Each medical doctor is required to complete 150 hours of continuing education courses or programs approved by the board of which a minimum of 75 hours of the required 150 hours must be earned in courses or programs designated as Category I programs.

New State of Michigan, Department of Community Health Bureau of Health Professions
- A minimum of 1 hour of continuing education must be earned in medical ethics.
- Effective December 6, 2017 a minimum of 3 hours of continuing education must be earned in the area of pain and symptom management.

New Public Health Code and Administrative Rules require:
- Licensees and individuals seeking licensure to complete human trafficking training.

Beginning with the January 2017 renewal cycle, and all renewal cycles thereafter, licensees must have completed training in identifying victims of human trafficking that meet the standards established in Administrative Rule 338.1303.

Important Information Regarding New CME Requirements

There is an emerging link between diabetes and colon cancer. Ways to reduce risk for colon cancer are the same as those to reduce risk for developing type 2 diabetes. Studies show that those with colorectal cancer and diabetes were more likely to die than those who did not have diabetes in addition to colon cancer.

The goal of the grant is to increase the colorectal cancer-screening rate of those with diabetes. We ask patients their screening status at assessment and at 3- and 12-month follow up appointments. This is communicated to you when your patient completes our education program.

This year, we have also been working to help patients understand the prep diet for colonoscopy as it relates to diabetes. We have found there are many different instruction sheets for prep diets, but most do not address diabetes and insulin. Contact the diabetes center at 810.262.2310 if you would like a sample instruction that addresses this.

CME Calendar
CONTINUING MEDICAL EDUCATION

SAVE THE DATE!
November 8, 2017 – Wednesday
Terry Thomas Conference & OB/GYN Alumni Event
Holiday Inn, Flint, 6:00 pm-8:30 pm

CME on Demand is Available
Ethical Principles – Choosing Wisely: Is Parsimonious Care “Just” Rationing?
Leonard M Fleck, PhD, Professor of Philosophy and Medical Ethics, MSU of Human Medicine

Educational Objectives:
- Critically assess the degree to which there is a distinction between parsimonious care and health care rationing.
- Distinguish between just and unjust forms of health care rationing, as well as just and unjust forms of parsimonious care.
- Distinguish parsimonious care choices that are congruent with the role of a physician as a loyal patient advocate from those that are not congruent with that role.

Pediatric & Adolescent Obesity – 5210 Let’s Go!
Sathyan Sudhanthan, MD, Assistant Professor, Department of Pediatrics & Human Development, MSU College of Medicine

Educational Objectives:
- Review the burden of childhood and adolescent overweight and obesity nationally.
- Review the obesity data from Michigan and Genesee County
- Review healthy behavior recommendations and screening guidelines for childhood and adolescent age groups from AAP.
- Understand the utility of simple tools to screen for health behaviors and the importance of motivational interviewing in managing adolescent obesity.
- Understand the role of care managers as agents of change for health behaviors in adolescents and families.

Also coming in 2017
- Malpractice/Risk Management
- Oncology
- Pain Management
- ...and many more!
Physicians and Mid-level providers play a vital role in order reconciliation. As a part of this house-wide improvement initiative led by Dr. Mercer, Dr. Roebuck and Dr. K. Ahmed, we posted at the ranking of >80 providers showing where they stand amongst their peers on % completion of prior to admission medication reconciliation within 24 hours. We mailed this information to each provider on the list and posted the results in the Physicians Lounge. Additionally, education seminars are provided to our Internal Medicine, Pediatric and Obstetrics & Gynecology residency programs.

In the past 6 months (January – June 2017) our data shows:

• 48% of the time we do not reconcile 100% of the prior to admission medications. Improved from 54% last period (Oct – Mar). We want this to be ZERO.
• 46% of the time we reconcile 100% of the medications within 24 hours. Improved from 41% last period (Oct – Mar).

Our goal is to reconcile all prior to admission medications within 24 hours of admission. We will continue to push for improvements in this area. There is a side bar in Epic that shows your compliance with required documentation for each patient. If you need assistance with learning how order reconciliation works in Epic, please contact a Scribe for one-on-one assistance by dialing 2-SCRB (27272). If you would like to join the improvement team, please contact Julia Moses at 810.262.9272.
Hurley Professional Staff Anniversaries:

Hurley congratulates the following providers who reached milestone Hurley Professional Staff anniversaries during the month of August:

5 years
- Babatunde Almaroof, MD
- Mustafa Mahmoud-Hassan, MD
- Mohmmed Margni, MD
- Yaseen Rafe’e, MD
- Anju Sawni, MD

10 years
- Scott Nyman, PhD
- Murugusundaram Veeramani, MD
- Haissam Khouri, MD
- Punam Sharman, MD

40 years
- Ernesto Duterte, MD

Hurley recognizes the dedication and commitment of our doctors. As a feature of the Physician Connection, Hurley will acknowledge five (5) year anniversaries each month.

Now Available: Accredited Online Course – Quality Payment Program 2017 Merit-Based Incentive Payment System: Improvement Activities Performance Category

A new, online and self-paced overview course on the Quality Payment Program is now available through the MLN Learning Management System. Learners will receive information on:

- The Improvement Activities performance category requirements, and how this category fits into the larger Quality Payment Program
- The steps you need to take to report Improvement Activities data to CMS
- The basics about scoring of the Improvement Activities performance category

This course is the third course in an evolving curriculum on the Quality Payment Program, where learners will gain knowledge and insight on the program all while earning valuable continuing education credit. Keep checking back with us for updates on new courses. First time learners will need to register for the MLN Learning Management System. Once registered, learners will be able to access additional courses without having to register. For information on how to login or find training, please visit our MLN Learning Management System FAQ sheet.

The Centers for Medicare & Medicaid Services designates this enduring material for a maximum of 0.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. Credit for this course expires June 1, 2020. AMA PRA Category 1 Credit™ is a trademark of the American Medical Association.

Accreditation Statements

Please click here for accreditation statements.
The Hurley Diabetes Center (HDC) is a small but mighty department located at the Eastside Campus. They are staffed with dietitians and a nurse, who are all certified diabetes educators, backed up by Emily Lannon, our medical secretary, who keeps the wheels rolling.

Patients arrive with questions on how diabetes will change their life and are pleasantly surprised to see how they can manage the disease, rather than it managing them. The entire program consists of 5 classes, and covers many food related topics, as well as medications, hands on meter training including: when to test, what the numbers mean, and what to do about them. Goals are set by patients for things important to them. Dietitians Cathy Fischer and Joanna Sheill connect the dots for people and translate how what you eat affects your blood sugar.

Jenn Walrath, RN CDE, is also providing training during new nurse orientation, as HDC is working with inpatient nursing to give tools and support to assist in caring for people with diabetes while inpatient. HDC also has trained leaders who provide the National Diabetes Prevention Program. This year-long program gives those at risk for diabetes tools for lifestyle changes to reduce risk for developing diabetes.

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A patient-focused approach allows individualization, and the adult learner method helps to assist adults work on what matters most to them regarding their diabetes management. Diabetes Program Manager Michele Bernreuter says “I am so proud of the work done here. People tell us all the time how the classes have changed their lives.”