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A PUBLICATION FOR EMPLOYEES OF STANFORD HOSPITAL & CLINICS ISSUE FOUR / SUMMER 2013

STANFORD

TOP SPORTS DOCS Expanding footprint

GOOD WORKS THE CHEMO SONG



from the CEO



Dear Colleagues,

This issue's cover story explores how Stanford physicians help keep professional and amateur athletes alike off the disabled list and on the field. Members of SHC's Orthopaedic Surgery & Sports Medicine team are the official medical providers for the San Francisco 49ers, the Golden State Warriors, and as of this year, the San Jose Earthquakes. Moreover, our clinicians have long provided outstanding care for Stanford University's student athletes.

You will also learn about our efforts to broaden access to Stanford's leading edge and coordinated care, including our affiliations with leading community physicians, convenient new facilities throughout the region, and the introduction of advanced technologies to deliver Stanford Hospital & Clinics' multidisciplinary services virtually.

I hope you will enjoy reading about how SHC is making it easier and more convenient to access our outstanding care and helping to keep elite athletes in the game, as well as other news from around SHC. Thank you for all that you do for our patients.

AMIR DAN RUBIN PRESIDENT & CEO

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News and Notes from Around SHC...

SHC employees are invited to an Open House on August 22 to preview the new, expanded **Orthopaedic and Sports Medicine Physical Therapy** facility at the Outpatient Center in Redwood City. The event will take place from 4 to 7 pm ... Shout-out to the Stanford Public Interest Network (SPIN) Fellows and SHC's Community **Partnership program** for financially supporting and providing volunteer services at the Ravenswood Family Health Center in East Palo Alto. In 2012, SPIN fellows volunteered 430 hours to maintain a teaching garden, 4,445 hours to support dental care and 3,622 hours in clinic admin support ... SHC had 13 specialties ranked among the nation's best by U.S. News & World Report. The list includes Cancer and Ear, Nose & Throat in the top 10, Cardiology & Heart Surgery, Gastroenterology & GI Surgery, Geriatrics, Gynecology, Nephrology, Neurology & Neurosurgery, Orthopaedics, Psychiatry, Pulmonology, Rheumatology and Urology ... The Second Annual CEO Walk will be held on September 24 at the main hospital and offsite locations ... An improved Healthysteps4U.org website with easy access to important benefits information and enhancements to the Rewarding a Healthy You wellness program are coming soon ... 2014 annual benefits enrollment will take

place in October ... SHC employees can now access a Stanford primary care physician through a new program called eCare, which offers telephone and video visits at the Portola Valley and Express Care Clinics. Employees are encouraged to participate and provide valuable feedback and input about the programs' enhancements and improvements. For more information and eligibility requirements, visit stanfordhospital.org/ecare ... Did you know? SHC's government relations team hosts four Community Fellows Programs each year for elected officials, community leaders and prospective donors. The program gives fellows an opportunity to tour the OR, climb into a Life Flight helicopter, practice surgical skills in the Goodman Simulation Center and hear from Stanford physicians and patients. More than 400 fellows have gone through the program since it began four years ago ... The second annual San Jose Earthquakes 5k/10k Challenge, presented by SHC, will take place on Sunday, August 18, from 8 am to noon at Santa Clara University. The event features a 10k race, a 5k run/walk and a 1k kids fun run and walk. To register and for more information, visit http://www. guakeschallenge.com/

STANFORD HOSPITAL PEOPLE IS PUBLISHED BY SHC OFFICE OF COMMUNICATIONS

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os courtesy of San Francisco 49ers, Stanford University Athletic Department, Getty Images, John Todd/San Jose Earthquakes, Michael Zagarias.

Send comments and story ideas to communications@stanfordmed.org.

ON THE COVER: Stanford's orthopaedic surgeons include (L to R) Marc Safran, Zachary Vaughn, Tim McAdams, Gary Fanton, Bill Maloney and Jason Dragoo.

Providing Care to Elite Athletes

Stanford's Sports Medicine team's client list includes the 49ers, the Warriors, the Giants, Stanford and the Earthquakes

ARY FANTON SAYS THE SIDELINES ARE HIS EMERGENCY ROOM. THAT'S BECAUSE FANTON IS AN ORTHOPAEDIC SURGEON AND CHIEF OF THE DIVISION OF SPORTS MEDICINE AT STANFORD UNIVERSITY. HE HAS BEEN ROAMING THE 49ERS SIDELINES AS TEAM PHYSICIAN SINCE BILL WALSH WAS WINNING SUPER BOWLS IN THE 1980s. FANTON WAS ON THE SIDELINES IN NEW ORLEANS LAST YEAR WHEN THE NINERS PLAYED IN THEIR FIRST SUPER BOWL IN 18 YEARS, AND HE'LL BE THERE WHEN THE 49ERS BEGIN THE 2013 SEASON ON SEPTEMBER 8 VERSUS THE GREEN BAY PACKERS.

Fanton's colleagues spent the last year at the World Series, the Rose Bowl, the NBA playoffs, NCAA basketball, professional tennis events, Major League Soccer and even the WFL—that's the Women's Football League. "We all get our shoes dirty doing something every weekend," Fanton says.

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Stanford's Sports Medicine Team

Fanton leads a Sports Medicine Clinic that Bill Maloney, the department Chair, says has gone from "being nonexistent 10 years ago to the biggest on the West Coast."

Currently, Stanford provides medical care for the 49ers, the Golden State Warriors, the San Jose Earthquakes and Stanford Athletics. Stanford's orthopaedic surgeons are also available to other sports teams and leagues in the Bay Area—and beyond including the San Francisco Giants.

Stanford's sports medicine lineup includes Maloney, Fanton and five other orthopaedic surgeons: Jason Dragoo, Tim McAdams, Marc Safran, Zachary Vaughn and Constance Chu. Two more orthopaedic surgeons will be added by next year.

In addition, three MDs make up Stanford's nonoperative sports specialists: Gordon Matheson, Director of Sports Medicine at Stanford Athletics, Dan Garza, Medical Director of the 49ers, and Leroy Sims, Medical Director of the Warriors.

The clinic has come a long way since Maloney took over as the first full-time Chair in the Department of Orthopaedic Surgery and Sports Medicine in 2004.

"There was no sports medicine," said Maloney. "They used community physicians to provide surgery. To me, that was not commensurate with building a world-class department. We had to bring that in-house."

So Maloney began building his team. The first step was to hire Fanton, who had past experience with the 49ers and was head team physician for the Stanford football team. Next was McAdams, who was also a team physician at Stanford when Maloney hired him to join the Sports Medicine program. Together, Fanton and McAdams took over the orthopaedic care for the 49ers in 2007.

Dragoo, Safran, Chu and Vaughn have followed, and so has Stanford's prominence among local professional and college teams.

"When we talk to a team," Maloney says, "we're not just talking about the great orthopaedic surgeons we have, but also about the nonoperative medical team and the entire Stanford system we have behind us. That's a pretty powerful package."

The Pinnacle of Sports Medicine

Maloney says that orthopaedic surgeons who are interested in sports medicine want to take care of the highest level of athlete. It's about professional satisfaction. Fanton and McAdams agree.

"The most satisfying—and challenging—part of the



job is working with the elite athletes," says McAdams, a team physician for the 49ers and Giants. "The pressure is much greater than working with the weekend warrior because the pro athlete needs to get back to their sport at full strength as soon as possible."

"The most satisfying aspect is seeing a player you fixed come back to his fullest athletic potential."

Fanton says taking care of professional athletes is the pinnacle of a sports medicine career. "If you're a high-level pilot, you want to fly the planes you're most qualified to fly. Same for sports medicine physicians," he says. "The most satisfying aspect is seeing a player you fixed come back to his fullest athletic potential."

But at times it's challenging, Fanton says, to get the athlete back on the field quickly. "I tell people sports medicine is really emergency room medicine with a calendar," he says. "The first question I get when an athlete gets injured is how long will he be out. That question comes from players, coaches, owners and agents. It's our responsibility to know when we need to take a player out if they're injured, but also to know when to get them back when it's safe."

Not a Fan

"It's also the role of the team physician to look neutral during the games," Fanton says. "But, I have yet to meet a physician who doesn't became part of the team, at least emotionally," he adds. "Because they spend so much time with the athletes, travel with them to road games and get to know them personally, the team physicians become part of the family."

"You have to keep your emotions in check and keep a professional demeanor, but you absolutely want your team to win," McAdams says. "During the Super Bowl, for example, when things get pretty exciting, you really have to make sure that you remember why you're there, and that's to look out for the health of your players."

Maloney was on the bench during the Warriors' postseason run last year. "It was fun," he says. "But, I have a different mentality than a fan would have because when one of my players gets hurt, my entire focus changes. The game's no longer the issue. It's what's going on with my player."

LAUREL DAWSON, MD (LEFT), JEAN JACKSON (BELOW, LEFT) AND THE TEAM AT THE ALAMEDA FAMILY PRACTICE (BELOW, RIGHT) ARE THREE EXAMPLES OF HOW SHC IS EXPANDING ACCESS.

SHC's Expanding Healthcare System

Broader access to Stanford care for patients in the Bay Area and beyond

ince last September, Laurel Dawson, MD, has been practicing primary care medicine at DreamWorks in Redwood City. For Dawson, who spent several years as a staff physician at the Vaden Student Health Center on the Stanford University campus, this new setting, with about 350 DreamWorks employees on hand, gives her the chance to develop influential health relationships with her patients, as a doctor would in a small town "where you're integrated into the community," she said.

Dawson represents just one new pathway to an SHC care community that's rapidly expanding to include locations both near and far. Some of that broadened access is enabled by the latest communications and imaging technology; some comes through SHC providers working at offsite locations in Los Gatos, Mountain View, Menlo Park, Salinas and Santa Cruz.

This spring, SHC primary care physicians began to offer care in Portola Valley, adding more opportunities to other offsite locations at the Coordinated Care Clinic and Express Care Clinic at the Hoover Pavilion.

This summer, SHC opened a second onsite health center at Qualcomm in San Diego.

Each setting has a unique patient population. Many of Dawson's patients are young enough that they haven't developed chronic health problems, and Dawson has seized the opportunity to work on the part of medicine she said doesn't change, regardless of location— "establishing a relationship of trust."

Jean Jackson is part of an SHC team helping tens of thousands of people gain access to the care and expertise of Stanford Hospital & Clinics, even though she's never met any of them in person. Jackson is a patient navigator for the hospital's Corporate Partners employees, who might be working in Hong Kong or Saudi Arabia or down the street. The Corporate Partners now include Apple, Cisco, eBay, HP, Intel, Intuit, Nvidia and Oracle. "The whole realm of health information is enormous," said Jackson, "and it helps to have someone who can help you make decisions. Sometimes they'll call me back for follow-up questions, and it's wonderful to find out how things have turned out." So far this year, she and her fellow navigators have fielded almost 600 calls and emails.

In another bridge to care, Stanford's Dermatology Clinic is using telemedicine to make dermatology consultation available to thousands of Cisco Systems Inc. employees and family members in San Jose.

Other new partnerships have embraced outside providers, like the more than two dozen physician groups in the University Healthcare Alliance.

That group now includes thousands of patients being seen at 25 physician offices throughout the Bay Area by more than 700 physicians, nurse practitioners, physician assistants and other employees. It's a system that reflects 20 medical specialties.

Wherever these offices are and whatever kind of medical care is offered, SHC has introduced the C-I-CARE approach to interactions with patients. Janice Craig, office manager at the Alameda Family Practice in Alameda, said the staff there has been very excited about C-I-CARE's impact. "One of our big things has always been



OPENING QUALCOMM—A TEAM EFFORT

"The whole realm of health information is enormous, and it helps to have someone who can help you make decisions that have such a fundamental effect."

customer service. This gave us a tool and it's working great."

The motive in all these additional options is to go beyond the traditional to provide the best patient care possible, no matter where patients live.

Project manager Marta Cieslak and operations director Brenda Dudley were not alone in the two-day turnaround last June of the newly opened Qualcomm Health Center, operated by Stanford Hospital & Clinics, in San Diego. That's a very good thing, because even though they and other team members had made some preliminary visits to the site, "we never imagined we'd be doing it all in one weekend," Cieslak said. "Everyone on the team really pulled their weight. We worked through the night and made it happen." Remarkably enough, Cieslak calls it "a really fun project."

The Qualcomm Health Center is the second employer-based clinic in SHC's Healthcare Partner Program. It offers primary care to the company's estimated 12,000 employees based in San Diego. Qualcomm specializes in the design, manufacture and marketing of digital wireless communication products and services.

What the SHC team did was revamp a

5,400-square-foot space with six exam rooms, a physical therapy gym, a nursing station, a provider's work space and a nurse triage room. Eighteen employees work at the center, directed by two family medicine physicians. Two medical assistants from SHC spent two weeks training the center employees in SHC basics like C-I-CARE, Epic and clinic work flows.

The transition team included almost 40 specialists from ambulatory care, business development, facilities, HIMS, IT, laboratory, organizational training and development, performance excellence and pharmacy. An SHC hospitalist also pitched in to support medical care at the center.

Cieslak said the most important tool she used during this project was not something complicated. "There was a lot of information that changed or that wasn't definite, so we had to be flexible," she said. "And we always had a back-up plan. That was the recurring theme: Always have a Plan B."



THE TEAM THAT LED THE QUALCOMM EFFORT— BACK ROW (L TO R): BRENDA DUDLEY (AMBULATORY CARE), MICHAEL BROWN (PHARMACY). MIA LOVE (PROPERTY SERVICES), CHIRANJEEVI IKKURTHY (EHR SERVICES), THOMAS WILSON (IT), FRONT ROW: FREIDA ACU (AMBULATORY CARE), MARTA CIESLAK (AMBULATORY CARE).

KUDOS



April Service Spotlight Award Alm A DEL R IO

Alma del Rio was honored as a Service Spotlight winner in April when she provided special assistance to a visually handicapped woman who came to Alma's register at the Market Square Cafe. Alma first helped the woman correctly make the change for her purchase. She then closed her register, carried the woman's food, escorted her to a table and retrieved the cutlery she needed. Alma checked in with the woman moments later to make sure she had everything she needed.

May Service Spotlight Award JOSH ApOSTOI

Josh Apostol, a medical assistant with internal medicine, was presented a service spotlight award in May for his commitment to service standards at Stanford Hospital & Clinics. Josh was honored for his efforts in escorting a patient from his clinic to the bus stop and providing outstanding C-I-CARE service. The patient, who did not speak English, was having difficulty determining which bus to take, but Josh remained with her until she got on the correct bus.





June Service Spotlight Award ANTHONY DAI JIT

When Anthony Daljit, of materials management, noticed a patient and his wife struggling with the wheelchair they were using at the Outpatient Center in Redwood City, he stopped what he was doing and went over to ask them, "How may I help you today?" Anthony proceeded to assist the patient in getting situated in the wheelchair and escorted him to his appointment, keeping the patient and his wife engaged in lighthearted conversation the entire way. "At that moment, all my frustrations and anger just disappeared," wrote the patient's wife in a letter to SHC.

And the Winners are...



WE'RE WIRED

Stanford Hospital & Clinics has again been recognized as one of the nation's "most wired" hospitals and health systems

by *Hospitals & Health Networks*, a trade magazine published by the American Hospital Association. Stanford Hospital & Clinics is one of only 13 systems in California and among 289 nationwide to receive the honor. The nation's Most Wired hospitals have demonstrated better outcomes in four key areas infrastructure, business and administrative management, clinical quality and safety, and clinical integration.



CFO OF THE YEAR

Chief Financial Officer Dan Morissette was named "Bay Area CFO of the Year: Transformation Agent" by the San Francisco

Business Times and Larkin Street Youth Services. The award recognizes chief financial officers who have broken through the traditional boundaries of finance while contributing to a significant transaction, transformation or turnaround. In addition, Dan was named to the Becker's Hospital Review list of "125 Hospital and Health System CFOs to Know." The trade publication's editorial team used several resources to develop this list, including nominations, prior Becker's lists and input from industry experts.



NATIONAII Y RANKED

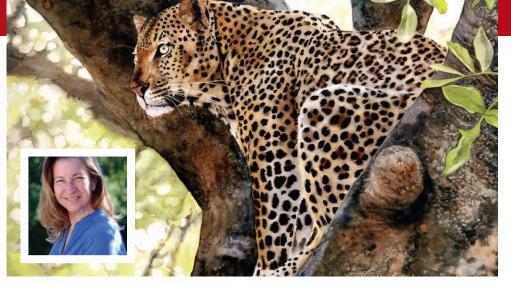
Stanford Hospital & Clinics has been ranked one of the best hospitals for 2013–14 by *U.S. News &*

World Report in 13 out of 16 medical specialties, including a top-10 ranking in cancer and ear, nose & throat. The magazine also ranked Stanford one of the top two hospitals in the state of California and the best in the metro area. "We're pleased to see that the outstanding patient care delivered by our leading physicians helped us once again achieve national recognition in nearly all of the specialties ranked by *U.S. News* this year," said Amir Dan Rubin, President and CEO.

SHC'S GOT TALENT

The Art of Wildlife Conservation

In 1996, oncology nurse Linda Rosen, RN, and her husband traveled to Africa as part of a photo safari—a trip that inspired her to become a wildlife painter. A photographer and art lover, Rosen taught herself to paint and began painting watercolors of the big cats she saw on safari in Africa. She sells her paintings to raise funds for animal conservation efforts worldwide. Over



the past 17 years, Rosen has raised more than \$25,000 for the Wildlife Conservation Network.

"I wanted to share with others the beauty of the wildlife in Africa," she says. "I use my art for both education and fundraising."

A Stanford nurse for 25 years, Rosen switched to two 12-hour shifts several years ago, a move that allows her to lead this other life. Through her work with cancer patients, Rosen learned that life is short. That philosophy inspired the first of her many trips to Africa and fuels her passion for art, wildlife conservation and working with children. In addition to painting, Rosen leads art classes in the community for young kids. Part of her mission is to teach children important virtues such as patience and courage through art.

Her efforts to support wildlife conservation and education include a group of wildlife paintings that are part of the permanent collection at the Tubney House at Oxford University in England and a separate series of paintings that travel to natural history museums around the world.



Making Music That Touches the Soul

In his office in the Department of Clinical Technology and Biomedical Engineering at Stanford Hospital & Clinics, Purna Prasad, PhD, looks perfectly at home in the mostly metal and plastic world of thousands of machines. But Prasad is also a master of Indian music, carrying on his family's generations-long tradition of music, dance and theater whose epic stories date back thousands of years. At age 3, Prasad began instruction on the double-headed drum called a mrudangam, a percussion instrument that is the ancestor of another Indian music staple, the tabla. By the time he was a teenager, he was stepping out onstage in lead roles in a theatrical troupe "Our spiritual body is our real body, and the physical body we use to take care of the spiritual body."

established by his maternal grandfather. He also added composition to his accomplishments, contributing music to the troupe's dance dramas. In 1992, Prasad founded the PAMPA Dance Academy in Sunnyvale, where more than 150 students learn classical Indian dance and music, and performances mark each year's events, including appearances at the San Francisco Ethnic Dance Festival. "The thing about Indian music," Prasad said, "is that it actually touches the soul. Our spiritual body is our real body, and the physical body we use to take care of the spiritual body."

GOOD WORKS

In the Community

A Man and His Dog

Walking the dog takes on a different meaning for Brandon Bond, Administrative Director of the Office of Emergency Management, and his 7 1/2-year-old American Eskimo/German shepherd, Max.

The duo has gone on many walks together, some around the neighborhood, or at the beach, or on a mission with the California Rescue Dog Association (CARDA) or the San Mateo County Sheriff's Office, where the duo volunteers for search and rescue work.

You see, Max is Brandon's K-9 partner. Max is certified in Wilderness Air Scent and cross certified in both Live Find and Cadaver. Brandon has a solid foundation as a dog trainer and





handler in addition to strong wilderness navigation and survival skills. He's also proficient in emergency response and rescue operations.

"It is a life commitment," Brandon says of training Max. "It takes two years of intense training two to three days a week to certify a search and rescue dog. Once you are certified, the training doesn't stop. It has been one of the most difficult and humbling journeys that I have been on in life," he says.

But it comes with great rewards. Brandon and Max have deployed on over 50 searches throughout the state. Their most memorable came in 2011 when they were on a search for a missing 5-year-old girl in Huddart Park.

"After several hours of search operations I saw a change in Max's body language that indicated he was picking up scent," explains Brandon. "Following up on his behavior, we were led right to the girl, who despite being frightened and cold was in good spirits and happy to be going home."

Stanford Nurses Share Love of Horses and Healing with Disabled Riders

For two to three hours each week, Cecile Janissen (pictured above left) and Robin Cleary (pictured above right), both nurses on North ICU, drive up the Peninsula to the National Center for Equine Facilitated Therapy (NCEFT)—an idyllic horse property in Woodside—to help children and adults with disabilities to experience the mobility, exhilaration and power that come from riding a horse or leading a horse-drawn carriage.

Janissen, who began riding at an early age in her native New Zealand, was drawn to the work because of her love of horses and the opportunity to work with patients facing different challenges than the ones she sees at Stanford. Janissen started as a side walker three years ago but has been teaching patients to drive a horse and carriage for the past year. "Helping a patient experience some independence of movement and the feeling of riding up high on a horse gives me ample reward for the small part I play," she says.

For Cleary, the motivation to volunteer was inspired by her own experience with a disabled son and the desire to try something new. "I work alongside cheerful, intelligent people who make the world a better place for a few children and adults," says Cleary, who as a side walker helps stabilize the rider. When her son David was paralyzed in a motorcycle accident in 2005 at the age of 19, Cleary didn't know about NCEFT. But she says he would have loved it. "David is gone now, but I see a little of him in each of the children I assist."

At SHC

Simple But Effective

Sometimes it's the simple projects that have the biggest impact.

For Josh Bernaldez, a Patient Access Representative, the daily work board he created in the Emergency Department has made a difference. It's a visual display that documents the daily work assignments in the ED for his team, and it ensures that all areas have a designated PAR to complete registration at bedside.

"Everyone wants to know real-time information, and the board acts as a real-time tool for daily assignments," says Jenny Salinas, registration manager in the emergency department. "Now, our team simply reviews the board



when they arrive before heading to their assigned location."

Bernaldez's board is divided into eight sections, each one listing the PAR on duty. It also includes a section for notes and helps coordinate lunch and break coverage. Want to know which PAR is working in the Alpha, Bravo or Delta pods in the ED? Go to the board. Need information on timecards or huddle times? Ditto.

"The board lets us know who is stationed where and who will be coming in later," Bernaldez says. "That helps us set up the transitions and handoffs. It basically lets the incoming PAR know who he/she will be replacing." But Bernaldez is not quite finished creating the board. "It is still evolving," he says. "On my time off, I'll sit and watch a baseball game on TV and just toy with it more because I feel like it can only be better."

Turning Around Turnaround Time

When the leadership in the Clinical Laboratory decided to review and improve their pre-analytical processes, they turned to Stanford Operating System (SOS) principles. Several Kaizen workshops coupled with the commitment of the entire team have resulted in astonishing success. Their TAT, or turnaround time, for specimens to be test ready has been reduced from 70 minutes in October 2012 to an average of 15 minutes by June 2013.

"This is awesome performance by the team," said Shirley Weber, Administrative Director, Anatomic Pathology and Clinical Laboratories. "We knew we had a significant problem to solve. If things are delayed in the pre-analytical lab, it causes the analytical testing to be delayed, including patient care and clinical decisions."

So Weber and her team collaborated with Performance Excellence to set out to review their pre-analytical processes and find solutions for improvement. Enter Stanford Operating System workshops and active daily management: A3s, value stream maps, daily huddles and PDCA (plan, do, check, act), and visibility boards.

"It's a totally different feel in the department than it used to be," Weber says."The team is really taking pride in their work. They understand the difference they are making."

Their work revealed the need to align staff with test demand by hour, reconfigure workstations and understand how overall staffing needs impact TAT. They also engaged with leadership, allowed everyone on staff to participate in reviewing TAT results daily and began coaching through collective problem solving and PDCA to achieve such improvements.

"We huddle and discuss our performance every day," Weber says. "When we don't meet our targets, we huddle around our data boards and ask, 'Why didn't we make it?' Then, we problem-solve together to make continuous improvement part of the fabric of our daily operations. Tremendous teamwork and dedication is what allows us to provide exceptional patient value."





Hey Now, Hey Now, the Chemo's Done!

ven before he began radiation and chemotherapy, Stanford Hospital & Clinics patient Kenneth Olson had endured a difficult surgery to remove a tumor that had grown from his right nostril up into the lining of his brain, requiring two skin grafts, followed by radiation. "The doctor said early on it was not going to be a

picnic—and it wasn't," said Olson. He was diagnosed on a Tuesday, operated on by Friday and introduced quickly to the remainder of his treatment. He received an ad hoc diploma from the radiation group when that portion was completed. Then, he started chemo. "Your life is put on hold," he said. So when several of the Cancer Center's Infusion Treatment Area (ITA) employees lined up, à la Radio City Music Hall Rockettes, and began to sing to him and sway in time to the tune of the 1963 hit "My Boyfriend's Back," Olson was more than ready for what followed. • "The chemo's done and you won't be coming back!" the ITA folks

sang. "Hey now, hey now, the chemo's done!" Olson smiled broadly. Second verse? "We'll have to find another to poke with all our needles. Hey now, hey now, the chemo's done!" And then, finally, "Hey, no drugs will make you icky! Hey, you won't be feeling icky! Hey now, the chemo's done!" Olson said he felt like he'd just joined the rest of the year's graduates in an important moment. • The song is a new adjunct to the ITA's routine. "It started with one patient, whose chemo had been difficult for her," said Chris Tucker, RN. "She said, 'I want you all to sing for me.' We didn't know what we were going to do, so we just sang, 'The chemo done, the chemo done!' We did that for a few other patients." A few months later, a patient's son, who happened to be a singer/songwriter, offered to write them some words for a song whose melody they all knew. "He wrote lyrics. We didn't tell his mom, and we came in and sang. That version had a few more verses to it and it was very specific to her, so over time we shortened it down, and that's become our generic chemo song," Tucker said. • It's a way for the staff to rally around a patient, she said, and often other patients will clap, too. "We love the work we do," Tucker said. "We wouldn't be oncology nurses if we didn't love this kind of work. To be able to stand alongside someone when they're going through what they perceive as the most difficult phase of their lives, to do something uplifting and fun, is something positive for them we can do—and it's a good team bonding thing for us, too. As soon as someone hears we're doing the chemo song, everybody drops what they're doing. We sing to any patient we think might enjoy it."