

Medical Staff Update

June 2017

St. Jude Welcomes New CMO: Meet Eugene Kim, MD

In April, Eugene Kim, MD, a highly-regarded hospitalist at St. Jude, moved into an office in administration and received new business cards—ones that read Chief Medical Officer. For the 38-year-old Ohio native, moving in required little more than transporting a few framed degrees from his garage—and getting used to a workday that involves considerably less than the 8,000 steps he often averaged as a hospitalist. Favorite part of the new job so far? “Solving problems that prevent physicians and staff from elevating care,” explains Dr. Kim, who plans to continue as a hospitalist on a limited basis.

Dr. Kim will oversee a number of efforts involving care and affordability and believes St. Jude’s integration between outpatient and inpatient services will serve an increasingly important role. “When I first drove past St. Jude and saw the bridge leading to the medical offices, I thought ‘This is a hospital that understands the new health care environment,’” explains Dr. Kim, who joined the hospital’s medical staff in 2016 after serving as Associate Medical Director of the Inpatient Specialty Program at Cedars-Sinai Medical Center.

Board-certified in Internal Medicine, Dr. Kim completed his residency at Cedars-Sinai where he served as Chief Resident before starting his career there as a hospitalist.

While Dr. Kim’s work-week looks very different than it did a few weeks ago, his days off haven’t changed: playing with his kids (ages 5, 3 and almost 2), attending a seemingly endless array of children’s birthday parties, and on Sundays, church. “I feel very blessed,” explains the Fullerton resident. “To find a hospital where the values match my own, a hospital large enough to offer state-of-the-art care and yet small enough to feel like family—that’s a gift from God.”



Physician Burnout: Recognizing the Problem, Finding Solutions

National surveys indicate that burnout among U.S. physicians has reached a critical level. More than half of the doctors surveyed report a loss of enthusiasm for work, feelings of cynicism, and a low sense of personal accomplishment. In addition to contributing to alcoholism, broken relationships, and physician suicide, studies indicate that physician burnout also impacts quality of care and patient safety.

At St. Jude, it is an issue that Sajen Mathews, MD, Chief of Staff, wants to invest time and resources in finding solutions. “We have a moral and ethical imperative to address burnout among our physicians, not only to protect the well-being of our colleagues and friends but to preserve patient care,” explains Dr. Mathews, who along with Joanna Tan, MD, is co-chairing a committee charged with researching and developing strategies to confront the issue. “Finding ways to preserve and improve our physicians’ wellness is good medicine for everyone.”

Initial plans for the program include a symposium to be held on Oct. 25th, conducted by Dike Drummond, MD, a Mayo-trained family physician and the nation’s leading coach, consultant and trainer on preventing and reversing the burnout epidemic among doctors. Other planned efforts include stress management workshops, providing resources to promote resilience and self-care, cultivating a stronger physician community, and leadership development.

“While some fixes will be easy to implement, others will take time and commitment,” explains Dr. Mathews, who says there is strong support for the effort from physician leaders and hospital administration. “Ensuring a work environment that inspires our physicians is a goal well worth our energy and resources.”

Clinical Pearl: Diagnostic Approach to Patients with Choledocholithiasis—Eugene Yoon, MD, Gastroenterologist

Choledocholithiasis refers to the presence of gallstones within the common bile duct. Patients with choledocholithiasis usually present with symptoms of RUQ or epigastric pain, nausea, and vomiting. These symptoms are often more severe and prolonged than seen with typical biliary colic (>6 hours).

Liver function tests are commonly elevated in a cholestatic pattern where the total bilirubin and alkaline phosphatase are disproportionately higher than the elevation of transaminases. Since LFTs can be elevated for a wide variety of reasons, the positive predictive value of elevated LFTs is poor, however the negative predictive value of normal LFTs is very good at excluding the presence of choledocholithiasis.

The first imaging study to obtain is the transabdominal ultrasound to delineate the presence of gallstones, diameter of the common bile duct, and very rarely, the identification of a stone within the CBD. Patients at high risk for choledocholithiasis (elevated Tbili>4 mg/dL and a dilated CBD >6 mm with an intact gallbladder) should proceed directly to ERCP with stone removal followed by an elective cholecystectomy. Patients at intermediate risk (abnormal LFTs and normal or borderline elevated bilirubin, or clinical gallstone pancreatitis) should first undergo further diagnostic imaging such as an MRCP or EUS. Only if there is a confirmed stone by these sensitive modalities, should the patient then proceed with an ERCP. Of note, the reliability of the HIDA scan to assess for a biliary obstruction is extremely poor. HIDA scan has a specificity of only 35 percent for diagnosing a biliary obstruction and should not be used for this purpose. Patients at low risk (normal LFTs and a nondilated CBD) can proceed directly to cholecystectomy, granted there are gallstones or gallbladder sludge visualized on the ultrasound.

Medical Staff Meetings

Attendance counts toward points needed to maintain Active, Senior Active and Courtesy Staff status. All meetings are held in the Erickson Educational Center.

Cardiothoracic Dept./QRC July 12, 7:30 p.m.	Emergency Medicine Clinical Service May 26, 12 p.m.
Medicine Dept./QRC July 6, 12:30 p.m.	Radiology Clinical Service May 17, 12:30 p.m.
Surgery Dept./QRC July 5, 7 a.m.	Pathology Clinical Service May 1, 7:30 a.m.
Women & Children's Dept./QRC July 12, 12:30 p.m.	

St. Jude Welcomes New Physicians

Purificacion Tumbaga, MD
Neonatology
Jai Ho, MD
Emergency Medicine