44 Pediatric Hip Fractures in California: Results from a Community-Based Hip Fracture Registry. Heather A Prentice, PhD; Elizabeth W Paxton, MA; Jessica J Hunt, MA; Christopher D Grimsrud, MD; Jennifer M Weiss, MD

In our series of 39 patients using registry data (2009-2012), hip fractures in patients younger than age 21 years were more common in boys and Hispanic people. Intertrochanteric fractures (DelBet Type IV) were the most frequently observed type in our community-based hip fracture registry. Short-term complications were infrequent.

48 Participation in Activities Associated With Quality of Life for Long-Term Survivors of Rectal Cancer. Carmit McMullen, PhD; Liyan Liu, MD, MS; Joanna E Bulkley, PhD; Liyan Liu, MD; Altschuler, PhD; Larissa KF Temple, MD, PhD; Joanna E Bulkley, PhD; Mark C Horn

Cancer patients’ participation in social, recreational, and civic activities is strongly associated with quality of life (QOL). In an observational study with longitudinal and cross-sectional components, 567 rectal cancer survivors completed a mailed questionnaire. Overall response rate was 81%. The type of operation, receipt of radiation therapy, and bowel function were significantly associated with participation in activities (the strongest predictor of QOL). The authors recommend revising QOL instruments, and interventions addressing preferred activities and adoption of new, fulfilling activities.

56 End-Stage Renal Disease Outcomes among the Kaiser Permanente Southern California Creatinine Safety Program (Creatinine SureNet): Opportunities to Reflect and Improve. John J Sim, MD; Michael Batech, DrPH; Kim N Danforth, ScD; Mark P Rutkowski, MD; Steven J Jacobsen, MD, PhD; Michael H Kanter, MD

In this longitudinal cohort study (2/2010-12/2015) of 12,394 Kaiser Permanente Southern California individuals (in the creatinine safety program), 83 (0.7%) reached the Chronic Kidney Disease Epidemiology Collaboration equation. The findings demonstrate the importance of a creatinine safety program in an integrated health system.

64 Physicians’ Perceptions of Volunteer Service at Safety-Net Clinics. Laura McGeehan, PhD; Michael A Takehara, MD; Ellen Daroszewski, PhD, APRN

Physicians belonging to the Southern California Permanente Medical Group conveyed uniformly positive perceptions of their volunteer service, and most were motivated by humanitarian or prosocial desires. Volunteering also provided a protective “escape hatch” from the pressures of the physicians’ regular jobs. Physicians cited few challenges to volunteering. The most common personal barrier was a lack of time. The most common professional barriers were organizational and supply issues at the clinic, along with the patients’ social, transportation, and financial challenges.

73 Implementation and Evaluation of the Safety Net Specialty Care Program in the Denver Metropolitan Area. Meredith P Fort, PhD, MPH; Lynnette M Namba, MPH; Sarah Dutcher, MA; Tracy Copeland; Neysa Bermingham; Chris Fellenz, MD; Deborah Lantz, RN; John J Reusch, MD, FACC; Elizabeth A Bayliss, MD, MSPH

This program offers safety-net clinicians the option to electronically consult with specialists. Uninsured patients may be seen by specialists in office visits for a defined set of services. From 5/2013 to 12/2014, safety-net clinicians at 23 clinics made 602 e-consults to specialists, and 81 patients received face-to-face specialist visits. Of 204 primary care clinicians, 103 made e-consults: 65 specialists participated in the program.

82 Reducing Unnecessary Postoperative Complete Blood Count Testing in the Pediatric Intensive Care Unit. Maya Dewan, MD, MPH; Jorge Galvez, MD; Tracey Polsky, MD, PhD; Genna Kreher, MPH; Blair Kraus, RN, MSN; Luis Ahumada, MS; John McCloskey, MD; Heather Wolfe, MD

The authors identified a cohort of patients for whom routine postoperative complete blood count (CBC) testing is unnecessary. They saw sustained decreases below their 50% goal. There were no hemoglobin results below 8 mg/dl, or surgery-related blood transfusions in this cohort within 7 days of surgery. Estimated hospital charges related to routine postoperative CBCs decreased by 87% during 6 postintervention months.

86 Comprehensive Description of Comorbidity for Autism Spectrum Disorder in a General Population. David Cawthorpe, PhD

Direct physician billing data for the city of Calgary, Alberta, Canada, for the treatment of any presenting concern in the Calgary Health Zone (n = 763,449) from 1994 to 2009 were extracted. Annual rates of autism spectrum disorder (ASD) increased 3.9-fold for males and 1.4-fold for females. Males with ASD had overall higher odds ratios for major mental illnesses than females. Thirty-two different patients attended the hospital and one at a skilled nursing facility. Thirty-two different primary care clinicians participated in the program.

91 Collaborative Management of Neurocognitive Disorders in Primary Care: Explorations of an Attempt at Culture Change. Lewis Mehil-Madrona, MD, PhD; Elizabeth Lair, MA; Barbara Mairguy, MA

Two group programs were implemented offering exercise, diet, cognitive enhancement, and socialization for patients with minor neurocognitive disorder (MND). One at a hospital and one at a skilled nursing facility. Thirty-two different patients attended the groups for at least six sessions. Participants enthusiastically reported positive change on qualitative interviews and showed improvement in cognition, balance, and self-esteem. Family medicine residents and practicing physicians both shifted toward lifestyle medicine and significantly changed their views on the efficacy of treatments.

Special Report

100 The Grateful Aging Program: A Naturalistic Model of Transformation and Healing into the Second Half of Life. Marilyn Schiltz, PhD

This article applies an empirically derived naturalistic model of transformation to aging. Nine steps are identified: 1) answer the call to transformation, 2) cultivate curiosity, 3) formalize a practice, 4) set intention, 5) pay attention to the gifts of aging, 6) build habits, 7) find guidance, 8) move to acceptance, and 9) transform self and society. Educational programs are described, and are designed to expand awareness of healthy, mindful, and meaningful aging; to promote individual and social well-being; and to facilitate a supportive atmosphere for personal enrichment and shared learning.

REVIEW ARTICLES

106 Use of Improving Palliative Care in the ICU (Intensive Care Unit) Guidelines for a Palliative Care Initiative in an ICU. Etunzel Mun, MS, MSN, DNP; APRN-BC, AGNP-BC; CCRN; Craig Nakatsuka, MD; Lillian Umbarger, MD; Ruth Ruta, MSN, RN; Tracy McCarty, RN; Cynthia Machado, RN; Clementina Ceria-Ulep, PhD, RN

A systematic method was developed to create a new program compatible with the authors’ specific intensive care unit (ICU) environment and patient population. A literature review revealed an extensive array of reports and numerous clinical practice guidelines, assessed for information and strategies appropriate for their unit. Recommendations provided by the Center for Advance Palliative Care from its Improving Palliative Care in the ICU project were used to successfully implement a new palliative care initiative in their ICU.
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CASE REPORTS

112 Consideration of Personal Adverse Childhood Experiences during Implementation of Trauma-Informed Care Curriculum in Graduate Health Programs.
Joshua Strait; Tiffany Bolman, MAT

Scientific findings of adverse childhood experiences (ACEs) and their lifelong graded relationship with leading causes of death are well established. Many health care practitioners, however, have yet to implement ACEs screening in clinical practice. Furthermore, ACEs screening and trauma-informed care (TIC) are not part of standard graduate-level training. Among 967 graduate students from 9 health professions programs, who voluntarily completed an ACE questionnaire, there was statistical significance in familiarity with clinical and scientific findings of the ACE Study and familiarity with TIC.

EDITORIAL

122 Mind-Body Training for At-Risk Populations: Preventive Medicine at its Best.
Charles Elder, MD, MPH, FACP

This article is a companion to, and offers editorial commentary in support of, “Transcendental meditation and reduced trauma symptoms in female inmates: A randomized controlled pilot study,” in this Winter 2017 issue, and “Reduced trauma symptoms and perceived stress in male prison inmates through the Transcendental Meditation program: A randomized controlled trial,” in the Fall 2016 issue of The Permanente Journal.

NARRATIVE MEDICINE

124 On The Shoulders of Giants.
Tom Paluch, MD

A mentor is defined in Webster’s Dictionary as a trusted counselor or guide. Irwin was, and ever will be, my dearest and most influential mentor. He is the man who taught me how to operate, what it meant to be a surgeon, and, most importantly, how it felt to be a surgeon; for without the feeling, a surgeon is a mere technician: a manipulator of human flesh. With feeling, a surgeon can find transcendence, a special powerful intimacy with another human being in this most unique of human relations.

CLINICAL MEDICINE

Image Diagnosis: Zinc-Induced Copper Deficiency Causing Pancytopenia Recognized on Bone Marrow Examination.
Joyce Johnsrud, MD; Al-Ola Abdallah, MD; Steven A Schichman, MD, PhD; Zhifu Xiang, MD, PhD

BOOK REVIEW

Childhood Disrupted: How Your Biography Becomes Your Biology, and How You Can Heal.
Review by David D Clarke, MD

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