



M E D I C A L S T A F F B R I E F S

A Publication from the Chief of Staff and Chief Medical Officer

January 26, 2021

New Law for California Caregivers Testing Positive for COVID-19

On Jan. 1, 2021, a new California law (AB 685) became effective requiring employers to notify caregivers and others including physicians in writing within one business day (Monday through Friday) if there has been a caregiver on the worksite who has tested positive for COVID-19 and there is reason to believe someone may have been exposed.

The Medical Staff Office will send you an e-mail notification each time there is potential exposure at one of the worksites where you practice. Should you receive an email and have questions, email them to CACovidNotification@providence.org.



COVID-19 Vaccines Offered to Providence Team and Spouses

Providence Southern California now offers COVID-19 vaccines to all Providence medical group, affiliated and independent community physicians, Emeritus and office staff and their spouses. Schedule your vaccination appointment via the Sign-up Genius Tool at St. Joseph Hospital of your choice at: signupgenius.com/go/20f0b4ca9a82aa3fe3-stjoseph. Spouses can sign up by calling the Medical Staff Office at 714-771-8056.

Please bring the following with you to your appointment. If you present without these documents, you will be asked to re-schedule your appointment.

- Proof you are a healthcare worker: Medical or Driver's license, ID badge, etc.
- Photo ID
- Business card from the physician's office with your name and role written on back.

This information is subject to change based on compliance with federal, state and county agencies. Find the latest information at the [link](#) shown above.



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PROVIDER UPDATE

New Epic Launch Date: May 15, 2021

Thank you for your patience as we make adjustments to prioritize the well-being of our patients and caregivers during these unprecedented times.

Training:

- All training for January has been cancelled.
- All provider training will be moved to online, independent study.
- You do not need to re-register for training – you will access and complete your online independent study training in HealthStream starting Feb. 1, 2021.
- You do not need to block a specific time as training will be at your convenience.
- Note for provider super users only: if you did not attend training in December, you may complete assigned training through HealthStream at any time.

Provider Optimization Workshops (POWs):

- POWs will now be April 21 – May 12.
- POWs format and sign-up details will be communicated soon.

Have questions? Please email SJHproviderengagement@providence.org.

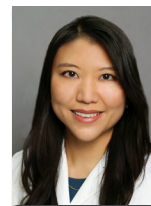
Welcome New Medical Staff Members



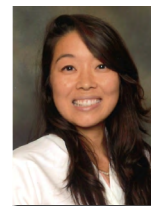
Kari Bruce, MD
Neonatology
CHOC CS



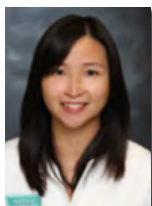
David Cesario, MD
Electrophysiology



Karen Hsu, MD
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St. Joseph Heritage
Medical Group



Miyako Igari, MD
Cardiology



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Chest & Critical
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SUBMISSIONS SOUGHT: Please send your news items to: 714-771-8056 or SJMEDICALSTAFF@stjoe.org

In the Trenches with Kenneth Meng, MD, Diagnostic Radiologist

What's new in mammography at SJO's Center for Breast Imaging and Diagnosis (CBID)?

We are excited to announce that CBID will join the 2021 regional Strategic Experience Goal pilot adoption of the CARE program, launching Wednesday, Jan. 20, 2021. Our goal is consistent delivery of personalized risk assessments and management recommendations to each individual patient with precision and efficiency.

What is CARE? This program supports efficient and secure smartphone-based or email-based screening of all patients within large populations like mammography. CARE screens each patient for breast cancer and genetic risk by utilizing conversational artificial intelligence (AI) to obtain personal and family history. The program allows the uniform delivery of individual screening, automated identification, and personalized management of high-risk patients, as recommended by The American Cancer Society, The American College of Radiology, The National Comprehensive Cancer Network (NCCN) and The American Society of Breast Surgeons.

How will CARE improve patient care at CBID?

Patients scheduled for screening or diagnos-

tic mammograms receive a pre-appointment questionnaire via a secure chatbot conversational interaction using their smartphone or email. Based on their responses, the patient's current lifetime risk of developing breast cancer will be automatically calculated and criteria for genetic testing will be automatically determined.

Additionally, informative videos that provide important educational and fundamental elements about inherited cancer risk and genetic testing are available for the patient to view through the patient facing portal. The patient questionnaire responses and risk assessment results are easily retrieved in the provider facing portal by our mammography and genetics caregivers.

If automated portal results show an elevated risk for breast cancer, which is calculated by Tyrer-Cuzick (TC) Model Breast Cancer Risk Evaluation Tool, and/or an elevated risk of an inherited cancer syndrome, which is determined by NCCN Genetic/Familial High-Risk Assessment Guidelines, the patient is identified for consideration of additional management. Patients with a calculated lifetime risk of breast cancer $\geq 20\%$ meet criteria for consideration of annual breast

MRI, while patients with an increased likelihood of inherited cancer syndrome meet criteria for consideration of genetic testing.



What changes are there in the radiologist mammography report? It now includes the patient's current Tyrer-Cuzick score, a percent remaining lifetime risk of developing breast cancer. Additional report verbiage includes: A TC lifetime risk of developing breast cancer score was calculated and is updated annually. Women with a calculated lifetime risk of 20% or higher are recommended for consideration of adjunct screening with annual breast MRI in addition to mammography, which may provide additional benefits. As indicated by patient reported personal and family history, the report may also include: NCCN Genetics Criteria Met. To provide a cancer risk assessment, the patient is given a questionnaire to report personal and family history of cancer. Patients who meet NCCN Genetic/Familial Risk criteria are given additional information and screening by our genetics program for appropriate follow up.