Giving Voice

UCSF’s Voice and Swallowing Center provides advanced care to singers, lawyers, teachers and others.
A key factor in being among the nation’s best hospitals is providing the safest and highest-quality care, every day to every patient. We’ve approached this commitment by addressing all aspects of the care experience—effective communication, adherence to processes, proper hand hygiene and safe systems for ordering and giving medications, to name a few.

This past June, we took a major step forward in quality and safety by implementing one of the most comprehensive electronic health records systems in the country. Under the new system, health providers across the institution can access current medical records, electronically prescribe medications and track patients’ continuity of care. Through the patient portal, called MyChart, patients can manage and engage in their care as well, joining their health care team as active partners.

Finally, our commitment to improving quality and safety includes our pledge to publicly share our performance data and provide clear explanations of what these measures mean. In addition to measuring our performance against our own rigorous standards and industry benchmarks, “Our goal is to become the safest hospital in the world,” says Dr. Josh Adler, chief medical officer at UCSF Medical Center.

Our progress in maintaining the highest standards of care is reflected in our accreditations, rankings and activities, which include the following:

- Ranked as one of the nation’s top hospitals in the annual ranking by U.S. News & World Report
- Maintained full accreditation from The Joint Commission, a nonprofit agency that evaluates and accredits health care facilities nationwide
- Received 2012 HealthGrade awards for outstanding patient experience and excellence in patient safety

Today, you have many choices for where you receive health care. We believe it is critical for us to provide data on our performance so you and your family can make informed decisions about where you seek care. To that end, performance data on topics we believe are important to you are posted on our website. These data, and a range of other resources, can be found at www.ucsfhealth.org/quality.

If you have any questions regarding our performance or would like more information, contact Quality Improvement at (415) 353-1989 (UCSF Medical Center) or (415) 353-4103 (UCSF Benioff Children’s Hospital).
WHEN THE PROBLEM IS YOUR NERVES
UCSF specialists track down the cause of nervous system disorders and relieve debilitating pain

Your peripheral nervous system is an intricate web of nerves that act like live telephone wires, pulsing important signals throughout your body. If the wires get damaged, symptoms can range from tingling and weakness to debilitating pain. If surgery is needed, the procedure can be challenging—some peripheral nerves are very small and require microscopic techniques.

At UCSF Medical Center, patients get focused care at the Center for Management and Surgery of Peripheral Nerve Disorders. With experts in neurology, neuropathology, neurogenetics, electrophysiology and rehabilitation—bolstered by UCSF’s own pioneering research—the team can treat everything from carpal tunnel syndrome to peripheral nerve tumors and traumatic nerve injuries.

One of the most common genetic disorders is neurofibromatosis, which can cause one or many peripheral nerve tumors anywhere in the body. “Some tumors grow, many plateau in size, a few get smaller, and a few turn malignant,” explains Dr. Michel Kliot, director of the center. “We’re starting some molecular studies at UCSF. We’d like to discover the molecular brakes that stop many peripheral nerve tumors from growing, and then use those brakes to shut down that growth.”

Thanks to advanced imaging, nerve tumors are sometimes spotted before they cause trouble. In such cases, UCSF specialists follow them closely with serial imaging studies and clinical exams. Tumors that grow or cause symptoms—numbness, weakness, pain or a pins-and-needles sensation, for example—usually require surgery.

UCSF is one of the few places in the world that uses new MRI “tensor diffusion” protocols that allow doctors to see the nerves’ relationship to the tumor, which helps determine how easy it is to remove without causing damage. “UCSF also has an intraoperative electrophysiological team led by Roger Noss, PhD, who helps us preserve function while operating on nerves,” Dr. Kliot says. “And in the rare instances where we encounter malignant nerve tumors, the other big advantage at UCSF is that we have an exceptional orthopaedic sarcoma and oncology team.” To coordinate patient care, he adds, UCSF is setting up a Neurofibroma Clinic to supplement care given in the NF/Ras Pathway Clinic.

While patients are happy to return home after surgery, UCSF stays in touch with periodic follow-ups, maintaining a long-term relationship for the patient’s benefit.

To find out more information about the Center for Management and Surgery of Peripheral Nerve Disorders, please call (415) 353-7500 or visit www.ucsfhealth.org/clinics/neurosurgery.
Q&A FOR CANCER PATIENTS
Go online and get answers from someone who’s walked in your shoes

When cancer patients first learn of their diagnosis, they often face an emotional roller coaster, feeling overwhelmed with the prospect of tests, treatments and recovery. To help them cope with the fear and confusion they sometimes feel, breast and prostate cancer patients can turn to a new online service to connect with others who have been in their shoes.

Online Peer Support, a service of UCSF’s Ida & Joseph Friend Cancer Resource Center, is available at www.ucsfhealth.org/online_peer_support. The pilot program currently focuses on only breast and prostate cancer, two of the most commonly diagnosed cancers. Patients go online to submit their questions, which are answered by volunteers who are cancer survivors trained to discuss their experiences going through diagnosis, treatment and recovery. Volunteers share coping skills as well as information on how to navigate the health system, and are careful not to offer medical advice.

Questions and answers are posted on the website. The service is free and available to all breast and prostate cancer patients, whether or not they get their care at UCSF. No registration is required. Only first names or aliases are used.

Those who would like an extended conversation with a volunteer can participate in the Peer Support Program’s phone service, which was one of the first of its kind in the nation when founded 12 years ago.

Stan, a volunteer who also runs a prostate cancer support group, explains that the online service can be an important first step for patients. “Not everyone wants to talk on the phone. It’s a sensitive subject. They’re in a very fragile place,” he says. “A lot of men would rather submit their questions online and carry on a dialogue that way. I’m willing to help them in any way I can.”

Another volunteer, Miri, who assists breast cancer patients, says, “When I was diagnosed at age 30, I didn’t know anyone with breast cancer. I had so many questions. ... I had no idea what was ahead of me. It really helped me to talk to someone.” The online service enables people to submit questions any time. Sometimes, it’s hard to schedule a phone call or meeting in all the chaos, she adds.

Idonah Molina, coordinator of the Peer Support Program, says the support and practical information volunteers provide can help reduce the anxiety and isolation patients sometimes feel. For more information, please contact Molina at peersupportmanager@ucsfmedctr.org. The Cancer Resource Center is located at the UCSF Helen Diller Family Comprehensive Cancer Center, 1600 Divisadero Street, San Francisco.

More information about the phone service is at www.ucsfhealth.org/peersupportcancer. To read more about the Cancer Resource Center, visit www.ucsfhealth.org/crc.

FREE EXERCISE PLANS FOR CANCER PATIENTS
The Exercise Counseling Program offers cancer patients at the UCSF Helen Diller Family Comprehensive Cancer Center a free, one-to-one, one-hour consultation. Patients leave the session with a customized exercise plan, which can include exercise demos and referrals.

According to clinical evidence, regular exercise can speed recovery for cancer survivors, promote treatment effectiveness, lessen side effects and significantly deter recurrence. “We work with UCSF patients of all ages, at all fitness levels, in treatment and after,” says exercise physiologist Regan Fedric. For more information, visit cancer.ucsf.edu/crc/exercise-counseling. To schedule an exercise consultation (appointments required), call (415) 514-6430.
The Future in Plastic Surgery is Here

UCSF’s leading-edge procedures restore the quality of patients’ lives

Replacing a missing thumb with a toe. Transplanting muscles to arms and legs to renew their mobility. Reviving the ability to smile for a patient with facial paralysis. These are just a few of the miracles of modern plastic and reconstructive surgery at UCSF Medical Center, one of the pioneering U.S. programs in the field.

“Our goal is to restore normal anatomy and function,” says Dr. William Hoffman, chief of Plastic and Reconstructive Surgery at UCSF.

Reconstructive plastic surgery is performed for burns, cancers, skin problems, traumatic injuries and birth defects, including cleft palates. Microsurgery—surgical procedures that require an operating microscope—is used for a variety of cases, including amputation, peripheral nerve injuries and soft tissue loss. For breast cancer patients who undergo mastectomy (breast removal), for example, breast reconstruction can take place at the same time, saving the nipple, in the latest techniques, and using transplanted tissue from the lower abdomen. “In microvascular tissue transfer, we hook up blood vessels that are a little bigger than the lead of a pencil—sewing them together with tiny needles and thread under a microscope and restoring blood flow so the tissue survives,” says Dr. Hoffman.

In addition to the full range of cosmetic surgery options available, face transplantation is among the leading-edge techniques on the horizon at UCSF; ongoing research includes investigation of the use of stem cells to produce tissue. They’re all efforts, says Dr. Hoffman, that aim to make “a tremendous difference in patients’ quality of life.”

For more information about UCSF Plastic and Reconstructive Surgery, visit www.ucsfhealth.org/plasticsurgery or call (415) 353-4201.
Your ability to speak, sing or swallow can be easily taken for granted until a problem arises and you have difficulty being heard, clearing your throat, eating, even taking a breath. To learn how UCSF’s Voice and Swallowing Center can help, read the following Q&A with Dr. Mark Courey, the center’s medical director.

Who’s at risk for voice and related disorders?
Those who use their voice heavily in their careers or in their personal lives are at risk. At our center, we see a wide variety of patients—newscasters, singers, lawyers, broadcasters and baseball announcers, plus many teachers. The elderly are more prone to age-related voice changes and swallowing disorders. Side effects of treatments, such as radiation therapy for cancer, and certain neurological conditions can also cause voice or swallowing problems.

Singers, teachers, seniors and cancer survivors are among those treated at UCSF’s Voice and Swallowing Center.
How do voice and swallowing problems affect people?
When someone has a voice problem, they can feel embarrassed about the quality of their voice and often feel isolated. They don’t want to be around people because it’s too much effort to communicate. Beyond the emotional impact, there can be serious health concerns as well. Voice problems, for example, can be a sign of voice box cancer. Coughing while eating and getting food stuck in the throat—signs of possible swallowing problems—can lead to malnutrition. When something goes into the lung, it can even end up in pneumonia.

What are some of the common conditions treated at UCSF Medical Center?
The most common conditions we treat are voice changes or hoarseness, called dysphonia, and there are a variety of causes. If abnormal muscle tension is the culprit, patients work with a speech pathologist to see if the condition of their voice and sound production can be improved. If that isn’t effective, we can try medications or we can try surgery. For those who have a weaker voice, we teach them to use it more efficiently. If that’s not sufficient, we consider making the vocal cords thicker or function more efficiently by using an injection or other substance to strengthen them.

What are the benefits of being treated at UCSF?
Our team includes otolaryngologists [specialists in ear, nose and throat and head and neck disorders], speech pathologists and vocal trainers. We also work with neurologists and pulmonary physicians with interest in breathing disorders of the upper airways. In addition, our patients have access to clinical trials of new treatments.

When should you see a doctor about voice or swallowing problems?
Here are some common signs to look for: If you’re coughing or choking more than a couple of times a week; if you have voice changes or hoarseness that lasts more than two or three weeks; or if you’re taking longer than usual to eat a meal because you have to swallow slowly, you should see an ear, nose and throat specialist.

Visit www.ucsfhealth.org/voiceandswallowing or call (415) 885-7700 for more information about UCSF’s Voice and Swallowing Center or to make an appointment.