better care to cancer patients on the South Coast."

Southcoast medical and radiation oncologists are credentialed by M. D. Anderson Physicians Network. Southcoast also underwent successful site visits of its medical and radiation oncology facilities, including medical record reviews, chemotherapy policy and practices, and physical plant and equipment.

"What is most important is that our patients and their families are involved in treatment decisions and are placed on an established and well-communicated treatment plan," said Therese M. Mulvey, MD, Physician-in-Chief & Medical Oncologist for the Southcoast Centers for Cancer Care. "Having all providers following the same evidence-based guidelines using a multidisciplinary team approach is proven to reduce diagnostic and treatment variations."

Work on the affiliation began more than a year ago when Southcoast first opened its comprehensive medical and radiation oncology program in the Mitchell Building at Charlton Memorial Hospital in Fall River.

"We congratulate our stellar team of oncology professionals and physicians for providing cancer care that meets these rigorous standards," Hovan said. "Being affiliated with M. D. Anderson Physicians Network means Southcoast has the required expertise and comprehensive cancer services in place. For our patients, this affiliation means easy local access to our Southcoast physicians, caregivers and a cancer program that is following the cancer care guidelines developed by M. D. Anderson."

Giving patients new options

The mission of the Southcoast Centers for Cancer Care is to provide patients with the resources and care they need right here in the South Coast. However, Dr. Mulvey noted that, if necessary, patients will continue to be referred to "the appropriate setting regionally or nationally, as we would have in the past based on the specific disease and needs of the individual patient."

Southcoast's staff and physicians will also have access to extensive professional development programs offered by specialists at M. D. Anderson, including the latest research, multidisciplinary treatment planning conferences and didactic lectures by M. D. Anderson Physicians Network. The cancer program is not limited to diagnosis and treatment — there is a strong emphasis on patient satisfaction, comforts and education.

"Cancer care is complicated. No one can do it alone and no community cancer program can have everything," Dr. Mulvey said. "We provide comprehensive cancer care — and we do it in the best possible way. By building a strong community program with access to the nation's top-performing cancer program, we are assuring our community advanced care and clinical outcomes. We want our patients to rest assured their treatment plans are being measured against proven benchmarks with great outcomes and quality oversight." 📧

Southcoast Center for Cancer Care in Fairhaven "Topped Off"



The Southcoast Center for Cancer Care in Fairhaven was officially "topped off" on March 31.

The "topping off" marks the placement of the last important steel beam into the new structure. It is said to stand as a symbol of luck and good fortune for all future occupants.

The Center is slated to open in 2011. 📧

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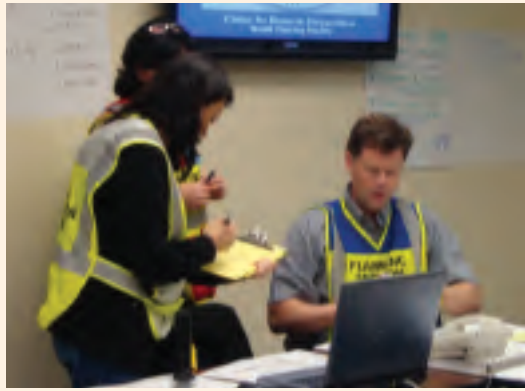
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40 Southcoast employees trained for emergency preparedness



Robert Duval, Pharmacy Buyer; Instructor; and David Teixeira, RN, Clinical Manager, Interventional Cardiology.



Joyce Brennan, Public Information Officer, Marketing & Public Relations; Deborah Rideout, RN, CNOR, Director, Perioperative Services (obscured); and Michael Bachstein, Vice President, Facilities Development & Engineering.



Sally Cabral, Administrative Assistant, Administration; Deborah Rideout, RN, CNOR, Director, Perioperative Services; Richard Donnellan, RN, Resource Nurse, Tobey; and Michael Cogliandro, Manager, Retail Food Operations, Nutritional Services.

About 40 Southcoast Hospitals employees underwent a week of intensive emergency management training in March to help improve the organization's preparedness in times of a mass-casualty emergency.

The training, known as the Healthcare Leadership and Administrative Decision Making Course, was provided and fully funded by the U.S. Department of Homeland Security at the Federal Emergency Management Agency's Center for Domestic Preparedness (CDP) at Fort McClellan in Alabama.

"Health care response during a disaster is part of an overall community response that involves many agencies, departments and organizations on a local, state and federal level," said Patrick Gannon, RPh, Vice President of Quality & Safety, who attended the training. "Southcoast Hospitals conduct drills several times a year to make sure that all of our staff have sufficient emergency preparedness training. The FEMA training adds a new dimension to the hospitals disaster planning and response."

The training took place at Noble Army Hospital in Anniston, Ala., which was converted in 1998 into a training site for health and medical education in terrorism, manmade and natural disasters. The National Training Facility (NTF) is the only hospital facility in the U.S. dedicated to training hospital and health care professionals in disaster preparedness and response.

Attendees received advanced hands-on training by the country's top leaders in disaster preparedness. The four-day training included two days of lectures and tabletop drills plus two days of functional exercises taking place in a simulated hospital environment. Scenarios were incorporated in the drills such as infant abduction, mass casualties, hazardous chemical spill requiring decontamination of victims, bomb threat and small pox pandemic response.

"A benefit of this type of preparedness is learning to work as a team in various Incident Management positions while using the National Incident Management System (NIMS) protocols," said Ray Price, Director of Safety & Security, who also attended the training. "These protocols allow the team to work in concert with EMS, first responders and all State and Federal agencies involved in the event."

Southcoast has sent a number of individual employees to the NTF over the past five years, but this is first time a large group was sent to train at once.

The 40 Southcoast participants represent various departments across the three hospital sites, including the Emergency Departments, Radiology, Public Relations, support services, leadership and more. Also participating in the training were the Visiting Nurses Association of Southeastern Massachusetts in Fall River and Southcoast Home Care, Hospice & Palliative Care & Infusion Services in Fairhaven and outside agencies including Sturdy Memorial Hospital in Attleboro, Nantucket Cottage Hospital in Nantucket and Environmental Health & Engineering Inc. of Waltham.

Gannon said Southcoast wasted no time in putting this new knowledge to work once employees returned home.

"We have gathered a group of clinical staff who took part in the training to begin using what they learned to improve our response to heavy Emergency Department volume along with a full inpatient hospital census," he said. "The experience gained at Noble will definitely help us improve patient care during times when our hospitals are seeing high and prolonged patient volume." 📧

"The program really shed light on the roles of people in the Incident Command Center as well as those in roles throughout the hospital during an emergency. It taught us how we interact with other organizations in the community and on a national level such as the Department of Public Health, Centers for Disease Control, local public safety and even the National Guard. The training helped me feel much more prepared to navigate an emergency or disaster large or small."

— *Deborah Rideout, RN, CNOR, Director of Perioperative Services*

"I worked in a couple of roles during the training and it really showed me the challenges and stresses that face people throughout the hospital during an emergency. I also came away with a lot of new knowledge for my own role in an emergency, which would be procuring the medications we would need to treat victims. We have medications on hand in case of an emergency but it was enlightening to learn of national stockpiles of medications that can be available within 12 hours when we are dealing with mass casualties."

— *Robert Duval, Pharmacy Buyer*

"The training showed me that Southcoast is a very well-organized institution and very dedicated to emergency preparedness. It was great to see involvement from all levels of the organization from administrative secretaries and security staff to nurses, vice presidents and physicians. Everyone worked side-by-side as peers. It was intense and hard but also fun and overall it was a very rewarding experience."

— *David Teixeira, RN, Clinical Nurse Manager of Interventional Cardiology*

"I was extremely impressed by the program and the experience-level of the faculty. One of our instructors actually wrote The Joint Commission standards on emergency management. It was very enlightening to understand the level of responsibility held by public health departments — right down to the city level — during an emergency. It really drove home how closely we need to work with public safety and health offices during such times."

— *Patrick Gannon, RPh, Vice President of Quality & Safety*

"My official role during an emergency at Southcoast would be to work as a recorder at St. Luke's. When we were doing the classroom training at Noble, I wondered what my contribution would be during a disaster. During the hands on exercises it became clear to me that my role as a recorder could not only be used as assisting the Incident Commander but also the Operations Chief. When we were all working together, it was easy to understand how important everyone's role is."

— *Sally Cabral, Administrative Assistant, Administration*

Readiness Corner: Notes from Team Chapter Leader, Ray Price



At the head of Southcoast's regulatory readiness efforts is a team whose members are each assigned a certain area — or chapter — of responsibility. These chapter leaders are responsible for assessing Southcoast's compliance with the regulatory standards within their chapter. Each month, *Coastlines* will feature one Chapter Leader and explain Southcoast's current status within that chapter.

Team Chapter Leader: Ray Price, Director of Safety

Chapter: Environment of Care

What does the chapter include?

The Environment of Care chapter consists of safety, security, hazardous materials and waste, medical equipment, utilities management and fire prevention. Environment of Care requirements extend to all locations under the hospital license.

What has changed from 2009?

The most significant change from 2009 is that Emergency Management is scored separately from the Environment of Care.

What is our status for the chapter and/or elements of performance in it?

We are currently in compliance with all elements of performance but there is still room for improvement in some areas, particularly staff education.

What educational efforts are taking place to improve compliance?

In addition to regularly scheduled hazard surveillance rounds, security officers have been making follow-up fire training effectiveness rounds where they test employee fire and evacuation knowledge. In addition, emphasis has been placed on providing safety and fire training to individual departments.

Are you doing rounds to monitor compliance?

Hazard surveillance rounds for clinical areas are completed in concert with infection prevention semi-annually. All other areas are visited annually.

Creating an effective Environment of Care program can be challenging. We have been successful because as a team, staff and leadership are very supportive and contribute whatever is required to ensure a safe and operational environment for patients and staff. 📌

Two units at Charlton recognized for stop-smoking efforts

The Massachusetts Department of Public Health and the Massachusetts Tobacco Cessation and Prevention Program recognized two nursing units at Charlton for their efforts in reducing the incidence of smoking in the area through their participation in QuitWorks.



from left: Sue Kirby, RN, Nurse Manager; Lucia Cabral RN; Melissa Escaler RN; Lisa Holden RN, Clinical Resource Nurse; Anne Lawrence, RN, Clinical Resource Nurse; Martha Dufresne, RN.



from left: Liz Farrar, Karen Pavao, Nick Mucciardi, Sue McNally, Nancy Medeiros, Marcia Brisson, Nicole Almeida, Erica Warren, Karen King, Marcia Liggin and Elena from DPH.

Atwood 5 and Moran 3 at Charlton were recognized by members of MTCP and local community partners for making the highest number of referrals to QuitWorks in the hospital for the month of January. Over the past 12 months, Charlton has made 270 referrals to the program, which it has participated in since 2004.

Similar recognitions will take place at St. Luke's and Tobey in the coming months as celebrations of Southcoast receiving the MTCP's first-ever "Make Smoking History" award, last November, for its success in enrolling patients in the QuitWorks program.

"We are proud to be taking part in the QuitWorks program in an

effort to help our patients end their dependence upon tobacco," said Marcia Liggin, RN, Chief Nursing Officer for Southcoast Hospitals Group. "And we are equally proud of our nurses for their efforts to enroll patients in QuitWorks. The number of referrals they make to QuitWorks is a testimony to their dedication to helping patients stop smoking."

QuitWorks is a free stop-smoking service available to health care providers that helps Massachusetts smokers receive the counseling and support necessary to help them quit. More information is available at www.southcoast.org/health/quitworks.html. 📌

Comprehensive Waste Management to Save Money, Help the Environment

Recycling will become part of every Southcoast employee's vocabulary in the coming months as staff members start talking "trash."

There won't be any insults or disrespect in the conversation. Instead they will be discussing the merits of recycling, using proper waste receptacles and the latest advances in waste recovery.

These discussions will be part of a new waste management approach being planned by Southcoast and Waste Management Healthcare Solutions. Working in partnership, they intend to make Southcoast's three hospitals the first in the region with this comprehensive, integrated waste management and sustainability program.

"There will be a big emphasis on recycling," said Michael Amaral, Director of Environmental Services & Central Transport. "We want to be a community leader in that aspect of waste management."

A hospital is a complex institution that is often a community's largest hotel, biggest restaurant and largest purchaser of goods and services. It also produces refuse in substantial quantities, involving everything from paper to electronics to food, said Peggy Harlow, New England Program Manager for Waste Management Healthcare Solutions. "Fifty percent of a hospital's trash can be recycled, reused or composted," she said.

Charlton, St. Luke's and Tobey together generate more than 1,800 tons of solid waste a year and 200 tons of regulated medical waste, Amaral said. The system's eight streams of waste — including such categories as regulated medical waste, sharps, confidential documents, hazardous waste, recycling and solid waste — currently are handled by multiple vendors in a variety of ways.

The regulations governing the handling and disposal of different wastes can be complicated and involve a variety of government regulators, Amaral said. That makes waste management increasingly difficult and costly.

Southcoast first reached out to Houston-based Waste Management, the country's largest handler of solid waste and largest recycler, to assess its pharmaceutical waste management practices and pursue a culture of proactive compliance. The American Hospital Association recently exclusively endorsed Waste Management Healthcare Solutions for integrated environmental services for health care.

Earlier this year, a Pharmaceutical Hazardous Waste Program was introduced to the Pharmacy and Nursing Departments. Now Waste Management has turned its attention to the rest of Southcoast's refuse. After an in-depth assessment of all the current efforts, the company will recommend policies and processes that Harlow said will save Southcoast money while it handles waste in a more sustainable manner.

"We will build off of existing programs," Harlow said. While Southcoast already recycles cardboard, paper, computers, batteries and fluorescent light bulbs, recycling will be expanded to include bottles, cans, plastics and other material. Southcoast will also seek to prevent waste by purchasing goods with environmentally friendly packaging, such as reusable crates. And it will reduce the risks of handling certain categories of waste, while documenting compliance for regulators.

Southcoast staff will start formally hearing about the program in coming months. As it evolves over the next nine months or so, the program's success will depend largely on the participation and support of Southcoast staff, Amaral said.

Employees with an interest in recycling, sustainability and waste reduction soon will be asked to consider joining the Green Champions Program and act as liaisons with their departments. Education programs will teach staff members how to dispose of all the waste their work generates and the importance of doing so properly in compliance with regulations. Regulated medical waste, for instance, is more expensive to handle than regular trash, which is, in turn, more expensive — not to mention less "green" — than recycling.

"Employees will be able to make the decision to put paper in the recycling bin because they know it represents a lower cost to the hospital than putting it in the trash," Harlow said.

But even when the program is fully implemented, the improvements in trash handling will continue, Harlow said. "This is a long-term arrangement," she said. "Two years down the road, a recycling market may develop for a byproduct that is not currently available."

At that time, waste-handling policies will be reworked to meet the new reality and staff members will have new opportunities to reuse materials and reduce waste.

"The success of the program comes down to individual actions," Harlow said. "The decisions each employee makes will enable the hospital to meet its goal of providing a positive environment as an employer, a health care institution and a member of the community." ■

— Barbara LeBlanc



Michael Amaral with Peggy Harlow, Program Manager, Waste Management Healthcare Solutions.



Gail Smith, Medical Records.



Quality & Safety

Keith A. Hovan
President & CEO, Southcoast Hospitals Group



This month I would like to talk a little about some “non-clinical” approaches Southcoast is taking to promote an improved healing environment in its hospitals.

As some of you may have noticed Southcoast has recently placed a piano on the Mezzanine at St. Luke’s and will soon install another in the atrium at Charlton for the listening pleasure of all who enter our doors. Community volunteers, including students from the University of Massachusetts Dartmouth Performing Arts program, are now being scheduled to perform at these pianos during peak visiting hours.

The piano at St. Luke’s was donated by the Olivier family, in memory of Dr. Norman Olivier, and the Gannon family. The piano for Charlton has been purchased from a Southcoast employee, who is delighted to have it find a new purpose in health care. Once the Southcoast Center for Cancer Care in Fairhaven is completed, a piano will be available there as well.

The addition of music is just the latest installment in a gradually developing arts program here at Southcoast designed to enhance healing, reduce stress and promote wellness for all those who spend time at our sites — patients, visitors and employees.

Healing gardens have been created at St. Luke’s and Tobey hospitals and an intimate, outdoor sitting area is available at the Southcoast Center for Cancer Care in Fall River. The Southcoast Center for Cancer Care in Fairhaven will also have healing gardens and walking paths for patients, family and staff to enjoy.

An original art program was unveiled at our St. Luke’s campus in 2006. Thanks to the efforts of our External Affairs department, the walls of our New Bedford hospital are now adorned with original art works from local artists for the pleasure of all who walk through our doors. Original art also decorates the walls of the Fall River cancer center. It is our intent to do the same at the Fairhaven site. Eventually all of our hospital sites will be involved in the art program.

Why do we concern ourselves with amenities that might

seem “nice-to-have?” We have done this because a growing body of research indicates that programs such as healing gardens, music and art have a positive effect on those receiving care, as well as those working in or visiting a health care facility.

Studies have demonstrated that integrating the arts into a health care setting helps promote a healing environment. Architectural design, art on display, access to natural light, the inclusion of nature through landscape and healing gardens as well as musical performances have been shown to have a significant impact on reducing patient and caregiver stress, improving health outcomes, enhancing patient safety and overall quality of care while reducing costs.

The first symposium on arts in health care was held in March 2003, hosted by the National Endowment of the Arts and the Society for Arts in Healthcare. Participants included representatives from Johnson & Johnson, the American Hospital Association,

Johns Hopkins University, Americans for the Arts, National Institute on Aging and The Joint Commission.

A 2009 follow-up report issued by the Society for Arts in Healthcare provided information on progress in the field since the symposium.

The report cites data showing that arts programs, such as those we have in our hospitals, help contribute to positive patient outcomes as evidenced by shorter hospital stays, less medication required for pain management and having fewer complications — all of which translates to a reduction in health care costs.

I hope you are able to take advantage of our growing arts program, whether it is by stopping for a moment to listen to music provided by volunteers in our community, enjoying some of the art we have hung on our walls or taking a walk in one of our healing gardens during a break. Please encourage our patients and their family members to partake of these offerings as well. Doing so will help create a healthier environment for all and better outcomes for our patients. ■



Taylor Kirkwood, St. Luke’s Mezzanine.

Employee Appeal Update: 56 departments achieve 50% or greater participation

More departments than ever achieved a 50 percent or greater participation rate in the 2010 Employee Appeal. System-wide, 56 departments had at least 50 percent of their staff making gifts to Southcoast — 17 more departments than last year.

As of the end of March, 894 employees contributed to the 2010 Employee Appeal, just six people away from our goal of 900 participants.

Your participation counts: There is still time to contribute to the Southcoast Employee Appeal. Just log on to the Southcoast intranet and click on "Every Penny Counts" or onto www.southcoast.org/give/ to make your gift today.

On behalf of the patients we serve, your co-workers and your hospital, thank you to every one who has participated in the Employee Appeal.

Together we are making Southcoast a better place to work and the best place to get medical care in the region. ■

100% PARTICIPATION

Charlton Departments

Educational Services
Lab — TMSA

St. Luke’s Departments

E.E.G.
Enterostomal

Tobey Departments

Cardiac Rehabilitation Services
Environmental Services
Maintenance
Security

Southcoast Departments

Audit Services
Budget & Decision Support
Contracting & Reimbursements
Fiscal Administration
Library
Patient Services Quality
Performance Improvement
Philanthropy
Physician Recruitment
Project Management
Safety/Emergency Management
Wellness Program

MORE THAN 50% TO 99% PARTICIPATION

Charlton Departments

Electrophysiology
Human Resources
Imaging Outreach
IV Therapy
Mobile Van/CB
Radiology Diagnostic
Mammography
Radiology Special Procedures
Truesdale Radiology
Truesdale Ultrasound

St. Luke’s Departments

Dietary
Echocardiography
General Services Administration
Home Care Administration
Hospice
Human Resources
Other Rehab Services
Patient Financial Services
Psychiatric Administration
Psychiatric Social Services
Radiology Special Procedures

Tobey Departments

Pharmacy
Rehab Services Inpatient

Southcoast Departments

Clinical Informatics
Compensation & Benefits
Ergonomics
Human Resources Administration
Infection Prevention
Marketing & Public Relations
MIS-EMD-OP
Outcomes Management
Physician Initiatives
Planning
Quality Data
Revenue
Risk Management
Volunteer Services

the Interview



Troy DeCouto

Hyperbaric Safety Officer,
Southcoast Center for Wound Care & Hyperbaric Medicine

A seasoned scuba diver and member of the Dartmouth Fire Department for almost 20 years, Troy DeCouto decided to put his years of public safety experience to work helping patients with hard to heal wounds. In his new position as the Hyperbaric Safety Officer, DeCouto is responsible for the safe operation of the two hyperbaric oxygen therapy (HBOT) chambers at the recently opened Southcoast Wound Care Center at Charlton. He recently took time to speak to Coastlines about the chambers and his passion for safety.

How do the hyperbaric oxygen therapy chambers work?

Wounds require air to heal. The air that we breathe contains an oxygen level of 21 percent. The chambers expose patients to air that is 100 percent oxygen. At that level, more oxygen gets into the cells around the wound area and helps the wound heal more quickly.

What happens when a patient is referred to the center?

When a patient comes in they meet with a physician and a nurse who help devise a treatment plan. They discuss the appropriate methods for treating the patient's wound, as there are other ways to treat a wound in addition to hyperbaric oxygen therapy. If it is decided that HBOT will be used, the patient will take part in an orientation to learn what they need to do to prepare. We also explain the entire experience of being in the chamber.

Patients with diabetes are often candidates for HBOT. They need to be on a strict nutritional regimen because it helps their wounds heal more quickly and because an oxygen therapy session takes up to two hours. We need their nutritional levels to stay constant during that time. As a safety precaution, we check their glucose level before and after every treatment.

What happens once a patient is in the chamber?

I place the patient in the chamber and make sure they are comfortable. I can talk to patients from outside the chamber through an intercom system and I explain everything that happens in the chamber as it is happening.

As I pressurize the chamber, patients will often experience a crackling in their ears similar to what happens when an airplane takes off or lands. I give them ideas on how to clear their ears but if it gets to be too much, I can slow the pressurization of the chamber or stop it for a few minutes while the patient adjusts.

How long is an oxygen therapy session?

Sessions take 90 minutes to two hours and it usually takes about 30 sessions to heal a wound.

Are hyperbaric oxygen chambers safe?

The chambers are very safe and we have implemented a vigorous safety procedure schedule to ensure their safety.

Patients are given special 100 percent cotton garments to wear during treatment. They cannot enter the chamber wearing street clothes. Patients are also instructed not to use, cologne, lotions, hair gels or sprays before they have a session. The ingredients in some of those products interact with oxygen — and with oxygen at high concentrations, a heating process can take place that will make the patient uncomfortable. Patients receive these instructions in writing before their first session and they are reviewed before every session.

What training have you received for operating the chambers?

The chambers create a pressurized environment for patients much like the environment a scuba diver experiences when they are under water. I've been a diver for 20 years and have led the Dartmouth Fire Department's dive team for 15, so I put all that knowledge and safety experience to work here. I also went to the Duke University Diversified Clinical Services Training program in North Carolina and received in-depth training on operating the chambers and safety.

What effect does being in an atmosphere of 100 percent oxygen have on a patient?

In a few instances, patients can get a little light-headed but we can give them an "air break." After 30 minutes of treatment we have them put on a mask similar to an oxygen mask and breathe in air at normal atmospheric levels. It normalizes oxygen levels in the body and makes them more comfortable.

What is different about this job in comparison to your experiences in public safety?

I hold an EMT license in the state and I have seen people at the very worst times of their lives. As an EMT, my interaction with patients was about 15 or 20 minutes and I very seldom got to hear about how they did after they were taken to the hospital. I now can interact with a patient on a daily basis, get to know them and see them go from a bad situation to a much better situation. That makes me feel really good. 🚒