

# Health & Wellness

## The doctor at bedside

Who “hospitalists” are –  
and why they matter to you

## When the pediatrician no longer fits

Helping teens transition  
to their “grown-up” doc



# The doctor at bedside

Who “hospitalists” are – and why they matter to you



**It's 8:30 a.m. on a Monday. John Farley, MD with Birmingham Internal Medicine Associates (BIMA) has already seen his early patients and is reviewing a computer report on a hospitalized one.**

Meanwhile, Rob Spiegel, MD, medical director for St. Vincent's hospitalists, is talking with that hospitalized patient. He has consulted with the patient's subspecialist and is explaining the outcome of the same tests Farley is reviewing online.

Within the hour Spiegel will have met another BIMA patient who has been admitted through the St. Vincent's Birmingham emergency department. He will also have reviewed home health plans with another before her scheduled afternoon discharge.

All of this is happening while Farley and his colleagues are seeing other patients at St. Vincent's One Nineteen. Two patients are there to report on their hospital visits the week before.

**It didn't used to be this way.** Five years ago Farley would still be at the hospital at 8:30, tending to the emergency patient while the other patient awaited discharge. Meanwhile, office patients waited to see him with fevers and other acute needs. Once he finally arrived in his office, someone in the hospital who developed non-

emergency complications at 10:00 a.m. would have to wait until evening to see the doctor.

Emergencies forced Farley or his partners to leave sick folks in the office while rushing back to the hospital.

“If a patient came in with chest pain at 8:00 a.m., I might not be able to see them until noon,” Farley says.

**Now physicians like Spiegel and his team can help internal medicine specialists give the best of care to in-office and hospitalized patients simultaneously.**

Hospitalists like Spiegel are also internal medicine or family practice-trained specialists, but work exclusively within the hospital. They assume all hospitalized patient care responsibilities for other internists while coordinating subspecialists' services, ranging from gastroenterology to open heart surgery.

**Internal medicine, unlike specialties such as obstetrics, is particularly well adapted to hospitalist care.** Although the concept has been around since the early 1990's, doctors like Farley have only recently adopted the practice.

“That's been a big change in medicine, to not have internists see patients while they're in the hospital,” says

Farley. “It was a real adjustment for me. I opposed it at first. But then it only took me three days to find out I liked it.”

Farley resisted relinquishing the privilege of standing by a patient's bedside. But he also knew that neither he nor his colleagues could be two places at once. Farley soon learned what other physicians across the country were finding out – that **the use of hospitalists can actually reduce the number of patients admitted to the hospital and shorten the stays of those hospitalized.**

**The reasons are pretty simple.** Since Farley no longer does morning and evening rounds, he can see 25 percent more patients a day. The other physicians on his team can do the same. More sick patients can be seen in-office sooner, hastening treatment that can prevent hospitalization. Those who must be admitted can be seen promptly by readily-available hospitalists who can “navigate the ship,” as Spiegel says.

“We're here along with the subspecialists, so we know how to work the process better,” says Spiegel. Hospitalists not only deal daily with detailed insurance, rehabilitation, and home health issues, but can also track a patient's progress on an hourly basis, when necessary.





“And, the faster your care starts, including treatment like antibiotics through an IV, the faster you’ll recover,” says Farley.

Hospitalists can also quickly identify when an illness deviates from its normal track.

“We see 400 to 500 cases of pneumonia a year, where most internists may see 24,” says Spiegel. Hospitalists tend to be the first community physicians to perceive emerging trends in specific patient populations. When a flu strain becomes especially dangerous for the elderly, for instance, hospitalists may be the first to identify early symptoms.

**BIMA was St. Vincent’s first practice to use hospitalists. Other Birmingham physician groups quickly followed, becoming part of a national trend.** Hospitalists are now the fourth-largest physician subspecialty and the fastest-growing subspecialty in the history of medicine.

Although Farley appreciates being able to focus his attention on his in-office patients, he can’t bring himself to leave the hospital completely. He reserves one lunch hour a week to visit bedside.

Freed from filling out paperwork, he thoroughly enjoys walking into his patients’ rooms, talking with family members and seeing for himself how a patient is recovering. He also eagerly follows their progress via computer and looks forward to their in-office visits or phone calls after discharge.

Farley was trained to take care of his patients, whether they were in the hospital or in the office. But now he knows someone with chest pain will be seen immediately instead of when he can get there. He knows his colleague making rounds is not fatigued from a night spent on-call or torn by the disrupted schedules or discomfort of those in his waiting room.

Both Spiegel and Farley sympathize with patients who would prefer seeing their long-time doctor while in the hospital. But they also know **the new trend is in the best interest of every patient, says Farley.**

“It offers more timely care, and hopefully, better outcomes.”

**Free cholesterol, blood sugar, and bone density screenings will be available at the Health and Wellness Festival on May 1.**

**Meet some of the hospitalists and other physicians as well.**



**John Farley, MD**  
Birmingham Internal  
Medicine Associates



**Rob Spiegel, MD**  
St. Vincent’s  
Hospitalist



# One Nineteen's Sports Injury and Performance Center

Aiding athletes of all ages

On a typical day at One Nineteen's Sports Injury and Performance Center ...

*...a basketball player, recovering from knee surgery, works with Physical Therapist Marc Bernier.*

*...Personal Trainer Harper Carson leads a tennis player through footwork drills for agility training.*

*...a soccer scholarship candidate practices hip flexion and gluteus medius exercises designed by former semi-professional soccer player and Personal Trainer Sebastian Hudd.*

**St. Vincent's One Nineteen is already known for its physical therapy and fitness programs.** But now Physical Therapist Marc Bernier, clinical director of sports medicine and rehabilitation, and his staff have formally expanded One Nineteen's offerings into performance enhancement, injury prevention training, and coach/parent education.

**"We're now using this facility to its full potential,"** says Bernier of the gym, fitness center, track, and pool. Athletes are still referred by physicians to Bernier, an international sports consultant, for post-injury rehabilitation. But others now enroll in the enhancement program, which does not require a physician's referral.

Bernier's staff, including Personal Trainers Harper Carson and Sebastian Hudd, a masters candidate at the U.S. Sports Academy, are seeing an influx of young athletes sent by savvy parents. They know growth spurts at ages 13 and 14 can alter body weight and movement, leading to athletic injury if core muscle strength remains undeveloped.

**Sports-specific training allows students and older athletes to develop injury-prevention and performance enhancement techniques unavailable elsewhere.** "We're not simply putting people on weight machines. We're designing activities for specific sports," Bernier says.

"A marathon runner would undergo aerobic exercises that involve endurance runs and higher sets and repetitions," says Hudd. "Every time an athlete wants to improve his/her performance, an assessment is needed to determine what areas need improvement. Only then can you pinpoint the areas where an athlete is losing ground."

**Some come to prepare for scholarships, military academies, or hobbies like hiking the Appalachian Trail.** Older athletes recognize training techniques have changed and seek joint-protecting exercises. Others come because of lagging progress in established exercise regimens.

**Many rehab patients transition to the injury prevention and enhancement program.** "As the athlete heals, Marc will integrate us into the patient's recovery after he/she is discharged from therapy," says Carson, a former physical therapy technician. "As the athlete finishes his therapy, Sebastian and I will start to take over to further condition in ways that will build strength and help him be more resilient, avoiding future injury."

Whether it's a 13-year-old protecting developing muscles, a 17-year-old preparing for sports camp, or one of their parents, Bernier says the training benefits are tangible.

"You just feel better. In every activity we supervise, we're here to promote better health."

**To learn more about One Nineteen's Sports Injury and Performance Center, call 408-6565. Marc, Sebastian, and Harper will be on hand at the Health and Wellness Festival on May 1 to answer questions, too.**



# When will the baby come?

What moms should know about induced labor

**When it comes to induced labor, expectant mothers haven't always known what to expect.** William Johnson III, MD at OB/GYN Associates of Alabama at St. Vincent's One Nineteen with deliveries at St. Vincent's Birmingham offers these guidelines on when and why an obstetrician might opt to induce.

## Medically-indicated inductions

Twenty years ago, post-term inductions were relatively rare. Women were allowed to go weeks past their due dates. Now, doctors know more about possible risks to post-term babies, says Johnson.

"Post-date inductions are done one week past the due date, because stillborn chances increase past 42 weeks," says Johnson. "The aging placenta may calcify and no longer provide adequate nutrition and oxygen for the baby."

"Induction might also be deemed necessary if there are medical complications of pregnancy, including hypertension, diabetes, or growth problems with the baby."

## Elective inductions

A doctor might consider elective induction when the pregnancy dates are accurate, Johnson says. That's typically when the pregnancy is at least 39 weeks along and the cervix is considered "favorable," or already on its way toward delivery.

Mothers living far from the hospital or with chances of rapid labor might be good candidates. Or, an elective induction might be scheduled when out-of-town family or friends must be summoned for child care.

Why wouldn't an obstetrician always opt for convenient, induced labor? Johnson says elective inductions can be dangerous to babies born prior to maturity. There are also maternal concerns.

"If it doesn't go well, it could increase C-section rates, where if the patient had waited, they could have had a vaginal delivery," says Johnson. "But as elective inductions have become popular, we believe it is a safe procedure, as long as certain criteria are met."

## Other questions

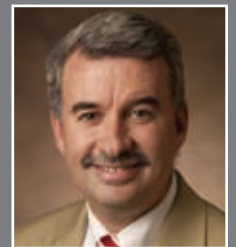
Past generations of women claimed induced labor was quicker and more intense. Johnson has seen no evidence of that, but does encourage mothers to ask their doctors about any concerns they have.

"If you're hoping to induce, have a reason to induce, or have other questions, it would be appropriate to bring those concerns up in the third trimester – as delivery is approaching," says Johnson.

Johnson and his OB/GYN Associates of Alabama colleague, Rebecca DeRosier, MD, welcome all patient questions. Questions about Down's Syndrome and neural tube defects like Spinal Bifida can now be answered in-office, during the first trimester.

"Although it's purely elective, to offer reassurance and preparation, we generally use these non-invasive tests for patients over 35 or those with previous family history," says Johnson.

The newly-available diagnostic tool, ultrasound combined with blood tests, can help moms know what to expect as they are expecting.



**William Johnson III, MD**  
OB/GYN Associates  
of Alabama





## When the pediatrician no longer fits

Helping teens transition to their “grown-up” doc

**Your 14-year-old might have strep throat. You take him to your beloved pediatrician.**

**But things are different this time.** As soon as you enter the waiting room, which is outfitted with the same train-shaped chair and Lego table your son used to adore, you sense his discomfort. He has outgrown this office as surely as he has outgrown the last six pairs of jeans.

**It’s time to make a change – but how? And, when?**

“The transition will vary from person to person,” says Neil Meadows, MD with Birmingham Internal Medicine Associates (BIMA) at St. Vincent’s One Nineteen. Some pediatricians offer teen-friendly waiting rooms. Some young adults, content with the Legos, reluctantly leave their pediatricians only when officially released at age 21.

**But those who make an earlier transition can enjoy multiple benefits.**

Just as opening a teen bank account leads toward financial independence, transitioning to primary care physicians is a step toward teens assuming health-related responsibilities.

“Having them go to an adult physician is an easy way to do that,” says Meadows, trained to treat patients of all ages. Meadows sees ages 14 and up in the BIMA office, while also offering urgent and walk-in care.

**As childhood infections wane, parents are less likely to schedule annual check-ups. But those are still recommended for teens,** says Meadows. Students of this age should also have a few minutes for private doctor chats about personal matters.

Seeing a doctor regularly sets good habits before age 20, when blood sugar and cholesterol checks start. Females should begin Pap smears at age 21, or earlier if sexually active.

College students might access university-sponsored clinics, but will need a home physician for school breaks. If they already know how to establish a primary care physician upon college completion, they will know whom to see when they sprain an ankle or notice a strange knot on their wrist.

**Pediatric care is still available.** Meadows refers teens requiring specialized care to Children’s Hospital of Alabama, just like their pediatricians would.

“It’s actually a great relationship we have with that hospital,” says Meadows.

To transition, ask your pediatrician or call Dial-A-Nurse at 939-7878 for a physician referral. You can also call practices like BIMA to learn which internists have special interest in teen care. When you make the appointment, bring your child’s medical records for review.

Everyone loves their pediatrician. But when the Barney chair no longer fits, help your child make the transition to their own, “grown-up” doc.



**Neil Meadows, MD**  
Birmingham Internal  
Medicine Associates

## The doctor can see you now! When you just can’t wait...

Dr. Meadows sees patients ages 14 and up, with and without an appointment. His availability for urgent care and walk-ins from 8:00 a.m. to 5:00 p.m. weekdays is a special benefit, for busy parents and

teens. With more than 9 years experience, Meadows is a Board-certified family practitioner, just minutes away, ready to meet your medical needs.



# One Nineteen

## Is there a doctor in the neighborhood?

### INTERNAL MEDICINE

*Birmingham Internal Medicine Associates, PC* • 205-995-9909

- John Farley, MD
- Tammy Leong, MD
- Rebecca Lockhart, MD
- S. Jason Smith, MD
- Edward Alderson, MD
- Neil Meadows, MD

### ASTHMA & ALLERGY

*Birmingham Allergy and Asthma Specialists, PC* • 205-943-1197

- Clara Chung, MD
- Carol Smith, MD

### CARDIOLOGY

*Alabama Cardiovascular Group, PC* • 205-939-0139

- Byron Jones, MD

*Birmingham Heart Clinic, PC* • 205-856-2284

- Michael Simpson, MD
- Van Reeder, MD
- Robert Foster, MD
- C. Andrew Brian, MD
- Brian Snoddy, MD
- James Trimm, MD
- Jason Thompson, MD

### DERMATOLOGY

*Greystone Dermatology* • 205-408-4488

- Sandra L. Zahradka, MD

### ENT

*Alabama Nasal and Sinus Center, PC* • 205-980-2091

- Michael Sillers, MD

*Shelby Ear, Nose and Throat, PC* • 205-621-8900

- David Halvorson, MD

### GENERAL SURGERY

*Breast Care Center of Birmingham, PC* • 205-877-2987

- April Maddux, MD

### NEUROLOGY

*Hamo Neurology, PC* • 256-249-0091

- Wael Hamo, MD

### NEUROSURGERY

*Birmingham Neurosurgery and Spine Group* • 205-986-5200

- Carter Morris, MD

### OBSTETRICS/GYNECOLOGY

*OB/GYN Associates of Alabama, PC* • 205-271-1600

- William Johnson III, MD
- Rebecca DeRosier, MD
- Jodie Benton, MD

### OPHTHALMOLOGY/OPTOMETRY

*Alabama Vision Center* • 205-991-2021

- Price Kloess, MD
- Stephen Downey, OD
- Andrew Velazquez, MD
- Holly Young, OD

### ORTHOPEDECS

*Sports Medicine & Orthopedic Specialists, PC* • 205-595-6757

- Samuel Goldstein, MD
- Cherie Miner, MD
- Renee Riley, MD
- Emily Bell Casey, MD
- James Flanagan, MD

*Davis Orthopedics* • 205-533-6644

- Matt Davis, MD

### PAIN MANAGEMENT

*Southern Pain Specialists, PC* • 205-995-9967

- Kenneth Varley, MD
- Andrew Rozsa, PhD

### PLASTICS

*Clinton Plastic Surgery Center* • 205-408-9787

- Michael Clinton, MD

### GASTROENTEROLOGY

*Birmingham Gastroenterology Associates, PC* • 205-271-8000

- Craig Philpot, MD
- Cotton Shallcross, MD
- Owen McLean, MD

*Gastroenterology Associates South, PC* • 205-933-0960

- Randy Newman, MD
- Carrie Folse, MD

*Southview Medical Group, PC* • 205-918-1471

- Jack Averett, MD

*St. Vincent's Lab Services are also available.*

St. Vincent's One Nineteen  
 7191 Cahaba Valley Road  
 Birmingham, AL 35242  
 205-408-6600 • onenineteen.com



St. Vincent's  
 HEALTH SYSTEM  
 Care you can believe in

# Health & Wellness Festival

Join us as St. Vincent's One Nineteen brings the great care we give our patients into the community at our 3rd Annual Health & Wellness Festival.

Learn more about the health topics that concern you most and take advantage of our free screenings.



**Saturday, May 1**  
**9:00 a.m. to 1:00 p.m.**

## Free Health Screenings

- Cholesterol
- Bone Density
- Glucose (Blood Sugar)
- Vision
- Blood Pressure and Heart Rate
- Body Fat
- Grip Strength
- Body Mass Index (BMI)
- Foot Step Pressure

## FUN FOR THE KIDS

- Moonwalk
- Playground
- Face Painting

## OTHER EVENTS

- Hannah Home Shelby 1 Mile Fun Run
- Group Exercise Classes
- Healthy Cooking Demonstrations
- Meet the Doctors
- \$99 Mammograms



Contact us for more information.  
 7191 Cahaba Valley Road, Birmingham, AL 35242  
 205-408-6600 • [onenineteen.com](http://onenineteen.com)