

THIS WEEK

National Doctors' Day

A note of appreciation from the Pastoral Care Department.

*The Lord has blessed a doctor's hands
To help his patients mend.
He guides them through each hectic day,
For he is Heaven's friend.*

*The Lord has blessed a doctor's mind,
Enabling him to learn,
To diagnose and treat and care
And symptoms to discern.*

*The Lord has blessed a doctor's eyes
To help him see each need.
To keep him on the proper path
And help him live his creed.*

*The Lord has blessed a doctor's heart
And keeps him near His own.
For those who serve their fellow man
Will never walk alone.*

*By Larry Howland
Taken from www.Christianbook.com*

March 30th | Doctor's Day



Touching lives
Showing compassion
Providing quality healthcare...daily!
We appreciate you!



Above poster by: NAMSS.

RN Preceptors

Sharing Their Knowledge & Experience



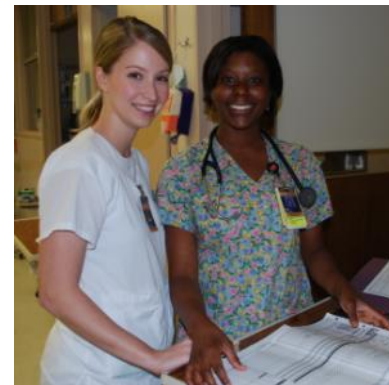
Renee Mancini RN, Preceptor for Shelly May, LSU student nurse

Renee Mancini, RN reports a sense of satisfaction when a nursing student enthusiastically makes the most of the preceptorship program, as her student Shelly May did. Renee said, "Shelly was eager to learn and very pleasant to everyone she met, especially the patients. While here, she learned the importance of time management and head-to-toe patient assessments. She became proficient in working with patients from admission to discharge in the Emergency Department."

For the past few years, the LSUHSC School of Nursing Baccalaureate Program has included a preceptor experience, where students participate in clinical nursing experiences guided by an experienced RN. An Interim LSU Public Hospital staff nurse, with a bachelor's degree and the appropriate experience, as defined by the Louisiana State Board of Nursing, acts as clinical teacher, guide, and role model to the student in the clinical setting.

Nurse preceptors and students alike profess this program to be a success. One student recently commented, "I have observed my preceptor, Heidi Ward, the past five weeks. She has an in-born sense to lead and has done an incredible job teaching me on the unit. She has been a role model and has shown me what a leader is made of. She is always helpful, cheerful, and willing to help anyone on the unit. Her bubbly personality and outgoing ways along with her vast knowledge in critical care makes her easily approachable. Patients and staff enjoy her company and respect her too."

"Having my senior preceptorship at the Interim LSU Public Hospital was an exciting and invaluable experience! The staff are extremely receptive to students and assist in maximizing our learning opportunity. My experience in the emergency department allowed me to sharpen my clinical nursing skills, especially my assessment and technical skills. Thanks for the opportunity!"
Shelly May, LSU student nurse



Sarah Katherine Mundy, Student Nurse with Heidi Ward, RN

March is Colorectal Cancer Awareness Month

What You Should Know About Colon Cancer

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THIS WEEK
thanks
Peggy Vicknair
for her
assistance!



**Daniel Raines, MD Acting Section Chief,
LSU Gastroenterology**

Early screening can prevent many cases of colorectal cancer as most of these cancers evolve from benign polyps. A person that is diagnosed early with colon cancer, if treated, has about a 90% survival rate. A late diagnosis brings the 5 year survival rate down to only 10%!

Unfortunately, few people are properly screened for colon cancer. Only 20 to 30% of Americans who are eligible for colon cancer screening are screened for this deadly disease in spite of the fact that the screening tests, sigmoidoscopy and colonoscopy, are relatively simple, painless and available tests.

The Statistics

- Colon cancer is the 2nd leading cause of cancer death in the United States
- 5% of the U.S. population will get colon cancer over their lifetime
- Over 50,000 Americans die from colon cancer every year
- 90% of cases occur after age 50
- Only 20% of adults over age 50 get screened

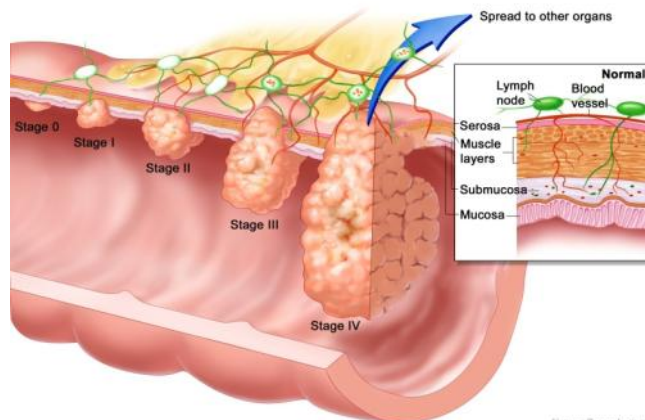
Depending on the patient's symptoms and individual risk factors, the gastroenterologist will determine if a sigmoidoscopy or colonoscopy should be performed. There are important differences between the two tests. A sigmoidoscopy is similar to a colonoscopy in that it involves insertion of a lighted tube into the rectum and through the last third of the colon. Patients who have polyps in the end of their colon are referred for complete colonoscopy. It's important to understand that a sigmoidoscopy catches only 50% of large polyps and cancers because only 1/3 of the colon is evaluated. A colonoscopy, on the other hand, uses the same type of lighted tube that is passed through the entire colon. Any polyps found during the exam are removed. Colonoscopy identifies over 95% of colon polyps and cancers making this test the "gold standard" for colon cancer screening. Both tests require bowel preparation and sedation. The patient sleeps through the tests. A colonoscopy should only be performed by a physician with dedicated training in endoscopy.

There are risk factors linked to colon cancer. Individuals with a higher risk of developing colon cancer are those who are age 50 or over; who tend to eat a high-fat, low-fiber diet; who have a personal history of adenomatous polyps (cancerous polyps) or colon cancer; who have a family history of colon cancer in first degree relative (mother, father or sibling) and who have a history of inflammatory bowel disease (Ulcerative colitis & Crohn's disease). Without a doubt, people who have any of the above risk factors should be screened for the disease. People should not wait until the typical symptoms appear such as; Visible blood with a bowel movement; Weight loss; Fatigue; Low blood count (anemia) and abdominal cramping. Unfortunately, these symptoms typically do not start until the cancer is advanced.

Misperceptions about colon cancer often deter individuals from seeking preventative screenings. Common false beliefs about colon cancer are: that colon cancer strikes only older men, when in reality, it strikes both men and women, usually at the age of 50 or over; that screening is painful and uncomfortable, when in reality, the bowel preparation, although somewhat annoying, can be done at home and the actual test is performed under light sedation making it painless; that the tests are expensive, when in reality, many insurance companies cover the cost, and here at Interim LSU Public Hospital, patients may qualify for free care.

Facts

- Colon cancer is common
- Death from colon cancer can be largely prevented by screening
- Most patients eligible for screening do not get tested
- Screening for colon cancer is relatively simple and easily accessible
- It is important that patients at risk for colon cancer undergo screening by at least one method



**Progression of
Colon Polyps to
Colon Cancer**

Make plans to join us at Interim LSU Public Hospital on May 12, 2009 for a *bigger than life* colon health event. More information will follow in future issues of THIS WEEK.

Colleen Lemoine, APRN, MN, AOCN, Clinical Nurse Specialist for Oncology

Gastroenterology Department, Interim LSU Public Hospital

Left to Right:

Samual Rivera, MD,
LSU Gastroenterology Fellow

John J. Hutchings, MD,
Tulane Gastroenterology Fellow

Daniel Raines, MD
Acting Section Chief,
LSU Gastroenterology

William A. Ferrante, MD,
Program Director,
LSU Gastroenterology

James Morris MD,
LSU Gastroenterology Fellow

Patrick Saitta, MD,
LSU Gastroenterology Fellow



Below: Drs. Raines and Rivera explain the colonoscopy procedure to the patient.



Above and center: Dr. Samuel Rivera, LSU Gastroenterology Fellow, performs the colonoscopy as Dr. Daniel Raines supervises.



Above and right: Dr. John J. Hutchings, Tulane Gastroenterology Fellow begins the colonoscopy procedure assisted by Felicia Macon, Medical Specialist, to his right and Richard Macaluso, RN.



Far right: Standing, Sharon Weiser, RN Supervisor, Gastroenterology Department, discuss the day's schedule with Mary Lawson, Clerk.



In addition to performing sigmoidoscopies and colonoscopies, the Gastroenterology Department performs:

- Esophagogastroduodenoscopy (EGD), a test that visualizes the upper part of the gastrointestinal tract.
- Endoscopic Retrograde Cholangiopancreatography (ERCP) a test used to visualize the gallbladder, bile ducts, and pancreatic ducts.
- Bronchoscope, a procedure to visualize the inside of the airways
- Transesophageal echocardiogram (TEE), a diagnostic test for heart disease
- Paracentesis, a procedure to remove fluid that has accumulated in the abdominal cavity (peritoneal fluid)
- Other procedures include: IV Therapy, Blood transfusions and Bone Marrow Biopsies.

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Working Together To Deliver Superior Health Care



Personal Safety Identity Theft

Identity Theft via Computers and Internet

Part II



Computers pose significant vulnerabilities and risks to individual users. In our effort to become more efficient with our time, we have come to regard the computer as an effective tool to quickly research personal or professional interests, shop for retail products, communicate with friends or colleagues and to enjoy leisure time. As a result, the criminal element has also discovered that computers hold lots of personal data just ripe for the taking.


There are several methods employed to steal data via computers and the methods and schemes are continually evolving. There is no one safe method for computer use and individuals should employ a variety of safeguards to protect themselves and their computers from misuse. In most instances, you will not know that your information has been stolen until you receive notifications from collection agencies, see strange charges on credit card statements or are contacted regarding payment defaults.

There are various names for specific ways information is stolen from computers. However, most stolen data is obtained in one of two ways: Either the user is "tricked" into providing personal data over the internet or someone secretly places programs on your computer that capture information or keystrokes that they can retrieve and retain for misuse at a later date.


1. Install a **firewall** on your home computer to prevent hackers from obtaining personal identifying and financial data from your hard drive. This is especially important if you connect to the Internet by DSL or cable modem.
2. Install and **update virus protection software** to prevent a worm or virus from causing your computer to send out files or other stored information.
3. **Password-protect** files that contain sensitive personal data, such as financial account information. Create passwords that combine 6-8 numbers and letters, upper and lower case. In addition, encrypt sensitive files.
4. When shopping online, do business with companies that provide transaction security protection, and that have strong privacy and security policies. For more online shopping tips, read PRC Fact Sheet 23, www.privacyrights.org/fs/fs23-shopping.htm.
5. Before disposing of your computer, remove data by using a strong "wipe" utility program. Do not rely on the "delete" function to remove files containing sensitive information.
6. **Never respond to "phishing" email messages.** These appear to be from your bank, eBay, or PayPal. They instruct you to visit their web site, which looks just like the real thing. There, you are told to confirm your account information, provide your SSN, date of birth and other personal information. Legitimate financial companies never email their customers with such requests. These messages are the work of fraudsters attempting to obtain personal information in order to commit identity theft. Visit www.antiphishing.org.
7. Be aware that file-sharing and **file-swapping programs expose your computer** to illegitimate access by hackers and fraudsters. If you use such programs, make sure you comply with the law and know what you are doing. Install and update strong firewall and virus protection. Many file-sharing programs are downloaded by youngsters without the knowledge of their parents. There are software programs available that identify file sharing software and locate shared files on home computers. For more information on safe surfing for families, visit www.getnetwise.org.

Helping Others & Helping Our Community

THIS WEEK
thanks
Laurie L. Smith
for her
assistance!

 (888) 899-BALD

Ecoee Rooney, MSN, RN, Director, Education/ Staff Development, shaves her head to raise money for the St. Baldrick's Foundation, an organization that supports cancer research for children. If you are interested in donating to this cause, please contact Ecoee at: jroone@lsuhsc.edu or call: 903-0634



Interim LSU Public
Hospital begins this
year's United Way
Campaign! Stay tuned for more details
in the coming issues of THIS WEEK.



Our leaders again this year are Theodore (Teddy) Harkness and Romalis Theard. Please contact them and offer your support in this fund raising event.