

# Patients and Families Will Run— Not Walk—to St. Joseph's New Musculoskeletal Care Center

Musculoskeletal services will never be the same as St. Joseph's Hospital Health Center moves steadily toward the creation of a surgery and rehabilitation facility that will be the Central New York focal point for all those seeking joint replacement along with other orthopedic and spinal surgeries.

The move to create this reality has already begun.

Anyone who underwent joint replacement, fracture or spinal surgery at St. Joseph's began their recovery in a fourth floor room along with 35 other patients. Those patients were recovering from a variety of illnesses or other surgery, but they shared one thing in common: There were 36 of them in 18 rooms.

If those same patients were to return now to have their other knee or hip replaced (or just visit) they wouldn't recognize the place.

With the migration of additional orthopedic surgeons from the former Community General Hospital to St. Joseph's in February 2012, renovations are underway on the fourth floor to accommodate these surgeons' joint replacement, fracture and spine patients. When finished, the number of patient beds will more than double. Plans also are underway to make the floor a "one-stop shopping" experience, with patients being admitted directly to the fourth floor instead of first going to a preoperative unit before surgery. A designated family waiting room as well as a dining room where patients and their families may eat together also are planned.

Renovations have already been made to the total joint replacement area of the fourth floor to further enhance the healing atmosphere. Instead of everyone sharing their room with another patient, there are now 14 private rooms and only six semi-private rooms. In addition, there are 30 patient beds dedicated to those who require fracture or spine care. It is a brighter place with new paint and wall finishes. Each room has mini-refrigerators for personalized ice packs to help control swelling and to assist with comfort. Each room has its own TV.

There is also a large, open family/patient lounge with chairs and a fully stocked refrigerator to encourage patients to help themselves, share meals with their family, and walk around to stimulate healing. Family members also are encouraged to serve as coaches during twice-daily physical therapy sessions. A family member may also stay overnight with the patient in the private rooms.

But perhaps the greatest significance, according to Jennifer Johnstone, RN, director of medical/surgical services, is that everyone in the private and semi-private rooms are total joint replacement patients instead of a mixture of those being treated for illnesses or other surgeries.

"Dedicating one area to a specific patient population," Johnstone says, "is a remarkable benefit in terms of minimizing the risk of infection."

The fact is, Johnstone says, that patients entering the hospital for joint replacement surgery are generally healthy people whose only complaint is bone-on-bone arthritis pain in a joint or two. Because of that they are free to choose their orthopedic surgeon as well as where they want to have their surgery performed and where they want to recover. Everything else being equal, Johnstone says, they are liable to be looking for the hospital with the largest "Wow!" factor—the hospital that provides the highest degree of comfort.

"Besides having the best surgeons, today's orthopedic surgery patients are seeking hospitals that are going to give them the best overall experience," says Johnstone. "When patients have a choice, we want them all to choose St. Joseph's."

These changes to musculoskeletal services on the fourth floor of the hospital are aimed at enhancing the patient and family experience, but the fact is, they are what one of Johnstone's colleagues, Kim Murray, RN, MS, CNOR, describes as a face lift when compared with the improvements slated for the next two years as Phase 2B of the hospital's ambitious building program gains speed.

## A HIGHER LEVEL OF CARE

Murray, who is the service line administrator for orthopedics and spine services, says the new home for orthopedics and spine will occupy two floors instead of one and provide 55 or more single patient rooms. There also will be a larger family/patient lounge that will include a separate dining area so patients can feast on hot, plated meals with their families. The lounge encourages patients who have had their surgeries to get up and move around as much as possible. In addition, the new physical therapy area will be within the new orthopedic wing instead of down the hall.

The relationship-based care model already in place at St. Joseph's will be further enhanced by using a process improvement tool developed by Anthony M. DiGioia III, MD, an orthopedic surgeon practicing at the University of Pittsburgh Medical Center.

"Dr. DiGioia's patient- and family-centered model is unique in that it was developed specifically for orthopedics," Murray says. "It is based on the premise that every person on the orthopedics staff who interacts with a patient and family members approaches every action through the patient's point of view, whether it be the surgery itself or merely having their car parked. The important thing about this approach is that it correlates with exceptional clinical outcomes and is a natural progression for the relationship-based care model currently in existence.

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DIRECTOR OF MEDICAL/SURGICAL SERVICES

Tied into this, of course, is the brand new surgery center that is part of St. Joseph's current facility expansion project scheduled for completion in 2013. The existing suite of operating rooms takes up 19,000 square feet—an adequate space back in 1992 when

the current operating rooms were built, but not nearly enough to meet the need today or in the future.

The new operating room suite and perianesthesia care unit (PACU) will cover 40,000 square feet. There are 12 existing operating rooms that will be replaced with as many as 17 completely new ones projected for 2013. Three of these rooms are "roughed in" and ready for completion as needs continue to grow, Murray says. Several orthopedic surgeons served on the design team.

"All the operating rooms are designed as multispecialty rooms," Murray adds. "But eight of them have been clustered together and will have enhanced features to make them especially compatible for orthopedic surgeries. Too many hospitals 'pigeon hole' themselves with single purpose operating rooms, but ours are designed for the greatest flexibility."

The rooms also are larger than those built in the '90s. "Orthopedic surgery requires a significantly larger supply of tools and instruments than other surgeries," says Murray. "When you have an operating room that is small, it's much easier to contaminate those instruments and the sterile field, so adequately sized rooms like the ones we've designed allow for traffic patterns that minimize infection risk."

In addition to their size, each orthopedic room will be equipped with ultraviolet lighting because of its germ-killing ability. Sterilization of equipment and instruments also is a must for infection control, and the operating room suite will be equipped with the most powerful equipment available. As Murray says, "It looks like a high power car wash and is nothing like we had 10 years ago. The instruments used in orthopedic surgery are particularly difficult to clean and sterilize. Because this one meets the rigors of orthopedics, it will more than meet the needs of any other specialty."

There is another added benefit, as well. Right now, central sterile, the service that cleans and sterilizes instruments used in the operating rooms, is located about as far away from the current operating rooms as is possible. The new one will be adjacent to the operating room suite.

Everything has been thought of for the patients, but the patients' families haven't been forgotten either. There will be a bright two-story surgical waiting room with plenty of glass and consultation rooms for



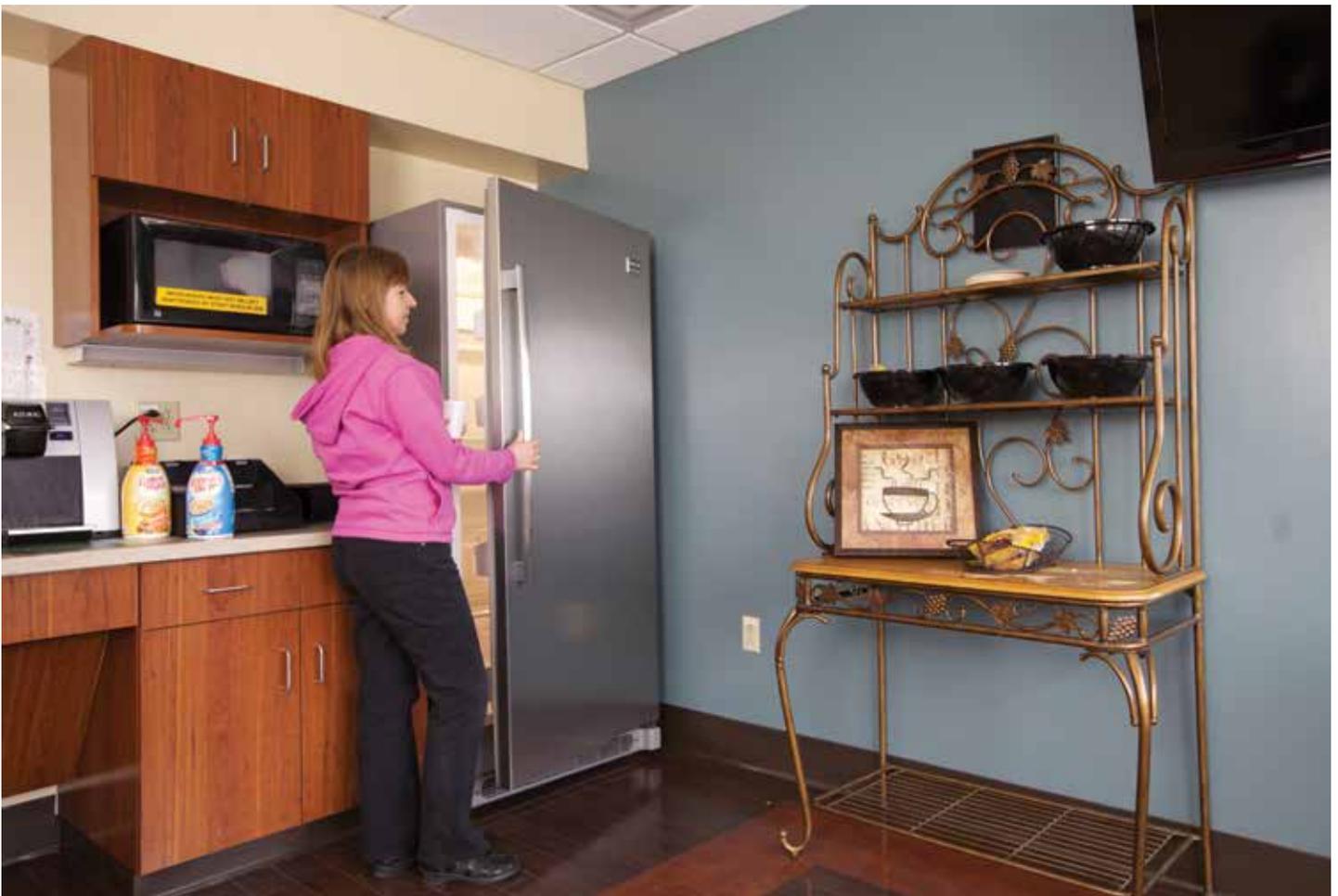
privacy. There also will be an upper level overlooking the city's North Side. Quiet areas will be separated from areas in which computers may be used. The surgical staff hasn't been overlooked either. There will be a "sleep center" that allows surgeons, anesthesiologists and other staff members to catch "40 winks" when they are on call.

The final design of the surgical center will be the result of nearly two years of consultation among surgeons, anesthesiologists, physician assistants, nurses, the housekeeping staff, those who transport patients to and from their surgeries— everyone with a stake in making sure the operating rooms meet the needs of patients and staff. Several operating rooms will be connected to remote classroom sites for

teaching purposes, so nurses and other disciplines can familiarize themselves with the operating suite without contamination or privacy issues.

"We're doing our best to think of everything that will benefit our patients and enhance their experience," Johnstone says. "We are accomplishing this through listening closely to our patients and our colleagues' ideas, especially the front line staff that is providing hands-on care."

Adds Murray, "We want Central New Yorkers who have orthopedic or spine problems to know that this is the place to come. There is no other choice." ●



Renovations to the total joint replacement area of St. Joseph's fourth floor include a lounge where patients and their families may congregate to share a meal and relax.

## A HIGHER LEVEL OF CARE

### Operation Walk Syracuse Helps Those Abroad and at Home

Reassuring a patient after joint replacement surgery in Kathmandu, Nepal, is St. Joseph's surgical nurse Shelly Eicholzer, RN. Eicholzer as well as surgeons and other members of the Operation Walk Syracuse team traveled to Nepal in November 2011 where they performed free hip and knee replacement surgeries on more than 60 patients. Operation Walk Syracuse was founded by St. Joseph's orthopedic surgeons, Brett Greenky, MD, and Seth Greenky, MD. The organization and St. Joseph's Hospital Health Center later partnered to provide free orthopedic surgery to qualifying Central New York residents who otherwise would have been unable to afford the procedures. A not-for-profit volunteer medical service, Operation Walk provides free joint replacements to those with disabling bone and joint conditions in order to enable them to live their lives as contributing members of society. Follow Operation Walk on <http://operationwalksyracuse.blogspot.com>.



**ST. JOSEPH'S**  
Hospital Health Center

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