What's Happening

a newsletter for the employees of Maine Medical Center

June 29, 1994 Vol. 25, No. 13

Employee Health Unit crosses the street

July 11 is moving day for Employee Health. Where is the staff of MMC's Employee Health Unit going? Just across the street to Suite G at 7 Bramhall. That is the brick building located across the street from the Dana Health Education Center.

The new space will provide a more comfortable, more private setting for employees to be seen for health problems arising while they are at work. However, during the time leading up to the move from the Outpatient Department, reduced services will be provided. From July 5th to the 8th, staff will only be available to employees presenting with workplace injuries, needle sticks, and infectious disease exposures. Employees are encouraged to see their personal physicians for any other illnesses.

Employee Health is open from 0800 to 1630 hours, Monday through Friday. To make an appointment to be seen by an Employee Health nurse, call the new phone number: x4011. Suite G is located on the lower level of 7 Bramhall Street, to the right and past the waiting area.

Skin Care Fair

- Exhibits of products and devices
 - Educational materials
- ◆ Booths from a variety of areas
- Consultations and answers to concerns

◆ SURPRISES!!!

Cafeteria Conference Rooms B & C June 29, 1400 - 1800 June 30, 0200 - 0400 and 0600 - 1000

Know what time it is? Time to Get Focused!

Do you know where your camera is? Do you have any film? Remember how to set an f-stop? These are important questions because it's time once again for Maine Medical Center's Employee Photo Contest. The Fourteenth Annual contest gets underway Monday, July 11, with contest rules and entry forms available outside the Cafeteria and at Public Information.

The deadline for contest entries is Friday, August 5, so start thinking about *your* entries! When choosing your best photos, recall what you saw in last year's contest. Try to select something unique. If you really want to enter a photograph of a common subject, try to make it *un*common by taking the picture from an unusual angle. Be creative!

Enter photos in a variety of categories; don't enter shots that are identical or closely related. The categories are Scenic, People, Animals, and Open. Your color or black and white photos must be 5" by 7" in size. If you entered a photo in a previous MMC contest, you cannot enter the same one again.

A panel of impartial judges from the Greater Portland area will choose the winning photos in each category. The contest winners will be announced Wednesday, August 24. You can see all the entries when they are displayed in the Dana Center Lobby, August 22 through September 2. Once again, the Friends of Maine Medical Center will award three Purchase Prizes for photos that will be enlarged and hung in patient areas.

Don't forget to cast your votes for the People's Choice Awards August 22 through noon, August 24!



WHAT DOES if feel like to be in a car accident at 5 mph? Just ask Michelle Janosik, Pathology. She gave "The Convincer" a try June 10. Winning prize numbers drawn for those who rode the crash simulator are: 9434180, 9434184, and 9434207. If you hold a winning ticket, call the Safety Office, x2513, to claim your T shirt!

Mister Bagel Tennis Classic to raise money for MCCP

Plans for the Sixth Annual Mister Bagel Tennis Classic are underway! Over the past five years, this popular event has raised more than \$90,000 for the Maine Children's Cancer Program, with as many as 50 men's and women's doubles teams competing each year.

Play starts with a compass draw Saturday, September 17, and ends Sunday, September 18. Teams are guaranteed three rounds of play. The Classic is held in Falmouth and includes a dinner dance Saturday evening, gift bags, trophies, and awards for all players. If you do not choose to play, but wish to help, you may sponsor a team or player.

The Maine Children's Cancer Program is a subsidiary of the Maine Medical Center Foundation. For additional information about the Tennis Classic, call Julie Moss, 846-1456. For details about the Maine Children's Cancer Program, call Susan Hall, x6274.

To Everyone:

I wish to thank all the doctors, technologists, and nursing staff who were most caring for the excellent treatment involved in my care recently on the cardiac unit. The Emergency staff were all so professional and concerned. The food wasn't bad either! It all made my stay very pleasant.

Many thanks,

Warren Little

New product saves environment, money

A representative group from Environmental Services, Nursing, and Materiel Management announces that MMC will begin using a new line of tissue products that exceed EPA guidelines for post-consumer material content (PCM).

The new ENVISION line is made from 100% recycled fiber, including a minimum of 90% PCM. Currently, the highest PCM content in EPA guidelines for tissue paper purchases by federal, state, and local governments is 40%. Postconsumer material includes newspapers, office paper, packaging materials, and other wastepaper items.

A bonus to doing something positive for the environment is a projected cost savings at MMC of approximately \$14,000.

These new products are expected to be in use beginning the first week of July.

Dear Friends:

I wish to say a special "thank you" to all for the wonderful performances in MMC's Talent Show, "Swing into Spring". It is always great fun to discover the variety of talent here at this hospital. I think I can speak for those who spent many hours getting ready for this event (Sally, Debbie, Ellen, Gail, and Erika), as well as for those who attended (more than 245 enthusiastic people): it was a great show! Bless you, everyone. I hope to see many of you next year. (I think the Sisters of the Sacred Blood are already planning!)

Jean L. Trottier, Director



Nurse To Nurse

In several past columns, I have written about change, health care reform, improved work processes, and how these will alter our views and methods of work. We have experienced subtle changes in nursing practice related to shorter lengths of stay, critical pathways, and new technology. We are sending patients home who are still acute and for whom more complex continuing care must be arranged. Yet, it appears that we have seen only the beginning of serious systems revision and any illusion of escaping this challenge is folly.

We will need to make some tough choices and even unpopular decisions. As in-patient volume continues to decline, we will need to close beds, create different service/program clusters, and work closely with you to assure skill and knowledge as patient care organization and processes shift. All areas will not be similarly effected by down-sizing, but we will all share in needing to identify new ways to give high quality service.

An evaluative component will be added to

A publication of Nursing Services

our work so that patient outcomes can be quantified. Surveys can give us evidence about patients' satisfaction with care; however, efforts to measure whether the individuals' functional status was improved will also be a requirement.

We need to expand our capacity to serve patients and families in ambulatory settings with special emphasis on increasing their ability to attain and maintain their own health status. At the same time, we need to attend to our personal health.

The hospital of tomorrow will be a critical part of the care network. It will be dedicated to caring for very ill individuals for relatively short stays. It will be staffed by good people who have met the challenge of reshaping the delivery of services. It will be staffed by good people like you.

Please know that change breeds rumors and that rumors often hold a grain of truth. Rather than wonder or worry, call or ask your Head Nurse, Director, or myself what is happening.

--Judith T. Stone, RN Vice President for Nursing

Tours Say "We're Proud to Work Here"

R4 nursing staff extend a huge thank you to the following persons (and their departments) who opened their doors on "Bring Your Daughter to Work Day" in late April: Barry Corriveau, Lab, John Rojecki, Pulmonary Medicine, Colleen Huff, Pharmacy, Estelle Esposito, RN, CSD, and John Romano, Dietary. These people welcomed our daughters and, by giving tours and show-and-tell discussions, conveyed how we all contribute to providing care and service to patients. Not only did our children learn about potential health

care career opportunities, they gained some appreciation and pride in seeing what their moms and dads do when they go to work each day. Thanks, MMC!

-- Priscilla Hennessey, RN, R4

Innovative Idea

R7 is using NPO signs that have been laminated. This will cut down on the wasting of paper. You can write any specific information on them with a grease pencil, and then wipe it off when your patient is no longer NPO.

A Maine Fisherman's Tale

Don is a fisherman who lives in a small coastal Maine town with his wife and two sons. One night in December 1989, there was a treacherous storm off the coast of Nova Scotia. Don was on watch at the wheel of the fishing trawler when he was thrown across the boat. He struggled to hold on for several hours, afraid he'd fall down the stairwell or go overboard. When co-workers found Don later, he had been severely injured. He was taken to Halifax and diagnosed as a quadriplegic, having no movement or feeling in his arms or legs, and remained there for a month until stable.

In January 1990, Don was transferred to MMC to be closer to family and friends. Once settled on R4, the physician met with Don to talk about plans for rehabilitation; other team members discussed how they would help Don maximize his function given the level of injury to his spine.

Don's life changed forever that stormy night; he was headed for a ten-month journey, not knowing where it would take him. He could turn his head from side to side and had some movement in his right big toe and was dependent on nurses for all of his personal care. Imagine not being able to scratch your nose! In time, Don began regaining some movement in his arms, so he learned to feed himself with a special arm sling. Although discouraged with messy spills and the time it took to feed himself, Don persevered and progressed to a hand-held feeding cuff and special utensils. Soon, accompanied by a nurse, he would go to the Cafeteria for meals and a change of scenery. Don was learning how important it was to do what he could for himself, no matter how long it took. It was difficult for staff to watch him struggle to do things for himself, but all knew helping him would only slow his progress.

Don progressed from bedside exercises to a tilt table, which would gradually put him upright until he was no longer bothered by dizziness. Once strong enough, he attended therapies four to six times a day in a wheelchair. Eventually, Don progressed to a walker relying on leg braces. A nurse would follow Don with a wheelchair should he become fatigued. In the beginning, it would take Don 30 to 45 minutes to walk the corridor loop. Because he was glad to be on his feet again, he didn't give up. Don had his moments of discouragement, but visits from his wife, sons, and many friends helped him move on.

Don likes to read, so his nurses would set him up in the Solarium in his wheelchair with a book propped and a special device he put in his mouth for turning pages. One day, he decided to try and push his wheelchair himself. He found he was able to, so he kept moving along until he reached the elevators. He wanted to turn around, but had difficulty. He gave himself a good push and fell right out of the wheelchair. You can imagine the uproar this caused! Don had a few stitches over his eye and a bruised ego. The embarrassment was more upsetting to him than the fall or the stitches!

Don had a plan when he was discharged. He would follow a rigorous schedule of therapy at home. He figured he had eighteen waking hours and he was not going to sit around and become bored. He decided if it took him three hours to put on his own shoes that was fine because he had eighteen hours a day to practice and improve! Now it takes Don just ten minutes to dress himself.

Don is proud he can walk with one cane and sometimes without using any device, but he had feared falling when alone because he could not get up once he fell. After practicing for six months, he is able to get up on his knees and then stand. It took almost five years to get to this point.

Don thanks his many friends who accompanied him on walks in his driveway and down his street. During the winter, he practiced walking in a local museum. He tried walking in the grocery store, but it was too crowded for him. He found the museum quiet in the winter. After a year and a half of cruising through the museum, he could be a tour guide!

Don fell during the winter and broke his

hip. He spent one month in a Boston hospital, but took even this event in stride. Now he has recovered and is taking walks with his oldest son! Don has also started a small business in his barn making fiberglass buoys. He drives a truck with special hand controls. Don calls himself a "functional quadriplegic, but a very disabled man"; I think of him as a very strong, modest, and sensitive man who happens to be a quadriplegic.

-- Ellie Spear, RN, R4

Patient Education Materials: What Nurses Need To Know

Consider going through hundreds of patient education materials developed and used by nursing staff throughout MMC and asking such questions as: Are these current? What reading level are they geared for? Who uses them? How are they used? Are they used? Do different departments provide consistent instructions and information? In a nutshell, this is what Lois Bazinet, RN, Nursing Resources, Sue Brown, RN, R5, Roger Collard, RN, Endoscopy, Carol Doane, RN, SCU, Janice Kroot, RN, R7, Ann McPhee, RN, OPD, Carole Nadeau, RN, R9W, Janet Palanca, RN, L/D, Lisa Paquet, RN, ASU, Wilma Reed, RN, R2, Rene Shoemaker, RN, Float, Kim Thomstad, RN, Clinical Director, and Vicki Webster, RN, NSI, have been working on. These current members of the Patient Education Materials Team have drafted guidelines to standardize format, content, and readability of patient education materials and have established a method for consumer testing. In the last eighteen months, the team has reviewed JCAHO regulations for charting, collated existing materials, created a directory (located in Kim Thomstad's office), educated and provided consultation for departments, begun revisions of current materials, and tested the guidelines. In smaller groups they plan to assist departments in writing or revising materials.

Future work includes putting finishing touches on the guidelines for the development of patient education materials at MMC, designing an efficient approval process, and comput-

erizing the directory and file of materials.

Staff working on patient education materials are encouraged to call Kim Thomstad's office to arrange for assistance and support. Copies of finished materials should be sent to Kim for the hospital-wide directory and file.

--Lois Bazinet, RN, and Kim Thomstad, RN

Spotlight on...

...Betsy St. Germain, RN, Oncology Nurse Specialist, who edits the Southern Maine Oncology Nursing Society (SMONS) Newsletter. Betsy sees to it that the SMONS newsletter is published three times a year; it is mailed to over 200 oncology nurses throughout Maine. Her efforts paid off when she was called before an audience of several hundred attending the Oncology Nursing Society Conference held in Cincinnati this May to receive an award for "best editorial content and best overall newsletter." The SMONS Newsletter placed first out of newsletters submitted from more than 170 other chapters nationwide. Congratulations! ...Judy Aiken, RN, Head Nurse, P1C, who recently graduated from USM witha Master of Science in Nursing degree.

...Elaine Corrow, RN, and Janice Kroot, RN, R7, who have developed a discharge education pamphlet for patients going through a cardiac catheterization. The pamphlet, which is literacy-appropriate for the general public and highlights points of interest related to groin care after the patient is discharged, is available to other departments. Contact R7 for more information or copies of this pamphlet.

...R2 staff, who hosted a reunion celebration of the high risk antepartum patients who delivered approximately one year ago. More than 80 patients were invited to visit the Unit, enjoy food prepared by Food Services, and see the finished quilt they worked on while patients here. Staff extend a huge thanks to **Kate Robinson**, R2 Unit Secretary, who volunteered to sew all the squares together. The quilt was raffled at the June reunion with one lucky mom getting to take it home.

Publications and Presentations

- The Association of Operating Room Nurses and the Mosby Corp. (publishers) co-sponsored a conference in Las Vegas earlier this month.

 Pat Fallo, RN, R9W/CICU, was a keynote speaker. Her challenge was to make three presentations on two topics in one day and maintain her sanity as well as her voice! She spoke on "Caring in the Day Surgery Unit: What Our Customers Want" and "Setting Up an Offsite Pre-Admission Unit: A Management Perspective".
- The changing role of the perinatal nurse was the focus for a May conference sponsored by the Maine section of the Association of Womens' Health Obstetric and Neonatal Nursing. Deb Linscott, RN, Perinatal Nurse Specialist, presented "The Post Partum Assessment of Infants and Mothers in the Home". Beth Wilson, RN, Perinatal Outreach, shared her experiences with early discharge. Loretta Hothersall, RN, R2, Julie McCarron, RN, Childbirth Educator, and Cherry Blondell, RN, were panel participants who discussed MMC's experience with Early Discharge.
- Betsy St. Germain, RN, Oncology Nurse Specialist, with coauthors Nancy Houlihan, RN, P4CD, and Steve D'Amato, RPH, Oncology Pharmacist, wrote "DMSO Therapy in the Treatment of Vesicant Extravasation: Two Case Studies", which has been accepted for publication in the September/October issue of the *Journal of Intravenous Nursing*. They review the prevention and treatment of vesicant extravasation, which presents unique nursing challenges.
- Loretta Hothersall, RN, and Diane Stephenson, RN, R2, presented their project "Pain Management in the OB Patient" at a nursing research forum this June at Boston's New England Deaconess Hospital.
- A 2-year old child was brought to MMC's Emergency Department by her father. The child was cyanotic, lethargic, and in obvious respiratory distress. She was sent from triage to the trauma room as a category 1 patient. The father reported that the child had been eating

supper. A few minutes later, he heard a loud thump and found her on the floor coughing and cyanotic. He performed a Heimlich maneuver, and the child coughed up a piece food. She continued to have cyanosis and distress, so he brought her to Emergency. She was cyanotic and listless and her respiratory rate was 36 breaths per minute and labored. What do you suspect was going on? What actions would you take?

To find out more about how Emergency Department staff responded, read "Triage Decisions: A Respiratory Emergency" written by **Ann-Marie St. Pierre**, **RN**, ED, to be published in the August issue of the *Journal of Emergency Nursing*.

• At the International Symposium on Pediatric Pain, held this June in Philadelphia, **Ellen Murphy**, **RN**, PACU, presented "Children and Pain: Integrating Science and Care", a poster on the Pre-verbal Pain Scale.

R7 Trials "Point Of Care" Data Entry

R7 is in the midst of a computer and software trial. The trial began May 4 and involves ten portable computers which are referred to as "Grids" or "Mini MIS" units. These units, equipped with rechargeable batteries, are based on a stand with wheels.

The trial will last eight to twelve weeks. Current software capabilities allow nurses to complete admissions with assessments at the bedside, thereby eliminating written assessments. Charting of medications, medical orders, and care plan data can be entered and retrieved at the "Point of Care". Future software will allow for full MIS capabilities at the patient's bedside.

The trial should confirm the potential benefits of bedside computers for nurses and patients: increased accuracy in charting, assistance with cost containment issues, and more time for nursing at the patient's bedside.

Nursing Services publishes *Nursing Bi-Line* every eight weeks. Comments, questions, and suggestions are referred to Derreth Roberts, MS, RN, Editor, 871-2009-2.

MARKETPLACE

In order to ensure that everyone has an opportunity to use the "Marketplace," ads may be placed *once only*. Repeats will be allowed only on a space available basis.

FOR SALE

U-pick raspberries. Ready mid-July. Call berry hotline at 883-9737 for hours and directions.

Imagewriter printer. 1/2 price: only \$300. Excellent condition. Call 846-3083.

Cape Eliz. home, beautifully updated. 4+ BR, 1 1/2 baths, whirlpool, family room, 2 fireplaces, hardwood floors, beach rights, on cul-de-sac. \$159,000. Call 799-7449.

Charming, turn-of-the-century Yarmouth 4 BR house, 2 baths, LR, DR, eat-in K, new FHW oil furnace, porch, sundeck, 1 car garage. New paint. \$136,500. Call 284-4424.

1987 Dodge Colt Vista Wagon, 5 spd, 4 wheel drive. Runs great! \$4,000 or BO. Call 878-3099.

1984 Honda CB 1000 motorcycle. Excellent condition. \$2,400 or BO. Call 878-3099.

1986 Mach I Bowrider 17', Mercruiser motor 1992 I/O 170 hp, Calkins Trailer, Polaris full spectrum marine radio, plus other extras. Call 282-6212.

Two road bikes: 23" 10 speed Wishiki, \$90.00; 25" 12 speed index shift, Schwinn, \$100.00. Both like new. Call 283-3932.

Falmouth. Charming 2 BR ranch in waterfront neighborhood near Portland. Nicely landscaped. New heating system, easy maintenance. \$120,000s. Call 781-2216.

Portland condo. Large, unique, 2 BR and loft. Washington Ave. \$119,000. Call 781-3567; leave message.

Apple 2GS computer with lots of software and color imagewriter printer, \$400. Will consider donation to non-profit agency; child's desk, \$25; pine bookcase, \$30.00; pine sewing cabinet with fold out table, \$50.00. All cash and carry. Call 781-3567.

1993 Geo Storm. Excellent condition, red, low mileage. \$8,500 or BO. Call 926-4212, leave message.

1985 Subaru GL, 80,000 miles, one owner, inspection sticker good through 4/95. Complete maintenance record available. \$800 or BO. Call 892-0812.

FOR RENT

Wordfords neighborhood. Clean, quiet, furnished room. Parking. \$70/week. Avail. July 1. Call 772-3475.

Outer Forest Ave. 2 bedroom apt.; hardwood floors, w/d hookup, parking. Avail. Aug. 1. \$550/mo. Call 772-3475.

3 BR duplex in friendly Saco neighborhood, 2 baths, open concept, full basement, Monitor heat, appliances incl. No pets. Non-smoker. \$650/mo. plus util. Call 282-3940.

South Portland 1 BR efficiency apt. near SMTC. Cable, heat and util. incl. Parking for 1 car. Avail 7/1. \$375/mo. Call 767-2431.

Foreside Road, Falmouth. 1 BR, nice bath, K, yard, 1st floor, \$625/mo. plus util. No pets. Call 883-2300 or 781-2679.

Foreside Road, Falmouth. 2 BR, K, dining area, LR, 2 baths, 2 car garage, \$735/mo. plus util. Ground level. No pets. Call 883-2300 or 781-2679.

Country guest house, 11 mi. from MMC. 1 BR, K, LR, bath. \$450/mo. Call 892-6085.

Scarborough sublet, 8/1-1/1/95. Small 1 BR house near

The deadlines for announcement-length items and MARKETPLACE are
June 29 for the July13 issue
and July 13 for the July 27 issue.
All items must be in writing.

beaches, \$500/mo plus util. Call 885-5991.

Medical office space, 2nd floor of charming carriage house on Western Prom. Steps away from MMC. 2,000 sq. ft., handicapped accessible. Call 775-0702, days, or 775-7429, eves.

Beautiful 3-4 BR house in Portland, 2 baths, lg. yard. Avail. Aug. 1. \$900/mo. plus util. Call 828-0210.

Small 2 BR house in OOB. 5 min. to beach. \$450/mo., elec. included. Oil heat not incl. No pets. References required. Call 282-1068.

Gorham. Private 1 BR apt., fireplace, w/d hookup, quiet country setting, walk to town, no smoking, no pets. \$550/mo. incl. heat and elec. Sec. dep. and lease. Avail Aug. 1. Call 839-4689.

ROOMMATE WANTED

NS professional F to share nice 3 BR house near beach in South Portland. Sense of humor a must. \$375/mo. incl. util. Call 767-4430.

Responsible M/F to share 3 BR house next to ocean in Cape Eliz. Yard, storage, W/D, cable. \$366/mo. plus 1/3 util. No pets. Call 799-6117.

M/F to share very large house w/2 people, lg. deck, off-street parking, TV, microwave. Sensible rent. Call 773-1358. M/F, NS professional to share multiroom apt., 5 min. walk to MMC. \$250/mo. plus 1/2 util. Must like cats. Call 828-4015.

Terrific house on quiet street near USM. Large rooms, fireplace, 2 baths. \$234/mo. plus 1/3 util. Avail. now or will consider 9/1. Call 775-1176.

CHILD CARE

"WEE LUV" home day care, located off outer Forest Ave. Openings for full- or part-time infant care. Ref. upon request. Call 797-5305.

WANTED

Ride between N. Windham and MMC Division on Foden Road, M-F, 8 AM-5 PM Will share expenses. Call 892-8019, eves.

Painting jobs of any size for summer. Exp. painter, lots of hospital refs. Interior/exterior. Reasonable rates. Call 773-2637.

Driveways paved or coated. Free estimates, quality workmanship. Call 247-4537.

Dirty houses/apt. in need of cleaning between OOB and Kennebunk. Reasonable rates, excellent ref. Call 284-4424.

People to learn Yoga. Call 985-3442.

House and pet sitting jobs, Portland area. Quiet, responsible NS. Call 761-7183.

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What's Happening at MMC

- June 29 CPQI session: A Case Study: The Perioperative IV Quality Team Experience. 1200-1300, Dana #2.
- June 29 Skin Care Fair begins. See p.2.
- July 6 ENERJOY series begins. 1210-1250, McGeachey Gym.
- July 8 Nursing scholarship deadline. For info, call Suneela Nayak, MSN, RN, x2397.
- July 14 CPQI session: Concensus Decision-making Tools: Multivoting, rank ordering, and structured discussion. 1200-1300, Dana #9.

It's a "Night Thing"

For seven months, Maine Medical Center night staff have attended inservices at 0200 and 0300 hours the first Wednesday of each month.

Recent topics and presenting units include: Right atrial caths: P4CD and Float Pool

Cpm: R6

Abgs: Pulmonary Medicine

Chest tubes: R1

Peritoneal dialysis: P1C and Float Pool

Blood components: R3 Bowel regime: R4

Future programs will include a cardiac series from CICU, R9W, and R7, starting July 6.

"The signs are clear. Night staff value continued education", say co-founders Kevin Griffin, RN, Supervisor, and Dottie LaMarre, RN, Float Pool. "The response is tremendous". And its offspring has been equally well accepted: "Video Night". The first was held in April. Videos on spina bifida, genetics, breast cancer, and the joy of laughter were shown throughout the night, complete with popcorn!

What's in store for the future? "Certainly the 'Night Thing' and 'Video Night' will continue, but watch for a January 1995 special!!!"

What's Happening is published every other Wednesday at Maine Medical Center for members of the hospital community and for friends of the institution throughout Maine and northern New England. Comments, questions, and suggestions may be addressed to the Office of Public Information, MMC, 22 Bramhall Street, Portland, Maine 04102-3175. (207) 871-2196. Editor: Wayne L. Clark.

NEW EMPLOYEES

NURSING: Pam Begin, Sean Creighton, Michelle Dixon, Dena Giroux, Julie Hazelton, Andrew Jones, Lisa Kelley, Colleen Lemelin, Susy Rawson, Jennifer Stather, Susan Thomes, Pamela Tiernan, Jay Westra, Lauri Wilson

FOOD SERVICES: Tracey Duest, Allan Ingraham, Richard Leavitt

PULMONARY MEDICINE: Michele Letourneau

MMCRI: Jennifer Lipman, Kyle Pond, Joshua Sparling

CARDIAC CATHETERIZATION: Molly Miller

MEDICAL EDUCATION: Janet Thompson REHABILITATION MEDICINE: Amy Whitlow

About People

- Raul Martinez, CLS, NCA, SBB, has been named Chief Medical Technologist of the Blood Bank. He comes to MMC from Medical Center Hospital in Odessa, Texas, and has more than ten years experience in the laboratory.
- Joanne Murphy, Cory Plummer, Ron Reynolds, and Scott Wood, Suburban Security Supervisors at MMC, were recently certified as Healthcare Security Supervisors by the International Association for Healthcare Security and Safety. IAHSS furthers professional growth through education, seminars, publications, and legislative involvement.
- Sandra Cranford joined 102 other volunteer services directors for the Spring conference of the New England Association of Directors of Healthcare Volunteer Services.

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