A form of physical therapy developed by UAB (University of Alabama at Birmingham) researchers for rehabilitation of stroke patients can also help children with certain kinds of cerebral palsy (CP), according to a new study published in the February issue of *Pediatrics*. The study authors found that children with CP-induced hemiparesis demonstrated significant improvement in motor function after constraint-induced movement therapy (CI therapy).

“Some children with CP have a substantially greater motor defect in one extremity than the other — a condition known as hemiparesis, also common in adults following stroke or traumatic brain injury,” says Edward Taub, PhD, professor of psychology at UAB and the founder of CI therapy. “Since we have shown CI therapy to be very effective in helping adults regain motor function following stroke, it was natural to examine whether similar results could be attained in children with hemiparesis.”

CI therapy involves restraining the stronger, less-affected extremity and training the patient to use the weaker, more-affected arm or leg for many hours a day over a period of consecutive weeks. The benefits of CI therapy for stroke patients are well documented and use of the therapy is increasing worldwide.

The research team, based at the UAB Sparks Center for Developmental and Learning Disorders, included Karen Echols, PhD, Stephanie DeLuca, PhD and Sharon Ramey, PhD. They studied 18 children under the age of eight with hemiparesis due to CP. A control group of nine children received conventional treatment. The other nine received a modified form of CI therapy known as pediatric CI therapy for 6 hours a day for 21 days.

Their stronger arm was restrained with a lightweight fiberglass cast and therapists led the children in play activities with a variety of physical tasks such as reaching, grasping, bearing weight on their arm, and making hand gestures.

The team found that pediatric CI therapy in children with cerebral palsy-induced hemiparesis produced major and sustained improvement in motor function in the weaker limb.

“Pediatric CI therapy produced a large improvement in the use of the more-affected extremity, at least as great as that obtained with adults,” Taub says. Many of the children exhibited new motor behaviors and patterns of functional behavior that had not been observed before the therapy period, such as children who began crawling following treatment and two children who began to sit up independently.

“The improvements were sustained through follow-up testing six months following therapy,” said DeLuca, one of the study co-authors. “Therapists and parents reported supplemental evidence of beneficial quality of life changes for many children. One boy who had not previously used his more-affected arm began to play baseball and go fishing with his father.”

As is also the case with adult CI therapy, Taub says the current findings indicate that more intensive delivery of pediatric rehabilitation services than is conventionally given can produce large, sustainable gains.
University Hospital’s state-of-the-art Emergency Department (ED) will occupy a 38,000 square-foot ground-level space at its new location in the North Pavilion. The area will house 45 treatment rooms divided into five patient care areas. Some treatment rooms are designed to meet the unique needs of specific patient populations, such as gynecologic, psychiatric, and orthopedic/casting patients, as well as family counseling rooms for ED staff to discuss the condition of loved ones. There are also special facilities for bioterrorism decontamination.

An on-site radiology unit featuring two high-speed CT scanners, a stat lab, an eight-room Urgent Care Center, and three large trauma-procedure rooms are part of the emergency area. Separate ambulance and ambulatory entrances, admission and discharge areas, and direct ED access via oversized elevators from the rooftop helipad will facilitate triage and patient flow.

In addition, the unit encompasses three separate waiting areas containing approximately 117 guest seats to accommodate patients and families. Security and safety management includes cameras, limited access to patient care areas, security officers, and a security substation.

“Meeting the emergency care requirements of hospital patients is our top priority. We must balance the approach taken in providing appropriate subdisciplinary space against that priority,” says UAB Chairman of Emergency Medicine and Director of UAB’s Center for Disaster Preparedness Thomas Terndrup, MD.

University Hospital’s ED, one of the state’s busiest, currently treats 45,000 patients a year with an anticipated volume increase as the state’s population ages. The hospital has Alabama’s only adult Level 1 trauma center.

The UAB Health System has entered an agreement to manage three hospitals that operate under Baptist Health of Montgomery, a system that has experienced financial problems in recent years.

According to an announcement released in March, UAB will assume management of Baptist Medical Center South of Montgomery with 454 licensed beds, Baptist Medical Center East of Montgomery with 150 beds and Prattville Baptist Hospital with 85 beds.

No timetable for the management shift was available, and no immediate staff changes were expected, authorities said.

In addition, the management agreement must be approved within 30 days by the boards of the UAB Health System and Baptist Health of Montgomery, according to the announcement.

Performance:

David Fine, chief executive of the UAB Health System, said in a prepared release that officials with the Baptist Health System approached the UAB system about providing help to improve the financial performance of the Baptist system and its three hospitals.

“As a $1.7 billion net-patient-revenue integrated delivery system, UAB enjoys economic opportunities not currently available to Baptist Health,” Fine said. “We are committed to help Baptist Health enhance efficiencies and revenues so that it remains a vital part of the Montgomery area community.”

Last year, there was discussion about the possibility of the Baptist Health of Montgomery system merging with the Baptist Health System in Birmingham, but the deal never materialized.

John Henig Jr., board chairman of Baptist Health of Montgomery, said Montgomery attorney Joe Espy and developer Jim Wilson III were instrumental in working out the management agreement with UAB.

About 20 UAB internal medicine residents a year use Baptist Medical Center South as a training site, and Fine said that about 40 percent of the doctors in the Montgomery Baptist hospitals were graduates of the School of Medicine at UAB.
The Transfer Center: Enhancing Patient Flow

In a move to coordinate and enhance patient flow for hospital transfers and improve physician satisfaction, University Hospital’s Utilization Management Department has expanded the Transfer Center, which opened in August, 2001. “Our primary goal is to assist physicians with facilitating hospital transfers,” says hospital Associate Executive Director Robert Cofield, DrPH, who has administrative oversight of the center. “Referrals are a complex process, and there are many issues to manage.” Last year the Transfer Center coordinated approximately 665 local and regional transfers and has expanded its services to include cardiology, general medicine, hematology, oncology, and GI surgery.

Specific objectives for the Transfer Center include:
- Enhancing patient flow through successful coordination of patient transfers to UAB;
- Ensuring maximum reimbursement for services through timely implementation of the Utilization Review Process; and
- Providing a central repository of pertinent information to manage the transfer of patients from outside hospitals.

Current services using the Transfer Center include trauma/burns (41% of fiscal year 2003’s transfer cases), orthopedics (11%), pulmonary (16%), cardiology (15%), general medicine (5%), hematology/oncology (1%), and GI surgery (1%).

Optimizing Patient Throughput: Addressing Capacity, Volume, and Diversions

The Transfer Center works by optimizing communications and intradepartmental collaboration, resulting in fewer patient “bottlenecks” and a better patient flow. “The current data show 87% of the transfer requests are accepted and are considered emergent, based on telephone communication between physicians,” Cofield continues.

“Of the 87% accepted, 3% of these patients are discharged from UAB’s Emergency Department, and 48% of requests occur after normal business hours,” says Denise Pruitt, director of care management and the Transfer Center. She notes that plans are in progress to expand the service to GI medicine and the neurosciences in the near future.

In terms of payer source, 34% of the patients are covered by Medicare; 18%, Blue Cross; 17%, self-pay; 12%, commercial insurance, and 5%, Medicaid. “We’re now working on redesigning the existing database to capture targeted demographics, such as payer sources by facility and county. This information will provide the opportunity to communicate with our physicians about referral trends and identify opportunities for process improvement,” Cofield concludes.

How the Referral Process works:
- The referring physician contacts a UAB MIST operator at 1-800-UAB-MIST;
- MIST contacts the appropriate UAB attending physician and initiates a conference call between the referring physician, the UAB attending physician, and the Transfer Center RN;
- The UAB attending physician determines if the patient requires emergency UAB specialized services or services in a nonurgent capacity;
- The Transfer Center RN provides information regarding capacity (bed alert or diversion status); and
- The Transfer Center RN coordinates transfer arrangements, including contacting Patient Accommodations, collecting pertinent information for admission/maximum reimbursement, arranging for Critical Care Transport (if requested by the UAB attending), and ensuring timely communication for both the attending physician and the referring facility, until the transfer process is completed.

UAB School of Medicine Ranked Among America’s Best

The School of Medicine at UAB (University of Alabama at Birmingham) is among the nation’s best according to the 2004-2005 U.S. News & World Report ranking of medical schools. UAB is ranked 25th in the research category, three spots higher than the previous ranking in 2002. In the primary care category UAB was named the 30th best school in the country, the same rank held in 2002.

Three medical specialties at UAB are also ranked in the top 20 nationally by the magazine: AIDS (5th), women’s health (8th) and internal medicine (19th).

The School of Nursing is ranked in a tie for 19th, up two spots since the last rankings. The School of Engineering’s biomedical engineering program is ranked in a tie for 31st, the first time any engineering program has been included in the rankings.

Three programs in the School of Health Related Professions are ranked; the master’s degree program in health services administration is ranked 10th, the master’s program in physical therapy is tied for 25th and the master’s program in occupational therapy is ranked in a tie for 39th.

In the School of Social and Behavioral Sciences, the master’s program in health policy and management is ranked 17th, and the master’s program in public affairs is ranked 76th. The doctoral program in clinical psychology is ranked in a tie at 62nd, 5 places higher than in 2002.
Spring is in the air. We’d love to give in to the spring fever that appears out of nowhere, but not a chance. This spring has been quite productive. Maybe we can relax and enjoy the hazy days of summer when everyone else goes on vacation.

Thanks to my trusted assistant, Terry Atkinson, MCC has completed the transition to electronic physician updates and a complete patient care physician database. Please contact us if you have need of a complete physician or facility listing or questions about a single physician at (205) 934-5713 or hhorton@uabmc.edu.

The latest Billing Chart and Satellite Clinic Listing are attached to this newsletter. Please note changes in the billing address of some departments. TKC at Acton Road continues to expand the specialty services offered at that locations. Contact Health Finder at 1-800-UAB-8816 for information about any UAB Health System provider or facility. You may also find information and make appointments at the web site address found in this newsletter.

From front page: Grant support for Dr. Taub’s research was provided by the Alabama Health Services Foundation, the Civitan International Research Center, the National Institute of Child Health and Human Development of the National Institutes of Health, the Administration of Developmental Disabilities and the Maternal and Child Health Bureau.

The Kirklin Clinic® Acton Road brings a wide range of UAB specialties south of town, including the Otolaryngology Head & Neck Surgery clinic. Here, five board-certified ear, nose and throat (ENT) physicians offer the world-class care for which UAB is known, in a convenient neighborhood setting right off I-459 at Acton Road. Benjamin McGrew, M.D., Charles Morgan, MD, Michael Sillers, MD, Glenn Peters, MD, and Artemus Cox, MD, see patients at The Kirklin Clinic® at Acton Road as well as at the original Kirklin Clinic located in UAB’s Medical Center District.

You may think of an ENT as a physician who treats only sinus or ear infections, but the Acton Road clinic physicians also offer diagnosis and treatment for hearing loss, thyroid and parathyroid problems, and head and neck cancers. In addition, the clinic offers facial plastic and reconstructive surgery consultations.

When you visit a UAB physician at The Kirklin Clinic at Acton Road, you’ll get the exceptional care and state-of-the-art treatments you expect from UAB, conveniently close to home. For Ear, Nose and Throat Care South of Town, an appointment with a UAB ENT physician at The Kirklin Clinic at Acton Road, call (205) 978-4341, or call UAB HealthFinder at (205) 934-9999 or 1-800-UAB-8816. Or visit our Web site at www.health.uab.edu to learn more about The Kirklin Clinic at Acton Road.
BILLING ADDRESSES
FOR ALL UAB HEALTH SYSTEM LOCATIONS
CONTRACTED BY MCC

University of Alabama Hospital

Home Health
1213 2nd Avenue South
Birmingham, AL  35249
Tax ID # 63-6005396

Hospital Patient Financial Svcs.
619 South 19th St.
Birmingham, AL  35249-6510
Tax ID # 63-6005396

UAB Family Medicine
930 So. 20th Street
Birmingham, AL  35294-2042
***Tax ID # 63-6005396

UABSF - MSO
P.O. Box 5550
Birmingham, AL  35255-5309
Tax ID # 63-0649108

HSF Department of Pediatrics
703 Volker Hall
Birmingham, AL  35294-0011
Tax ID # 63-0649108

Neonatology & Ped. Cardiology
P.O. Box 55823
Birmingham, AL  35255
Tax ID # 63-0649108

UAB School of Dentistry
1919 Seventh Avenue South.
Birmingham, AL  35294-0009
Tax ID # 63-0649108

Alabama Congenital Heart

SATELLITE LOCATIONS

Selma Family Medicine
1023 Medical Center Parkway, Suite 200
Selma, AL  36701
Tax ID # 63-0649108

Callahan Eye Foundation Hospital
1720 University Blvd.
Birmingham, AL  35233
(*By Contract Only)
Tax ID # 63-0459034

DEPARTMENT OF:
Anesthesiology
Dermatology
Hand Therapy
Genetics
Neurology
Nutrition
Medicine
OB/GYN
Osteoporosis
Oral & Maxillofacial Surgery
Orhtotics
Pathology
Prime Care
Psychiatry
Radiation Oncology
Radiology
Rehabilitation Medicine
Surgery
Work Place
UAB Clinics:
Hoover
Hueytown
Inverness Clinic
Moody
TKC Acton Road

REVISED 04/09/04
# PRIMARY CARE PHYSICIAN LIST

## General Medicine Physicians
4th Floor  The Kirklin Clinic  
2000 6th Avenue South, Birmingham, AL 35233

- Emily A. Boohaker, M.D.
- Anna Castiglioni, M.D.
- Stuart J. Cohen, M.D.
- Anna L. Davis, M.D.
- Thomas Huddle, M.D., Ph.D
- Deborah Levine, M.D.
- F. Stanford Massey, M.D.
- Katherine Romp, M.D.
- Alan Stamm, M.D.
- Lisa Willett, M.D.

**Tax ID # 63-0649108**

## Internal Medicine Physicians
2nd Floor Office #1  The Kirklin Clinic  
2000 6th Avenue South, Birmingham, AL 35233

- Mary Balkovetz, M.D.
- Vicki Carlisle, M.D.
- Edward Childs, Jr., M.D.
- Charles Louis Cummings, M.D.
- James Davis, M.D.
- Patricia Garver, M.D.
- Laurie Hall, M.D.
- Frederick Ransom, M.D.
- Mark Stafford, M.D.
- Stephen Stair, M.D.

**Tax ID # 63-0649108**

## Internal Medicine Physicians
2nd Floor Office #2  The Kirklin Clinic  
2000 6th Avenue South, Birmingham, AL 35233

- Emmy Bell, M.D.
- David Gettinger, M.D.
- Alan Gruman, M.D.
- Leta L. Herring, M.D.
- Steven L. Hunt, M.D.
- Laura D Pointer, M.D.

**Tax ID # 63-0649108**

## Geriatric Medicine Physicians
4th Floor  The Kirklin Clinic  
2000 6th Avenue South, Birmingham, Al 35233

- Richard Allman, M.D.
- Andrew Duxbury, M.D.
- Patricia Goode, M.D.
- Richard Sims, M.D.

**Tax ID # 63-0649108**

## Family Medicine Physicians
930 South 20th Street  
Birmingham, AL 35205

- Nidhi Bansal, M.D.
- Morris W. Cochran, M.D.(OB/GYN)
- William B. Deal, M.D.
- T. Michael Harrington, M.D.
- Robert E. Kynerd, M.D.
- Peter S. Lane, M.D.

**Tax ID # 63-0649108**  
**Tax ID # 63-6005396**

*Please note the TAX ID NUMBERS for each group.*  
**Please note the TIN and remit address for Family Medicine*
### SATELLITE CLINIC LOCATIONS
(including Selma)

<table>
<thead>
<tr>
<th>UAB CLINIC HUEYTOWN</th>
<th>UAB CLINIC INVERNESS</th>
<th>UAB CLINIC HOOVER</th>
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<tbody>
<tr>
<td>3029 Allison Bonnett Memorial Drive Hueytown, AL 35023 Telephone # (205) 497-4083</td>
<td>1250 Inverness Corners Shopping Center Inverness, AL 35242 Telephone # (205) 980-0035</td>
<td>2321 Hwy 150-Lake Crest Center Suite 2-250 Hoover, AL 35244 Telephone # (205) 989-7254</td>
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<th>UAB CLINIC MOODY</th>
<th>SELMA FAMILY MEDICINE</th>
<th>THE WORK PLACE</th>
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<tbody>
<tr>
<td>2050 Village Drive Moody, AL 35094 Telephone # (205) 640-1171</td>
<td>1023 Medical Center Parkway, Suite 200 Selma, AL 36701 Telephone # (334) 875-4184</td>
<td>2151 Highland Avenue, Suite 250 Birmingham, AL 35205 Telephone #: (205) 933-5300</td>
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<thead>
<tr>
<th>THE KIRKLIN CLINIC AT ACTON ROAD®</th>
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<tbody>
<tr>
<td>2145 Elmer J. Bissell Road Birmingham, AL 35243 Telephone # (205) 978-0250</td>
<td></td>
</tr>
<tr>
<td>Marty Conry, M.D. (Hematology/Oncology) Jennifer De Los Santos, M.D. (Rad./Oncology) Alan Gertler, M.D. (Cardiology) Leland Eaton, M.D. (Cardiology)</td>
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REVISED 01/12/04