

## Blog

### Featured Clinician: Dr. Patricia Rowe-King

Posted on Thu, Nov 05, 2015

She's a professor, a physician, an advisor, a philanthropist, a humanitarian, and now Patricia Rowe-King, MD, FAAP, is Hospitalist Medical Director of the Year for EmCare's South Division.



Board-certified in pediatrics, Dr. Rowe-King joined EmCare in 2010 as the medical director of hospital medicine at Chris Evert Children's Hospital in Fort Lauderdale, Fla., and now is the medical director of pediatric services for Broward Health. She is responsible for providing medical leadership and physician oversight of the system's pediatric hospitalist and pediatric emergency medicine programs.

She developed a respected pediatric residency program at Chris Evert Children's Hospital, and has become a source of ideas and insights for North Broward's administration, who often reaches out to her for expertise in integrating inpatient and ED services and improving the patient experience.

Her colleagues describe her as a great communicator who is always willing to listen. She's extremely involved and helpful, and is constantly looking for opportunities to improve the department's services, including provider communications.

"Patricia has developed a team of dedicated physicians and has completely changed the culture of hospital medicine at Broward Health," explained Terry R. Meadows, MD, FACEP, Chief Executive Officer of EmCare's South Division. "She single-handedly built the residency program, which received accreditation on first visit. Her dedication and commitment to the field of pediatrics is unwavering, and we are proud to have her on our team."

Dr. Rowe-King received her undergraduate degree from Boston University, where she graduated cum laude, and her medical degree from the University of Miami School of Medicine. She completed her pediatric residency at the University of Miami's Jackson Memorial Hospital.

She shares her knowledge about the pediatrics field as a professor at Nova Southeastern University, Davie, Fla.; Florida International University, Miami; and University of Miami Miller School of Medicine. She is a member of the Physician Review Committee of the Florida Department of Health Children's Medical Services Network, a member of the Broward Regional Emergency Medical Services Council, and serves as a medical director of emergency medical services for the Fort Lauderdale Rescue and Broward County Sheriff's Office.

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Dr. Rowe-King is a fellow of the American Academy of Pediatrics and a member of the Broward County Pediatric Society. Her civic involvement includes serving as team leader for Friends Reaching Friends Medical Mission Team and serving on the board of ChildNet, an organization dedicated to protecting abused, abandoned and neglected children.

Congratulations, Dr. Rowe-King!

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## Documentation Tip of the Week: Tips for Avoiding an Audit

Posted on Wed, Nov 04, 2015

Our weekly feature of documentation tips for clinicians.

By Timothy Brundage, MD



- Official coding guidelines support coding a diagnosis that is only documented once in the medical record. However, auditors are increasingly denying diagnoses that do not flow consistently through medical record to include the discharge summary.
- While it is not necessary for a physician to document the criteria he or she used to make the diagnosis, it will reduce the potential for denial.
- Conflicting documentation between different providers increases the likelihood of denial.
- Whenever possible, the attending physician should clarify any inconsistent documentation.

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TIMOTHY BRUNDAGE

Dr. Timothy Brundage is a hospitalist for EmCare at St. Petersburg General Hospital in St. Petersburg, Fla. Dr. Brundage earned his bachelor's degree in chemistry and molecular biology at the University of Michigan, his M.D. at the Wayne State University School of Medicine and completed his residency in internal medicine at the University of South Florida College of Medicine. Subscribe to Dr. Brundage's weekly documentation tips, or ask him about specific documentation issues, by emailing him at DrBrundage@gmail.com.



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## Autism-Friendly Emergency Department Improves Patient Satisfaction

Posted on Tue, Nov 03, 2015

By Fareed Nabil Fareed, MD, FACEP

Patients with autism react and communicate differently, requiring a specialized approach to create a safe and supportive environment – especially in emergency situations.



Recognizing this, in April 2014, we worked with EmCare Partners Group to develop a program to provide an “autism-friendly” experience in the emergency department (ED) at **HealthAlliance of the Hudson Valley's Broadway Campus (HAHV)**.

The program uses iPads with autism-specific apps that help our staff communicate with patients with autism and verbally impaired patients. The devices help medical providers learn the reason the patient has arrived for care; the patient's pain and discomfort level; and his or her communication preferences. It also enables our staff to better explain what the patient can expect during his or her visit to alleviate fear and confusion. Sensory boxes provide objects with a variety of textures to enable autistic patients to self-soothe and better deal with stress.

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The program also involved comprehensive education regarding special

considerations in the care of ED patients with autism for our staff and pre-hospital personnel.

The hospital's administration embraced this initiative whole-heartedly, and it's great to see how this effort is truly improving the care experience. We've seen a significant increase in patient satisfaction scores, especially in 2015. We attribute it to a greater emphasis on the patient experience and customer service, of which the autism-friendly ED initiative is a part.

Meghan Goodnow, lead clinical technician in HealthAlliance's ED, said the education and tools provided through the new program enabled her to quickly assess and calm an agitated patient – and provide peace of mind to his parents.

"A young boy with autism was yelling and crying very loudly when he came into the ED with burns on his fingers. I brought the iPad over to him, and we sat together and quickly navigated through the screens," explained Goodnow. "He was much happier communicating using the iPad, and I could see the look of relief on his parents' faces as the child relaxed and found a way to explain his pain."

Goodnow also offered the boy the opportunity to select an item from the sensory box. Noting that he chose a squishy item, she made his ice packs "extra squishy" so they were more appealing to the young patient.

"When they were leaving, the patient's mother said that she was very impressed with our staff's patience and understanding toward their son. She said she was thankful to have a group of people willing to take the time to make her son feel special and to attempt to understand and communicate with him. She was planning to tell other local parents about our new service," said Goodnow.

A young, non-verbal patient also found comfort by using a toy from the sensory box.

"The young man's caregiver said that he probably wouldn't be able to use the iPad but that the patient liked toys that made noise," explained Pamela Ausanio, RN. "I offered him a pinwheel that moved and made a sound at the same time. The patient blew on the pinwheel during the evaluation, distracting him and easing the stress that can be associated with a physical exam. The young man's caregiver was impressed with our attentiveness to his client's disability. As the community becomes more aware of our services for people with Autism Spectrum Disorder, I think we'll see an increase in visits from patients with autism."

As clinicians and leaders, it's important to recognize how our patient populations are changing – and evolve to meet those changes. I'm proud of what we've accomplished and I look forward to seeing the program expand.

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*Fareed N. Fareed, MD, FACEP, Medical Director of the Emergency Department at HealthAlliance of the Hudson Valley. Dr. Fareed graduated magna cum laude from Harvard University with a bachelor's degree in biochemical sciences. He obtained his medical degree at Columbia University College of Physicians and Surgeons. He completed an emergency medicine residency program at New York University/Bellevue Hospital Center. He was director of Columbia University's research associates program at NewYork-Presbyterian Hospital, was a faculty member for NewYork-Presbyterian Hospital's emergency medicine residency program, and was assistant professor at Columbia University. Dr. Fareed is a diplomate of the American Board of Emergency Medicine and a fellow of the American College of Emergency Physicians.*

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Tags: autism, autism-friendly ED, EmCare Partners Group, Fareed Nabeli Fareed

## Featured Recruiter: Dani Taylor

Posted on Mon, Nov 02, 2015

**Name:** Dani Taylor  
**Position:** Physician Recruiter  
**Division:** West  
**Location:** Dallas

**Education:** BS in Psychology

**Years with EmCare:** I worked for EmCare for 6 years, left in late 2007 and came back in 2013.

**Years in the recruiting field?** 18

**Why did you decide to become a recruiter?** It sounded interesting and fun!

**What makes EmCare different from other EM groups? What makes it**



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**attractive to candidates?** EmCare's experience, number of specialties and its size make the company attractive to candidates. No other big group offers as many services and service lines. Candidates like that they can work at several different EmCare facilities in the same city or even in different states.

**Describe your ideal candidate.** He or she is board-certified in emergency medicine, already licensed in Texas with a clean work history and is willing to go to any site needed.

**How important is the "relationship" between recruiter and candidate?** Extremely important! A recruiter can ruin a hire or make it and get lots of referrals! We are the first impression they get of EmCare. And, we are the candidate's link to the hospital and others within EmCare.

**What do you like most about working at EmCare?** I'm busy all of the time and it's definitely challenging. There is no typical day at EmCare.

**What do you enjoy outside of work?** Spending time with my family.

**What qualities make a successful recruiter?** A sense of urgency and excellent follow up/follow through.

**Why should physicians and advanced practice providers join EmCare?** We have 45 years of experience and many opportunities and locations for practitioners.

**What should residents do now to prepare themselves for future hiring opportunities?** Her or she should get a license in the state in which they're planning to work.

**What "insider tips" do you have for anyone applying to EmCare?** Opportunities change all the time so be flexible and open to change. And the process is extremely fast paced!

**How should a candidate follow up after an interview with you?** Anyway they can! Text, Email, call.

**Where do you look for candidates? Do you use social media?** I use everything to look for candidates, However, referrals are my best source for recruits.

**How would your co-workers describe you?** Hopefully positively! They'd describe me as sarcastic, fun, and a good recruiter.

**Tell us something that most people at work don't know about you.** My husband, kids and I own a snow cone house.

**What was the last book you read?** I don't have time to actually get through a whole book. I do read the bible at night for a few minutes.

**What's your favorite health or medical TV show?** Untold Stories of the ER.

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Tags: Dani Taylor, emergency medicine recruiter, physician recruiter, recruiter profile

## Physician Emphasizes Importance of Saying Thank You

Posted on Sun, Nov 01, 2015

Doctor reports feeling deeper connection to his patients; improvement in patient satisfaction score

(HealthDay News) -- The importance of thanking patients for coming to see you, the physician, is described in an essay published online in Medical Economics.



The article discusses implementation of AIDET in a large multispecialty group practice. The acronym stands for the action words that comprise the patient visit: acknowledge the patient and associated family; introduce yourself; describe what you are going to do; explain what you did and what will happen next; and finally, say thank you.

The author notes that despite having good scores overall for the patient experience, after making an effort to say thank you, his scores increased further, reaching 90 percent. As well as seeing an objective improvement, the author describes the feeling of having made a deeper connection to more of his patients, noting their smiles as they left the exam room.

"To paraphrase Abraham Lincoln, you can please all of the patients some of the time, and some of them all of the time. But you can't please all of the patients all of the time," the author writes. "But you can try to thank all of them, all of the time, for coming to see you."

Full Text



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