







Volume 4, Edition 1

News from across the UW Hospital Medicine Program

### MD Aware's New Faculty Edition: HMC & UW Fellow



**Shawn Cohen** 

"I'm from New York originally and a 2018 grad of the residency program here. I'm a part days, part nights hospitalist at HMC and am ecstatic to work alongside the amazing people at Harborview. I have an interest in addiction medicine and am working on a project looking at the different treatment strategies we use to treat alcohol withdrawal. During my time off you can usually find me heading

to the park with my fiancé, Thanh, and our dog, Curly. He is ball crazy! An interesting fact about me is I have a twin brother who is a pediatric hospitalist, hospital medicine must be genetic."

#### **Announcements**

Mara Bann (HMC) was selected as one of the top peer reviewers for the *Journal of Hospital Medicine* for 2018.

Tyler Albert (VA) and Paul Cornia (VA) were selected as one of the top peer reviewers for the *Journal of General Internal Medicine* for 2018.

Congratulations to our faculty who successfully matched in fellowship programs! We will miss you, but wish you great luck in the next phase of your careers!

Lauren Brown, Rheumatology, UW Eileen Koh, Endocrinology, UCSF Jake Stein, Hematology-Oncology, U North Carolina

Continued on page 2



Jesse Levin
Billing Tip

#### Avoid Missing Credit for the Physical Exam

If a patient **declines** part of the physical examination—or if the patient cannot be fully examined for some clearly documented reason (e.g., could not tolerate exam due to pain, could not cooperate due to health issues or age, or refused to cooperate due to mental or emotional issues)—credit **can** be given for any of the systems/areas declined. However, to get credit for a complete physical exam you must document all of the system(s) you intended to examine and state the reason you could not.

Continued on page 2

## New Faculty Edition: HMC & UW Fellow



**Emily Grossniklaus** 

"I am incredibly excited to be joining the Division of General Internal Medicine as a Fellow in Hospital Medicine next year. A project I am currently working on is to create a procedure elective for the internal medicine residency program. It will be focused on training both inpatient and outpatient procedures that are commonly performed by medicine residents and based at the VA. We are hoping to get it off the ground this year! Outside of medicine, I

love to spend time outside hiking and backpacking in Washington's national parks. This year, I am hoping to win the 'Enchantments' lottery and do a through-hike of the trail. If I weren't a doctor, I think I would have to fulfill my childhood plans of being either a park ranger or an architect. One little known fact about me is that my greatest Halloween costume was being a pencil in the 5th grade!"



**Lindsey Phillips** 

"I'm thrilled to be joining the UW group as a hospitalist and medicine consultant in February. My goals for this year are to take advantage of UW's great opportunities for medical education and bedside teaching, including procedures, and to become involved in a patient safety or high-value care project. Outside of work, I love to read, stargaze, travel abroad, kayak, and scuba dive with my wonderful boyfriend and dive buddy, Dan, who is active duty Navy at

the Puget Sound this year! If I weren't a physician, my dream would be to explore the cosmic ocean as an astronaut or to work for NASA."

## **Billing Tip Continued**

On the other hand, if examination of a system is documented as *deferred*, it implies that the physician *chose not* to perform the exam, and thus, it cannot be counted.

Remember to include 8 or more systems for *all* Admissions/New Consults with at least one observation/visual inspection of each system. If you are unable to examine a relevant system at all (or to the extent that you intended), then you should still include the system name and state why the patient refused.

# **Did you** Know?

Our Hospital Medicine Twitter account (<u>@UW HospMed</u>) has reached over 100 followers! Be sure to check us out for more hospital medicine updates!



Check out @AndrewW2000 interview on the state of hospital medicine in 2018 with The Hospitalist the-hospitalist.org/hospitalist/ar ... #SHM #hospitalist #healthcare #hospital



The state of hospital medicine in 2018
Slow growth in compensation, more funds for hospital support, but productivity remains flat.

2:38 PM - 25 Jan 2019

### **Recent Publications**

**Jacob Stein (UWMC)** Communicating with Vulnerable Patient Populations: A Randomized Intervention to Teach Inpatients to Use the Electronic Patient Portal. Appl Clin Inform.

**Shobha Stack (UWMC)** Childbearing and maternity leave in residency: determinants and well-being outcomes. Postgrad Med J. **James Floyd (HMC)** Risk of colon cancer recurrence in relation to diabetes. Cancer Causes Control.

Meghaan Walsh (HMC) <u>Barriers to Early Hospital Discharge: A Cross-Sectional Study at Five Academic Hospitals.</u> J Hosp Med. Kay Johnson (VA) <u>Perioperative cardiovascular medicine: 5 questions for 2018.</u> Cleve Clin J Med.