Awards and Recognitions

Please join us in congratulating the Immune Tolerance Network (ITN) Bioinformatics Group (BiG) in receiving a Partners in Excellence Award in Leadership and Innovations and Outstanding Community Contributions.

The ITN became part of the MGH family in 2014 with the mission to accelerate the clinical development of immune tolerance therapies. Please feel free to explore their website and learn more about the ITN at: http://www.immunetolerance.org

It is also with great pleasure to announce that the Partners in Excellence selection committee has chosen the Living Donor Team to receive a Partners in Excellence Award in Teamwork!

The recipients of this award are:

Anne Seaward-Hersh (LD Coordinator)
Denise Morin (LD Coordinator)
Jobanna Garcia (Donor Intake Medical Assistant)
Karen Tanklow (Donor Social Worker)

Ellen MacLaughlin, Transplant Financial Coordinator, was also a recipient of the PIE Award.

Please welcome us in congratulating the Living Donor Team and Ellen for their hard work and dedication to our patients!

Todd L. Astor, M.D. Medical Director of the MGH Lung and Heart-Lung Transplant Program, was recently published in the MIT Sloan Newsroom for his clinical project for better care and happier patients. With focus on patient care and satisfaction, Dr. Astor, ramps up efficiency in his lung transplant clinic. Read the article here: http://mitsloan.mit.edu/newsroom/2015-lung-transplant-clinic-todd-astor.php

Happy Summer!

To kick things off, let’s offer a special congratulations to Jim Allan on becoming the President of the American Society of Transplantation! Dr. Allan’s goals for his presidency include engaging with patients and the public in support of the AST’s mission, establishing new approaches to funding transplantation research, and advocating for the removal of financial disincentives to organ donation. An honor well deserved!
2015 Susan A. Noska LEAD Award presented to Deb Whitaker

The 2015, Inaugural Susan A. Noska RN, CNN, CCTC Leadership, Excellence, Advocacy for Patients, and Dedication to Transplant (LEAD) Award Ceremony and Reception was held on June 4, 2015 The Paul S. Russell Museum. Susan was a wonderful nurse, who was dedicated to MGH, transplantation, and her patients. The Susan A. Noska LEAD Award was established to honor a member of the Transplant team who exemplifies these qualities that Susan demonstrated in her tenure in Transplantation at MGH. Angela Marquez, senior administrative director of the Transplant Center, Dr. Ben Cosimi, chief emeritus of the Division of Transplant and Dr. Jay Fishman, associate director of the Transplant Center spoke about Susan and that she was selfless and a pioneer in transplant nursing. From the early days of the transplant program at MGH and through her last days, she was always the “go-to” person. Many of the physicians and surgeons remember her as the glue of this program and for knowing every detail and critical facts to help make decisions about patients during the day and when on call in the middle of the night.

Tony Digiovine, nursing director of Blake 6 announced Debra L. Whitaker RN, BSN, CNN, attending nurse of Blake 6 as the first recipient of the Susan A. Noska RN, CNN, CCTC Leadership, Excellence, Advocacy for Patients, and Dedication to Transplant (LEAD) Award. Tony also provided remarks about Deb and how she exemplifies LEAD qualities. For over 35 years Deb has been devoted to the care of transplant patients at Massachusetts General Hospital. She came to MGH as a new graduate and within a few years began working on the “kidney transplant unit”. Deb consistently provides high quality, compassionate care for patients and families. Over the years Deb has continued to grow in her practice. In 2001 Deb achieved her certification in Nephrology Nursing (Transplant certification was not available at that time.). Her expertise in nursing practice was acknowledged and celebrated by her becoming a Clinical Scholar in the Clinical Recognition Program in 2003. Deb also became involved in collaborative governance by joining the Clinical Recognition Review Board and ultimately became the co-chair and has served in that role for several years. Deb is a strong resource and role model who is well respected by her peers and all who know and work with her. She has been the primary resource RN for Blake 6 for about 20 years and in 2013 when the transplant unit began its journey into “Innovation”, Deb added Attending RN to her responsibilities, which includes meeting with most of the patients on the unit, facilitating multidisciplinary care rounds where she helps coordinate the patient care plan and follows up with the patients after discharge. Deb is also a consummate patient advocate and does so in any and all forums. Her advocacy also extends to her colleagues, Blake 6, and all things Transplant. Deb does all this while managing the “routine” work of the resource RN—working/negotiating with the various teams: admitting department, emergency department, clinic, and ICU’s in patient placement; managing the dynamic staffing needs of the unit; supporting novice practitioners; answering any and all miscellaneous phone calls coming into the unit. Like Susan, she is the “go to” person on Blake 6.

Being involved in the unit based practice/quality committee; Deb is always looking for ways to improve practice. Over the years she has been involved in many initiatives, frequently in collaboration with other disciplines or units to carry out initiatives. Some of these include the development and participation in the development of numerous patient teaching materials, most recently the kidney and liver care binders for patients during their transplant admission. She is also an out of the box thinker and created and championed the implementation of the Warm Hand-Off initiative for living donor kidney recipients and donors where they receive a tour of Blake 6 after their PATA appointment and are introduced to some of the multidisciplinary team members. The patient “discharge” teaching and education process is also initiated at this visit so patients are better prepared for their surgery and know what is expected. She has also been the main driver in the unit project to clear MRSA/VRE patients to eliminate the need for private rooms where possible. These are just a few of Deb’s contributions to the program.

Deb exemplifies the same qualities and gifts as Susan Noska did in her role in transplantation over the years and it is an honor and a privilege to have Debra L. Whitaker RN, BSN, CNN, attending nurse of Blake 6 as the first recipient of the Susan A. Noska RN, CNN, CCTC LEAD Award.

The Award’s six other nominees deserve special recognition for their LEAD qualities and their hard work and dedication to the Transplant Center and our patients. The nominees include: Nahel Elias, MD, surgical director, Kidney Transplant Program; Donna Fitzpatrick, CHS (ABHI), lab supervisor, HLA Laboratory; Marti Hoar, RN, MS, CCTC, transplant coordinator, Liver Transplant Program; Barb Luby, LICSW, social worker, Pediatric Transplant Program; Sandy Silvestri RN, MS, CNOR, nursing practice specialist, Main OR; and Katie Somers, RN, staff nurse, Blake 12 ICU.
In November of 2012, four nurses on Ellison 9 CICU began their journey to develop a project that would improve patient care and decrease cost. They were awarded a grant from the American Association of Critical Care Nurses (AACN) to attend a 16 month long program with nursing representatives from six other Massachusetts hospitals that was facilitated by the AACN and were called Clinical Scene Investigators (CSIs).

The MGH CSI team felt that patients had delays in recovery when there were delays in weaning and extubating from the ventilator, in prevention, recognition and treatment of delirium and in early mobilization that can lead to complications to recovery. They chose to raise awareness among staff in all the ICUs to implementing the ABCDE Bundle which is a nationally recognized standard for early extubation and mobilization of critically ill patients. A = awakening, B = Breathing trial, C = Coordination of care, D = Delirium assessment and E = early exercise. These evidence based practices have been shown to help prevent complications in the critically ill. The CICU staff has always had a strong commitment to family involvement in patient care. The CSI team felt that adding F = Family involvement to the Bundle was important and reflected this commitment.

On January 15, 2014, the CSI team began their campaign to bring this information to all the MGH ICUs and promoted this through their slogan “Collaborate to Extubate”. Beyond the visits to each of the ICUs, they also developed an online educational program through Healthstream that was assigned to each ICU nurse. A pre and post-educational survey was sent out as well to all participating nurses.

The CSI team will be presenting their poster at AACN National Teaching Institute in San Diego this May. The team has also been asked to participate in a webinar sponsored by the Society of Critical Care Medicine in conjunction with AACN as a result of the recognition of the importance of inclusion of Family in this bundle of activities. It is anticipated that this will occur sometime this summer.

Approximately one year ago, the CICU and CSICU under the nursing leadership of Vivian Donahue, RN, Nursing Director and Susan Stengrevics, RN, Clinical Nurse Specialist, began the journey of joining all new nurses into the Heart Center ICU. Nurses enter as Heart Center ICU nurses which has fostered a relationship building opportunity between the two units and has enhanced knowledge of this complex patient population as well as alternative therapies available. These nurses will be capable of caring for patients in both units supporting excellence in patient care and more efficient utilization of the existing 34 Heart Center ICU beds. The hybridization of some of interventions, for example transaortic valve replacements (TAVR), demonstrates excellence in interdisciplinary practice across the two units. We welcome these new members of the Heart Center team.
After 29 years, Technical Director Donna Fitzpatrick, retires

It doesn’t seem possible that I won’t be coming in to MGH every day after May 1. This has been such a huge part of my life for the last 29 years; it’s hard to believe it’s over. When I arrived, there were about 60 patients on the waitlist for kidneys and we read the list every Friday morning to update the team on each patient’s status. I’ll never know how Dr Rubin knew about each and every one! And I remember being on call before we had transplant coordinators or electronic donor offers, I would have to tell Ben or Frank or Hugh how long the donor ureter was, along with the size of the renal artery and vein and lots of other clinical information! I don’t think I even knew much about the kidney anatomy until Tom Fuller suggested that I give a talk about it to the other techs in the lab. I got a lot of ribbing for starting off with “the kidney is a bean shaped organ”.

I’ve seen so many changes over the years. There were fun times, amazing times, incredibly interesting patients. There was a huge amount of work and some stressful times. Susan Noska was my sidekick and helped me through some crying jags. I can’t imagine a more satisfying career. Knowing that a little part of what we did in the lab contributed to a patient’s successful transplant was the best reward that one could have. I will always treasure the camaraderie and lifelong friends I have made along the way. Now my brain is full and there’s no more room to keep up with regulatory T cells, co-stimulatory blockades, heat maps, immune pathways, etc, etc, so it’s time to step aside and let the next generation take over. They may not know how to make B cells using nylon stuffed drinking straws, but they can do PCR and run a Luminex analyzer, so they will be fine. Thanks to all my co-workers over the years and especially Tom Fuller who gave me a chance and Susan Saidman for all of her encouragement and trust. I will miss everyone and probably will continue to have dreams about all the things I should have done.

I hope to do lots more travelling; the photo was taken at the top of Angel’s Landing in Zion National Park, Utah.

We wish you sun, fun and a happy retirement Donna! You earned it! Thank you for your service!
Several of the nursing staff trained and ran for the Boston Marathon. Mallory Hines is running for Miles for CF Pediatric Center, here at MGH. This is in honor of all our CF patients. Jillian Kelly is running for the same cause, in honor of a patient she was good friends with, who was also a patient here on Blake 6. Devon Mackinnon is running for the MGH Emergency Response team in honor of her father. Deb Murphy is also running in the Marathon.

In addition, there are lots of new initiatives being developed on Blake 6. Our mission is to improve the patient experience and satisfaction, reduce length of stay and improve communication.

This month we started to meet with the living related kidney pairs 1 week before transplant to do some pre-op education. The transplant coordinators have welcomed this program and are vested in making this happen with each pair coming to transplant. During their PATA visit, a trip to Blake 6 is built in to meet with one of the nurses and the Transplant pharmacist. We go over the experience from admission to Blake 6 thru the discharge. We plan to collect data and see if this makes a difference in length of stay or patient satisfaction.

As mentioned in the previous newsletter we have a project going where we clear patients from precautions to open up more beds on Blake 6. Jen Clair, our CNS submitted this project and it was accepted as a poster for Research Week.

The staff on Blake 6 is also being recognized with two Service Excellence Awards based on our patient experience results (HCAHPS): Achieved 2014 Focus Indicators and Most Improved Staff Responsiveness Scores.

The unit is also being recognized with honorable mention for the Get out of Bed initiative and the Precaution Screening Program.

The following letter was sent from a grateful family that I think represents what we in the Transplant Center strive to do:

"Dear Dr. Markmann,
I am following up with you regarding my son Shea's kidney transplant. I would like to thank you and the Hospital for the wonderful care and support you provided. The transplant team did an amazing job working with the National Kidney Registry to locate a donor for Shea, and facilitate my nieces donation.

Our family is forever grateful to MGH for the caring and professional efforts that saved our son, Shea’s life and healed our family. On February 19th, Shea’s life was saved by the enormous gift of a kidney transplant that was part of the largest kidney chain ever performed. The miraculous gift of his new life was made possible by Shea’s cousin Colleen Martin who donated to the chain on Shea’s behalf, and a wonderful donor in California who donated the kidney to Shea. None of this would have been possible without the amazing team of people at Massachusetts General Hospital who dedicate their lives to helping those in need.

Shea (holding my Grandson in the picture below) and our niece Colleen (on the end next to Shea) are now recovering beautifully from their surgeries. Our profound thanks to the entire team of doctors, nurses, social workers, and staff worked tirelessly to make the transplant happen. We extend our deepest gratitude to
(cont.) Dr. Eliot Heher, Dr. Nahel Elias, Dr. Tatsuo Kawai, Dr. Hannah Gilligan, Dr. Steven Gardner, Dr. Gregory Fricchione, Denise Morin, RN, Susan Aylouche, RN, Anne Seaward-Hersch, RN, Jessica Padello, RN, Christine Lawless, RN, Eileen Keegan-Pitts, LICSW, Deborah Whittaker, RN and the entire nursing staff of Blake 6 Transplant Unit, Shelly Karparis, RN and the entire staff on the Dialysis / Plasmaphareisis unit and Patient Transport Associate Osvaldo Brito Evor.

Our family thanks you and will keep your wonderful staff in our hearts and prayers.

Many Thanks,
Jack

Brigadier General (Ret.) Jack Hammond
Executive Director
Red Sox Foundation and Massachusetts General Hospital Home Base Program
(617) 724-7907

[Website Link]
"Their Mission Is Complete. Ours Has Just Begun."

The Home Base Program is honored to be part of CFC giving. Please help our mission and donate to Home Base (CFC #12288)"
David Castiglioni was presented with an Excellence in Action Award by Dr. Peter Slavin, president of MGH, June 18th, 2015 in the Abdominal Transplant Clinic. David has been a volunteer at the Tuesday Kidney MDC Transplant Evaluation Clinic for the last several months. Eileen Keegan-Pitts, LICSW, kidney transplant social worker went out of her way to e-mail David’s managers and the transplant team to recognize David’s efforts, which resulted in a unanimous effort to formally recognize his teamwork, collaboration and commitment to our transplant patients. Below is an excerpt of what Eileen wrote on David’s behalf.

David is always eager to greet our patients and help the staff with anything that we may need. He often goes about his work very quietly and yet he has a very positive impact on our patients.

This afternoon there was a patient who came into our clinic by herself for a transplant re-evaluation. Unfortunately, this particular patient learned that she is probably no longer a transplant candidate. As the team social worker, I met with the patient at the beginning of her clinic visit, and again, after she had met with the nephrologists and “heard the news”. Patient was understandably disappointed. She shared with me the sadness she felt in learning the news. Surprisingly, she took the news better than I expected. I asked her what made a difference. She informed me that it was the volunteer (David) who spent the time checking in with her during the appointments she had with various members of the team.

Apparently, David went out of his way to engage her in conversation. The patient was alone at this appointment and appreciated the support David provided. David also went out of his way to be helpful to patient. She was looking for some ice (she had bought her lunch with her) and David initially told her that he did not believe there was any in the clinic. However, he then went into the kitchen, got some ice out of the freezer, and put it into a plastic bag to give to patient. In addition, he went next door to Whole Foods Market and got some 100% juice, as patient was unable to drink juice that was provided by clinic. She appreciated the extra effort and also the “real conversation” that he provided. David spoke to her about issues unrelated to her health – her children and grandchildren. She shared that she was touched by his genuineness and his caring. She stated that his interactions helped her to step out of herself and accept the news in a different light.

I observed patient interacting with him on her way out of the office. It was obvious that his presence made a huge difference in her clinic experience.

Food Safety for Organ Transplant Recipients
Jessica Witchey, RD, LDN, CNSC

One recurring theme in transplant nutrition is the need to follow proper food safety and handling practices. This is often a point of confusion for both patients and providers.

Food borne illness is a frequent occurrence in the general population. In 2013, 48 million people in the United States were diagnosed with culture-confirmed bacterial and laboratory-confirmed parasitic infection; this is ~15% of the US population. It should be noted that for each confirmed diagnosis or reported incidence of food borne illness, there is a large number of cases that go unreported. For example, the CDC reports that for every 1 reported case of Vibrio, there are 142 unreported cases and that for each reported incidence of Salmonella, there are 29 unreported cases.

While the number of recommendations and guidelines cannot all be highlighted within the constraints of this entry, the following guidelines are standard, easy to communicate recommendations for our transplant patients.

- Wash all fruits and vegetables – regardless of their preparation (raw, peeled, cooked, already washed such as bagged lettuce, etc)
  - Fresh/raw fruits and vegetables do not need to be peeled.
- Cook proteins to proper temperature – refer to Safe Minimum Cooking Temperatures
  - Avoid raw shellfish, steak tartar, sushi, ceviche, cold smoked salmon, etc.
- Avoid unpasteurized milk and cheese or soft cheeses made with unpasteurized milk
- Avoid unpasteurized juice and apple cider
- Foods should be hot (> 140 degrees) or cold (< 40 degrees)

Since food borne illness can be a serious event in the immunocompromised patient, it is important for our patients to know and understand how to practice safe food-handling behaviors. It is also important that we don’t unnecessarily restrict our patients of “safe” foods as eating is important for recovery and quality of life. As our patients have additional questions, please refer them to the following handout that can be downloaded online from the FDA titled Food Safety for Transplant Recipients.
Dr. Lillemoe acknowledges exceptional division surgeons

Hopefully you were able to attend the Department of Surgery Annual Quality meeting on January 29th and heard the presentation by the quality director for your division. Dr. Lillemoe chose to give special recognition to one surgeon in each Division, who achieved the highest patient experience CG-CAHPs rating.

James Burns – Laryngeal Surgery
Dan Doody – Pediatric Surgery
Peter Fagenholz – Trauma and Emergency Surgery
Henning Gaissert – Thoracic Surgery
Jeremy Goverman - Burns
Eric Liao – Plastic and Reconstructive Surgery
Roy Phitayakorn – General/Gi Surgery
Julianne Stoughton – Vascular Surgery
Gus Vlahakes – Cardiac Surgery
Heidi Yeh – Transplant Surgery

We join Dr. Lillemoe in congratulating these winners, and hope that everyone keeps patient experience of care as a focal part of their quality efforts.

Dr. Tatsuo Kawai is approved by Harvard University as Professor of Surgery, effective January 1, 2015.

Alexandria Huynh, graduate student in the Turka Laboratory, was published for the first time in February 2015 issue of Nature Immunology.

August 2015 marks MGH’s Lung Transplant Program’s 25th Anniversary! The Lung Transplant Program at the Massachusetts General Hospital Transplant Center brings together state-of-the-art technology and leading-edge medical and surgical interventions to provide patients with individualized care before and after their lung transplants. Thank you for all that you do and here’s to another 25 successful years!!

Have a Safe and Happy July 4th!!

For questions or concerns regarding The Transplant Center Newsletter or to have announcements and acknowledgements added to the next newsletter, please contact Jen Mason at jkmason@mgh.harvard.edu.