



## Upcoming VUMC Conferences

Grand Rounds: Friday, January 31st  
7:00 – 8:00AM  
214 Light Hall

### *Cystic Neoplasms of the Pancreas*



Marcus Tan, MBBS, FACS  
Assistant Professor of Surgery

RTC scheduled from 8-9AM:

ALL Residents	Adverse Outcomes & Moral Injury Class	214 LH
---------------	---------------------------------------	--------

### Reminders:

Did you know that [Goals and Objectives](#) for each rotation by PGY Level are available on our website?

**\*\*Submit Duty Hours Every Monday!**

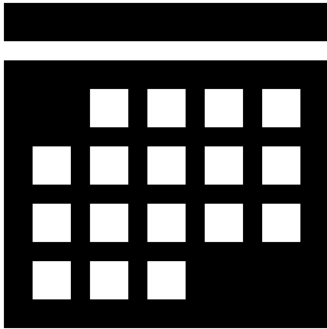
**\*\*Is your TMS training up to date?**

You must log into the VA computer system every 30 Days to maintain access.

**If you lose access, it will take 2 weeks to reinstate your access!!**

\*Have an Ethical Case you would like to discuss? Please utilize our new [Surgical Ethics M&M Tracker](#)

\*Going on an interview, to a meeting, etc? Please fill out the time away form: [Resident Time Away Form](#)



## MM& I Conference

January 29<sup>th</sup>  
 214 Light Hall  
 6:30AM – 7:30AM

Presenters:  
 Trauma/EGS

Resident Bonus Conference  
 214 Light Hall  
 7:30AM – 8:00AM

---

*To keep the body in good health is a duty...Otherwise we shall not be able to keep our mind strong and clear.”*

*~Buddha*

---

### Happy Birthday!

February 2  
 Taylor Sutcliffe

February 4  
 Kyle Cassling

February 13  
 Erin Wolf Horrell

February 16  
 Jack Fitzpatrick

February 17  
 Diane Haddad

February 21  
 John Stokes

February 26  
 Yatrik Patel

February 27  
 J-N Gallant

## Wellness

A friendly reminder from your Vanderbilt General Surgery Resident Wellness Committee (RWC): Please stay tuned for upcoming wellness events and activities. To keep up-to-date on all of the RWC initiatives or to provide the RWC with anonymous feedback, please visit our [website!](#)

### List of VUMC and Community PCPs/Dentists:

Attached you will find a list of VUMC and community PCPs and dentists who accept our VUMC insurance plans. PCP contact information is on pages 1-3 and dental information is on pages 4-9. In addition to names and contact information, I also provided instructions to search the Aetna and Cigna websites yourself if you'd like more options than I highlighted on this document. We will work to have this document added to the VUMC Wellbeing website for easy access in the future.

In addition, we will be sending out our first quarterly wellbeing survey in August. On this survey, you will each have the opportunity to give us feedback on specific PCPs and dentists that you have had good experiences with, so we can recommend these people to your fellow residents in the future.

Please let myself or another member of the Resident Wellness Committee know if you have questions or concerns or if you discover that any of this information is no good or out of date. Otherwise, I hope you're all able to make your health maintenance appointments soon!

Wali Johnson, MD  
 General Surgery Resident and VA Quality Scholar Fellow

**For a complete list of committee members and more information:**

<https://ww2.mc.vanderbilt.edu/gsr/52284>  
<https://www.myhealthatvanderbilt.com/>

## Opportunities/Surveys

### **Opportunities**

- VUMC Surgery  
Running Club  
Calendar (attached)

### **Surgery Meetings and Conference Dates**

- Listed in order of  
season
- Abstract deadlines  
and due dates  
updated at least  
monthly
- Upcoming abstract  
deadlines:
  - 2/11/20: ASCO
  - 3/1/20: AAST
  - 3/2/20: ACS
  - 3/7/20: CCS
  - 5/1/20: TNACS

## Surveys

Dear General Surgery trainee,

Please consider completing our survey of **North American residents' trauma education needs** by following the link below. The survey should take you approximately **5-7 minutes to complete**. You do not have to answer any questions that you do not want to answer. The goal of this study is to examine surgical trainees' needs and preferences for trauma education, with a **view to incorporate trainees' perspectives into a trauma training curriculum**.

Survey Link: <https://www.surveymonkey.com/r/ResidentTraumaEducation?id=5Y8QTTVT8W>

For more information, please visit the above survey link. If you have questions about the study please contact Dr. Gotlib Conn at (416) 480-6100 ext. 85263 or [lesley.gotlibconn@sunnybrook.ca](mailto:lesley.gotlibconn@sunnybrook.ca). If you have any questions about the ethical conduct of this study, please contact the Sunnybrook Health Sciences Centre REB at (416) 480-6100 ext. 88144.

Thank you for your time and consideration.

Lesley Gotlib Conn, PhD (Principal Investigator)  
Najma Ahmed, MD, PhD  
Avery B. Nathens, MD PhD  
Barbara Haas, MD PhD  
Matthew Guttman, MD  
Sunnybrook Research Institute, Tory Trauma Research Program  
Sunnybrook Health Sciences Centre  
Toronto, Ontario

---

Dear Program Director,

The APDS Research Committee has recently approved our survey "Incorporation of a Global Surgery Rotation into General Surgery Training: A Multi-Institutional Study on Impact and Perceptions". The purpose of conducting this survey is to better understand how global surgery rotations affect future practice, and care of underserved populations. We aim to use the results of this survey to promote continued commitment to providing global surgery rotations to general surgery residents.

<https://redcap.vanderbilt.edu/surveys/?s=YAKRTAAENH>

Sincerely,  
Rondi Kauffmann

---



SESC Feud® is back at the SESC 2020 Annual Meeting!

Calling all surgeons and surgical residents!

We need your help! Take our Feud Survey and answer some fun questions for Surgeons and Surgical Residents, then join us for the results during SESC Feud at the Annual Meeting on Sunday, February 9th 4:00pm-6:00pm.

Be part of the action as the winning Resident Jeopardy!® Team faces off against Past Presidents in SESC Feud® by answering questions to our Feud® Survey.

**Feud Survey**

**SESC Headquarters**

[sesc@lp-etc.com](mailto:sesc@lp-etc.com) | 913.402.7102 | [www.sesc.org](http://www.sesc.org)

LIKE US on Facebook | FOLLOW US on Twitter  
#SESC20

If you no longer want to receive emails from SESC, please [Opt-Out](#).

## WHAT YOU NEED TO KNOW:

Review of Systems (ROS) is an inventory of body systems obtained by asking a series of questions to identify signs and/or symptoms the patient may be experiencing or has experienced. CMS and Payers have varying documentation audit focal points for clinical validation of services rendered. Points are not synonymous with symptoms.

<p>What are the systems recognized for ROS?</p>	<ol style="list-style-type: none"> <li>1. Constitutional Symptoms (for example: fever, weight loss)</li> <li>2. Eyes</li> <li>3. Ears, nose, mouth, throat</li> <li>4. Cardiovascular</li> <li>5. Respiratory</li> <li>6. Gastrointestinal</li> <li>7. Genitourinary</li> <li>8. Musculoskeletal</li> <li>9. Integumentary (skin and/or breast)</li> <li>10. Neurological</li> <li>11. Psychiatric</li> <li>12. Endocrine</li> <li>13. Hematologic/Lymphatic</li> <li>14. Allergic/Immunologic</li> </ol>
<p>What are the three types of ROS?</p>	<ol style="list-style-type: none"> <li>1. Problem pertinent</li> <li>2. Extended</li> <li>3. Complete</li> </ol>
<p>What is required for each type ROS?</p>	<ol style="list-style-type: none"> <li>1. Problem Pertinent ROS inquires about the system directly related to the problem identified in the History of Physical Illness (HPI).</li> <li>2. Extended ROS inquires about the system directly related to the problem(s) identified in the HPI and a limited number (two to nine) of additional systems.</li> <li>3. Complete ROS inquires about the system(s) directly related to the problem(s) identified in the HPI plus all additional (minimum of ten (10)) organ systems. You must <b>individually document</b> those systems with positive or pertinent negative responses. For the remaining systems, a notation indicating all other systems were reviewed and are negative is permissible ONLY if “All” means all fourteen (14) systems were reviewed. Clinicians must determine if it is medically necessary to conduct a full fourteen system review and documentation should reflect the medical necessity.</li> </ol>
<p>Documentation Requirements</p>	<p><u>Documentation within the patient record should support the level of service billed.</u> For every service billed, you must indicate the specific sign, symptom, or patient complaint that makes the service reasonable and medically necessary.</p> <p>It would be inappropriate and likely ruled <b>not medically necessary</b> to bill based on a full (fourteen system) review of systems for a problem focused complaint. <u>The question to ask is:</u> did the condition/chief complaint (CC) warrant a full review of systems?</p>
<p>Collecting the ROS</p>	<p>Preprinted forms may be used by the ancillary staff or filled out by the patient. The information collected on these forms MUST be commented on and attested to, by the clinician with an authentic signature, date and time.</p>
<p>If unable to obtain ROS</p>	<p>Documentation is required to indicate why the ROS could not be obtained (e.g., patient arrived unconscious).</p>

**THE THREE TYPES OF REVIEW OF SYSTEMS: The following three types of Review of Systems are recognized under CMS's Evaluation and Management Services Guide:**

<p>A <i>problem</i> pertinent ROS inquires about the system directly related to the problem(s) identified in the HPI.</p>	<ul style="list-style-type: none"> <li>• <u>Documentation Guidance:</u> The patient's positive responses and pertinent negatives for the system related to the problem should be documented. <ul style="list-style-type: none"> <li>○ <u>Example:</u> CC: Earache. ROS: Positive for left ear pain. Denies tinnitus, fullness.</li> </ul> <p style="margin-left: 40px;">In this example, one system – the ear- is reviewed.</p> </li> </ul>
<p>An <i>extended</i> ROS inquires about the system directly related to the problem(s) identified in the HPI and a limited number of additional systems.</p>	<ul style="list-style-type: none"> <li>• <u>Documentation Guidance:</u> The patient's positive responses and pertinent negatives for two to nine systems should be documented. <ul style="list-style-type: none"> <li>○ <u>Example:</u> <p style="margin-left: 40px;">CC: Follow-up visit in office after cardiac catheterization. Patient states "I feel great."</p> <p style="margin-left: 40px;">ROS: Patient states he feels great and denies chest pain, syncope, palpitations, and shortness of breath. Relates occasional unilateral, asymptomatic edema of left leg.</p> <p style="margin-left: 40px;">In this example, two systems – cardiovascular and respiratory – are reviewed.</p> </li> </ul> <p style="margin-left: 40px;">It is inappropriate to document systems that are not pertinent to the chief complaint. In the example above, it would be over documenting to comment on all remaining systems unrelated to the follow up visit, unless patient is presenting with additional complaints.</p> </li> </ul>
<p>A <i>complete</i> ROS inquires about the system(s) directly related to the problem(s) identified in the HPI <u>plus all additional</u> (minimum of ten) organ systems. For the remaining systems, you may note "all other systems were reviewed and are negative" if all fourteen (14) systems were reviewed and medically necessity was documented.</p>	<ul style="list-style-type: none"> <li>• <u>Documentation Guidance:</u> You must individually document those systems with positive or pertinent negative responses. <i>For the remaining systems, a notation indicating all other systems were reviewed and are negative is permissible. In the absence of such a notation, you must individually document at least ten systems.</i> <ul style="list-style-type: none"> <li>○ <u>Example:</u> <p style="margin-left: 40px;">CC: Patient complains of "fainting spell."</p> <p style="margin-left: 40px;">ROS: Constitutional: weight stable, fatigue; Eyes: loss of peripheral vision; Ear, nose, mouth, throat: no complaints; Cardiovascular: palpitations, denies chest pain, denies calf pain, pressure, or edema; Respiratory: shortness of breath on exertion; Gastrointestinal: appetite good, denies indigestion, episodes of nausea, BM daily, denies loose stools; Urinary: denies incontinence, frequency, urgency, nocturia, pain, or discomfort; Skin; clammy, moist skin; Neurological: fainting, denies numbness, tingling, and tremors; Psychiatric: denies memory loss or depression, mood pleasant.</p> <p style="margin-left: 40px;">If All (14) systems were reviewed and pertinent positive or negative responses were documented, adding the statement "all other systems were reviewed and are negative" is permissible.</p> </li> </ul> </li> </ul>



January 8, 2020

Dear Valued TennCare Stakeholder,

OptumRx wants to ensure you are informed about the TennCare pharmacy benefit transition.

Beginning January 1, 2020, OptumRx assumed the administrative responsibility to support the pharmacy benefit needs of TennCare and their members. We understand that there have been certain implementation issues that may have impacted the pharmacy experience for certain members and for you. We have taken action.

Based on feedback received, and working with TennCare leadership, OptumRx has identified and prioritized challenges and begun implementing improvements. Specifically, we have been working to address:

- The Prior Authorization Process – We are moving quickly to streamline TennCare prior authorization review and have increased the resources for TennCare’s prior authorization process. We have made updates to address prior authorization issues that have occurred from non-transfer and from incorrect edits being implemented and to improve overall prior authorization turnaround time.
- Member and Provider Experience – We have taken immediate action to increase the number of member and provider advocates dedicated to TennCare. These changes have and will continue reduce wait times and ensure our Member and Provider Services team members can more quickly address and resolve emergent and urgent member and provider issues.
- Stakeholder Support – OptumRx has upgraded our TennCare stakeholder support team, including clinical-focused team members, to better support physicians, pharmacists and other stakeholders. This specially trained team can be contacted through the numbers and email below (*pharmacists can use the member’s social security number if they do not know their prescription ID number*).
  - Prescriber Prior Authorization - 866-434-5524
  - Pharmacy Technical Call Center - 866-434-5520
  - Provider Liaison email: [tnrxeducation@optum.com](mailto:tnrxeducation@optum.com)
    - Heather Cline-East Tennessee Provider Liaison
    - Ginger Stoves-Middle Tennessee Provider Liaison
    - Robert “Jud” Jones-West Tennessee Provider Liaison
- Pharmacy Reimbursement – We are committed to reimbursing participating network pharmacies according to TennCare rates and have taken steps to ensure claims are processed and reimbursed correctly. Incorrectly processed claims will be re-adjudicated appropriately.

Access to care and member safety are OptumRx’s top priorities. We value the partnership we have with you to support those priorities. We will continue to work across OptumRx and with you to ensure these improvements continue and TennCare members and providers see and feel the positive changes.

If you have any questions, please reach out directly to the OptumRx TennCare team through the above referenced contact information.

Sincerely,

The OptumRx Team



## Winter Surgery Conferences, Abstract Submission Dates

Conference Name	Abstract Dates	Conference Dates
<a href="#">AAS-Academic Surgical Congress</a>  -- AAS (Association for Academic Surgery) and SUS (Society of University Surgeons)	Closed	February 4-6, 2020 (Orlando)
<a href="#">EAST--Eastern Association for the Surgery of Trauma</a> 	Closed	January 14-18, 2020 (Orlando)
<a href="#">SCCM--Society of Critical Care Medicine</a> 	Closed	February 16-19, 2020 (Orlando)
<a href="#">SESC--Southeastern Surgical Congress</a> 	Closed	February 8-11, 2020 (New Orleans)
<a href="#">SSA--Southern Surgical Association</a> 	Closed	December 8-11, 2019 (Hot Springs, VA)
<a href="#">TSDA--Thoracic Surgery Directors Association</a> 	N/A	January 25, 2020 (New Orleans)

## Spring Surgery Conferences, Abstract Submission Dates

Conference Name	Abstract Dates	Conference Dates
<a href="#">AHPBA</a> -- (Americas Hepato-Pancreato-Biliary Association)	Closed	March 4-8, 2020 (Miami)
<a href="#">APDS-Association of Program Directors in Surgery</a>	Closed	April 30-May 2, 2020 (Seattle)
<a href="#">APSA--American Pediatric Surgical Association</a>	Closed	May 14 - 17, 2020 (Orlando)
<a href="#">ASA--American Surgical Association</a>	Closed	April 16-18, 2020 (WashingtonDC)
<a href="#">ASE-Association for Surgical Education</a>	Closed	April 28-30, 2020 (Seattle)
<a href="#">AVAS--Association of VA Surgeons</a>	Closed	April 19 - 21, 2020 (Pittsburgh)
<a href="#">CCS-Chicago Colorectal Symposium</a>	<b>Due 3/7/2020</b>	March, 2020 (Chicago)
<a href="#">SAGES--Society Of American Gastrointestinal Endoscopic Surgeons</a>	Closed	April 1-4, 2020 (Cleveland)
<a href="#">SSAT--Digestive Disease Week--Society for Surgery of the Alimentary Tract</a>	Closed	May 2-5, 2020 (Chicago)
<a href="#">SSO--Society of Surgical Oncology</a>	Closed	March 25-28, 2020 (Boston)
<a href="#">WTA--Western Trauma Association</a>	Closed	Feb 23-29, 2020 (Sun Valley, ID)

## Summer/Fall Surgery Conferences, Abstract Submission Dates

Conference Name	Abstract Dates	Conference Dates
<a href="#">AAST--The American Association for the Surgery of Trauma</a> 	<b>Due 3/1/2020</b>	September 16-19, 2020 (Waikoloa, Hawaii)
<a href="#">ACS--American College of Surgeons Clinical Congress</a> 	<b>Due 3/2/2020</b>	October 4-8, 2020 (Chicago)
<a href="#">ASCO--American Society of Clinical Oncology</a> 	<b>Due 2/11/2020</b>	May 29-June 2, 2020 (Chicago)
<a href="#">ASCRS--American Society of Colon-Rectal Surgeons</a> 	<b>Closed</b>	May 15-19, 2020 (Boston)
<a href="#">14th World Congress of the IHPBA</a> 	<b>Closed</b>	September 21-24, 2020 (Melbourne, Australia)
<a href="#">SVS--Society for Vascular Surgery</a> 	<b>Closed</b>	June 17-20, 2020 (Toronto)
<a href="#">TNACS—Tennessee Chapter, ACS</a> 	<b>Due 5/1/2020</b>	August 6-9, 2020 (Memphis)

**2019-2020 Surgery Running Club Calendar**

<b>Name</b>	<b>Date</b>	<b>Distance(s)</b>	<b>Link</b>	<b>Attending</b>
Purple Stride- Pancreatic Cancer Network	9/28/2019		<a href="http://support.pancan.org/site/TR/PurpleStride/PurpleStride?fr_id=1870&amp;pg=entry">http://support.pancan.org/site/TR/PurpleStride/PurpleStride?fr_id=1870&amp;pg=entry</a>	
Run for Resilience Ostomy 5K	10/5/2019	5K	<a href="https://ostomy5k.org/nashville-tn-event/">https://ostomy5k.org/nashville-tn-event/</a>	Hawkins
Nashville Octoberfest 5k Bier Run	10/12/2019	5K	<a href="https://thenashvilleoktoberfest.com/annual-5k-bier-run/">https://thenashvilleoktoberfest.com/annual-5k-bier-run/</a>	
Breathe Deep Stache and Lash- Lungevity	10/19/2019	5K, 1.5 mile walk	<a href="https://lungevity.donordrive.com/index.cfm?fuseaction=donorDrive.event&amp;eventID=868">https://lungevity.donordrive.com/index.cfm?fuseaction=donorDrive.event&amp;eventID=868</a>	
CureSMA Nashville Walk 'n Roll	10/20/2019	1 mile walk	<a href="http://events.curesma.org/site/TR/Walk-n-Roll/General?team_id=7603&amp;pg=team&amp;fr_id=3512">http://events.curesma.org/site/TR/Walk-n-Roll/General?team_id=7603&amp;pg=team&amp;fr_id=3512</a>	Kauffmann
More Than Pink Walk- Komen	10/26/2019		<a href="http://www.info-komen.org/site/TR?fr_id=7834&amp;pg=entry">http://www.info-komen.org/site/TR?fr_id=7834&amp;pg=entry</a>	
Making Strides against Breast Cancer	11/2/2019		<a href="https://secure.acsevents.org/site/TR/MakingStridesAgainstBreastCancer/MSABCCY19NCR;jsessionid=00000000.app307b?pg=entry&amp;fr_id=94392&amp;NONCE_TOKEN=2913AD3BFA5336C0109F2CC8A9F6179E">https://secure.acsevents.org/site/TR/MakingStridesAgainstBreastCancer/MSABCCY19NCR;jsessionid=00000000.app307b?pg=entry&amp;fr_id=94392&amp;NONCE_TOKEN=2913AD3BFA5336C0109F2CC8A9F6179E</a>	
Nashville Marathon	11/9/2019	26.2M, 13.1M, 5K run	<a href="https://www.runnash.com/races/nashville-half-marathon/">https://www.runnash.com/races/nashville-half-marathon/</a>	
Sarcoma Run	11/16/2019	5K, family walk	<a href="https://p2p.onecause.com/nashville/team/sarconators">https://p2p.onecause.com/nashville/team/sarconators</a>	
Boulevard Bolt	Thanksgiving	5mile	<a href="http://www.boulevardbolt.org/">http://www.boulevardbolt.org/</a>	Hawkins
Rudolph's Red Nose Run	12/7/2019	5K	<a href="https://rudolphrednoserun.raceroster.com/">https://rudolphrednoserun.raceroster.com/</a>	Hawkins
St. Patricks 10K	3/14/2020	10K	<a href="https://team-magic.com/events/168">https://team-magic.com/events/168</a>	
Dairy 10K (MAYBE)	4/11/2020	10K	<a href="https://racesonline.com/events/purity-moosic-city-dairypure-dash">https://racesonline.com/events/purity-moosic-city-dairypure-dash</a>	
Shade Tree Trot 5k (MAYBE)	4/18/2020	5k	<a href="https://www.shadetreeclinic.org/archives/events/shade-tree-trot">https://www.shadetreeclinic.org/archives/events/shade-tree-trot</a>	