New Procedure
TCAR—Transcarotid Artery Revascularization

Beebe Healthcare is the first in the region to provide TCAR—transcarotid artery revascularization.

For patients who are at risk for stroke, traditional carotid surgery carries increased risk for stroke during traditional procedures such as carotid endarterectomy and stenting.

A new, less invasive procedure—transcarotid artery revascularization or TCAR—is designed to reduce the risk of stroke during the insertion of the stent. This procedure uses a special transcarotid neuro-protection system, which allows the surgeon to directly access the common carotid artery in the neck and initiate temporary blood flow reversal. By reversing the blood flow quickly during the procedure, the patient’s brain is protected from a stroke.

During the TCAR procedure, one of Beebe’s vascular surgeons makes a small incision at the neckline, just above the clavicle. This incision is much smaller than would be made for a traditional carotid endarterectomy. The catheter is placed directly into the carotid artery and connected to the neuro-protection system to direct blood flow away from the brain, protecting against embolism that could reach the brain and cause stroke. Any embolic plaque is captured in a filter outside the body.

The filtered blood is then returned through a second catheter which flows into the patient’s upper leg. Once the stent is placed successfully, the blood flow is returned to normal.

“TCAR is an innovative procedure that allows surgeons to provide better patient care. During a TCAR, we do not need to navigate catheters through the aortic arch, which can lead to stroke,” said Sean Ryan, MD, of Beebe Vascular. “In addition, any fragments of plaque released during the procedure are safely filtered out. Offering this new minimally invasive option for our patients will dramatically reduce the risk of stroke and heart attack during and after carotid interventions.”

Talk to Beebe Physician Liaison Jeff Peirce if you want to learn more.
Welcome to Beebe

TO CONTACT THE BEEBE MEDICAL STAFF OFFICE, CALL 302-645-3499.

PHYSICIANS

▸ Nicholas Alcorn, DMD
  Oral & Maxillofacial Surgery
▸ Nikhil Chinmaya, MD
  Hospitalist
▸ Maria Dizon, MD
  Pathology
▸ Gurvindra Jholal, DO
  Emergency Medicine
▸ Michael Katz, MD
  Neurology Hospitalist
▸ Mayuri Patel, MD
  Interventional Cardiology
▸ Steven Pearlman, MD
  Pathology
▸ Rhea Riegel, DMD
  Oral & Maxillofacial Surgery

PODIATRY

▸ Joseph Wendolowski, DPM
  Podiatric Surgery

ALLIED HEALTH

▸ Christine Sceper, FNP
  Beebe Family Practice – Beacon
▸ Christie Whitlock, FNP
  Mid Atlantic Family Practice
▸ Barbara Wieder, NNP
  Neonatal Nurse Practitioner

Patient Safety

Reducing Hospital Acquired Infections

As part of our commitment to continuous improvement and zero patient harm, Beebe Healthcare has taken a number of steps to reduce hospital acquired infections to keep our patients safe.

CLABSI AND CAUTI PREVENTION

Beebe care teams use peripheral lines rather than central lines when possible, as these reduce the risk of central line associated bloodstream infections (CLABSIs). One of the most important changes that reduced the incidence of CLABSIs at Beebe was creating set days to change the caps that cover the end of central line tubes. Best practice dictates that caps be changed routinely on a set schedule to prevent infection. After a unit-based trial in early 2018 where caps were changed on Sundays and Wednesdays, this method was adopted throughout the hospital.

CLOSTROIOIDES DIFFICILE INFECTION PREVENTION

Clostridioides difficile, or C. diff, is a bacterium that causes diarrhea and colitis. This serious infection is estimated to cause almost half a million illnesses in the United States each year. About 1 in 5 patients who get C. diff will get it again.

Patients who are taking antibiotics are at an increased risk of C. diff. For this reason, physicians must always confirm the appropriateness of antibiotics when placing an order for them in Beebe’s electronic medical records system. That “pause” reduces the over-prescription of antibiotics, helping to lower patients’ risk of C. diff.

Two of the best C. diff prevention measures we can take are being diligent in our use of hand hygiene practices and disinfecting rooms after they are vacated by C. diff patients.

Could your patient benefit from Advanced Illness Planning (AIP) or a Palliative Care (PC) consult as an outpatient?

Any patient with one or more of these diagnoses can benefit:

• COPD (Chronic Obstructive Pulmonary Disease) on oxygen
• Heart Failure
• Dementia
• Chronic Kidney Disease
• Parkinson’s Disease
• Stage IV Cancer

AIP or PC should be offered early, when the patient is first diagnosed. Diagnosis can be overwhelming for the patient. Talking with our care team will give them a sense of control and education will give them a sense of power.

Our team focuses on connecting patients and families with resources so they can have the highest quality of life while preparing for the future.

Our approach is patient- and family-centered care and optimizes quality of life by anticipating, preventing, and treating physical, intellectual, social, emotional, and spiritual needs associated with serious or chronic diseases. In doing so we:

• Provide relief from pain and other symptoms
• Establish patient and family goals of care. Align the medical plan to meet those goals
• Provide support for patient and family
• Use a team approach to address needs
• Enhance quality of life, and may also positively influence the course of illness
• Enable them to prolong life

AIP and PC have been shown to also decrease how often a patient with chronic illnesses ends up in the Emergency Department or even admitted to the hospital.

Contact Katie Johnson, DO, or Kiernan Quay, DNP, APRN, FNP-C, at our clinic: 302-645-3150. Patients are seen by appointment.

Letter from Dr. Hawtof

Advanced Illness Planning or Palliative Care

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Announcement

Lung Cancer Screening

Beebe Oncology Services’ Thoracic Clinical Performance Group collaborated with Kurt Wehberg, MD, of Beebe Cardiothoracic Surgery to establish a lung nodule conference along with the oncology services lung tumor board. Multi-disciplinary specialists from medical and radiation oncology, cardiothoracic surgery, pathology, radiology, and pulmonology review cases to determine evidence-based next steps of patient care.

Beebe Cardiothoracic Surgery on Savannah Road in Lewes offers regular pulmonary clinics and lung cancer consultations for patients and physicians.

TREATMENT TEAM APPROACH

Dr. Wehberg and Mudiwa Munyikwa, MD, of Beebe General Surgery and Beebe Cardiothoracic Surgery both see patients for lung cancer screening clinics. Following the screenings, the physicians follow up with the patient’s regular care team for treatment planning.

Patients who have had a lung cancer screening or are suspected to have potential thoracic cancers can be referred to Dr. Wehberg or Dr. Munyikwa at Beebe Cardiothoracic Surgery.

Thoracic Navigators Alice Isidro, PA-C, and Robin Weems, PA-C, of Beebe Cardiothoracic Surgery are available to talk to patients and providers and schedule follow-up visits, further testing, and surgery.

Learn more and refer patients: 888-350-LUNG (5864).
Announcement

Rapid Blood Culture Identification

The microbiology laboratory at Beebe Healthcare can now perform rapid blood culture identification tests on all positive blood cultures, allowing for organism identification as fast as two hours after a positive blood culture alert. The rapid identification test allows clinicians to be as specific as possible in their use of antimicrobial therapy, and to be alerted to common antimicrobial resistant infections such as MRSA, ESBL, and VRE up to 24-48 hours sooner.

The rapid identification test will identify approximately 95 percent of bacterial and yeast species in the bloodstream, helping clinicians select the most effective drug faster.

“This test aligns with Beebe’s goals for antimicrobial stewardship: providing the correct antibiotic as quickly as possible, or even limiting antibiotic use in some cases,” says William Chasanov, DO, of Beebe Infectious Disease and Travel Medicine and Director of Clinical Transformation.

William Chasanov, DO