

OMCMG

OREGON MEDICAL CASE MANAGEMENT GROUP

833 SW 11th Ave., Suite 507, Portland, OR 97205

OMCMG is committed to advancing the practice of case management by providing members with educational opportunities and a network of collaborative support.

www.omcmg.org

2007 Board of Directors

Mary Ellen Pierce | 503-312-8557
President
mpierce540@aol.com

Jeane Covey | 503-680-4987
Treasurer
jeane.covey@verizon.net

Leslie Conner | 503-607-5000
Secretary
conner.leslie@verizon.net

Margaret Horn | 503-341-7562
Education Committee, Conference Chair
mhorn@avamere.com

Cristie Wiggs-Greenlee | 503-255-2377
Immediate Past President
critieq@comcast.net

Dena Rossi | 503-279-5226
membership Committee
dena.rossi@premera.com

Linda Thompson | 503-238-4312
Member at Large
lthomp@ubenefits.com

Tom Coogan | 503-335-6243
Member at large
tomc@caremedical.com

Dana Penilton | 503-246-6232
Member at Large
dananpenilton@aol.com

Jean Lien | 503-666-9648
Member at Large
rajan_lien@verizon.net

Judy Jessing | 503-572-3451
Member at Large
judy.jessing@providence.org

Diane Terrett | 541-684-5455
Member at Large
dterrett@pacificsource.com

Tammy Peterson | 503-804-3072
Member at Large
tjp95@yahoo.com



I am very pleased and proud to assume the role of OMCMG President this year. The organization is stronger than ever, with a growing membership and a well-earned reputation for providing quality continuing education for our colleagues in the Portland and Southwest Washington area. This continuity has occurred as a result of the efforts of a number of dedicated people in the organization who have faithfully served in spite of the many demands on their own personal and professional time. To note a few of them: Dena Rossi, who has been a member of the board for many years and has played an integral role in growing and sustaining our membership;

Margaret Horn, whose energetic and positive spirit has drawn many, many dynamic and diverse speakers and sponsors to our luncheons and conferences, and who has taken on the unenviable task of assuring CEU credits for our attendees;

Linda Thompson, who has quietly worked behind the scenes to assure our compliance with state and national laws and guidelines and who has tirelessly worked to preserve our integrity as a non-profit organization;

Tom Coogan, who has brought in many new vendors and sponsors and whose incredible gifts as a galvanizer and collaborator have provided the spark of enthusiasm and sense of fun that keeps all of us feeling part of a very worthy endeavor;

Cristie Wiggs-Greenlee, who willingly stepped in to serve an extra term as president to provide continuity and focus during a time of transition and organizational growth;

Leslie Conner, who has made the role of the board secretary look easy when we all know it is anything but, and who has willingly volunteered for extra duties on numerous occasions;

Jeane Covey, who boldly embraced new responsibilities as our treasurer and found – as we all have – that this is a truly collaborative and supportive organization.;

Judy Shaw, who demonstrates daily what it means to be the glue that keeps organization ORGANIZED.

I cannot possibly acknowledge here everyone who has been part of the OMCMG team, but I can say, to all the present and past board members and support staff who have taken the time to become part of the ongoing story of OMCMG – we are all so grateful for your contributions and your support. In this present day and age, when time seems to simply vanish in a heartbeat and the demands on each of us continue to increase, the fact that we have such participation is phenomenal, and humbling.

If you have not yet had the opportunity to serve on the board, I encourage you to consider it. I never thought, 12 years ago, that I would still be part of OMCMG but I can tell you truthfully that I have gained so very much from this connection, both in terms of personal and professional learning as well as the many friendships that have blossomed as a result.

The board will meet for its annual planning retreat later this month. If you have ideas, suggestions or have an interest in joining us as a member-at-large, we welcome you. We will be, among other things, planning our fall conference and looking at ways to further serve our members. Your input is vital and valuable to this process. Feel free to call me at (503) 214-2886 or email me at MPierce540@aol.com. It's going to be another great year.

Mary Ellen

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OREGON MEDICAL CASE
MANAGEMENT GROUP



Mission Statement

OMCMG's mission is to provide a common ground for individuals practicing case management in health-related fields. We seek to provide peer support and education in a relaxed, non-competitive environment. OMCMG strives to promote quality and growth of case management on a local and national level.

OMCMG Meetings

The Meetings Have Moved!

Starting with the April 5th meeting we will have a new meeting place. OMA have moved their offices to a new building at 11740 SW 68th Parkway in Portland.

A map is available on page 9. If you have any questions, please call Judy at 503 224-9460.

Upcoming Events

April 5,

Speaker: Carl Balog, M.D.

Topic: Interventional Chronic Pain Treatment,

Sponsor: Advanced Bionics Neurological Devices

May 3,

Speaker: Walter Carlin, M.D.

Topic: Secondary Stroke Prevention,

Sponsor: Bristol-Myers Squibb Company

June 7,

Speaker: Carl Balog, MD

Topic: Neuropathic Pain Management

Sponsor Pfizer

July

no meeting

August 2,

Speaker: TBA

Topic: Case Studies in the Management
of Type 2 Diabetes

Sponsor: GlaxoSmithKline

September 6,

Speaker Tom Deloughery, M.D.,

Topic: DVT Prophylaxis,

Sponsor: Samofi Aventis

October 4,

Speaker Trey Malicoat, MS,

Topic: Hospice Updates,

Sponsor: Signature Hospice

November 1 & 2

Conference Pain

December 6

Speaker: Long Nguyen, Pharm.D.

Topic: Strategies for Optimal Management

of Patients with Heart Failure and Post MI

Sponsors: GlaxoSmithKline and Therapeutic Assoc.



OMCMG President Spotlight

Mary Ellen Pierce, RN, BSN

Mary Ellen graduated from the University of Alaska in 1977. Her nursing experience includes hospital, nursing home, rehabilitation, teaching, consulting, and case/care management. Currently she is the owner of Care Management Associates, Inc, which provides RN assessment, consultation, advocacy and health care management of clients in both private and long term care settings. Mary Ellen is the current President of OMCMG and has served as Vice President, Secretary and member-at-large in the past.

New IV Therapies

Don Love RPh

Providence Home Services

Manager, Infusion Pharmacy

Two new drugs have made it to the forefront of infusion therapy: Abatacept (Orencia®) by Bristol Myers is a cytotoxic T lymphocyte antigen immunoglobulin. It is a biological response modifier that demonstrates anti-inflammatory effects by downregulating T cell activation. Abatacept binds to receptors on the antigen-presenting cell and prevents them from binding to the T cell for optimal T cell activation. In effect this decreases the autoimmune response of the body and decreases the progression of rheumatoid arthritis. Abatacept is used in patients who have an inadequate response to one or more disease-modifying anti-rheumatic drugs in the following doses: 500 mg for patients weighing less than 60 kg, 750 mg for patients weighing 60 to 100 kg, or 1 gram for patients weighing over 100 kg. The dose is administered IV over 30 minutes and strict adherence to mixing protocol is to be observed. Doses are given at 2 and 4 weeks after the initial dose and then every 4 weeks thereafter. Evidence does not support pediatric administration. Patients must be monitored for any infectious process especially respiratory infections (e.g. TB) and malignancies. Common side effects include nausea, headache and urinary/respiratory infections. The drug should be given with caution when a person is taking other immune modulating drugs. The drug company has removed the mandatory patient registration approval process and the drug is readily available. It is not currently recommended for infusing in a home situation.

Natalizumab (Tysabri®) is a recombinant humanized monoclonal antibody used in relapsing multiple sclerosis (MS). It is not recommended for chronic progressive forms of MS. The mechanism of action of natalizumab is believed to involve the inhibition of immune cells from crossing blood vessel walls to reach various tissues, including the brain leading to a reduction of plaque. Natalizumab increases the risk

of progressive multifocal leukoencephalopathy (PML), an opportunistic viral infection of the brain that usually leads to death or severe disability. Although the cases of PML were limited to patients with recent or concomitant exposure to other immunomodulators or immunosuppressants, there were too few cases to rule out the possibility that PML may occur with natalizumab monotherapy. Because of the risk of PML, natalizumab is available only through a special restricted distribution program called the TOUCH™ Prescribing Program. Under the TOUCH™ Prescribing Program, only prescribers, infusion centers, and pharmacies associated with infusion centers registered with the program are able to prescribe, distribute, or infuse the product. In addition, natalizumab must be administered only to patients who are enrolled in and meet all the conditions of the TOUCH™ Prescribing Program (1-800-456-2255). Healthcare professionals should monitor patients on natalizumab for any new sign or symptoms that may be suggestive of PML. Natalizumab dosing should be withheld immediately at the first sign or symptoms suggestive of PML. The usual dose is 300 mg IV infused over approximately 1 h, given at 4-week (28-day) intervals. Common side effects of the drug are rash, arthralgia, headaches, and urinary/respiratory infections. The drug should be given with caution when a person is taking other immune modulating drugs and is currently not recommended for infusing in a home situation. Providence Home Infusion Pharmacy is enrolled in the TOUCH™ Prescribing Program and capable of administering and dispensing the drug.

Data:Infusion:Clinical Data:Newsletter articles:
Orencia-Tysabri



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Our thanks go to...

For the meeting in December the Board of Directors decided to raise monies for the OMCMG Scholarship Fund. This fund is used to provide the resources to student nurses and nurses who without assistance would not be able to attend the November Conference or the Monthly Meetings. This year we not only met but exceed our goal with over \$1,000.00 raised between the raffle for a trip to Lake Tahoe and the balloons. The board is meeting for our annual retreat soon and a decision will be made about next year's event.

Everything that is sold or attached to the raffle comes to OMCMG as a donation from businesses throughout the metro area. Their generosity allows us to raise the money that we do. What follows this is a list of the businesses and people who made the donations and we encourage you to use them when you can. Thank you's also goes to the people that bought raffle tickets and balloons and we look forward to seeing you next year.

Acapulco Mexican Restaurant, Annie Blooms, Artists Repertory Theatre, A Simple Elegance, Avamere, Baja Grill Restaurant & Catering, Baskets of Joy & More, Bed Bath & Beyond, Benihana Inc., CDForge, Chinook Winds Casino Resort, Costco, CPH Corporation, Eleni's Philoxenia, El Gaucho, Enchanted Forest, Farmington Gardens, The Flying Pie Pizzeria, Grand Central Baking Co. , Greek Cuisina, Higgins Restaurant & Bar, Holiday Inn Hotel & Trade Center, Hollywood Theatre, Honey Baked Ham Co. , Krispy Kreme, Le Bistro Montage Restaurant , Linda L. Hill, Maryhill Museum of Art, New Renaissance Book Shop, Oaks Park Association, Old Spaghetti Factory, Old Wives Tales, OMSI, Oregon Symphony, Pearl Bakery Inc., Pizzicato Pizza, Portland Center Stage, Portland Children's Museum, Portland Classical Chinese Gardens, Residence Inn by Marriott Portland Riverplace, See's Candies, Sheryl K. Weissman, DDS, Starbucks, The Cinnamon Bums, Inc., Portland Trail Blazers Portland Trail Blazers, Washman Auto Spas, Portland Winter Hawks, Yoga Pearl.

The Conference is Coming...

Thanks to all of our sponsors and vendors who make this possible.

Last November once again marked a very successful conference thanks to committee Chair Margaret Horn and her workers bees Judy Jessing, Jean Lien, and Tom Coogan. It was very well attended because of interesting topics, great vendors, and the reason so many attend...the food. Thursday night's wine and cheese reception sets the tone for the next day setting us up for learning, fun and fellowship with those in case management as well as those who support it.



Margaret and her crew are once again busy planning next year's conference scheduled for November 1 and 2 at the Airport Shilo Inns & Suites.

The main theme will be Pain with further announcements as to who the speakers will be as we get closer. The conference as always will also include the vendor fair. Reservations for the Vendors and Sponsors are now being accepted. If you are interested you can call the OMCMG offices at (503) 224-9460 to make sure you get the spot you want spaces is limited.

Mark your calendars now for November 1 & 2, 2007 for OMCMG's Conference and Vendor Fair.



We are starting a new column that we hope to run each edition of the newsletter that talks about the interaction of Nurse Case Managers that work with other professionals in this field. Our hope is that Vendors, Providers, Social Workers and any one else interested will submit an article to Judy Shaw at jasjca@ipns.com or lconner@avamere.com. Here is the first article:

Nurse Case Managers and Vocational Rehabilitation Counselors can be partners in the rehabilitation process and frequently are.

It is often the Case Managers job to assess, plan, facilitate or advocate for options and services to meet the clients rehabilitation needs. Case Managers have unique skills

that require communication and collaboration to coordinate care and make sure resources are available that will result in quality, cost effective rehabilitation outcomes. The Case Manager is typically involved with the client early on and are able to develop relationships with the families, care providers, treating physicians, therapists and other medical professionals. They gain valuable information and insight into the clients obstacles, specific needs and strengths.

The goal of the Vocational Rehabilitation Counselor is to assist people with disabilities to reach maximum psychological, social, vocational and economic independence. The Rehabilitation Counselors role frequently asked to take all of the pieces of rehabilitation and integrate them into a comprehensive Vocational Plan. The Rehabilitation Counselor completes an individual assessment, reviews medical and psychological information, meets with employers, completes job analysis, provides vocational guidance, develops training plans, pursues job placement options, completes ergonomic assessments and addresses other barriers to employment.

Vocational Rehabilitation Counselors and Case Managers are dependent upon one another. Without medical information and appropriate interpretation of that information the Vocational Counselor is delayed in providing services. Case Managers cannot see their cases to completion without the Vocational Rehabilitation Counselor picking up the ball and running.

Collaboration is essential to successful outcomes. I for one am very thankful when I hear that a Nurse Case Manager is working on a case that has been referred to me.

This article was written by Linda L. Hill a private Rehabilitation Counselor with over 25 years experience providing vocational services to injured workers specializing in people with TBI. She is a graduate of Texas Tech. University and holds a Master's degree in Rehabilitation Counseling from OSU/WOSU. Linda owns her own company and is certified as a CRC, LPC, and CLPC.

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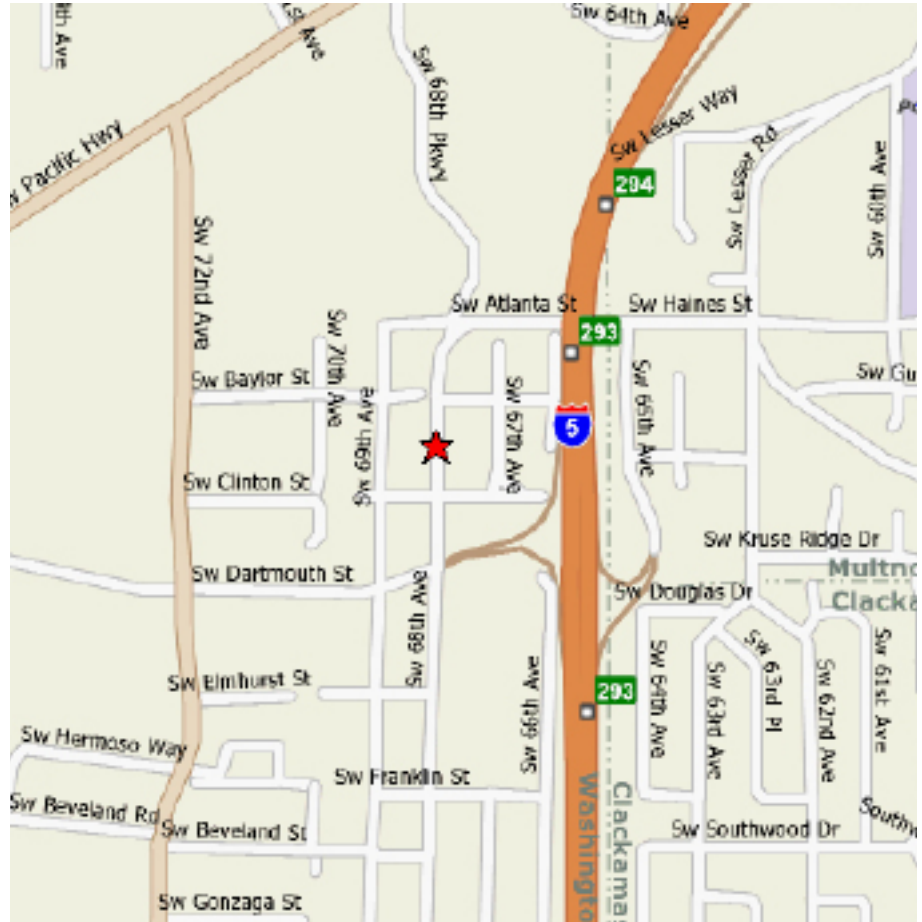
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New Building Location Map

11740 SW 68th Parkway,
Portland, OR 97223



The Meetings Have Moved!

Starting with the April 5th meeting we will have a new meeting place. OMA have moved their offices to a new building at 11740 SW 68th Parkway in Portland. It is very easy to reach from I-5 at either side. Take the Haines Rd. exit if you are headed south. Veer left and at the first stop sign turn right. It is the brand new brick building on your right. If you are coming north, also take the Haines Rd. Sylvania PCC exit to the top of the hill. Turn left and at first stop sign turn left once again. After the next stop sign go straight and the brand new building is on your left.

A map at the top also gives you the information you need. If you have any questions, please call Judy at 503 224-9260.