

September 15, 2016

Practice Management

Ready, Steady, Balance: Falls Prevention Day is September 22

The first day of fall is just around the corner, and with it brings the 9th Annual Falls Prevention day.

This year's theme, *Ready, Steady, Balance: Prevent Falls in 2016*, aims to unite professionals, older adults, caregivers, and family members to play a part in raising awareness and preventing falls in the older adult population. One-third of people 65 and older fall each year, and 20% of those falls cause a serious injury such as head trauma or a fracture. With proper precautions, these falls and accidents are preventable.

CDC Online STEADI Training:

To engage your older patients in interventions to reduce their fall risk, CDC developed the STEADI (Stopping Elderly Accidents, Deaths, and Injuries) Initiative to help providers incorporate fall prevention into clinical practice. CDC created this training to give you the tools you need to make fall risk screening, risk factor assessment, and falls interventions part of your clinical practice.



The content is based on established clinical guidelines. You will learn:

- Two easy screening methods to determine a patient's fall risk
- Three rapid standardized gait, strength and balance assessment tests
- To apply the STEADI algorithm to determine a patient's fall risk level
- To select appropriate evidence-based interventions based on risk level
- You can take the CDC's new STEADI Online Training for Providers at: www.cdc.gov/steady. All you need to do is create a free account on [CDC TRAIN](#), Log in, and search "STEADI".

Resources for Patients:

- [6 Steps to Prevent a Fall](#)
- [Falls Prevention Programs: Saving Lives, Saving Money](#)
- [Falls Prevention Fact Sheet](#)
- [Debunking the Myths of Older Adult Falls](#)
- [6 Steps to Protect Your Older Loved One From A Fall](#)
- [Osteoporosis and Falls Prevention](#)

New Look for "Think Cultural Health"

The HHS Office of Minority Health launched a redesigned [Think Cultural Health](#) website. The website offers engaging and practical tools to increase public awareness and understanding of Culturally and Linguistically Appropriate Services (CLAS). The new design makes it easier for anyone to browse the latest resources and find information that will help individuals and organizations deliver respectful, understandable, and effective services to all:

- [National CLAS Standards](#) webpage features an explanation of CLAS, a printable list of the Standards, and the comprehensive technical assistance document ([Blueprint](#))
- [Education](#) webpage features e-learning programs designed for disaster personnel, nurses, oral health professionals, physicians, and community health workers
- [Resources](#) webpage features a searchable library of over 500 online resources, recorded presentations, and educational video units on CLAS

ICD-10 Toolkit Available to Assess and Maintain Compliance



The ICD-10 [Assessment and Maintenance Toolkit](#) is now available from CMS to help you maintain your ICD-10 progress. This in-depth toolkit shows how you can manage your revenue cycle by:

- Assessing ICD-10 progress using Key Performance Indicators (KPIs) to identify potential productivity or cash flow issues
- Addressing opportunities for improvement
- Maintaining progress and keeping up-to-date on ICD-10

The toolkit is also available as an [infographic](#) with an accompanying [fact sheet on KPIs](#) to help you analyze and track your ICD-10 progress. Visit the CMS [ICD-10](#) website for the latest news and official resources, including the [Quick Start Guide](#) and a [contact list](#) for provider Medicare and Medicaid questions.

Please Take This Survey on Patient Use of Methamphetamine



The Office of Drug User Health within the New York State DOH is interested in gathering a snapshot of what providers are observing among their patients concerning crystal methamphetamine use throughout New York State. They are collecting preliminary information to help determine next steps that will aid in the assessment, analysis, development, and action planning required to address the needs of people who use methamphetamine.

Please have one person complete this survey on behalf of your entire practice—however, feel free to consult with colleagues to best answer the questions. This survey will be closed by Wednesday September 21, 2016. [You can take the survey here.](#)

Member Recognition

Joseph J. Fins, MD, MACP & Mark P. Jarrett, MD, MBA, MS - The Chapter would like to acknowledge Dr. Fins and Dr. Jarrett for receiving the 2016-17 Fellow Ambassadorship from the New York Academy of Medicine. The Fellows Ambassador Program was established in 2015 to increase the direct engagement of Fellows with the research and policy staff of the Academy, and provide the public with access to the wealth of knowledge that the Academy's Fellows possess through public communication and media interviews. The Ambassadors were selected by the Academy based on their interest and ability as spokespersons for their field of expertise, as well as for their ability to address broad-reaching topics in the news today such as, urban health, prevention and health disparities.

Dr. Fins is the Professor of Medical Ethics, Chief of the Division of Medical Ethics, tenured Professor of Medicine, Professor of Public Health and Professor of Medicine in Psychiatry at Weill Cornell Medical College. He is also a past Chapter Governor and past Chair of the Health and Public Policy Committee.

Dr. Jarrett is the Chief Quality Officer at Northwell Health and was previously the Chief Medical Officer. He has also served on the NYSSIM Board of Directors and on the New York Chapter's Quality and Patient Safety Committee.

Congratulations to Drs. Fins and Jarrett on this accomplishment!

Career Link

New Position Posted in Career Link!

**Division of Medical Ethics, Weill Cornell Medicine
CLINICAL ETHICS FELLOWSHIP**

The Division of Medical Ethics at Weill Cornell Medicine in New York City invites applications for a full-time 2-year fellowship position in clinical ethics to begin July 1, 2017. One applicant will be accepted each year.

The fellowship is part of the New York-Houston Medical Ethics Consortium, which brings together Houston Methodist Hospital, Baylor College of Medicine, Weill Cornell Medicine, and the NewYork-Presbyterian Healthcare System. The aim of this consortium is to provide fellows with an outstanding opportunity in clinical and research ethics by drawing upon transcontinental expertise and varied practice settings. Fellows will learn from a distinguished faculty and each other through various joint activities: video-conferenced seminar series, case conferences, and journal clubs; visiting observerships at consortium hospitals; and retreats in Houston and New York. The program will provide fellows with the clinical experience, training and education required to become experts in clinical ethics consultation and prepare them for academic careers in medical ethics.

[See more on NYACP's Career Link Page](#)

Education

New York ACP is highlighting the winning abstracts from the Chapter's June 4th Poster Competition

(This is third in a series of four poster competition highlights)

Winner: Medical Student Clinical Vignette

NON-RELAPSING SYSTEMIC CAPILLARY LEAK SYNDROME STATUS POST MONOTHERAPY THEOPHYLLINE THERAPY

Author: Rani Berry, Albany Medical College

Additional Authors: Deepak Rajpoot, MD



Idiopathic systemic capillary leak syndrome (SCLS), also known as Clarkson's disease, is an extremely rare disease whose current molecular etiology remains unknown despite a 26% increase in published cases since 2006.¹ Since its discovery in 1960, there have only been 250 recorded cases of SCLS in the literature.

Patient:

A 24-year-old Hispanic female, with a medical history of aplastic anemia, gastroschisis, short gut syndrome, and CKD. Past medical history includes more than 100 admissions for abdominal pain with resulting diagnoses ranging from blind loop syndrome, SBO, and small-intestinal bacterial overgrowth (SIBO). In 2007, she began presenting with episodes of localized edema further complicated by pericarditis, midbrain hemorrhages, and seizures. For this admission the patient presented with fatigue, and lower extremity swelling and discomfort. Physical exam showed a blood pressure of 80/50 at time of admission. The patient had mild swelling of her labia and lower extremities, extending up to the thighs, which rapidly transitioned to a generalized edema. Labs showed an album of 3.6 mg/dl, a BUN of 24 mg/dl and creatinine 1.57 mg/dl-consistent with her baseline renal insufficiency. The rest of her lab data was at baseline. The consideration for SCLS was based upon her multiple presentations of spontaneous bouts of generalized edema, along with the sudden presentation of hypotension. The diagnosis was confirmed by 1) An equally spontaneous remission of edema and hypotension-consistent with the recruitment phase of SCLS, 2) A response to a therapeutic trial of theophylline treatment.

Conclusion:

Patients with SCLS usually present with episodes of unexplained edema, hypoalbuminemia and fluctuation in blood pressure. Patients frequently experience SCLS relapses despite being on combination theophylline, IVIG or IV aminophylline therapy. To our knowledge, this is the first reported case of a young patient diagnosed with SCLS and has not experienced a relapse in her symptoms since her initiating treatment with theophylline. Our goal is for physicians to be aware of this condition and the possibility of mono-therapy with theophylline as a safe and effective treatment for SCLS.

Clinical Significance:

This novel case will aid physicians in the workup and treatment of symptoms suggestive of systemic capillary leak syndrome. It offers a new opportunity of monotherapy for SCLS-leading to an increase in patient satisfaction and quality of life. It also provides a thorough review of SCLS and other rare but important diagnoses to consider when evaluating critically ill patients who present with episodic symptoms - reducing the traditional delay in diagnosing patients.

¹Druey, KM. Narrative Review: The Systemic Capillary Leak Syndrome. *Annals of Internal Medicine Ann Intern Med.* 2010;153(2):90.

Upcoming 2016 District Meetings

Friday, September 23, 2016 - Sunday, September 25, 2016

CURRENT TOPICS IN PRIMARY CARE AND NEUROLOGY: Update for the Primary Care Practitioner

The High Peaks Resort - 2384 Saranac Avenue, Lake Placid, NY 12946

Sponsored by: Albany Medical College's Dept. of Medicine, Dept. of Neurology and the Office of CME

In collaboration with: Hudson Valley Capital District of the New York Chapter American College of Physicians

[Brochure and Registration Information](#)

Brooklyn District Meeting: Thursday, September 29, 2016

A MULTIPLE SMALL FEEDINGS OF THE MIND

Gargiulo's Restaurant - 2911 West 15th Street, Brooklyn NY 11224

6:00pm Registration • 6:30pm Dinner and Educational Program

[Meeting Flyer](#) • [Register Here](#)

COMMISSIONER'S GRAND MEDICAL ROUNDS: Thursday, September 29, 2016

From A to Zika: An Update on Zika Virus for Primary Care Providers"

Stony Brook Medicine • Health Science Center, Level 2, Lecture Hall 2

101 Nicolls Road • Stony Brook, NY 11794

6:00pm - 8:00pm

[Download the Flyer](#) • [Register Here](#)

SAVE-THE-DATE

Syracuse District Meeting: Wednesday, October 19, 2016

A MULTIPLE SMALL FEEDINGS OF THE MIND: (1) Physician Burnout and (2) Hormone Replacement

6:00pm Registration • 6:30pm Dinner and Educational Program

[More information will be posted to the NYACP Education Page shortly.](#)

Friday, October 21- Saturday, October 22, 2016

11th Annual Mid-Atlantic Hospital Medicine Symposium

The Bonnie M. Davis, MD and Kenneth L. Davis, MD Auditorium, 2nd floor,

1470 Madison Avenue (Between 101st & 102nd Streets), New York, NY 10029.

[Brochure and Registration Information](#)
