Indiana State Department of Health
"Working for Hoosier Health – a Lifetime Investment"

Express

A Bi-w[illegible] Friday, June 1, 2001

Tele-Medicine UPDATE

THE FUTURE OF TELE-MEDICINE

Soon it may be possible to:

- Visit with a doctor or nurse by turning on your TV
- Get specialty services like dermatology or psychiatry over the TV
- Have a health provider who can access all your records, x-rays, lab tests, and video recordings of visits with specialists as they happen
- Have images of your condition and test results transmitted from a clinic or small hospital to a specialty center for consultation
- Be able to see the results of your mammograms and other preventive screenings within minutes of having them done
- Have a school nurse who can talk directly with a health expert about your child's health problem by turning on the TV
- Be assured that any or all of the above could only be carried out with your permission and that communication of all information and test results involved would be protected by patient-physician confidentiality provisions in the law
- Have health care students, even in remote rural or community locations, be supervised by teachers at a distant medical center

Tele-Medicine Is Planned for Lawrence County

Lawrence County is about to become the second Indiana county to join Indiana's fledgling EPICS network. This project is moving forward under the leadership of Governor Frank O'Bannon. The Indiana State Department of Health together with its partners, the Intelenet Commission, the State Emergency Management Agency, and officials in Lawrence County, is working to install tele-medicine interconnectivity as part of a broader EPICS project.

According to Hazel Katter, director of ISDH's Local Liaison Office, which is overseeing ISDH's three-year federal tele-medicine funding commitment to the EPICS project in Lawrence County, the local EPICS committee has held an organizational meeting involving an array of local agencies and state-level partners, and planning is underway.

Tele-Medicine Is Changing the Way Orange County Residents Are Being Served

Orange County Commissioner Charles W. Hall likes the way the EPICS network is beginning to work on behalf of Orange County residents. He says, "especially the health side of it," which lets nurse practitioners at remote clinic locations communicate with one another and with physicians at BloomiongtonHospital of Orange County, and Bloomington Hospital in Monroe County, and with health sites in Indianapolis.

In a telephone interview last week, Hall mentioned two stand-out examples of tele-medical services provided by the network. Hazel Katter, director of the ISDH Local Liaison Office, provided details.

The first case involved a traffic accident victim who arrived at 3 a.m. at the Bloomington Hospital of Orange County where a radiological CT scan was performed on what appeared to be a severe head injury. Rather than call for a life-support helicopter to airlift the patient to a hospital in Louisville or Indianapolis – typical practice in similar past circumstances – Bloomington Hospital of Orange County sent the scan to Bloomington Hospital in Monroe County by way of their tele-radiological EPICS connection, which in turn relayed the scan to the home of Bloomington Hospital's radiologist.

After reviewing the patient's scan, the radiologist's diagnosis was relayed back to the hospital in Paoli with information permitting the patient to

See TELE-MEDICINE - page 2

EPICS?

Indiana's Emergency Preparedness: Integrated Community Solutions project is known as EPICS. Although EPICS offers many features besides its tele-medicine components, tele-medicine communications is one of its significant parts.

TELE-MEDICINE - from page 1

be treated in Paoli, saving the unnecessary expense of an emergency airlift.

The other tele-medicine example mentioned by Hall involved a snake bite. He says that copperheads and timber rattlesnakes are native to southern Indiana. Snake bites there are taken seriously.

When a patient arrived at the clinic in Marengo seeking treatment for a snake bite, the patient had seen the snake but didn't know whether or not it was venomous. Without identification, the medical practitioners didn't know if anti-venom was needed or not.

Diana Scott, office manager at the Marengo clinic, says that this was a case where the computer and Internet connection provided by the EPICS project were useful. Scott says she typed "Indiana snake" in the computer's Internet search function and found a Web site with colored photos of snakes. Using the patient's description, Scott quickly narrowed the possibilities and the patient easily identified a snake from a photo. The good news was that the bite was made by a nonvenomous snake.

Staff at all of the rural clinics like the research function the Internet offers.

Being able to quickly find appropriate pharmaceuticals and companies that will provide them for indigent patients through the Needy-Meds program is becoming an important part of being connected to the EPICS system, according to Linda Wells Freiberger, family nurse practitioner at South Central Health Care in Rego. She says that all of the clinics are also using the Internet to coordinate patient scheduling for free health care screenings. Using EPICS computer connectivity, a patient can now be referred to a clinic with the closest scheduled screening date.

Freiberger says that the digital camera furnished to her clinic as part of the EPICS communication package has permitted diagnoses of patient skin rashes by consulting with an online Web site provided at no charge by a pharmaceutical company. She says she has also brought the photos to provider meetings for successful diagnostic consultations.

ISDH Assistant Commissioner Maniago Will Leave June 8th

PETE MANIAGO, assistant commissioner, Operational Services Commission, out of his customary dress shirt and tie on a Friday dress-down day, is typically busy on the telephone.

Photo by Daniel Axler

Pete Maniago, assistant commissioner, Operational Services Commission (OSC), will be leaving the Indiana State Department of Health. His last day is June 8, when a reception has been planned by staff to say good-byes and to share reminiscences. Maniago started work at ISDH in June 1994.

Asked about his accomplishments, he was quick to acknowledge that projects completed during his tenure owe much to the participation and valuable contributions of the directors and staff in the Operational Services Division.

The integration of technology at ISDH, Maniago says, is one of the OSC's proudest accomplishments. Technological advancements have included automation of employee time sheets and reservation of state vehicles and conference rooms. Service requests have been streamlined with on-line request forms for voice mail, furniture, pagers, and changes in security access.

Maniago administered ISDH's move from 1330 West Michigan Street following former State Health Commissioner John Bailey, M.D.'s charge to find better working conditions for staff. The process, Maniago says, involved evaluation of the relative merits of upgrading existing space versus moving, followed by acquisition of funding and development and management of the various contracts to assure that appropriate details were in place for separate moves of both administrative and laboratory staffs.

He has also overseen the planning, contract management, and construction of building projects at all of the state institutions that are administered by the OSC.

Maniago says he has viewed his role as helping to support the efficiency and productivity of ISDH employees with a commitment to maintain a consistently high level of responsiveness by OSC staff.

He says he values the staff contributions that developed the operational expectations that govern both day-to-day work and long-range goals.

Those expectations, he said, are outlined in a single-sided bulleted checklist developed with the OSC directors.

The seven categories of expectations include the following imperatives: communicate; develop and follow work plans; set priorities; commit to staff development in management and leadership; promote diversity and cultural competency; use quality improvement tools and processes; and remain accountable. Each category includes many steps.

The seminal idea for the outline was Maniago's, but the details were developed through contributions and consensus of the OSC directors group. It sets both the tone and the procedural guidelines for optimizing productivity throughout the OSC. Notable is the repeated emphasis on timely and clear communication.

Maniago's respect for his colleagues seems to be reflected in the process by which the document was developed and by the day-to-day operational processes defined by the expectations.

The OSC comprises the following ISDH divisions: Administrative Services; Finance; Human Resources; the Laboratory Resource Center; and Special Institutions.

Maniago holds a B.S. in Industrial Management from Purdue University and an M.B.A. from Indiana University.

Car-Bike Commuter Challenge Features ISDH Bicyclist

Three bicyclists have won a commuter challenge against an automobile.

On May 18, the cyclists competed against the driver of a Chrysler to see who would arrive at work first. All observed speed limits and traffic regulations. All followed the same five-to-six mile route of mostly one-way streets. The automobile and the bicyclists started at Ellenburger Park on Indianapolis' eastside. Their destination was Monument Circle.

"The idea was to publicize all the benefits of bicycle commuting," said Casey McIntire, director of the Governor's Council for Physical Fitness and Sports. McIntire led the pack, completing commute in 15-minutes. The driver of the automobile arrived at the circle in 24 minutes after finding a space for the 1995 Chrysler LHS in a nearby parking garage and then walking a block to the Circle.

"Bicycle commuting is a good way to integrate fitness into necessary life-style activities— in this case, driving to work, something that most of us do."

McIntire frequently commutes by bicycle to his job at the Indiana State Department of Health, where secure indoor bicycle parking is provided for employees, together with the amenities of a locker to store bicycle togs, and a shower to freshen up.

For McIntire, time is not the most important issue. He says, "Bicycle commuting is a good way to integrate fitness into necessary lifestyle activities—in this case, driving to work, something I must do. Cycling five miles several times each week means I don't have to spend additional time driving back and forth to get an hour in at the gym."

Mark Higgins, 41, and Patrick Musgrave, 38, were the other bicyclists competing in the challenge. Higgins is vice-chairman of the Indiana Bicycle Coalition, and a Bank One employee. Musgrave is a small-business consultant.

Higgins' wife, Marilyn, was the driver of the automobile. She observed posted speed limits and was delayed briefly by a school bus stopping to pick up students.

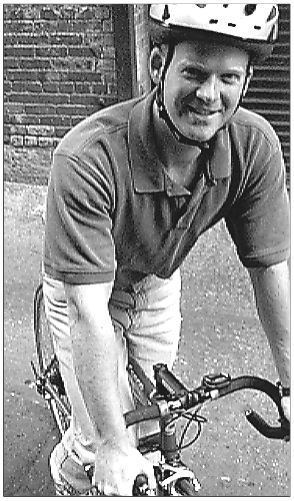
– David Pilbrow

Overcoming Bicycle Commuting Barriers

Commenting on why more people don't commute by bicycle, Casey McIntire speculates that among the reasons may be:

Fear of Riding in Traffic: "Ignorance of safe riding practices and, as a result, an unjustified fear of the risk of injury are reasons that discourage people from city riding," he said.

For the safest ride, McIntire encourages bicyclists to ride with the flow of traffic, (not against it) a third of the way out into a traffic lane, well away from parked cars and the shoulder. This minimizes the danger of being squeezed off the road or of being hit with the opened door of a parked vehicle. The bicyclist's safety far outweighs a motorist's momentary inconvenience of having to slow down behind a bicyclist until he or she can safely pass.



MCINTIRE on bicycle, ready to roll. Photo by David Pilbrow

Finding time to clean up: After a commute, a shower is needed to clean up. ISDH provides separate shower facilities for its male and female employees, as well as locker storage. McIntire suggests, "Rather than shower at home before cycling to work, I shower after arriving, before starting work."

Expense of Equipment: The cost of fuel saved by not driving a motor vehicle can be used to purchase a bicycle and necessary safety equipment like brightly colored clothing and a lightweight helmet. McIntire said, "Excellent new bicycles are available in the $200 price range."

Lack of Secure Bicycle Parking: A separate locked room is provided for employee bicycles at 2 North Meridian Street. ISDH employees may contact Zelma Williamson for more information about bicycle parking, at 3-7392.

Inclement Weather: Mcintire said that most inclement weather can be bared with appropriate clothing and/or rain gear, but advises alternate transportation on icy winter days.

Discomfort: Comfortable clothing, like lycra-spandex shorts, made especially for bicycling, minimizes friction and chafing, and strategic seam placement eliminates discomfort. When purchasing a bicycle, a rider should select a frame that fits by height and sex, permitting the feet to stand flat on the ground while comfortably straddling the bicycle when stopped.

McIntire said, "Bicycle shop employees can help with making the right selection and the appropriate set-up of a new or used bicycle."

International Travel Assistance is Now on ISDH Web Site

Hoosiers planning international travel this year now have a handy Internet reference for the health information they need as they prepare for their trip.

The Indiana State Department of Health has a new Web site for international travelers. Located at http://www.statehealth.IN.gov (click on Health Information), this site contains:

- Information for both international travelers and their health-care providers;
- A pre-planning worksheet for international travelers;
- Current recommendations for travel vaccinations from the Centers for Disease Control and Prevention (CDC);
- A reference list of International Travel Centers in Indiana; and
- Links to federal Web sites with travel warnings and consular information

State Health Commissioner Greg Wilson, M.D. said, "Since we know that international travel is on the rise, we want Hoosiers to prepare carefully for their international destinations. It is important that prior to leaving the country, you consult with a health-care professional."

"Although your primary health-care provider may be able to administer most international travel vaccinations, he or she may not be able to give all of them," said Shawn Richards, adult immunization coordinator at the State Department of Health. "The best choice may be to go to one of the 53 International Travel Centers in the state."

Richards noted that last year, the International Travel Centers in Indiana administered 2,973 yellow fever vaccinations to travelers. She said that other vaccine-preventable diseases that can be contracted in international travel destinations are Hepatitis A, typhoid, and measles.

The new site was developed to reduce response time and to cut mailing costs following an increasing number of phone requests for travel immunization information.

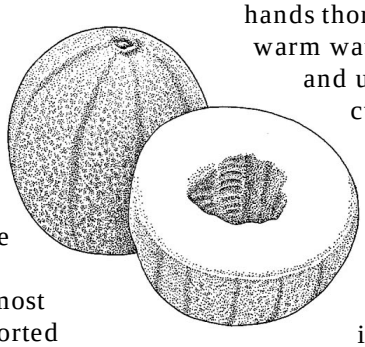
Shawn Richards designed the information content of the International Travel Web site.
Photo by Daniel Axler

Shawn Richards, adult immunization coordinator in the ISDH Communicable Disease Division, has recently completed work on the ISDH International Travel Web site. The site was created to assist persons with knowledge about satisfying immunization requirements and other health and safety-related aspects of international travel.

Richards says, "When I started at ISDH, a year and a half ago, I was responding to three-to-four calls per day, but the number had increased to 10 calls per day earlier this year." This prompted approval to create ISDH's International Travel Web site, freeing time for Shawn's other essential duties.

Warmer Weather Is a Time to 'Brush Up' On Food Safety

This spring, the cause of death of an elderly woman and of illness in 30 other people was traced to eating cantaloupe that had been contaminated with salmonella. The source of the contamination is unknown, but it is likely that the fruit was imported into the United States.

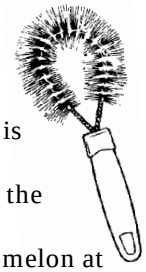


Salmonella is the most frequent cause of reported foodborne illness. Its sources include poultry, meat, eggs, dairy products and fruits or vegetables, particularly those grown on the ground – like melons. People infected with the bacteria usually develop symptoms within three days of eating contaminated food, and may experience fever, cramps, and diarrhea. Most healthy adults will recover within five days without medical attention. But for children, the elderly or the immunocompromised, the illness can be life threatening.

Salmonella can be present on the skins of whole cantaloupes. It is spread to the fruit when a knife cuts through the skin of an unwashed melon, and into the fruit. The conditions of the melon are favorable to the growth of the bacteria. If the melon is left unrefrigerated, the bacteria will reproduce.

The best way to prevent illness when eating cantaloupe is to wash the outside of the melon before cutting it.

Use a produce brush, if possible, to remove all visible dirt. Wash your hands thoroughly with warm water and soap, and use a clean cutting board.



After the melon is sliced, store the uneaten fruit in the refrigerator.

If serving the melon at a picnic or outdoor gathering, store cut fruit in a cooler on ice and keep the cooler covered to prevent contamination. For more information on food safety, visit the Indiana State Department of Health Web site at **http://www.statehealth.IN.gov/regsvcs/foodprot/index.htm** *– Tara Renner*

Indiana State Department of Health **Express**

The *Indiana State Department of Health Express* is a bi-weekly publication for ISDH employees and stakeholders. To submit news items, call (317) 233-7336 or send information to: ISDH Express, Office of Public Affairs, 2 N. Meridian St., Section 2E, Indianapolis, IN 46204-3003. Inquiries should be directed to:

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NewsLink

A Monthly Publication for Local Health Departments

Friday, June 1, 2001

State Health Commissioner Extends Invitation to Local Health Officers, Administrators to Participate in Seminar on Implementing HIPAA Regs

From the Commissioner:

(The following is an invitation extended by State Health Commissioner Gregory Wilson, M.D. on May 7, 2001:)

To: All Local Health Officers
All Local Health Department Administrators:

This is an invitation for an upcoming informational seminar on HIPAA (Health Insurance Portability and Accountability Act of 1996) to be held June 12, 2OO1.

The Indiana HIPAA Workgroup is sponsoring the June 12th seminar. I encourage your attendance.

The HIPAA Workgroup is a voluntary workgroup made up of health care professionals representing each segment of the Indiana health care industry from providers to payers to health care consultants. The HIPAA Workgroup was formed to assist Indiana health care organizations and providers to implement HIPAA by providing education, resources, and networking opportunities.

HIPAA will impact every health care provider, payer, and health care related organization on a national and statewide basis. This seminar will help build your awareness and will provide you with a starting point in your local health department assessment and implementation of HIPAA.

The seminar is free, but space is limited to the first 300 registrants in each session.

Thank you for your assistance. If you have questions or concerns about this notice, please call 317/233-7673 or cmickens@isdh.state.in.us

Gregory A. Wilson, M.D.
State Health Commissioner

Two HIPAA (Health Insurance Portability and Accountability Act) informational seminar sessions are scheduled for June 12. The seminars are sponsored by the HIPAA Workgroup, which comprises Indiana health care professionals representing the provider, insurance, and public health sectors. Duplicate morning and afternoon sessions are programmed for 8 a.m. to noon, and from 1 p.m. to 5 p.m., respectively. Both sessions will be held in the Indiana Government Center South Auditorium.

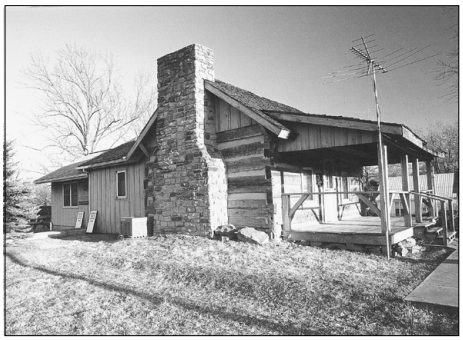
In addition to all local health officers and all local health department administrators, other health care industry representatives have been invited. Seating will be limited to the first 300 registrants for each session.

A series of similar, but separate informational seminars have already been planned for state health department employees. Space limitations for the June 12 seminar preclude participation by state employees.

The seminar agenda will include special presentations on the background and development of HIPAA, on legal aspects and impacts, on privacy, on security, on HIPAA and the FBI, on insurability, and on the role of the Indiana HIPAA Workshop. Time also has been slotted for questions and answers. **(See reverse side of this page for a registration application.)**

Digital Cameras Cover Local Public Health News

Although not quite commonplace, the *NewsLink* has been receiving, with increasing frequency, photographs over the Internet to illustrate stories of local health department activities. The photos arrive as GroupWise e-mail attachments.



LOG CABIN CLINIC photo was received as a digital e-mail attachment file from Joyce Krothe who heads the I.U. School of Nursing in Bloomington.

Many shutterbugs at the local health departments and clinics who have digital cameras have discovered how easy it is to send these image attachments. E-mailing the photos offers a postage-free opportunity to get some visual coverage of staff and events into the *NewsLink* newsletter.

Checking at local department stores, or on the Internet, it's obvious that there are some cameras modestly priced (between $100 – $200) that will produce great snapshot-size digital images that are ideal for use in the *Express* and the *NewsLink*.

For those with budgetary concerns, it's worth remembering that with the camera and an Internet connection, there is no additional cost for film or processing.

Recent digital photos running in our publications have included the half-page screen of the log cabin clinic in Brown County (March 30) , George Plain, M.D. (March 30) and the two photos of the Tipton County Health Fair (May 4). All images were mailed to us instantly via GroupWise across the Internet.

For local health departments that want to see their activities illustrated in the *NewsLink*, images produced by digital cameras appear to be the wave of the present and future.

HIPAA for Hoosier Health Care Registration Form

(For use **only** by local health officers and local health department administrators.)

Due to short time frames and space limitations, please register by June 6, 2001.

Instructions: Only use this form if you do not have Internet access. Registration at www.indianahipaa.org is preferred. If you do not have Internet access, please fax this completed form to 317-234-0122. Please print to complete. Please copy the blank form for multiple registrants.

Choose session you will attend: ❒ 8 AM - 12 Noon or ❒ 1 PM - 5 PM

Name: _____ Title: ❒ Mr. ❒ Ms. ❒ Dr.
Last First Middle

Organization Name: _____

Org. Type:
- ❒ Physician Office
- ❒ Hospital
- ❒ Other Provider
- ❒ Payer/Insurer/TPA
- ❒ Health care Consultant
- ❒ Other _____

Street Address: _____

City: _____ State: _____ Zip: _____

E-mail address: _____

Phone (incl. Area code): _____

Fax (incl. Area code): _____

For more information: call 317/233-7673 or e-mail cmickens@isdh.state.in.us

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