A passion for compassion
Geisinger nursing looks to its future

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On the cover: Geisinger nurses find many career pathways open to them as they care for patients. Illustration: Scott Roberts

We want to hear from you
Write to us! We want to hear your thoughts on what you see here and your ideas for future stories. Email us at GeisingerMagazine@geisinger.edu.

Include your name, email address, city and state. If you are a Geisinger staff member or alumnus/a of our education programs, also include your current (or past) positions and the years that you worked or trained here.
Family members had spent many days by their father’s bedside in the Intensive Care Unit at Geisinger Lewistown Hospital. They knew he wasn’t likely to recover, and his time was short. Soon after they left the hospital to get some rest one day, they got word that his condition had deteriorated. They returned to the hospital, but their dad passed away before they could get there. The family was distraught they weren’t with him for his final moments. To comfort them, staff members who had cared for this patient printed out a record from the cardiac monitor of his last few heartbeats. They made copies, placed the copies in small test tubes and gave one to each family member. Deeply touched, the family was amazed these caregivers took the time to do something so special and unique for them.

If you strip away all the layers and complexity of healthcare, it comes down to this: People caring for people. At Geisinger, our entire purpose is caring. Our values of kindness, excellence, learning and innovation guide how everyone as we would hope to be treated. It’s the golden rule, because if we don’t get that right we might deliver health services, but we can’t deliver care.

We place kindness first and define it as striving to treat everyone as we would hope to be treated. It’s the golden rule, because if we don’t get that right we might deliver health services, but we can’t deliver care.

I often ask our staff members, “How would you want your mom to be treated? Would you want someone to give her a blanket, hold her hand, take the time to explain what’s happening?” When we look at our actions and decisions from the perspective of what we want for our own family, the result is treating each person with respect, dignity, patience, understanding and cultural sensitivity.

I continue to be amazed and grateful for the depth of caring and kindness our Geisinger family demonstrates daily. Our people are special.

You’ll understand why I believe this as you read the articles in this issue about our nurses. Geisinger nurses are known nationally for their compassion, leadership and exceptional commitment to quality care. We attract the best and the brightest to pursue careers in nursing at Geisinger. We are recruiting hundreds more nurses to deliver the care and kindness our patients and families need and expect for the future.

We’re now creating the Nursing Institute at Geisinger as an important extension of our commitment to excellence in patient care and to ensure that nurses have the support, tools and skills to contribute at every level of leadership.

Our nearly 6,000 registered nurses are leading patient-centered care in every setting you can imagine. Yes, nurses are at the bedside in our hospitals. They are also in homes, clinics, our schools and our communities as they educate, innovate, research and above all, care for patients and members.

Many veterans are also caring for our patients, members and communities. We’re grateful to have former service members as part of the Geisinger family. Read about how two veterans, a medical student and a government relations expert, apply their military experiences in new ways.

You’ll find many more examples of the kindness, compassion and commitment at Geisinger through the stories in this issue. In so many ways, our people are caring for people and making life better for our community.

Take care,

David
Helping those who help others

Geisinger partners with local organizations to improve community health

It’s common sense that your health can suffer if you don’t have adequate housing, healthy food, easy access to transportation and medical care, and other basics. Research bears this out: Genetics and medical treatment drive just 40 percent of our health outcomes, with social and behavioral factors responsible for the other 60 percent.

To tackle these social and behavioral factors — also known as “social determinants of health” — Geisinger is partnering with community organizations that are already working to solve challenges such as food insecurity, childhood health and wellness, obesity, opioid abuse, transportation access and affordable housing. By supporting their work financially, Geisinger aims to play an even stronger role in helping area residents live healthier lives, which in turn should translate into lower healthcare costs. Geisinger’s current 11 percent contribution to community benefit programs is twice what is required for nonprofit status. These programs include health fairs, community education, dollar and time commitments and other resources aimed at helping our residents live healthier lives.

“Meeting our not-for-profit mission of improving the health of our communities means we have to go beyond delivering high-quality healthcare in the traditional sense,” explains Janet Tomcavage, MSN, Geisinger’s chief population health officer, who develops programs and initiatives to improve public health. “While we can’t always directly help people facing some of these issues, we can support organizations that do.

“There are many wonderful and impactful organizations in our communities already doing good work, but they are under-resourced or underfunded,” she adds. “Shifting our focus and resources will help fill the gaps and provide meaningful support to our communities.”

A partial list of Geisinger’s recent partners and projects

**Danville Area School District, stadium track-resurfacing project**

“Because the track will be open year-round to the community, adults and children will be able to walk in a safe environment, which will encourage exercise,” Ms. Tomcavage says.

**Central Pennsylvania Food Bank, Harrisburg and Williamsport**

Joe Arthur, executive director of the Central Pennsylvania Food Bank, says that Geisinger’s support will help his organization acquire fresh foods for food pantries and mobile food distribution sites in Juniata and Mifflin counties in central Pennsylvania. The organization will also supply healthy food to its 80 children’s weekend backpack programs, helping to ensure that kids still get adequate nutrition on the days they don’t get free meals at school.

“As they say, we are what we eat,” notes Mr. Arthur. “If we put hundreds of dollars in on the front end by supporting healthy eating, we will save thousands on the back end in healthcare.”
Harry & Jeanette Weinberg
Regional Food Bank, Northeast Pennsylvania/Scranton
Geisinger is helping with efforts to distribute food to charitable organizations feeding the needy throughout northeast Pennsylvania. These include food pantries, homeless shelters, soup kitchens, group homes for the disabled, day care centers, children’s camps and senior citizens’ programs.

My Father’s House, Pottsville
My Father’s House, a shelter and housing services organization operated by the Servants for All nonprofit group in Pottsville, will hire a coordinator of client and program development with the support from Geisinger, says Jeanette Triano Sinn, executive director. “We’ll be gathering data about what is causing homelessness in our region, why some clients continue to remain homeless and why others are able to go from temporary to permanent housing,” she explains. Since its founding in November 2015, My Father’s House has helped 800 people who were homeless or at risk of losing their homes.

Sixteen United Ways across Geisinger’s footprint
Geisinger is supporting the United Way’s community-based strategies to tackle issues such as childhood obesity, substance abuse, food insecurity, transportation and housing.

For example, the partnership with Geisinger is aiding the Greater Susquehanna Valley United Way’s work with two transitional housing programs, says Joanne Troutman, its president and CEO. Grace Transitional Home in Middleburg will hire a case manager to support homeless women and families until they are back in stable housing. The Union-Snyder Community Action Agency in Selinsgrove will provide case management services along with security deposits to help clients get into a home if they face an emergency housing situation.

Area YMCAs
Geisinger is channeling support to summer camp programs, summer food banks for kids and school-year programs.

Direct services provided by Geisinger
In addition to forging community partnerships, Geisinger is supporting programs of our own that are focused on improving community health.

Community health education
Geisinger has over 30 community health assistants (CHAs) already working in the community to make sure patients have the support they need to transition back home after a hospital stay, to live at home safely and to find transportation to doctors’ appointments. The CHAs will also offer school- and community-based programs on topics such as home safety, healthy food choices and increasing physical activity.

Opioid abuse treatment and prevention
Geisinger is developing two additional medication-assisted treatment centers in its northeast region (Wilkes-Barre) and the Lycoming County region. (See Geisinger Magazine, summer 2017, to read about the first center in Bloomsburg.) There are plans to hire addiction coordinators and recovery specialists who can help individuals through treatment and recovery. Other priorities include opioid abuse education programs in schools and opioid management training for physicians.

Senior transportation pilot projects
In Danville and Scranton, Geisinger is conducting pilot projects for transportation that takes seniors to and from their medical appointments. “We hope this will show a positive impact on access to healthcare as well as making patient follow-up easier and improving health outcomes,” Ms. Tomcavage says.
Many pathways, a single vision: “Get the care right”

Meet Chief Medical Officer
Jaewon Ryu, MD

By Tom Hayowyk

For most physicians, the path to a medical career is straightforward. Excel in college, get into medical school, study hard for four years, endure “the Match” to see where you will be doing a residency and then face three to five years of little sleep and lots of responsibility. Not an easy trip, but it is usually pretty much point A to point B to point C.

For Jaewon Ryu, MD, executive vice president and chief medical officer of Geisinger since October 2016, that path had a few twists and turns. There was a stint as an inner-city teacher, a bicycle trip across the country to raise money for charity, and an extended pause to attend law school and practice law before finishing medical school and beginning his residency in emergency medicine.

According to Dr. Ryu, all those experiences prepared him for the multifaceted role he plays at Geisinger today. At his one-year anniversary, Dr. Ryu sat down to talk about what brought him to Geisinger and what he aims to accomplish in terms of continually improving care and access, reducing the total cost of healthcare, and enhancing the experience for the Geisinger family and its patients and health plan members.

How would you describe the job of chief medical officer (CMO)?

Dr. Ryu: I think the job for all of us, not just the CMO, is to get the care right. For patients and members alike, this means being able to get to the right services when they need them. Even more so, it means anticipating people’s needs and intervening early so that they never end up needing many of those services.

In college, you majored in history. Why history?

Dr. Ryu: I was always interested in medicine, but when I got to college, the basic sciences didn’t really have me that jazzed. That came later. But history was something I always loved. It explains so much about the present and how things came to be the way they are today. If you’re a person who likes to ask “Why?” the study of history is endlessly fascinating.

You mentioned that your interest in healthcare policy began in college, too. Isn’t that an unusual thing for a young person to care about?
Dr. Ryu: I think my exposure to it began during my time in college, though I’m not sure I even recognized it as an interest at the time. It was mostly just from the environment around me. I arrived at college like many kids do, eager for new experiences. In New Haven, Conn., you could see that there were serious challenges to urban or inner city life that a sheltered suburban Chicago kid like me never really appreciated. I can’t say it was an active interest in policy at the time, but I saw that the system didn’t work well for many, whether in education, healthcare or jobs. That eventually led me to an interest in public policy and then specifically health policy.

Is that what also led you to emergency medicine?

Dr. Ryu: I think so. The idea of being able to provide care to people at a time of urgent need, especially in underserved areas, always appealed to me. Emergency medicine team members often have part social worker in them. You do a bunch of different things to solve problems quickly for people in crisis. I think many of us like to think of ourselves as the “MacGyver” of healthcare. And, there’s a beauty in the simplicity of taking care of whoever comes in the door, for whatever they are there for, regardless of what insurance they have (or don’t have) and what language they speak (or don’t speak).

Your résumé does not follow a traditional timeline. Why is that?

Dr. Ryu: I was lucky to have mentors from early on, and their advice was to always follow my passion and interests. When you do that, things are not linear and you may take some detours along the way. Between college and grad school, I worked as an inner-city teacher/counselor and biked across the country as part of a large group raising funds for Habitat for Humanity. Neither advanced me toward healthcare, but both were transformative experiences.

What did your teaching experience teach you?

Dr. Ryu: I had already been accepted into medical school and I knew that I was headed for a career in medicine. But I had volunteered in youth enrichment programs for inner-city kids in college and had a passion for it. That’s why I decided to join AmeriCorps and spend a year as a counselor. My day-to-day job was working in communities with people who had a lot stacked against them. I was responsible for eight kids in the “I Have A Dream” program that supports students from third grade through high school. If they get into a college, the program pays for it.
I saw the devastating impact of what today we’d call social determinants, such as economic stability, community environment, education, etc. I think this may have been when my interest in policy issues started to crystallize.

**Even your medical school years were interesting, time-wise.**

**Dr. Ryu:** When I got to medical school in Chicago, I completed the first two science years in the classroom. Then, because I had developed this interest in health policy, I took a leave of absence and went across campus to law school. I graduated and then practiced for a year and a half in Los Angeles as a corporate healthcare attorney. Then I returned to Chicago to finish medical school and went back to Los Angeles to do my emergency medicine residency. Yes, it was a bit choppy, but somehow made sense at the time.

**You were later also in the White House, right?**

**Dr. Ryu:** Mostly that somehow you find your way to what you should be doing all along. I think it makes sense for people to follow their passion, even if it doesn’t always seem related to their ultimate goal. There is something about it that rounds you out. And it’s not just relevant for doctoring. It’s a good idea no matter what your profession.

**What has surprised you most about coming to Geisinger?**

**Dr. Ryu:** How deeply we are intertwined with our communities. That probably shouldn’t have surprised me, given where our campuses are located. There is something very powerful about our brand. It is almost universally and positively recognized in our service areas. Our people and our facilities are embedded into these communities in meaningful ways. It’s a different level of involvement than in a big city. There is something kind of cool about being so prominent within the community.
What else have you learned in your first year here?

Dr. Ryu: The breadth of expertise we have within Geisinger is incredible. We have tremendous education and research capabilities and innovations throughout the system, including in informatics, population health and many other disciplines. Clinically, we can do just about all of what you would see in a large academic medical center in a major city anywhere in the country. We have some of the best clinicians in the world working here. We have our own health insurance company.

In June you coauthored an article in the New England Journal of Medicine on the problem of long wait times for appointments. How do you see this issue being resolved?

Dr. Ryu: It is complex, because there are financial and structural issues that sometimes make it more challenging to provide top-notch access. But waits to see specialists and primary care providers have to be reduced. Long wait times can lead to patients not getting the services they need or getting them in less desirable sites, such as the ED or hospital. That’s why we are focusing on improving the process through which patients get into our clinics, so that we make it easier for them to get the care they need more quickly — and stay healthier.

What are some of those methods?

Dr. Ryu: Innovations like secure messaging, telemedicine and online scheduling can improve patient care. But it also requires human cooperation — on both the provider and the patient side. Patients have to be reassured that they can be safely and effectively seen by other members of the healthcare team or through channels other than traditional visits, when appropriate. Helping providers communicate with one another through tools like Ask-a-Doc is another. Anything that helps prevent hospitalizations is good for the patient and more satisfying for the clinician. There is no shortage of patients. If we can help our population stay healthier and focus on sicker patients, everyone wins.

How are issues of healthcare access being addressed at Geisinger?

Dr. Ryu: Our care teams work really hard, and we have to make sure that we support them with processes that make their jobs easier. Our primary purpose is to take care of people, whether we interact with them in person or via technology or as members needing our help in getting their care needs addressed. I think the future of healthcare is to be able to serve people without everything requiring a clinic or hospital visit. We have to make it easier for providers or caregivers to get a quick question answered, without an automatic referral for a visit. The goal is to deliver excellent care from an integrated, multidisciplinary care team, in a timely fashion and at a lower total cost.

What’s different about being in administration versus clinical practice?

Dr. Ryu: When you are a clinician, you have the opportunity to make an immediate impact on patients and their families. There’s something special about helping to solve a problem for someone who is having a very bad day. I’ve been able to get back into the emergency room for a couple of mini-shifts and it has just reinforced how rewarding that experience is. In administration, you can make an impact for a larger group of people, but it takes longer to see the results.

How do you like this area of the country?

Dr. Ryu: I guess I didn’t realize how close to many places we are. In big cities, it could be a couple hours’ drive just to get across town. If we drive that now, we can be in Philadelphia or Baltimore or the New York area. It’s really the best of both worlds. I think that may be the best-kept secret about Geisinger — big city proximity without big city hassle. My wife and daughters are enjoying it as well.

I’d encourage anyone who is considering Geisinger to come see us. It’s that simple. If candidates make a visit here, and see firsthand all these things that you and I have been talking about, I like our chances.
A champion for innovation

Former Pennsylvania Secretary of Health Karen Murphy joins Geisinger as chief innovation officer

As Geisinger’s new chief innovation officer and founding director of the Steele Institute for Healthcare Innovation, former Pennsylvania Secretary of Health Karen Murphy, PhD, is leading Geisinger’s healthcare improvement initiatives with a passion that goes back to the very beginning of her career.

“Finding new ways to improve health and healthcare delivery has been important to me ever since I started my career as a registered nurse in Scranton,” says Dr. Murphy, who began her new role at Geisinger in September. “From the beginning, I experienced firsthand that people in healthcare work very hard to improve patient care and patient experiences. That, however, is very difficult to do, given the delivery and payment systems that we currently operate under.”

Dr. Murphy has extensive experience in healthcare, from working with patients as an intensive care unit nurse at Moses Taylor Hospital in Scranton to serving as president and chief executive officer of Moses Taylor Health Care System. She also brings a big-picture perspective from her more recent roles at the state level.

Meeting public health challenges

After her time at Moses Taylor in Scranton, Dr. Murphy took on an even larger challenge in 2013 as director of the State Innovation Models Initiative. This $900 million Centers for Medicare and Medicaid Services investment aimed to spark healthcare innovation across the United States. The initiative partnered with 34 states, 3 territories and the District of Columbia. Covering more than 60 percent of the U.S. population, the project tested how these governments could use policies and regulations to improve care quality, lower costs and make residents healthier overall.

Two years later, she was tapped for the Pennsylvania secretary of health role. Under Dr. Murphy’s leadership, the department took on a number of public health challenges — from responding to the Zika virus outbreak and opioid addiction to improving rural healthcare and strengthening state vaccination requirements for children.

As for her passion for innovation, that has been fueled by education throughout her career. “I always have loved school and have been in school for most of my career,” she says, noting that her career path evolved when she took on increasing administrative responsibilities. “That’s when I knew it was important to match my healthcare knowledge with a business background.” Dr. Murphy holds a Bachelor of Science in Nursing and a Master’s and Doctor of Philosophy in Business Administration.

Shaping the future of healthcare

Under Dr. Murphy’s direction, the Steele Institute for Healthcare Innovation will find ways to transform healthcare delivery and improve patient experience, quality, efficiency and outcomes. She and her team will be working with people inside and outside of Geisinger, leveraging the system’s national brand to collaborate with thought leaders from around the country. “We also will bridge with other organizations to share what we learn,” she adds.

“We want to identify innovations that will result in meaningful improvements,” Dr. Murphy explains. “But I think it is going to require a very focused strategy, with the goal being to provide improved patient care at a lower cost.”

She says that her background in nursing and as leader of a health system has shown her that nurses will play a vital role at the forefront of the innovation process. “That means all types of nursing — public health nurses, home health nurses and nurses who work at the bedside,” she adds. “Nursing is a diverse profession at the very foundation of health and healthcare delivery. It’s also an extremely challenging role, regardless of what path you’re in. Working together with nurses on developing innovative approaches will not only improve health and healthcare delivery for patients, but also advance the experience and satisfaction of the nurses who are providing the care.”

Dr. Murphy says she welcomes the next phase in her career to shape the future of healthcare for the people who live in the area where she has spent most of her life: “Geisinger is a nationally recognized and respected healthcare organization, and I am excited to be a member of its leadership team.”
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A passion for

Kelly Alonzo, RN, OCN, cares for patients at the Frank M. and Dorothea Henry Cancer Center at Geisinger Wyoming Valley Medical Center.
Geisinger nursing looks to its future

Critical care nurse Colby Faust, BSN, RN, CCRN, was getting ready for his overnight shift at Geisinger Medical Center (GMC) in Danville on March 27, 2015, when he heard the news: A Pennsylvania state trooper had been severely injured at the scene of a car fire on Interstate 81 in Butler Township, Schuylkill County. A Life Flight® helicopter was rushing him to GMC.

“When I got to work, I found out Sgt. Robert Bemis would be my patient in the adult Intensive Care Unit,” recalls Mr. Faust. “He came up to his room early the next morning after eight hours in surgery. Over the next three days, I got to know Bob and his family as he began his recovery. I have so much respect for him — he was positive, he looked for solutions and he even kept his sense of humor.”

Sgt. Bemis, a 47-year-old police academy instructor and father of three, had planned to run a marathon in Philadelphia that weekend. Instead he faced a grueling 18-month marathon of recovery and rehabilitation due to the freak accident on the smoke-filled highway. A motorist veered and struck Sgt. Bemis’ parked cruiser, which slammed into him. “I had a spinal cord injury, broken bones, a collapsed lung and torn optic nerve — and those were just the major injuries,” he says.

The trooper and his family formed a close and long-lasting bond with Geisinger’s critical care nurses. His wife and son brought them chocolates from Hershey, Pa., and Pennsylvania State Police sweatshirts as thank-you gifts. After Sgt. Bemis left the hospital, the nurses kept tabs on him via text messages, communication with mutual friends and a surprise visit by Mr. Faust.

“Colby came to our home to see Bob that December,” says Tracie Bemis, Bob’s wife. “That meant so much to us. The nurses became like a part of our family.” Adds Sgt. Bemis, “When you’re at your most vulnerable and weakest, having such compassionate and kind people taking care of you and your family makes things much, much easier.”

Geisinger’s more than 6,000 nurses are like that — compassionate, caring and dedicated to their patients. (See the sidebar stories for additional glimpses of nurses’ dedication to their patients.)
Nationally recognized for their experience, knowledge, compassion and professionalism, Geisinger nurses deliver high-quality patient care every hour of every day. Now, two new initiatives here are taking nursing excellence to new heights.

In 2017, Geisinger launched a campaign to recruit more than 500 new nurses. In addition, the Geisinger Nursing Institute was established — one of the first at a U.S. hospital — to promote best nursing practices, champion career advancement and make wider use of the unique, firsthand expertise that nurses gain on the front lines of patient care. Geisinger announced the new institute in May, and planning began this fall.

“Nurses play a vital role for each and every patient,” says Susan Robel, RN, BSN, MHA, NEA-BC, CPXP, executive vice president and chief nursing and patient experience officer at Geisinger. “They are the expert caregivers, the communicators, the patient advocates, the calming voice, the familiar face, the hand-holders. It’s a passion for those filled with compassion.”

Nursing excellence at Geisinger shines in the stories of patients like Bob Bemis — and in the high ratings that thousands of Geisinger patients give their nurses in important areas such as communication and frequent in-room checks. Today, more patients than ever — roughly 73 percent — say they would recommend Geisinger’s hospitals to their loved ones and friends.

“Nurses are truly special people,” notes Denise Venditti, DNP, MHA, RN, NEA-BC, FACHE, vice president of Patient Experience for Geisinger. “We take care of people through the whole continuum of life, from birth through childhood, adulthood and the end of life. You can practice almost any kind of nursing that exists here; you don’t have to leave Geisinger to challenge yourself and grow personally and professionally. The possibilities are endless.”

Here are five innovations that set Geisinger nursing apart — and what they mean for patients and for nurses.

Recruitment: Listening to the voice of nursing

Dressed in their distinctive pewter-gray and white scrubs (for RNs) or royal-blue and white scrubs for LPNs (licensed practical nurses), Geisinger nurses may be best known for bedside care in the organization’s many hospitals in central and northeast Pennsylvania and New Jersey. (Nurses in pediatrics wear pale blue instead of white as a secondary uniform color.) But bedside care is just part of the story. Geisinger nurses work in a wide range of roles: in home healthcare and research, as Life Flight nurses and advisors for health plan members, in information technology and in highly specialized, advanced-practice areas involving surgery, anesthesia, neurology, cardiac care —
and more. Geisinger nurses have extraordinary opportunities for rich, rewarding careers with plenty of support for education, training and professional growth.

In the face of a nationwide nursing shortage, Geisinger has launched an unprecedented recruitment effort. It aims to bring new nurses to facilities in Bloomsburg, Danville, Shamokin, Harrisburg, Scranton, Wilkes-Barre, Lewistown and State College. This includes about 200 new nurses for Geisinger’s Central Region, another 150 for the Northeast Region, 75 for the Harrisburg area and 75 for State College area facilities. The positions offer a comprehensive benefits package, tuition assistance, professional certification support, advancement opportunities and hiring incentives. There is also a shared governance structure that gives nurses a strong voice in administrative decisions that affect their work. Out-of-state nurses may also receive relocation reimbursements.

“Geisinger listens to the voice of nursing,” Ms. Robel notes. “We pay attention to what they’ve learned and apply it for better patient care. Now, we’re using nurses’ experiences and opinions to attract the best, the brightest and the most experienced to work next to them at the bedside. When our nurses came up with solutions, we listened — and implemented what they had to say.”

One example: Geisinger adjusted its recruiting requirements in response to nurse feedback. RNs with less than 5 years’ experience who join Geisinger will now have 12 months, instead of 6, to enroll in a Bachelor of Science in Nursing (BSN) program, and they must complete their degree within 4 years. “Advancing education is part of our culture and of our commitment to the highest-quality patient care,” Ms. Robel says.

Commitment to training and education

For Teena Kubasti, RN, BSN, MBA, and her daughter, Nicole O’Connor, BSN, nursing at Geisinger runs in the family. “I came to Geisinger as an RN in 2010,” says Ms. Kubasti, who is now operations manager in the Neurology Department at Geisinger Wyoming Valley Medical Center in Wilkes-

Continued on page 15

Bonding with patients as people

Oncology unit, Geisinger Medical Center

Kelly Wesneski, RN, OCN, has cared for people with cancer on the oncology unit at Geisinger Medical Center (GMC) for 14 years. As an oncology-certified nurse, she loves her work and feels a special bond with her patients, who often spend many days in the hospital.

“Our patients become our families,” she says. “I like to find out what makes them happy. I try to take them out of the atmosphere they’re in.”

This past spring, Ms. Wesneski often talked with Constantine Goyne, 78, a truck mechanic from Exeter who was on the unit for several weeks during treatment for acute myeloid leukemia. She learned that Mr. Goyne’s granddaughter would be graduating high school while he was in the hospital. She sensed that he was sad about missing the event.

On the big day, “she came in and said, ‘Your granddaughter is graduating and you’re gonna see her graduate,'” Mr. Goyne recalls.

Ms. Wesneski explained that the unit has iPads that patients can use to read, play games or video chat. Her plan was to connect an iPad to a smartphone being held up at the graduation so that Mr. Goyne could watch it all live from his hospital room.

“I said, ‘That would be wonderful!’” he recalls. “She did all the work for it. I don’t know the first thing about computers.”

There was trouble connecting at first, but Ms. Wesneski discovered she could link to a web-based live stream of the event — just in time for the proud grandfather to watch as his granddaughter received her diploma.

“He was so happy. He felt like he was sitting right there,” says Ms. Wesneski, who took a video of Mr. Goyne’s delighted reaction for his family to watch later.

Mr. Goyne, who is now back at home, recalls the special nurse who made it possible. “She’s super,” he says. “She was a great nurse.”

Continued on page 15

Kelly Wesneski, RN, OCN, used an iPad to help her patient witness a much-anticipated family event.
Supporting patients after life-changing events

**Medical Intensive Care Unit, AtlantiCare Regional Medical Center, Mainland Campus**

At age 54, Bryon Haslam of Little Egg Harbor, N.J., had never been hospitalized before. This past March, thinking he just had heartburn, he dismissed his shortness of breath, chest pains and even advice from an Emergency Department doctor because he thought his problems could wait. His wife was scheduled to have surgery and would need time to recover. But his symptoms worsened until further delay was impossible, and his son called an ambulance. He was having a heart attack.

Mr. Haslam, who repairs commercial kitchen equipment, underwent cardiac catheterization at AtlantiCare Regional Medical Center,* Mainland Campus, in Pomona, N.J. One of his arteries had been completely blocked and the procedure opened it. “They saved my life,” he says. He soon found himself recovering in the Medical Intensive Care Unit (ICU), “I had time to calm down and finally reflect on the day,” he says. “As I laid there hooked up to everything, I got to thinking what had happened to me and how it just changed my life.

“I was getting a little bummed out,” he admits.

That’s when Kimberly Remlein, RN, BSN, entered the room. Ms. Remlein understands the shock that her patients sometimes feel after a traumatic health event.

“A lot of times they’re very stressed out with the environment and having this new diagnosis,” she says. “I try to remember that this might be someone’s first experience in a hospital — or it could be my loved one someday.”

Mr. Haslam says Ms. Remlein seemed to instinctively know how to brighten his spirits. “She has such good energy,” he says. They talked as she went in and out of his room and the conversations took his mind off his concerns. He appreciated that she thanked him for his service in the U.S. Navy and shared that her brother was a Navy veteran, too. In return, Ms. Remlein says, “He was always thanking us. It wasn’t necessary, but it was really nice of him.”

She says she wanted to be a nurse since childhood. She was a nursing volunteer and worked her way through nursing school as a nurse’s aide.

Something else drives her commitment as well.

“I first came to America from Korea when I was 4 and I was adopted into a good family,” she says. “I knew I wanted to do something in the health field. I feel like I’ve been so blessed, and my approach is to bless others if I can.”

After 10 years of nursing, Ms. Remlein finds ICU work the most rewarding. She speaks reassuring words to those she’s tending and asks if they need anything or want to share anything. Most of all, she is encouraging.

“You have to stay positive and have a good attitude for your patients,” Ms. Remlein says.

That certainly helped Mr. Haslam through a difficult time. “Kim was warm, compassionate, genuine and more. She made me really feel cared for,” he says. “It was like I made a friend that night. I’ll never forget her.”

* A Member of Geisinger
Below: Teena Kubasti, RN, BSN, MBA, and her daughter, Nicole O’Connor, BSN, are building their nursing careers at Geisinger Wyoming Valley Medical Center.

Barre. “In 2011, I decided to pursue my BSN. I faced financial challenges with two kids getting ready for college and time challenges fitting in work, family and school,” she says. “Geisinger helped me with tuition reimbursements, student loan forgiveness and even Foundation grants for my education. I was able to arrange my time so it all balanced. It worked so well that I went on to get my master’s degree in 2016, graduating from Misericordia University in the same academic year as my daughter.” (See the Philanthropy update section, page 44, for more information about the importance of nursing education support.)

Ms. Kubasti oversees patient programs in epilepsy and brain aging. The work is challenging and satisfying. She helped set up an outpatient program for people who’ve had low-risk “mini-strokes” called transient ischemic attacks (TIAs). “We help people take steps to prevent repeat TIAs and strokes,” she says. “It’s a big need in this area, with an aging population.”

After watching her mother’s career growth, Nicole decided to follow in her footsteps by studying nursing. Ms. O’Connor began working in the Intensive Care Unit at Geisinger Wyoming Valley this past summer. “It’s extraordinary to see her excitement and compassion,” Ms. Kubasti says.

Training and education set Geisinger apart as a destination for nurses, says Angelo Venditti, DNP, MBA, RN, FACHE, NEA-BC, chief nursing officer for Geisinger Northeast. “I was a paramedic after high school and came to work at Geisinger as a critical care nurse when I got my nursing degree,” he explains. “Geisinger helped me receive my master’s and doctorate degrees, with no student loans. I’ve moved into operational roles that I love. This health system has every opportunity you could ever want as a nurse.”

Partnerships with area colleges and universities allow Geisinger nurses to earn advanced degrees — or take the first step in their careers. The Geisinger Lewistown Hospital School of Nursing is Pennsylvania’s top-ranked RN program, with a 100 percent pass rate on the registered nurse exam for the past 5 years. Lewistown, The University of Scranton, Penn State Worthington Scranton, Bloomsburg University of Pennsylvania, Wilkes University, Misericordia and other institutions have teamed up with Geisinger to offer RN-to-BSN programs; some also offer Master of Science in Nursing (MSN) degrees. In addition, Bloomsburg University and Geisinger offer a joint MSN in Nurse Anesthesia Program that prepares nurses to become certified registered nurse anesthetists, or CRNAs.
“I love this field,” says Nurse Anesthesia Program Director Debra Minzola, PhD, MSN, CRNA, who is also an assistant professor at Bloomsburg. “My goal is to have every nurse in this program love anesthesia as much as I do. Nurse anesthetists are a vital part of the surgery team, collaborating with an anesthesiologist and providing one-on-one care throughout a procedure. That requires being ready at 5:30 or 6 in the morning and sometimes spending 8 or even 12 hours with one patient, then accompanying him or her into the recovery room.

“We are the patient advocate,” she adds. “Patients can be very anxious before surgery. Sometimes, at a patient’s request, we pray with them and even sing with them. I had a very frightened 9-year-old girl who told me she liked to sing. During the anesthesia induction, we sang Hannah Montana’s song *The Climb* together as she fell asleep. It was one moment I will never forget.”

The CRNA program takes 33 months but can elevate a nurse’s salary to $170,000 or more, Dr. Minzola notes. Program instructors are passionate and offer in-depth clinical training that attracts students from across the nation. “Program faculty and staff CRNAs work one-on-one in the operating room with our students. Geisinger provides numerous advanced surgeries for high-acuity patients. Our students are prepared to work anywhere when they graduate from our nurse anesthesia program.”

In addition to supporting degree opportunities, Geisinger provides access to high-quality training opportunities all the time, Dr. Angelo Venditti says. For instance, Geisinger covers the cost of achieving nursing certifications, including CCRN (critical care nursing), CMSN (medical-surgical nursing), NEA-BC (nurse executive, an administrative certification), CPN (certified pediatric nurse) and OCN (oncology certified nurse). “At some other hospitals, nurses pay up front and get reimbursed. Here, the review courses and exams are free to our nurses, so they can get the certifications that validate their growing skill set,” he says.

“Certification of the expert knowledge they have achieved in their specialty area of practice sends a message to patients that the nurses caring for them are committed to excellence,” notes Terri Bickert, DNP, RN, NEA-BC, vice president of nursing for education, Magnet and research. Between 2007 and 2014, the number of certifications earned by Geisinger nurses nearly tripled, from 222 to 650. In 2017, up to 54 percent of nurses at Geisinger hospitals had earned at least one professional certification.

For new nursing school graduates, Geisinger hospitals provide a yearlong residency program that meets once a month. “New nurses learn skills like talking to the families of seriously ill patients,” Dr. Venditti says. “They learn from more experienced nurses in the room as well as from instructors.”

On-the-job education never stops for nurses, and Dr. Venditti is working on innovative ways to make ongoing educational requirements a cinch to attain. “Nurses have to keep their cardiopulmonary resuscitation (CPR) credentials
Building relationships over time

Pulmonary Medicine Clinic, Geisinger Bloomsburg Hospital

Justine Robbins, a 52-year-old bookkeeper from Bloomsburg, has a hereditary type of chronic obstructive pulmonary disease, or COPD, so she uses oxygen to help her breathe more easily. Despite the oxygen, several months ago she found herself struggling for air.

Using the myGeisinger electronic health record portal, Ms. Robbins sent a message to Lynn M. Bingaman, BSN, MSN, CRNP, a nurse practitioner (NP) in pulmonary medicine at Geisinger Bloomsburg Hospital. Ms. Bingaman has been helping her manage the breathing disorder for about two years.

“She told me to come in right away,” Ms. Robbins recalls. That quick response reflects Ms. Bingaman’s commitment to caring for patients over months and years and understanding what they need. That’s especially important for chronic lung conditions such as COPD.

“My patients and I get to know each other over time. They appreciate me and I appreciate them allowing me to be part of their lives and take care of them,” Ms. Bingaman says.

Based on her examination of Ms. Robbins, Ms. Bingaman might have sent her to the Emergency Department (ED) in the past. But now there was a better choice for lung and breathing problems: Geisinger Bloomsburg Hospital’s new Acute Care Treatment (ACT) clinic. The ACT clinic treats patients having a severe episode of breathing problems related to COPD, heart failure or other conditions. Following therapy there, Ms. Robbins felt better and went home. She returned for follow-up with Ms. Bingaman in the pulmonary clinic two days later, but her breathing trouble was back.

“By the time I got there, I couldn’t breathe at all and I almost collapsed in the office. It was a very scary time for me,” Ms. Robbins says.

She was treated in the ACT clinic again. It turned out that a viral infection was causing the breathing difficulty, so she was hospitalized for two days. Later, she thanked Ms. Bingaman and the ACT staff for their help.

“I have faith in her and how she is managing my care. I feel very comfortable with her,” says Ms. Robbins.

As an NP, Ms. Bingaman enjoys the relationships she builds with patients as well as working on a team with other NPs, physician assistants and physicians.

“The good thing about being a nurse is there are so many different avenues of work,” she says. “When I first thought about being a nurse, I didn’t realize all the different jobs that you could do.”

Marks of quality: Magnet status and the Geisinger Nursing Institute

Both Geisinger Medical Center in Danville and AtlantiCare Regional Medical Center, A Member of Geisinger, in Atlantic City, N.J., are among only 6 percent of hospitals in the United States to earn Magnet status more than once from the American Nurses Credentialing Center. This prestigious designation is based on the medical centers’ proven track records in areas such as nursing leadership and nurse contributions to healthcare practices, evidence-based innovations and outcomes for patients. These two medical centers are currently applying to renew this designation. Geisinger Wyoming Valley Medical Center will also complete the application process in 2018, Dr. Bickert says — and Geisinger is using Magnet principles in all inpatient settings.
“The Magnet principles of professional development, education, research and clinical excellence are part of our nursing foundation across all Geisinger settings, though,” says Dr. Bickert. “It’s well documented that nursing care at a Magnet facility is at a higher level. That’s great news for patients and for nurses looking for a great place to practice.”

Although still taking shape, the new Geisinger Nursing Institute will contribute to this work, says Dr. Bickert, who serves as cochair with Sue Robel. The broad vision is to make Geisinger’s nursing excellence “brand” consistent in all locations. “Geisinger is a very large organization with nurses working in a variety of settings,” Dr. Bickert explains. “The goal of the institute is to connect nurses so they can collaborate to improve patient care even more. Nurses can share practices that are based on evidence that may be new to other nurses. They can also share patient feedback. The institute will transform patient care.”

According to Ms. Robel, Geisinger is one of the few health systems in the nation to take this approach. “The Nursing Institute really sets the tone by placing the highest value on nursing practice. It says to nurses that your voice, your education and your professional growth are very important here. You can partner with institute leaders to make your work environment the best it can be.”

Patient satisfaction:
The power of whiteboards, rounding and more

Every day, Geisinger nurses use five simple strategies aimed at improving the patient experience. Collectively known as the “nursing bundle,” these actions include: 1) regularly updating whiteboards with important patient information in every hospital room; 2) using C.I.CARE (Connect, Introduce, Communicate, Ask and Anticipate, Respond, End with Excellence) to communicate clearly and compassionately with patients at all times; 3) making purposeful hourly checks on patients (called hourly rounding) focused on meeting
Jan Lukashunas, RN, CEN, CSRN, has a job that could be described as part nurse, part teacher and part coach. As a health manager with Geisinger Health and Wellness, part of Geisinger Health Plan, she helps people with diabetes get their condition under control and live more healthfully.

“It’s hard for people to adapt to the changes needed after a diabetes diagnosis, but, she adds, “I make them aware I will be right there with them, every step of the way.”

Mrs. Lukashunas, who works at Geisinger Frackville, is one of about 25 health managers seeing patients in Geisinger-owned clinics and community practices. Patients are referred to her by their doctors, other providers or family members. They can also refer themselves.

In their first health manager meeting, patients may be worried or uncertain about what having diabetes means, says Mrs. Lukashunas. She talks about their diagnosis, asks about their health goals and invites them to ask questions. She also conducts a comprehensive assessment of their medical and social situations, asking about other conditions they may have, their work, and whether they live alone or they shop and cook for a family.

Because many patients with diabetes don’t feel sick at first, she educates them about the potential long-term impact of the disease. Without medication or lifestyle control, it can lead to heart disease, stroke, nerve damage and more.

During sessions over time, Mrs. Lukashunas talks about healthy eating, explains what a diabetic diet is and how to follow it, and how to count and limit carbohydrates. She helps patients learn to check their blood sugar and advises them about increasing physical activity, which can lower weight and help control blood-sugar levels. She also makes recommendations about diabetes medications and dosing. When diabetes management and lifestyle adjustments are successful, some patients are able to decrease the amount of their diabetes medications or even stop taking them. Some also avoid the need for insulin.

Health manager sessions are designed to fit the patient. Some need help with meal planning. Others want to get more comfortable with performing the finger sticks needed to test blood sugar. The first meeting is usually conducted face-to-face during a medical office visit. After that, contact can be in person or by phone. There are also online resources and learning modules to reinforce the training patients receive from their health manager.

Through regular communication, “we build a mutual relationship and understanding,” Mrs. Lukashunas says. “And we celebrate each person’s victories and improvements.”
bedside nurses — to check on patients every day is being taken to new heights. “You can only make changes or affirm what’s working if your leaders know what patients are really experiencing,” says Greta Rosler, MSN, RN, NEA-BC, CPXP, director of Patient Experience at GCMC. “We’re finding ways to help the leaders make time for this, and it’s paying off. Last week a gentleman on our very busy medical/surgical floor had some issues with his care, but through rounding we were able to connect with him and he took the time to tell us that the nurses worked together like no team he had ever seen. He knew all of their names — a sign of great communication.”

Opportunities to grow, lead and make a difference
Janet Tomcavage, RN, MSN, chief population health officer for Geisinger, says her son often asks her, “Are you really a nurse, Mom?” Her current role puts her at the helm of Geisinger’s cutting-edge efforts to improve population health, with new energy focused on the social determinants of health in the communities it serves (see Community engagement, page 2). Ms. Tomcavage’s career began in 1981, when she came to Geisinger as a registered nurse and diabetes educator. “Even 36 years ago, Geisinger was giving nurses the chance to make big improvements in patient care,” she says. “I

Calming fears during a crisis

Cardiac Intensive Care Unit, Geisinger Medical Center
The last thing Lisa Hurley, 53, remembers before losing consciousness was being in the Emergency Department at Geisinger Medical Center in Danville. Hours later, she opened her eyes in the Cardiac ICU and saw her adult children crying. “I got so upset, it made my monitors go off,” says the Danville woman.

Those alarms brought Brian Supsic, RN, BSN, CCRN, running in. The nurse bent down close to her face and said, “Lisa, you had a heart attack but you’re doing fine. You have a breathing tube in and as soon as we can, we’re gonna get that out for you.”

Even though the tube made her unable to speak, Ms. Hurley was calmed by Mr. Supsic’s explanation.

She had no memory of having had a heart catheterization procedure to open blocked vessels in her heart and restore its function — nor of Mr. Supsic bringing her up to the ICU afterwards.

“I was still groggy but I remember what he told me,” says Ms. Hurley, who worked in housekeeping at GMC at the time. “I had tears rolling down my face. He was a kind voice, somebody who really took his job to heart.”

She recalls Mr. Supsic carefully explaining to her children what was going on with her recovery progress. He also gave Ms. Hurley a step-by-step description of what would happen as her breathing tube was removed.

Mr. Supsic believes one of his most important tasks as a nurse is educating patients and families. “I don’t think I can overwhelm a patient or the family. I feel like the more knowledge they have, the more comfortable they feel about the situation,” he says.

He became a nurse six years ago. His sister and mother were nursing assistants in a nursing home. From them, Mr. Supsic heard “really touching stories” about relationships they built with their patients.

Thinking about the care he gave Ms. Hurley, he says, “I was the lucky person to be there when she needed somebody.”
helped to start a new clinic for pregnant women with gestational diabetes. And in conjunction with the endocrine department, I started a program for people using a brand-new diabetes technology: the insulin pump. Back then, patients would call me on the phone one night a week with their blood glucose levels and I would write them all down in a logbook. Today that all happens digitally.”

Through the years, Ms. Tomcavage used Geisinger education benefits to earn her MSN degree. She became a director at Geisinger Health Plan, then oversaw a new Medicare-focused care program and developed new services for health plan members with special needs. “Eighteen months later, I was promoted to vice president of the health plan,” she says. “I expanded my scope to population health — another of the awesome jobs I’ve had here. Geisinger supported me all the way, with education, training, great mentors and lots of chances to learn and grow. And now I am giving back, working as an adjunct faculty member at Misericordia to support the development of new roles in nursing.”

Her journey is just one example of the opportunities Geisinger offers nurses to shape care beyond one-on-one encounters with patients. For nurses ready to step into leadership positions, Geisinger offers a Nurses Emerging as Leaders Program that makes a difference. “We completed research on the program and studied its effectiveness. We found that graduates of the program were more successful as new leaders,” notes Greta Rosler, who developed the program. “It’s a prime example of how Geisinger supports nurses. They attend the program one day a month instead of reporting to their regular job and receive all leadership development materials, books and resources, and most importantly, the camaraderie of being part of a cohort of growing nurse leaders.”

“Another example is Geisinger’s nursing councils, which give nurses a voice in patient care and involve them in research and healthcare innovation,” Dr. Bickert notes. In particular, the Nursing Research Council helped to double the number of nurse-led research studies at Geisinger between 2013 and 2017. Nursing research projects have led to shorter waiting times at Geisinger clinics, fewer patient falls and a reduction in ventilator-associated pneumonia in intensive care.

“That’s the value of nursing input,” Ms. Robel says. “Geisinger listens to nurses because we know our patients will be healthier, safer and more satisfied as a result.”
aura Papi, CRNP, a nurse practitioner at Geisinger Mt. Pleasant in Scranton, recently faced a challenging situation involving a patient with ALS (amyotrophic lateral sclerosis), a progressive condition that affects nerve cells in the brain and spinal cord. He was completely dependent on his family and caregivers for basic activities of daily living.

“The patient clearly stated to several providers that he did not wish to be a burden on his family and did not want to depend on medical technology for the rest of his life,” she recalls.*

The patient had even signed a Pennsylvania Order for Life-Sustaining Treatment (POLST) form to decline life-sustaining treatments such as medically assisted hydration (liquids) and nutrition. But family members demanded that he keep receiving treatment.

Mrs. Papi turned to the Ethics Advice and Consultation Service, which since 2012 has been connecting providers and patients with bioethics consultants at Geisinger who can help them navigate difficult situations. The consultants are trained in both clinical ethics and conflict mediation. They are available 24/7 to provide informal, confidential advice or to conduct formal interventions, such as meetings between family members and healthcare providers.

In this case, the Ethics Advice and Consultation Service supported Mrs. Papi and her colleagues in doing what they already knew was their obligation: to honor their patient’s informed refusal and provide for his comfort.

*Some details of this and other stories have been changed to protect patients’ privacy.
“It is my ethical and moral duty to put my patient first and fulfill his wishes for end-of-life care,” says Mrs. Papi. This meant helping the patient’s family understand the importance of honoring their loved one’s wishes.

Geisinger clinical ethicist Dan Hoegen, MSW, says that the ethics consultation service commonly faces scenarios like this one. Regardless of the details, he adds, no patient, family member, doctor or nurse should ever feel alone when confronting a difficult healthcare decision. And Geisinger is here to help.

**Figuring out what “should” or “ought to” happen**

What should happen when a treatment recommendation conflicts with a patient’s ethical, cultural or religious beliefs? How can patients and their families decide when life-prolonging measures, such as feeding tubes or ventilators, ought to be started or stopped? And what if a patient decides to reject a particular treatment plan?

Almost any healthcare encounter can lead to questions regarding the type or extent of care that is appropriate for a patient. Even in situations involving routine care or treatment, unique circumstances may cause patients, family members or providers to pause and ask, “What should we do now?”

Not all ethical questions have to do with end-of-life decisions. For example, should a mother who had multiple C-sections be allowed to choose vaginal birth, even if her care team feels it’s too risky? Should a patient who tests positive for an inherited genetic mutation that increases the risk of a certain disease be required to share this information with family members? Should a physician move ahead with treatment even if he or she suspects a patient can’t fully comprehend its possible risks and benefits?

“Anytime you hear the word should or ought in the realm of medicine, you know you are in the neighborhood of an ethical question. And the answer to questions regarding what we ought to do should be the product of an ethical analysis.”

Geisinger has long been known for excellence in clinical care and the patient experience. But like many older hospital systems in the United States, it operated for more than a century without a formal bioethics division. About two decades ago, bioethics committees formed at Geisinger Medical Center and Geisinger Wyoming Valley Medical Center, and they have met regularly over the years. But more recently, medicine, research and technology have become increasingly complex, making medical decisions more complicated — and often more urgent. Geisinger recognized the need to create a system for providing reliable, skilled advice to providers and patients who are grappling with ethical questions.

“Given the expansion in Geisinger’s clinical and research programs, hospital leadership gradually recognized the need for a more comprehensive ethics program, led by a proven leader in the field,” says Greg Burke, MD, Geisinger’s chief patient experience officer. “Dan Davis has a track record of promoting compassionate, professional and ethical medical care for patients and their families.”
When Dr. Davis joined Geisinger 5 years ago, he brought with him more than 20 years of experience in bioethics, including positions as senior advisor for bioethics and policy with the National Institutes of Health’s Office of Science Policy and executive director of the President’s Council on Bioethics. He has been working to build a strong bioethics program here to guide both patient care and research. Dr. Davis also directs the Center for Translational Bioethics and Health Care Policy with a faculty engaged in bioethics education and research as well as clinical service.

Creating the roadmap for patients and providers

Over the past few years, Dr. Davis and his team have been crafting the policies and guidelines that patients, doctors and other clinical staff can rely on when making difficult ethical decisions. This has been no small feat, given that Geisinger has 13 different hospitals that cover diverse geographical regions.

“While it’s important to have a consistent approach to ethical issues throughout Geisinger, it is also necessary for us to acknowledge that each of the 13 hospitals has its own culture and traditions — and to be respectful of those,” Dr. Davis says. “I’ve been careful not to build a lot of bureaucracy and restrictions. Instead we have been developing a uniform yet flexible system that is responsive to the needs of all patients and their families, and of their clinicians as well.”

Dr. Davis and his team are hard at work on The Geisinger Handbook of Practical Ethics in Healthcare, which all healthcare providers will be able to carry or consult online. Scheduled to publish within the next several months, the handbook will include policies and guidelines that every provider can use when facing a situation that raises an ethical issue.

Policies are rules that every provider must follow exactly. Take the example of brain death, in which all brain function stops and cannot be reversed. Geisinger has a policy for determining when this has happened. “When doctors suspect brain death, they must follow a specific set of steps to confirm that it has in fact occurred,” Dr. Davis says. “It is my job every year to make sure that this policy is updated and reflects changes in research around the world, as well as changes in the recommendations published by professional societies.” Other policies define how and when to withhold or withdraw life-sustaining treatment, and what to do when patients cannot make decisions for themselves.

Guidelines, notes Dr. Davis, are more educational and informative in nature.

“Guidelines are intended to inform a clinician’s response to a situation and provide ‘guardrails’ for responding to the needs of patients,” says Dr. Davis. Guidelines can be tailored to specific ethical conflicts and questions, and therefore are not as rigid as policies. For example, care providers need guidance with challenges such as disclosing medical errors, conducting family meetings and helping patients with advance care planning. “We’re in the midst of formulating guidelines to help clinicians navigate situations in which patients refuse treatment or care by a clinician because of his or her race, ethnicity, religious affiliation and so on,” Dr. Davis adds.

When a conflict or question isn’t easily resolved by a policy or guideline, clinicians or patients can request help from the Ethics Advice and Consultation Service, as nurse practitioner Maura Papi did. And this points to another key Geisinger policy: No staff member can be reprimanded or retaliated against for initiating an ethics consultation. Staff and patients must always feel free to call the ethics office with

Research ethics at Geisinger

Scientific research helps improve the safety and quality of healthcare, but it can raise ethical questions. Jennifer Wagner, PhD, and Michelle Meyer, PhD, work with Dr. Davis to ensure that the highest ethical standards are applied to the design of all research at Geisinger. Areas of focus include designing consent forms for patients participating in clinical trials, protecting the privacy of patient-related data and handling results of genetic testing.
potential issues or concerns — even if they simply want to ask a question.

“About 60 to 70 percent of the calls we receive are for informal advice,” says clinical ethicist Dan Hoegen. “The vast majority involve questions that can be addressed in a fairly straightforward fashion: What are the criteria for establishing whether a patient is capable of making a decision? How can a POLST form be revised? At what age should we seek assent from a child who is about to undergo a procedure? The remaining 30 to 40 percent lead to a formal consultation — usually a meeting facilitated by the clinical ethicist and involving the patient, the patient’s loved ones and the healthcare team.”

Dr. Davis and Mr. Hoegen handle all requests in close cooperation with clinicians at Geisinger’s hospitals and outpatient clinics. Because the need for advice is often urgent, they try to respond to requests within 10 minutes. The service is logging around 300 requests per year.

Increasing awareness at the local level

Bioethics committees at several Geisinger hospitals also meet regularly, with the aim of improving clinicians’ ability to handle ethical issues. Dr. Davis or Mr. Hoegen attends each meeting to alert providers to new policies or guidelines on the horizon. Providers often share examples of what they’ve faced with patients and families.

“Our committee, like most, has representatives from a range of subspecialty services,” says Laurie Loiacono, MD, a critical care surgeon in Scranton who chairs the bioethics committee at Geisinger Community Medical Center (GCMC). “We try to ensure that a range of viewpoints are represented.”

Each month, Dr. Loiacono guides her colleagues in a discussion of at least one situation involving a patient who presents a challenging clinical issue. Afterward, providers take turns discussing more general ethical topics — ranging from questions surrounding organ donation, to decision-making on behalf of patients unable to make their own healthcare choices, to responding to patients asking for unproven treatments. Her committee also plans community outreach efforts, such as presentations on advance directives and living wills. These documents give people the
power to put in writing what types of medical care they do and do not want if they become critically ill.

Dr. Loiacono stresses that the scope of bioethics extends far beyond end-of-life issues. “In the ICU, where I do most of my work, approximately 5 to 10 percent of patients will not survive,” she says. “So that means the majority are going to survive. To assume that bioethics mainly pertains to end-of-life decisions would be really short-sighted. Many of my patients are unconscious when important decisions about their treatment need to be made. This can raise ethical issues and significantly increase the complexity of medical decision-making.”

Bioethical discussions help patients, family members and clinicians arrive at decisions that they can feel comfortable with medically, personally and ethically, she adds. “Life doesn’t come with a roadmap,” says Dr. Loiacono, “and the value of these meetings is that they help us understand how we can make sense of challenging human situations. Just because we can do so many things in medicine doesn’t mean that we necessarily should do everything that is technologically possible.” (See the sidebar for an example of a recent situation that Dr. Loiacono and her colleagues faced.)

Committee meetings also give clinicians opportunities to learn about patient situations that may be unique to their region. “My colleagues have had experience working with a large Amish community in our area,” says John F. Pagnotto, DO, director of the Geisinger Home Health and Hospice Program in Lewistown and chair of his local bioethics committee. “Members of the Amish community don’t use electricity and have travel and other restrictions that can pose challenges. One community member in her 70s recently came to our hospital with heart failure and very bad sleep apnea. We were worried about how we were going to treat her, since she doesn’t use electricity. We had to do research and work with the family, but in the end we discovered that we could provide the patient with necessary treatment using a generator, which is permitted by her community.”

Dr. Pagnotto says committee members benefit from discussing challenging ethical issues. For example, one clinician recently told the story of

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Reaching agreement through a bioethics consult at Geisinger Community Medical Center

An elderly man with chronic lung disease and advanced cancer was admitted to GCMC’s Intensive Care Unit (ICU) with acute respiratory failure that required the use of a ventilator, a machine that pumps air in and out of the lungs. The patient also couldn’t think clearly enough to make his own medical decisions. After several unsuccessful attempts to wean the patient from the ventilator, the medical team determined he was likely to be on it for the rest of his natural life if medical support were continued.

“The patient’s cancer was terminal and he was clearly dying, but he had not previously discussed end-of-life wishes with his family,” says ICU physician Laurie Loiacono, MD.

The medical team agreed that continuing treatment would not change the patient’s outcome and proposed that his family limit aggressive treatment and consider a do-not-resuscitate order and hospice care. The family declined and asked for continued medical support, including additional vitamin therapy and intravenous feedings, which they believed would make the patient stronger.

“We understand and empathize with families who are struggling with their beliefs regarding life and death,” says Dr. Loiacono. “We knew the patient would not survive, even with ongoing treatment. The consensus of the medical team was that continued aggressive care would not preserve the patient’s life, but merely prolong the dying process.”

The Ethics Advice and Consultation Service arranged a meeting between the team members and the family to begin a discussion of what the patient’s wishes might be if he were able to participate in his care.

“As a group we discussed how to help the family make decisions that would spare their loved one from treatments that might cause more pain or prolong his distress,” says Dr. Loiacono. The group also talked about how to make decisions that would honor what the patient would have wanted. Ultimately, the family shifted the care goals from active treatment to comfort care through hospice.

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Dr. Loiacono stresses that the scope of bioethics extends far beyond end-of-life issues. “In the ICU, where I do most of my work, approximately 5 to 10 percent of patients will not survive,” she says. “So that means the majority are going to survive. To assume that bioethics mainly pertains to end-of-life decisions would be really short-sighted. Many of my patients are unconscious when important decisions about their treatment need to be made. This can raise ethical issues and significantly increase the complexity of medical decision-making.”

Bioethical discussions help patients, family members and clinicians arrive at decisions that they can feel comfortable with medically, personally and ethically, she adds. “Life doesn’t come with a roadmap,” says Dr. Loiacono, “and the value of these meetings is that they help us understand how we can make sense of challenging human situations. Just because we can do so many things in medicine doesn’t mean that we necessarily should do everything that is technologically possible.” (See the sidebar for an example of a recent situation that Dr. Loiacono and her colleagues faced.)

Committee meetings also give clinicians opportunities to learn about patient situations that may be unique to their region. “My colleagues have had experience working with a large Amish community in our area,” says John F. Pagnotto, DO, director of the Geisinger Home Health and Hospice Program in Lewistown and chair of his local bioethics committee. “Members of the Amish community don’t use electricity and have travel and other restrictions that can pose challenges. One community member in her 70s recently came to our hospital with heart failure and very bad sleep apnea. We were worried about how we were going to treat her, since she doesn’t use electricity. We had to do research and work with the family, but in the end we discovered that we could provide the patient with necessary treatment using a generator, which is permitted by her community.”

Dr. Pagnotto says committee members benefit from discussing challenging ethical issues. For example, one clinician recently told the story of
an elderly patient with end-stage heart disease that required a defibrillator and pacemaker. Although the patient was clearly dying, his daughter was deeply conflicted about turning off her father’s defibrillator (a device that delivers a shock when it detects a dangerously irregular heartbeat). After discussing this situation, the committee agreed that the defibrillator was actually harming the patient. They believed that, if given more detailed information, the patient’s daughter would come to understand that stopping the device was in her father’s best interests.

“Sometimes patients don’t understand their rights or they don’t have quite enough information to make their own decisions,” says Dr. Pagnotto. “And sometimes it is very difficult to get everyone on the same page. We are now using telemedicine more often in palliative care to help to promote communication among all of the clinicians, nursing staff, and patients and family members — so that we can all make informed choices.”

Dr. Pagnotto, who is also involved with the results committee for the MyCode® Community Health Initiative, notes that new discoveries about the connections between disease and genetics are creating more ethical questions.

“Genetic testing is opening up a whole new arena for bioethics,” says Dr. Pagnotto. “Sometimes the results of testing for one disease may unexpectedly reveal an individual’s predisposition for another condition — let’s say, for example, cancer. Sharing this information and helping the patient decide whether to act on it involve complex decision-making.”

Patients and family members throughout Geisinger can expect to have more opportunities to learn about MyCode and genetic testing, the importance of family discussions surrounding end-of-life wishes, advance directives and many other important ethical topics. Over time, Dr. Davis and his team plan to expand community outreach efforts and develop educational presentations to help area residents feel more comfortable with challenges surrounding complex medical decisions.

“Ultimately, our aim is to cultivate an ethical environment at Geisinger in which anyone and everyone feels enabled to address inevitable — and in some ways, unavoidable — ethical problems and conflicts in healthcare,” says Dr. Davis. “Bioethics is an integral part of quality healthcare. And caring, which is a core concept at Geisinger, encompasses not only compassion and effective communication, but also thoughtful, ethically valid and defensible decision-making with, for and on behalf of all of our patients.”

Contacting the Ethics Advice and Consultation Service

The Geisinger Ethics Advice and Consultation Service is available 24/7 to provide informal, confidential advice or to conduct more formal interventions such as meetings with family members and healthcare providers. Our professionals are trained in clinical ethics and conflict mediation.

Patients and family members should contact the service at the following locations:

- Geisinger Bloomsburg Hospital
  570-988-5033
- Geisinger Medical Center (Danville)
  570-988-5033
- Geisinger Lewistown Hospital
  570-988-5033
- Geisinger Community Medical Center (Scranton)
  570-973-0805
- Geisinger Wyoming Valley Medical Center (Wilkes-Barre)
  570-973-0805

Providers may request a clinical ethics consultation through Epic or by paging 4192.
Designing for patients
Better care experiences are built on listening to customers
By Robin Warshaw

Bill Wohlrob, 81, was wowed when he first entered his providers’ new offices at the AtlantiCare Health Park – Manahawkin Campus. “I was impressed by the aesthetics. The garden is out of this world,” he says. “And the parking lot is humongous!” Mr. Wohlrob admired the interior colors, the café and comfortable seating with phone-charging outlets.

Yet the outpatient facility, which opened on June 29, is more than just a pretty building. AtlantiCare, A Member of Geisinger, designed its new location to work better for patients. It speeds check-in with a fingerprint scan and eliminates clipboards and repetitive forms. This cuts down on wait times. Phones are answered in a back office so staff in the welcome area can focus on patients.

Patient-centered design, such as that used at the Manahawkin facility and at other locations throughout Geisinger, creates healthcare settings that provide choices, convenience and comfort. The concept is changing everything from outpatient clinics to hospitals. Spaces are open and easy to navigate. Designs and floor plans foster better communication among patients, physicians and other staff. Paperwork and processes are streamlined. There are amenities you might expect to find in a hotel lobby — but not in the average medical office building.
Above all, patients are treated as customers. At the AtlantiCare Health Park – Manahawkin Campus, which includes an AtlantiCare Urgent Care Center in a nearby building, that’s clear right away. “When you walk in, the people at the front desk have great personalities,” says Mr. Wohlrob, a retiree who lives in Barnegat, N.J. “You can tell they have a caring attitude, to make sure you’re comfortable coming there whether you’re a new or old patient.” He points out that the front desk staff helped him register for the electronic check-in system at his first visit: “I thought that was great!” Mr. Wohlrob is a patient of AtlantiCare Primary Care Plus and APG Specialty Care, which he’d visited at other locations prior to their opening in the park.

Before even starting the project, AtlantiCare’s Manahawkin planning team asked local residents and patients, as well as providers and staff, about their experiences and what they’d like to see in the new facility. That helped to shape some of the main building’s key features, from open social areas to the ability to complete a blood draw and the check-out process right in the exam room.

Once a large supermarket, the long-vacant building was gutted and reimagined. The location is ideal, on a main road between the Garden State Parkway and Long Beach Island. Patients and family members enter through a spacious area crowned with a wavy baffle ceiling that gives the feeling of ocean waves. Blues and grays on walls and furniture echo the seaside location. Paintings, photographs and sculptures from AtlantiCare’s Healing Arts Program help calm spirits and lower stress. And much of the space is filled with natural light.

“It’s a privilege to deliver care to this community,” says Melissa Achey, Manahawkin site director. “The people who live and work here and visit this region deserve something wonderful.”

Patients who need to see multiple providers can now access them in one place. The building brings together a wide range of medical services, including specialties such as primary care, cardiology and cardiac diagnostics, general and bariatric surgery, obstetrics and gynecology, as well as laboratory services and a community pharmacy. AtlantiCare’s clinical partner Rothman Institute Orthopaedics opened in October, and another partner for medical imaging, AMI, will open soon.

The main building also has a 2,200-square-foot meeting room for health education events and community groups. The new urgent care center, open seven days a week, is located in a nearby building that was once a pizza restaurant.

“The whole project has been designed around what the community needs,” says Jatin Motiwal, vice president of AtlantiCare Physician Group and Regional Network. “We focused on how we make patients feel when they come to seek care.”

Throughout Geisinger, we’re paying attention to how patients feel when they come to our facilities and how they experience their care. Patient-centered design is always top of mind in new construction and renovations. Turn the page for two additional snapshots of recent projects.
Geisinger Holy Spirit: Streamlining trauma care

Patients with major traumatic injuries might not realize what’s happening to them, but patient-centered design is essential for getting the right trauma experts and advanced technology to them quickly. Planners of a new Level II trauma center at Geisinger Holy Spirit realized this and were “deliberate” about designing the spaces and processes to accomplish that goal, says surgeon Dale Dangleben, MD, trauma medical director. “We built it from scratch, so we were able to take all the patient needs into account.”

Geisinger Holy Spirit’s new Trauma Unit, which opened in February, was designed as part of an Emergency Department expansion that added treatment rooms and created a secure behavioral health area. It was constructed as a two-story building with a rooftop helipad. Injured patients who are transported by helicopter are now whisked straight from the helipad to the trauma bay using the newly constructed elevator, instead of landing away from the hospital. Those brought by ambulance arrive right at the Trauma Unit entrance. The elevator also takes patients needing surgery right from the trauma area to the operating room.

The Trauma Unit is designed to give immediate attention to patients. Ceiling warming lights in each bay, or treatment area, keep patients comfortable. Digital X-ray equipment sends images immediately to a video screen. This real-time viewing saves time previously lost waiting for X-rays to be processed in another department and brought back for evaluation. The Trauma Unit also includes a blood refrigerator to provide vital transfusions in seconds. A CT scanner sits one door away, ready for use. “All these things contribute to better patient care and outcomes,” Dr. Dangleben says.

The center is geographically well-placed to put trauma care closer to many in the region. “The further west you go, the terrain becomes very difficult, so it takes time to transport patients” to existing centers, says Dr. Dangleben. With the addition of a new Level II trauma center at Geisinger Holy Spirit, as well as extra trauma staff, community residents who suffer serious or life-threatening injuries now can get help more quickly.
Geisinger Holy Spirit is the fifth Geisinger facility to receive adult trauma designation. Geisinger Medical Center in Danville has a Level I adult and a Level II pediatric trauma center. Geisinger Wyoming Valley Medical Center in Wilkes-Barre, Geisinger Community Medical Center in Scranton and AtlantiCare Regional Medical Center, A Member of Geisinger, in Atlantic City, N.J., all operate Level II trauma centers.

Accredited trauma centers must be prepared to treat the most serious life-threatening and disabling injuries. Both Levels I and II are required to provide the same level of medical care and expertise. However, a Level I trauma center also must perform research, have a surgical residency program and serve 600 major trauma patients per year. A Level II trauma center must serve 350 patients per year.

**Geisinger Eye Institute:**
**Smart design reduces wait times**

Geisinger Eye Institute faced both a challenge and an opportunity when it planned a move out of Geisinger Medical Center in Danville last year. The eye health center would be relocating to a new addition at the Geisinger Woodbine Lane Outpatient Clinic — doubling its size to 36,000 square feet. “We knew that if all we did was make this a large space, it wouldn’t be good for patients,” says Eye Institute Director Herbert J. Ingraham, MD.

Instead, the practice thought about how to make the new facility, which opened in November 2016, as patient-centered as possible. One innovation was to take the focus off a main waiting room. Many patients now go to pods, or smaller care sections, based on their specific diagnosis or situation. There are pods for glaucoma, cataracts, general optometry, newborn eye health and other needs. Pods have their own small waiting areas. Some patients even bypass waiting and go directly to examination rooms.

“From the time patients arrive, I want them to spend absolutely as little time in our waiting rooms as possible,” Dr. Ingraham says. That idea pleased a group of patients who were invited to review the plans before construction began.

Although more patients are coming to the Eye Institute now than when it was located in the hospital, it seems less busy because patients go right to the pods. The design includes natural light, more bathrooms and a children’s play area. “It has worked beautifully and has been something that patients have been very happy about,” says Dr. Ingraham.

Like the AtlantiCare Health Park in Manahawkin, the Geisinger Woodbine clinic is designed to bring much of the healthcare a patient might need under one roof in appealing, thoughtfully designed spaces. The expanded outpatient clinic, which was completed in early 2017, includes services such as podiatry, dermatology, family medicine, pediatrics, sports medicine, outpatient rehabilitation, pain management and outpatient surgery — many of which used to be housed inside Geisinger Medical Center. The clinic has ample parking plus a concierge service to help patients find their way.

Top: The entrance to the Geisinger Woodbine Lane Outpatient Clinic features easy patient drop-off and a covered entryway. Center: The Geisinger Eye Institute sends many patients to smaller waiting “pods” depending on their condition. Bottom: Help desks in Woodbine’s atrium offer assistance to patients as they enter the facility.

Photos: Josiah Lewis
New partnerships expand Geisinger’s services into north-central Pennsylvania

Geisinger and Highmark make plans to improve community-based care

“Geisinger and Highmark Inc. recently signed a letter of intent to create a clinical joint venture to provide high-value, high-quality, community-based care and greater patient choice for healthcare consumers and businesses.

The letter of intent enables Geisinger and Highmark to explore the joint venture in greater detail. The emphasis will be in north-central Pennsylvania, where the two organizations will explore creating a clinical network that is patient-focused, physician-oriented and community-based, with comprehensive access for Highmark and Geisinger Health Plan members, including those in Medicare Advantage Plans.

“Highmark and Geisinger are recognized and trusted names in healthcare, and we have long collaborated to provide our members with access to the high-quality care provided by Geisinger’s hospitals and physicians,” says Deborah Rice-Johnson, president of Highmark Health Plan.

“Our joint experience in care delivery and care management can help to advance value and affordability. Working more closely together, we can bring innovative, consumer-centered care models to the community.”

“We have been a trusted partner providing healthcare services to this region for decades,” says David Feinberg, MD, Geisinger president and chief executive officer. “Everything we do is about caring — for our patients, our members, our Geisinger physicians and employees, and our communities. What sets us apart is that we value kindness, excellence, learning and innovation. We are excited about this opportunity to work closely with Highmark to create superior value, enhance health and always put patients first.”

The initial focus of the joint venture will include the development of an innovative, high-quality, affordable model of care featuring a network of community-based sites, including a comprehensive health campus in the Montoursville area.

“The goal of this new facility will be to deliver important medical services and clinical capabilities in the local community that are complementary to the advanced tertiary services available at Geisinger Medical Center,” says Lynn Miller, Geisinger executive vice president and chief administrative officer for the Clinical Enterprise. “We are currently assessing community needs and levels of appropriate investment to meet those needs.”

“We are taking well-planned and appropriate action, such as this letter of intent with Geisinger, to help ensure that Highmark members and patients in the community continue to have access to high-quality, affordable care,” says Ms. Rice-Johnson.

“We are working with independent physician groups and community-based hospitals to ensure that consumers will maintain access to care in light of large provider system mergers.”
Geisinger locations in north-central Pennsylvania include physician practice sites offering both primary care and subspecialty outreach services in Montoursville and Lock Haven; a Geisinger Careworks urgent care facility in Williamsport; a pediatric specialty services practice in South Williamsport; a Geisinger Life Flight® helicopter base in Montoursville; and the new Geisinger Gastroenterology and Geisinger Endoscopy sites in Montoursville.

Jersey Shore Hospital joins Geisinger

The Pennsylvania Attorney General approved the integration of Jersey Shore Hospital and Foundation into Geisinger as of July 1. Leaders and employees of Jersey Shore and Geisinger gathered on July 10 for a celebration and welcome reception in Jersey Shore Hospital’s main lobby.

“We’re excited to welcome Jersey Shore to the Geisinger family,” says Dr. Feinberg. “Both organizations have a long history of caring for patients in north-central Pennsylvania and this new synergy will benefit those we are privileged to serve.”

“This is a tremendous opportunity for us,” says Geisinger Jersey Shore Hospital President and Chief Executive Officer David A. Shannon. “Geisinger is a health system that shares our commitment to putting patients first and ensuring local access to quality care. We’re eager to work collaboratively with Geisinger to enhance care delivery in our region today and into the future.”

Designated as a critical access hospital by the Commonwealth of Pennsylvania and the Medicare program, Geisinger Jersey Shore Hospital provides inpatient acute, emergency, outpatient and subacute care. For the past five years, the hospital’s Urgent Care at McElhattan has seen tremendous increases in patient volumes. Earlier this year, Jersey Shore Hospital was recognized by the Pennsylvania Office of Rural Health for excellence in patient satisfaction and outcomes, and was voted Best Hospital by the readers of the Lock Haven Express.

“Our goal is to achieve financial security and sustainability, preserve local jobs and build a strong base of engaged medical providers while maintaining our community- and patient-centered focus,” says Sean Simcox, Geisinger Jersey Shore Hospital board chair. “We are pleased to move forward with Geisinger to preserve and enhance healthcare in our community.”

“We have a great track record of working together to enhance care, expand population health, provide value and promote healthy communities in Bloomsburg, Shamokin and Lewistown. We look forward to doing the same in the Jersey Shore area,” says Geisinger Central Region Chief Administrative Officer Thomas Sokola.

Geisinger has operated physician offices in Clinton County since 1986 and in Lycoming County since 1994.
More antibiotics = Heavier kids?  
Geisinger study suggests a connection

By Sari Harrar

Taking antibiotics early in life could increase a child’s risk of being overweight or obese, according to a recent Geisinger Center for Health Research study of nearly 8,800 3-year-olds and their mothers. Kids who got 4 or more antibiotic prescriptions by age 3 — such as amoxicillin, azithromycin or cefuroxime — weighed more than those who didn’t get any.

“Parents should be aware that taking many courses of antibiotics is not necessarily harmless for children. There can be some negative effects,” says lead study author Melissa N. Poulsen, PhD, a postdoctoral fellow at Geisinger and at the Johns Hopkins Bloomberg School of Public Health in Baltimore, Md. “That said, antibiotics are important for treating many infections. So it’s a balance that parents should discuss with their child’s pediatrician.”

Antibiotics are a key treatment for common childhood infections caused by bacteria, such as strep throat and middle-ear, sinus and skin infections. But there’s growing evidence that these “wonder drugs” also change the natural balance of bacteria in the digestive system in ways that promote extra pounds. In this study, published in the February 2017 issue of the journal Obesity, Dr. Poulsen and a team of researchers at Geisinger and Johns Hopkins found that risk was greatest when children had numerous antibiotic prescriptions in the first few years of life and with antibiotics ordered before age 1.

“The human body, particularly the gut, is full of bacteria that help with digestion and the absorption of nutrients,” Dr. Poulsen explains. “These bacteria make up what is called the ‘microbiota.’ When we take an antibiotic, in addition to the harmful bacteria that make us sick, the drug can kill off the bacteria we need to maintain healthy digestion. Research has shown that repeated antibiotics can alter the microbiota permanently, changing the way it breaks down food and increasing the calories that are absorbed.”

With permission from the families in the study, the researchers analyzed the electronic health records of children born at Geisinger-affiliated hospitals and clinics between 2006 and 2012. The results highlight the power of the partnership between Geisinger patients and scientists for advancing health.

Among the key findings:
· Most kids got antibiotics. By age 1, 53 percent had been prescribed at least one antibacterial medication. By age 3, 82 percent had. About 4 in 10 children got 4 or more prescriptions — and 12 percent had 9 or more courses of antibiotics by their third birthday.
· Early antibiotics meant higher weight. The researchers looked at kids’ BMI (body mass index) — a measure of body fat based on weight in relation to height. They compared the BMI of groups of kids who received antibiotic prescriptions to those who didn’t get any. Four or more prescriptions at any point in their baby or toddler years increased children’s weight — and before age 1, more than 1 round had an effect. “The first year of life may represent a critical exposure period for antibiotics to alter children’s developing gut microbiota,” the study notes, though the relationship between antibiotics and BMI is not limited to this first year. The study looked at weight in large groups of children; Dr. Poulsen said antibiotics may affect individual children in different ways.
· Some common antibiotics led to more weight gain than others. The class of antibiotics most frequently prescribed in the study were penicillins (such as amoxicillin), followed by cephalosporins (such as cefuroxime axetil) and macrolides (such as azithromycin, clarithromycin and erythromycin). Compared to penicillin, getting two or more doses of a macrolide or...
cephalosporin carried a higher risk for a higher weight. Broad-spectrum antibiotics like macrolides harm beneficial gut bacteria more than penicillin does, the researchers note. Antibiotics taken by mothers during pregnancy did not increase children’s weight. In the past, some research has suggested a link, but this study did not find one.

**Using antibiotics safely and wisely**

This study strengthens the case for making sure that antibiotics are truly needed before giving them to very young children. Geisinger’s healthcare practitioners are part of a national effort to reduce the use of unnecessary antibiotics in children (and adults). The effort stems from concerns about antibiotic resistance but could have other health benefits. These steps can help:

**Protect your child from infections.**

Stay up to date with childhood vaccines. Breastfeeding and avoiding secondhand smoke exposure can help. Cut their risk for colds and flu (which can lead to bacterial infections) by teaching toddlers and older children to wash their hands regularly.

**Understand that colds, sore throats, earaches and coughs don’t always need an antibiotic.** Colds, flu, many sore throats and some middle-ear infections and bronchitis are often caused by viruses that will not respond to bacteria-killing antibiotics. When needed, your doctor will order lab tests to find an infection’s cause.

**Try “watchful waiting,” if recommended by the doctor.** For mild ear infections in some older children, your doctor may suggest medication to ease pain and fever and have you wait a day or two before filling an antibiotic prescription. During this time you’ll stay in close touch with the doctor’s office about your child’s symptoms.

If an antibiotic is prescribed, make sure your child takes all of it. Don’t skip doses, skimp or cut it short. Be sure your child receives the full dose for the full length of the prescription. “It is critical to make sure the child takes the whole course, even if he or she starts feeling better partway through,” Dr. Poulsen says. “Otherwise, the infection will not be resolved.”

It’s a cruel mystery: Diseases like cancer are complicated. Really complicated. No two cases are exactly alike: A tumor may be more or less aggressive, a medicine that helps one person may not help another. Two people with the same diagnosis could face very different outcomes. Scientists in Geisinger’s Biomedical & Translational Informatics Institute are at the forefront of new efforts to find out why. In a recent study that earned national attention, lead researcher Dokyoon Kim, PhD, and a team from Geisinger reported on the success of an advanced software tool called the Analysis Tool for Heritable and Environmental Network Associations (ATHENA). They used it to analyze interactions among gene pathways inside real ovarian cancer cells. The result? Looking at interactions helped to better explain the differences in how advanced and aggressive various tumors were than looking at just a single gene.

“For a few diseases, one gene is responsible. But more often, several types of genetic pathways are affecting each other," Dr. Kim says. “The problem in cancer research is that scientists often focus on one type of pathway. Some use DNA data to explain what’s happening. Others think other aspects of genetics are more important, such as the proteins produced with instructions from specific genes. What we know is that they interact. What we’re trying to do is integrate or combine different types of data to better explain disease.”

The study was singled out as one of the year’s best at a major 2017 conference of the American Medical Informatics Association.

ATHENA crunches enormous amounts of data. “It’s at the point where we need very high-performance computers or cluster computing or cloud computing to store and run the data,” says study coauthor Marylyn Ritchie, PhD, director of Geisinger’s Biomedical & Translational Informatics Institute. “We use hundreds of gigabytes all the way up to terabytes. That’s not much compared to the data that Netflix or amazon.com uses, but these are some of the biggest data sets in biomedical research.”

Dr. Kim and Dr. Ritchie chose ovarian cancer as ATHENA’s test because of how complex the disease is. Often discovered in later stages, after the cancer has spread beyond the ovaries, it is the most lethal reproductive system cancer for women. Tumors can contain a wide variety of genetic glitches, so treatments targeting a single gene may not help. This early study is not aimed in the future, systems like ATHENA could be used to identify people whose tumors in many different types of cancer have the same “molecular signature” — that is, similar genetic pathways at work — so researchers could look for treatments for tumors with those patterns. A similar process could help researchers develop more precise and personalized prevention and treatment plans from that kind of precision medicine," she notes. “But we know that finding important pathway interactions is important.” – S.H.

Living near an industrial animal farm may aggravate asthma

If you have asthma and live within a few miles of an industrial food animal production facility (IFAP) — whether swine or dairy/veal — are you more likely to experience flare-ups? It seems logical that you would, given the air pollutants and odors associated with high concentrations of livestock. Studies done in the U.S. to figure this out have involved only small numbers of people and/or relied on patients to report their symptoms. Brian Schwartz, MD, director of the Environmental Health Institute, was part of a team that recently investigated the impact of IFAPs on asthma in central and northeast Pennsylvania.

The institute is a joint effort between the Geisinger Center for Health Research and the Johns Hopkins Bloomberg School of Public Health in Baltimore. It focuses on how environmental and community conditions may influence the health of residents in Pennsylvania counties served by Geisinger. For this study, the researchers made use of the electronic health records (EHR) of people with asthma being cared for by Geisinger primary care practices. Their goal was to figure out whether patients living within three miles of an industrial food animal production facility were more likely to have episodes of worsening asthma, as documented in the EHR.

Of the 35,269 patients with asthma in the study area, just under 8,400 — about 24 percent — lived within 3 miles of IFAP facilities, which included 123 swine and 203 dairy/veal operations. The researchers compared them with groups of patients who lived farther away from IFAP facilities on three different factors:

- New orders for asthma medications (termed “mild flare-ups”)
- Emergency Department (ED) visits (“moderate flare-ups”)
- Asthma-related hospitalizations (“severe flare-ups”)

For the latter two categories, they also took into account how far patients lived from a Geisinger hospital. The researchers looked at new medication orders in the EHR from 2008 to 2012, and hospitalizations and ED visits from 2005 to 2012.

The study found that patients who lived within 3 miles of an IFAP facility were 11 percent more likely to have new medication orders and 29 percent more likely to be hospitalized. There was no effect on ED visits. The results suggest that Geisinger patients with asthma should be aware of any food animal production facilities in their area as a possible risk factor for flare-ups.

“The findings from this study, and our other study on the fracking industry’s contribution to asthma flare-ups, suggest that environmental and community conditions are important factors to consider as patients try to achieve control of asthma,” Dr. Schwartz says. “Patients can also work with their doctors to be vigilant about contributors to flare-ups and how these can be prevented.”

Since 2006, he and his colleagues at the Environmental Health Institute have been investigating the connections between environmental factors and health in rural Pennsylvania. In addition to industrial food animal production and fracking, their work has focused on abandoned coal mine lands and large animal feeding operations that use antibiotics in the feed. – K.C.

As public debate over healthcare costs has heated up over the past decade, care providers like Geisinger have partnered directly with major employers such as Lowe’s, Walmart and JetBlue Airways to find solutions. The goal? Replace the traditional fee-for-service model, which charges for each and every element of care a patient gets, with a system that rewards quality instead. The result so far has been a lower flat-rate cost for common surgical procedures, along with some other surprising outcomes: better care, lower out-of-pocket costs for employees and high patient satisfaction rates.

This spring, both Neurosurgery and Harvard Business Review (HBR) featured articles outlining the experiences of the Employers Centers of Excellence Network (ECEN), launched in 2014 by the Pacific Business Group on Health and Health Design Plus. The Pacific Business Group on Health includes large and jumbo Fortune 100 employers and public healthcare purchasers that provide health benefits for more than 10 million Americans. Geisinger Medical Center is one of the centers of excellence taking part in the program. Geisinger associates from neurosurgery, orthopaedics,
physiatry, psychology, internal medicine and nursing have all contributed to the program’s success.

Lead author Jonathan R. Slotkin, MD, director of spinal surgery at Geisinger’s Neuroscience Institute, says that while the publications have different audiences — neurosurgery practice leaders for the scientific journal, and business and healthcare organizations for HBR — the goal was the same for both: to share Geisinger’s experience so that others can benefit from it.

“We’re always learning, and we like to share our innovation and reengineering work internally across our system — and also with healthcare systems nationally,” says Dr. Slotkin. “It’s about taking the heart that we have as a system, where caring is the center of everything we do, and trying to help other organizations learn to project that same ethos onto their own populations.”

The appeal of the ECEN initiative is that employers who are directly purchasing the medical services don’t just want lower costs; they want providers to focus on quality of care instead of quantity. The effort began by setting high standards for healthcare providers to be designated as centers of excellence. The third-party administrator, Health Design Plus, negotiated preset flat rates, also called bundled payments, to cover 100 percent of medical and travel expenses for total joint replacement, spine and bariatric (weight loss) surgeries from start to finish. The average ECEN costs have been 10 to 15 percent lower than traditional fee-for-service medical bills. Plus, employees are given a choice: They can travel to a center of excellence for the procedure and have all their costs covered, including copays, or go to their local provider and pay the usual out-of-pocket costs.

As the articles point out, some provider systems were better suited for the rigorous center of excellence selection process. Geisinger, for example, already had extensive experience streamlining its spine surgery processes because of the team’s work on ProvenCare® Lumbar Spine (a project focused on defining best practices for lumbar spine surgery) and past involvement in Medicare’s bundled payments initiatives. Dr. Slotkin and Michael Haak, MD, from orthopaedic surgery, have been among the physician leaders of these initiatives.

The ECEN project keeps a careful watch on patient outcomes and satisfaction rates for the various surgeries, notes Dr. Slotkin. For example, Lowe’s compared its 2014 statistics for joint replacement surgeries between the ECEN program and traditional standard insurance programs. For patients who opted for surgery with their local health provider, 9.1 percent went to skilled nursing facilities afterwards. However, none of the ECEN patients required such care. Also, standard health plan participants had a 6.6 percent chance of being readmitted to the hospital within 30 days after joint surgery, compared to only 0.4 percent of ECEN patients. The company also saved about $1.3 million because the centers of excellence had a more rigorous process for assessing patients, helping to avoid unnecessary or inappropriate joint replacement surgeries.

In addition, the average Lowe’s associate who had joint replacement surgery at a center of excellence saved about $3,300 in copayments and other fees, compared to patients who got the same care under traditional insurance. One hundred percent of Lowe’s ECEN joint surgery patients reported that they would refer coworkers or family to the program for a similar surgery.

“Patient-reported outcomes are a critical part of the ‘secret sauce’ that makes these programs work for patients,” says Dr. Slotkin. “They also help Geisinger secure these contracts because it causes a mindset that we continuously examine our activities’ impact on patients. Without that rapid-cycle feedback, I don’t think an institution is nimble enough to do this.”

ECEN launched in January 2014 for hip and knee total joint replacement, and that program currently has participation by Walmart, Lowe’s and McKesson Corporation. The participating medical centers are Virginia Mason (Seattle, Wash.), Johns Hopkins Bayview (Baltimore), Kaiser Permanente Irvine Medical Center (California) and Mercy Hospital (Springfield, Mo.). In April 2015, ECEN started the spine program on behalf of Walmart, Lowe’s and JetBlue Airways. The participating sites in the spine initiative are Geisinger Medical Center, Virginia Mason and Mercy Hospital.

“This is exactly the type of innovative work that Geisinger has positioned itself to excel in over the last decade or more,” says Dr. Slotkin.


Patients with heart attack and stroke are getting younger and sicker, study finds

Research shows that 80 to 90 percent of patients with cardiovascular disease have at least 1 of 4 major risk factors: smoking, diabetes, high blood pressure and high cholesterol. Despite better public awareness of these risks and advances in treating them, a new Geisinger-led study suggests that patients diagnosed with heart disease and stroke tend to be younger and sicker than in the past.

Shikhar Agarwal, MD, an interventional cardiologist at Geisinger Medical Center in Danville, notes that the study was based on what he and other colleagues have been observing in their own patients. "In my practice, which involves treating people with heart attacks, I noticed that not only are they getting younger, but their characteristics, including their risk factors and co-morbidities [related health conditions], are becoming more complex." When he shared this observation with his peers outside Geisinger, they had similar impressions.

Dr. Agarwal and his colleagues at Cleveland Clinic, Rutgers New Jersey Medical School in Newark, and Mount Sinai St. Luke’s Hospital in New York analyzed the risk profiles of patients throughout the U.S. treated for acute myocardial infarction (or heart attack) or acute ischemic stroke between 2003 and 2013. They used information from the Nationwide Inpatient Sample database, which collects discharge data from about 8 million hospitalizations at approximately 1,000 U.S. hospitals each year. The study included 1,360,660 patients with heart attack and 937,425 patients with stroke.

They found that patients with cardiovascular events have gradually been getting younger. For example, in 2003, more than 28 percent of patients with the most serious type of heart attacks (called STEMI heart attacks) were over age 75. By 2013, only about 21 percent of patients were over 75. With stroke, just about 49 percent were over age 75 in 2003. By 2013, that fell to about 44 percent. This shows that the average age of diagnosis is certainly going down, says Dr. Agarwal.

In addition, over time patients became more likely to have related health problems such as kidney disease, peripheral artery disease (blockages in arteries that feed the limbs) and a past heart attack or stroke. Risk factors such as high blood pressure and cholesterol, smoking, obesity and diabetes affected larger percentages of patients. Patients who were uninsured or of lower socioeconomic status had much higher rates of preventable risk factors, such as smoking and obesity.

This study points to a need to help patients better manage their risk factors earlier in adulthood so they can avoid consequences later. It also highlights the complexity of managing today’s heart attack and stroke patients.

“The goal is to address risk factors early, but unfortunately, many people — and particularly those who are uninsured — are presenting relatively late in the course of their disease," says Dr. Agarwal. “As a nation, we have considerable work to do in terms of providing preventive primary care that better controls risk factors, particularly for patients with a lower socioeconomic status."  – S.W.

A new approach to making sure that orthopaedic operating rooms are sterile

Each year, about 1 in every 100 joint replacement patients nationwide develop infections. It’s a low rate, yes, thanks mostly to strict practices that Geisinger and other hospitals follow for sterilizing operating rooms (ORs) and related equipment. Still, for those who get an infection, recovery can be long and complicated, taking as much as six to eight weeks.

Geisinger orthopaedic surgeon Thomas R. Bowen, MD, and resident Raveesh Richard, MD, have found a novel way to make sure that ORs are as sterile as possible: Use the same surface-testing devices that restaurants use, which take advantage of an enzyme that makes fireflies glow. The approach has been tried in hospital units and patient rooms to assess surface cleanliness, but theirs is the first published study about using the test kit in an OR.

“Our infection rates are very low, but this new tool can help identify environmental trouble spots that could help get the rates even lower,” says Dr. Richard, who first presented the findings at a 2016 Musculoskeletal Infection Society symposium. He conducted the hands-on research for the study to test 13 potential trouble spots in 6 ORs at Geisinger Medical Center. These included everything from the OR preparation table and sterilized pan to the overhead lights, the underside of the operating table and the computer keyboard.

Dr. Richard made use of an ATP bioluminescence assay testing kit—a complex name for a straightforward technology. Chemically treated swabs are used to take samples from various surfaces and then inserted into the tester. There, they come into contact with luciferase, an enzyme found in fireflies. If the samples contain ATP (adenosine triphosphate), an energy-carrying molecule present in all living things—including bacteria—the reaction produces light. The more light that is measured, the more ATP is present, showing the level of biological contamination.

In this study, all 13 surfaces showed some level of contamination, or bioburden. However, four surfaces did fall within hospital and restaurant industry standards for cleanliness. Surfaces you would expect to be the cleanest, such as the OR table and sterilized pan, had almost no bioburden, which was reassuring. Buttons, equipment handles, the computer keyboard and the underside of the operating table had more evidence of contamination, suggesting these could be trouble spots to focus on in getting the risk of infection as low as possible.

The next step in the research will be to take samples again, test them with the ATP kit and then evaluate the samples in the lab to see if they will grow bacteria. “We want to make sure that we are not making a blanket statement that the presence of the bacteria represents the risk of infection,” says Dr. Richard. “Previous studies have shown that there is a correlation between bioburden on surfaces and a risk of infection, but our study is just an association at this point. The next step is to see if the ATP tests are effective ways to test sterility in the OR.” – M.C.

Depression linked to more frequent Emergency Department visits

Many Emergency Departments (EDs) across the nation are challenged by large patient volumes and long wait times. Patients often seek help at their local EDs for health issues that aren’t true emergencies. Understanding which patients are more likely to use the ED may help us figure out how to better address their needs in outpatient settings.

New research by Wendy Marie Ingram, PhD, and her colleagues in the Department of Epidemiology and Health Services Research and the Biomedical Translational Informatics Program at Geisinger has uncovered a strong link between depression and more frequent ED use. The team used Geisinger’s electronic health record to examine all ED visits from 2005 to 2015 by adult patients who had a Geisinger primary care physician. (All data are de-identified, meaning that personal identifying information is removed.) More than 287,000 patients were included, making this “the largest and longest observational EHR-based ED utilization study of a general patient population conducted to date,” the researchers note.

Dr. Ingram and her colleagues found that any history of depression in the medical record increased a patient’s likelihood of visiting the ED. About 7 percent of patients overall were frequent ED users, meaning they logged 4 or more visits in a calendar year. Nearly half of these frequent users had a history of depression and more than 70 percent had an antidepressant medication order in their records. Overall, 45 percent of patients with a history of depression had been seen in the ED at least once, versus 29 percent of those without such a history.

Just as important, patients with a depression history generally were not reporting mental health concerns during their ED visits. Instead, they had a variety of pain complaints — a pattern similar to patients without depression. It is well-known that depression can cause physical symptoms such as sleep problems, stomach upset and pain, including headaches, migraine, abdominal pain, backache and chest pain. However, people with depression might not even realize that it can have physical symptoms, especially if it’s not controlled well, the researchers note.

At the same time, ED physicians may be more likely to focus on a patient’s physical complaints, even when there is a history of depression. And if a patient has other health challenges, such as diabetes or age-related illnesses, depression may contribute to worsening physical symptoms.

This study suggests there is a missed opportunity to consider depression history when patients present to the ED and then connect them with the right treatments and resources. Better screening and treatment outside the hospital also could help decrease visits to the ED, which is not the ideal place to manage patients with depression over time.

“The mind is such an integral part of physical health,” notes Dr. Ingram, “and it has a major impact on disease. Geisinger had the foresight in 1996 to be one of the early adopters of the electronic health record, and it has spectacularly useful data as a result. The more we can understand patients’ journey over decades, the more we can improve care. This adds a dimension to research at Geisinger that isn’t available anywhere else.” – K.C.

Weight-loss surgery leads to long-term reduction in heart disease risk

Surgery for weight loss, also called metabolic surgery, can help severely overweight people when diets and exercise aren’t enough. Many studies have shown that surgery reduces risk factors for heart and blood vessel disease (also called cardiovascular disease), such as high blood pressure, cholesterol and diabetes. Researchers are still trying to figure out if these benefits are long-lasting and can actually prevent cardiovascular disease (CVD). Examples of CVD include heart attack, stroke and congestive heart failure (CHF), in which the heart’s muscle can’t pump blood as well as it should.

A team at Geisinger recently found that Roux-en-Y gastric bypass surgery (RYGB) does have a lasting effect on risk factors for and the diagnosis of CVD. (RYGB surgery creates a small pouch in the stomach and connects it directly to the small intestine.) Peter N. Benotti, MD, of the Geisinger Obesity Institute, led the study, which made use of Geisinger Medical Center’s large-scale registry of weight-loss surgery patients, a database that tracks outcomes over time. The researchers matched each of the 1,724 surgery patients with a Geisinger primary care patient who did not have surgery but was similar in age, sex, body mass index, smoking status, diabetes history and previous use of high blood pressure medication, among other traits.

The team then asked a key question: How common were severe CVD events in each of the two groups as the years passed after the initial date of surgery? At one year, the CVD rates were similar, but a higher risk was seen over time in the non-surgery group:

- At 3 years: 1.5 percent of RYGB patients had CVD, versus 2.4 percent of nonsurgical patients.
- At 5 years: 2.3 percent versus 4.4 percent
- At 8 years: 4.8 percent versus 8.4 percent

Most of the benefit for the surgery group came from a reduction in the risk of CHF.

The researchers also looked at a smaller matched group of 894 RYGB patients and non-surgery patients to compare CVD risk factors. In the five years after surgery, RYGB patients had greater improvements in:

- Estimated risk of having a CVD within the next 10 years (also called a Framingham Risk Score)
- Total cholesterol and so-called “good” cholesterol (or HDL)
- Blood pressure

Surgical patients had big improvements in body mass index and diabetes rates, as well.

The researchers concluded that RYGB surgery has a long-term beneficial impact on cardiovascular health. They pointed out that while previous studies have suggested that metabolic surgery can reduce the risk of heart attack and stroke, “this is the first study to demonstrate the long-term protective effect of RYGB surgery on CHF.” Overall, they found a 45 percent decrease in major CVD events for those who had surgery.

“The findings provide useful information for patients and physicians as they consider the risks and benefits of metabolic surgery,” notes Dr. Benotti. “Many are concerned about the risks of surgery, but surgical quality has improved greatly over the past decade, with the risks of RYGB now being similar to the risks of gallbladder removal for many patients.” – K.C.

Most labor and delivery units care for a wide range of patients. In one room might be a mother with a high-risk pregnancy, whether due to age, gestational diabetes or other health conditions. She could need medical intervention and her new baby might need intensive care. In the room next door, there could be a mother who has had a completely normal, healthy pregnancy and virtually no risk of complications. Although she may go on to have some level of medical intervention, such as a pain-relieving epidural, she is unlikely to need much else.

Over the past few years, Geisinger has considered how best to serve low-risk expectant mothers in the central region. The result is the new Childbirth Center at Geisinger Bloomsburg Hospital (GBH), which opened in April 2017. It offers the comfort of a homelike, family-centered atmosphere for women who want a more natural and less invasive experience. All deliveries involve a nurse-midwife and obstetrician/gynecologist working as partners. The center features three spacious, private, renovated labor and delivery suites; eight large, brand-new postpartum rooms; and a new nursery. There is a laboring tub as well as mobile fetal monitoring tools that allow women to move freely during labor. The overall focus is on childbirth as a natural process rather than a medical one — but because of the hospital setting, medical intervention is still available as needed, ranging from epidurals to C-sections. And if there is a major complication or the potential need for a neonatal intensive care unit, Geisinger Medical Center in Danville is just minutes away by ambulance.

“In this community, we could see there was a growing desire for midwifery care,” says Sharon Wachob, CNM, who was involved in developing the new center. “Midwives are experts in normal low-risk pregnancies, and a community hospital is an ideal center for this. Many women don’t need the high level of care available in Danville. So the goal is to provide the appropriate level of services at each facility.”

Private support covered most of the $1 million cost, says Lissa Bryan-Smith, chief administrative officer for GBH. Jessica Kozloff, PhD, former president of Bloomsburg University, and her husband, Stephen Kozloff, MD, a former obstetrician/gynecologist at the hospital, made a generous gift for the labor and delivery unit renovation (see Geisinger Magazine, fall 2016). The postpartum unit was made possible by gifts from the GBH Auxiliary, an anonymous donor and the community at large. Even though the center has opened, donors can still support needs such as additional furniture and equipment.

“To me, this is about the power of community believing in a hospital and what should happen there, and then everyone coming together to make it happen,” says Ms. Bryan-Smith.

To learn more about how you can support the GBH Childbirth Center, contact Susan Mathias at the Geisinger Health Foundation at smathias@geisinger.org or 570-214-6372.
Geisinger’s Precision Breast Care Program
Donor support can help make a difficult experience easier

For many years, Geisinger has had a Comprehensive Breast Care Program to meet the needs of women with breast cancer and other breast health concerns. But over the past decade, we’ve built special expertise in the connections between people’s genes and their risk of diseases such as breast cancer. Geisinger’s MyCode® Community Health Initiative is the largest genome project of its kind in the world, testing can increase risk for certain illnesses — and then helping them use that information if they test positive. Mutations in the BRCA1 and BRCA2 genes are the most common genetic but do have other risk factors. These can include dense breasts, a history of abnormal biopsies, a strong family history or other factors related to environment and lifestyle. The clinics, together with the existing screening, diagnosis and treatment programs, now make up the Precision Breast Care Program.

“The unique addition is that we are now able to ‘own’ our high-risk patients,” Dr. Leeming says. “We have this powerful collaboration with genomics and the ability to not only provide risk assessments, but also to create a personalized plan for each woman so she can choose the options that are right for her.”

“I have a close relationship with the genetic counselors, even though this is a large health system,” adds Brianna Maciejewski, PA-C, a physician assistant who sees women in the High-Risk Breast Clinic. “Follow-up doesn’t ever have to linger. We can give each woman a complete understanding of her risk level and what she can do about it.”

The Precision Breast Care Program is also about improving the care experience for all women, not just those who are high risk. One new effort aims to coordinate care across different sites within Geisinger, so that “we know that women who are getting care in Danville, Pottsville, Lewistown or Scranton are getting the same care,” says Dr. Leeming. Within Geisinger Medical Center, the focus is on bringing specialists together in multidisciplinary teams focused around each patient. The ultimate goal is to house all of these specialty services in a dedicated breast care center.

The Geisinger Health Foundation is seeking the community’s help to raise $2 million toward a total goal of $4 million for the Precision Breast Care Program. Private support will ensure that every woman has an experience that is personalized to her needs, her risk factors and her particular diagnosis.

To support the fundraising campaign for the Precision Breast Care Program, contact Carol Tevis in the Geisinger Health Foundation at ctevis@geisinger.edu or 570-214-6372.

Photo: Courtesy of Homiak Photography

On Oct. 6 and 7, Geisinger hosted the inaugural Dream Big Hot Air Balloon Festival at Spyglass Ridge Winery in Sunbury. The event benefited the Precision Breast Care Program.
The Ronald McDonald Family Room

Supporting families when their children are critically ill

Since the early 1980s, families who traveled long distances to access care at the Geisinger Janet Weis Children’s Hospital of Geisinger Medical Center (GMC) have been able to stay close by, thanks to the Ronald McDonald House of Danville. But even “a 10- to 15-minute walk can seem like hours when your child is in critical condition,” says the house’s executive director, Mike Turlis. This is an experience that GMC Chief Financial Officer Kevin Lanciotti knows all too well: His daughter suddenly became seriously ill when she was just 11 and had to be airlifted to a major medical center miles away from their home in Ohio. For months, he stayed by her side and grabbed rest breaks in his car. She passed away five years ago, just before he joined Geisinger in 2013. Mr. Lanciotti says he felt compelled to “do something with what I learned from that 14-year experience.”

Soon after arriving in Danville, he connected with the Ronald McDonald House, joined its board and before long was board president. He and his fellow board members saw there was a need for the children’s hospital to have a Ronald McDonald Family Room right inside it, as more than 219 other children’s hospitals worldwide currently do. The family rooms provide a place for families to rest and recharge without having to leave the hospital.

“There are parents who are not going to leave their child’s side,” Mr. Lanciotti says. “They are in crisis. They are hours from home, their child might have come in on Life Flight®, they are in an unfamiliar environment and their world has been turned upside down. They need a place to eat and get some rest, to pray and to cry, and to see there are people who care about their well-being and will get them through it.”

Geisinger and the Ronald McDonald House (RMH) supported this vision and in June 2016 launched a capital campaign to raise $880,000 to build the room. With extraordinary support from the community — including Geisinger employees’ efforts to raise over $100,000, an amount matched by Geisinger — they were successful within a year. “We worked in partnership with the Geisinger Foundation, as we had never raised funds for a project within the hospital,” says Renee Gerringer, RMH Danville’s development officer. “It was amazing to watch the Geisinger employees meet the challenge. We could not have done it without them and our many private and corporate donors.”

The family room, which opened over the summer, features a kitchenette, a living room, a quiet space and two small bedrooms with a shared bath. It’s just a short walk to the Pediatric Intensive Care Unit and the Neonatal Intensive Care Unit. “Now there is a piece of the Ronald McDonald House right inside the hospital,” says Ms. Gerringer.

There is an ongoing need for funds to support the room’s daily operations and purchase nonperishable meals, paper goods and other housewares. In addition, volunteers are needed to staff the room. For more information about how to donate or volunteer, contact Renee Gerringer, development officer, at rgerringer@rmhdanville.com or 570-214-1490, or Joan Williams, volunteer coordinator, at jwilliams@rmhdanville.com or 570-214-1792.
Director of Patent Experience Megan King, MSN, started at Geisinger as a medical transcriptionist at age 17. She dreamed of becoming a nurse but didn’t think it was possible. Over the next four decades, Geisinger showed her otherwise, giving her the financial support she needed to achieve more than she had ever dreamed.

In 1991, Ms. King became one of a handful of employees to win a scholarship to the Geisinger School of Nursing. (Today she is president of the Alumni Association, even though the school no longer exists. A main focus is encouraging alumni to support nursing education.) As she juggled school with part-time work and raising her children, she also lost her mother. She kept going, inspired in part by a generous gesture from former Director of Nursing Emma Jean Knapper, RN, who gave her a check to cover her books. Ms. King later went on to earn her bachelor’s degree. When, as a labor and delivery nurse, she decided to pursue certification in childbirth education, Geisinger supported her. She eventually became coordinator of perinatal education. In 2009, with funding from the Alice E. Steele Nursing Endowment, she pursued a Master of Science in Nursing Education from Drexel University in Philadelphia. More recently, she earned certification as a patient experience professional.

“My story is the story of Geisinger’s generosity,” Ms. King says. “I could not have done this without their support. I believe that Geisinger hires visionaries who look for opportunities to bring other people up.”

Now more than ever, Geisinger’s challenge is to make sure that every potential Megan King has the necessary support to achieve his or her ambitions. The National Academy of Medicine has recommended that, by the year 2020, 80 percent of nurses have their bachelor’s degrees in nursing, or BSNs. According to Terri Bickert, DNP, vice president of nursing education and codirector of the Nursing Institute (see cover story, page 10), the number at most Geisinger hospitals is around 50 percent. In the coming years, more nurses are going to seek to continue their educations. “Many of our nurses are working parents supporting their households, but they want to go back to school to earn their bachelor’s degree,” Dr. Bickert says. There are also bachelor’s-trained nurses who want to pursue their master’s or doctorate and become advanced practice nurses, who can work as primary care providers — helping to expand access for patients.

Geisinger’s tuition assistance program contributes $3,000 per year toward an undergraduate-level degree and $5,000 per year toward a graduate-level degree. Donor-funded scholarships are also a critical source of support. Donors can help by giving to one of Geisinger’s nursing endowments, such as the Spring Hill Nursing Endowment, the Trimble Nursing Endowment or the Alice E. Steele Nursing Education Endowment, among others. Former CEO Glenn Steele, MD, created the latter to honor his mother, who was a nurse. This and other nursing scholarships are awarded by Dr. Bickert and the leadership team to assist our nurses with advancing their education. Donors with an interest in a particular program, hospital or clinical area also can choose to direct their funds accordingly, says Denise Stone, director of Service Line Advancement for Nursing. In addition to outright gifts, they also make nursing education a part of their will or estate planning, which can have significant tax benefits. “Through support from our community, we will be able to help all nurses, like Megan, follow their dreams and achieve the level of education they wish to reach,” says Ms. Stone.

Donors also can support continuing education opportunities for all nurses, such as onsite classes and seminars, online training and webinars.

If you are interested in supporting nursing education at Geisinger, contact Denise Stone in the Geisinger Health Foundation at dastone@geisinger.edu or 570-214-8836.
Focus on education

Called to serve
Jason Homza’s extraordinary journey to medical school

For Jason “Jay” Homza, 32, the journey to Geisinger Commonwealth School of Medicine included stints as an active-duty U.S. Marine in Iraq and an 11th-grade science teacher at Scranton High School. But his passion for medicine was forged by his brother’s against-all-odds recovery from a devastating accident.

“Joe was an active-duty Marine at home for a visit when his car was hit by a drunk driver,” recalls Mr. Homza, of Kingston, Pa. “He had a 1 percent chance to live. He not only survived, but through rehab returned to full, active-duty military service. Today he’s a police officer in Wilkes-Barre. The perseverance and persistence Joe learned during military training made a big difference in his recovery.

“I was 16 at the time,” he adds. “It made a big impression on me.”

So did the reassuring words of a trauma surgeon the night of the crash. “He told my parents and me that he was going to fix Joe’s injuries — and he did,” Mr. Homza says. “That was a powerful thing. This man had the skill and confidence to say that and make it happen.”

Today, in addition to being a second-year medical student at Geisinger Commonwealth, Mr. Homza has been named a 2017 Tillman Scholar by the Pat Tillman Foundation. The prestigious award recognizes U.S. service members, veterans and military spouses for leadership and excellence by investing in their higher education. Each year, up to 60 candidates are selected from thousands of applicants to be Tillman Scholars. The foundation honors the memory of National Football League star Pat Tillman, who gave up his athletic career in 2002 to enlist in the U.S. Army with his brother. He died in Afghanistan in 2004.

“This is really an honor,” Mr. Homza says. “It’s inspiring to be one of the scholars. They’re all driving themselves forward to make a difference in their communities.”

Mr. Homza hopes to practice medicine in northeast Pennsylvania once he’s completed medical school and graduate medical training. “The shortage of physicians, especially in some specialties, is always a big concern in our area,” he says. “People have to drive long distances to Philadelphia or New York for some of their medical care. When the medical school opened here in Scranton, it brought back to my mind that we could finally do something about it.”

The path from sergeant to science teacher to medical student

After graduating from Wyoming Valley West High School in Plymouth just after 9/11, Mr. Homza enlisted, inspired by the example of his brother. He served in Iraq from 2003 to 2007 as an assault section leader in the 2nd Battalion, 3rd Marines.
“We saw a lot of combat around Haditha, a strategic location midway between the north and Syria and areas like Baghdad to the south,” he says. His unit received a combat action ribbon. Mr. Homza finished his enlistment as a sergeant, then returned home to study at Wilkes University in Wilkes-Barre. He became an 11th-grade science teacher at Scranton High School, teaching earth and space science and physical science for 5 years.

“Teaching science was a big interest of mine; I just didn’t think medical school was in the cards for me,” he says. But then he met Autumn Gramigna, now his wife. (The couple wed in November 2016.) While they were dating, the pair spent lots of time with Autumn’s sister, Tara, and her husband, Tom Churilla — both medical students at the time.

“Jay was always interested in hearing about our experiences,” says Dr. Churilla, who was a member of the first class to enroll at The Commonwealth Medical College in Scranton in 2009, now Geisinger Commonwealth School of Medicine. He is now entering the last year of a residency in radiation oncology at Fox Chase Cancer Center in Philadelphia. “His interest in the field was palpable. I knew if Jay were to choose medicine, he would have so much to offer his classmates, the school and his future patients, given his background and personality.”

Mr. Homza decided to give it a try. While teaching full-time, he took organic chemistry classes, then the MCAT (the medical school entrance exam). Then he applied to medical schools. “Geisinger was always a top choice,” he says. “I’ve always had the feeling that this school belongs to our community. And its mission, to train physicians for the area, is also important to me.”

“In awe of every new thing I learn”

That community connection is surprisingly strong, Mr. Homza says. “Someone called my name in the hallway at the medical school one day — it was a student I’d known at Scranton High. At the time he was finishing college and planning to start here as a medical student this fall. That felt really good.”

Mr. Homza is still deciding on the medical specialty he’ll pursue. “I’m so in awe of every new thing I learn,” he says. With a research grant from Geisinger Commonwealth, he spent the summer studying radiation oncology in prostate cancer patients at Northeast Radiation Oncology Center in Dunmore, Pa.

Dr. Churilla admires his brother-in-law’s perseverance. “It’s a big leap to leave a well-established career to pursue a longer-standing dream,” he says. “As confident as I was that Jay could obtain admission to medical school, I am even more confident that he will excel as a physician. He personifies the mission of Geisinger Commonwealth: to train the physicians of tomorrow in northeastern Pennsylvania.”

17 members of the classes of 2018, 2019 and 2020 are attending Geisinger Commonwealth School of Medicine on military scholarships from the U.S. Air Force, Army or Navy.*

Class of 2017 military residency matches

Walter Reed Army Medical Center
Washington, D.C. – Orthopaedic Surgery

Tripler Army Medical Center
Honolulu, Hawaii – Pediatrics

San Antonio Uniformed Services Health Education Consortium
Texas – Internal Medicine, Diagnostic Radiology

Madigan Army Medical Center
McChord, Washington – Internal Medicine

Wright-Patterson Medical Center
Dayton, Ohio – Psychiatry

*Class of 2021 numbers not available before time of publication.

“In awe of every new thing I learn”

Geisinger Commonwealth’s admissions process is particularly good at identifying students with a keen and sincere desire to serve. Nowhere is this more apparent than with our military students. We know our students will carry our values — respect, compassion, pursuit of excellence — wherever they go, and [we] are proud that many will put their talents to use on behalf of our armed forces.”

– Steven J. Scheinman, MD, president and dean of Geisinger Commonwealth School of Medicine and chief academic officer for Geisinger
When I was 18, I had no idea what I wanted to do with my life. Although I was accepted to my first-choice college, something inside was telling me that school wasn’t my path at that time. I just didn’t know that the path ahead was going to be quite so twisty.

I traded the idea of dorm life and classrooms for barracks and basic training and, in 1998, joined the U.S. Marine Corps. My dad, who was once a Marine drill instructor, was thrilled. My mom said something like “Whoa, pump the brakes.” This is where I learned a valuable lesson about compromise. I originally wanted to do intel; Mom suggested I try out for the Marine Corps field band. To achieve my goal while honoring the wishes of people I cared about, I agreed, not knowing how much I still had to learn.

Over the next four years, as I rose to the rank of sergeant, I found out several things about myself. One, I was a pretty good shot, even though I had not fired a rifle previously. I won top shot in my class and was sent to coaches’ course, becoming the flutist who also happened to be a weapons instructor. In both roles, I learned about teamwork and collaboration. I also gained leadership skills and a fierce dedication to doing a job right the first time.

Being young, I probably did not appreciate those experiences nearly enough at the time.

Following my service, I moved to Florida, where I had originally intended to go to college. Once again, life threw a curve and instead I wound up working at Disney World. In a relatively short period of time, I went from being a U.S. Marines weapons instructor to playing Peter Pan’s friend, Wendy. From crawling through mud to dancing down Main Street. From giving instruction on how to get better rifle qualification scores to smiling and greeting small children.

Like the Corps, Disney taught me things I didn’t know I needed to learn. I discovered how to better embrace people who were not like me and how to see things from many different perspectives. I learned how crucial it is for a business to remember that everything it does, well or not so well, is noticed by customers.

After I finished my undergraduate degree, my husband, David (also a Marine), and I moved to Washington, D.C., where I took a position as an analyst for the Defense Intelligence Agency. A few years later we returned to my home state of Pennsylvania, where I had the valuable opportunity to work as the executive director of the Veteran Affairs & Emergency Preparedness Committee in the Pennsylvania House of Representatives. That’s where I began to realize how healthcare and public policy were intertwined. I wanted to specialize in something that would help people and take advantage of my work and life experience, so I began taking night classes at Penn State, eventually earning a Master of Health Administration. In 2012, shortly after getting my graduate degree, Geisinger hired me as director of government relations — and yet another phase of life learning began.

In Geisinger, I found an organization that had similar values to the ones that my experiences in the Marine Corps and at Disney had made second nature for me."
my experiences in the Marine Corps and at Disney had made second nature for me. Programs like C.I.CARE [Connect, Introduce, Communicate, Ask & Anticipate, Respond, End with Excellence] reinforced the importance of providing quality service and treating people the way I would want my family to be treated. Geisinger also helped me take that learning to an even higher level by choosing me for the E. Allen Deaver Leadership Development Program, a 10-month course that teaches team building, strategic thinking and planning, managing conflict, leading organizational change and much more.

Although I don’t provide direct patient care, what we do in the Office of Government Relations in Harrisburg and Washington, D.C., affects the people who entrust Geisinger with their health every day. We are the main point of contact between Geisinger and our elected representatives and regulatory agencies, among others. We look for opportunities to help Geisinger do all it can to provide quality healthcare. One day, we might be working on state license approvals for physicians or advocating for policy and regulatory changes. Another day, we might be working to secure government funding for programs. On yet another, we’re making connections between Geisinger and the right people in Harrisburg so that crucial discussions can happen. Everything we do is aimed at helping the organization provide better care to patients.

They say that an organization is only as good as its people, but I believe organizations have a responsibility to support formulas and practices that help employees be their best — both for themselves and the people they serve. I feel fortunate to have been part of several such organizations in my career so far and to be continuing my journey with Geisinger.
Geisinger primary care, urgent care, specialty care and inpatient locations

Geisinger’s healthcare providers have distinguished themselves as innovative leaders in their chosen disciplines. Our healthcare providers have access to advanced diagnostics, treatments and research that may not yet be widely available elsewhere. But first and foremost, they are committed to delivering the best possible care to each and every patient.

This directory will help you choose a Geisinger location close to where you live or work. Geisinger locations are listed by the type of care (primary, specialty, urgent or hospital) and by city/town. Many Geisinger locations offer a variety of specialty services. Therefore, use this directory as a guide and refer to geisinger.org for a complete and up-to-date listing of Geisinger services and locations.

In addition to calling sites directly for an appointment, you can schedule appointments at many Pennsylvania sites by calling CareLink at 800-275-6401 or accessing the myGeisinger online portal. For information on Geisinger locations in Lackawanna County, call 844-703-GCMC (4262). You can schedule appointments at many New Jersey sites by calling 888-569-1000 or by accessing AtlantiCareDoctors.org.
Primary care services
Offered at many of our primary care sites. Check geisinger.org and AtlantiCareDoctors.org for the most up-to-date listing of services and locations.

- Acute care
- Adult Down syndrome
- Advanced medical home care
- Behavioral health
- Chronic disease management
- Diabetes education
- Family medicine for individuals of all ages
- Geriatric assessment
- High blood pressure management
- Internal medicine for adults 18 years and older
- Nutrition counseling
- Pediatrics for infants, children and teens through age 17
- Preventive care
- Women’s health

All specialties & services
Offered at our specialty sites and many of our hospital campuses and primary care sites.

- Addiction medicine
- Allergy
- Breast health
- Cancer
- Cardiology
- Clinical nutrition
- Cosmetics
- Critical care
- Dental medicine
- Dermatology
- Ear, nose & throat (ENT)
- Endocrinology
- Gastroenterology
- Hepatology
- Home care
- Home infusion pharmacy
- Hospice
- Infectious diseases
- Lab medicine
- Life Flight®
- LIFE Geisinger
- Nephrology
- Neurology & neurosurgery
- Optometry & ophthalmology
- Orthopaedics
- Pain management
- Palliative & supportive medicine
- Pediatrics
- Pharmacy
- Podiatry
- Primary care
- Psychiatry
- Pulmonology
- Radiology
- Rheumatology
- Sleep services
- Sports medicine
- Surgery
- Telemedicine
- Thoracic surgery
- Transplant surgery
- Urgent care
- Urology
- Vascular surgery
- Weight management
- Women’s health
Pennsylvania Directory

Pennsylvania Primary Care Sites

Avis
Geisinger Jersey Shore Medical Associates Avis
The Avis Medical Center
104 E. Central Ave.
Avis, PA 17721
570-753-8620
Fax: 570-753-5489

Berwick
Geisinger Berwick
2200 W. Front St.
Berwick, PA 18603
570-759-1228
Fax: 570-759-2017

Benton
Geisinger Benton
4469 Red Rock Road
Benton, PA 18814
570-925-6424
Fax: 570-925-5852

Bellefonte
Geisinger Bellefonte
819 E. Bishop St.
Bellefonte, PA 16823
800-230-4565
Fax: 814-353-3500

Belleville
Geisinger Big Valley
4752 State Route 655
Belleville, PA 17004
717-667-9030

Berwick
Geisinger Berwick
2200 W. Front St.
Berwick, PA 18603
570-759-1228
Fax: 570-759-2017

Bloomsburg
Geisinger Bloomsburg Hospital
549 Fair St.
Bloomsburg, PA 17815
570-387-2100

Geisinger Bloomsburg Pediatrics
425 E. First St., Suite 201
Bloomsburg, PA 17815
570-416-1816
Fax: 570-416-1810

Boiling Springs
Geisinger Holy Spirit Primary Care
1358 Lutztown Road
Boiling Springs, PA 17007
717-258-3274
Fax: 717-258-0311

Camp Hill
Geisinger Holy Spirit Primary Care
1800 Carlisle Road
Camp Hill, PA 17011
717-737-3465
Fax: 717-737-8561

Carbondale
Partners in Pediatrics
Carbondale
42 N. Scott St.
Carbondale, PA 18407
570-282-6660
Fax: 570-282-7977

Carlisle
Geisinger Holy Spirit Primary Care
1211 Forge Road
Carlisle, PA 17013
717-218-3920
Fax: 717-218-3921

Geisinger Holy Spirit Pediatrics
1211 Forge Road
Carlisle, PA 17013
717-218-3920
Fax: 717-218-3921

Catawissa
Geisinger Catawissa
353 Main St.
Catawissa, PA 17820
570-356-2351
Fax: 570-356-2663

Clarks Summit
PrimeMed Medical Group
231 Northern Blvd., Suite 3
Clarks Summit, PA 18411
570-587-4113
Fax: 570-587-7703

PrimeMed Medical Group
Clarks Summit Geisinger Clinic
1800 W. Oak St.
Clarks Summit, PA 18411
570-586-4141
Fax: 570-586-6722

Dallas
Geisinger Dallas
114 Lt. Michael Cleary Drive
Dallas, PA 18612
570-675-2000
Fax: 570-675-1806

Danville
Geisinger Knapper Clinic
100 N. Academy Ave.
Danville, PA 17822
570-271-9090
Fax: 570-271-5609

Geisinger Medical Center Pediatrics
Foss Clinic
100 N. Academy Ave.
Danville, PA 17837
570-271-6565
Fax: 570-271-7888

Dillsburg
Geisinger Holy Spirit Primary Care
126 W. Church St., Suite 200
Dillsburg, PA 17019
717-432-2411
Fax: 717-432-1409

Duncannon
Geisinger Holy Spirit Primary Care
51 Business Campus Way
Duncannon, PA 17020
717-834-3108
Fax: 717-834-6911

Geisinger Pediatric Specialty Services
1000 Meade St., Suite 204
Duncannon, PA 17852
570-703-2123

Elysburg
Geisinger Elysburg
106 S. Market St.
Elysburg, PA 17824
570-672-2574
Fax: 570-672-0151

Eitters
Geisinger Holy Spirit Primary Care
148 Newberry Parkway
Eitters, PA 17319
717-938-0120
Fax: 717-938-0124

Forty Fort
Partners in Pediatrics Forty Fort
190 Welles St., Suite 122
Forty Fort, PA 18704
570-718-4140
Fax: 570-718-4141

Frackville
Geisinger Frackville (includes pediatrics)
701 W. Oak St.
Frackville, PA 17931
570-874-4100
Fax: 570-874-1728

Harrisburg
Geisinger Holy Spirit Primary Care
4230 Crums Mill Road, Suite 100
Harrisburg, PA 17112
717-233-6711
Fax: 717-233-7880

Geisinger Holy Spirit Primary Care
3601 N. Progress Ave.
Harrisburg, PA 17110
717-652-7266
Fax: 717-657-9734

Geisinger Holy Spirit Pediatrics
4230 Crums Mill Road, Suite 100
Harrisburg, PA 17112
717-233-6711
Fax: 717-526-8404

Hazleton
Geisinger Hazleton
426 Airport Road
1 Beltway Commons
Hazle Township, PA 18202
570-459-9730
Fax: 570-459-9736

Honesdale
PrimeMed Medical Group
Honesdale Geisinger Clinic
3306 Lake Ariel Highway
Honesdale, PA 18431
570-253-0148
Fax: 570-253-5042

Huntingdon
Geisinger Cold Springs
3228 Cold Springs Road
Huntingdon, PA 16652
814-643-4642
Fax: 814-643-9091

Jersey Shore
Geisinger Jersey Shore Medical Associates Cornel
116 Kerr Ave.
Jersey Shore, PA 17740
570-398-1991
Fax: 570-398-4607

Jessup
PrimeMed Medical Group
Jessup Geisinger Clinic
401 Third Ave.
Jessup, PA 19044
570-383-7922
Fax: 570-383-5450

Kingston
Geisinger Kingston
499 Wyoming Ave.
Kingston, PA 18704
570-283-2161
Fax: 570-714-0670

Kulpmont
Geisinger Kulpmont
119 Nevada Drive
Kulpmont, PA 17834
570-373-1250
Fax: 570-373-1718

Lehigh Valley
Geisinger Lehigh Valley
250 Reitz Blvd.
Lehigh Valley, PA 18037
570-522-0055
Fax: 570-523-7996

Levittown
Geisinger Family Health Associates
21 Geisinger Lane
Levittown, PA 17044
800-230-4565

Geisinger Levittown
21 Geisinger Lane
Levittown, PA 17044
800-230-4565
Fax: 717-242-4212

Lock Haven
Geisinger Lock Haven
955 Bellefonte Ave.
Lock Haven, PA 17745
570-748-7714
Fax: 570-893-6325

Partners in Pediatrics Hazleton
426 Airport Road
6 Beltway Commons
Hazleton, PA 18202
570-501-7512
Fax: 570-501-7515
Pennsylvania Specialty Care Sites
(Only includes sites where providers see patients 10 or more days a month. For the most up-to-date listing of specialty locations, refer to geisinger.org.)

Belleville
CareSite Pharmacy Belleville
4752 State Route 655, Suite A
Belleville, PA 17004
717-935-2341
Fax: 717-935-5465

Bloomburg
Geisinger Bloomburg Health Care Center
211 E. First St.
Bloomsburg, PA 17815
570-784-5930
Geisinger Bloomburg General Surgery
439 E. First St.
Bloomsburg, PA 17815
570-387-1444
Fax: 70-387-1961

Geisinger Bloomburg Lows Road
6850 Lows Road
Bloomsburg, PA 17815
570-416-0477
Fax: 570-416-0517

Geisinger Bloomburg Orthopaedics Central Road
480 Central Road
Bloomsburg, PA 17815
570-387-6150
Fax: 570-387-6185

Geisinger Women’s Health at Bloomsburg
425 E. First St., Suite 101
Bloomburg, PA 17815
570-387-2474
Fax: 570-387-2397

Bradford
Pediatric Cardiology Bradford
Upper Allegheny Health System
Bradford Regional Medical Center
116 Interstate Parkway, Suite 41
Bradford, PA 16701
814-362-1294
Fax: 814-368-7994

Camp Hill
CareSite Pharmacy
Geisinger Holy Spirit
290 Poplar Church Road, Suite 103
Camp Hill, PA 17011
717-761-6545
Fax: 717-730-9281

Grandview Surgery
205 Grandview Corporate Place
Camp Hill, PA 17011
717-731-5444
Fax: 717-731-0415

Geisinger Holy Spirit Behavioral Health
Geisinger Holy Spirit Hospital
503 N. 21st St.
Camp Hill, PA 17011
717-763-2228
Fax: 717-763-2358

Geisinger Holy Spirit Camp Hill Center
875 Poplar Church Road
Camp Hill, PA 17011
• Blood Donor Center
  717-975-3250
• Cardiology
  717-724-6450
Fax: 717-724-6451
• Cardiothoracic Surgery
  717-975-0900
• Cardiovascular Diagnostic Services
  717-724-6397
• Endoscopy Center
  717-975-3270
• Imaging Services
  717-972-4900
• Laboratory & EKG Services
  717-857-0020
• Physical Therapy
  717-972-4900

Geisinger Holy Spirit Cardiac Rehab
503 N. 21st St.
Camp Hill, PA 17011
717-972-4558

Geisinger Holy Spirit Diabetes Services
890 Poplar Church Road, Suite 506
Camp Hill, PA 17011
717-763-2466

Geisinger Holy Spirit Endocrinology
890 Poplar Church Road, Suite 503
Camp Hill, PA 17011
717-972-7120
Fax: 717-972-7121

Geisinger Holy Spirit General Surgery
890 Poplar Church Road, Suite 210
Camp Hill, PA 17011
717-761-2055
Fax: 717-761-2055

Geisinger Holy Spirit Home Health Care
205 Grandview Ave.
Camp Hill, PA 17011
717-972-4663
Fax: 717-972-4646

Geisinger Holy Spirit Neurology
423 N. 21st St., Suite 300
Camp Hill, PA 17011
717-975-8585
Fax: 717-975-0670

Geisinger Holy Spirit Neurosurgery
423 N. 21st St., Suite 300
Camp Hill, PA 17011
717-763-2559
Fax: 717-724-6125

Geisinger Holy Spirit Nutrition & Weight Management
890 Poplar Church Road, Suite 210
Camp Hill, PA 17011
717-761-7244
Fax: 717-761-2055

Geisinger Holy Spirit OB/GYN
423 N. 21st St., Suite 202
Camp Hill, PA 17011
717-763-9880
Fax: 717-737-2765

Geisinger Holy Spirit Travel Health
890 Poplar Church Road, Suite 100
Camp Hill, PA 17011
717-972-4229
Fax: 717-972-4546

Geisinger Holy Spirit Pulmonary Medicine
890 Poplar Church Road
Camp Hill, PA 17011
717-857-0010
Fax: 717-857-0011

Geisinger Holy Spirit Teeneine
503 N. 21st St.
Camp Hill, PA 17011
717-763-2222

Geisinger Holy Spirit Vascular Surgery
800 Poplar Church Road
Camp Hill, PA 17011
717-972-4900
Fax: 717-972-4900

Geisinger Holy Spirit Wound Care Center
503 N. 21st St.
Camp Hill, PA 17011
717-763-2379

John R. Dietz Emergency Center at Geisinger Holy Spirit
503 N. 21st St.
Camp Hill, PA 17011
717-763-4300
Fax: 717-972-4341

The Ortenzio Heart Center at Geisinger Holy Spirit
503 N. 21st St.
Camp Hill, PA 17011
717-763-2379

Carbondale
Geisinger Holy Spirit Cardiology Carbondale
141 Salem Ave., Suite 1
Carbondale, PA 18407
570-282-1605
Fax: 570-282-1614

Carlisle
Geisinger Holy Spirit Carlisle Center
1211 Forge Road
Carlisle, PA 17013
717-218-3900
• Breast Care Center
  717-737-4718
Fax: 717-909-0902
• Cardiology
  717-724-6450
Fax: 717-724-6451
• Cardiovascular Diagnostic Services
  717-724-6397
• Diabetes Services
  717-763-2466
• Endocrinology
  717-972-7120
Fax: 717-972-7121
• General Surgery
  717-249-1895
Fax: 717-249-1897
• Imaging Services
  717-972-4900
• Laboratory & EKG Services
  717-857-0020
• Orthopaedics
  717-961-8000
Fax: 717-763-6860
• Vascular Surgery
  717-241-5070
Fax: 717-241-5022

GeisingerHoly Spirit Neurology
3 Jennifer Court, Suite B
Carlisle, PA 17015
717-245-2226
Fax: 717-245-0316

Clarion
Pediatric Specialty Services
Clarion
1 Hospital Drive
Clarion, PA 16214
814-226-9500
Fax: 814-271-7833

Clarks Summit
Viewmont Medical Labs Abington
790 Northern Blvd.
Clarks Summit, PA 18411
570-586-1449
Fax: 570-586-1452

Geisinger Viewmont
Medical Labs Clarks Summit
1000 State St.
Clarks Summit, PA 18411
570-585-8196
Fax: 870-585-8197

Geisinger Viewmont
Medical Labs Morgan Highway
100 Abington Executive Park, Suite C
Clarks Summit, PA 18411
570-792-8145
Fax: 570-359-7418
Find out how Geisinger Gold can help you get the insurance coverage you deserve.

At Geisinger, we care about the people and communities we serve. If you are age 65 or older, now is the time to review your Medicare coverage to be sure you have the protection you need.

The Annual Enrollment Period for Medicare beneficiaries is now open, and ends on Thursday, Dec. 7. Call 800-278-1275 to speak with a Geisinger Gold Medicare Advisor about your options.

Life changes. Is it time for your Medicare coverage to change as well?

800-278-1275
TDD: 711
8 a.m. – 8 p.m., seven days a week
GeisingerGold.com

Geisinger Gold Medicare Advantage HMO, PPO, and HMO SNP plans are offered by Geisinger Health Plan/Geisinger Indemnity Insurance Company, health plans with a Medicare contract. Continued enrollment in Geisinger Gold depends on annual contract renewal. Other providers are available in our network.
• Geisinger Family Health Associates Pulmonary Medicine
  27 Sandy Lane, Suite 140
  Lewistown, PA 17044
  717-242-2711

• Geisinger Family Health Associates Surgical Services
  27 Sandy Lane, Suite 270
  Lewistown, PA 17044
  717-242-7981

• Geisinger Lewistown Orthopaedics/Podiatry
  310 Electric Ave., Suite 240
  Lewistown, PA 17044
  717-242-8124
  Fax: 717-242-8125

• Geisinger Lewistown Wound Care
  400 Highland Ave.
  Lewistown, PA 17044
  717-242-7348
  Fax: 717-242-7352

• Geisinger Lock Haven Pediatric Cardiology
  955 Bellefonte Ave.
  Lock Haven, PA 17745
  570-748-7714
  Fax: 570-893-6325

• Geisinger Mechanicsburg Behavioral Health Services
  3 Flowers Drive
  Mechanicsburg, PA 17050
  717-763-2228

• Geisinger Mechanicsburg Breast Care Center
  880 Century Drive
  Mechanicsburg, PA 17055
  717-737-4718
  Fax: 717-909-0902

• Geisinger Mechanicsburg Cancer Center
  880 Century Drive
  Mechanicsburg, PA 17055
  717-691-3235
  • Gamma Knife
    717-691-3235
    Fax: 717-691-3243
  • Imaging Services
    717-972-4900
  • Laboratory Services
    717-857-0020
  • Radiation Therapy
    717-691-3235
    Fax: 717-691-3243

• Geisinger Mechanicsburg Center
  4665 Trindle Road
  Mechanicsburg, PA 17050
  717-909-1030
  • Imaging Services
    717-972-4900
  • Laboratory & EKG Services
    717-857-0020

• Geisinger Mechanicsburg Silver Creek Center
  335 Lambs Gap Road
  Mechanicsburg, PA 17055
  717-591-1425
  • Geisinger Janet Weis Children’s Hospital Pediatric Specialties
    888-675-5437 (toll-free)
  • Imaging Services
    717-972-4900
  • Laboratory & EKG Services
    717-857-0020

• Geisinger Mifflintown
  CareSite Pharmacy Mifflintown
  2873 Industrial Park Road, Suite 1
  Mifflintown, PA 17059
  717-436-8278
  Fax: 717-436-8513

• Geisinger Montoursville Gastroenterology & Endoscopy
  10 Choate Circle
  Montoursville, PA 17754
  570-368-5566
  Fax: 570-368-5564

• Geisinger Mt. Pocono
  CareSite Pharmacy
  Mt. Pocono
  126 Market Way
  Mt. Pocono, PA 18344
  570-895-5055
  Fax: 570-895-5056

• Geisinger Mountain Top
  Geisinger Orthopaedics/Podiatry
  35 S. Mountain Blvd.
  Mountain Top, PA 18707
  570-474-5978
  Fax: 570-474-5485

• Geisinger Newport
  Geisinger Holy Spirit Cardiology
  52 Red Hill Court
  Newport, PA 17074
  717-724-6450
  Fax: 717-724-6457

• Geisinger Orwigsburg
  CareSite Pharmacy
  Orwigsburg
  1119 – 1133 Centre Turnpike
  Orwigsburg, PA 17961
  570-968-1320
  Fax: 570-968-1330

• Geisinger Pottsville
  CareSite Pharmacy Pottsville
  529 Terry Relley Way
  Pottsville, PA 17901
  570-624-4120
  Fax: 570-624-4127

• Geisinger General Surgery
  Pottsville
  100 Schuylkill Medical Plaza
  Suite 204
  Pottsville, PA 17901
  570-621-5740
  Fax: 570-621-6367

• Geisinger Medical Oncology
  Pottsville
  700 E. Norwegian St.
  Pottsville, PA 17901
  570-624-4898
  Fax: 570-624-4899

• Geisinger Radiation Oncology
  Pottsville
  East Norwegian Street & Route 61, Suite 100
  Pottsville, PA 17901
  570-622-8500
  Fax: 570-622-0261

• Sayre
  Geisinger Cardiology Sayre
  202 Sayre Street
  Sayre, PA 18840
  888-675-5437
  Fax: 570-271-7887

• Geisinger Podiatry
  102 Desmond St., Second floor
  Sayre, PA 18840
  888-675-5437
  Fax: 570-271-7887

• Geisinger Specialty Services at Guthrie Clinic & Robert Packer Hospital
  1 Guthrie Square
  Sayre, PA 18840
  570-888-5858

• Geisinger Scranton
  CareSite Pharmacy
  Mt. Pleasant
  531 Mt. Pleasant Drive
  Scranton, PA 18503
  570-767-2305
  Fax: 570-963-2306

• Geisinger Orthopaedics
  Scranton
  1800 Mulberry St.
  Scranton, PA 18508
  570-961-2105
  Fax: 570-969-4303

• Geisinger Podiatry
  1800 Mulberry St., First floor
  Scranton, PA 18705
  570-703-7300
  Fax: 570-703-8512

• Geisinger Viewmont Imaging
  102 Moffat Drive
  Scranton, PA 18508
  570-344-7484
  Fax: 570-344-7492

• Geisinger Viewmont Imaging
  5 Morgan Highway, Suite 7
  Scranton, PA 18508
  570-558-7400
  Fax: 570-558-7407

• Geisinger Viewmont Physical & Occupational Therapy
  423 Scranton-Carbondale Highway
  Scranton, PA 18508
  570-207-5502
  Fax: 570-207-5511

• Geisinger Viewmont Medical Labs
  435 Scranton-Carbondale Highway
  Scranton, PA 18508
  570-207-5507
  Fax: 570-207-5516

• Geisinger Viewmont Medical Labs Jay’s Commons
  401 N. Main Ave.
  Scranton, PA 18504
  570-871-4011
  Fax: 570-871-4012

• Geisinger Viewmont Medical Labs South Scranton
  2232 Pittston Ave.
  Scranton, PA 18505
  570-207-4168
  Fax: 570-207-4169

• Geisinger Viewmont Sleep Disorder Center
  517 Ash St., Suite C
  Scranton, PA 18509
  570-808-3410
  Fax: 570-207-5529

• Geisinger Specialty Care
  21 Susquehanna Valley Mall Drive
  Suite D
  Selinsgrove, PA 17870
  800-275-6401

• Geisinger Susquehanna University
  620 University Ave.
  Selinsgrove, PA 17870
  570-372-0536
  Fax: 570-372-0539

• Geisinger Urology Selinsgrove
  5 Atrium Court
  Selinsgrove, PA 17870
  570-372-9933
  Fax: 570-372-0828

• Shamokin
  Geisinger Specialty Care
  2403 Hospital Drive
  Shamokin, PA 17866
  570-644-2730

• Geisinger Urology Shamokin
  5 Atrium Court
  Shamokin, PA 17866
  570-644-2730

• South Williamsport
  Pediatric Specialty Services
  South Williamsport
  204 Curtin St.
  South Williamsport, PA 17702
  570-322-2314
  Physicians call: 800-332-8901
  Fax: 570-322-3510

• State College
  Geisinger Orthopaedics
  Gray’s Woods
  123 Abigail Lane
  Port Matilda, PA 16870
  800-230-4565
Geisinger Ophthalmology
Windmere
428 Windmere Drive, Suite 200
State College, PA 16801
814-231-1502
Fax: 814-231-1542
Sunbury
Child Advocacy Center of the Central Susquehanna Valley
218 Chestnut St.
Sunbury, PA 17801
570-473-8475
Geisinger Ophthalmology
Sunbury
437 Market St.
Sunbury, PA 17801
570-286-3054
Fax: 570-286-0809
Taylor
Geisinger Viewmont Medical Labs Taylor
818 S. Main St.
Taylor, PA 18517
570-562-6003
Fax: 570-562-6005
Waverly
Geisinger Marworth Alcohol & Chemical Dependency Treatment Center
P.O. Box 36
Lily Lake Road
Waverly, PA 18471
800-442-7722
Wellsboro
Pediatric Specialty Services at Soldiers & Sailors Memorial Hospital
32–36 Central Ave.
Wellsboro, PA 16901
800-275-6401
Wilkes-Barre
CareSite Pharmacy Geisinger Wyoming Valley Medical Center
1000 East Mountain Blvd.
Wilkes-Barre, PA 18711
570-808-7969
Fax: 570-808-6157
CareSite Pharmacy Kistler Clinic
175 S. Wilkes-Barre Blvd.
Wilkes-Barre, PA 18702
570-829-2621
Fax: 570-823-4332
CareSite Specialty RX
25 Church St., Fourth floor
Wilkes-Barre, PA 18765
570-208-4721
Fax: 570-208-4726
Geisinger East Mountain Podiatry
1155 East Mountain Blvd.
Entrance A
Wilkes-Barre, PA 18702
570-808-3362
Fax: 570-808-5144
Frank M. and Dorothea Henry Cancer Center
1000 East Mountain Blvd.
Wilkes-Barre, PA 18711
570-808-6150
Geisinger Northeast Urology
6 Wildflower Drive
Wilkes-Barre, PA 18711
570-808-8843
Fax: 570-808-8844
Geisinger Orthopaedics
Wilkes-Barre**
1175 East Mountain Blvd.
Wilkes-Barre, PA 18702
570-808-1093
Fax: 570-808-7878
Geisinger Wyoming Valley Outpatient Specialty Center
675 Baltimore Drive
Wilkes-Barre, PA 18702
800-275-6401
Partners in Pediatrics
Hanover Street
166 Hanover St., Suite 105
Wilkes-Barre, PA 18702
570-808-6672
Fax: 570-808-6673
Richard and Marion Pearsall Heart Hospital
1000 East Mountain Blvd.
Wilkes-Barre, PA 18711
570-808-7300
Valley Medical Building at Geisinger Wyoming Valley Medical Center
1000 East Mountain Blvd.
Wilkes-Barre, PA 18702
570-808-7300
** A service of Geisinger Wyoming Valley Medical Center

PENNSYLVANIA URGENT CARE SITES
No appointment needed. Open daily. Providers at these sites treat minor injuries and illnesses for patients 12 months and older. For more information or to see a complete listing of our locations, visit MyCareworks.com or geisinger.org.

Bellefonte
Geisinger Careworks
174 Buckaroo Lane
Bellefonte, PA 16823
814-353-1030
Fax: 814-353-1053
Bloomburg
Geisinger Careworks
425 E. First St.
Bloomburg, PA 17815
570-501-3765
Fax: 570-501-3762
Burnham
Geisinger Careworks
224 N. Logan Blvd., Suite 220
Burnham, PA 17009
717-242-0196
Fax: 717-242-0701
Camp Hill
Geisinger Holy Spirit
Urgent Care
431 N. 21st St.
Camp Hill, PA 17011
717-763-3730
Fax: 717-763-3734
Carlisle
Geisinger Holy Spirit
Urgent Care
1211 Forge Road, Suite 500
Carlisle, PA 17013
717-218-3990
Fax: 717-218-3991
Clarks Summit
Geisinger Careworks
1020 Northern Blvd.
Clarks Summit, PA 18411
570-587-2290
Fax: 570-587-1874
Danville
Geisinger Careworks
604 Continental Blvd.
Suite 100
Danville, PA 17821
570-284-4575
Fax: 570-284-4577
McElhattan
Urgent Care at McElhattan
560 McElhattan Drive
McElhattan, PA 17748
570-263-4042
Mountain Top
Geisinger Careworks
35 S. Mountain Blvd.
Mountain Top, PA 18707
570-474-5847
Fax: 570-474-5130
Pittston
Geisinger Careworks
42 N. Main St.
Pittston, PA 18640
570-602-5610
Fax: 570-602-5611
Scranton
Geisinger Careworks
3 W. Olive St.
Scranton, PA 18508
570-207-4054
Fax: 570-207-4057
Shamokin Dam
Geisinger Careworks
Colonial Village Plaza
2660 N. Susquehanna Trail
Shamokin Dam, PA 17876
570-884-3726
Fax: 570-884-3728
State College
Geisinger Careworks
Best Buy Plaza
1630 N. Atherton St.
State College, PA 16803
814-238-1279
Fax: 814-238-1929
Tunkhannock
Geisinger Careworks
109 N. 21st St.
Tunkhannock, PA 18657
570-996-2790
Fax: 570-996-2735
West Hazleton
Geisinger Careworks
Staples Plaza
6 Diana Lane
West Hazleton, PA 18202
570-501-3760
Fax: 570-501-3762
Wilkes-Barre
Geisinger Careworks
1155 East Mountain Blvd.
Wilkes-Barre, PA 18702
570-808-5135
Fax: 570-808-5136
Williamsport
Geisinger Careworks
1824 E. Third St.
Williamsport, PA 17701
570-601-2200
Fax: 570-601-2202

PENNSYLVANIA HOSPITAL SITES
Bloomburg
Geisinger Bloomburg Hospital
(Includes pediatrics and women’s health)
549 Fair St.
Bloomburg, PA 18715
570-387-2100
Camp Hill
Geisinger Holy Spirit
503 N. 21st St.
Camp Hill, PA 17011
717-763-2100
Danville
Geisinger Medical Center
100 N. Academy Ave.
Danville, PA 17822
570-271-6211
Jersey Shore
Geisinger Jersey Shore Hospital
1020 Thompson St.
Jersey Shore, PA 17740
570-398-0100
Fax: 570-398-4412
Lewistown
Geisinger Lewistown Hospital
400 Highland Ave.
Lewistown, PA 17044
717-248-5411
Scranton
Geisinger Community Medical Center
1800 Mulberry St.
Scranton, PA 18510
570-703-8000
Shamokin
Geisinger Shamokin Area Community Hospital****
4200 Hospital Road
Coal Township, PA 17866
570-644-4200
Wilkes-Barre
Geisinger South
Wilkes-Barre
25 Church St.
Wilkes-Barre, PA 18765
570-808-3100
Geisinger Wyoming Valley
Medical Center
1000 East Mountain Blvd
Wilkes-Barre, PA 18711
570-808-7300

NEW JERSEY
PRIMARY CARE SITES

Atlantic City
AtlantiCare Physician Group
Primary Care Plus, A Member of Geisinger
24 S. Carolina Ave.
Atlantic City, NJ 08401
609-345-6000 or 888-569-1000
Fax: 609-345-2885

Brigantine
AtlantiCare Physician Group
Primary Care Plus
353 12th St. S.
Brigantine, NJ 08203
609-266-7557 or 888-569-1000
Fax: 609-266-4450

Cape May Court House
AtlantiCare Physician Group
Primary Care Plus
106 Court House S. Dennis Road
Building 200, Suite 200
Cape May Court House, NJ 08210
609-465-2710 or 888-569-1000
Fax: 609-463-8135

Egg Harbor Township
AtlantiCare Physician Group
Primary Care Plus
2500 English Creek Ave.
Building 1000, Suite 1002
Egg Harbor Twp., NJ 08234
609-407-2310 or 888-569-1000
Fax: 609-407-2311

Galloway
AtlantiCare Physician Group
Primary Care Plus
310 S. Chris Gaupp Drive, Suite 102
Galloway, NJ 08205
609-652-9933 or 888-569-1000
Fax: 609-652-9955

Linwood
AtlantiCare Physician Group
Primary Care Plus
1201 New Road, Suite 120
Linwood, NJ 08221
609-927-7070 or 888-569-1000
Fax: 609-927-7015

Little Egg Harbor
AtlantiCare Physician Group
Primary Care Plus
459 Route S S.
Little Egg Harbor, NJ 08087
609-296-4014 or 888-569-1000
Fax: 609-296-5735

Manahawkin
AtlantiCare Physician Group
Primary Care Plus
547 Route 72 W.
Manahawkin, NJ 08050
609-597-3010 or 888-569-1000
Fax: 609-597-0746

North Cape May
AtlantiCare Physician Group
Primary Care Plus
650 Town Bank Road, Unit 103
North Cape May, NJ 08204
609-884-3680 or 888-569-1000
Fax: 609-884-3658

Northfield
AtlantiCare Physician Group
Primary Care Plus
1601 Tilton Road
Northfield, NJ 08225
609-569-1900 or 888-569-1000
Fax: 609-569-1404

Ocean City
AtlantiCare Physician Group
Primary Care Plus
201 West Ave.
Ocean City, NJ 08226
609-391-7500 or 888-569-1000
Fax: 609-391-0963

Pleasantville
AtlantiCare Physician Group
Primary Care Plus
48 Ansley Blvd.
Pleasantville, NJ 08232
609-641-1077 or 888-569-1000
Fax: 609-641-1023

Rio Grande
AtlantiCare Physician Group
Primary Care Plus
1613 Route 47 S., Unit G
Rio Grande, NJ 08204
609-886-5245 or 888-569-1000
Fax: 609-886-5295

Somers Point
AtlantiCare Physician Group
Primary Care Plus
443 Shore Road
Second floor, Suite 201
Somers Point, NJ 08244
609-407-7747 or 888-569-1000
Fax: 609-407-7748

Ventnor City
AtlantiCare Physician Group
Primary Care Plus
7313 Ventnor Ave.
Ventnor City, NJ 08406
609-441-2199 or 888-569-1000
Fax: 609-487-9640

Wildwood Crest
AtlantiCare Physician Group
Primary Care Plus
6410 New Jersey Ave.
Wildwood Crest, NJ 08260
609-523-1331 or 888-569-1000
Fax: 609-522-1516

NEW JERSEY
SPECIALTY CARE SITES

Atlantic City
AtlantiCare Clinical Laboratory
1925 Pacific Ave.
Atlantic City, NJ 08401
609-572-8380 or 888-569-1000

AtlantiCare Clinical Laboratory
1401 Atlantic Ave.
Atlantic City, NJ 08401
609-572-6030 or 888-569-1000

AtlantiCare Physician Group
Occupational Health
24 S. Carolina Ave.
Atlantic City, NJ 08401
609-677-7200 or 888-569-1000
Fax: 609-677-7210

AtlantiCare Physician Group
Thoracic Surgery
106 Court House S. Dennis Road
Building 200, Suite 200
Cape May Court House, NJ 08210
609-407-2332 or 888-569-1000
Fax: 609-407-2364

AtlantiCare Physician Group
Vascular
106 Court House S. Dennis Road
Building 200, Suite 200
Cape May Court House, NJ 08210
609-407-2332 or 888-569-1000
Fax: 609-407-2364

AtlantiCare Physician Group
Bariatrics
106 Court House S. Dennis Road
Building 200, Suite 200
Cape May Court House, NJ 08210
609-407-2332 or 888-569-1000
Fax: 609-407-2364

AtlantiCare Physician Group
Cardiology
106 Court House S. Dennis Road
Building 200, Suite 200
Cape May Court House, NJ 08210
609-407-3329 or 888-569-1000
Fax: 609-407-2364

AtlantiCare Physician Group
Endocrinology
106 Court House S. Dennis Road
Building 200, Suite 200
Cape May Court House, NJ 08210
609-407-2332 or 888-569-1000
Fax: 609-407-2364

AtlantiCare Physician Group
Orthopedics
106 Court House S. Dennis Road
Building 200, Suite 200
Cape May Court House, NJ 08210
609-407-2332 or 888-569-1000
Fax: 609-407-2364

AtlantiCare Physician Group
Primary Care Plus
Bariatrics
AtlantiCare Health Park
2500 English Creek Ave.
Building 800
Egg Harbor Township, NJ 08234
609-407-2332 or 888-569-1000
Fax: 609-407-2364

AtlantiCare Physician Group
Primary Care Plus
Cardiology
2500 English Creek Ave.
Building 900, Suite 910
Egg Harbor Township, NJ 08234
609-407-2992 or 888-569-1000

AtlantiCare Physician Group
Cardiology
2500 English Creek Ave.
Building 200, Suite 211
Egg Harbor Township, NJ 08234
609-677-7776 or 888-569-1000
Fax: 609-677-7509

AtlantiCare Physician Group
Colorectal Surgery
2500 English Creek Ave.
Building 500
Egg Harbor Township, NJ 08234
609-407-2277 or 888-569-1000
Fax: 609-677-7280
NEW JERSEY
URGENT CARE SITES
No appointment needed. Open daily. On-site medication dispensing. Providers at these sites treat minor injuries and illnesses.
For more information or to see a complete listing of our locations, visit atlanticare.org/urgent.

Berlin
AtlantiCare Physician Group
Urgent Care Center
255 Route 73
West Berlin, NJ 08091
856-719-8600 or 888-569-1000
Fax: 856-719-8601

Clementon
AtlantiCare Physician Group
Urgent Care Center
1310 Blackwood-Clementon Road
Clementon, NJ 08021
856-783-1802 or 888-569-1000
Fax: 856-783-1832

Egg Harbor Township
AtlantiCare Physician Group
Urgent Care Center
2500 English Creek Ave.
Building 900, Suite 909
Egg Harbor Township, NJ 08234
609-407-2273 or 888-569-1000
Fax: 609-407-2230

Galloway
AtlantiCare Physician Group
Urgent Care Center
110 E. Jimmie Leeds Road
Galloway, NJ 08205
609-748-2100 or 888-569-1000
Fax: 609-748-2101

Hammonton
AtlantiCare Physician Group
Urgent Care Center
Broadway Square
120 S. White Horse Pike
Hammonton, NJ 08037
609-567-2573 or 888-569-1000
Fax: 609-567-4935

Little Egg Harbor
AtlantiCare Physician Group
Urgent Care Center
459 Route 9 S.
Little Egg Harbor, NJ 08087
609-407-2273 or 888-569-1000
Fax: 609-296-5735

Manahawkin
AtlantiCare Physician Group
Urgent Care Center
547 Route 72 W.
Manahawkin, NJ 08050
609-704-6833 or 888-569-1000
Fax: 609-704-6834

Marmora
AtlantiCare Physician Group
Urgent Care Center
Hope Medical Commons
210 S. Shore Road, Suite 201
Marmora, NJ 08223
609-407-2273 or 888-569-1000
Fax: 609-390-2753

Mount Holly
AtlantiCare Physician Group
Urgent Care Center
605 High St.
Mount Holly, NJ 08060
609-307-2135 or 888-569-1000
Fax: 609-307-2135

Mount Laurel
AtlantiCare Physician Group
Urgent Care Center
3131 Route 38
Mount Laurel, NJ 08054
856-866-8700 or 888-569-1000
Fax: 856-866-1302

Rio Grande
AtlantiCare Physician Group
Urgent Care Center
1613 Route 47 S., Unit F
Rio Grande, NJ 08204
609-407-2273 or 888-569-1000

Sicklerville
AtlantiCare Physician Group
Urgent Care Center
627-B Cross Keys Road
Sicklerville, NJ 08081
856-728-8700 or 888-569-1000
Fax: 856-728-8701

Somers Point
AtlantiCare Physician Group
Urgent Care Center
443 Shore Road, Suite 103
Somers Point, NJ 08244
609-569-7077 or 888-569-1000
Fax: 609-567-7078

NEW JERSEY
HOSPITAL SITES

Atlantic City
AtlantiCare Regional Medical Center
1925 Pacific Ave.
Atlantic City, NJ 08401
609-345-4000 or 888-569-1000

Pomona
AtlantiCare Regional Medical Center
65 W. Jimmie Leeds Road
Pomona, NJ 08240
609-652-1000 or 888-569-1000

New Jersey
Annette Silverstein, RN, in the Progressive Care Unit at Geisinger Wyoming Valley Medical Center, is one of 6,000 Geisinger nurses who demonstrate caring, compassion and dedication every day.