Inked
Doctor’s book articulates risks of tattoos and piercings

One-third of the working population has tattoos. While many first got them in their teens or early 20s, Gregory L. Hall, MD, says by the early 30s, tattoo regret sinks in. That cute chubby devil on the bicep may reflect a sassy 18-year-old girl, but it doesn’t fit with the image of a 40-year-old church deacon.

As an internist, Hall said he began exploring the world of tattoos and piercings as a result of seeing patients who expressed regret in his office, but not necessary to their family and friends. Though he originally sought to find resources for his patients to share the pros and cons of tattoos and piercings, he was not satisfied with the selection and decided to write his own.

The first edition was titled, “Tattoos: Should I or Shouldn’t I.” Hall took the book to the Cleveland Metropolitan School District (CMSD) to promote as an educational tool. Upon their recommendation, he added piercings and revised the book to cater to younger students.

Meeting the need of educators
The head school nurse at CMSD said that upon graduation more than half the student body had at least one tattoo. “They are piercing each other in the restroom, sharing needles and in some cases doing their own tattoos,” he said. Hall decided that his book should be visual and had the help of an editor to ensure it was edited for the seventh-grade reading level. The result is a book that can be read quickly—in one or two sittings. He also wrote a teachers’ guide as a supplement with quizzes and handouts that can be photocopied as classroom supplements.

Since he published the latest version, “Teens, Tattoos and Piercings: The health and social impact of permanent body art,” Hall has spoken about tattoos in media stories and at Parmadale,
FROM THE PRESIDENT AND CEO

Summer has arrived in Cleveland and there are so many exciting changes and events happening. The same is true here at St. Vincent Charity Medical Center. We continue to embrace change and as an organization we are working hard to evolve our strengths by bringing new physicians, new procedures and new approaches to our organization and to our patients.

As you will see in this issue of Caritas, we have entrepreneurial physicians who think big about the public health of our community such as Dr. Greg Hall. He took experiences he was seeing in his internal medicine practice, added research and is now sharing what he learned with the larger community.

We have partnered with Austen BioInnovation Institute in Akron to create an innovation-oriented pathway for surgeons to explore and commercialize new ideas and solutions. Working closely with a select group of surgeons at SVCMC, the ABIA partnership will provide St. Vincent Charity with engineering and technology development resources necessary to develop medical devices and solutions with clinical and commercial potential.

These changes create energy and excitement but also keep us at the forefront of medical care.

David F. Perse, MD
President and CEO

OUR MISSION

In the Spirit of the Sisters of Charity of St. Augustine, the St. Vincent Charity Medical Center family is dedicated to the healing ministry of Jesus. As Caregivers we serve with a deep respect for the dignity and value of all persons, we are focused on quality care, dedicated to the poor and committed to continuing education.

Srinivas Merugu, MD, FACP, MMM
Director of Patient Safety

OUR COMMITMENT TO PATIENT SAFETY

At St. Vincent Charity Medical Center, quality comes first. We take great pride in our national standing as a top quality hospital. However, we recognize that patient safety and quality must go hand-in-hand. We focus on patient safety every day and realize it takes a strong team effort to keep our patients safe while we provide outstanding care. The Institute of Medicine has outlined six aims of quality care that most hospitals follow to ensure a commitment to patient safety. The six aims and what they mean for patients are below:

Safe: Care should be provided so that patients do not suffer harm.
Effective: Your care should follow the most effective and up-to-date guidelines for care.
Efficient: We should be good stewards of your resources and provide you care that is cost-effective.
Timely: We should provide you care as soon as possible without long waits or delays in receiving care, service or results.
Patient centered: Your care should revolve around you and respect your wishes and put you in control.
Equitable: It is our mission to care for everyone, regardless of race, gender, income or any other demographic factors.

Our focus is not only on the standards set by outside agencies, but also on our continuous effort to improve the safety of all patients in our care.

Srinivas Merugu, MD, FACP, MMM
Director of Patient Safety
East Cleveland Schools, University Schools in Hunting Valley, Wilberforce University and at the Ohio Public Health Conference, and in September at Multi-ethnic Advocates for Cultural Competence. The book has been overwhelmingly well received in part Hall believes because he doesn’t tell people not to get tattoos. Rather he suggests they become informed about the risks before getting them.

Know the risks
The risks both social and medical can be life changing, according to Hall, who has special interests in public health and health disparities. Certain professions, such as the FBI, CIA and covert operations will not consider applicants with tattoos for the sheer fact that they can identify individuals. Even the military has cracked down on obvious tattoos.

The U.S. Navy updated its policy on tattoos and body art in 2013 to include no tattoos, body art, brands on the head, face, neck or scalp and elsewhere on the body that are “prejudicial to good order, discipline and morale or are of a nature to bring discredit upon the Navy.” It further requires no gang art and nothing that is visible through dress whites.

Google “personal appearance guidelines” to see the endless list of companies that prohibit obvious body art, including UPS, Cedar Point, health care organizations and higher educational institutions. St. Vincent Charity Medical Center’s policy requires that visible tattoos be covered and body piercings appear only in the ear with maximum of two piercings per ear.

Patients turn to the painful and costly option of removal when the tattoo interferes with employment or their future plans. In a study conducted by The Patient’s Guide, the number of tattoo removal procedures grew by 32 percent from 2011 to 2012; the majority of people having tattoos removed cited “employment reasons” as their motivation for having the procedure. Other reasons included the removal of the name of a former spouse or partner, a change of beliefs, and being unhappy with the appearance of the tattoo.

Hall, who has seen an uptick in the number of laser tattoo removal procedures he performs in his Richmond Heights office, hopes that his book will help illuminate the potential social risks before the first needle pierces the skin. “Teens don’t know what they are setting themselves up for,” said Hall.

Aside from the aesthetic and social reasons for understanding tattoos and piercings, there is now solid medical evidence linking tattoos with Hepatitis C. In a study published in the January 2013 issue of The Journal of Hepatology, researchers found a disproportionate occurrence of Hepatitis C in participants with tattoos. The study controlled for such links to Hepatitis C as IV drug use and blood transfusions prior to 1992.

“This study is big because now it explains a rationale for the social and health costs of tattoos,” said Hall. There’s also evidence of increased risk of certain skin cancers, staph or other bacterial skin infections, heavy metal poisoning and permanent scarring. Pathologists are also seeing tattoo ink in lymph node biopsies.

“I believe the overwhelming adoption of excessive tattooing is a fad. Tattoos are not going away, there will always be those who get them, but I believe the fad of a excessive body art will fade in time.”

Body art by the numbers
- The tattoo industry in the United States is a $1.65 billion-dollar industry
- 36% of U.S. adults ages 18 to 25 have at least one tattoo.
- 40% of U.S. adults ages 26 to 40 have at least one tattoo.
- High school students are acquiring tattoos at a very high rate. In urban settings some estimates are that nearly half of all high school students have a tattoo by graduation.
- Studies show that one-quarter to one-third of people have tattoos that they regret.
- Women were least likely to regret their tattoo if they got it after age 21.
- Men were three times more likely to regret their tattoo if they got it before the age of 16.
- Tattoos on the upper body were the most likely to be regretted.
When patients need someone to talk to, help finding a lost item, want a magazine or help coordinating their care once they go home, they turn to our patient representatives, Marijo Atkinson and Anne Messer, for help.

While Anne and Marijo share the same title, the two Caregivers have very different jobs. But what they both have in common is their ability to listen and understand in order to meet patients’ needs. “I talk with them, find out what’s going on in their lives and help empower them to take control of their health care,” said Marijo. “I see myself as an extension of St. Vincent Charity’s mission and values.”

Marijo is responsible for representing patients in the emergency department, psychiatric emergency department, geropsychiatry unit, psychiatric unit and Rosary Hall. She helps set up patients on a plan of care that includes helping them understand their medications, obtaining a primary care physician, arranging doctors’ appointments and giving patients the proper resources they need for when they leave the hospital.

Anne assists patients in the medical and surgical units as well as the outpatient areas. Her daily work includes rounding on all of her assigned units and visiting with the patients and their families to ensure all their needs are taken care of. During her rounds, Anne makes sure that there is strong and consistent communication between the doctors, nurses, residents and the patients. She also engages patients in conversation and can always be spotted carrying her bright blue bag containing items that patients take comfort in such as bibles, books, magazines and rosaries.

“In order to do this job you have to be compassionate and you have to be willing to listen to what the patients are saying,” said Anne. “We go the extra mile to make sure patients are happy and satisfied with their care. My goal is to be able fix any problems and resolve any issues they may have before leaving the hospital. We want our patients to go home with no added stress.”

The customer service component of their job is so important to St. Vincent Charity Medical Center that our medical residents are learning from Marijo and Anne during their time at St. Vincent Charity. First-year residents are required to shadow each of the patient representatives for two to three hours per day, two days per month. This unique opportunity allows the residents to see a different side of patient care and learn what it’s like to be on the receiving end of health care.

Both Marijo and Anne serve as a client’s rights officer to their patients and take any questions or concerns they may have during and after their stay. While their job focus may be slightly different, they often rely on one another throughout the day. “If I have a situation with a new patient on a unit who came from the emergency department, I can always look to Marijo for assistance,” said Anne. “She’s already familiar with the patient and they’re already comfortable with her.”

Marijo has been with St. Vincent Charity 11 years and Anne has been here for three years. “We both are very proud of what we do each day,” said Marijo. “We don’t view this as just work; this is our mission—to be advocates for the patients of St. Vincent Charity.”

—I talk with them, find out what’s going on in their lives and help empower them to take control of their health care.”

—Marijo Atkinson
For Frank Brady, inactivity is not an option. In addition to being a full-time real estate agent alongside his wife, Lynn, the Stow, Ohio, resident has always been a spirited athlete. Brady’s competitive sport of choice is the triathlon, an event combining the skills of swimming, biking and running.

However, in 2008 after competing in a race in Chicago, Brady knew something was seriously wrong with his right hip. He realized he would need a doctor’s intervention if he wanted to continue leading his active lifestyle. He did some research and spoke with a specialist who referred him to Dr. Lou Keppler, orthopedic surgeon and co-medical director of the Spine and Orthopedic Institute at St. Vincent Charity Medical Center.

Brady was familiar with St. Vincent Charity, but had never actually been to the downtown hospital. To receive the highest quality care, he knew he needed the best, most highly recommended surgeon. What he pleasantly discovered was that he had found a new place for care.

Having been to other healthcare facilities before, Brady immediately recognized something different about St. Vincent Charity.

“To me, there’s no comparison to St. Vincent Charity,” said Brady. “From the quality and cleanliness of the rooms, to the genuine feeling of compassion I felt from each Caregiver I interacted with. The people are what make this hospital special; you can tell that everyone really believes in the mission of the organization.”

He felt such a close connection the medical center, the Caregivers and the mission of St. Vincent Charity that he decided he wanted to become a part of it all. Just a few months after his hip replacement, Brady began donating his time as a volunteer. He admires the strong sense of camaraderie that is present.

Brady now volunteers at St. Vincent Charity for a few hours every two weeks. He visits with patients on the sixth floor, most of which are patients of the Spine and Orthopedic Institute, like he once was. He serves as a friendly face and a listening ear for the patients.

“I’ve found that oftentimes patients just want someone to talk to during their stay,” Brady said, who spends anywhere from 10 minutes up to an hour just visiting with a patient. Brady finds that he has a lot in common with patients he visits and he knows what it’s like to be in their exact position because he’s been there—multiple times. Following his first successful hip replacement, he chose St. Vincent Charity and Dr. Keppler when he needed two additional procedures, a second hip replacement and back surgery.

“Being able to share my stories and my experiences helps put the patients at ease,” Brady said. “They see me—a 71-year-old—doing great after my surgeries and it brings them a sense of comfort.”

Brady has been a volunteer since 2008 and was recently recognized at St. Vincent Charity’s annual volunteer luncheon for reaching his five-year milestone. He was also recognized with the Customer Service Award for providing excellent care to the patients of St. Vincent Charity.

“St. Vincent Charity is truly a special place,” said Brady. “I’ve been here enough times to know that the compassion you see in the Caregivers is genuine. You can see that God is present here every day in the patients and in the Caregivers.”

To learn more about volunteering at St. Vincent Charity go to: www.stvincentcharity.com/volunteer
The Austen BioInnovation Institute in Akron (ABIA) and St. Vincent Charity Medical Center have launched a Strategic Innovation Partnership intended to create an innovation-oriented pathway for surgeons to explore and commercialize new ideas and solutions. Working closely with a select group of surgeons at the hospital, the ABIA partnership will provide St. Vincent Charity with engineering and technology development resources necessary to develop medical devices and solutions that have clinical and commercial potential.

The ABIA-St. Vincent Charity partnership will focus initially on the area of orthopedics. To facilitate the first phase of this technology development initiative, ABIA’s biomedical engineers have spent time on-site at St. Vincent Charity in partnered-innovation sessions. The sessions involve working directly with surgeons in the operating room to identify unmet clinical needs and problems that might lead to products and solutions. The collaborative process then allows for ABIA to further the commercialization path through market and intellectual property analysis, regulatory strategy, engineering design, prototype development and testing of new advances.

“As a biomedical engineer, now surgeon I am aware of the innovation that takes place daily in the operating room,” said Dr. David F. Perse, President and CEO of St. Vincent Charity Medical Center. “We have been in a multiyear process to find a collaborator to further explore and test these concepts. ABIA was immediately engaged as an energetic partner. It is our desire through this partnership to engage independent, entrepreneurially minded surgeons to test and develop their innovations for the benefit of patients and the community at large.”

“Our relationship with St. Vincent Charity reinforces the ABIA partnership’s commitment to work with innovators everywhere to explore novel and pioneering ways to provide better care for patients,” says Dr. Frank L. Douglas, ABIA President and CEO. “Through this cooperative program, we are able to help St. Vincent Charity and other organizations maintain a strong, engaged relationship with skilled physicians and employees by providing them with a pathway to explore advancement that may lead to an improved level of treatment and economic growth.”

The history of modern medicine shows that innovation is often generated outside of university or governmental constructs, according to Perse. “With the evolving bureaucratic nature of medicine and the difficulty for innovative, independent physicians to test their concepts due to the challenges of time and resources, the ability to engage with a proven bio-engineering entity like ABIA creates enormous opportunities,” he said.
Introducing the Augustine Society

This year, St. Vincent Charity Development Foundation is delighted to announce the establishment of the Augustine Society, which honors and recognizes donors who make annual gifts of $1,000 and above.

The Augustine Society is named in recognition of the Sisters of Charity of St. Augustine, the order of nuns who founded St. Vincent Charity in 1865 and continue their sponsorship and support of this ministry in partnership with our donors, volunteers, caregivers and physicians.

The Augustine Society includes the following annual giving categories:

- **Circle of Charity** (gifts of $1,000 to $2,499)
- **Circle of Caring** (gifts of $2,500 to $4,999)
- **Circle of Devotion** (gifts of $5,000 to $9,999)
- **Circle of Grace** (gifts of $10,000 to $24,999)
- **Circle of Compassion** ($25,000 to $99,999)
- **Circle of Dedication** ($100,000 to above)

Special acknowledgement of Augustine Society members will be incorporated into all future donor recognition initiatives, including celebratory events and listings in web and print publications. While we will seek to expand Augustine Society membership each year, those who join this year as founding members will receive permanent recognition on the walls of St. Vincent Charity Medical Center.

Annual giving to St. Vincent Charity enables us to maximize our investment in the caregivers who embody our mission and the resources that allow them to provide the highest quality of health care services to our patients. Establishing the Augustine Society is an important way for us to recognize our philanthropic leaders and foster the spirit of giving that has long been at the heart of St. Vincent Charity and the community that has enabled it to thrive for nearly 150 years.

TO MAKE A DONATION TO THE AUGUSTINE SOCIETY GO TO: www.stvincentcharity.com/giving
St. Vincent Charity Medical Center has thrived in the city of Cleveland and in the hearts of patients for nearly 150 years. As we begin to approach our landmark 150th anniversary in 2015, we reflect on significant moments in the medical center’s history.

On January 18, 1956 cardiac surgeon Earle B. Kay, M.D. performed the first open-heart surgery in the Midwest at St. Vincent Charity. Using the Kay-Cross heart lung machine, a tool he helped to develop, Dr. Kay successfully repaired the defective valve of 6-year-old Laverne Ivec. The heart-lung machine sustained the heart’s normal function while it remained motionless, allowing Dr. Kay to work without interference from its normal contraction and expansion. The operation, the third open-heart surgery in the United States, is considered a milestone in cardiac surgery, and a medical milestone in the story of St. Vincent Charity.