# **Premier Pulse**

News for Premier Health Physicians

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### Journeys

By Marc Belcastro, DO, system chief medical officer, Premier Health



As I contemplated a topic for this month, I knew that writing about COVID-19 was unavoidable. I also recognized that with all the available articles on COVID-19, there was not much new information I could add. Everyone experienced their own individual journey. I decided to share with you my personal journey. A journey that contained fear, loss, courage,

support, perseverance, and perspective.

When Governor Mike DeWine declared a state of emergency, my initial reaction was fear. I was not afraid of the virus or becoming ill. As a new system CMO, I was fearful that my decisions as a leader could be less than ideal or even harmful if incorrect. While working through those thoughts, my mother, who lived in Columbus, became ill. While she was not ultimately diagnosed with COVID-19, this diagnosis was ruled out during a time when the testing took some time. We were not able to visit, and I was immediately sensing the emotions that many of our families experience. We ultimately lost our mom, but the health care professionals were caring and compassionate. I recognized how important it was for our teams to show this same care and communication when families are unable to visit. For example, she was cared for by a kind hospitalist who called my sister daily. The nurses remained with my mom until the end and they reassured us that this would happen.

I returned to work with a renewed strength. To deal with fear, I focused on what I knew about this virus and chose not to worry about

the unknown or unpredictable. Franklin D. Roosevelt said, "Courage is not the absence of fear, but rather the assessment that something else is more important than fear."

By early April, we started preparations for a worst-case scenario, and teams across the system began working on plans for surge, PPE, testing, and a multitude of contingencies. An outbreak at one of our ECFs placed Upper Valley Medical Center as ground zero. I quickly recognized my role must shift to support all of the teams and individuals. I had absolute trust the work was being done well.

The days became long with little time off and being continually reminded that this would be a marathon. Without knowing how long or how extensive our region would experience the impact of the coronavirus, I knew that perseverance would be critical. I focused on what was in front of me each day and maintained healthy rhythms of prayer, journaling, exercise, and nutrition.

At the time of this writing, we are entering the reopening phase and we still face many of the same challenges as well as some new ones. Everything I have learned and experienced on this journey will shape me for not only the next month, but hopefully life.

I know that there have been so many different and difficult journeys for us as individuals and as a medical staff. I would encourage us to not lose the sense of community and coming together for a common goal of providing care for our patients, our staff, our leaders, and one another, long after this pandemic passes.



# Telehealth Capabilities Expand During Pandemic

By Alex Pohlman, director of telehealth, Premier Health





As we've all seen firsthand, the COVID-19 crisis and the need for social distancing have significantly increased demand for telehealth. An

immediate urgency arose to expand our use of technology to help people who need routine care and to keep vulnerable individuals with mild symptoms in their home while maintaining access to the care they need. Furthermore, limiting exposure to patients and staff members continues to be critical in our response to flattening the curve and slowing viral spread.

Investments in our digital front door are of strategic importance to us as we serve our community. We have been developing these digital touchpoints with our consumers, and therefore the rapid shift to telehealth as brought on by COVID-19 was something we were well positioned to tackle. On the regulatory front, new guidance on telehealth — regarding Medicare coverage, HIPAA exemptions, cost-sharing, state licensing waivers, and more – led to an exponential adoption of telehealth capabilities for care teams across our Premier Health facilities. Pre COVID-19, we averaged a few hundred visits a week and are now averaging more than one thousand visits a day – over a 2,000 percent growth in demand.

- Premier Health's telehealth program was the first in Dayton to offer many of our hospital-based services, including stroke care, neurology care, neuro psychology, neonatology care, and psychiatry.
- Synchronous and asynchronous health care visits with our providers, both in the primary care and specialty care space, are part of our offering. Premier Health has offered telemedicine services for several years in the form of asynchronous E-Visits, as well as synchronous, real-time virtual visits for patients in primary care.

- COVID-19 has expanded our reach to now include video visits across the more than 600 Premier Physician Network providers, which includes both primary care and specialty care access. We now also offer video visits with our Premier Health Urgent Cares as well as Behavioral Health Telehealth.
- Provider-to-provider consultations improve access to specialists to support timely diagnosis and treatment for the patients of our primary care practices.

Nationally, the number of COVID-19 cases and ED visits for COVID-like illness have shown signs of tapering, and the state of Ohio is making moves to reopen to various degrees. Still, the majority of the country remains at home and continues to adjust, embracing social distancing, remote work, and virtual care. Together, we will continue finding new ways to provide the right care, at the right place, and at the right time for our patients.



# Healthgrades Call Center Launch



When patients find us online, in a phone book, our website, a marketing flyer, or through Healthgrades, their calls are connected to Premier Health practices through the CareFinders call center.

As of March 2, patients calling Premier Health through the Healthgrades website have had their calls routed through the Healthgrades call center.

PPN offices still receive patient calls through existing call centers, such as CareFinders and 1-855-PREMIER. However, the Healthgrades call center answers and routes the calls that originate from their Healthgrades website – which is a significant percentage of our incoming calls.

The transition to bring the Healthgrades call center online has been fairly seamless for our PPN practices and MCRs, with the only difference being the Healthgrades call center gathers more patient demographics from the patient (name, date of birth, address, phone, and email address). The MCR should collect patient demographic information from the Healthgrades call center representative, so the patient does not have to repeat it when the call is transferred.

The only other small difference is when a Healthgrades call adviser contacts a practice, he or she introduces themselves as being from Healthgrades, calling on behalf of Premier Health.

This change will improve the quality of service to our patients by increasing efficiencies with our growing call volume while decreasing costs.

Please email any questions regarding this change to Niki Miller on the Premier Health marketing team, at **nmmiller@ PremierHealth.com**.

## **Responding to COVID-19 Pandemic**

By Mikki Clancy, system vice president, oncology



Our disaster planning teams did not expect to put their pandemic plans in place during 2020. Handling a pandemic is something Premier Health hospitals and the community have practiced multiple times over the past few years. Practice helps us get started but each disaster brings unique situations that must be handled. The Incident Command System (ICS)

is a nationally proven way to handle not only a disaster but also keep as many normal operations in place as possible.

On March 13, Premier Health issued a system-wide Code Yellow which put in place the Incident Command System. Normally, the ICS is only put in place at a hospital level, but this unprecedented situation warranted a system-wide incident command. Once the Code Yellow was activated, the roles of the ICS chart (Incident Commander, Medical Staff, Liaison to Government and External Community Coordination, Public Information Officer, Operations, Planning, Logistics, Finance, Community Associations, Security, Legal, CompuNet Lab, and Documentation) were assigned, and work began.

Each arm of the ICS was charged with developing plans and activities to handle operations across the system and respond to the COVID-19 pandemic. Most of us saw the multiple process changes, operational changes, government mandates, surge planning, Premier-wide tracking, and communications that occurred over the past several weeks but may not have known these were handled in a very organized and nimble way.

Our System ICS also worked 24/7 in an almost entirely virtual way through Microsoft Teams to ensure social distancing and comply with the state's Stay at Home Order. This method was extraordinarily effective to allow for complex dialogue and planning. We were able to connect the hospitals, Premier Physician Network, and Fidelity incident command leaders to the system incident command through a virtual chat that allowed for very quick communication to report issues, clarify information, and stay informed of our progress.

The end result of our System ICS was tremendous. We were able to accomplish the following:

- System-wide communication and coordination
- Modify the operations of more than 140 processes and procedures
- Close and reschedule all state-mandated elective surgeries and procedures
- Increase the use of telehealth and e-visits, as well as stand up new capabilities
- First to implement a testing collection center in our region in partnership with the University of Dayton, as well the first to implement antibody testing
- Innovate with business partners to provide much needed PPE, other necessary supplies, and coordinate numerous donations
- First in the nation to provide convalescent plasma treatment using the Mayo Clinic's protocols.

The COVID-19 pandemic has certainly been an unprecedented time and Premier Health has been able to weather the situation in a calm, organized, and highly innovative manner thanks to our strong teams, partnerships, and community coordination. Thank you to all who helped in leading the way in delivering outstanding care to our community.



# COVID-19 Clinical Documentation Integrity Updates

By Andrew B. Maigur, MD





This article addresses two aspects of caring for hospitalized patients with the novel Coronavirus.

Firstly, determining the appropriate level of care Inpatient

versus Outpatient with Observation Services (OBS).

- In regard to Medicare FFS (Fee For Service) patients, CMS (Centers for Medicare & Medicaid Services) reminded us the 2-MN (Midnight) Rule still applies. The 2-MN Rule is a reasonable expectation that the patient requires medically necessary care spanning two or more midnights at the time of admission.
- CMS did clarify that the following DO NOT equate to medical necessity for an inpatient level of care:
  - A sole need for isolation
  - Unavailability of post-acute care facilities at the time of discharge from the hospital
- Commercial and Medicare Advantage payers continue to use MCG (Milliman Care Guidelines) to determine the appropriate level of care. Think inpatient in the following scenarios:
  - Invasive/Non-invasive mechanical ventilation
  - Shock with need for vasopressors
  - High flow nasal O2
  - Persistent/recurrent hypoxia greater than 24 hours (hence the importance of weaning O2 to document hypoxia when clinically appropriate)
  - Sepsis with acute organ dysfunction
  - Persistent Encephalopathy greater than 24 hours

Why clinical documentation integrity? As medical professionals, we owe our patients an accurate medical record which translates into accurate coding that provides much of our public health data.

- Document a confirmed COVID-19 infection supported by a positive test, which codes to U07.1
- If the PCR test is negative, we know it does not always rule out the infection given its 30 percent false negative rates:
  - If the clinician has a high index of suspicion for the infection despite a negative PCR test, you can document "COVID-19 per clinical judgment"
  - When clinically appropriate, document COVID-19 Ruled Out
- Rule out, Possible, Probable and Suspected COVID-19 do not have a specific ICD-10-CM Code and result in symptom codes along with exposure codes
- Link the etiology COVID-19 to the clinical manifestation (e.g.: Pneumonia, Sepsis, Septic Shock etc. due to COVID-19)
- Consistent accurate documentation across all specialties in the medical record helps prevent payer Clinical Validation Denials
- Evolve, Resolve (during the hospitalization) and Recap Diagnosis (in the Discharge Summary)

Thank you for the excellent care you provide our patients. For details on this topic, please refer to the Coronavirus resource webpage-Physician Resources.





### Navigating COVID-19 as a System

By Roberto Colon, MD, system vice president of quality and safety, Premier Health

When a cluster of atypical pneumonia cases was first reported in the Wuhan Province of China in late December 2019, few of us considered the possibility that cases would turn up in the United States. Now, less than five months later, we have seen more than one million cases in our country. In Ohio alone, we have seen more than 31,000 patients with COVID-19. Sadly, more than 100,000 patients have already died in the United States. And while we were fortunate that quick actions helped stave off a potentially devastating surge in cases, this disease has left a lasting impact.

Each one of us has been affected by this pandemic - some, more directly than others. We have known colleagues who have endured the battle against this disease and have helped hundreds of patients through this infection. To date, Premier Health hospitals have discharged more than 100 admitted patients with COVID-19 and have cared for many more who have experienced milder forms of the illness. Our care teams have also directly helped several nursing facilities in our area manage outbreaks of COVID-19 within their walls.

While the journey has not been an easy one, our medical staffs came together as a system to combat this crisis. Early on, our physician teams, led by Steven Burdette, MD, and various critical care physicians, rapidly developed comprehensive treatment algorithms shared across all our facilities. In While the journey has not been an easy one, our medical staffs came together as a system to combat this crisis.

conjunction with our partners at Wright-Patterson Air Force Base and Community Blood Center, we were able to stand up a convalescent plasma treatment program that has successfully treated more than 30 patients across our hospitals. This program has been so successful that it was joined by other community hospitals in our area and has even supported care of patients as far away as Wisconsin. Our patients have benefited from additional novel therapies such as tocilizumab, eculizumab and Remdesivir. As more evidence evolves, we continue to adjust our treatment strategies.

Never had we imagined that we would have to worry about sufficient resources to care

for patients. However, during this outbreak, we have continuously managed looming shortfalls in supply lines for PPE. Flexibility by our sourcing department and innovation from our new community partners have helped us navigate these challenges while ensuring that we continue to maintain a safe environment for our health care providers to care for patients.

As we now emerge from our restrictions, we have started new programs to help ensure safety of patients and health care personnel. On May 11, universal testing of labor and delivery patients began across Premier Health facilities as did widespread screening of elective surgical procedures. We have since added universal testing to all patients in our facilities as well.

We cannot predict what lies ahead, as we emerge from the shadow of the COVID-19 pandemic. Whatever comes, just as we did with this pandemic, we will face it together. Words cannot express how proud we are of the work you do every single day, and how grateful I am to have you all as colleagues.

# Keeping Athletes Healthy at His Alma Mater



#### Jeffrey A. James, DO What is your clinical specialty?

Sports Medicine. I did a residency in family medicine and a fellowship in sports medicine.

#### Where did you go to school?

I did my undergraduate studies at the University of Dayton and attended Ohio University's College of Osteopathic Medicine for medical school.

#### What brought you to Premier Health?

I was already familiar with Premier Health from my time in Dayton and knew it was a great place to work, but it was also a great opportunity. I had the opportunity to do fulltime sports medicine and orthopedic care and help take on roles as medical director at my alma mater, the University of Dayton. I also work with Centerville High School.

#### Why did you choose medicine as a career?

A general interest in science then developed into a fascination for how the body worked. As I got further into studies and training, I got more involved in family medicine and sports medicine and loved being able to help a variety of patients. I can treat and help patients of all ages and activity levels.

### Who are the people who influenced and/or mentored you?

I have had many mentors throughout my training, but Dr. Sean Convery was a great mentor and promoter for me as I started my career here at Premier Health.

### What is it like to work with student athletes in our community?

It is a great honor and service to be able to work with the student athletes in our community. They put so much work and effort into what they do, and it is fun to watch them participate. I am proud for the student athletes who do well and feel bad for those who are unable to compete due to their injuries.

### What is one thing most people don't know about you?

I used to participate in amateur boxing throughout high school and early college.

Where is your hometown? Cincinnati, Ohio

What, if any, sports team(s) do you cheer for? Dayton Flyers, Cincinnati Reds and Bengals

What is your favorite song in your playlist? Rubberband Man by the Spinners

What is your favorite food? Salmon

What is your favorite hobby? Sports and running

What is your favorite animal, and why? Orca - intelligent apex predator of the ocean

### Where is your favorite vacation spot, and why?

Maui, Hawaii - the views are breathtaking. The weather is amazing. It was also a memorable vacation because we were there watching UD play to a second-place finish in the Maui Invitational.

# Describe something (a thing, person, place, experience, etc.) for which you are especially thankful:

I am thankful for the opportunity to take care of a great community and be able to be the medical director and team physician for my alma mater at the University of Dayton. I am also thankful to my wife and family who have supported me throughout all my training.

#### Pick a side

**iPhone or Android** iPhone

Early bird or night owl Early bird

Beach bum or mountain hiker? Beach bum

Dress shoes or tennis shoes? Tennis

Paperback or e-reader? Paperback

Coffee or tea? Coffee!

**Cooking or baking?** Cooking

Sweet or salty? Salty





## Remembering Raj

By Tarek Sabagh, MD, oncologist



As a practicing nephrologist at Renal Physicians, Inc., Raj Dhingra, MD, MS, FASN, served as president of the group for several years. He was also medical director of both Buckeye Dialysis and Five Rivers Dialysis. In addition, he was a member of the American Society of Nephrology and a Clinical Assistant Professor of Medicine at Wright State University.

Dr. Dhingra pursued medicine at the University of Illinois-Chicago College of Medicine and was inducted into the Alpha Omega Alpha Medical Honor Society. He later completed his residency in internal medicine and fellowship in nephrology at the University of Michigan-Ann Arbor. He also earned his master's degree in biostatistics and clinical research design at the University of Michigan-Ann Arbor. In 1997, Raj met his wife, Freesia, in Michigan after ordering the same ice cream flavor (mint chocolate chip). They moved to Ohio in 2001 and raised their two beautiful children, Rhea and Rohan.

Raj was first and foremost known for his devotion to his family. He carried immense pride for his children, and the love he had for his wife was unmatched. His coworkers admired him for his quiet diligence and for the long hours he dedicated to best serving his patients. We all had a friend in Raj and he'll be dearly missed. On a personal level, I lost a very close friend unexpectedly a few months back. We called him Tap. We had planned a hiking trip to Iceland for almost a year. We planned everything, we trained together, but when the time came, he was not around to join us. I felt hopeless and no longer had an interest in making the trip. A friend gave me advice. If Tap was alive he would be with you, so do it for him, go on and enjoy the journey, which I did. Today, I'm sharing the same advice with you. Raj approached life with kindness, grace, and humility. He was a bright light to many, always finding reasons to smile and share his joy with others. Keep the smile on your face, keep the camaraderie, and keep taking care of our patients. Do it for Raj. Do it for yourselves, your patients, and your families.

I also remind you to pay attention to your well-being. We have been under tremendous stress due to the pandemic. Talk to someone, take a walk, enjoy a short run, meditate, have a drink, and listen to music or just do nothing but pause and ponder. Be hopeful. Hope is resilience.

Raj will be deeply missed by the countless people he has touched. We hope that everyone can appreciate the good he brought to this world and carry on his memory by working to improve the lives of others.

## **Provider Praise**

Premier Health patients submit thousands of comments each year acknowledging physicians across our health system for providing excellent care. Here is a random sampling of appreciation received in recent months:

**Dr. McHenry** and his staff are amazing. Rodney at reception is always so great to work with. Thank you!

**Dr. James** was very professional and made sure I understood the procedure and answered any questions I had. He also considered my history of hypermobility and after testing me for it, he recommended further assessment so I can prevent (or at least understand) potential issues. My experience with **Dr. Emmerling** was exceptional. Her demeanor was pleasant, and she was very attentive to my concerns. She spent a more than adequate amount of time answering my questions and ensured I was fully satisfied with the answer.

**Dr. Stone** is always very open to discussing any questions or concerns I have. I feel very comfortable with him. He goes the extra mile to make certain I feel confident about my health before I leave the office.

**Dr. Hendricks** is so intelligent and keeps herself up-to-date in her field. She also is very compassionate and a great communicator. I have always been treated with such respect and kindness by everyone in her office.

**Dr. Ordway** is a great doctor. He listens to your needs and gets back to you in a timely manner. My whole family sees him.

My first visit with **Dr. Wical** went very well. I really like him and everyone on his team.

**Dr. Reitz** has been my primary care doctor for more than 15 years. She and her staff are amazing, and I drive 45 minutes out of the way to get to her in her new location and will continue to do so.

# Helping Our Community Through COVID-19



#### **Atrium Medical Center**

Mark Gebhart, MD, of Atrium's Level III Emergency Trauma Center, has been commissioned into the Army Reserves as a lieutenant colonel. Dr. Gebhart said he hopes his 21 years of medical experience helps him care for wounded soldiers in the field, and that some of what he learns in the military will make him a more effective doctor at Atrium. Dr. Gebhart also serves as medical director for the Franklin Fire Department and Joint Emergency Medical Services district.



Andre Harris, MD, Atrium's chief medical

officer, was among the honorees of Parity Inc.'s 27th annual Top Ten African American Males. Harris and nine others were honored

for their good works in the community. Harris has volunteered his medical services to at-risk teenage boys in Dayton Public Schools, has worked with aspiring African-American high school students through the Horizons in Medicine program, and has trained dozens of medical and nurse practitioner students. He is also a leader with Gem City MDP Inc., an organization for African-American physicians, dentists and pharmacists. Following the 2019 Memorial Day tornadoes, Harris opened his Dayton practice to serve as a hub for those in need of supplies and donated more than \$5,000 to those affected. Intubation boxes in use at Atrium are the creation of Tina Kummerle, MD, of Atrium's Level III Emergency Trauma Center. The boxes limit exposure to viral particles when intubating a patient. After modifying the design of a box created by a doctor in Taiwan, Dr. Kummerle altered her prototype with feedback from her ED peers. "The first prototype we brought to the hospital and the staff used it to train on and to run drills. We looked at how we could make it better. We changed some of the dimensions, added a sliding door to the side so the respiratory therapist or the nurse could hand the doctor tools and then close it, again minimizing exposure," said Dr. Kummerle. Local businesses donated the materials and manufactured the boxes at no cost.



Atrium's Behavioral Health Unit, led by medical director Jonathan Lazzara, MD, is providing virtual support groups to employees and providers at Atrium.

These discussions are designed to offer a space for all to relieve burdens they may be feeling during the coronavirus pandemic. Atrium's Behavioral Health staff has shared several tools to manage stress, compassion fatigue, burnout and more during this time. Dr. Lazzara is also providing a weekly *Mental Health note*.

Skydivers from START Skydiving in Middletown delivered in spectacular fashion a donation of PPE to Atrium. START Skydiving used a 3-D printer to make face shields for Atrium employees. In addition, Middletown





Mayor Nicole Condrey used a portion of the salary she received as mayor to purchase 400 face shields that were also donated to Atrium. Condrey joined the owner of START Skydiving and two other skydivers for a jump at Atrium to announce the donation.

Atrium leaders have been involved in public service announcements reassuring people that the hospital is open and safe for everyone in need of care. These efforts, led by the Cincinnati Health Collaborative, included all major health systems in the Cincinnati region.

#### Miami Valley Hospital Campuses

Throughout the COVID-19 pandemic, we continue to celebrate our health care heroes, while sending special messages to the community.

On March 5, representatives of the Maxon Foundation, U.S. Bank, and N.A., Trustee



toured Miami Valley Hospital with members of the management team and the Miami Valley Hospital Foundation. In 2018, the Maxon Foundation made a grant to the MVH Foundation to acquire a 64-slice CT scanner for the trauma center. The Maxon Foundation is associated with Glen W. Maxon, Jr., whose family had a long affiliation with the hospital from the 1940s to 1980s.



A trauma team from Miami Valley Hospital traveled to Nigeria earlier this year to mentor medical professionals, providing trauma education. Peter Ekeh, MD, trauma surgeon and medical director of Miami Valley Hospital's trauma program and Amanda Pulfer, trauma program coordinator, traveled to Abuja, Nigeria and the National Hospital to lead training for "Advanced Trauma Life Support (ATLS)," a course developed by the American College of Surgeons. While in Nigeria, Dr. Ekeh and Pulfer directed an ATLS instructor course and two ATLS courses while mentoring National Hospital professionals. ATLS instructors who participated were from England, United States, Saudi Arabia, and Nigeria.

Good Samaritan Foundation-Dayton has been hard at work raising funds for the Trail of the Good Samaritan at the Miami Valley Hospital North campus. Funds raised to date for the first garden, the Aull Garden, are \$67,371. The anticipated opening of the Aull Garden is late spring.

Throughout April, the community showed support and generosity for Premier Health patients and clinical staff battling the COVID-19 pandemic. From food to potted plants to hand cream kits, contributions of every conceivable type have been donated to the system through its four philanthropic foundations. Three notable contributions were also received through the Premier Foundations, including an anonymous gift of \$180,000 to go toward pre-screening analysis equipment for the COVID-19 test; 5,000 pairs of Crocs shoes donated by Crocs, Inc.; and a \$100,000 gift in support of local health care workers from the Kolodesh Family Foundation.

Continued on back

### Helping Our Community Through COVID-19 (continued)

The Good Samaritan Foundation raised \$16,650 for COVID-19 response from individual donors in April. These contributions came at a crucial time as hospitals maximized their resources and consolidated services in preparation for the pandemic. The foundations continue to encourage donors to support patients and our health care heroes on the frontlines of this struggle. To learn more about how you can help, a special email has been established – **HelpingHands@ PremierHealth.com** – for those who wish to provide support.

Miami Valley Hospital South Wound Care Center recently was named the national President's Circle Award honoree. The center was awarded this prestigious honor by Healogics, the nation's largest provider of advanced wound care services. The Wound Care Center achieved outstanding clinical outcomes for twelve consecutive months, including patient satisfaction higher than 92 percent, and a minimum wound healing rate of at least 92 percent within 28 median days to heal.

With the addition of the new Spine and Joint Center at Miami Valley Hospital South, many energy efficient materials and processes were a part of the construction. Through efficient and sustainable design and construction practices, the addition is expected to save about 1.3 million kilowatts of electricity annually, resulting in an estimated \$500,000 in avoided utility costs over the next 10 years. In recognition of the best-in-class facility at MVHS, Dayton Power and Light offered the hospital an energy efficiency rebate totaling more than \$140,000. Since 2012, the facility has received nearly \$350,000 in rebates associated with numerous energy efficiency upgrades.



#### **Upper Valley Medical Center**

A clap-out ceremony was held in the Upper Valley Medical Center Inpatient Rehabilitation department on April 16 to celebrate a UVMC staffer who survived a life-threatening battle with COVID-19. **Amy De Vos**, a respiratory therapist, made a miraculous improvement after weeks on a ventilator in the ICU. Amy was the first patient in the nation to participate in the Soliris clinical trial. Soliris was prescribed by **Thomas Pitts, MD**, after he was contacted by one of Amy's physicians, **Eleina Mikhaylov, MD**. Both are remote neurologists with Premier Health's NeurOne teleneurology program.

Police, fire, EMS, sheriff, and State Highway Patrol representatives from Miami County visited the UVMC campus the evening of April 23 to express appreciation for hospital staffs. First responder vehicles lined the driveways in front of the hospital with lights flashing and sirens sounding in a show of support for the hospital teams.



Ronal Manis, MD, medical director of infection prevention at UVMC, gave an interesting and insightful interview on the COVID-19 pandemic on the

Troy Chamber of Commerce "Troy Cares" Facebook Live program on April 22. Dr. Manis is a practicing physician who specializes in internal medicine and infectious diseases.

Since the COVID-19 pandemic began, UVMC has received overwhelming support from businesses, organizations, and individuals in the Miami County community. Donations of much-needed PPE, hand-sewn facemasks, meals and snacks, and signs and cards of appreciation have all helped to bolster the spirits of our hardworking health care heroes.

### Our Care Lives Here

Premier Health launched the "Our Care Lives Here" campaign last year. The initiative highlights our mission-driven care, and our commitment to deliver that care both within our hospital walls and in every corner of the communities we serve.

Our care begins with each of you and your teams – the thousands of employees, physicians, and volunteers who are Premier Health – and it's worth taking a moment to recognize and honor that fact. We want to continue to hear from you about how "our care lives here." Email your ideas to **OurCareLivesHere@ PremierHealth.com.** 

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