Overview of the Pediatric Endocrinology Clinic at Alaska Native Medical Center

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Alaska Native Tribal Health Consortium
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Pediatric Endocrinology Services

Our Team Includes:
• Rachel Lescher, MD. Pediatric Endocrinologist
• Sherry Hammock, RN, CDE. Nurse, Case Manager, Diabetes Educator
• Agnes Hunt. Senior Office specialist

We provide an array of services including:
• Management of pediatric patients from birth to young adulthood with hormone problems
• Type 1 and type 2 diabetes, congenital adrenal hyperplasia and other adrenal diseases, septooptic dysplasia and hypopituitarism, thyroid disease and thyroid nodules, growth problems, calcium and bone disorders, obesity and metabolic syndrome, early and delayed puberty, hormone disorders associated with genetic syndromes like Turner syndrome

We deliver patient care via:
• In-person visits at ANMC
• In-person visits at Field Clinics
• Videoteleconferencing (VtC)
• Electronic consultations (AFHCAN)
In Person Visits at ANMC

• We see patients for new referrals and follow-up visits at ANMC
• It varies depending on the reason for the visit, but for optimal patient visits, please include the following information with the new patient referral:
  • Visit note with the primary care provider for the purpose of the referral with a history, medication list physical exam, assessment, and plan
  • Height, weight, body mass index and growth charts completed and included with every referral
  • Labs and x-rays may or may not be needed, but any studies that have been performed should be sent with the referral
  • Please include any information from previous providers that the patient has seen for the condition in question
  • Current contact information for the patient
Field Clinic

• Since we are generally more pressed for time with field clinic, it is usually better to see patients for follow-up in field clinic and see new referrals in person in our clinic at ANMC.
  • This way, we have more time to get to know the patient and to collect an adequate history and develop an appropriate diagnosis and treatment plan.
  • We understand that this may not always be possible, so if you would like us to see a new patient in field clinic, please send a referral through AFHCAN as you normally would and indicate this on the referral.
  • We will review the referral and determine if this new patient visit will be appropriate to wait for the next field clinic or if we should see them at ANMC.
• Prior to the field clinic visits, we will notify the clinic of any labs/imaging studies that are needed prior to the visit
  • Patients should be reminded to bring their medications, blood sugar meter and blood sugar logs if they have diabetes
VtC Visits

• VtC visits are best for follow-up visits in between in-person appointments
• Occasionally, urgent or emergent VtC visits for new patients can be done by video when the patient is not immediately able to fly to ANMC (as a bridge until we are able to see them in person)
  • Examples: disorders of sexual development in a newborn, hyperthyroidism
• Most pediatric endocrinology disorders can be managed with VtC visits interspersed with in-person visits either at ANMC or in Field clinic
• Certain types of patient conditions are generally not appropriate for VtC: thyroid nodules and puberty problems, for example, where the physical examination is crucial to the management decisions
• Prior to the visit, please inform the patient and family that the visit is scheduled, have the equipment ready, obtain vital signs (HR, BP) and height and weight
  • We will include in the VtC appt communication what information is needed
  • Labs and x-rays may be needed depending on the reason for the visit
  • Blood sugar logs should be copied and sent to us if the patient has diabetes
  • Patients should bring their medications with them to the visit
  • A provider/nurse should be scheduled to be with the patient during the visit
Electronic Consultations using AFHCAN

- Our AFHCAN group is “ANMC – Peds Endocrinology”
- We are happy to receive referrals for patients to be seen using the AFHCAN referral form
- Additionally, if a provider has a question for us about a patient that we follow or about a new patient, sending that question via AFHCAN is great for patient care, confidentiality, and provides more information than can be transmitted in a phone call or by email
- The visit notes pertaining to the question, vital signs, height, weight, growth charts, medication lists, and any labs or imaging studies that have been performed should be scanned in and included with the electronic consultation in AFHCAN, whenever possible
- If you are on ANMC Cerner or YKHC RAVEN, you can also send an electronic consultation via “message center” to Kerford-Lescher, Rachel. I generally check ANMC Cerner multiple times a day and YKHC RAVEN once a day.
Questions?
Resources/Links

AFHCAN
VTC
Cerner