

Veterans'

THE WELLNESS MAGAZINE
FOR OHIO VETERANS

Health

SPRING • 2000

Our Priority:
Your Safety

What To Expect
From Joint
Replacement
Surgery

A Special
Kind Of Care

Extended health
services that fill a
unique need

VA Healthcare
System of Ohio



Keeping You Well

Your safety and well-being are important to us. On the next page, find out how the VA Healthcare System of Ohio and the Veterans Health Administration are responding to a pressing national need for healthcare systems to reduce if not eliminate medical errors. We are very fortunate to have one of four VA Centers for Safety located within our Network. You will also learn about the role you can play in patient safety.

As warm weather approaches, we all look forward to getting outdoors and increasing our physical activity. However, many people's physical activity is limited because of joint pain, stiffness or swelling. Turn to page 4 for information about a surgical treatment for osteoarthritis, a chronic and irreversible condition.

As the veteran population ages, healthcare needs change. See page 6 for information about extended care services available in the VA Healthcare System of Ohio.

As you enjoy the spring, remember to keep watch over your own safety and well-being, particularly when you travel.

Sincerely,



—Laura Miller, Network Director



Reader Mail

I wish I had received *Veterans' Health* years ago and had known the signs of a stroke. I had a stroke, but with the help of the VA staff I am getting better. They also discovered a small lump in my breast that was positive. With medication and therapy I am doing great. I can enjoy my grandchildren and great granddaughter.

The treatment I am receiving at Wade Park surpasses any treatment I have received by a private doctor.

Thanks to your great team, I am a real lucky lady.

Lydia Smith

Expanding Our Services

Since 1996, the VA Healthcare System of Ohio has been bringing care closer to veterans' homes. Besides the many community-based outpatient clinics (CBOC) located throughout the Network, the VA Healthcare System of Ohio has also been serving veterans' basic healthcare needs through field service centers. About one-third the size of a CBOC, these VHA offices provide preventive care and mental health services. "At the current time, we have six field service centers," says Joseph Kohut, Network Primary Care Line Business Manager, "and we plan to open more this year. The centers are located away from the large medical centers, within 30 miles of a veteran's home. It is hoped that these facilities will encourage veterans to seek out VA for their healthcare needs."

If a particular field service center attracts a large number of veterans, expansion to a CBOC may be the next step. For the location of the field service center nearest you, call your VA medical center (see the back page for phone numbers) or Tele-Nurse toll free at 1-888-VET-OHIO. **VH**



Omitted from last issue: Smoking cessation coordinator, Cincinnati campus, Linda Bodie, Psy.D., 513-475-6367

Veterans' Health is published quarterly as a patient education service by VA Healthcare System of Ohio, one of the 22 integrated networks of the Department of Veterans Affairs. The publication is intended to provide information to help you stay well, manage your healthcare and learn about the many health services available through the VA. This publication is not intended as a substitute for professional medical advice, which should be obtained from your doctor. All articles may be reproduced for educational purposes.

The Mission of the VA Healthcare System of Ohio is:

- To provide veterans a continuum of care that is accessible, value-added and cost-effective, and of the highest quality, within an environment of outstanding education and research.
- To promote a culture that supports and develops a caring, compassionate, competent and quality-oriented workforce.

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Focus On Patient Safety

The Veterans Health Administration's National Center for Patient Safety as well as its four Patient Safety Centers of Inquiry have been working with experts in other high-risk fields, such as aviation, to create new systems to ensure patient safety.

Filling the gaps

Marta Render, M.D., Director of the Cincinnati-based Patient Safety Center of Inquiry, together with David Woods, Ph.D., Ohio State University, and Richard Cook, M.D., University of Chicago, has been looking at ways to bridge "gaps" in health-care. "A gap may occur when a patient is transferred from one unit to another or when a physician changes," says Dr. Render. The risk for medical error increases during a gap.

One way Dr. Render and her team are gaining insight is by examining how doctors, nurses and pharmacists—the staff who work directly with patients—already overcome gaps in care. "The more we learn about how a nurse looks at a drug, for example, and knows that it's the wrong one for a certain patient, the better we can apply that knowledge to create general safety systems," says Dr. Render.

VA already a safety leader

The VA already uses several state-of-the-art safety tools, such as computerized medical records and order entry for



Computerized order entry for medications guards against harmful drug interactions.

medications. Computerized medical records promote continuity of treatment by ensuring that all medical personnel are completely informed about a patient's condition, including

medical history, screening data, drug allergies and so on. Computerized order entry for medications prevents problems caused by illegible handwriting as well as harmful drug interactions. What's more, bar coding on prescriptions is being put in place to ensure that the right medicine gets to the right patient. **VA**

Your Role In Patient Safety

In many ways, patient safety begins with you. Here is how you can help make sure you receive the best care possible.

- Inform healthcare providers of all drugs you're taking, prescription and over-the-counter. Even if you've given your healthcare provider this information in the past, tell him or her again!
- Remind your healthcare provider of any drug allergies or side effects you've experienced before accepting a new prescription.

Before accepting a new prescription from your healthcare provider, ask:

- What is the drug for and what is it supposed to do?
- How and when am I supposed to take it and for how long?
- What are the likely side effects and what should I do if they occur?

- Is it safe to take with other drugs or dietary supplements?

Before receiving a new prescription from your pharmacist, ask:

- Is this the drug my doctor ordered?



What To Expect From Joint Replacement Surgery

Day after day, year after year of walking, running, bending and squatting can wear down cartilage, the tissue that cushions joint bones. Over time, this process leads to osteoarthritis. “Unfortunately, osteoarthritis is an irreversible condition,” says Anil Krishnamurthy, M.D., Chief Orthopedic Surgeon, Dayton VA Medical Center.

The hip and knee are vulnerable to osteoarthritis because they play a part in most everything we do. Although nonsteroidal anti-inflammatory drugs, such as aspirin, exercise and heat treatments can help ease the pain, stiffness and swelling of osteoarthritis, there may come a time when these treatments fail to bring relief.

Who needs surgery?

“A knee or hip replacement, also called arthroplasty, may become necessary when a patient is in constant pain that cannot be

relieved by medication,” says Dr. Krishnamurthy. Some signs that it may be time to consider arthroplasty include:

- night pain
- constant fatigue
- decreasing range of motion
- pain while walking short distances
- limited social activities

Because osteoarthritis is a wear-and-tear disease, most people who need arthroplasty are age 65 or older. But younger people who have sports-related injuries or other accidents that damage joints may also benefit from surgery.

What happens before surgery?

If you need arthroplasty, you’ll be asked to get a pre-op work-up. The purpose of the work-up is to prevent or minimize post-operative and/or other medical complications. “All patients have an electrocardiogram and various blood tests,” says Dr. Krishnamurthy. “They are also cleared for surgery by an anesthesiologist.”

What happens during surgery?

Both knee and hip arthroplasty are usually done under spinal or epidural anesthesia.

“During knee replacement surgery, we remove the worn cartilage and bone and resurface it with metal and plastic. It’s like retreading a worn tire,” says Dr. Krishnamurthy. “In hip replacement surgery, we replace the hip joint with a metal ball and resurface the socket with metal and plastic.”

When does rehabilitation begin?

Soon after surgery, a physical therapist will help you perform exercises that strengthen the joint. Your knee will be placed in a machine that will bend the knee for you. A patient-controlled pump will allow you to administer pain medication so that you are comfortable.

“You will need crutches or a walker in order to get around at first,” says Dr. Krishnamurthy.

Rehabilitation will continue after your short hospital stay with physical therapy sessions three or four times a week for about six weeks.

Three weeks after surgery, your doctor will remove your sutures and monitor your progress. You will need follow-up visits six months after surgery and once a year thereafter. “These annual checkups are very important,” says Dr. Krishnamurthy. “X-rays can alert us to any problems, such as loosening of the new joint, when they are still in an early stage and can be treated easily.”

Are there any risks?

Infection is the main risk of surgery, but antibiotics taken before and after surgery greatly minimize that risk. Patients also run the risk of a blood clot developing in the calf. The clot

may travel to the lungs and become a pulmonary embolism. To prevent such a clot, patients inject blood thinners daily for three weeks after surgery. In hip replacement, there is a risk of dislocation (slippage of the joint out of the socket). But patients learn the do’s and don’ts that help them avoid dislocation.

People who undergo arthroplasty usually drive again within six weeks, but full recovery takes two to three months. At that point,

the advantages will be clear. “The surgery will take away your pain, let you walk normally without a limp and without any aids, like crutches or a cane, and help you get back to your usual activities,” says Dr. Krishnamurthy.

If you have any questions about arthroplasty, talk to your VHA healthcare provider. **VH**



The orthopedic team from left to right: Shirley Cuthrell, P.A.-C.; David Marshal, P.A.-C.; Anil Krishnamurthy, M.D.; John Hinesmin, ortho tech; Susan Martin, R.N.; Brent Jividen, P.T.

About four years ago, Spring Valley, Ohio, veteran Robert King was having a tough time walking more than few blocks, and getting a good night’s sleep was becoming impossible. “If my leg would get in a certain position, the pain was so great it would wake me up.” To eliminate his discomfort, the then 73-year-old opted for total knee replacement.

Today, an active King reports 100 percent satisfaction with the procedure. He credits Dr. Anil Krishnamurthy and the physical rehabilitation staff at the Dayton VA Medical Center, in particular George Faulkner and Diane Riffe, with his recovery. A veteran who took part in the Normandy invasion, King says he can’t tell the “new” knee from the other one. “I live out in a rural area and am able to do all my chores,” he says. “I’ve even been up on the roof.”



A Special Kind

Stroke, chronic heart or lung disease, orthopedic problems, cancer and other kinds of disabilities often require near-constant care.

Increasingly, that care is provided in the home. Occasionally, it is provided in a long-term care facility, such as a nursing home. In either case, the Veterans Health Administration extends a helping hand to veterans and their families who need such assistance.

“The spark for our extended care programs was the desire to deinstitutionalize elderly patients and get them to the best possible level of care,” says Steven Cohen, M.D., Director, Dayton VA Medical Center, and Network Geriatrics and Extended Care Line Director. “Generally, that means keeping veterans as close to the home as possible.” As such, many of VA’s extended care programs help maintain veterans in the home and in the community as long as possible.

On these two pages, you’ll learn about some of the VA programs that fill a special need.

Home Based Primary Care (HBPC)

Through HBPC, eligible veterans receive VA healthcare from an interdisciplinary staff in the comfort of their own homes. Skilled nursing care, social workers and dietitians help patients and their families adjust to the veteran’s illness or disability. Nurses may monitor a patient’s medical condition and administer medication and other therapies. In addition to offering counseling services, social workers can help link patients and their families with needed community services, such as Meals on Wheels, Social Security benefits or hospice organizations. And dietitians instruct the patient and family on appropriate meal planning.

Nancy Teegarden, L.P.N., (center) with Cincinnati nursing home patient Robert Miller, a World War II veteran, and his wife, Rose.



Adult Day Health Care (ADHC)

This medically oriented program is designed for sick or disabled veterans who might otherwise need nursing home care. During the day, veterans receive day care in a safe, structured setting either in a community facility or within the VA and return to their own homes in the evening. The staff may help participants learn skills that were taught to them during a hospital stay, administer medication or provide other necessary health maintenance. “Veterans attend the program about three or four times a week, giving caretakers a needed break,” says Joseph Aquilina, M.S.W., Geriatrics and Extended Care Line Manager, Cleveland campus.

Homemaker/Home Health Aide Program

Through this program, VA arranges for contract agencies to provide assistance to eligible veterans in their homes. Assistance may include

Of Care

bathing, dressing, light housekeeping, mail preparation or, in some instances, grocery shopping. Additionally, when need be, assistance with taking medication or wound care may be provided.

Respite care

This inpatient program gives families an extended break from the stresses of daily caregiving. “Veterans who qualify may be admitted to a VA nursing home for up to 31 days a year. The pre-arranged stays are usually divided into two stays,” says Hedy Stump, R.N., Geriatrics and Extended Care Line Manager, Cincinnati campus. This allows the primary caregiver to go on vacation or tend to a pressing need. Stump recalls a veteran’s wife who was able to fly to her father’s funeral thanks to the availability of last-minute respite care for her husband, a veteran suffering from Parkinson’s disease.

Nursing home care

“A person may be ready for nursing home care when he or she has difficulty in activities of daily living, such as bathing, feeding, dressing and continence,” says Stump.

VA nursing homes offer a homelike environment. Within the 686 nursing home beds in VISN 10, most patients have private rooms decorated with photos and other personal mementos.

In addition to receiving comprehensive medical care, including occupational and physical therapy, nursing home residents also may enjoy recreational activities such as bingo, movies, trips to sports events and summer picnics.

Also available at VA nursing homes are short-term rehabilitation programs. “For example, a

veteran who has been severely weakened by pneumonia may be admitted for three to six weeks to help him get back on his feet,” says Stump.

Hospice/palliative care

Hospice/palliative care offers sensitivity and support to veterans with advanced, progressive, incurable illness who can no longer benefit from curative treatment. “Hospice and palliative care enables veterans to carry on an alert, pain-free life and to manage other symptoms so that their days may be spent with dignity and quality,” says Kathy Hayes, Hospice and Palliative Care Coordinator, Dayton VA Hospice and Palliative Care Unit. “This special care may be provided at home or in a home-like setting.”

Services are provided by hospice and palliative care’s interdisciplinary team of trained professionals who provide medical and support services to the veteran and the entire family. Patients and families are included in the decision-making process, and bereavement counseling is provided to the family after the death of their loved one.

If you think you or a loved one may require one of the services described above, contact your primary care provider. Physicians, nurses and social workers work together to evaluate each veteran’s health status and decide what services are needed. **VH**

A staff member discusses care with patients in a hospice unit.



For More Information About
Extended Care Programs ...
Call your local extended care line
manager at the number listed below.

Chillicothe campus
Richard Gibbons, M.D.
(740) 773-1141, ext. 7611

Cleveland campus
Joseph Aquilina, M.S.W.
(216) 791-3800, ext. 4231

Cincinnati campus
Hedy Stump, R.N.
(606) 572-6201

Columbus campus
Judith Talbert, R.N.
(614) 257-5421

Dayton campus
William O'Brien, Ph.D.
(937) 268-6511, ext. 2589

Reaching Us Is Easy

Keep this information handy—when you need us, we'll be there.

Akron VA Campus

676 South Broadway Street
Akron, OH 44311
330-344-4177

Athens VA Campus

510 West Union Street
Athens, OH 45701
740-593-7314

Bellevue VA Campus

103 Landmark
Bellevue, KY 41073
606-392-3840

Brecksville VA Campus

10000 Brecksville Road
Brecksville, OH 44141
440-526-3030

Canton VA Campus

221 3rd Street SE
Canton, OH 44702
330-489-4600

Chillicothe VA Campus

17273 State Route 104
Chillicothe, OH 45601
740-773-1141

Cincinnati VA Campus

3200 Vine Street
Cincinnati, OH 45220
513-861-3100

Columbus VA Campus

543 Taylor Avenue
Columbus, OH 43203
614-257-5200

Dayton VA Campus

4100 West Third Street
Dayton, OH 45428
937-268-6511

Ft. Thomas VA Campus

1000 So. Ft. Thomas Avenue
Ft. Thomas, KY 41075
606-572-6202

Lorain VA Campus

205 West 20th Street
Lorain, OH 44052
440-244-3833

Mansfield VA Campus

1456 Park Avenue West
Suite N
Mansfield, OH 44906
419-529-4602

McCafferty VA Campus

4242 Lorain Avenue
Cleveland, OH 44113
216-939-0699

Middletown VA Campus

675 North University Blvd.
Middletown, OH 45042
513-423-8387

Call Tele-Nurse



There's someone on the line 24 hours a day, 365 days a year to serve you. If you have symptoms, questions or need advice about any health problem, call us toll free at **1-888-VET-OHIO (1-888-838-6446)**.

Otis Moss/University Hospital VA Campus

8819 Quincy Avenue
Cleveland, OH 44106
216-721-7221

Painesville VA Campus

54 South State Street
Suite 204
Painesville, OH 44077
440-357-6740

Portsmouth VA Campus

621 Broadway Street
Portsmouth, OH 45662
740-353-3236

Sandusky VA Campus

3416 Columbus Avenue
Sandusky, OH 44870
419-625-7350

Springfield VA Campus

512 South Burnett Road
Springfield, OH 45505
937-328-3385

Wade Park VA Campus

10701 East Boulevard
Cleveland, OH 44106
216-791-3800

Youngstown VA Campus

2031 Belmont Avenue
Youngstown, OH 44505
330-740-9200

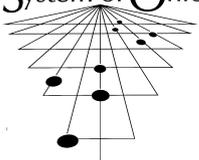
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