

centralline

A PUBLICATION FOR THE MEDICAL STAFF OF THE HOSPITAL OF CENTRAL CONNECTICUT

What a difference a year makes

By Steven D. Hanks, M.D., MMM, FACP, VP Medical Affairs, HHC Central Region



I often hear clinicians lamenting the pace of change in health care. Many feel as though they barely have time to catch their breath before the winds of change howl yet again. It can be disorienting, dizzying and downright stress-provoking. What is sometimes lost as we constantly strive to gain our footing in times like these is

just how far we've come in our journey.

The good news is that Hartford Healthcare (HHC) is not a rudderless, sail-torn crippled vessel, the fate of which is solely the purview of wind and sea gods. HHC is a stout, storm-ready ship navigating the rough waters toward our ultimate destination of being nationally recognized for excellence in patient care and most trusted for personalized coordinated care. Like any rough crossing, one needs to pause periodically to take a sighting and gauge where they are, reflect from where they came, and recalibrate to ensure the course remains steady to the ultimate destination.

In late October, senior leadership and the Boards of HHC entities gathered to do just that, and we can confidently say that while the weather will continue to be increasingly choppy, our ship is in great shape. We are in a very different place than just a year ago, and though we're many miles from our ultimate destination, our progress is inspiring. What a difference a year makes!

One year ago:

- Our employed physicians were scattered about our HHC geography, with little standardization, coordination or common identity. Today Hartford Healthcare Medical Group is a multispecialty group practice with a centralized infrastructure and governance that comprises what used to be three separate group practices: Hartford Medical Group, MidState Medical Group and The Doctors of Central Connecticut. This centralized form is the appropriate match for our ultimate functional goals as it will facilitate

coordination and standardization of clinical care and our patients' care experience.

- A steering group was discussing creation of a clinical integration organization, the piece of the puzzle that allows us to align incentives of our private physicians with other pieces of the HHC care continuum. Today we have Integrated Care Partners (ICP), a separate entity headed by a private cardiologist, Dr. Jim Cardon, and governed by a board that has a majority of seats for private physicians. More than 1,500 physicians are enrolled in ICP, and a number of contracts have been negotiated. Clinical subcommittees are being formed to help ICP define quality and value in a way that is meaningful to patients and caregivers, with the confidence that such a model will prove to be the tonic the payers need to finally begin to get a handle around the issue of cost.

- Our path on connecting our clinicians to all the relevant data necessary for optimal care of patients was still murky. Today we have CareConnect, our coordinated effort to centralize all of HHC on the EPIC platform. The CareConnect leadership team is formed and in January, the full team of almost 170 people will travel to Aurora, Wis. to begin bringing EPIC to life.

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Humanitarian Award presented at Physician Reception

Congratulations to Emergency Medicine physician Michelle McDade, M.D., who was honored with the physician Humanitarian Award at the Oct. 10 Physician Reception. She is pictured at right (center) with Lucille Janatka, Hartford HealthCare senior vice president and Central Region president; and Akella Sarma, M.D., chief of Staff. The award recognizes McDade's extraordinary qualities of compassion, civility, vision and integrity that set an example for all future generations of caregivers at The Hospital of Central Connecticut. David Buono, M.D., medical director, Emergency Department, New Britain General campus, says, "For us it was not a surprise because she has been a standout physician since she started." The event was held at Aqua Turf Club in Plantsville.



Eric Hobert, M.D., Emergency Medicine; Kent Stahl, M.D., Hartford HealthCare and Hartford HealthCare Medical Group; and Jeff Finkelstein, M.D., Emergency Medicine, HOCC and Hartford Hospital.



Colleen Donahue; Terrence Donahue, M.D., Surgery; Edward Hannoush, M.D., Surgery; Rekha Singh, M.D., Surgery.

Payment transparency rises with Sunshine Act

A ruling within the Affordable Care Act known as the Physician Payments Sunshine Act or Open Payments aims to raise transparency and awareness of payments, per CMS, between drug and device manufacturers and healthcare providers, namely hospitals and physicians.

The act's primary intent is to remove ambiguity and potential for conflict of interest in business relationships between healthcare providers and manufacturers.

To a large extent, the onus is on manufacturers of drugs, devices, biological and medical supplies; and applicable group purchasing organizations, referenced by CMS as "reporting entities," to report to CMS, effective Aug. 1, 2013, specifics such as payments, valued transfers

or investments to recipients, namely physicians, teaching hospitals.

This information will be collected and posted on a public website by late 2014. CMS encourages physicians to learn what can be reported about physicians; keep records of information related to manufacturers; and subscribe to CMS list serve. For information and requirements, please visit [CMS.gov](http://www.cms.gov) (includes Open Payments fact sheet); <http://www.ama-assn.org/ama/pub/advocacy/topics/sunshine-act-and-physician-financial-transparency-reports.page>; and <https://www.federalregister.gov/public-inspection>.

New surgical director, Comprehensive Breast Health Center

Zarfos aims to build upon cancer program



A fan of American history, Kristen Zarfos, M.D., FACS, has herself made a notable stamp on Connecticut over the years when it comes to breast cancer patient advocacy, education, treatment and teaching.

She's been recognized with numerous awards and recognitions,

having also been an honored guest in 1997 at the State of Union Address of former President Bill Clinton.

Zarfos intends to continue her work in patient education and advocacy in her new role as surgical director of The Hospital of Central Connecticut cancer center's Comprehensive Breast Health Center. Specializing in breast and thyroid surgery, she performs surgery exclusively at HOCC and is a medical staff member of Hartford HealthCare Medical Group.

"I think there's a great breast program here," says Zarfos, referencing HOCC surgeons, radiation oncologists, radiologists, pathologists and oncologists.

Her plans to expand the Breast Health Center will include a greater focus on women at increased cancer risk, including older women, African-American women and those with genetic risks. "We want women to know their risks so they're not fearful unnecessarily, to let them know what they can do to decrease their risks and be vigilant."

She says both women and men should know risk factors and what they can do proactively in terms of exercising and limiting alcohol, for example.

For years Zarfos has spoken about breast cancer education — to both young girls and older adults. "My mission is, when I'm giving talks, to equip patients with the facts so they can help take care of themselves and be proactive in taking care of their health. The same is with physicians — to give them the ever-changing facts about breast cancer."

Zarfos adopts a simplistic yet specific patient care model: To treat patients as she would want to be treated using evidence-based facts and caring for each patient as an

individual. She reinforces the importance of seeing newly diagnosed breast cancer patients as soon as possible. "When someone has found a lump, abnormal mammogram and been told they have cancer it can be frightening. And waiting only heightens fear — we want to see women right way."

She welcomes new patients to her Hartford HealthCare Medical Group office at 399 Farmington Ave., Suite LL2, Farmington (860-224-5416).

Zarfos earned her medical degree at University of Maryland School of Medicine, Baltimore. She completed a general surgery internship at Yale-New Haven Hospital. She was a surgical resident at Yale-New Haven Hospital and Baystate Medical Center, Springfield, Mass., and completed her chief residency at Baystate Medical Center, where she was also a Tufts University teaching fellow. Most recently, Zarfos was director, Comprehensive Breast Health Center, Saint Francis Hospital and Medical Center and an attending physician with Saint Francis Medical Group, Inc. in Hartford. She is an assistant professor of surgery at University of Connecticut School of Medicine.

Board-certified in surgery, Zarfos is a Diplomate, general surgery, American Board of Surgery, and a fellow, American College of Surgeons. She is a member of the Patient Advocacy Committee, National Surgical Adjuvant Breast Project, New England Surgical Society. She is also a past president, Connecticut Chapter, American College of Surgeons.

She is the recipient of numerous awards and recognitions, including the Connecticut National Organization for Women's Elizabeth Blackwell Award for Tenacious Commitment to Providing Healthcare for Women & Children, 2004; Susan Komen Foundation Connecticut Affiliate Board Founders Award, 2003; UConn Health Center John Dempsey Hospital Medical Student Surgical Teaching Award, 2003; American Cancer Society, Greater Hartford Unit, George Sheehan Award for outstanding care and treatment of cancer patients; and Official Citation for Outstanding Dedication, Commitment and Advocacy for the Women of Connecticut by General Assembly, State of Connecticut, 1997.

What a difference a year makes Continued from page 1

- Our cancer care path was fragmented and uncoordinated. Today we have the HHC Cancer Institute, the first of two systemwide service lines (the second being our behavioral health network), and a ground-breaking affiliation with Memorial Sloan Kettering that will bring us to the forefront of world class oncologic care. In addition, our new cancer center has made steady progress and is on schedule for opening in about one year.

- We were a system of four acute care hospitals. Today, we have grown to include Backus Hospital and have quickly

moved to consolidate leadership and management into three regions, another move that will save significant dollars and further our efforts to inch ever closer to the end game of excellent, coordinated care. Despite draconian reductions in revenue on a scale unprecedented in the history of our industry, efforts like these and others through our HHC Thrive and H3W initiatives will help us wring \$200 million in expenses from our system, keeping us ahead of payment reductions and on path to be a survivor of the extraordinary winds stirring the seas in which our industry sails.

NEWSnotes

Kombert named director, Hospitalist Program, Central Region. Daniel



Kombert, M.D., has been named director of the Hospitalist Program for Hartford HealthCare Central Region, comprising

MidState Medical Center and The Hospital of Central Connecticut. Most recently, Dr. Kombert was Hospitalist Program director at HOCC, having joined the medical staff in 2012. He earned his medical degree at New York Medical College, Valhalla, N.Y. and completed an internal medicine internship and residency at Westchester County Medical Center (Westchester Medical Center), Valhalla, where he was also a chief medical resident. Before joining HOCC, Dr. Kombert was vice president, Hospitalist Services, Steward Health Care System, Boston, and a hospitalist medicine director. Before that he was quality medical director, Cape Cod Healthcare, Cape Cod, Mass. Other experience includes founder and director of Hospital Medicine, chief medical officer and chief of medicine at Falmouth Hospital, Falmouth, Mass.; director, Bourne Bridge Medical Urgent Care/Primary Care/Occupational Health Center, Buzzards Bay, Mass. Kombert can be reached at daniel.kombert@hhchealth.org or 860-224-5900 X2316.

Lundbye co-authors article. **Justin Lundbye, M.D., FACC**, chief of cardiology is the senior author in the article "The Impact of Severe Acidemia on Neurologic Outcome of Cardiac Arrest Survivors Undergoing Therapeutic Hypothermia" that appears in the August 19, 2013 online issue of *Resuscitation*. Primary author is Harsha V. Ganga, M.D., of Hartford Hospital.

Study featured in online article.

Primary care internal medicine resident **Baile Njei, M.D., MPH (PGY-3)**,

is quoted in the online *Internal Medicine News* (June 25, 2013) article "In esophageal cancer, adenocarcinoma rates increased over four decades." Njei presented an abstract on the study at Digestive Disease Week 2013 in May, Orlando, Fla. Although the rise in esophageal cancer incidence in the United States has been well documented, says Njei, data lacks on trends in long-term survival and prognostic factors associated with esophageal cancer survival. He analyzed the national Surveillance, Epidemiology, and End Results (SEER) database from 1973 to 2009. Njei says that while in the 1990s squamous cell carcinoma (SCC) was the most prevalent type of esophageal cancer, after the 1990s adenocarcinoma became more prevalent. He attributed the rise and fall of the two types of cancer to etiology. There was a significant increase in overall median survival between the 1970s and the 2000s, from 6 months to 10 months (P less than .001). The diagnosis of esophageal cancer at a localized stage increased significantly during the study period, from 11 percent to 35 percent (P less than .001). In addition, there were significant increases in surgical treatment and adjuvant radiotherapy during the four decades.

HOCC employee presents at national patient safety summit.

Sherry Stohler, R.N., M.S.N., director of Patient Safety at The Hospital of Central Connecticut, presented "An Innovative Approach to Engaging Resident Physicians in High Reliability" at the 10th annual Healthcare Performance Improvement Safety Summit in Norfolk, Va. on Oct. 9. As part of HOCC's high reliability program, all primary care, ob/gyn and surgery residents, are now required to have four hours of high reliability organization training at the hospital. Training is already required of all HOCC employees and physicians. Through a short-term fellowship at

HOCC, **Priscilla Owusu, M.D.**, chief resident, PGY-3/Medicine, worked with HPI founding Partner & Chief Innovation Officer Kerry Johnson, and traveled to various hospitals in the U.S. during various HRO implementation phases.

HOCC hosts conference. The Hospital of Central Connecticut Department of Care Coordination hosted an Oct. 10 Accelerated Compliance Training conference by Executive Health Resources that focused on developments and best practices in medical necessity compliance and appeals management. Executive Health Resources presenters were John Zelem, M.D. (pictured), senior director, Audit,



Compliance and Education; Alan Balick, vice president of Quality and Clinical Content; and Steven Greenspan, J.D. LL.M., vice president, Regulatory Affairs Appeals Management. The conference was timely due to changes to the inpatient prospective payment system effective in October. It included strategies to strengthen medical necessity documentation and understand the impact of the CMS Final Rule, effective Oct. 1, 2013. There were nearly 60 attendees from 18 hospitals and health systems in the Northeast and New York.

Board review course offering at HOCC. An internal medicine board review course, launched by the University of Connecticut Primary Care Residency program, is offered weekly at The Hospital of Central Connecticut, New Britain General campus. A faculty of more than 30 HOCC medical attending physicians lead sessions, with each designed

to provide essential facts and understanding of key internal medicine topics. The course, to continue through June 2014, is offered to residents, fellows and hospital-affiliated physicians. For more information, contact Charles Graeber, M.D., associate program director, at charles.graeber@hhchealth.org.

Hospital awarded grants totaling \$25,000 for Medical-Legal Partnership Project. HOCC was awarded two grants totaling \$25,000 for its Medical-Legal Partnership Project (MLPP) with the Center for Children's Advocacy (CCA). Community Chest of New Britain and Berlin Inc. provided a \$20,000 grant toward program expenses and The Farmington Bank Community Foundation contributed \$5,000. The hospital's MLPP program helps ensure that low-income children throughout the area receive optimal medical care. Through MLPP, the hospital works with the CCA; HOCC pediatricians and the center's MLPP attorneys help low-income children lead healthier lives by improving access to healthcare and resolving issues such as substandard housing. For information, please call attorney Bonnie Roswig at 860-545-8581.

Gendler edits, contributes to new book. Robert Gendler, M.D., also an astrophotographer, contributed several

chapters and is editor of the new book, *Lessons from the Masters: Current Concepts in Astronomical Image Processing*. The book, published by



Springer and available on Amazon, is a collective work of varied experts on astronomical image processing. Gendler's third book,

Treasures of the Southern Sky, of which he is primary author, includes astrophotography and information on the southern hemisphere sky. More than 30 of Gendler's photos frame hospital hallways and the Radiology reception area. More of his work can be seen on his web site www.robgendlerastropics.com.

Physicians conceptualize device offering painless glucose checks. Emergency Medicine physicians **Ron Clark, M.D.**, and **David Mucci, M.D.**, often care for diabetics in the ED and know the routine of so many diabetics who prick their fingers daily to check blood glucose levels.

In Clark's quest to find a different, less invasive and painful way to check glucose levels he started researching if glucose levels in saliva might garner the same results of blood glucose

checks. He shared his idea with Mucci and the two collaborated in research and design efforts toward development of the iQuickIt Saliva Analyzer now headed to FDA patient trials.

It works like this: A diabetic places a tiny device, known as the Draw Wick™ and made of specialized plastic, under her tongue. The device, akin in size to a small piece of gum, soaks up saliva and is then docked into an iQuickIt Saliva Analyzer that measures the amount of glucose molecules in saliva. The reading displays on the analyzer and, via Bluetooth smart device a link can be conveyed to physicians, other healthcare providers or a young patient's parents.

Diabetic advisor for patient trials is endocrinologist William Petit, M.D., a previous medical director of the former Joslin Diabetes Center Affiliate at HOCC and former director of endocrinology, metabolism and diabetes.

The saliva analyzer is in Generation 2 testing phase; Draw Wick was developed with MiniFAB in Australia. Clark and Mucci are hopeful the device will help ease the tedious testing endured regularly by many diabetics. Clark anticipates market availability from their company Quick LLC, in about two years. He adds, "It's a rewarding experience for both of us."

We can all use reminders when it comes to hand hygiene. What can you do as a physician to help promote hand hygiene? A lot — by encouraging and empowering other healthcare workers to remind you if you forget to sanitize your own hands! It's simple. Just pick the floor or floors where you spend the most time and ask staff to remind you if you forget to sanitize on the way in and on the way out. It's easy to do and removes the concern many healthcare workers have that you'll be offended if they speak to you about hand hygiene. Also, be sure to make it clear to everyone on the floor — not just RNs — that you're serious about this!



We welcome physicians to the hospital

Leigh S. Brezenoff, M.D.



**Orthopedic Surgery,
Sports Medicine**
Practice: Litchfield Hills
Orthopedic Associates,
281 North Main St.,
Bristol; 245 Alvord Park

Road, Torrington, 860-482-8539

Education/Experience: University of
Medicine & Dentistry of New Jersey—
New Jersey Medical School (UMDNJ)
(now Rutgers New Jersey Medical
School), Newark, N.J.; general surgery
internship, Albert Einstein Medical
Center (now Einstein Medical Center),
Philadelphia; orthopedic surgery resi-
dency, Montefiore Medical Center,
Bronx, N.Y.; sports medicine and
shoulder and elbow surgery fellowship,
Nirschl Orthopaedic and Sports
Medicine Clinic (now Nirschl
Orthopaedic Center for Sports
Medicine and Joint Reconstruction)
Arlington, Va. He previously worked at
Coordinated Health, Bethlehem, Penn.
Enjoys hockey

Payal Jhawar, M.D.



Internal Medicine
Practice: As part of
Hartford HealthCare
Medical Group, she
practices with The
Hospital of Central

Connecticut at 40 Hart St., Building D,
New Britain, 860-229-0100

Education: St. George's University
School of Medicine, Grenada, West
Indies; internal medicine internship
and residency, Baystate Medical
Center, Springfield, Mass. Medical
areas of interest include diabetes,
nutrition, women's health. She is
fluent in both Hindi and Urdu.
Enjoys dancing, playing tennis, traveling,
running

Misbahul H. Siddiqi, M.D.



Internal Medicine
Practice: Grove Hill
Medical Center, 300
Kensington Ave., New
Britain, 860-832-8150
Education: Sher-I-

Kashmir Institute of Medical Sciences,
Jammu and Kashmir, India; internal
medicine internship and residency at
Wyckoff Heights Medical Center,
Brooklyn, N.Y. Medical areas of interest
include hypertension and diabetes.

Douglas Wisch, M.D.



Orthopedic Surgery
Practice: Litchfield Hills
Orthopedic Associates,
281 North Main St.,
Bristol; 245 Alvord
Park Road, Torrington,
860-482-8539

Education/Experience: University of
Medicine & Dentistry of New Jersey—
New Jersey Medical School (UMDNJ)
(now Rutgers New Jersey Medical
School), Newark, N.J.; general surgery
internship and orthopedic surgery
residency, UMDNJ, where he was also
a chief resident; hand/microsurgery
fellowship, SUNY at Stony Brook Uni-
versity Medical Center, Stony Brook, N.Y.
Enjoys bicycling, skiing, sailing

Kristen A. Zarfos, M.D., FACS



**Surgery/Surgical
director, The Hospital
of Central Connecticut
cancer center's
Comprehensive
Breast Health Center**

Practice: 399 Farmington Ave.,
Suite LL2, Farmington, 860-224-5416;
performs surgery at The Hospital
of Central Connecticut

Education/Experience: University of
Maryland School of Medicine,
Baltimore; general surgery internship,
Yale-New Haven Hospital; was a
surgical resident at Yale-New Haven
Hospital and Baystate Medical Center,
Springfield, Mass., and completed her
chief residency at Baystate Medical
Center, where she was also a Tufts
University teaching fellow. Most
recently, Dr. Zarfos was director,
Comprehensive Breast Health Center,
Saint Francis Hospital and Medical
Center and attending physician,
Saint Francis Medical Group, Inc.,
1000 Asylum Ave., Suite 4320, Hartford.
She is also an assistant professor of
surgery at University of Connecticut
School of Medicine. Dr. Zarfos had
previously worked as an attending
physician in general surgery and
breast health care and surgery at
University of Connecticut Health
Center and was medical director,
University of Connecticut Health
Center's Women's Specialty Health
Program – Celebrate Women. Earlier in
her career she was in private practice
with Shoreline Surgical Associates, P.C.,
in Middletown and was on staff at
Middlesex Hospital. Areas of interest
include breast health and early
detection; breast cancer identification
and prevention for high-risk women;
breast cancer management in geriatric
women; and thyroid surgery for
goiters, nodules and cancer.
Enjoys hiking, nature, reading,
studying American history

RxNEWS

Pharmacy and Therapeutics Committee update

By David L. Girouard, MPH, R.Ph., director of Pharmacy

Alcoholic beverage policy

The Committee discussed benefits and risks of using alcoholic beverages to prevent withdrawal in alcohol-dependent patients. With lack of evidence toward this purpose, the Committee decided other modalities (e.g., benzodiazepines) should be used. Alcohol is no longer available for administration at HOCC except when used as a comfort measure for terminally ill patients.

Intravenous preparation and administration standards

The hospital now has a standard for preparation, administration and monitoring of intravenously administered medications. A multidisciplinary group of nurses, pharmacists and physicians developed use guidelines. The so-called "IV Grid" is available on AINet. Ultimately, this standardization increases safety associated with administration of intravenous products.

Food and Drug Administration safety announcements

Fluoroquinolone neuropathy: The Food and Drug Administration (FDA) is requiring additional warnings in package information describing the potential for peripheral neuropathy. Neuropathy can present soon after initiation of the antibiotic and can be permanent. More information is available at <http://www.fda.gov/Drugs/DrugSafety/ucm365050.htm>.

Formulary changes

There were no additions or deletions to the hospital formulary at the September and October 2013 Pharmacy and Therapeutics Committee meetings.

Fentanyl (Duragesic®) patch labeling: The FDA is requiring Duragesic patch manufacturer to change color of writing on patch to help with product identification. Many fatalities, some in children, have resulted from misuse of this powerful narcotic patch. The FDA recommends that when removing patches that patients fold the patch, sticky sides together, and flush it down the toilet immediately. A more detailed description of fentanyl patch safety can be found at <http://www.fda.gov/drugs/drugsafety/ucm368902.htm>.

Tigecycline (Tygacil®) boxed warning: FDA analysis has shown a higher risk of death with intravenous tygecycline when compared to other antibiotics. The FDA is recommending tygecycline be used only when alternatives are not suitable. More information available at <http://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm370170.htm>.

HOCC transitions to Meaningful Use Stage 2

By Jennifer Clark, M.D., Medical Informatics Officer

The Hospital of Central Connecticut is now transitioning to Stage 2 (MU2) of the federal Meaningful Use initiative, a multi-stage Medicare payment program that promotes the installation and use of electronic health records with a goal of producing REAL improvement in patient care and population health. You may recall that Meaningful Use Stage 1 (MU1) was achieved in 2012 when we went live with varied programs that included CPOE, Medication Reconciliation and our Depart process. We successfully demonstrated our ability to capture patient data and share basic information. In 2014 and 2015 we will attest to MU2 and in 2016, we'll move on to MU3.

With MU2 we'll expand our ability to capture data and improve our ability to communicate data about patients with Centers for Medicaid and Medicare Services (CMS), other providers and the patients. When we move on to

MU3, we'll be aiming to demonstrate improved patient outcomes and population health.

The upgrade to support MU2 projects has already been installed. You may have already seen a new button, Quality Measures, on the Cerner Depart menu. Physicians discharging patients with primary diagnoses that include AMI, stroke or VTE are asked to document data required by CMS through the depart process. This is to ensure timely electronic documentation regarding key aspects of the patient's care. A "power-form" leads the providers through an easy point and click program for documentation.

Other forums will cover Transition of Care Documents and the Patient Portal. Again, these programs are laying down the path that will someday be a highway of information exchange to improve care delivery efficiency and quality.

Bristol Family Health Center now open!

The Hospital of Central Connecticut recently celebrated the grand opening of its Family Health Center at 22 Pine St., Bristol. More than 300 community members attended the Oct. 19 event with highlights including an HOCC services open house and building tours, sports anchor Linda Cohn, LifeStar critical care helicopter, police and fire vehicles, and fun activities for kids, including pumpkin decorating and clown visits. Pictured with Cohn are (from left) Kyle Baker, M.D., and Gerard Roy, M.D., Ob/Gyn. The 15,000 square foot center includes a primary care and walk-in medical office, an outpatient lab, a radiology center, and the HOCC Wound Care Center. The center will also be leasing offices for private physicians. HHC Medical Group physicians relocated to Bristol are Drs. Lorraine Binns-Grear, Nicholas Formica, Lynne Todd and Michael Grey. The center can be reached at 860-584-8291.



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Central Line is a **bimonthly publication** for the medical staff of The Hospital of Central Connecticut. To send information, story suggestions or comments, please contact Kimberly Gensicki at kimberly.gensicki@hhchealth.org; (860) 224-5900 x6507; or via fax at (860) 224-5779.

The Hospital of Central Connecticut
 A Hartford HealthCare Partner



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